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Nepotism perception and job satisfaction in healthcare workers

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ÖZ

Objective: *Studies on the perception of nepotism in public institutions and organizations in Turkey is rather limited. In the health sector, there are almost no studies on nepotism. This study will therefore make a great contribution in respect of investigating the perceptions of healthcare professionals towards nepotism.* ***Methods:*** *In this study, the perception of nepotism in the health sector in Turkey has sought to investigate. Data collection form, Nepotism and Job Satisfaction Scales were used in this study, and data were collected using the quantitative data collection technique. The study sample consists of 316 people.* ***Results:*** *While 91.8% of the participants said that they were not favored by anybody to secure a job/promotion etc., 77.8% said they knew at least one person who received preferential treatment in job search. The study revealed a significant negative correlation between the all subdimensions of the Nepotism Scale and the pay, promotions, supervision and co-workers' subdimensions of the Job Satisfaction Scale ($p<0.05$). The 'supervision' subdimension of job satisfaction is a meaningful predictor in all subdimensions of nepotism.* ***Discussion:*** *Health workers are satisfied with their colleagues and professions but they are seriously complaining about nepotism. The increase in nepotism causes a significant decrease in almost all subtitles of job satisfaction. One of the most important results of our study is that the audits conducted in the institutions show that the health care workers increase their job satisfaction.* ***(Anadolu Psikiyatri Derg 2020; 21(5):468-476)***

Keywords: *health services, justice, inequality, job satisfaction*

Sağlık çalışanlarında nepotizm algısı ve iş doyumu

ABSTRACT

Amaç: *Türkiye'de kamu kurum ve kuruluşlarında nepotizm algısı üzerine çalışma sayısı azdır. Sağlık sektöründe, nepotizm konusunda neredeyse hiçbir çalışma yoktur. Bu nedenle, bu çalışma sağlık profesyonellerinin nepotizme karşı algılarının araştırılmasına katkı sağlayacaktır.* ***Yöntem:*** *Bu çalışmada, Türkiye'de sağlık sektöründe nepotizm algısı araştırılmaya çalışılmıştır. Araştırmada Veri Toplama Formu, Nepotizm ve İş Doyumu Ölçekleri kullanılmış; veri, nicel veri toplama tekniği kullanılarak toplanmıştır. Çalışma örneklemi 316 kişiden oluşmaktadır.* ***Sonuçlar:*** *Katılımcıların %91.8'i iş/terfi vb. için herhangi biri tarafından kayrılmadığını söylerken, %77.8'i iş aramada öncelikli muamele gören en az bir kişiyi tanıdığını söylemiştir. Çalışma, Nepotizm Ölçeğinin tüm alt boyutları ile iş doyumu ölçeğinin ücret, terfi, denetim ve iş arkadaşları alt boyutları arasında anlamlı bir ilişki olduğunu ortaya koymuştur ($p<0.05$). İş Doyumu Ölçeğinin denetim alt boyutu, nepotizmin tüm alt boyutlarında anlamlı bir yordayıcıdır.* ***Tartışma:*** *Sağlık çalışanları meslektaşlarından ve mesleklerinden memnundurlar, ancak nepotizmden ciddi şekilde yakınmaktadırlar. Nepotizmdeki artış, hemen hemen tüm iş doyumu alt başlıklarında önemli bir azalmaya neden olmaktadır. Çalışmamızın önemli sonuçlarından biri, kurumlarda yapılan denetimlerin sağlık çalışanlarının iş memnuniyetini artırdığını göstermesidir.* ***(Anatolian Journal of Psychiatry 2020; 21(5):468-476)***

Anahtar sözcükler: *Sağlık hizmetleri, adalet, eşitsizlik, iş doyumu*

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INTRODUCTION

Nepotism means that individuals obtain employment, promotion or more favorable working conditions through relationships of kinship, regardless of their knowledge, ability or experience.[1,2] The concept of nepotism, which means the 'nephew' in Latin, has taken this name in history, regardless of the qualifications of the nephews, because they were hired or privileged through their relatives. Nepotism, in other words, is also described as an effort to use public powers to gain benefits (employment, promotion, etc.) for a family member.[3]

