-RESEARCH ARTICLE-

THE EFFECT OF ORGANIZATIONAL JUSTICE ON EMOTIONAL EXHAUSTION: THE CASE OF HEALTH EMPLOYEES

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Abstract

With the pandemic, the workload and work-related problems of healthcare employees have become even more evident. It will try to point out the issues of justice and burnout in the health sector due to the inability of healthcare employees in Türkiye to obtain their material and moral rights and the impact of the physical and psychological violence they encounter. In this context, the research aims to examine organizational justice's effect on emotional exhaustion. The research data required for this purpose was obtained from 141 health officers working in a research hospital in Ankara between November and December 2022 by survey method. Turkish adaptation made by Yıldırım (2007) of the organizational justice perception scale, which consists of 3 dimensions: distributive, interactional and procedural justice and contains 20 items, developed by Niehoff and Moorman (1993), which has been widely used in the literature to evaluate organizational justice, was used. In order to evaluate emotional exhaustion, the Maslach Burnout Inventory, which consists of 3 dimensions and 22 items developed by Maslach and Jackson (1981), was adapted into Turkish by Ergin (1992), and 9 items related to the emotional exhaustion dimension was used. The data were subjected to confirmatory factor analysis using the MPlus 7 package program. As a result of these analyses, with the goodness of fit values of the scales provided, the effect of organizational justice perception on emotional exhaustion was tested with structural equation model analysis. The results revealed that organizational justice affects emotional exhaustion significantly and negatively. Research results reveal the beneficialness of exploring the relationship between organizational justice and burnout in the healthcare sector. In this context, the research is important in understanding the employees in the sector and the subjective well-being of the sector.

Keywords: *Organizational Justice, Burnout, Emotional Exhaustion, Health Employees.*

JEL Codes: *M12, M19.*

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ÖRGÜTSEL ADALETİN DUYGUSAL TÜKENMİŞLİK ÜZERİNDEKİ ETKİSİ: SAĞLIK ÇALIŞANLARI ÖRNEĞİ ³

Öz

Pandemi ile birlikte sağlık çalışanlarının iş yükleri ve işle ilgili sorunları daha da belirgin hâle gelmiştir. Türkiye'deki sağlık çalışanlarının maddi ve manevi haklarını elde edememeleri ve karşılaştıkları fiziksel ve psikolojik şiddet olaylarının da etkisiyle sağlık sektöründeki adalet ve tükenmişlik konularına işaret edilmeye çalışılacaktır. Bu bağlamda araştırmanın amacı örgütsel adalet algısının duygusal tükenmişlik üzerindeki etkisini incelemektir. Bu amaç doğrultusunda gerekli olan araştırma verileri Ankara ilinde bir araştırma hastanesinde görev yapmakta olan 141 sağlık memurundan anket yöntemi ile 2022 Kasım-Aralık tarihleri aralığında veriler elde edilmiştir. Çalışanların örgütsel adalet algısı üzerine değerlendirmede bulunabilmek adına literatürde oldukça fazla bir kullanıma sahip olan Niehoff ve Moorman (1993)'ın geliştirdiği dağıtımsal, etkileşimsel ve işlemsel adalet olmak üzere 3 boyuttan oluşan ve 20 madde içeren örgütsel adalet algısı ölçeğinin Yıldırım (2007) tarafından yapılan Türkçe uyarlaması kullanılmıştır. Çalışanların duygusal tükenmişlik algılarını değerlendirebilmek için Maslach ve Jackson (1981)'ın geliştirdiği 3 boyut ve 22 maddeli ve Maslach Tükenmişlik Envanteri olarak literatürde yer alan ölçekten duygusal tükenme boyutuna ilişkin Türkçe uyarlaması Ergin (1992) tarafından yapılan 9 madde kullanılmıştır. Araştırma sonucunda ulaşılan veri seti MPlus 7 programı ile doğrulayıcı faktör analizine tabi tutulmuştur. Bu analizler sonucunda ölçeklere ait uyum iyiliği değerlerinin sağlanmasıyla birlikte örgütsel adalet algısının duygusal tükenmişlik üzerindeki etkisi yapısal eşitlik modeli analizi ile teste tabi tutulmuştur. Ulaşılan sonuç ile örgütsel adaletin duygusal tükenmişliği anlamlı biçimde ve negatif yönde etkilediği tespit edilmiştir. Araştırma sonuçları ile sağlık sektöründe örgütsel adalet ve tükenmişlik arasındaki ilişki keşfinin yararlılığı tespit edilmiştir. Bu bağlamda, araştırma sektördeki çalışanları anlama ve sektörün öznel iyiliği açılarından önemlidir.

Anahtar Kelimeler: *Örgütsel Adalet, Tükenmişlik, Duygusal Tükenmişlik, Sağlık Çalışanları.*

JEL Kodları: *M12, M19.*

"Bu çalışma Araştırma ve Yayın Etiğine uygun olarak hazırlanmıştır."

1. INTRODUCTION

Organizational justice continues to attract the attention of researchers due to the wide-ranging impact of employees' attitudes, cognitions, behaviors toward organizations and their members. Organizational justice which has been studied with curiosity for plenty of years. In 1963, Adams focused on balance based on

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³ Genişletilmiş Türkçe Özet, makalenin sonunda yer almaktadır.

employees' investments and what they received in return, in the context of Equity Theory, and in 1965, on distributive justice. Leventhal (1976) focused the allocation of resources and rewards in organizations. In the study in 1980, Leventhal examined the same issue in the context of Equity Theory, just like in the study in 1976. Bies and Moag (1986) contributed to interactional justice in sizing organizational justice in the communication criteria. In Greenberg's (1986) research, a study was conducted on the factors of unfair or fair performance evaluations on middle-level managers. Five procedural and two distributive factors of justice were revealed in performance evaluations. Moorman (1991) theoretically based the relationship between justice and organizational citizenship behavior on equality and social change theories. While the study generally found a relationship between procedural justice and citizenship dimensions, it was observed that distributive justice perceptions did not affect them (Moorman, 1991). Brotheridge's (2003) research on government employees supports the crucial role played by distributive and procedural justice in voice's mediating effects on the degree to which employees live stress. Organizational justice is seen as a crucial element of work attitudes and behaviors (Acker, 2011; Colquitt, 2001; Robbins et al., 2012). How employees perceive general equality and justice shapes their decisions about their interactions with the organization. Additionally, when employees see organizational justice, they may consider exhibiting more positive behavior to meet managerial expectations. In this context, organizational justice can be seen as a primary social expectation that motivates employees to exhibit expected behaviors (Treviño and Weaver, 2001). Additionally, organizational justice has appeared as a novel psycho-social independent variable of workplace health (Brotheridge, 2003). On the other hand, employees who perceive organizational unfairness pass through negative emotions and distress (Elovainio et al., 2002).

