Factors in Nurses' Organizational Citizenship Behavior

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Abstract
Aim: to explore the effect of organizational justice and self-efficacy on nurses' organizational citizenship behaviors. Design: Correlational research design.
Settings: 6 hospitals affiliated to the Ministry of Health in Port Said Governorate, Egypt.
Subjects: 413 staff nurses with at least one year of experience.
Data collection tools: Organizational Justice Questionnaire, Self-Efficacy Scale and Organizational Citizenship Behavior Instrument.
Results: two-thirds of nurses demonstrate organizational citizenship behaviors but attention is needed for organizational justice and the promotion of nurses' self-efficacy. Organizational citizenship behavior was affected by organizational justice and self-efficacy among nurses.
Conclusions: nurse managers must enhance organizational citizenship behaviors among nurses through tangible and intangible rewards, and ongoing training is necessary for continuous professional development in dimensions of organizational citizenship behavior, with focus on procedural and distributive justice to enhance nurses' self-efficacy.
Key words: Citizenship behavior, Organizational justice, Self-efficacy, Nurses.

I. Introduction

Organizational citizenship behavior (OCB) comprises individual behaviors that are generally unnoticed but which collectively shape organizational orientation **(Organ, Podsakoff & MacKenzie, 2006).** Organizational citizenship behavior refers to the willingness of employees to go beyond the formal specifications of work roles, also known as extra-role behaviors **(Ahmed, Rasheed & Jehanzeb, 2012).** As noted by **Baron & Greenberg (2008**), a large proportion of organizational citizenship arises from informal behavior, with positive actions including voluntary engagement by employees beyond what is generally expected of them to contribute to the well-being of their organization. The individual who shows OCB performs more than required and expected, going beyond compulsory tasks identified formally by the organization **(Altınbaş, 2008).** Organizational citizenship behavior is a profitable and efficient investment with positive outcomes for individuals, organizations and society as a whole **(Amikhi, 2009).**

Literature regarding organizational citizenship behavior generally conceptualizes it in terms of five subscales **(Organ, 1988):** altruism, conscientiousness, courtesy, sportsmanship and civic virtue. Altruism involves voluntarily helping others with work-related problems, such as helping a co-worker with a heavy workload. Courtesy refers to gestures that help others prevent a problem, such as providing advanced notifications of meetings or of one's inability to attend them. Conscientiousness means exceeding the required levels of attendance, punctuality or conserving resources by not taking extra breaks and obeying company rules when no one is watching. Sportsmanship involves sacrificing one's personal interest and maintaining a positive attitude, even when inconvenienced by others or when one's ideas are rejected. Civic virtue involves the constructive participation in the political process of the organization, such as making suggestions for improvement in meetings **(Özdevecioglu, 2003; Ehtiyar, Aktaş & Ömüriş, 2010).**

Nurses perform better and exert high level of effort when they perceive that they are supported by organizations that care about their well-being and value their contributions, which encourages them to engage in organizational citizenship behavior **(Ferris, Brown & Heller, 2009; Colakoglu, Culha & Atay, 2010; Kwak, Chung, Xu & Eun-Jung, 2010).** Organizational justice emerged as an important concept in the prediction of OCB, and some studies found a positive relationship between the two variables **(Ball, Klebe, Trevino & Sims, 1994; Mayer, Davis & Schoorman, 1995).** To achieve OCB, justice must be generalized in the work environment. Perceptions of organizational justice constitute an important heuristic factor in organizational decision-making, as research relates it to job satisfaction, turnover, leadership, organizational citizenship, organizational commitment, trust, customer satisfaction, job performance, role breadth, alienation, and leader-member exchange **(Johnson, 2007).**

In the same context, **Ponnu & Chuah** (**2010**) referred to organizational justice as achieving fairness within organizational settings, originating from work in social psychology aimed at understanding fairness

issues in social interactions. Also, it is essentially the perception that subordinates of an organization are treated fairly. Such fair treatment can be manifest in numerous forms, ranging from the perceptions of the fairness of policies and procedures on an abstract level to the material distribution of rewards and punishments, along with a general ambience and working culture of being treated with courtesy and respect (**Mcnabb, 2009**). Organizational justice remains a topic of deep interest for organizational researchers, as it represents an umbrella term used to referred to individuals' perceptions about the fairness of decisions and decision-making processes within organizations and the influences of those perceptions on behavior. It is conceptualized as being comprised of at least two dimensions, the distributive and procedural (**Lavelle, Rupp & Brockner, 2007**), while most recent research adds the interactional justice dimension (**Fernandes & Awamleh, 2006; DeConick, 2010; Greenberg & Colquitt, 2013; Guh, Lin, Fan & Yang, 2013**).

