

Organizational Justice and Mental Health: Key Concerns in Public Sector Healthcare Setting

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Justice or equity perception is the key concern for the employees within any organization. It has found it to be a major building block for a better organization. Healthcare is a distinctive profession which plays a major role in providing consistent and high-quality care for patients, promoting the public image of the organization and improving patients' satisfaction. In order to achieve this, the healthcare employees have to deal with the justice or fairness issues at workplace which can have detrimental effect on their physical and mental health. Hence, the objective of this study was to examine the relationship between four dimensions of organizational justice (procedural, distributive, interpersonal and informational justice) and mental health among healthcare professionals in India. In this study 240 healthcare employees participated. The data were analyzed using correlation coefficient and regression analysis. Overall organizational justice was found to have a significant relationship with mental health, with some of its dimensions including distributive and procedural justice, while the other two dimensions remain non-significant.

Keywords: Organizational justice, procedural justice, distributive justice, interactional justice and mental health

This paper is an attempt to apply organizational justice theory in the healthcare sector milieu and aspires to fill the void regarding the literature on healthcare professionals' mental health, with the emphasis on organizational factors contributing to it. In the last few years, the work culture has thoroughly shifted towards an innovation-driven mode, and employees are gradually working with their heads rather than with their hands. This contemporary organizational culture can be portrayed by continuous modifications, sometimes creating a worthless burden for employees, organizations, and the whole economy. Hence, the mental health of the employees is way more important than their physical health. There are numerous studies from the decades showing escalating depression,

occupational stress, decreasing performance, turn-over intentions, and various mental health issues among employees as common trends. Therefore, the term mental health is gaining attention from the administration as well because of its significance in creating obstacles to growth.

Need for mental health and organizational justice in public healthcare organizations in India

Mental health is defined as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (WHO, 2001a, p. 1). Mental health in the workplace refers to having positive self-worth, being self-determined and motivated to achieve organizational goals, spending mental energy on significant things, enhancing competencies for better performance, and having the ability to cope with difficulties. The present scenario has placed ever-higher demands on employees and their employers. The workplace stressors have detrimental effects for employees since they can intensify the physical and mental health problems among employees (Bonde, 2008; Eller, Netterstrøm, Gyntelberg et al., 2009;

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Madsen & Rugulies, 2021; Montazeralfaraj, Mahmoodian, Fallahzadeh, & Bahrami, 2018; Ndjaboué, Brisson & Vézina, 2012; Piao, Xie, & Managi, 2022). Particularly, the prevalence of psychosomatic distress is predominantly high for healthcare professionals because of their busy working schedules, workforce shortages, overburdened emergency rooms, the extent of their responsibility in delivering quality patient care, and interpersonal conflicts. Hence, in order to avoid medical errors and improve the quality of the healthcare system, one has to essentially reduce the undue occupational pressure considerably for organizations like healthcare institutions, which render important services dealing with the health and lives of people. (Montazeralfaraj et al., 2018). Few studies reveal that by improving stress related to organizational justice, mental health can be managed effectively since justice at the organizational level is negatively related to psychological distress, job dissatisfaction, hostility, and turnover intentions (Brockner & Wiesenfeld, 1996; Chory & Hubbell, 2008; Loi, Yang, & Diefendorff, 2009; Elovainio, Kivimaki, & Helkama, 2001).

