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The Effect of Organizational Justice Perception on Ethical Sensitivity in the Health Sector

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Research Article	**ABSTRACT**
History *Received: 16/07/2024* *Accepted: 18/09/2024* *JEL Codes: M10, M14* *Acknowledgment: This article was extracted from Sümeyye HEKİM's master thesis.*	Organizational justice is considered the cause of many individual and corporate results. It is also thought to have significant effects on employees. Justice, as one of the core values of the organization, significantly influences employee attitudes and behaviors. Therefore, while it is necessary for social organizations, it is even more crucial for health institutions. The culture of injustice perceived by nurses not only harms the health institution but also leads to more critical problems. In addition to the necessity of justice, essential health services include uncertain and high-risk situations to protect and support human health has increased the need for ethical sensitivity. In this context, the study aims to reveal the effect of nurses' perceptions of organizational justice on ethical sensitivity levels. The "Organizational Justice Perception Scale" and the "Ethical Sensitivity Questionnaire" were used in the research conducted in one public and two private hospitals in Sakarya. Descriptive statistical methods, independent samples t-test, one-way analysis of variance (ANOVA), correlation analysis, and regression analysis were used to analyze the data. According to the study's findings, a low-level positive correlation was found between general organizational justice perceptions and ethical sensitivity levels. Among the sub-dimensions of the scales, it was determined that the highest relationship was between the dimensions of fair distribution and orientation. As a result, it is expected that there will be an increase in ethical sensitivity levels depending on the rise in nurses' perceptions of organizational justice. ***Keywords:*** Organizational Justice, Ethical Sensitivity, Health Sector

Sağlık Sektöründe Örgütsel Adalet Algısının Etik Duyarlılığa Etkisi

	ÖZ
Süreç *Geliş: 16/07/2024* *Kabul: 18/09/2024* *Jel Kodları: M10, M14* *Bilgi: Bu makale Sümeyye HEKİM'e ait yüksek lisans tezinden çıkarılmıştır.* *License* 	Örgütsel adalet, birçok bireysel ve kurumsal sonucun nedeni olarak kabul edilmektedir. Çalışanlar üzerinde de önemli etkileri olduğu düşünülmektedir. Örgütün temel değerlerinden biri olan adalet, çalışanların tutum ve davranışlarını etkilemektedir. Bu nedenle sosyal örgütler için gerekli iken sağlık kurumları için daha da büyük önem taşımaktadır. Hemşireler tarafından algılanan adaletsizlik kültürü sadece sağlık kurumuna zarar vermekle kalmaz, daha kritik sorunlara da yol açar. Adaletin gerekliliğinin yanı sıra, temel sağlık hizmetlerinin insan sağlığını korumak ve desteklemek için belirsiz ve yüksek riskli durumları içermesi etik duyarlılığa olan ihtiyacı artırmıştır. Bu bağlamda çalışma, hemşirelerin örgütsel adalet algılarının etik duyarlılık düzeyleri üzerindeki etkisini ortaya koymayı amaçlamaktadır. Sakarya'da bir kamu ve iki özel hastanede gerçekleştirilen bu araştırmada "Örgütsel Adalet Algısı Ölçeği" ve "Etik Duyarlılık Anketi" kullanılmıştır. Verilerin analizinde tanımlayıcı istatistiksel yöntemler, bağımsız örneklerde t testi, tek yönlü varyans (ANOVA) analizi, korelasyon analizi ve regresyon analizi kullanılmıştır. Araştırmanın bulgularına göre, genel örgütsel adalet algıları ile etik duyarlılık düzeyleri arasında düşük düzeyde pozitif bir ilişki bulunmuştur. Ölçeklerin alt boyutları arasında en yüksek ilişkinin adil dağıtım ve oryantasyon boyutları arasında olduğu tespit edilmiştir. Sonuç olarak, hemşirelerin örgütsel adalet algılarındaki artışa bağlı olarak etik duyarlılık düzeylerinde de artış olması beklenmektedir. ***Anahtar Kelimeler:*** Örgütsel Adalet, Etik Duyarlılık, Sağlık Sektörü

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Introduction

As global conditions continue to evolve, organizations must consistently adapt and renew themselves in both their operations and structure. For organizations to operate in this direction, the human factor must be utilized effectively and efficiently. This situation depends on determining the various factors that may be affected positively or negatively within the organization and making improvements in favor of the employees. "Organizational justice" is one of the foremost concepts believed to have a significant impact on employees. Organizational justice has become the most popular and widely discussed topic in the fields of management support (Miles, 2012: 185).

Organizational justice is defined as the employees' interpretation of the actions within the organization and the general structure of the organization according to whether it is fair or not. For this reason, it is essential to know the perceptions of the employees before structuring the justice mechanisms in any organization to determine their possible effects (Yadav & Yadav, 2016: 15). Because the perception of organizational justice has positive effects on the realization of the professional behaviors of the employees; a perception of injustice can prevent employees from fulfilling their obligations.

Since all kinds of interventions during service delivery in health institutions are crucial, any perception of injustice can lead to more significant issues. In addition, the uncertainty and high risk of the services offered increase the need for ethical sensitivity as well as justice (Kırılmaz & Kırılmaz, 2014: 35; Kırılmaz et al., 2015: 73). Along with the global developments and the changes in health services, the need for sensitivity increases even more because nurses, who are more in contact with patients by taking the responsibility of maintaining their care and treatment, frequently encounter ethical problems (Noureddine, 2001: 2-3; Ergene, 2012: 19). To detect ethical problems and make the right decisions, it is necessary to have a high level of ethical sensitivity of the employees and to determine the variables that may be related (Filizöz et al., 2015: 47). On the other hand, it is widely stated that perceptions of organizational justice and injustice affect the ethical behavior of employees and that it is necessary to draw attention to the perceptions of justice in the efforts to understand ethical / unethical behavior in organizations (Trevino & Weaver, 2001: 651-652). For this purpose, the relationship between organizational justice perception and ethical sensitivity levels will be discussed and analyzed in this research.