Distributive justice affects attitudes about specific *events* (e.g., satisfaction with pay, satisfaction with one's performance appraisal), whereas procedural and interactional justice affect attitudes about the *system* (e.g., organizational commitment, trust in authorities). Interactional justice can be further broken down into informational and interpersonal justice (**Kumar, Bakhshi & Rani, 2009**). Organizational justice promotes an atmosphere of an atmosphere of trust, self efficacy and confidence, especially in institutions with multidisciplinary staffs (**Karriker & Williams, 2009**).

Self-efficacy is important when engaging in proactive behaviors, as these behaviors entail certain psychological risks for individuals. Individuals who are confident in their capabilities are more prone to consider that their actions will be successful, and therefore assume the risk of being proactive (**Parker, Williams & Turner, 2006; Griffin, Parker & Mason, 2010; Chen & Chang, 2012**). Self-efficacy beliefs link with high levels of taking charge and self-initiative, both of which constructs are similar to change-oriented citizenship behaviors (**Frese, Garst & Fay, 2007**). Such beliefs are related to role breadth self-efficacy (RBSE), which refers to employees' perceived capability of carrying out a broader and more proactive set of work tasks that extends beyond prescribed technical requirements (**Vinces, Cepeda-Carrión & Chin, 2012**).

Extant research reports that RBSE is a strong predictor of behaviors such as suggestion making proactive behavior and proactive problem solving (**Parker, Williams & Turner, 2006; Ohly & Fritz, 2007**). Additionally, RBSE is an important predictor of employees' innovation and proactive performance (**Griffin, Parker & Neal, 2008, Siegel & Renko, 2012**). **Morrison & Phelps (1999**) indicated that self-efficacy is an important predictor of two types of proactive behavior: personal initiative and taking charge. Self-efficacy is clearly an important explanatory variable to consider when engaging in change-oriented citizenship behaviors.

Aim

The present study aims to explore the effect of organizational justice, and self-efficacy on nurse's organizational citizenship behaviors through achievement of the following objectives:
1. Assess organizational justice among nurses.
2. Determine nurses' self-efficacy.
3. Determine nurses' organizational citizenship behaviors.
4. Find out the effect of nurses' self-efficacy and organizational justice on nurse's organizational citizenship behaviors.

II.   Subjects and methods

Design: Correlational research design was utilized.

Settings: This study conduct in six hospitals in the Port Said Governorate affiliated to the Egyptian Ministry of Health, namely: Port-Said general hospital, El-Zouhour hospital, El-Nasr general hospital, Port Fouad general Hospital, El-Homyiat hospital and El-Sadr hospital (El-Masah El Bahary). *Subjects:* 413 staff nurses with at least one year of experience from the complete staff of 730 nurses (a **response rate of 57%**).

Data collection tools

Organizational Justice Questionnaire: used for assessment of the current state of organizational justice (adopted from **Rego, Leite, Carvalho, Freire & Vieira, 2004; Rego & Cunha, 2006**). The tool consists of 16 items categorized under four domains of organizational justice – distributive, procedural, interactional and informational justice. Each domain included four items intended to measure respondents' perceptions of the fairness of the rewards they receive for their contributions to their work organizations. The responses were based on a five-point Likert scale ranging from (1) "strongly disagree" to (5) "strongly agree". The scores of each group of items were summed-up and the total divided by the number of the items in this group, giving a mean score for each domain of the organizational Justice. These scores were converted into a mean percent score. The Cronbach's alpha for tool items was 0.91.

Self-Efficacy Scale was assessed by means of 50-items developed by **Al-Adel (2001).** Participants responded by rating each positive question statement using a five-point Likert scale ranging from 0 (never) to 4 (always),

reversed for 24 items (negative question statements). Higher total scores indicated higher self efficacy. The Cronbach's alpha for the scale items was 0.77.