If burnout as an important signal of well-being in the workplace (Maslach et al., 2001) affected only isolated individuals, its impact would be much less significant and much less devastating than it is. In organizations in the service sector, burnout can spread like an infection from customers to employees, from one employee to another, and from employees to customers (Reed, 1981, p. 25). Bakker et al. (2001) found evidence about the presence of a spreading process of burnout on general practitioners in the hospital. Evidence tells that burnout spreads quickly between individuals in unique personal relations (Westman and Etzion, 1995). Therefore, organizations that strive to ensure the positive psychology of their employees need to address the issue of burnout carefully. Some researchers studying the relationship between organizational justice and burnout have especially given priority to the emotional exhaustion element (Bakker et al., 2000; Robbins et al., 2012). Since emotional exhaustion is seen as basic attribute of burnout and the most explicit reflection of this complicated syndrome (Leiter and Maslach, 1988; Li, 2014; Maslach, 1998; Maslach et al., 2001), emotional exhaustion will be used as the only dimension of burnout in the study. It will try to point out the issues of justice and burnout in the health sector, due to the inability of healthcare employees to obtain their material and moral rights in Türkiye, whose workload and work-related problems have become more evident with the pandemic, and the impact of the

physical and psychological violence they encounter. In this respect, making the voices of healthcare employees in Türkiye heard and revealing the relation between organizational justice and emotional exhaustion in the healthcare sector with the structural equation model will contribute to the literature. In this context, the research aims to reveal relation between organizational justice and emotional exhaustion on healthcare employees. First, organizational justice and burnout and the relations between them will be explained, and then research findings will be included.

1.1. Organizational Justice

Based on theories such as Adams' Equity (1963) and Blau's Social Exchange (1964) paradigms, organizational justice is "employees' perception of fairness towards decisions, policies, and procedures occurring in the workplace" (Moorman, 1991). Organizational justice is "employees' perceptions of how fairly they and other employees are treated by the organization" (Ambrose and Schminke, 2009). In other words, it is "employees' perceptions of what is fair and unfair within the organization" (Colquitt, 2001). As a perception, organizational justice is "the degree to which employees think or feel that they are treated appropriately, fairly and respectfully, and that they are given adequate and accurate information and reasonable resources and rewards" (Cohen-Charash and Spector, 2002). Perception of organizational justice is "the degree to which individuals believe that the results they achieve and the way they are treated within the organization are fair, equitable, and in line with expected moral and ethical standards" (Cropanzano et al., 2007).

Early studies (Adams, 1965; Leventhal, 1976) focused on distributive justice or "the perceived fairness of the outcomes received". Subsequently, researchers have begun to focus on procedural justice, or "the fairness of formal processes" (Leventhal, 1980; Thibaut and Walker, 1975). Apart from Leventhal (1976) and Greenberg's (1986) two-dimensional approaches consisting of distributive and procedural justice, Bies and Moag (1986) gave contributions to justice issues by pointing out the third dimension as an interactional one. According to Bies and Moag (1986), interactional justice means "the interpersonal treatment people perceive in decision-making processes". When an authority's actions are perceived as unfair, the authority has violated interactional justice, or the degree to which an authority and its decision-making process are viewed as fair. In addition, Colquitt (2001) classified organizational justice into four components as distributive, procedural, interpersonal, informational. *Distributive justice* means "results that employees obtain from their contributions to the organization". *Procedural justice* is "outputs resulting from policies and procedures carried out jointly by the organization". *Interpersonal justice* means "employee evaluations of supervisor treatment in terms of courtesy and respect" and *informational justice* is "dialogue channel judgment that takes place between employers and managers during the transmission of information and feedback" (Colquitt, 2001). In addition, Colquitt (2001), like Bies and Moag (1986), divided interactional justice into interpersonal and informational dimensions. According to Greenberg (1993) interpersonal justice means "the aspect of

interpersonal sensitivity, including the demonstration of respect, courtesy, and dignified treatment". Informational justice means "the informational aspect of an interaction, providing accurate, adequate, and timely information regarding positions, decisions, and actions taken" (Greenberg, 1993; Colquitt, 2001). Informational justice is "the level of satisfaction of subordinates with the explanations given to subordinates about events". When the authority makes a statement regarding the task presented, those involved believe that moral responsibility has been done and that they have been behaved with interpersonal justice (Jones and Skarlicki, 2005).

Niehoff and Moorman (1993) discussed the distributive justice dimension with job outcomes such as wage level, work schedule, workload, and job responsibilities. They examined procedural justice concerning formal procedures ("accurate and unbiased information, employee voice, appeals process") and interactional justice ("the degree to which followers' needs are taken into account, adequate explanation for business decisions") (Niehoff and Moorman, 1993). Even though procedural and interactional justice are closely related to each other, a distinction was made from the study of Cropanzano et al. (2002) that procedural justice is more related to senior management and general organizational policies, and interactional justice is more related to the reactions to one's supervisor and job performance. Equality and justice are essential for a healthy functioning organization. It manifests itself when there is no distributional justice, when there is an imbalance between contribution and reward, and when the way rewards are distributed undermines employees' expectations of fair distribution (Colquitt, 2001; Robbins et al., 2012). Robbins et al. (2012)'s meta-analysis study to examine the effects of injustice perceptions on health and to examine justice types and methodological features as moderators, the findings revealed that the perception of injustice is associated with physical and mental health indicators. Decreased distributive justice harms employees' physical and intellectual health (Robbins et al., 2012).

In the study, Moorman (1991) found a significant and positive relationship between interactional justice and organizational citizenship behavior. In the same study, a positive relationship emerged between job satisfaction and interactional justice, significantly (Moorman, 1991). According to Moorman et al. (1998) there is a significant and strong positive relationship between the perception of procedural justice and perceived organizational support. Colquitt et al. (2001) conducted a meta-analytic review of 25 years of organizational justice research. In the study conducted by Aryee et al. (2002) on public employees, interactional justice was positively related to organizational trust, trust to the manager, organizational commitment, job satisfaction and job performance; on the other hand, it was concluded that there was a negative significant relationship with the intention to quit. Cropanzano et al. (2005) examined perceived beneficiaries' perceptions of affirmative action programs on black engineering pupils, using organizational justice as a guiding framework. In particular, the interaction between distributive and interactional justice is only significant when procedural justice is low. DeConinck (2010) concluded that distributive justice plays a crucial role and affects the

formation of employees' perceptions of support and trust. Heffernan and Dundon (2016) examined the relationship between commitment and justice in the research on private sector employees and concluded that all distributive, procedural and interactional justice affected emotional commitment positively and significantly.