Today, nepotism is reported to have both positive and negative consequences. Ford and McLaughlin stated that nepotism has positive aspects for small businesses.[4] For example, the person to be employed is usually found in a short time. It is an important advantage to know the characteristics and productivity of this person in advance. In addition, working with one of the relatives can provide a warm family environment and create a good communication network in small businesses.[5,6] Contrary to these positive effects, nepotism can reduce trust and loyalty to employers in workers employed without kinship relations. Because, employees start to think that rewarding is not done according to the nature of their work and that they are done according to their proximity to management. No longer, for employees, success is worthless. In addition, in institutions with nepotism, there may be polarization between kinship workers and non-kinship workers. In such cases, productivity decreases even in employees who are not related with both groups.[7] As a result, employees' trust in their institutions, loyalty, job productivity and job satisfaction are weakened. In institutions with nepotism, professionalization decreases and the institution moves towards failure. Public institutions are the largest professional business network in the countries. Injustice, nepotism and inequality in these institutions will reduce the trust of individuals in their superiors, institutions and finally their state.

Some studies have suggested that nepotism exists in the nature of man because of the desire of people to see their loved ones.[8] Although this is a controversial hypothesis, nepotism has changed considerably over the last decade and has gained a different dimension. Nepotism is claimed to be divided into two groups as classical and modern. In classical nepotism, people find jobs for their relatives, but they do not have the necessary competence. In modern nepotism, the aim is not to hire relatives, but to turn nepotism into ideology to do the desired job. Therefore, it is argued that modern nepotism causes more harm to the public.[9] These nepotism types, levels and scope vary from one country to another. In this variability, sociological, economic, educational and political structure of countries are effective. All of these variables are closely related to the level of development of countries. In general, it is reported that nepotism and favoritism perception is higher in developing countries than developed countries.[6,10] However, some studies have found a similar perception of nepotism at both levels of development.[11] The differences in study results may be due to sectoral differences and methodological difficulties. However, there is a clear result. That is, nepotism is a worldwide problem.

Nowadays, the most important power, strategic element and resource of being successful as an enterprise is human. Changes in human resources directly or indirectly affect the institution. Employee satisfaction and welfare are crucial to their productivity. However, the increased workload decreases employee performance. One of the problems that increase the workload is the low number of workers working in institutions. One of the areas where the shortage of employees is experienced in our country is the health sector. Statistics reveal that insufficient numbers of health workers in Turkey. According to the 2017 OECD statistics, the number of doctors and nurses per 1000 people was 1.83 and 1.93, respectively.[12] This situation shows that it is under serious workload of health professionals working in Turkey. The relationship between increased workload and burnout is well known.[13] In addition to the insufficiency of the number of health personnel, some important issues that need to be discussed are insufficiency and inequality of wages, long working hours and increasing violence towards health workers. In particular, violence against health workers is a situation that takes place in the media almost every day. Perception of justice, which is one of the most important factors affecting the job satisfaction of health professionals, who already have to face many difficulties, should be questioned. Some studies on the perception of justice in public and private sectors in our country show that nepotism and nepotism are an important problem.[14,15] Kayhan stated that nepotism and favoritism applied by politicians is one of the main problems of the police organization.[15] Kerse and Babadağ showed that nepotism made it difficult for people to reach

their goals and therefore increased their intention to leave the job.[16] Keles et al. found that nepotism reduced organizational trust in textile workers.[14] Although there are many studies on nepotism in the private sector, the resources related to this issue in public institutions are quite limited in our country. Therefore, we aimed to investigate the perception of nepotism and the effect of this perception on job satisfaction in health workers in public institutions in our country. In addition, determining the effect of gender, age, educational status, working style and socioeconomic status on these variables (perception nepotism and job satisfaction) were our important goals.

