



The Influence of Organizational Justice and Prosocial Behavior toward Empathy on the Care of Islamic Religious Patients with Welfare Moderators

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Abstract

Edited by: Branislav Filipović
Citation: Basirun M, Haryono S, Mustofa Z, Prajoogo W. The Influence of Organizational Justice and Prosocial Behavior toward Empathy on the Care of Islamic Religious Patients with Welfare Moderators. Open Access Maced J Med Sci. 2022 Feb 15; 10(E):926-932. <https://doi.org/10.3889/oamjms.2022.9147>
Keywords: Nurse; Empathy; Prosocial behavior; Organizational justice; Welfare
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Received: 01-Jan-2022
Revised: 25-Jan-2022
Accepted: 05-Feb-2022
Copyright: © 2022 Muhammad Basirun, Suyono Haryono, Zaenal Mustofa, Wisnu Prajoogo
Funding: This research did not receive any financial support
Competing Interests: The authors have declared that no competing interests exist
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BACKGROUND: Individuals in organizations behave and empathize in several studies can be influenced by organizational policies, including their welfare; this has indeed been widely studied. Even so, a firm answer is needed as to whether empathy is affected by organizational justice along with well-being and also whether empathy is influenced by prosocial behavior to increase empathy? This research unequivocally answers this question.

AIM: The aim of this study is to know the effect of organizational justice on empathy, knowing whether welfare moderates the influence of organizational justice variables on empathy, knowing whether prosocial behavior affects empathy, and knowing whether welfare moderates the effect of prosocial behavior on empathy.

METHODS: This study uses a quantitative survey research method and data collection by cross-sectional research with a sample of 226 inpatient nurses at Muhammadiyah Hospital type B throughout Indonesia. The sample used is a probability sampling model. Data analysis is done using Structural Equation Modeling (SEM) AMOS 22.00.

RESULTS: Ha1 test results, $p = 0.032$; this has a significant meaning. Ha2 is the interaction value 1: $p = 0.001$, which means that 1 is significant interaction, Ha3 $p = 0.011$ with welfare moderation, which has a significant meaning, and Ha4 interaction 2, welfare on the effect of prosocial behavior on empathy the value is $p = 0.001$, which means it is significant.

CONCLUSIONS: (1). Organizational justice has a positive effect on empathy, (2). welfare moderates the positive effect of organizational justice on empathy, (3). prosocial behavior has a positive effect on empathy, (4). welfare moderates the effect of prosocial behavior on empathy.

Introduction

The discussion of empathy for health workers is important because the results of research by [1], with empathy results will be able to better understand their patients, build positive attitudes in interpersonal relationships, and increase satisfaction. Recent studies have also stated that doctors' empathy is highly satisfying to patients [2]. Empathy in patient care services can increase patient satisfaction [3]. The findings reveal that a range of self-mindful feelings and social empathy must be developed to increase awareness with the ability to interact and care [4]. Furthermore, it has also been explained in Islam since more than 1500 years ago that Rasulullah SAW gave instructions on how to relate and especially in providing service to others, namely with empathy, Rasulullah SAW said, "the parable of the believer is compassion, like the body, if one member of the body is sick, the other limbs will also feel a fever" [5]. The Messenger of Allah said, "the believers who are together are like a building whose parts strengthen

each other" (Narrated by Bukhari). This study uses the Grand Theory social exchange theory approach [6], which discusses empathy in nursing care and several other variables such as organizational justice, prosocial behavior, and welfare.

The quality of services provided by nurses is influenced by organizational policies including issues of justice and welfare [7]. The results show that empathy can be increased due to interpersonal and informational justice [8]. Furthermore, a study found that organizational justice is significantly correlated with psychological distress [9], and psychological processes play a key role in shaping most social perceptions and subtle social interactions, namely empathy and sympathy [10]. Research on procedural and distributive justice which is part of organizational justice as a whole has not been done much, and this is the first discussion in this study.

Second, the novelty in this study is the moderating of welfare in the effect of organizational justice on empathy. Recent research on justice and altruism then provide moderation of person-organization fit (PO Fit) with the result that altruistic

behavior is increasing [11]. Some of the results of previous studies were not specific which discussed the construct of welfare in moderating justice toward empathy, even though welfare is a factor in the emergence of one's empathy [12]. This study explicitly discusses whether welfare interventions can increase the effect of organizational justice on empathy.