1.2. Emotional Exhaustion

The fact that Freudenberger (1974) first introduced the burnout to describe a condition characterized by fatigue, disappointment and leaving work seen between volunteer healthcare workers is an indication that burnout poses a great risk in the healthcare sector. On the other hand, research on burnout in Türkiye started in 1992. The "Maslach Burnout Scale", the validity and reliability of which was conducted by Çam (1992) and Ergin (1992) is used to measure burnout in Türkiye. In Çam (1992)'s study, nurses were asked about the statements in the scale and the findings showed that the validity and reliability of the Maslach Burnout Scale was sufficient. In Ergin's (1992) study to investigate doctors' and nurses' burnout levels, the Maslach Burnout Scale was adapted and the scale was finalized.

As a psychological concept, job burnout is related to "employees' negative experiences about work" (Dishon-Berkovits, 2018). It is characterized by emotional exhaustion, physical exhaustion, and a persistent feeling of mental fatigue (Wright and Cropanzano, 1998). Maslach and Jackson (1981) described elements of burnout as *emotional exhaustion*, which "directly reflects overextended emotions", and *depersonalization*, which "represents the employee's relentless and impersonal reaction to the people under his or her responsibility". Jackson and Maslach (1982) discussed it in three dimensions: "emotional exhaustion, depersonalization (distance experienced from others), and diminished feelings of personal accomplishment". Emotional exhaustion means "the feeling that one's emotional resources are exhausted" (Maslach et al., 2001). Depersonalization means "a negative, sarcastic, or overly distant reaction to other people in the workplace". Decreased personal accomplishment means "a sense of decline in one's competence and productivity and to an individual's low sense of self-efficacy" (Maslach, 1998).

Emotional exhaustion is the burnout's internal dimension. In the emotional exhaustion, employees experience symptoms such as fatigue, energy deficiency, and emotionally exhausted. Having to go to work again the next day is a great source of anxiety for the employee, who is burdened with feelings of tension and frustration (Ergin,1992; Leiter and Maslach,1988; Maslach et al., 2001). *Depersonalization is* an interpersonal dimension of burnout. Depersonalization manifests itself when the individual exhibits emotionless attitudes and behaviors towards the people he/she serves, without taking into account that they are individuals. The individual has moved away from humanity and adopted a cynical, condescending, rigid, insensitive and indifferent attitude (Leiter and Maslach, 1988; Maslach et al. 2001). In *decreased personal accomplishment*, an individual who feels a decrease in personal success feels inadequate, thinks that he/she is not a competent individual and, experiences a decrease in motivation. In this dimension, the individual feels a

general negativity in of employees self-evaluations, thinks that he/she is not making progress in his/her work, or even regressing, and that the effort he/she spends is of no use and does not make a difference in the environment (Leiter and Maslach, 1988; Maslach et al., 2001).

Emotional exhaustion has an important role in the progress of burnout. Therefore, emotional exhaustion is "a precursor to depersonalization and may be a direct cause of a decline in one's feelings of self-efficacy and accomplishment" (Bakker et al., 2000). The emotional exhaustion is "exhaustion of the individual's capacity to maintain the coping resources necessary to meet job demands and fulfill performance expectations" (Maslach and Leiter, 2008). Emotional exhaustion is seen as the main individual stress dimension of the burnout (Maslach et al., 2001). In other words, emotional exhaustion is basic attribute of burnout and the most explicit reflection of this complicated syndrome (Li, 2014). Employees struggling with emotional exhaustion, burnout's first dimension that emerges in the model, exhibit cynicism, also called depersonalization, as "a way to save themselves from overwhelming co-employees or situations". Higher emotional exhaustion goes hand in hand with higher cynicism, which in turn goes hand in hand with lower personal accomplishment (Leiter and Maslach, 1988). On the other hand, in the model of Golembiewski et al. (1986), emotional exhaustion is the last burnout element. For this reason, they argue that, in an effort to combat poor working conditions, employees develop cynicism, which acts alongside a lower perception of self-actualization and causes a feeling of burnout (Golembiewski et al., 1986: 56). Comparing the two previous ones, Lee and Ashforth (1993, 1996) found that emotional exhaustion, the first symptom observed, is distinguishing dimension of burnout. They then developed two independent parallel pathways. First, higher emotional exhaustion relates positively with higher cynicism. Second, emotional exhaustion and perceived success have a negative relation. Therefore, more tired employees see themselves as less successful (Lee and Ashforth, 1993, 1996).

According to Witt et al. (2004)'s study where they examined the relationship between holistic performance and emotional exhaustion within the framework of the responsibility levels of call center employees, responsible employees can not achieve high performance in the relationship where emotional exhaustion acts as a mediating variable. Acker (2011) revealed that emotional exhaustion mediates between role stress and intention to quit among healthcare providers. In the study of Kılıç and Aytemiz Seymen (2011) the burnout levels of the nurse group, which has more contact with patients, and the technician group working in the hospital were compared and the emotional exhaustion and depersonalization levels of nurses were found to be higher. In their study on physicians, Oral and Köse (2011) concluded that superficial behavior increases individuals' emotional exhaustion and depersonalization levels, but in-depth behavior and emotional exhaustion has no relationship. In the research conducted by Kaya and Özhan (2012) on tourist guides, it was observed that there was no significant relationship between the superficial behavior dimension of emotional labor and the burnout dimensions. An inversely significant relationship was found between deep behavior and sincere behavior and

depersonalization, and a positive significantly relationship was found between deep and sincere behavior and the feeling of personal accomplishment.

1.3. The Relationship Between Organizational Justice and Burnout

Equity Theory (Adams, 1963) posits that stress caused by disrupted balance about investment (e.g., time, talent, and effort) and outcome (e.g., status, recognition, and pay) drives people to rebuild this balance. To achieve a more impartial level, employees may decrease their investment in this relation, for instance, through withdrawing psychologically as showing less organizational commitment or depersonalization towards receivers of one's services. Therefore, disruption of this level is anticipated to lead to a negative outcome such as burnout (Colquitt et al., 2001; Cropanzano et al., 2005). Social Exchange Theory (Blau, 1964) supposes that employees will continue participating in the relevant exchange relation when they perceive benefits in their work interactions. However, employees may avoid future interactions if expectations do not materialize and there is little payoff or fair organizational treatment. As a result, employees may act in a wide range of behaviors, from distancing themselves from relations to withdrawal and leaving (Blau, 1964; Flint et al., 2013).