Conceptual Framework

Organizational Justice

The concept of organizational justice, which has many definitions in the literature, was first used by Greenberg (1987) and by referring to the perceptions of justice within the organization (Beugre, 1998: xi), it was stated that the ideals of justice are a basic requirement for the effective mechanism of the organization (Malik & Naeem, 2011: 662). According to Koçel (2015: 530), organizational justice is a concept that envisages that functions are based on clear and clear principles, that practices do not differ between individuals, and that even if there are, the reasons for this difference are transparently explained to employees. Based on this definition, justice in organizations has been seen as a value that can create stable social structures by eliminating conflicts (Konovsky, 2000: 489). In other words, it is a concept associated with the method individuals use to determine whether they are treated fairly within the organization and how justice affects other work-related parameters (Moorman, 1991: 845). All of these conceptualizations focus not on what should be, but on the justice perceived by individuals (Colquitt et al., 2005: 4). Because the perception of any behavior as fair may differ from person to person. Therefore, rather than whether there is justice or injustice in an organization, it is more important how this situation is perceived by individuals (Özdevecioğlu, 2003: 78). From this point of view, organizational justice is basically a perceptual phenomenon. It is a subjective and descriptive concept that reveals what individuals believe to be true rather than an objective reality or an absolute moral code. It is a personal evaluation of the ethical and moral aspects of managerial behavior. Therefore, producing justice within the organization requires addressing the perspectives of the employees (Cropanzano et al., 2007: 35) and understanding what they perceive as fair (Colquitt et al., 2005: 4).

Dimensions of Organizational Justice

Justice is not a one-dimensional phenomenon and may have different organizational aspects in the eyes of employees (Akram et al., 2017: 135). In other words, employees judge whether the actions taken within the organization are fair or not, according to criteria related to different elements of justice. The first criterion; While the second criterion is related to the personal gains and losses arising from the employees' seeing the decisions taken as right or wrong; It is about the way decisions are made and whether the process is fair or not. Another criterion is related to the approaches adopted towards employees during planning and implementation (Tziner et al., 2015: 52). The definition of organizational justice made by Bies & Tripp (1995) based on these criteria; it refers to rules and social norms in organizations that regulate (i) how results should be allocated, (ii) the procedures that should be used to make decisions, and (iii) how employees should be handled at the point of interpersonal interaction. This definition indicates the existence of three dimensions of organizational justice: distributive justice, procedural justice, and interactional justice (Beugre, 1998: xiii).

Distributive Justice

Traditionally, when a reward is allocated or a decision is made, an assessment is made of how resources are allocated or allocated, and people decide whether the outcome is fair. This decision is called distributive justice (Mayer, 2007: 1). Distributive justice refers to the perceived justice of an individual's gains or distribution decisions (Folger & Cropanzano, 1998: xxii). According to the contributions of the employees to the work and their work efforts, the task, reward, etc. allocated to them. It can be defined as the evaluation of the degree of fairness of the outputs (Andersson-Stråberg et al., 2007: 433). Making this assessment is not as easy as it seems, because there is rarely an objective standard of accuracy (Folger & Cropanzano, 1998: xxii). Moreover, the concern to conserve as many resources as possible often overshadows the need to ensure fair distribution. From this point of view, it will not be enough to question justice in distribution to understand organizational justice (Karaeminoğulları, 2006: 16).

Procedural Justice

Procedural justice is defined as the fairness of how the managers and representatives of the institution make decisions regarding the allocation of resources. It includes the process of processing and implementing decisions according to a procedure that is perceived to be fair (Rahman *et al.*, 2016: 190). While distributive justice focuses on the fairness of the distribution of resources, procedural justice focuses on the fairness of the procedures used in making distribution decisions (Greenberg, 1987: 55; Hauenstein *et al.*, 2001: 39). Theoretically, procedural justice and distributive justice are different concepts, but in practice, procedural justice is a decisive indicator for distribution decisions (Folger & Cropanzano, 1998: 27). In other words, procedural justice plays an instrumental role and is critically important because it is instrumental in ensuring not only existing procedures but also distributive justice. Namely, when employees perceive the procedures as fair, they tend to believe that the results are also fair (Cloutier *et al.*, 2017: 9).

Interactional Justice

Interactional justice focuses on the human side of organizational practices, especially the treatment and communication between management and employees (Cohen-Charash & Spector, 2001: 279). With this aspect, the concept of interactional justice can be based on the theory of social exchange and the norm of reciprocity (Cropanzano & Mitchell, 2005: 876). Social exchange theory and reciprocity norm claim that employees perform extra activities both in and beyond their roles in an effort to increase the effectiveness of the organization to respond to the fair treatment they receive from organizational managers (Choudhry *et al.*, 2012: 20). In other words, when management's treatment of individuals is perceived as fair and consistent by the employee population, employees are more willing to use their qualifications to improve the organization's performance and effectiveness and help it achieve its tactical goals. When they perceive any injustice in their behavior towards them, it is highly likely that they will display negative attitudes and behaviors (Choudhry *et al.*, 2012: 20).

Ethical Dilemmas and Ethical Decision Making

People stay in situations that can be described as good or bad at every stage of their lives and try to find the right one (Elçigil et al., 2011: 52). In this quest, they generally struggle with ethical problems. Dilemma at the beginning of ethical problems; It refers to the preference problem experienced by the individual who will decide the case of two or more undesirable options depending on the conflict of values and principles (Ministry of National Education, 2015: 7). Ethical dilemmas are also frequently encountered in the health sector and affect the decision-making processes of nurses and all other healthcare professionals, especially those providing care services (Hakko & Kıvanç, 2018: 228). At the stage where nurses make a decision, they both take responsibility for the acceptable fulfillment of scientific and technical information and take on an ethical obligation to respect the human and personal value judgments of patients (Cin, 2004: 76). In this context, all healthcare professionals, especially nurses, should have the ability to make ethical decisions in the face of dilemmas. Therefore, understanding ethical sensitivity, which expresses the decision-making ability, will help both to clarify the source of ethical dilemmas and to facilitate decision-making.