This study is an attempt to understand the relationships between organizational justice and mental health among healthcare professionals in India. Therefore, it was investigated whether or not organizational justice is an independent factor in mental health among healthcare professionals in India. Since organizational justice is the study of people's perception of fairness, which plays an important role in enhancing the health and well-being of employees (Brockner & Wiesenfeld, 1996; Elovainio et al., 2001), the role of justice in relation to mental health becomes more important. Organizational researchers are consistently finding that the relationship of organizational justice to employees' mental and physical health is significant (Elovainio et al., 2001; Greenberg, 2004, 2006; Moliner, Martinez-Tur, Peiro, Ramos, & Cropanzano, 2005; Ndjaboué, Brisson, & Vézina, 2012). Previous research also suggests that low perceived justice is related to factors that influence susceptibility to illness (Eguchi, Tsutsumi, Inoue, & Kachi, 2019; Ndjaboué, Brisson, & Vézina, 2012). Low justice has also been shown to increase the risk of mental distress, psychiatric disorders, sickness absence, and poor self-rated health status (Boer, Bakker, Syroit, & Schaufeli, 2002; Elovainio, Kivimaki, & Vahtera, 2002; Kivimaki, Elovainio, Vahtera, & Ferrie, 2003a; Elovainio et al.,

2005). In general, procedural, interactional, and distributive elements of justice have all been found to have strong influences on employee mental health at the individual level.

Although prior studies have paid a great deal of attention to organizational justice research, very few attempts have been made to empirically explore the relationships among various aspects of organizational justice (distributive justice, procedural justice, and interpersonal and informational justice) and mental health in the healthcare sector. Till now, very little is known about the justice issues among employees in healthcare in the Indian milieu. However, this kind of exclusion is fairly critical and unreasonable since the problems related to the mental health of these employees have a strong direct and indirect effect on the quality of healthcare services and the overall financial performance of the healthcare sector.

Taking into consideration all the facts, the present study intends to address the issue of organizational justice to increase the sustainable competitive advantage through the mental health of the healthcare sector.

Hypotheses

A. Procedural Justice and mental health:

Procedural justice deals with the procedures that the organization utilizes to come to a decision. Research suggests that the employees' lack of control over the rules, procedures, and decision-making intensifies their level of anxiety and depressive symptoms (Ybema & van den Bos, 2010), which contribute negatively to their mental health (Elovainio et al., 2001, 2005; Judge & Colquitt, 2004; Kausto et al., 2005). therefore causing health complaints and absenteeism (Boer et al., 2002; Elovainio et al., 2005). Thus, it was predicted that:

H1. Procedural justice will be positively associated with employee mental health.

B. Distributive Justice and mental health:

Distributive justice refers to people's perceptions of the fairness of the outcomes (such as pay, job security, office space, supervision, reward, promotion, and layoffs) they receive relative to their contributions and to the outcomes and contributions of others (Abdul Rauf, 2014; Ambrose, 2002; Burney, Henle, & Widener, 2008). Employees aspire to be impartially and evenhandedly rewarded for their own efforts (Cropanzano, Rupp, Mohler, & Schminke, 2001; Meindi, Iyer, & Graham, 2019). Thus, underpayment inequity causes perceived injustice, and it must be a source of

stress for employee well-being (Alwin, 1987; Greenberg, 2004).

Taken together, it was predicted that:

H2. Distributive justice will be positively related to employees' mental health.

C. Interactional Justice and mental health:

Interactional justice emphasizes the importance of truthfulness, respect, and justification as fairness criteria in interpersonal communication. It focuses on the quality of interpersonal treatment (interpersonal justice) that employees have received from the authority when procedures were implemented (Bies & Moag, 1986) and the appropriate explanation of decision-making procedures (informational justice) (Greenberg, 1990).

Research suggests that employees' opinion of the stress at the workplace is strongly influenced by the interpersonal justice they received (Judge & Colquitt, 2004; Moliner, Martínez-Tur, Ramos, Peiró, & Cropanzano, 2008); therefore, it is related to employee mental health. Thus, it can be hypothesized that:

H3. Interpersonal justice will be positively associated with employee mental health.

However, the research done till now does not support the direct relationship between informational

justice and employee well-being. In a few studies, it was found that all four dimensions of organizational justice have significant associations with the psychological health of employees; thus, providing timely, honest, and accurate information to the employees is likely to lead to better well-being (Lawson, Petersen, Cousins, & Handfield, 2009; Heponiemi et al., Kuusio, Sinervo, & Elovainio, 2011).