For service industry employees, the main predictors of burnout are workload volume, type of event experienced, age and tenure, gender, work environment and conditions, fairness, gratitude, job satisfaction, and individual stress factors (Acker, 2011). Brotheridge (2003) revealed that distributive and procedural justice perceptions reduce employees' emotional exhaustion. Brotheridge (2003) showed that procedural justice perceptions are especially significant in estimating emotional exhaustion, while distributive justice is at second-degree importance. Moliner et al. (2005) pointed out the dominant role of interactional justice at the work unit level. Lambert et al. (2010) found an inverse relationship between both procedural and distributive justice and burnout in a private security institution. Cole et al. (2010)'s study on military personnel and civil servants revealed that emotional exhaustion mediates the connections between distributive and interpersonal justice and employees' withdrawal responses. According to the results, distributive and interpersonal justice were inversely related to emotional exhaustion. Şeşen (2011) stated that distributive and interactional justice dominate burnout. Apart from former results, Chenevert et al. (2013) revealed that interactional and procedural justice affected burnout indirectly through distributive unfairness for Canadian healthcare employees. In the health sector research, Al-Zahrani (2011) showed a significant inverse relation between distributive, procedural and interactional dimensions of organizational justice and burnout. In their study in the service sector in China et al. (2012) found that organizational justice affected emotional exhaustion negatively and personal success positively. Bakker et al. (2000) showed the relationship between injustice and emotional exhaustion on general practitioners. According to Robbins et al. (2012) there is a relationship between injustice and emotional exhaustion. In reply to inequitable distribution of rewards persistently, employees exhibit burnout embodied by emotional exhaustion (Robbins et al., 2012). The

perception of organizational injustice negatively affects all burnout dimensions (Flint et al., 2013). In the context of relevant literature and relationships, the hypothesis H1: Perception of organizational justice significantly affects emotional exhaustion was established.

2. METHODOLOGY

2.1. Purpose of the Research

The purpose of this study is to examine organizational justice's effect on emotional exhaustion. For this purpose, based on the relevant literature, relational model, from general screening models, used to establish the presence and degree of change between two or more variables, was created and the research hypothesis was developed.
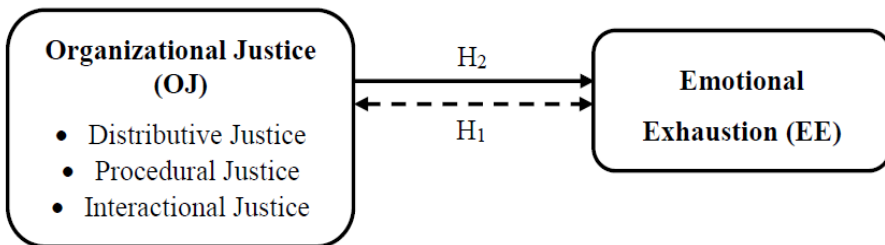

Figure 1. Research Model

"H1: There is a negative significant relationship between organizational justice and emotional exhaustion.

H1a: There is a negative significant relationship between distributed justice and emotional exhaustion.

H1b: There is a negative significant relationship between procedural justice and emotional exhaustion.

H1c: There is a negative significant relationship between interactional justice and emotional exhaustion.

H2: Organizational justice significantly affects emotional exhaustion".

2.2. Sample of the Research

The research was conducted between November and December 2022. The sample of this study was 141 medical officers at a research hospital in Ankara. Doctors and nurses were not included in this sample. Out of 180 questionnaires, 141 were returned, representing a response rate of 78 percent. Of these 141 respondents, 55 percent were women, 45 percent were men and 85 percent were married. The average age of them was 44 and the average tenure was 14 years.

2.3. Study Tools

To evaluate employees' organizational justice perceptions, Niehoff and Moorman (1993)'s organizational justice scale which consists of 20 items under three dimensions: distributive (five items), interactional (nine items) and procedural (six items) were used. Niehoff and Moorman (1993) reported the internal consistency coefficient of the scale to be over 0.90 for all dimensions. Our study used the Turkish adaptation of the organizational justice scale translated by Yıldırım (2007) was used. As a result of adaption process tests, Yıldırım (2007) determined the internal consistency coefficients of the dimensions of the scale to be 0.81 for distributive justice, 0.95 for interactional justice and 0.85 for procedural justice.

To evaluate employees' emotional exhaustion perceptions, 9 related items were used the "emotional exhaustion" dimension, which expresses the feelings of "fatigue, exhaustion and being overloaded as a discharge of emotional energy" from the Maslach Burnout Inventory. This inventory was developed by Maslach and Jackson (1981) and consists of 3 dimensions and 22 items. The internal consistency coefficient for the dimension of emotional exhaustion was reported to be 0.86 by Maslach and Jackson (1981). In our study, the Turkish form adapted by Ergin (1992) and reported as an internal consistency coefficient of 0.83, was used. In all two scales, items were replied with Likert scale from one to five.

3. RESULTS

To analyze the collected data Confirmatory Factor Analysis (CFA) was done to figure out construct validity of scales (organizational justice and emotional exhaustion) with MPlus. For this purpose, firstly, Kaiser-Meier Olkin's measure of sampling adequacy test and Bartlett's sphericity tests were performed to define the suitability of the scales for CFA. According to the tests, the KMO value obtained for the organizational justice scale was 0.94 and for the emotional exhaustion scale was 0.89. Bartlett's sphericity value also reveal that it is appropriate to perform factor analysis on the scales (p=0.000). Thus, confirmatory factor analyses for the scales were practiced.