Ethical Sensitivity

The fact that nurses have theoretical knowledge of professional ethics does not directly indicate that they exhibit ethically acceptable behaviors and make the right decisions (Yıldırım & Kadıoğlu, 2007: 75). Because ethical decision-making primarily depends on the development of ethical sensitivity, which expresses the ability to think morally (Orgun, 2008: 27). Ethical sensitivity, which is defined as the first component of ethical decision making in professional practice, emerged as the capacity to interpret the ethical dimension of care service, and was later made functional by Rest (1982: 29) to reflect its connection with ethical behavior rules. As a behavioral concept, ethical sensitivity is the mental representation of a phenomenon and appears as an effect, emotion or cognition that activates the emotion (Weaver, 2007: 142-142). It is central to people's prosocial behavior and encompasses the ability to reason and act based on ethical principles, as well as identifying and interpreting moral issues (Robertson *et al.*, 2007: 755). Ethical sensitivity of nurses allows them to recognize the ethical structure of their actions. In fact, the main purpose of each action should be to comply with the ethical standards of the profession. In this context, lacking or low level of ethical sensitivity may result in low quality of care that is inconsistent with nurses' professional obligations and is not ethically appropriate. Therefore, it is important to evaluate ethical sensitivity and the factors it is related to, to facilitate ethical decisions and to enable nurses to recognize the nature and scope of their professional ethical obligations (Milliken, 2018: 279).

The Relationship between Perception of Organizational Justice and Level of Ethical Sensitivity

Nurses often have to make decisions about ethical dilemmas they face. At the decision-making stage, they should exhibit behaviors in line with professional ethical principles and their decisions should be considered ethically appropriate. The fulfillment of this requirement depends on the development of ethical sensitivity levels of the employees (Ağaçdiken & Aydoğan, 2017: 122). However, this alone is not enough. To comprehend ethical decision-making within an organization, it's essential to consider organizational factors alongside the levels of moral development and different ethical theories. In other words, it is not possible to secure results and overcome unethical ones by making ethical decisions without understanding ethical sensitivity and the factors it is associated with (Johnson, 2007: 1-8). Perhaps the most important organizational factor that is thought to be related to the ethical sensitivity levels of individuals is the perception of organizational justice, which is considered among the antecedents of moral intention.

Organizational justice is of paramount importance as it is in direct contact with performance and capability among care and treatment providers. It fulfills the need of employees to perform their jobs with correct and moral feelings (Miles, 2012: 187). In other words, being treated in a way that is perceived as fair satisfies the employees' interest in fulfilling their moral and ethical obligations (Colquitt *et al.*, 2005: 6) and is a part of the context in which ethical decisions are made (Johnson, 2007: 7-8). In line with this information, it is thought that there may be a significant relationship between organizational justice and ethical sensitivity, which is the first component of decision-making.

Organizational justice has been tried to be explained by many theories in the field of social psychology. These theories are generally equality, relative deprivation, justice motive, and distribution preference theories (Tarsuslu & Coşkun, 2024: 178). Organizational justice theories have been divided into four categories derived from two conceptually independent dimensions, namely the "reactive-proactive dimension" and the "process-content dimension", and these theories have formed various theories within themselves (İçerli, 2010: 70-78). In this framework, organizational justice theories can be classified as Adams' equity theory, Deutsch's distribution theory, Leventhal's justice judgment model, Crosby's relative deprivation model, Thibaut and Walker's self-interest model, and the group value model (Dalga *et al.*, 2023: 216-212).

On the other hand, the widely used ethical decision-making model developed by Rest (1986) consists of a four-component model and reveals that adding an ethical dimension to one's decisions and behaviors results from four different processes: (i) ethical sensitivity, (ii) ethical judgment, (iii) ethical intention, and (iv) ethical action. Ethical sensitivity, defined as recognizing the existence of an ethical problem, is the first step in ethical decision-making (Zhang & Zhang, 2016: 2). Ethical sensitivity, defined as the ability to recognize the ethical content of one's decision situation, functions as a kind of trigger mechanism that initiates the ethical decision-making process. Therefore, a wide range of moderators and mediators must be examined to gain a deeper understanding of ethical decision-making, with ethical sensitivity being the primary focus in this context (Zhang & Zhang, 2016, p. 3).

In this direction, we can say that there is a theoretical framework for the relationship between organizational justice and ethical sensitivity. Indeed, from an ethical sensitivity perspective, it is assumed that personal justice norms (distributive and procedural justice norms) are directly and indirectly shaped by ethical dispositions and ethical climates (egoistic, benevolent, and principled climates) (Lau & Wong, 2009: 282). It is assumed that there is a relationship between organizational justice and ethical sensitivity and that the perception of organizational justice will have a positive effect on ethical sensitivity (Arnaud, 2010: 355).

Material and Methods

It is stated that approaches to justice are a basic tool for evaluating ethical behaviors (Naktiyok & İşcan, 2004: 187). On the other hand, institutional perceptions of justice are an essential heuristic in decision-making and are therefore part of the context in which ethical decisions are made (Johnson, 2007: 6). Therefore, ethical sensitivity, described as the first component of ethical decision-making, is expected to have a significant relationship with the perception of organizational justice. In addition, identifying the relationship between organizational justice perception and ethical sensitivity levels is expected to be crucial for both individual nurses and healthcare institutions, as well as for managers who must continuously renew and improve themselves. From this starting point, the general purpose of the research is to determine the organizational justice perceptions and ethical sensitivity levels of nurses and to determine the explanatory effect of organizational justice perception on the ethical sensitivity level. The model developed to test the aims of the research is shown in Figure 1. In line with the model, the research hypotheses are as follows:

H_1: Organizational justice perception differs according to socio-demographic characteristics.

H_2: Ethical sensitivity perception differs according to socio-demographic characteristics.

H_3: There is a relationship between organizational justice and ethical sensitivity.

H_4: Organizational justice affects ethical sensitivity.

The universe of the research is 877 nurses working in a public hospital and two private hospitals operating in Sakarya; the sample consists of 250 nurses who agreed to participate. A stratified sampling method was used and participants were reached through convenience sampling (Karasar, 2023: 96). In order to carry out the research, firstly, an approval document was obtained from the Sakarya University Ethics Committee stating that the research was in compliance with ethical principles. Quantitative analysis methods were preferred as data collection tools within the scope of the research, and in this context, the "Organizational Justice Scale" developed by Niehoff & Moorman (1993), the "Moral Sensitivity Questionnaire" developed by Lützén et al. (1997) and a questionnaire containing questions to determine the demographic characteristics of nurses. A questionnaire form was used. In the analysis of the data obtained from the study, by using the IBM SPSS Statistics program; descriptive statistical methods, independent samples t-test, one-way analysis of variance, correlation analysis, and regression analysis were used.