Third, some research results show that empathy can be generated by providing a lot of help mediated by the caring principle [13]. Moral development theory explains that starting from the need to help, they continue to help without starting from empathy because it has been internalized by the caring principle [14]. This study clearly reveals the relationship between prosocial behavior and empathy.

Fourth, what is interesting in this study is how well-being moderates its effect on social behavior and empathy. The results of previous studies explain that the reward system can provide warmth to help others [15], [16]. Giving incentives money will increase empathy [17]. Similarly, Bourgault [18] argues that well-being will increase nurses' empathy for patients. Some previous research results are not specific, and there are no findings that discuss the construct of welfare in moderating justice, prosocial, and empathy, even though welfare is a factor in the emergence of one's empathy [12].

In the view of Islam, happiness will be given by Allah SWT when doing good deeds (prosocial behavior), as explained in the Qur'an [19], Surat An-Nahl [16]: 97, namely "whoever does good deeds (prosocial behavior), both men and women in a state of faith, we will surely give him a good life and we will reward him better than what they have done."

Meanwhile, happiness from the religious aspect of Islam is as described in the Qur'an, Surat An-Nahl [16]: 97, namely "Whoever does good deeds, both male and female in a state of faith, we will surely reward him with a good life and we will reward him better than what they have done."

This research also discusses welfare in the religious aspect; this is important because one's welfare is not only due to economic factors, in Islam, it is conveyed that Rasulullah SAW says "whose name is rich (ghina) is not with a lot of wealth, but whose name is rich is a heart that always feels sufficient". (Narrated by Bukhari and Muslim).

Methods

Population and sample

The population of this study was all inpatient nurses at PKU Muhammadiyah type B Hospital in Indonesia. The total population is 1240 and the number

of samples is 226. It was stated that the AMOS 22 SEM analysis using the maximum likelihood method, the number of samples is between 150 and 400, provided that the number of samples is determined between 5 and 10 samples per indicator [20]. The sampling method used is purposive sampling. The inclusion criteria for the sample were inpatient nurses and at least had worked in a hospital for 2 years, whereas the exclusion criteria were nurses who held concurrent structural positions.

Instruments

Measurements for all constructs used a new questionnaire with measurement criteria of 5 criteria, namely very bad/very low/very never/strongly disagree (criterion 1) criterion 2 = not good/disagree/low/rare, criterion 3 = normal/neutral, criteria 4 = good/agree/high/often, and criteria 5 = very good/strongly agree/very high/always.

The research instrument already has good reliability and validity because the instrument was prepared based on the opinions of several previous researchers from various points of view and has also met the confirmatory factor analysis (CFA) test criteria with the goodness of fit models including Chi-square, GFI, TLI, CFI, GFI, RMR, RMSEA, CFA results have met the criteria for the goodness of fit.

The results of construct reliability were obtained; justice: 0.7078, prosocial: 0.7015, welfare: 0.7078, and empathy: 0.7223. The results of testing the validity of indicators for all variables from standardized regression weights show that all indicators are valid because they have an estimated value/loading factor of 0.5. The test results are said to be significant if the standard loading value is 0.5 (Ghazali, 2019).

The results of the normality assessment test showed that for the empathy variable, the multivariate value cr: 2,566; the multivariate justice value cr: 2,521; the prosocial variable multivariate value cr: 2,581; and the welfare variable, the multivariate value cr: 1,415.

Test the reliability of the indicator construct on each variable. The standard value of the consistency test with a reliable construct is 0.70, whereas the cut-extracted value is 0.50 with good results.

The structural model test is assessed from several goodness-of-fit model criteria including the probability of Chi-square, GFI, TLI, CFI, GFI, RMR, and RMSEA which are shown in Figure 1. Full Model SEM AMOS 22.00 and Table 1, it can be said that the test results' goodness of fit meets the criteria/feasibility of the standard structure model of the goodness of fit.