3.1. Confirmatory Factor Analysis of Organizational Justice Scale

Since it is known that the organizational justice scale used consists of three dimensions: distributive, procedural and interactional justice, the second order CFA analysis was practiced. As a result of CFA, the factor loading of the item coded "x6" under the procedural justice dimension was determined to be lower than 0.3 and was removed from the scale. According to the CFA results, which were performed again taking into account model fit recommendations, it was observed that the factor loadings of the remaining scale items were between 0.675 and 0.907. The fit indices for the organizational justice scale indicated a reasonable fit ("χ^2= 263.608; χ^2/df= 1,910; RMSEA= 0.080; CFI= 0.954; TLI= 0.943; and SRMR= 0.040").
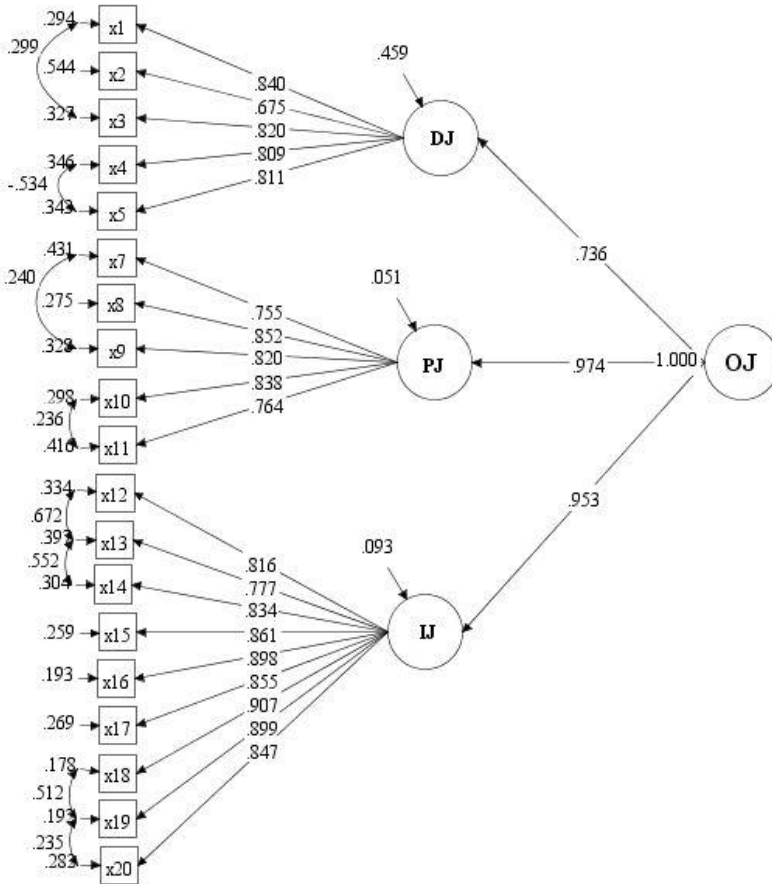
Figure 2. CFA Path Diagram of OJ Scale

Table 1. CFA Fit Indices of OJ Scale, Results of Validity and Reliability

KMO	Barlett	x^2/df	RMSEA	CFI	TLI	SRMR	AVE	CR	α
0,941	p<0,00	1.910	0.080	0.954	0.943	0.040	0,683	0,976	0.956

According to the test results regarding validity and reliability of scale, the AVE value was calculated as 0.683 and the CR value was calculated as 0.976 and the value of Cronbach Alpha is 0.956.

3.2. Confirmatory Factor Analysis of Emotional Exhaustion

As a result of the CFA for the emotional exhaustion scale, the factor loading of the item coded "x27" under the emotional exhaustion was determined to be lower than 0.3 and was removed from the scale. According to the CFA results, which were performed again taking into account model fit recommendations, it was observed that the factor loadings of the remaining scale items were between 0.660 and 0.962. The fit indices for the emotional exhaustion scale indicated a reasonable fit ("χ^2= 30.029; $\chi 2/df$= 1,876; RMSEA= 0.079; CFI= 0.977; TLI= 0.959; and SRMR= 0.036").
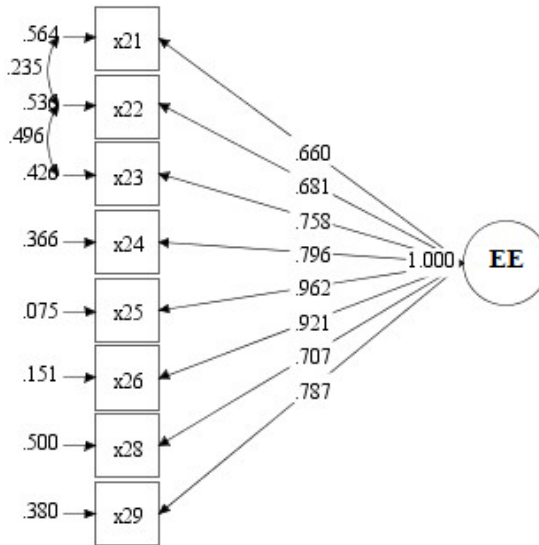

Figure 3. CFA Path Diagram of EE Scale

Table 2. CFA Fit Indices of EE Scale, Results of Validity and Reliability

KMO	Barlett	x^2/df	RMSEA	CFI	TLI	SRMR	AVE	CR	α
0,894	p<0,00	1.876	0.079	0.977	0.959	0.036	0.625	0,929	0.923

According to the test results regarding validity and reliability of emotional exhaustion scale, AVE value was calculated as 0.625 and the CR value was calculated as 0.929 and the value of Cronbach Alpha is 0.923.

3.3. Correlation Analysis

Pearson Correlation analysis was done to examine the relationships between the independent variable of the study, organizational justice, and its dimensions distributive, procedural and interactional justice, and the dependent variable, emotional exhaustion. There are weak relationships between variables if "0.30 > r", medium if "$0.30 \leq r < 0.50$" and strong if "$0.50 \leq r < 1$" (Cohen, 2013). Accordingly, there is a moderately negative relationship between emotional exhaustion and the perception of organizational justice (r= -0.388; p<0.01) significantly. However, there is a significant relationship between both distributive justice and emotional exhaustion (r= -0.286; p<0.01) and procedural justice and emotional exhaustion (r= -0.274; p<0.01). Thus, H_1, H_{1a} and H_{1b} were accepted. The variable that has the strongest relationship with emotional exhaustion is interactional justice (r= -0.429; p<0.01). So H_{1c} was accepted also. This result can be explained by the similarity between the elements of courtesy and respect that should be present in interpersonal relations, which are the main points emphasized by the interactional justice dimension, and the sources that lead to emotional exhaustion.

Table 3. Scale averages and relationships between variables

	Variables	Mean	1	2	3	4	5
1	Distributive Justice	2,91	---				
2	Procedural Justice	2,64	,643*	---			
3	Interactional Justice	3,02	,648*	,833*	---		
4	**Organizational Justice**	2,89	,808*	,913*	,957*	---	
5	**Emotional Exhaustion**	2,67	-,286*	-,274*	-,429*	-,388*	---

* The correlation is significant at the 0.01 level (two-sided).