METHODS

A descriptive, cross-sectional and correlational research design was used in this study. The universe of the study consists of over 2000 health workers working in all hospitals in Bursa. The population of this study included health workers in two hospitals (one university and one state hospital) in the provincial center of Bursa. The sample consisted of health workers working on the days of the study. In the study, it was tried to include equal number of administrative and non-administrative staff. Similarly, working time (senior employee/junior employee) and working style (shift/non-shift) of the participants were taken into consideration. These hospitals were selected because they included more health workers than other hospitals. In a similar study[17], the sample size was calculated by using G* Power 3 program by taking into account the variables of nepotism and job satisfaction of employees in public institutions.[18] Accordingly, in order to obtain 95% confidence limit, 5% margin of error and 80% test power, it was aimed to involve 296 health workers in the research. The study sample included health workers who were contacted and agreed to participate. A total of 350 people were reached in both hospitals. However, the data of 316 people who were properly filled were analyzed. Data were collected by face to face interview method.

Data were collected using the Sociodemographic Information Form, the Nepotism Scale (NS) and the Job Satisfaction Scale (JSS).

Sociodemographic Information Form: It was developed by the researchers using the relevant literature. This form includes 16 questions about age, gender, marital status, family type, educational background, profession, length of service and working qualities.

Nepotism Scale (NS): This scale was developed by Asunakutlu and Avcı.[19] This scale has been developed for the evaluation of nepotism. The height of the score indicates that the perception of nepotism is high. This is a Likert type scale with 14 items. The scale consists of 3 subdimensions; promotion-NS, working procedure, employee recruitment and selection. The 'promotion-NS' and 'employee recruitment and selection' subdimensions of the Nepotism Scale assess favoritism and nepotism in these areas. High scores in these subdimensions show that it is more advantageous to be familiar rather than skills and abilities. The subdimension of 'working procedure' assesses the assumptions that the people close to the management are more respected, the penalties given to them are less, and the rewards given to them are more. In the study of Asunakutlu and Avcı, the Cronbach's alpha values of the subdimensions were 0.88, 0.83 and 0.67, respectively.[19] In our study, these values were 0.89, 0.72 and 0.73, respectively.

The Job Satisfaction Scale (JSS): It consists of the Job Descriptive Scale developed by Schneider and Dachler.[20] The validity and reliability was performed by Toker.[21] The increase in score in the scale shows that the satisfaction caused by the job is high. This is a 5-point Likert type scale with 22 items. The scale consists of subdimensions evaluating five different job satisfaction areas; work, pay, promotion-JSS, supervision and co-workers. The 'work' subdimension of the job satisfaction scale evaluates whether people perceive their profession as important, meaningful, enjoyable and proud. The 'pay' subdimension includes assumptions that the wages received by the individuals are satisfactory and that the wage criteria are clear. The 'promotion-JSS' subdimension assesses whether there is a possibility of improvement and promotion in their careers and whether these stages are based on objective criteria. The 'supervision' subdimension has the content such as giving importance to the thoughts of the individuals in the working environment, having fair managers and communicating with them comfortably. The 'co-workers' subdimension evaluates the assumptions such as whether the colleagues of the individuals are responsible, rational, communicable and entertaining. In the study of Toker, the Cronbach's alpha values of the subdimensions were 0.79, 0.75, 0.66, 0.66 and 0.65, respectively. In our study, these values were 0.83, 0.83, 0.91, 0.88 and 0.85, respectively. Both the Nepotism Scale and the Job Satisfaction Scale contain a subdimension called promotion. The promotion sub-

dimensions were named differently in order to avoid confusion in the content of the research. The promotion, which is the subscale of the Nepotism Scale, was defined as 'promotion-NS'. The promotion in the Job Satisfaction Scale was defined as 'promotion-JSS'.

Ethical considerations

After the purpose and method of the research project had been specified, ethical consent under the reference number YDÜ/SB/2017/46 was obtained from the Ethical Board of Cyprus Near East University. Written informed consent was obtained from all participants.