Organizational Justice Scale

To measure the participants' perceptions of organizational justice, the 'Organizational Justice Scale' developed by Niehoff and Moorman (1993) and adapted into Turkish by Fatma Yıldırım (2002) was used. The scale, which consists of a total of 20 statements and 3 main components: distributive justice, procedural justice, and interactional justice, is designed in a 5-point Likert scale (1=Strongly Disagree, 5=Strongly Agree). The scale includes statements such as "I think my salary is fair", "I think my workload is fair", and "My managers explain every

decision about my job to me clearly". The organizational justice scale consists of 3 dimensions (distributive justice, procedural justice, interactional justice) and 20 items. The Cronbach Alpha value of the scale was found to be 0.96. In recent studies conducted in different sectors, the reliability of the scale is consistent and Cronbach's alpha coefficient is between 0.94 and 0.97 (Mamacı *et al.*, 2020: 29; Sakallı & Örücü, 2020: 260; Örücü *et al.*, 2021: 607; Avcı & Karataş, 2022: 43; Durmuş & Erbaşı, 2022: 605; Gönül & Özdinç, 2022: 983; Korkmaz, 2023: 3088).

Moral Sensitivity Questionnaire

To determine the level of ethical sensitivity, the 'Moral Sensitivity Questionnaire', which was developed by Kim Lutzen (1994) and adapted to Turkish by Hale Tosun (2005) after validation and reliability, was used. The questionnaire, which includes 30 statements in total, consists of 6 basic components: autonomy, beneficence, holistic approach, conflict, application, and orientation. After Lutzen's factor analysis, items 3, 23, and 26 were not included in the sub-dimension. The statements were designed on a 5-point Likert scale, with 1 point being strongly disagree and 5 points being strongly agree. The scale includes statements such as "It is important that I get a positive response from the patient in everything I do, "I believe that good care includes respecting the patient's self-choice", and "I think that good care often involves making decisions for the patient".

The Moral Sensitivity Questionnaire consists of 6 dimensions (autonomy, benefit, holistic approach, conflict, practice, orientation) and 30 items. The Cronbach Alpha value of the scale was found to be 0.82. In similar studies conducted in the health sector, it is seen that the scale is reliable and Cronbach's alpha coefficient is similar to this study (Pekcan, 2007: 21; Çetin & Çimen, 2011: 90; Duran et al., 2018: 98; Palazoğlu & Koç, 2019: 812-813; Tekiş, 2023: 29).

Results

When the distribution of data according to socio-demographic characteristics is examined; it is seen that the variable with the highest proportional difference is the gender of the participants (Table 1). Accordingly, 83.2% of the participants are women and 16.8% are men. When their educational status is examined, it is seen that the majority of them are graduates (39.6%), followed by high school (31.2%). These results show parallelism with previous studies on nurses (Filizöz *et al.*, 2015: 52; Nas, 2017: 20). On the other hand, considering the characteristics of health institutions, it can be said that the demographic data obtained from the study is compatible with both the sample group and the personnel structure of the health institutions in general.
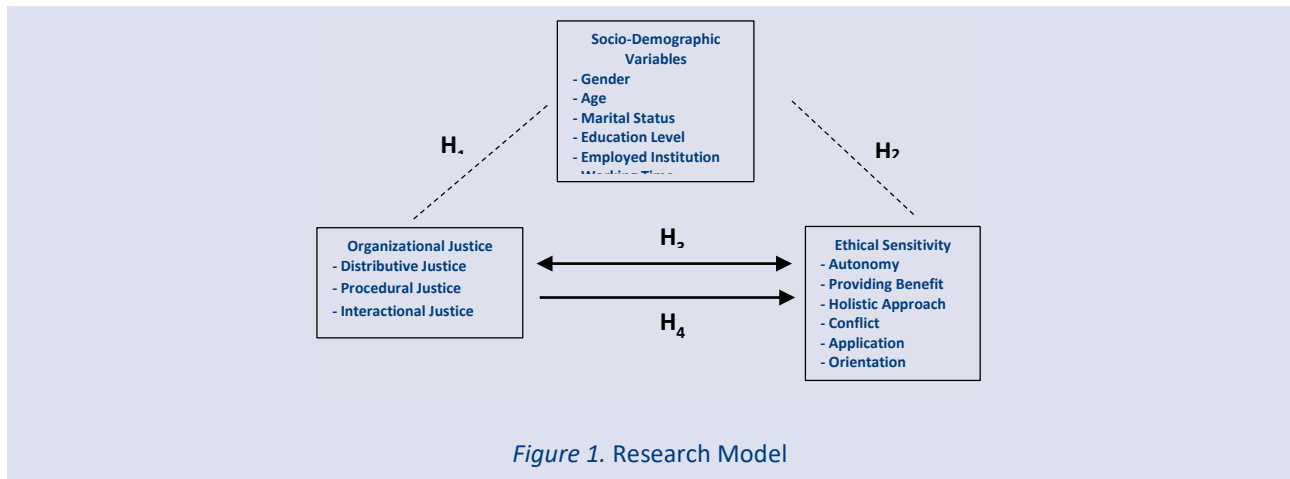

Figure 1. Research Model

Table 1. Socio-Demographic Characteristics

	Characteristics	(n)	(%)
Sex	Female	208	83,2
	Male	42	16,8
Marital Status	Married	135	54,0
	Single	115	46,0
Age	20-25	96	38,4
	26-30	64	25,6
	31-35	47	18,8
	≥ 36	43	17,2
Education	High school	78	31,2
	Undergraduate	49	19,6
	Graduate	99	39,6
	Postgraduate	24	9,6
Employed Institution	Private Hospital	127	50,8
	Public Hospital	123	49,2
Working Time	< 1 year	46	18,4
	1-5 years	123	49,2
	6-10 years	41	16,4
	11-15 years	24	9,6
	≥ 16 years	16	6,4