3.4. Structural Equation Modeling Analysis

The structural regression model or structural equation model, which consists of a combination of factor analysis and regression analyses, focuses on causal (directional) relations between unobserved latent variables as well as observed variables (Gürbüz and Şahin, 2017; Şen, 2020). The fit measures' goodness of two-factor simple structure regression model and the extent to which organizational justice explains the change in emotional exhaustion are given in Table 4. In Figure 4, the path diagram of the SEM analysis summarizes organizational justice's effect on emotional exhaustion.
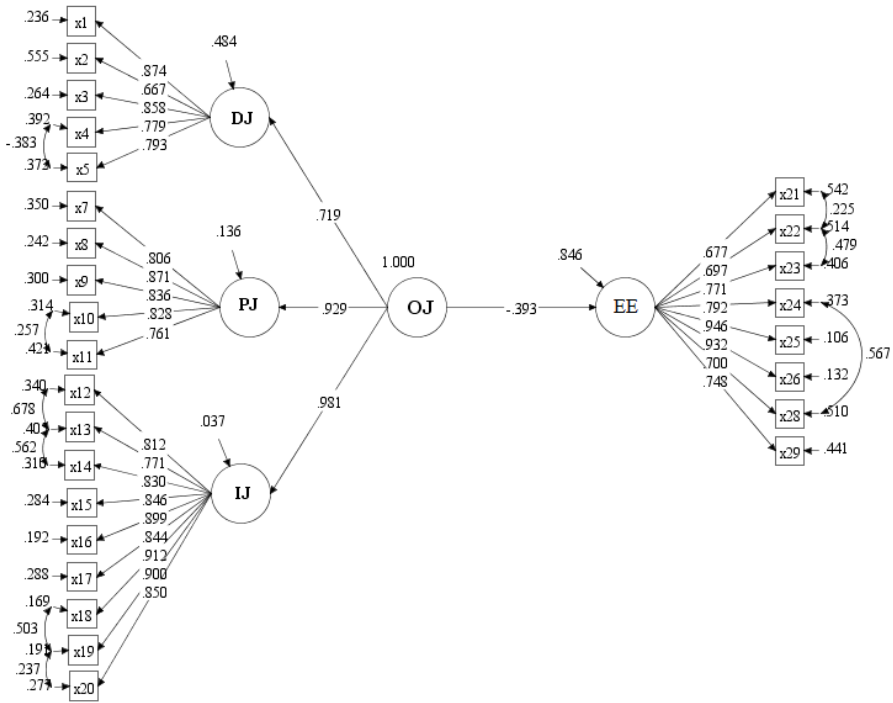
Figure 4. Structured Path Model

Table 4. Goodness of Fit Statistics of Model and Regression Analysis Results

Organizational Justice ➞ Emotional Exhaustion				
x^2/df	RMSEA	CFI	TLI	SRMR
1,654	,068	,932	,923	,068
B	S.H.	t	p	R²
-,393	,096	-4,067	,000	,154

Table 4 shows model fit values of the two-factor simple structural regression analysis performed to test H_2 (Organizational justice significantly affects emotional exhaustion.) which was developed in accordance with the related literature. The fit indices obtained according to the SEM analysis ("χ2/df= 1.654; RMSEA= 0.068; CFI= 0.932; TLI= 0.923; and SRMR= 0.068") show that the model has an acceptable fit level. However, organizational justice affected emotional exhaustion significantly (B= -0.393; p<0.001) and that organizational justice can explain 15% of the variance in emotional exhaustion.

4. DISCUSSION

Justice is "the first virtue of social institutions, and the truth of systems of thought". Just as a human life without virtue is unthinkable, it can be predicted that virtuous organizations consisting of virtuous individuals can function effectively (Rawls, 1971: 3). Organizational justice has been a subject that has attracted the attention of researchers until today due to the wide-ranging impact of employees' attitudes, cognitions and behaviors towards the organization. Organizational justice is seen as a significant factor of work attitudes and behaviors (Acker, 2011; Colquitt, 2001; Robbins et al., 2012). Job burnout is seen as a psychological concept related with employees' negative experiences about work (Dishon-Berkovits, 2018). Some burnout researches studying the relation between organizational justice and burnout first paid attention to emotional exhaustion (Bakker et al., 2000; Robbins et al., 2012). Emotional exhaustion is seen as an essential attribute of burnout and the most explicit reflection of this complicated syndrome (Leiter and Maslach, 1988; Li, 2014; Maslach, 1998; Maslach et al., 2001). Emotional exhaustion plays an important role in the progress of burnout (Bakker et al., 2000). To sum up job burnout is seen as a significant individual and organizational challenge (Dishon-Berkovits, 2018).

Emotional stress factors, especially in jobs that require working face to face with people, are thought to be associated with burnout in a way different from other factors (Maslach et al., 2001). This situation also becomes important in the field of health. Kılıç and Aytemiz Seymen (2011) stated that healthcare employees frequently encounter individuals with negative conditions such as illness, pain, suffering, death, loneliness and powerlessness due to their jobs and that they provide supportive care services to these individuals and that healthcare employees who take responsibility in these situations are among the occupational groups that carry the most risk in terms of burnout. Felton (1998) stated that burnout is an occupational disease that should be diagnosed and treated early for healthcare employees.

About service industry employees, one of the main predictor of burnout is perception of fairness (Acker, 2011). Brotheridge (2003) and Lambert et al. (2010) noted that distributive and procedural justice perceptions reduce employees' emotional exhaustion. Chenevert et al. (2013) revealed that interactional and procedural justice affected burnout indirectly through distributive unfairness for healthcare employees. Al-Zahrani (2011) put forth a significant inverse relation between organizational justice dimensions and burnout in health sector research. In reply to the unjust distribution of rewards, employees see burnout manifested by emotional exhaustion (Robbins et al., 2012). The perception of organizational unfairness negatively affects all burnout dimensions (Flint et al., 2013). In the context of relevant literature and relationships, the hypothesis H1: Perception of organizational justice significantly affects emotional exhaustion was established. This finding is consistent with researches (Acker, 2011; Al-Zahrani, 2011; Bakker et al., 2000; Brotheridge, 2003; Cole et al., 2010; Colquitt et al., 2001; Cropanzano et

al., 2005; Lambert et al., 2010; Maslach et al., 2001; Robbins et al., 2012; Şeşen, 2011; Zhang et al., 2012) that finds that feelings of injustice could lead to burnout.