Method and research analysis techniques

The research method used is a quantitative method, and data collection is done by distributing

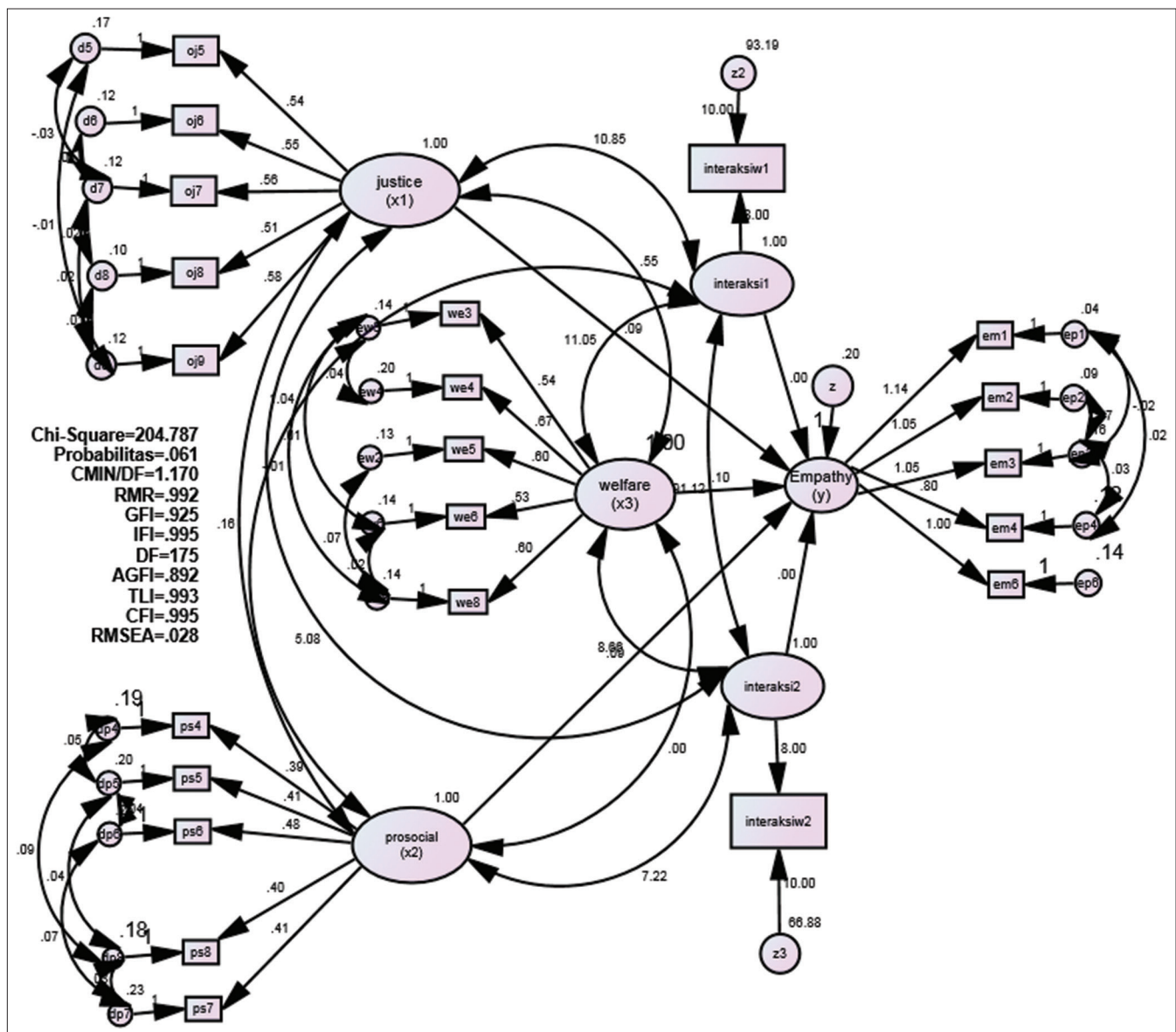


Figure 1: Full Model SEM AMOS 22.00 with Welfare Moderation. Sources of data: AMOS processing data 22.00

questionnaires for all research variables with cross-sectional.

The research analysis using AMOS 22.00 uses a significance level of 0.05, and the results can be seen in the regression weight of the text output of the full fit model in the AMOS 22.00 program (Table 1) and the structural model image (Figure 1).