Table 2. Difference Analysis Results

Sex											
Female	13,55	17,84	29,40	60,80	25,43	13,99	18,82	8,12	13,09	16,04	95,52
Male	13,04	18,00	29,80	60,85	25,85	12,95	18,97	7,95	13,88	15,97	95,59
t	,557	-,161	-,297	-,018	-,673	2,512	-,365	,477	-,177	,169	-,036
p	,578	,872	,767	,986	,502	**,013**	,716	,634	,077	,866	.971
Marital Status											
Married	13,54	18,04	29,68	61,27	24,97	13,64	18,76	8,14	13,18	15,71	94,42
Single	13,39	17,66	29,21	60,26	26,13	14,02	18,95	8,05	13,27	16,40	96,84
t	,218	,520	,461	,448	-,249	-,121	-,631	,317	-,279	-,231	-,175
p	,828	,603	,646	,655	**,013**	,226	,529	,751	,780	**,021**	,081
Employed Institution											
Private	15,64	20,51	32,92	69,07	26,44	13,96	19,31	7,96	13,44	16,37	97,49
Public	11,22	15,13	25,91	52,27	24,54	13,67	18,37	8,24	13,00	15,67	93,52
t	7,095	8,245	7,606	8,543	4,202	,911	3,135	-,101	1,307	2,398	2,926
p	**,000**	**,000**	**,000**	**,000**	**,000**	,363	**,002**	,309	,193	**,017**	**,004**
Education											
High school	15,28	19,94	32,06	67,29	26,11	13,98	18,98	7,98	13,29	16,11	96,48
Undergraduate	15,97	20,32	32,77	69,08	26,22	14,26	19,22	8,14	13,67	16,18	97,71
Graduate	11,53	16,06	27,11	54,70	24,53	13,47	18,62	8,10	12,97	15,65	93,37
Postgraduate	10,45	13,54	24,04	48,04	26,08	13,79	18,58	8,37	13,12	17,00	96,95
F	15,47	16,52	13,73	18,42	3,955	1,290	,856	,198	,794	2,358	2,320
p	**,000**	**,000**	**,000**	**,000**	**,009**	,278	,464	,898	,498	,072	,076
Working Time											
< 1 year	14,23	17,17	29,45	60,86	25,60	13,91	19,04	8,23	13,28	16,47	96,56
1-5 years	14,13	18,55	30,46	63,14	26,07	13,81	18,97	8,19	13,42	16,22	96,70
6-10 years	12,63	17,48	28,09	58,21	24,82	13,60	18,43	7,60	12,85	15,73	93,07
11-15 years	12,08	17,75	28,41	58,25	23,87	13,75	18,33	8,12	12,70	14,75	91,54
≥ 16 years	10,43	15,75	27,00	53,18	25,06	14,25	19,18	8,18	13,31	15,93	95,93
F	2,664	1,175	1,249	1,649	2,368	,212	,804	,617	,620	2,679	1,814
p	**,033**	,322	,291	,163	,053	,931	,523	,651	,649	**,032**	,127

According to the descriptive statistical analysis results, high scores indicate high organizational justice perception and ethical sensitivity, while low scores indicate low organizational justice perception and ethical sensitivity. The general organizational justice average was found to be 60.81±17.65, which indicates the moderate organizational justice perception of the participants. The mean of the sub-dimensions ranged from 13.47±5.40 to 29.47±8.05. The general average of the ethical sensitivity questionnaire was found to be 95.54±10.90, which indicates that the ethical sensitivity levels of the participants are in good condition. When the averages of the dimensions were compared with the maximum scores, the lowest participation was in the conflict dimension with 8.10±2.19, and the highest participation was in the orientation dimension with 16.03±2.34.

Table 2 shows the analysis results, highlighting whether there is a difference in organizational justice perceptions and ethical sensitivity levels according to the socio-demographic characteristics of the participants. There was no statistically significant difference in organizational justice perceptions and ethical sensitivity levels according to the gender variable (p>0.05). However, a statistically significant difference was found in the benefit sub-dimension of ethical sensitivity (p<0.05). Accordingly, it is seen that women (x̄=13.99) have a higher level of benefit than men (x̄=12.95). In line with this information, the H₁ hypothesis was rejected according to the gender variable, while the H₂ hypothesis was accepted only for the benefit sub-dimension and was rejected for the other dimensions.

There was no significant difference in organizational justice perceptions and ethical sensitivities according to the marital status of the participants (p>0.05). On the other hand, there is a statistically significant difference in the autonomy and orientation dimensions of ethical sensitivity (p<0.05). It is seen that the autonomy and orientation levels of the married ones are lower than the single ones. While the H₁ hypothesis was rejected according to marital status, the H2 hypothesis was accepted for autonomy and orientation sub-dimensions and rejected for other dimensions.

There is a statistically significant difference in the organizational justice perceptions and ethical sensitivity levels of the participants according to the institution they work for (p<0.05). Considering the sub-dimensions of the scales, significant differences were found in all sub-dimensions of organizational justice and in the sub-dimensions of autonomy, holistic approach, and orientation (p<0.05). In all of the groups with differences, the average of those working in private hospitals is higher than those working in the public sector. H₁ and H₂ hypotheses were accepted according to the variable of the institution studied.

There was no statistically significant difference in the scales and sub-dimensions according to age groups (p>0.05). H₁ and H₂ hypotheses were rejected according to age groups.

While there were significant differences in the general organizational justice perceptions and all sub-dimensions according to the educational status of the participants, a significant difference was found only in the autonomy sub-

dimension of the ethical sensitivity level (p<0.05). Post-Hoc analysis was performed to determine from which groups the difference originated. Accordingly, in organizational justice perceptions, high school, graduate, and postgraduate; It was determined that there was a difference between undergraduate, graduate, and postgraduate groups. Organizational justice levels of those with high school (x̄=67.29) are higher than those with graduate (x̄=54.70) and postgraduate degrees (x̄=48.04). Organizational justice levels of those with an undergraduate (x̄=69.08) are also higher than those with a graduate (x̄ =54.70) and postgraduate (x̄=48.04). This result is similar in general organizational justice and all its sub-dimensions. On the other hand, the significant difference in the autonomy sub-dimension of ethical sensitivity is between high school and graduate; It was determined that it was between undergraduate and graduate groups. It was determined that the level of autonomy of those with a high school (x̄=26.11) and undergraduate (x̄=26.22) education level was higher than those with a graduate (x̄=24.53). According to these results, while the H_1 hypothesis is accepted in terms of educational status. The H_2 hypothesis was accepted only for the autonomy sub-dimension and was rejected for the other dimensions.