Since the existing literature does not provide convincing results on the direct relationship between informational justice and employee well-being, more research is needed to explore the liaison between the two. Thus, it was predicted:

H4. Informational justice will be positively associated with employee well-being.

H5. Overall organizational justice will be positively associated with employee mental health.

In brief, regardless of having entrenched literature on organizational justice, only a few studies focus on the relationship between organizational justice and employees' mental health in the healthcare sector. There is also debate in the literature in relation to which dimensions of organizational justice will contribute the most to improvement in employees' mental health. This study adds to this debate by attempting to explain the above inconsistent findings using empirical evidence from the healthcare sector.

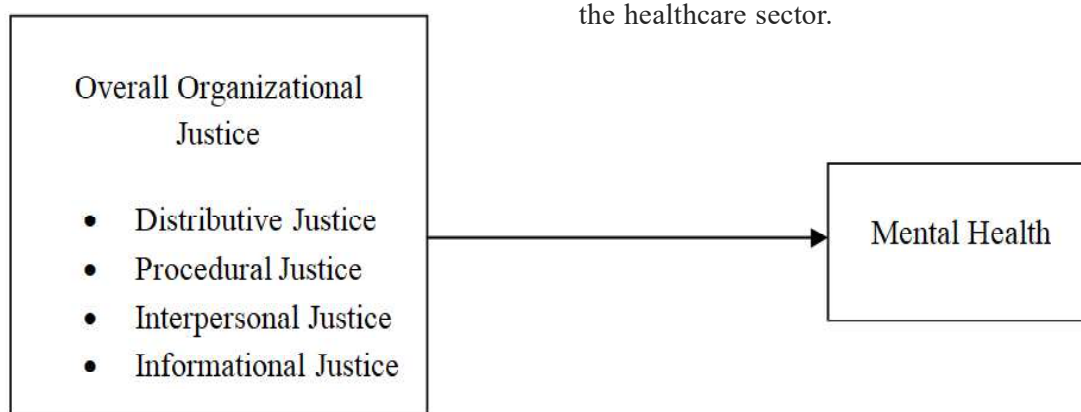


Fig. 1- Schematic Diagram proposed for the Study

Method

Participants: The sample was selected from employees' working in the two large public sector hospitals at Varanasi (U.P., India). The respondents were classified into three ranks: doctors (N = 80), nurses (N = 80), and laboratory technicians (N = 80). The demographic characteristics of the sample are: 66.2% of the participants were male, while 33.8% of employees were female. The majority of respondents were from 20 to 40 years old (64.12%), while fewer

respondents were from older age groups (only 13.74% of respondents were 41 to 61 years old). The majority of respondents were married (60.8%), while 39.2% of the respondents were unmarried. With regard to tenure, 91.76% of respondents had worked at the current organization from 1 to 15 years, 7.92% had worked from 16 to 30 years, and 42% of the participants were working for the organization from 31 to 45 years old. The employees who had work experience of at least 5 years were included in the study.

Measures

Organizational Justice: A 20-item measure developed by Colquitt (2001) was used to measure four dimensions of organizational justice, namely, procedural, distributive, informational, and relational. Items for this measure are generated by strictly following the seminal works in the justice literature (Thibaut & Walker, 1975; Leventhal, 1980; 1976; Bies & Moag, 1986; Shapiro, Buttner, and Barry, 1994). Confirmatory factor analyses conducted by the author supported a 4-factor structure for the measure.

Mental Health: Mental health was measured by 14 items. Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) was developed by Tennant, Fishwick, Platt, Joseph, & Stewart-Brown (2006). It covers most aspects of positive mental health, including both hedonic and eudaimonic perspectives: positive affect (feelings of optimism, cheerfulness, and

relaxation), satisfying interpersonal relationships, and positive functioning (energy, clear thinking, self-acceptance, personal development, mastery, and autonomy). It is a five-point scale with response alternatives ranging from 1 (none of the time) to 5 (all of the time). Test-retest reliability at one week was high (0.83).