The signs and symptoms that may indicate a serious burnout problem in a health service or system are not only the consequences of burnout but also its enabling or promoting factors. In health sector in Türkiye, these include increased turnover or turnover of staff due to excessive workload, increased complaints about care from patients and their relatives, indicating a decline in the quality of patient care, increased time away from work, increased organizational, interpersonal and physical problems, and significant difficulties in communication and rapport with colleagues or other disciplines, lack of constructive criticism, innovation, productive and creative efforts, a hierarchical, centralized and bureaucratic management approach that is not democratic and participatory, lack of objective rewarding tools, insecurity, and employees' uncertainty about promotion and professional future (Çam and Yıldırım, 2010; Kaçmaz, 2011; Uğurlu and Polat, 2000) .

In the study, a negative relation between justice and burnout in the Turkish healthcare sector has been pointed out. In this respect, making the voices of healthcare employees heard and revealing the relation between organizational justice and emotional exhaustion through structural equation modeling will contribute to the literature.

CONCLUSION

The purpose of this research, which was conducted with a face-to-face survey method in November-December 2022, on 141 healthcare employees working in a research hospital in Ankara, other than doctor and nurse positions, is to reveal the relation between organizational justice and emotional exhaustion with a two-factor simple regression structural equation model using the MPlus 7 program. According to the research results, a statistically significant and negative relation was found between organizational justice perceptions and emotional exhaustion. This finding is consistent with research after it was stated in the Discussion section that the hypothesis was reached. Findings also mean that feelings of unfairness can eventually lead to burnout.

Helping and serving people experiencing health problems poses a great challenge for many healthcare employees. Such efforts can be highly rewarded, for example, when patients show gratitude after a consultation or improve due to a doctor's efforts. On the other hand, the daily routine is that healthcare employees often face patients and their relatives who do not practice their advice, demand no possible things, refuse change, lie, cheat, manipulate and use physical violence. Especially because of the recent violence (Tutan and Kökalan, 2024; Ünal et. al., 2022), hospital organizations need to pay attention to the physical security of their employees, either from public security units and their own private security structures. The demands and needs of this group of employees, who need to be supported financially (especially wages and personal rights) and morally (the

motivation and happiness that will arise with the improving of working conditions), must be met and not pushed into emotional exhaustion. The hospital organization must be conscious about the importance of organizational justice and the effect on accelerating the exhaustion process at all organizational levels. Organizations must take care of the harmful outputs of burnout at the individual level as "substance abuse, anxiety, depression and health problems" (Alarcon, 2011) and at the organizational level as "decreased commitment, satisfaction, ingenuity and performance and increased turnover levels" (Halbesleben, 2006).

Hospital administrators should give much more attention to improve healthcare employees' perceptions of interactional justice. Based on the interpersonal and informational justice perspectives of interactional justice (Colquitt, 2001), hospital managers must show behave regarding respect, courtesy, and honor. It is recommended that managers frankly share information about how they distribute resources, attach importance to transparency, and participate in developing practices that will increase the fair allocation of resources and rewards. Employee participation programs, in which employees have chance to be participated in decision-making process regarding reward distribution, can be extremely useful in maintaining trust, decreasing emotional exhaustion, and increasing personal success and commitment emotions. Although this study, which was conducted on the subjects of organizational justice and burnout and obtained data through surveys, consists of subjective answers in terms of examining the state of justice or its lack thereof and emotional exhaustion, cognitive evaluation of the research results can contribute to the literature. All data were obtained from employees of a hospital in Ankara. For this reason, generalization of observed relation to other environments may not be scientifically consistent. The study revealed here proves benefit of investigating relationship between burnout regarding emotional exhaustion and organizational justice in the healthcare industry. In this context, the research is important in terms of understanding employees in the healthcare sector and the subjective well-being of the sector. For future research, it is recommended to address relevant issues longitudinally and using multiple techniques and issues such as silent resignation, artificial intelligence anxiety, technological unemployment anxiety.

ÖRGÜTSEL ADALETİN DUYGUSAL TÜKENMİŞLİK ÜZERİNDEKİ ETKİSİ: SAĞLIK ÇALIŞANLARI ÖRNEĞİ

1. GİRİŞ

Çalışanların örgütün genel eşitliğini ve adaletini nasıl algıladıkları, örgütle etkileşimleri hakkındaki kararlarını belirlemektedir. Ayrıca, örgütsel adalet karşılığında çalışanlar, işletmelerinin beklentilerine uyum sağlamak için daha pozitif davranma eğiliminde olabilirler. Bu bağlamda, adalet çalışan davranışını motive eden temel bir sosyal beklenti olarak incelenebilir (Treviño ve Weaver, 2001). Ayrıca, örgütsel adalet iş yerinde sağlığın yeni bir psikososyal yordayıcısı olarak

ortaya çıkmıştır (Brotheridge, 2003). Diğer taraftan, örgütsel adaletsizliği algılayan çalışanlar olumsuz duygular ve stres yaşamaktadırlar (Elovainio vd., 2002). İş yerinde iyi oluşun (well-being) kritik bir ölçüsü olarak tükenmişlik (Maslach vd., 2001) kavramı sadece izole edilmiş bireyleri etkileseydi, etkisi olduğundan çok daha az önemli ve çok daha az yıkıcı olurdu. Hizmet sektöründeki örgütlerde tükenmişlik müşterilerden çalışana, bir çalışandan diğerine ve çalışandan müşterilere bir enfeksiyon gibi yayılabilmektedir (Reed, 1981, p. 25). Bakker ve arkadaşları (2001) bir hastanede pratisyen hekimler arasında tükenmişlik bulaşma sürecinin varlığına destek sağlamıştır. Özel kişisel ilişkilerde de tükenmişliğin bireyler arasında kolaylıkla yayıldığına dair kanıt vardır (Westman ve Etzion, 1995). O hâlde, çalışanların pozitif psikolojilerini sağlama çabasında olan örgütlerin tükenmişlik konusuna dikkatle eğilmeleri gerekmektedir. Örgütsel adalet ve iş tükenmişliği ilişkisini inceleyen tükenmişlik çalışmalarından bazıları öncelikle duygusal tükenme boyutuna odaklanmıştır (Bakker vd., 2000; Robbins vd., 2012). Duygusal tükenme, tükenmişlik sendromunun merkezi niteliği ve kavramın en açık ve seçik yansıması (Leiter ve Maslach, 1988; Li, 2014; Maslach, 1998; Maslach vd., 2001) olarak kabul edildiğinden araştırmada tükenmişlik boyutlarından duygusal tükenme tek boyut olarak kullanılacaktır.