Analysis of data

The SPSS package program for Windows 23 was used for the statistical analysis of study data. The normality of the data measured was tested by the Kolmogorov-Smirnov test. As the data showed no normal distribution, Mann-Whitney test was used to compare differences between two groups and Kruskal Wallis analysis to compare three of more groups. If significance was determined after Kruskal Wallis analysis, Mann Whitney analysis was used to determine significant pairings. In addition, Bonferroni correction was performed. The Spearman's correlation analysis was used to examine the relationship between the subdimensions of nepotism and job satisfaction scales, and the effects of the Nepotism Scale on the subdimensions of the Job Satisfaction Scale was tested through multiple regression analysis. The level of significance for the study was fixed at 0.05.

RESULTS

Sociodemographic data of the participants and some of their characteristics related to working life are shown in Table 1. The average age of the participants in our study was 33.78±6.53, and 43.7% were in the age group of 31-39. 59.5% of the participants were women, 62% were married and 88% were university graduates (Table 1). While 53.2% of the participating healthcare professionals expressed having no relatives, close friends etc. in the institution they worked in, 63.9% said, in a sense contradicting this argument, that they knew someone who had relatives, close friends etc. in their workplace. The majority of the participants (91.8%) said they received no preferential treatment in securing a job/a promotion etc., whereas 77.8% reported knowing people who used connections and were favored in some way or other to secure a job or a promotion. On the other hand, a high propor-

Table 1. Personal information of the participants

	n	%
Age (Mean±SD, year)	33.78±6.53	
21-30	116	36.7
31-40	138	43.7
Over 40 years of age	62	19.6
Gender		
Female	188	59.5
Male	128	40.5
Marital status		
Married	196	62.0
Single	112	35.4
Widow/divorced	8	2.6
Family type		
Nuclear family	300	94.6
Extended family	12	3.8
Fragmented family	4	1.3
Educational background		
Higher education	278	88.0
High school	38	12.0
Profession		
Nurses	156	49.4
Physicians	72	22.8
Healthcare officers	18	5.7
Others	60	18.9
Length of service (Mean±SD, year)	10.39±6.74	
1-5 years	96	30.3
6-10 years	87	27.5
11-15 years	53	16.7
Over 16 years	80	25.3
Whether received education specific for the current position		
Yes	301	95.3
No	15	4.7
Mode of employment		
Full time	173	54.7
Working in shifts	143	45.3
Perception of own economic condition		
Low	20	6.3
Medium	274	86.7
High	22	7.0
Those who have close friends, relatives etc. at the workplace		
Yes	148	46.8
No	168	53.2
Whether they know other people who have close friends, relatives etc. at the workplace		
Yes	202	63.9
No	114	36.1
Those who had support/help in the recruitment/ promotion process etc.		
Yes	26	8.2
No	290	91.8
Whether they know other people who had support		
Yes	246	77.8
No	70	22.2
Those who believe nepotism exists at the workplace		
Yes	268	84.8
No	48	15.2

Table 2. Comparison of the average scores of the participants obtained in the nepotism and job satisfaction scales by certain variables (n=316)