Results

Table 1 shows the means, standard deviations (SD) and the correlation matrix between the variables in the study. As expected, procedural justice ($r = .331, p < .01$), distributive justice ($r = .161, p < .05$) and overall organizational justice are significantly positively correlated with mental health ($r = .184, p < .01$) (see Table 1). Correlations indicated that an increase of the three form of justice is likely to increase employees' mental health. Some non-significant relationships also existed between the variable's interpersonal justice and informational justice with mental health.

Table 1
Means, Standard Deviations, Range of Scores and intercorrelations between Overall Organizational Justice and its various dimensions and mental health

	Variable	M	S.D.	Range of Scores	1	2	3	4	5	6
1	Procedural Justice	24.37	5.61	7-35						
2	Distributive Justice	9.85	6.08	4-20	.262**					
3	Interpersonal Justice	15.78	5.28	4-20	.238**	.295**				
4	Informational Justice	19.55	5.74	5-25	.338**	.261**	.765**			
5	Overall Organizational Justice	69.57	16.33	28-100	.637**	.650**	.784**	.812**		
6	Mental Health	55.05	12.95	14- 70	.331**	.161*	.011	.019	.184**	

$p < .05, **p < .01$

The hierarchical regression analysis was performed to gain insight into the relative contribution of each dimension of organizational justice in the prediction of mental health (see Table 2). The demographic variables were entered in first step of the regression equation to partial out their effects prior to entering organizational justice and its dimensions (procedural, distributive, interpersonal and informational). In Table 2, it was shown that two dimensions of organizational justice (i.e. procedural justice, and distributive justice) were significantly and positively related to improving employees' mental health. This means that higher levels of procedural justice, and distributive justice in the health care sector result in higher levels of employee mental health. In particular, procedural justice contributed most

to improving employee mental health in the healthcare industry ($\beta = 0.332, p < 0.001$). This was followed by distributive justice ($\beta = 0.181, p < 0.01$). Overall organizational justice was also found to have a slightly stronger influence on employee mental health ($\beta = 0.227, p < 0.01$). Therefore, H1, H2, and H5 were supported. Further, interpersonal justice ($\beta = 0.072, p > 0.5$) and informational justice ($\beta = 0.000, p > 0.5$) were found non-significant. Therefore, H3 and H4 were not supported. The results suggest that in healthcare industry employees perhaps require more control in the rules and decision-making procedure to perform their jobs well, and more impartial reward would help employees feel better which, subsequently, would enhance their mental health.

Table 2
Results of Hierarchical Regression Analyses Predicting Psychological Health from Organizational Justice and its dimensions

	Predictor Variables	R	R ²	R Square Change	F	Sig.	β	df
Step-1	Name of the organization, age, gender, marital status, salary, designation, education, nature of work, number of working hour, number of working days, organizational tenure and job tenure	.277	.077	.077	1.578	.099	-	12,227
Step-2	Procedural Justice	.424	.180	.103	3.819	.000	.332***	13,226
Step-2	Distributive Justice	.322	.104	.027	2.015	.021	.181**	13,226
Step-2	Interpersonal Justice	.282	.079	.002	1.497	.452	.072	13,226
Step-2	Informational Justice	.277	.077	.000	1.450	.138	.000	13,226
Step-2	Overall Organizational Justice	.334	.111	.034	2.180	.011	.227**	13,226

* $p < .05$, ** $p < .01$, *** $p < .001$

Discussion

This study explores the relationship between organizational justice and mental health, focusing on distributive, procedural, and interactional justice, and their impact on mental health in Indian public sector hospitals. Results support the notion of a positive correlation between perceived organizational justice and mental health (Brockner & Wiesenfeld, 1996; Elovainio et al., 2001; Lawson et al., 2009). More specifically, the study found that procedural justice and distributive justice were significant predictors of positive mental health, while interpersonal and informational justice dimensions were not found to be related.