No significant difference was found in the organizational justice perceptions and ethical sensitivity levels of the participants according to their working time in the institution (p>0.05). However, when looking at the sub-dimensions of the scales; there is a significant difference between the just distribution sub-dimension of organizational justice and the orientation sub-dimension of ethical sensitivity. The difference in the fair distribution size; It arises from those who work for 16 years or more, those who work less than 1 year and those who work between 1 and 5 years. It has been determined that the perceptions of employees who are 16 years and over (x̄=10.43) towards fair distribution are lower than those who work less than 1 year (x̄=14.23) and 1-5 years (x̄=14.13). The difference in the orientation dimension arises from those who work between 11-15 years, those who work less than 1 year, and those who

work between 1-5 years. Orientation levels of employees between 11-15 years (x̄=14.75) are lower than those who work less than 1 year (x̄=16.47) and 1-5 years (x̄=16.22). According to this information, the H_1 hypothesis was accepted only for the fair distribution dimension in terms of study time and was rejected for the other dimensions. The H_2 hypothesis was accepted for the orientation sub-dimension and rejected for the other dimensions.

In the correlation analysis performed to analyze the interrelationships between the organizational justice and ethical sensitivity variable in the study and its sub-dimensions, the relations between the variables were examined and the Pearson correlation coefficient was used in this direction (Table 3). According to the results of the analysis, it was determined that there is a positive low-level relationship between organizational justice perceptions and ethical sensitivity levels (r=0.295; p<0.01). Autonomy (r=0.276; p<0.01), benefit (r=0.213; p<0.01), holistic approach (r=0.325; p<0.01) and orientation, which are sub-dimensions of organizational justice and ethical sensitivity (r=0.279; p<0.01), a low correlation was found between their dimensions. There was no significant relationship between organizational justice and conflict and practice dimensions. In addition, when looking at the sub-dimensions of the scales; no relationship was found between the sub-dimensions of organizational justice and the dimensions of conflict and practice (p>0.05). A positive and significant relationship was found between all other dimensions. Although there is a positive low-level (r=0.359; p<0.01) relationship between the fair distribution sub-dimension of organizational justice and the orientation sub-dimension of ethical sensitivity, it has the highest correlation between the dimensions when compared with the whole analysis. On the other hand, when the table is examined, it is seen that the sub-dimensions of the scales are in a positive and significant relationship among themselves. In line with this information, the H_3 hypothesis was accepted. However, the findings of the study did not support the hypothesis in the conflict and practice dimensions of ethical sensitivity.

Table 3. The Relationship between Organizational Justice and Ethical Sensitivity

Variables	1	2	3	4	5	6	7	8	9	10	11
1.Organizational Justice	1	,869**	,922**	,945**	,295**	,276**	,213**	,325**	,008	,081	,279**
2.Distributive Justice		1	,718**	,716**	,334**	,316**	,198**	,332**	,022	,112	,359**
3.Procedural Justice			1	,819**	,240**	,229**	,181**	,266**	,027	,065	,193**
4.Interactional Justice				1	,249**	,229**	,205**	,297**	-,017	,055	,231**
5.Ethical Sensitivity					1	,844**	,667**	,680**	,536**	,611**	,733**
6.Autonomy						1	,388**	,500**	,302**	,486**	,605**
7.Benefit							1	,385**	,364**	,222**	,448**
8.Holistic Approach								1	,140*	,262**	,520**
9.Conflict									1	,273**	,245**
10.Practice										1	,200**
11.Orientation											1

** Correlation is significant at the 0.01 level (2-tailed);
* Correlation is significant at the 0.05 level (2-tailed).

Table 4. The Effect of Organizational Justice on Ethical Sensitivity

Independent Variable	Unstandardized Coefficients		Standardized Coefficients	t	p	R	R²	F	t
	β	±	β						
(Constant)	84,470	2,373		35,594	0,000	0,295	0,087	23,586	0,000[a]
Organizational Justice	0,182	0,037	0,295	4,487	0,000				
(Constant)	21,999	0,806		27,278	0,000	0,276	0,076	20,518	0,000[b]
Organizational Justice	0,058	0,013	0,276	4,530	0,000				
(Constant)	11,997	0,552		21,745	0,000	0,213	0,046	11,841	0,001[c]
Organizational Justice	0,030	0,009	0,213	3,441	0,001				
(Constant)	16,149	0,520		31,053	0,000	0,325	0,106	29,289	0,000[d]
Organizational Justice	0,044	0,008	0,325	5,412	0,000				
(Constant)	8,040	0,500		16,064	0,000	0,008	0,000	0,016	0,901[e]
Organizational Justice	0,001	0,008	0,008	0,125	0,901				
(Constant)	12,500	0,595		21,000	0,000	0,081	0,006	1,621	0,204[f]
Organizational Justice	0,012	0,009	0,081	1,273	0,204				
(Constant)	13,785	0,512		26,931	0,000	0,279	0,078	20,880	0,000[g]
Organizational Justice	0,037	0,008	0,279	4,569	0,000				

Dependent Variables: a) Ethical sensitivity, b) Autonomy, c) Benefit, d) Holistic approach, e) Conflict, f) Practice, g) Orientation

Table 5. The Effect of Sub-Dimensions of Organizational Justice on Ethical Sensitivity

Independent Variable	Unstandardized Coefficients		Standardized Coefficients	t	p	R	R²	F	t
	β	±	β						
(Constant)	84,470	2,373		35,594	0,000	0,295	0,087	23,586	0,000[a]
Distributive Justice	0,182	0,037	0,295	4,487	0,000				

Dependent Variables: a) Ethical sensitivity

After revealing the relationship between the perception of organizational justice and ethical sensitivity with correlation analysis, the effects of organizational justice on ethical sensitivity and its sub-dimensions (autonomy, benefit, holistic approach, conflict, practice and orientation) were tried to be determined by using the enter regression analysis method. As seen in Table 4, organizational justice has ethical sensitivity (F=23.586; p=0.000), autonomy (F=20.518; p=0.000), benefit (F=11.841; p=0.000), holistic approach (F=29.289; p=0.000), and their models revealing the effect on orientation (F=20.880; p=0.000) are significant and positive. Models showing the effect of organizational justice on conflict (F=0.016; p=0.901) and implementation dimensions (F=1.621; p=0.204) are meaningless. On the other hand, the correlation coefficient of the model showing the effect of organizational justice on ethical sensitivity was found to be 0.295, and the explained variance is 8.7% of the total variance. Accordingly, although the model is significant, its explanatory effect is low. Likewise, the explanatory effects of organizational justice on the sub-dimensions are at low levels. The correlation coefficient was found to be the highest in the holistic approach dimension (0.325), explaining 10.6% of the total variance. In line with these findings, although the H₄ hypothesis of our research was rejected in terms of conflict and practice sub-dimensions; generally accepted in terms of ethical sensitivity and other sub-dimensions.