Organizational Citizenship Behavior Instrument developed by **Organ (1990)** has been used in numerous studies (**Niehof & Moorman, 1993; Sarah & Mary, 2011; Krishnan & Mary, 2012; Abo Tiah, 2012**). It comprises 20 items under five dimensions: altruism (5 items), courtesy (4 items), sportsmanship (3 items), civic virtue (5 items) and conscientiousness (3 items). Each item was answered via a five-point Likert scale ('almost never'=1 through to 'almost always'=5). The estimated Cronbach's alpha for this instrument is 0.86. In addition, a socio-demographic data questionnaire was added, developed by the researchers to gather data about the age, marital status, occupational level/job, qualifications and years of experience of participants.

Procedure

Related literature and theoretical knowledge of various aspects of the study was critically reviewed using books, articles, the internet and periodicals to develop the tool for data collection. The tool translated into Arabic by English experts and retranslated by researchers. The validity of the tools was assessed by three nursing administration and psychiatric nursing professors. A pilot study was performed to test the clarity, feasibility and applicability of questionnaires with 10% from the total sample of staff nurses. A brief explanation of the purpose of the study was provided to every participant in the pilot study, and then they provided with a copy of the study tools. Data from the pilot study were analyzed. The pilot also served in estimating the time needed for filling the forms, and it was found that each participant would need about 30 to 45 minutes to complete them. Staff nurses included in the pilot study were excluded from the main study sample. After identification of obstacles and limitations from the pilot study, and making necessary modifications to ensure the clarity of the scales, data collection was conducted, through self-administered questionnaire. Data collection took place over four months from June to September, 2015.

Ethical consideration

Official approval to carry out the study was obtained from the relevant authorities (medical and nursing directors, and heads of departments) in the studied hospitals in Port Said. Oral agreement (assent) was obtained from all participant nurses in the study, who were informed of the study purposes and likely outcomes; that their participation was entirely voluntary and anonymous, and would not affect their statutory rights; and that they could withdraw from the study at any time.

III. Statistical analysis

Data was entered and coded using SPSS version 19 and presented using descriptive statistics in the form of frequencies and percentages means and standard deviations for quantitative variables. Correlations were assessed using the correlation co-efficient test (normal data). Statistical significance was considered at p value ≤0.05.

IV. Results

The results reveal that most of the respondents (88.4%) were female. The predominant age range was 30 to < 50 years old, with mean and SD (36.18±10.03). Most participants were nurses (82.1%), and the others were head nurses (17.9%). The majority (57.6%) had a secondary nursing school diploma and 67.1% of them were married. Most (71.7%) had less than five years of experience, with a minimum of one year and a maximum of 40 (mean and SD 15.73±10.09).

Table (1) displays mean percent scores about the items of organizational justice, self-efficacy, and citizenship behaviors assessed by participants. It was found that the highest mean percentages of achieving the organizational justice in studied hospitals were related to Informational justice and Interactional justice (58.01±22.65, 57.46±23.37 respectively). The highest mean percentages of organizational justice domain were related to Distributive justice and Procedural justice (46.71±23.08, 52.54±21.58 respectively); 53.27±19.76 was the overall mean and SD for the existence of organizational justice among studied nurses. The table shows that about half of nurses (**52.89**±5.67) had Self-efficacy. As regard to five Organizational Citizenship Behaviors, dimensions, namely Altruism, Courtesy, Sportsmanship, Civic virtue and Conscientiousness it was observed that the nurses behave with the same mean percentages related to these dimensions with overall mean percentage of 68.95±20.30.

Table (2) shows the correlations between Organizational justice, Self-efficacy and Organizational citizenship behaviors scores. It can be seen that there are positive significant correlations between all domains of Organizational justice (distributive, procedural, interactional and informational) and altruism, courtesy, sportsmanship, civic virtue and conscientiousness (dimensions of Organizational citizenship behaviors) (p=0.001[*]).

Table 3 displays the correlations between Organizational justice, Self-efficacy, and Organizational citizenship behaviors. Significant correlations were found between Organizational citizenship behaviors and Self-efficacy (r= 0.199[*]) and Organizational justice (0.397[*]), while there is no relationship between Self-efficacy and Organizational justice, which means that nurses' Organizational citizenship behaviors are affected by their Self-efficacy and Organizational justice.