Health professionals in the present study perceived procedural justice as the highest organizational justice. This conclusion may be explained by the fact that employees' levels of contentment rise when they believe that managerial and organizational practices such as incentive distribution, hiring, and decision-making is fair. People's favourable feelings about procedural justice lead to greater degrees of contentment, happiness, organizational identification and sense of responsibility; these factors contribute in reducing stress and improving mental health (Jafari, Shafiepour Motlagh & Yarmohammadian, 2011).

It has long been thought that employees' conceptions of organizational justice can affect performance because they want to restore justice through adjustments in performance. It is believed that distributive justice increases people's effectiveness and production while procedural justice affects attitudes

towards their jobs. Hence, employees feel uncomfortable mentally when they see injustice, so they try to maintain parity by lowering their performance and productivity, which causes them to feel overworked and more distressed than ever.

All in all, this study reveals that employees' opinions of distributive and procedural justice can have a big impact on complex workplace settings like healthcare. These impressions offer a more accurate indicator of mental health since the healthcare jobs are closely linked to high levels of stress, long hours of shifts and 24x7 availability. These arguments are supported by many studies which repeatedly demonstrated that even after adjusting for occupational stress, a connection between procedural justice and mental health has been found (Ndjaboué, Brisson & Vézina, 2012) indicating that stress and perceived organizational fairness are inversely correlated.

Furthermore, according to Cropanzano et al. (2001) employees not only consider the different types of justice (i.e., distributive, procedural, and interactional) but also consider the agent of the situation that is perceived as fair or unfair. Perceptions of distributive justice are thus grounded in the exchange principle, whereby employees assess whether the results of the organization are equitable in relation to their inputs and the products they receive (Lambert, 2003). Perceptions of the ends are addressed by distributive justice, while perceptions of the means are addressed by procedural justice. Accordingly, Lambert, Hogan, and Gryphon (2008) discovered that both distributive justice and

procedural justice are linked to a sense of responsibility and fulfilment, which ultimately leads to wellbeing. Concurrent with the findings of the study few more studies reported that distributive justice and procedural justice contributes to lower sick leave and productivity loss as well (Ybema, van der Meer, Leijten, 2016). A study conducted during the COVID-19 pandemic also suggests that reducing workload and promoting procedural justice are key factors that could be considered in interventions to reduce burnout risk among healthcare employees hence ultimately leading to better mental health (Correia & Almeida, 2020).

The study highlights persistent issues in healthcare settings that have been overlooked or unaddressed. It suggests that improving transparency, justice in allocation, and enforcing equity can significantly improve healthcare workers' perceptions of organizational justice and lead to better well-being (Magnavita, Chiorri, Acquadro Maran, Garbarino, Di Prinzio, Gasbarri, Matera, et al., 2022).

Hence, the healthcare industry faces significant stress, high work demands and a competitive culture, requiring procedural and distributive justice for employee well-being, job satisfaction, and retention, while prioritizing competitive advantages.

Conclusion and Limitations

Organizational justice is a crucial concept in positive organizational behavior. The study highlights the

significant impact of employees' opinions on distributive and procedural justice on workplace settings like healthcare, emphasizing the need for fair treatment, timely communication of work procedures, and recognition of excellent service provided by employees. These findings should be acknowledged by the policy maker for the timely and transparent evaluation and betterment of the healthcare employees in general. These findings can be extended to the other workplace settings also. Further, the study highlights the importance of enhancing procedural and distributive justice for public sector healthcare workers, as fair treatment of healthcare professionals can lead to immediate fair treatment of patients. Work procedures and outcomes should be communicated carefully and constructively to employees, and excellent service should be rewarded and supported by organizations.

Interpersonal and informational justice did not predict mental health of employees, possibly because the importance of these dimensions is negligible when rewards and procedures are acceptable. The study suggests that improving employees' perceptions of justice and providing an appropriate environment leads to increased productivity and a better functioning organization. However, the study has limitations due to its cross-sectional data and lack of causal inferences. Future research should use longitudinal data and different methodologies.

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