In Table 5, the effect of the sub-dimensions of organizational justice on ethical sensitivity was tried to be revealed by using the stepwise regression analysis method, which is one of the multiple regression models developed gradually. According to the model, only the effect of fair distribution on ethical sensitivity was found significant in the first stage (F=31.113; p=0.000); since the dimensions of fair dealing (p=0.999) and fair interaction (p=0.809) did not have a significant effect on ethical sensitivity, the model did not develop after this stage. The beta coefficient of fair distribution was found to be 0.334. This variable has a significant and positive effect on ethical sensitivity; even though at a low level, and explains 11.1% of the total variance.

Discussion and Conclusion

In the study, analyzes were carried out on two main variables. The first of these variables is the perception of organizational justice. While the averages of the sub-dimensions of organizational justice ranged between 13.47±5.40 in distributive justice, 17.86±5.80 in procedural justice, and 29.47±8.05 in interactional justice; the general organizational justice average was found to be 60.81±17.65. Considering the maximum score that can be obtained from the scale, it was concluded that the organizational justice perceptions of the participants were moderate, and it was determined that the highest average was in interactional justice. In the studies of Akman (2017: 40) and Abbasoğlu (2015: 65), the higher averages of organizational justice in the dimension of interactional justice support the current study. Another variable used in the study is the level of ethical sensitivity. When we look at the mean scores of ethical sensitivity, the results of the

current study show some variation with the study of Hale Tosun (2005: 50), who adapted the scale into Turkish. In Tosun's study (2005: 51), the participants' mean ethical sensitivity score was 85.23±18.84, while in the current study, it was found to be higher with an average of 95.54±10.90. When the sub-dimension mean scores were compared with the minimum-maximum scores that could be obtained, the highest sensitivity was found in the orientation dimension (16.03±2.34), and the holistic approach followed (18.85±2.41); it was determined that the lowest sensitivity was in the conflict sub-dimension (8.10±2.19). These results show parallelism with the study of Kırılmaz et al. (2015: 77). In Tatlı's study (2018: 34), the highest average was found in the conflict sub-dimension, which supports the current study as high scores indicate low ethical sensitivity. According to the results obtained from the research, it can be said that the ethical sensitivity levels of the participants are above the medium level. However, the fact that the mean scores of the conflict sub-dimension and the implementation sub-dimensions, which express that one can stay in ethical dilemmas in the decisions made and that there may be contradictions in the point of what is the right action, are close to each other, shows that measures should be taken to feed ethical sensitivity positively.

According to the analysis results, there is no significant difference on the organizational justice perceptions of the participants according to their gender. In the studies conducted by Abbasoğlu (2015: 67), Akman (2017: 44) and Kuzucu (2013: 45), the perception of organizational justice does not show a significant difference according to the gender variable. In Çetinel's study, the distributive justice level of men was found to be higher than that of women (Çetinel, 2018: 184). When the difference on the ethical sensitivity of the participants according to their gender was examined, a statistically significant difference was found on the benefit sub-dimension of ethical sensitivity. Accordingly, women have a higher level of benefit than men. This result is not surprising, as women's structural sensitivity may facilitate their ability to burden themselves with being helpful as a responsibility. Compared to the literature, it was determined in the study of Tosun that female nurses have a higher level of benefit (Tosun, 2005: 59). In the study conducted by Ergene, it was found that women's conflict sub-dimension scores were higher than male nurses (Ergene, 2012: 41).

According to the marital status of the participants, no difference was found regarding the perception of organizational justice and its sub-dimensions. Studies by Uysal (2018: 177) and Çetinel (2018: 185) show parallelism with the current study in terms of differences according to marital status. On the other hand, significant differences were found in the autonomy and orientation sub-dimensions of ethical sensitivity according to marital status. According to this difference, the autonomy and orientation levels of those who are single are higher than those who are married. The reason why the autonomy and orientation dimensions, which express the ability to act independently by turning the decisions they make into

action, and to consider it important to involve the patient in the decision-making process, show a higher average in the singles, is that the singles have a more comfortable decision-making mechanism than the married ones. While no significant difference was found according to marital status in many studies examined in the literature (Kırılmaz et al., 2015: 80; Arslan et al., 2010: 78); in Aksu & Akyol's study, the ethical sensitivity levels of those who were single were found to be lower than the ethical sensitivity levels of those who were married (Aksu & Akyol, 2011: 19). In the study conducted by Tazegün, the benefit level of single nurses was found to be lower than that of married nurses (Tazegün, 2013: 25).

Significant differences were found on the organizational justice perceptions and sub-dimensions of the participants according to the institution they work for. Accordingly, the perceptions of employees in private hospitals regarding general organizational justice and its sub-dimensions were determined at a higher level than those working in public hospitals. Considering the working conditions of private hospitals, this result suggests that the answers to the questionnaires may not be completely objective. Considering the differences in ethical sensitivity according to the institution, significant differences were found in other dimensions, except for the sub-dimensions of benefit, practice and conflict. According to this, although there is no big difference between the averages, it has been concluded that the ethical sensitivity levels of the employees in private hospitals are higher than those working in public hospitals. Since the portfolio of the employees in the private hospital consists mostly of new graduates, it was thought that such a result could arise because their theoretical knowledge was still fresh. In Pekcan's study, it was observed that the ethical sensitivities of nurses working in health centers were higher than nurses working in private hospitals (Pekcan, 2007: 35).