V. Discussion

Justice is an important and venerable subject in human civilization (**Jamshidi, 2001**). Organizational justice refers to the extent to which nurses perceive workplace procedures, interactions and outcomes to be fair in nature (**Mohamed, 2014**). The promotion and maintenance of justice behaviors in organizations and among nurses is really necessary for increasing positive attitudes, inspiring loyalty, motivation and individual/group efforts accordingly (**Seyed, Seyed, Farah, Mohamad & Taheri, 2008**). In fact, nurses have various reactions against injustice, many of which are harmful for the organization and may lead to negative consequences (**Reb, Goldman, Kray & Cropanzano, 2006**). If nurses perceive that they are treated with fairness this translates into improved self-confidence, self-efficacy and citizenship behavior, reflected in improved patient outcomes and organizational performance (**Mohamed, 2014**).

This research found that nurses are treated fairly in terms of interactional justice (i.e., concerning interactions with peers, superiors and subordinates), and they also nurses received adequate explanation focused on procedures needed to applied in certain ways (informational justice). This finding is consistent with **Ahmed, Fadel, Ghallab & Abo El Magd (2014),** who reported that interactional justice have the highest mean score for the three studied hospitals among the justice components. As regard to distributive justice, nurses' feelings if injustice may be related to perceptions of unequal distribution of incentives, the absence of a sanction system and personal bias and favoritism among their superiors.

In fact, nurses who have high levels of self-efficacy or confidence believe that they are capable of performing the tasks assigned to them successfully, thus they believed that stresses and challenges are challenges which must be overcome to achieve success (**Luthans, 2002**). It was apparent that this was not fully realized among nurses in this study, whose self-efficacy was borderline (not good or bad), while the results showed the association of self-efficacy with all items of organizational justice. This contributes to increase the effectiveness of leadership, with increasing ethical consideration in decision making and enhanced creativity, cooperative spirit, willingness to learn and entrepreneurialism, all linked to increased commitment to and satisfaction with one's role (**Bauer & Erdogan, 2012**).

Organizational citizenship behavior is exhibited by willingness to go above and beyond prescribed role requirements and do more than usual job duties (**Zabihi, Hashemzehi & Hashemzehi, 2012**). The categories of organizational citizenship (explained previously) were exhibited in this study by the following examples: altruism – helping an individual coworker on a task; courtesy – alerting others in the organization about changes that may affect their work; conscientiousness – carrying out one's duties beyond the minimum requirements; sportsmanship – refraining from complaining about trivial matters; and civic virtue – participating in the governance of the organization (**Alabi, 2012**). Those dimensions were achieved according to two-thirds of studied nurses, in-keeping with the findings of previous research (**Dargahi, Alirezaie & Shaham, 2012; Mathumbu & Dodd, 2013**).

To understand organizational behavior, one must pay attention to issues of organizational justice and its impacts on organizational outcomes (**Bos, 2001**). The study approved the significant correlation between distributive, procedural, interactional and informational justice (dimensions of organizational justice) and altruism, courtesy, sportsmanship, civic virtue and conscientiousness (items of organizational citizenship behaviors), corroborating **Goudarzvand-Chegini (2009)** and **Guangling (2011),** who found a positive relationship between organizational justice and organizational citizenship behavior. **Abu Elanain (2010)** reported that organizational justice perceptions of nurses have certain effects on various organizational citizenship behaviors. One of the findings is the positive effect of procedural justice on individual contributions to organizational development and taking care of the organizational jobs. The positive emotions of individuals toward procedural justice bring about higher performance and increased organizational citizenship behavior.
Another result of this research is the relationship between interactional justice and organizational citizenship behavior in the meaning of taking care of job. **Dulebohn, Conlon, Sarinopoulos, Davison & McNamara (2009)** also pointed out that nurses who are treated positively in organizations show organizational citizenship behaviors such as obeying the arrival and exit hours and reducing slack times (e.g., for tea breaks).

In total, the study showed that there is a significant relationship between Organizational justice and Organizational citizenship behavior whereby when nurses feel there is justice in the organization they develop Organizational citizenship behavior. This supports numerous studies (**Saeedinejade, Poorazat & Gholipoor, 2007; Yilmaz & Tasdan, 2009; Bohloli, Alavi & Derakhshani, 2010; Ganjinia, Chegini & Ghafarzade, 2010; Rezaian & Mirzade, 2010; Fatehi, 2012; Fani, Danaefard & Zakiani, 2013; Saghi, Far, Zabihi & Hosseinpou, 2015**).