2. YÖNTEM

Bu çalışmanın amacı örgütsel adaletin duygusal tükenmişliğe etkisini sağlık çalışanları örnekleminde ortaya koymaktır. Bu amaçla ilgili literatüre dayanılarak Hipotez 1, 1a, 1b ve 1c "Örgütsel adalet ile duygusal tükenmişlik arasında negatif yönlü anlamlı bir ilişki vardır. - Dağıtımsal adalet ile duygusal tükenmişlik arasında negatif yönlü anlamlı bir ilişki vardır. - İşlemsel adalet ile duygusal tükenmişlik arasında negatif yönlü anlamlı bir ilişki vardır. - Etkileşimsel adalet ile duygusal tükenmişlik arasında negatif yönlü anlamlı bir ilişki vardır." ve Hipotez 2 " Örgütsel adalet algısı duygusal tükenmişliği anlamlı biçimde etkiler." geliştirilmiştir. Araştırma, Ankara'da bulunan bir araştırma hastanesinde doktor ve hemşire pozisyonları dışında görev yapan sağlık memurları üzerinde kolayda ve kartopu örnekleme ile gerçekleştirilmiştir.

3. BULGULAR

Araştırmanın bağımsız değişkeni olan örgütsel adaletin ve alt boyutlarının (dağıtımsal, işlemsel ve etkileşimsel) bağımlı değişken duygusal tükenmişlik ile ilişkilerini ortaya koymak adına Pearson Korelasyon analizi yapılmıştır. Buna göre duygusal tükenmişliğin örgütsel adalet ile (r= -0,388; p<0.01), dağıtımsal adalet ile (r= -0.286; p<0.01) işlemsel adalet ile (r= -0.274; p<0.01) ve etkileşimsel adalet ile (r= -0.429; p<0.01) aralarında negatif ve orta düzeyde anlamlı ilişkiler tespit edilmiştir ve böylece H_1, H_{1a}, H_{1b} ve H_{1c} kabul edilmiştir. Duygusal tükenmişlik ile arasında en yüksek ilişki bulunan alt boyutun etkileşimsel adalet olduğu gözlemlenmiştir. Bu sonuç, etkileşimsel adalet boyutunun vurgu yaptığı temel nokta olan ikili ilişkilerde olması gereken nezaket ve saygı unsurları ile duygusal tükenmişliğe yol açan kaynakların benzerlik göstermesi ile açıklanabilir. Tablo 4'te H_2'yi test etmek amacıyla gerçekleştirilen iki faktörlü basit yapısal regresyon analizi

model uyum değerleri ve bağımsız değişkenin bağımlı değişken üzerindeki etkisini açıklayan birtakım değerler bulunmaktadır. Modelin uyum değerlerinin: "x2/df= 1,654; RMSEA=0,068; CFI=0,932; TLI=0,923 ve SRMR=0,068" olarak tespit edildiği görülmektedir. Bu değerler örgütsel adaletin, duygusal tükenmişlik üzerindeki etkisini ölçmeye yönelik oluşturulan modelin makul seviyede uyum sağladığını göstermektedir. Bununla birlikte örgütsel adaletin duygusal tükenmişliği anlamlı bir şekilde etkilediği (*B*=0,393; p<0,001) ve örgütsel adaletin duygusal tükenmişlikteki varyansın %15'lik kısmını açıklama gücüne sahip olduğu bulunmuştur.

4. TARTIŞMA

Araştırma bulgularına göre örgütsel adalet algıları ile duygusal tükenmişlik arasında anlamlı ve negatif bir ilişki bulunmuştur. Bu bulgu, adaletsizlik duygusunun sonunda tükenmişliğe yol açabileceğini bulan araştırmalarla (Acker, 2011; Al-Zahrani, 2011; Bakker vd., 2000; Brotheridge, 2003; Cole vd., 2010; Colquitt vd., 2001; Cropanzano vd., 2005; Lambert vd., 2010; Maslach vd., 2001; Robbins vd., 2012; Şeşen, 2011; Zhang vd., 2012) uyumludur.

SONUÇ

Hastane yöneticileri sağlık çalışanlarının etkileşimsel adalet algısını geliştirmeye daha fazla özen göstermelidirler. Etkileşimsel adaletin kişilerarası ve bilgisel adalet bakış açılarından hareketle (Colquitt, 2001) hastane yöneticileri çalışanlarına kibar, saygın ve saygılı davranmalıdırlar. Yöneticilerin kaynakların nasıl tahsis edildiğine dair bilgileri samimi bir şekilde paylaşmaları ve örgütte şeffaflığı, ödüllerin ve kaynakların dağılımının eşitliğini artıracak uygulamaların geliştirilmesine katılmaları tavsiye edilmektedir. Bireylerin ödüllerin dağıtımına ilişkin karar sürecine katılma fırsatı bulduğu çalışan katılım programları; güven inşa etmede, duygusal tükenmeyi azaltmada, kişisel başarı ve bağlılık duygularını artırmada yararlı olabileceği düşünülmektedir. Örgütsel adalet ve iş tükenmişliği konularında yapılan ve anketlerle veri elde edilen bu çalışma adalet durumunu veya eksikliğini ve duygusal tükenme konusunu incelemek bakımından her ne kadar öznel cevaplardan oluşsa da araştırma sonuçlarının bilişsel olarak değerlendirilmesi literatüre katkı sağlayabilecektir. Tüm veriler Ankara'da bulunan bir hastanenin çalışanlarından elde edilmiştir. Sonuç olarak, gözlemlenen ilişkilerin diğer ortamlara genellenmesinin bilimsel açıdan tutarlı olmayacağı düşünülmektedir. Burada sunulan araştırma sağlık sektöründeki örgütsel adalet ve tükenmişlik arasındaki ilişkiyi keşfetmenin yararlılığını ortaya koymaktadır. Bu bağlamda, araştırma sağlık sektöründeki çalışanları anlama ve sektörün öznel iyiliği açılarından önemlidir. Gelecek araştırmalar için ilgili konuların boylamsal olarak ele alınması ve sessiz istifa, yapay zeka kaygısı, teknolojik işsizlik kaygısı gibi konuların ve birden çok tekniğin kullanılması önerilmektedir.

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