	Nepotism Scale			Job Satisfaction Scale				
	Promotion (NS) Mean±SD	Working procedure Mean±SD	Employee recruitment and selection Mean±SD	Work Mean±SD	Pay Mean±SD	Promotion (JSS) Mean±SD	Supervision Mean±SD	Co-workers Mean±SD
Mean±SD	19.44±3.68	21.28±3.45	11.02±2.10	14.98±3.52	8.31±3.67	9.66±4.49	13.53±3.76	14.52±2.88
Median (Min.-Max.)	20 (5-25)	22 (6-30)	12 (4-15)	16 (4-20)	7 (4-20)	10 (5-25)	15 (5-25)	16 (4-20)
Age								
21-30	19.58±3.36	21.41±3.28	11.13±2.17	14.58±4.17	8.37±3.89	9.65±5.15	13.74±4.45	13.96±3.45
31-40	19.06±4.08	21.03±3.91	10.93±2.22	15.04±3.21	8.65±3.75	9.89±4.35	13.36±3.67	14.97±2.53
>40	20.03±3.25	21.58±2.58	11.03±1.70	15.58±2.75	7.45±2.90	9.16±3.34	13.51±2.31	14.54±2.23
p	0.247	0.854	0.910	0.253	0.233	0.640	0.436	**0.032**
Gender								
Female	19.53±3.66	21.26±3.40	11.02±1.96	14.53±3.81	8.27±3.50	9.69±4.45	13.19±3.89	14.40±3.10
Male	19.31±3.72	21.31±3.55	11.03±2.30	15.64±2.93	8.37±3.91	9.60±4.55	14.03±3.51	14.68±2.53
p	0.258	0.576	0.759	**0.015**	0.923	0.636	0.068	0.676
Educational background								
Higher education	19.36±3.82	21.19±3.56	10.96±2.12	14.76±3.64	8.34±3.73	9.67±4.49	13.57±3.83	14.45±2.96
High school	20.05±2.47	21.94±2.51	11.47±1.92	16.52±1.87	8.10±3.18	9.52±4.50	13.21±3.26	15.00±2.13
p	0.762	0.091	**0.044**	**0.004**	0.895	0.621	0.400	0.359
Mode of employment								
Full time	19.89±2.85	21.92±2.60	11.24±1.80	15.74±2.73	7.45±2.98	8.20±3.90	13.42±2.85	14.98±2.12
In shifts	18.90±4.44	20.50±4.14	10.76±2.40	14.04±4.11	9.36±4.13	11.41±4.54	13.65±4.64	13.95±3.52
p	**0.036**	**<0.001**	**0.004**	**<0.001**	**<0.001**	**<0.001**	0.296	**<0.001**
Socioeconomic status								
Low	21.10±3.53	22.80±3.86	11.40±3.15	12.70±6.30	7.90±4.97	10.20±6.89	12.00±6.70	12.60±4.40
Medium	19.30±3.72	21.20±3.46	10.98±2.06	15.10±3.32	8.33±3.56	9.61±4.32	13.64±3.46	14.66±2.67
High	19.72±3.08	20.90±2.70	11.27±1.38	15.54±1.18	8.45±3.81	9.81±4.37	13.45±3.98	14.45±3.21
p	0.223	0.120	0.666	0.462	0.289	0.873	0.510	**0.038**

tion of the study participants (84.8%) said they believed that nepotism existed in the institution they worked in (Table 1).

Comparison of the average scores of the participants obtained in the nepotism and job satisfaction scales by certain variables is shown in Table 2. In the study, a significant difference was found between the 'co-workers' subdimension of the job satisfaction scale and age and socioeconomic status (SES) variables. In both variables (age and SES), it was found that 31-40 age group had a significantly higher mean than 21-30 age group (after correction of Bonferroni). Job satisfaction related by the structure of work is significantly higher in males (z=-2.44, p=0.015). While the nepotism perception in the 'employee recruitment and selection' was higher in the high school graduates, job satisfaction due to the structure of the job was higher (respectively p=0.044, p<0.001). The mean of all subdimensions of the nepotism scale was found to be significantly higher in full-time workers (Table 2). While the averages of the 'work' and 'co-workers' subdimensions of the job satisfaction scale are significantly higher in full-time workers, the 'pay' and 'promotion-JSS' subdimension averages are higher in the shift workers.

The relationship between Nepotism Scale and Job Satisfaction Scale is shown in Table 3. The study revealed a significant negative correlation between the promotion-NS subdimension of the Nepotism Scale and the all subdimensions (work, pay, promotion-JSS, supervision and co-workers) of the Job Satisfaction Scale (respectively r=-0.195, p<0.001; r=-0.299, p<0.001; r=-0.423, p<0.001; r=-0.478, p<0.001; r=-0.148, p<0.001). A significant relationship was found between the working procedure subdimension of supervision and co-workers subdimensions of the Job Satisfaction Scale (respectively the Nepotism Scale and the pay, promotion-JSS, r=-0.402, p<0.001; r=-0.355, p<0.001; r=-0.284,

Table 3. The relationship between the average scores of participants recorded in the subdimensions of Nepotism Scale and Job Satisfaction Scale (n=316)