According to the results of the study, no significant relationship was found between the age groups of the participants on the perception of organizational justice and its sub-dimensions. Studies by Uysal (2018: 178) and Abbasoğlu (2015: 68) also support the current study. Likewise, it does not make any difference in ethical sensitivity levels. Although there are studies supporting this situation in the literature (Ergene, 2012: 40; Karaca & Yalvaç, 2016: 54), the level of ethical sensitivity generally differs according to the age variable in many previous studies. In Pekcan's study, it was found that orientation decreased in the 20-30 and 41-50 age groups as the age progressed, but increased after 51 years and over; At the same time, it was observed that the holistic approach increased with age (Pekcan, 2007: 30). According to Rest (1982: 29), ethical sensitivity develops with age. The present study does not show results consistent with this literature information.

The educational status of the participants creates significant differences in the perception of organizational justice and all its sub-dimensions. Accordingly, it was determined that the perceptions of the participants with

high school education about general organizational justice and its sub-dimensions were at a higher level than those with bachelor's and postgraduate education. Likewise, organizational justice perceptions of those with an associate degree education are higher than those with a bachelor's and postgraduate. In other words, organizational justice perceptions remained at a lower level with the progress of educational status in the study. It is thought that this situation is due to the fact that employees become more skilled and educated, gain a questioning identity compared to those with low educational status, as well as increased demands for better working conditions and fair treatment. When the difference on ethical sensitivity levels according to educational status was examined, a significant difference was found only in the sub-dimension of autonomy. Accordingly, it was observed that the autonomy levels of those with high school and associate degree education were higher than those with bachelor's degrees. Since bachelor's education is considered important for nurses in terms of comprehending professional ethical values and exhibiting behaviors appropriate to these values, it is thought that much more emphasis should be given to them.

According to the working time of the participants, there was no difference in general organizational justice perceptions; a significant difference was found in the fair distribution sub-dimension. According to this, the perceptions of fair distribution of the participants who have worked for 16 years, or more are lower than those who have worked for less than 1 year and between 1-5 years. This result is in parallel with the studies of Çetinel (2018: 189) and Uysal (2018: 179). When the difference in ethical sensitivity was examined, a significant difference was found only in the orientation sub-dimension. Accordingly, it was concluded that the orientation levels of those with 11-15 years of employment were lower than those with a working period of less than 1 year and between 1-5 years. Weaver, Morse, and Mitcham argued that with the increase in the professional experience of healthcare professionals, ethical behavior and critical thinking tendencies will also increase (Weaver *et al.*, 2008: 610). This information does not match the results of the study.

A positive and significant relationship was found between the organizational justice perceptions of the participants and their ethical sensitivity levels and a significant positive effect of organizational justice on ethical sensitivity. Even if the relationship and influence dimension is low, it is expected that there will be an increase in ethical sensitivity levels when the organizational justice perceptions of the participants are increased positively. On the other hand, perceived organizational injustice among employees may cause them to make mistakes in service delivery and often face ethical problems. Ethical sensitivity is expected to be at a high level so that they can identify ethical problems and make the right decision. In this context, it is necessary to create fair working conditions that will positively improve the ethical sensitivity of the employees. Being able to do this also encourages employees to fully devote themselves to their work and not make mistakes. Identifying the source of ethical dilemmas and wrong decisions is considered extremely important in institutions characterized by fierce competition, especially in healthcare institutions where tolerating mistakes will cause serious problems. The concept of justice, which has emerged at this point, has been an important place among the theories related to ethics for many years, and this has been supported by the current study.

Considering the positive relationship between organizational justice and ethical sensitivity, and the explanatory effect of organizational justice on ethical sensitivity, in order to develop ethical sensitivity positively, the gains obtained by the employees should be purified from personal interests and the procedures should be carried out fairly. In addition, corrective and preventive actions should be taken for perceived organizational injustice and low ethical sensitivity. As in all social organizations, managers are primarily responsible for creating a culture that will develop a fair working environment and ethical behaviors in health institutions. Corporate managers can promote fair perceptions and ethical values by making face-to-face assessments of any perceptual or ethical situation experienced by their employees and providing feedback on how the situation can best be handled. In addition, managers' avoidance of wrong and favorable behaviors, increasing perceived organizational justice by fulfilling the corporate management policy fairly, and listening to the problems thoroughly can contribute to this process. In addition to considering the personal or institutional factors that may affect the perception of organizational justice and therefore ethical sensitivity, it is considered important to include ethical sensitivity in in-service training programs and provide consultancy to employees to provide ethical frameworks. These results are considered important in terms of hospital administrators' ability to evaluate their employees according to fair perceptions and ethical sensitivity levels.

In the current study, which is thought to have an important place in the literature to integrate justice and ethics more, the relationship between organizational justice perception and ethical sensitivity could only be determined by nurses. Since there is no previous study on this subject, it may be useful for future researchers who plan to work on organizational behavior and ethics to conduct studies using different variables that may be related to ethical sensitivity or variables that may play a mediating role in the relationship between organizational justice and ethical sensitivity and to expand the scope of the study by addressing larger population-sample groups. In this way, a more general result can be contributed to the field to determine the relationship between organizational justice perception and ethical sensitivity.

Contribution Rates and Conflicts of Interest

Etik Beyan	Bu çalışmanın hazırlanma sürecinde bilimsel ve etik ilkelere uyulduğu ve yararlanılan tüm çalışmaların kaynakçada belirtildiği beyan olunur.	**Ethical Statement**	It is declared that scientific and ethical principles have been followed while carrying out and writing this study and that all the sources used have been properly cited.
Yazar Katkıları	Çalışmanın Tasarlanması: SH(%60) – HK(%40) Veri Toplanması: SH(%60) – HK(%40) Veri Analizi: SH(%60) – HK(%40) Makalenin Yazımı: SH(%60) – HK(%40) Makale Gönderimi ve Revizyonu: SH(%60) – HK(%40)	**Author Contributions**	Research Design: SH(%60) – HK(%40) Data Collection: SH(%60) – HK(%40) Data Analysis: SH(%60) – HK(%40) Writing the Article: SH(%60) – HK(%40) Article Submission and Revision: SH(%60) – HK(%40)
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Telif Hakkı & Lisans	Yazarlar dergide yayınlanan çalışmalarının telif hakkına sahiptirler ve çalışmaları CC BY-NC 4.0 lisansı altında yayımlanmaktadır.	**Copyright & License**	Authors publishing with the journal retain the copyright to their work licensed under the CC BY-NC 4.0

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