The research identified a statistically significant correlation between organizational citizenship behaviors and self-efficacy and organizational justice, evident in the positive impact of organizational justice and self-efficacy on nurses' citizenship behavior. The findings were in agreement with **Guangling (2011)** in affirming a positive relationship between organizational justice and organizational citizenship behavior.

VI.   Conclusion

Successful health care organizations need nurses who will do more than their usual job duties and provide performance that is beyond expectations. Today, health care organizations have great need for efficient leaders and policy makers who must pay complete attention to develop and cultivate the dimensions and principles of organizational citizenship behaviors through practicing all types of organizational justice and promoting staff self-efficacy. This research demonstrates the existence of organizational citizenship behaviors among nurses but there is a need to develop organizational justice and to promote nurses' self-efficacy. The results found that organizational citizenship behavior is influenced by organizational justice and self-efficacy among nurses. According to the results of this research, nurse managers must enhance and maintain organizational citizenship behaviors among nurses through a system of tangible and intangible rewards. Ongoing training for nurses on dimensions of organizational citizenship behavior for nurses is necessary, and nurse managers and decision makers should pay attention to organizational justice in terms of procedural and distributive justice. In particular, they must be fair when distributing work, tasks, rewards and promotions among nurses, and they should enhance nurses' self-efficacy through providing support, rewarding desirable behavior and providing continuous training for nurses to increase their self-efficacy.

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Table (1): Mean scores of organizational justice, self efficacy, and citizenship behaviors as perceived by the studied nurses, at Port Said City, (n=413)

Items	% Score Mean ± SD
Organizational Justice	
Distributive justice	46.71±23.08
Procedural justice	52.54±21.58
Interactional justice	57.46±23.37
Informational justice	58.01±22.65
Overall justice	53.27±19.76
Self-Efficacy	52.89±5.67
Organizational Citizenship Behaviors	
Altruism	69.81±22.11
Courtesy	69.16±21.88
Sportsmanship	68.36±23.34
Civic virtue	68.90±22.59
Conscientiousness	67.92±22.56
Overall Citizenship Behaviors	68.95±20.30

Table (2): Correlation between organizational justice, self efficacy, and citizenship behaviors as responded by study subjects (n= 413)

	Distributive justice		Procedural justice		Interactional justice		Informational justice		Overall organizational justice	
	r	p	r	p	r	p	r	p	r	p
Self-Efficacy	-0.061	0.214	-0.037	0.455	0.019	0.694	0.022	0.652	**-0.019**	**0.698**
Altruism	0.278[*]	<0.001[*]	0308[*]	<0.001[*]	0.403[*]	<0.001[*]	0.357[*]	<0.001[*]	**0.383[*]**	**<0.001[*]**
Courtesy	0.253[*]	<0.001[*]	0.251[*]	<0.001[*]	0.328[*]	<0.001[*]	0.303[*]	<0.001[*]	**0.324[*]**	**<0.001[*]**
Sportsmanship	0.255[*]	<0.001[*]	0.293[*]	<0.001[*]	0.331[*]	<0.001[*]	0.343[*]	<0.001[*]	**0.347[*]**	**<0.001[*]**
Civic virtue	0.248[*]	<0.001[*]	0.305[*]	<0.001[*]	0.365[*]	<0.001[*]	0.349[*]	<0.001[*]	**0.359[*]**	**<0.001[*]**
Conscientiousness	0.273[*]	<0.001[*]	0.334[*]	<0.001[*]	0.381[*]	<0.001[*]	0.340[*]	<0.001[*]	**0.377[*]**	**<0.001[*]**
Overall organizational citizenship behaviors	**0.289[*]**	**<0.001[*]**	**0.329[*]**	**<0.001[*]**	**0.402[*]**	**<0.001[*]**	**0.376[*]**	**<0.001[*]**	**0.397[*]**	**<0.001[*]**

r: Pearson coefficient   *: Statistically significant at p ≤ 0.05

Table (3): Correlation between organizational justice, self-efficacy, and citizenship behaviors as responded by study subjects (n=413)

	Self-efficacy		Organizational justice		Organizational citizenship behaviors	
	r	p	r	p	r	p
Self-efficacy	-	-	-0.019	0.698	0.199[*]	<0.001[*]
Organizational justice	-0.019	0.698	-	-	0.397[*]	<0.001[*]
Organizational citizenship behaviors	0.199[*]	<0.001[*]	0.397[*]	<0.001[*]	-	-

r: Pearson coefficient   *: Statistically significant at p ≤ 0.05