	Nepotism Scale					
	Promotion-NS		Working procedure		Employee recruitment and selection	
	r	p	r	p	r	p
Job Satisfaction Scale						
Work	-0.195	**<0.001**	-0.077	0.173	-0.008	0.887
Pay	-0.299	**<0.001**	-0.402	**<0.001**	-0.296	**<0.001**
Promotion-JSS	-0.423	**<0.001**	-0.355	**<0.001**	-0.302	**<0.001**
Supervision	-0.478	**<0.001**	-0.284	**<0.001**	-0.289	**<0.001**
Co-workers	-0.148	**0.008**	-0.140	**0.013**	-0.146	**0.009**

Table 4. Assessment of nepotism subdimensions by multiple linear regression analysis (n=316)

	Nepotism Scale								
	Promotion-NS			Working procedure			Employee recruitment and selection		
Variables	Coefficient(s.e.)	95% CI	p	Coefficient(s.e.)	95% CI	p	Coefficient(s.e.)	95% CI	p
Age	0.136(0.067)	-0.004; 0.269	**0.043**	-0.078(0.067)	-0.210; 0.054	0.245	0.008(0.042)	-0.075; 0.090	0.857
Gender	-0.183(0.391)	-0.952; 0.587	0.641	0.286(0.390)	-0.481; 1.052	0.464	0.016(0.244)	-0.464; 0.497	0.947
Length of service	-0.121(0.064)	-0.246; 0.004	0.058	0.081(0.063)	-0.044; 0.205	0.203	-0.005(0.040)	-0.083; 0.073	0.904
JSS-work	-0.051(0.057)	-0.163; 0.062	0.378	0.040(0.057)	-0.073; 0.152	0.488	0.076(0.036)	-0.005; 0.146	**0.035**
JSS-pay	-0.001(0.066)	-0.128; 0.131	0.986	-0.263(0.066)	-0.392; -0.134	**<0.001**	-0.082(0.041)	-0.162; 0.001	**0.048**
JSS-promotion	-0.219(0.057)	-0.332; -0.106	**<0.001**	-0.071(0.057)	-0.183; 0.041	0.215	-0.056(0.036)	-0.126; 0.015	0.121
JSS-supervision	-0.325(0.060)	-0.443; -0.206	**<0.001**	-0.127(0.060)	-0.245; 0.009	**0.035**	-0.111(0.038)	-0.184; -0.037	**0.004**
JSS-co-workers	0.013(0.068)	-0.121; 0.148	0.846	-0.046(0.068)	-0.180; 0.088	0.497	-0.059(0.043)	-0.143; 0.025	0.166
F		15.39			9.23			6.57	
p		**<0.001**			**<0.001**			**<0.001**	
R^2		0.286			0.194			0.146	

CI: Confidence Interval, s.e.: standard error, JSS: Job Satisfaction Scale, NS: Nepotism Scale

p<0.001; r=-0.140, p=0.013). Similarly, 'employee recruitment and selection' subdimension of the Nepotism Scale and the pay, promotion, supervision and co-workers subdimensions of the Job Satisfaction Scale were found to be significant (respectively r=-0.296, p<0.001; r=-0.302, p<0.001; r=-0.289, p<0.001; r=-0.146, p=0.009).

The evaluation of the subdimensions of the Nepotism Scale by multiple linear regression analysis is shown in Table 4. When 'promotions-NS', one of the subdimensions of the nepotism scale, was taken as dependent variable in the multiple regression analysis, the subdimensions of the 'promotion-JSS' and 'supervision' of the job satisfaction scale and age were found to be significant predictors (respectively p<0.001, p<0.001, p=0.043). In case where the subdimension of 'working procedure' was used as dependent variable, the subdimension 'pay and supervision' of the job satisfaction scale was found to be a significant predictor (respectively, p<0.001, p=0.035). If, however, the 'employee recruitment and selection' was used as dependent variable, the variable of 'work, pay and supervision' resulted to be a significant predictor (respectively, p=0.035, p=0.048, p=0.004).

DISCUSSION

In this study, we aimed to investigate the perception of nepotism in health sector and the effects of this perception on job satisfaction by applying a quantitative questionnaire to the participants.