Table 1: Test results before and after moderation

Goodness-of-fit index	Cutoff value (Nilai Batas)	Test result before moderation	Result criteria	Test result after moderation	Result criteria
Chi-square=lcmin	$\leq \alpha$.df	88.458	Fit	206.626	Fit
Probabilitas=lp	≥ 0.05	0.105	Fit	0.061	Fit
CMIN/DF=lcmin/df	< 2.0	1.212	Fit	1.170	Fit
GFI=lgfi	≥ 0.90	0.951	Fit	0.992	Fit
IFI=lfifi	≥ 0.90	0.994	Fit	0.995	Fit
DF=df	≥ 0.00	73	Fit	175	Fit
AGFI=lagfi	≥ 0.90	0.919	Fit	0.900	Fit
TLI=ltli	≥ 0.90	0.919	Fit	0.993	Fit
CFI=lcfi	≥ 0.90	0.994	Fit	0.995	Fit
RMSEA=lrmsa	≤ 0.08	0.031	Fit	0.028	Fit

Source: Ghozali, I. and Fuad (2019) and SEM analysis results AMOS 22.00.

Results

Analysis of respondents' answers is explained using a measure of the tendency of the answers to five categories, namely very low, low, neutral, high, and very high. Most respondents are female nurses as much as 61.5% with 50.9% work experience between 2 and 10 years.

The results of the organizational justice analysis showed that on average, respondents chose a score of 4 as much as 57.6% which was most influenced by the OJ8 indicator (I feel that the leadership does not distinguish the relationship between employees). The selection of respondents with the lowest score was 2, followed by answers with scores of 3, 4, 2, and 5.

The results of the assessment of respondents' answer scores for the variable prosocial behavior had

the lowest score of 3 and the highest of 5. The average score of all indicators was 53.2%. The highest indicator is ps7 (I help the patient because I hope to be pleased with Allah SWT) with a score of 4 as much as 58.0%. The selection of respondents with the lowest score of 3 and the highest score of 4, followed by answers with scores of 5 and 3. The indicator that respondents rated as good and very good was ps8 (I help the patient in cleaning) with a total score of 96.7%. While the ps6 indicator (I provide service patiently) which is considered by respondents to have the lowest criteria are 69.9%.

The results of the respondent's assessment of the answer scores for the welfare variable have the lowest score of 2 and the highest of 5. The average score of indicators assessed by respondents is good and very good; the highest with an average score of more than 4 are we3, we4, and we8. While the indicators we5 (I am happy to be able to help patients) and we6 (I feel happy to be able to meet the recreational needs of the family) are in the average criteria <4.

The results of respondents' assessment of the answer scores for the empathy variable have the lowest score of 3 and the highest of 5. The average score of all indicators is at a score of 4 as much as 61.6%. The indicator rated by the respondents as good and very good is em4 (I feel sorry for the patient's illness) with a total score of 87.2%. While the em2 indicator (I can feel what the patient feels) assessed by the respondent is the lowest criterion, namely 87.2%.

Hypothesis test results

The results of hypothesis testing in Table 2 can be explained as follows:

Table 2: Hypothesis testing results before and after moderation

Pengaruh variable	Test result Before moderation			Test result After moderation		
	Koef. Regresi	Std. C.R.	p values	Koef. Regresi	Std. C.R.	p values
Empathy <--- justice	0.160	4.097	0.001	0.178	2.150	0.032
Empathy <--- prosocial	0.157	2.249	0.021	0.168	2.534	0.011
Empathy <--- Interaksi 1				0.003	4.649	0.001
Empathy <--- Interaksi 2				0.005	3.239	0.001
Empathy <--- welfare				0.204	2.668	0.008
Squared multiple correlations	0.121			0.222		

Data source: Amos data if 22.00 Research Results.

1. Hypothesis 1 is significant because $p = 0.032$, it can be concluded that the organizational justice variable has an effect on increasing empathy.
2. Hypothesis 2 (interaction 1) is significant because $p = 0.001$, it can be concluded that moderating welfare increases the effect of the organizational justice variable on empathy.
3. Hypothesis 3 is significant because $p = 0.011$, it can be concluded that the prosocial behavior variable has an effect on increasing empathy.

4. Hypothesis 4 (interaction 2) is significant because $p = 0.001$, it can be concluded that welfare moderates the increase in the effect of prosocial behavior on empathy.

Discussion

Organizational justice and empathy

The results of this study are organizational justice has an effect on increasing empathy. Several previous studies that can explain this problem found a significant relationship between organizational justice, decency, and conscience [21]. Organizational justice is significantly correlated with psychological pressure [16], and moral distress (moral distress) affects psychological factors [22]. Psychological processes play a key role and are the basis for most social perceptions and subtle social interactions (empathy and sympathy) [10]. The organizational justice variable is able to increase empathy by 0.178; this influence is included in the category of moderate influence according to the standard value between 1-0.75, 0.74-0.26, and 0.25-0 which indicates that each provides a strong model, moderate, and weak [23]. The indicators of justice that have the most influence are indicators of fairness in receiving information, followed by indicators sequentially; I feel that the leadership does not discriminate between employees, indicators; I feel the leadership treats him kindly, indicators; I feel the leadership can refrain from saying inappropriate words or comments, indicators; I feel there is fairness between employees in giving salaries.

Welfare moderation on the influence of organizational justice and empathy

The results of the study state that welfare moderates the effect of organizational justice on empathy. Previously, in the first hypothesis before moderation, it was stated that nurses' empathy increased if there was organizational justice with a regression coefficient value of 0.160; then by including welfare, it turned out that the influence of organizational justice variables on empathy increased again with a regression coefficient of 0.178. The results of this study are in line with the Muhammadiyah Organization in giving slogans and orders to its members to "Live Muhammadiyah and do not seek life in Muhammadiyah." This slogan emphasizes to employees that work is for worship, not the main purpose of making money. However, the leadership must be fair to employees because it will affect nurses' empathy ($p = 0.011$) and still pay attention to nurses' welfare. The results of this study are also in

accordance with previous research that organizational justice in interpersonal and information is positively related to empathy (Goncu, 2014).

The following is a picture of Full Model SEM AMOS 22.00 with Welfare Moderation, Figure 1.

Research results

Several indicators that can explain welfare variables that provide positive moderation sequentially from the strongest to the weakest are indicators; I feel happy to be able to help patients, indicators; I feel happy to be able to pay tithe, indicator; I feel happy to be able to tithe, indicators; can prepare family health costs, indicators; I feel happy to be able to meet the family's communication needs, and indicators; I feel happy to be able to meet the recreational needs of the family.

Welfare indicators which are the strongest indicators are; I feel happy to be able to help patients, the criteria for good and very good reach 75.2%. The results of this study are also in accordance with the command of Allah SWT in QS. An-Nahl (16): 90) The results of previous studies explain that psychological processes play a key role and are the basis for most social perceptions and subtle social interactions of empathy and sympathy (Decety. J., 2010). Organizational justice is significantly correlated with psychological distress [16].

Furthermore, the indicators we8, we4, we3, and we6 are related to economic welfare. Islam teaches that giving some sustenance to others is an order, and this is done by nurses as something that is not coercion according to the we8 indicator (I feel happy to be able to pay tithe). Allah SWT says that the lucky or happy person is the one who believes in the unseen, establishes prayer, and spends some of his sustenance [19] (Surah Al Baqarah (2); 1-5), then the Messenger of Allah (SAW) said, "A rich person is his heart who always feel enough" (Narrated by Bukhari and Muslim).

These results are in accordance with the research of Bourgault [18] argues that well-being will increase nurses' empathy for patients. Providing incentives money will increase empathy [17]. Moreover, the provision of welfare will increase empathy [24]. The reward system provides warmth and helps others [15], [16].

Prosocial behavior and empathy

The results of research 3 show that prosocial behavior has an effect on increasing empathy. Indicators of prosocial behavior that have a strong to weak effect sequentially on increasing empathy are indicators; I maintain patient privacy, I help patients in cleaning, I provide patient service, I provide services to patients

with friendliness, and I help patients because I hope for the pleasure of Allah SWT.

On the indicator: "I maintain patient privacy" with an estimated value of 0.780, and this indicator has a significant effect on strengthening nurses' empathy, this is the nurse's role as a client advocate, this role serves as a protector of client decisions, maintaining patient confidentiality, the mediator between clients and people at work around the client, as well as actors acting on behalf of the client. The results of this study are also in accordance with the command of the Prophet Muhammad who said:

"Whoever helps the needs of his brother, and then Allah Azza wa Jalla will always help him. Whoever relieves a Muslim's hardship, Allah will relieve him of one of the difficulties on the Day of Resurrection and whoever covers (the disgrace) of a Muslim, Allah will cover him (his disgrace) on the Day of Resurrection" (Narrated by Bukhari).

Indicators of prosocial behavior; "I help the patient in cleaning" and "I help patients because I hope for the pleasure of Allah SWT" with the magnitude of the value of each effect of the regression coefficient: 0.762 and 0.593, these two indicators also significantly strengthen the increase in nurses' empathy. The service of helping patients in purification has reached 94.7% in the good and very good categories, and sincere service expecting Allah's blessing has reached 86.3%, so it can be said that the implementation of faith behavior in service is in a good category.