The advantages and disadvantages of nepotism, which has been discussed for a long time, are still a subject of research. Early studies on nepotism have often focused on its negative characteristics.[22,23] However, current studies suggest that nepotism can be tolerated in small-scale institutions.[24] Nepotism is closely related to the level of development of countries. Generally, nepotism is more common in developing countries.[25]

When we look at the studies on nepotism in our country, in a study conducted in 306 police in 2000, it is stated that nepotism and favoritism is a serious problem in this profession group.[15] In another study with similar results, it was shown that the confidence in the management decreased with the increase of nepotism in small-scale enterprises.[14] Our study is different from other studies in terms of evaluating the perception of nepotism in health professionals working in public institutions. When we look at the results of our study in general, it is observed that health workers are satisfied with their professions and colleagues but they are seriously disturbed by the nepotism in their institutions (Table 2). The recruitment processes of doctors and nurses, which constitute an important part of the research population, are made possible by nationwide examinations or appointments. The recruitment of doctors and nurses, which constitute an important part of the research population, is possible through nationwide examinations or appointments. Despite this, the high level of nepotism perception among health professionals question transparency in recruitment and appointments. Another important result of our study is that health care workers have low job satisfaction in pay, promotion and management related fields. Job satisfaction is indispensable in order to improve the productivity and work quality of the employees. Job satisfaction in the health sector not only affects work quality and productivity, but also has a significant impact on labor costs.[26] Therefore, solutions that increase the job satisfaction of health workers should be produced and justice in institutions should be provided.

Employee satisfaction is one of the most frequently studied areas in the employee-work-organization relationship. Reduction in job satisfaction is an issue that reduces productivity and creates financial burdens for the enterprise. A study that was performed in 21 EU countries and investigated the probable variables with which job satisfaction is interrelated has found that non-financial variables can have more effect on the job satisfaction than financial variables. The same study further reports that variables such as opportunities for further career development, flexible working hours, support of colleagues, safety at work and work-family balance are key indicators for job satisfaction.[27] Another important variable affecting job satisfaction is the perception of nepotism in employees. It is a fact that nepotism reduces the sense of justice, which, in turn, has a reducing effect on the work satisfaction.[19,28] Employee satisfaction is significantly affected by the perception of justice and trust. However, job satisfaction can also increase when employees see themselves as part of a family organization.[29] Nepotism in family businesses can increase employee satisfaction provided that it is within certain limits. However, this area is quite limited. Transparency in state institutions, fair and equal treatment of employees contributes to increasing employee morale and

creating a sense of justice. In the studies conducted in our country, accommodation employees, bank employees and policemen, it has been found that job satisfaction decreases with increasing perception of nepotism.[1,15,16] In our study, with the increase of nepotism, it was found that job satisfaction of employees in the areas of work life, pay, promotion and supervision decreased (Table 4). One of the most important results is that job satisfaction in the field of supervision increases with the decrease of nepotism. This result was observed in all subdimensions of the nepotism scale (Table 4). In other words, health workers think that nepotism will decrease if the supervision is done in accordance with the merit. This finding actually summarizes the whole study. Employees are pleased with the audit conducted for justice and equality. Supervision should not be carried out in a manner that is not fair. As in all areas of human life, justice in job satisfaction and well-being is necessary.

The fact that our study was conducted only in two hospitals in the city center of Bursa is an important limitation. Therefore, the results of this research may not be generalized to the whole country universe. In addition, the use of face-to-face interview technique and inclusion of those who agreed to participate in the study may have had an impact on the results. Further studies that address these limitations, address a multicenter and larger sample are recommended.

CONCLUSION

Health workers are satisfied with their colleagues and professions but they are seriously complaining about nepotism. There is no difference in nepotism perception in terms of age, gender and socioeconomic status. The increase in nepotism causes a significant decrease in almost all subtitles of job satisfaction. One of the most important results of our study is that the audits conducted in the institutions show that the health care workers increase their job satisfaction. Ethical and qualified audit will have a positive impact on all employees, especially on health workers.

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