The results of this study are in accordance with the Qur'an in [19], QS: An-Nahl (16:97) and this is in accordance with the previous opinion that prosocial behavior has been defined as voluntary and intentional; behavior that results in a benefit to another individual or group. The results of other studies suggest that empathic attention can be generated by providing a lot of help mediated by the principle of care [13]. Helping behavior is motivated by empathetic concern for others who are in trouble [16]. The prosocial indicator ps6 as the third indicator has a strong effect on increasing empathy. The nurse-client relationship with tenderness and compassion is important. The fourth indicator "I provide service with patience" strengthens nurses' empathy. This result is also in line with Islamic guidance, Rasulullah SAW said;

"The parable of the believer is compassion, like a trunk, if one part of the body hurts; the other parts of the body also feel pain" (H.R. Bukhari and Muslim).

Welfare moderation on the effect of prosocial behavior on empathy

Hypothesis 4 shows that welfare moderation strengthens the effect of prosocial behavior on empathy. The regression coefficient value of the effect of prosocial

behavior on empathy before welfare moderation: 0.157 and after welfare moderation: 0.168 (Table 2); this value increases, and the effect is small to the patient will increase.

This is in accordance with the mandate of the Muhammadiyah Hospital which prioritizes Islamic services in accordance with the basic vision of the Muhammadiyah Hospital of Excellence and Islam by prioritizing health services for the poor. Muhammadiyah Health Business Charity is a means of preaching and Amar ma'ruf nahi Munkar, this is stated in the Muhammadiyah Qaidah Health Sector [25]. Good patient care (prosocial) and empathy are demands in Islam regardless of whether the nurse is prosperous or not because this service is worship.

Previous research has suggested that empathy can be generated by providing assistance mediated by the caring principle [13], [25]. Later, in another study, it was stated that empathy decreases in intensity after an observer helps someone [14]. The higher the welfare, the nurse's empathy for the patient will increase [18]. Empathy is defined as feelings for another that are evoked and congruent with perceived well-being [12], [26]. The reward system provides warmth and helps others [15], [16].

Then, the results of research on nurses in hospitals found that there was a positive and significant relationship between religiosity and prosocial behavior of nurses in hospitals [27]. Health workers are a noble profession because their activities are related to other people, and there are many good deeds and worship values as long as they are intended for Allah alone. Rewards from institutions are an organizational obligation that must be given properly and fairly and not asked for.

The result of this study is to follow Islamic guidance that if an employee works well because he hopes for the Ridho of Allah SWT and not because of the money and property factor, then Allah will not waste his practice and will get two rewards, namely the reward in the world and the reward in the world hereafter according to the Word of Allah SWT in [19], QS. Hud [11]: 15-16), QS. At Taubah: 105 and QS. Al Kahf: 30.

Welfare will benefit workers as a motivating factor to be more productive [28]. Nurses will perform better and put forth a high level of effort when organizations care about their well-being and value their contribution [29], [30].

Several indicators that can explain the welfare variable provide moderation in measuring the effect of prosocial behavior on empathy sequentially from the strongest to the weakest indicators, namely the we4 indicator (I feel happy to be able to prepare family health costs), the we3 indicator (I feel happy to meet the needs of the family), the we8 indicator (I feel happy to be able to give zakat), the we1 indicator (I feel the family's economic needs have been met), and the

we6 indicator (I feel happy with being able to meet the family's recreational needs).

The first indicator of welfare that has a strong influence is the we4 indicator; the magnitude of the effect is estimated: 0.844, then the we3 indicator with the magnitude of the estimated effect; 0.779 and the indicator we6. Welfare indicators that affect moderation are the We1 indicator (I feel the family's economic needs have been met) and the we8 indicator (I feel happy to be able to pay tithe); this indicator also plays a role in moderating the effect of prosocial behavior on nurses' empathy in patient care services. The results of this study are in line with [19] QS. Al Baqarah (2); 1-5 welfare that is conveyed is that the lucky people, in this case, are people who are pious, namely they... and spend some of their sustenance (zakat and alms).., and they believe in the afterlife (life).

Conclusion

The conclusions of this study are organizational justice variable, prosocial behavior increases nurses' empathy, and the moderate welfare variable strengthens the increase in empathy in these two variables.

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