

The Relationship Between the Compassion of Nurses and Their Levels of Job Satisfaction

Hemşirelerin Merhamet Düzeyleri ile İş Doyumları Arasındaki İlişki

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This study was presented as orally in 1st International & 5th National Current Approaches in Nursing Conference, 15-17 November 2018, Sakarya, Turkey.

ABSTRACT Objective: This study aims to examine the relationship between the compassion of nurses and the affecting factors on their level of job satisfaction. **Material and Methods:** The population of this descriptive study consisted of 550 nurses working at a university hospital, 209 of which have met the inclusion criteria constituted the study sample. The research data was collected using the Introductory Information Form developed by the researchers in line with the literature, the Compassion Scale, and the Nurse Job Satisfaction Scale. The data was assessed and analyzed using the SPSS V23 program, descriptive statistics, the independent two-sample t-test, one-way analysis of variance (ANOVA), the TUKEY test, the Mann-Whitney U test, the Kruskal-Wallis test, and the Spearman correlation analysis. The significance level was considered 0.05 for all comparisons. **Results:** The level of job satisfaction among nurses who had a bachelor's degree in nursing (F3=2.71, p=0.046), those who worked in pediatric clinics (Kruskal-Wallis (KW) 4=22.35, p<0.001) those who willingly chose the nursing profession (F204=1.91, p<0.05), and those who were satisfied with their jobs (F4=9.77, p<0.001)-as well as the level of compassion among nurses who were satisfied with their jobs (F4=5.88, p<0.001) and those who reported to empathize with patients (KW2=13.10, p<0.001)-were statistically, significantly higher than the others. A positive correlation was found between the total mean scores of nurses on the compassion and job satisfaction scales (r=0.30, p<0.001). **Conclusion:** The nurses satisfied with their jobs had higher levels of job satisfaction and compassion. As the nurses' job satisfaction increased, the level of their compassion also increased.

Keywords: Nurse; compassion; job satisfaction

ÖZET Amaç: Bu araştırma, hemşirelerin merhamet düzeyleri ile mesleki iş doyumları arasındaki ilişkiyi ve etkileyen faktörleri belirlemek amacıyla gerçekleştirilmiştir. **Gereç ve Yöntemler:** Tanımlayıcı nitelikteki bu araştırmanın evrenini bir üniversite hastanesinde çalışan 550 hemşire oluşturmuş olup araştırma kriterlerine uyan 209 hemşire çalışmamızın örneklemini oluşturmuştur. Veri toplama aracı olarak, araştırmacılar tarafından literatür doğrultusunda oluşturulan Tanımlayıcı Bilgi Formu, Merhamet Ölçeği ve Hemşire İş Doyum Ölçeği kullanılmıştır. Verilerin değerlendirilmesi için SPSS V23 programı kullanılmış olup tanımlayıcı istatistikler, bağımsız iki örnek t-testi, tek yönlü varyans analizi, TUKEY testi, Mann-Whitney U, Kruskal-Wallis U testi ve Spearman korelasyon analizinden yararlanılmıştır. **Bulgular:** Lisans mezunu olan (F3=2,71, p=0,046), pediatri kliniklerinde çalışan (Kruskal-Wallis (KW) 4=22,35, p<0,001), mesleğini isteyerek seçen (F204=1,91, p< 0,05) ve işinden memnun olan (F4=9,77, p<0,001) hemşirelerin iş doyumları ile işinden memnun olan (F4=5,88, p<0,001) ve hastası ile empati kurduğunu ifade eden (KW2=13,10, p<0,001) hemşirelerin merhamet düzeyleri diğer hemşirelerden daha yüksek bulunmuştur. Merhamet ölçeği toplam puan ortalamaları ile iş doyum ölçeği toplam puan ortalamaları arasında pozitif yönlü ileri derecede anlamlı bir ilişki olduğu saptanmıştır (r=0,30, p<0,001). **Sonuç:** Araştırmanın sonucunda işinden memnun olan hemşirelerin hem iş doyumlarının hem de merhamet düzeylerinin yüksek olduğu ve hemşirelerin merhamet düzeyi arttıkça iş doyumunun da arttığı saptanmıştır.

Anahtar Kelimeler: Hemşire; merhamet; iş doyum

The Turkish Language Institution defines compassion as “a feeling of sympathy and sadness regarding a bad condition of an individual or a living creature.^{1,2} Compassion, which is seen as a motivation to act to alleviate the pain of others, is one of the main characteristics of nursing. It has been stated that

in nursing practices, providing care with compassion to someone who is suffering forms the basis of nursing care and supports the relational process between the patient and the nurse.^{3,4} It is also stated that sense of compassion can also encourage nurses and motivate them to provide quality care to patients.^{5,6} It has

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Peer review under responsibility of Türkiye Klinikleri Journal of Nursing Sciences.

Received: 15 May 2020

Received in revised form: 29 Sep 2020

Accepted: 20 Oct 2020

Available online: 21 Jan 2021

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also been stated that compassion can help nurses in professional satisfaction.^{6,7} Compassion satisfaction is a psychological reward of caring for someone else, in other words, being helpful.⁸ It is stated that compassion satisfaction is affected by factors such as the way of providing care, health system, colleagues and psychological resilience.^{6,9,10} Indicator of compassion satisfaction is the helper's enjoying the work done in providing care system and getting satisfaction from professional life.¹⁰ Compassion fatigue is the opposite of compassion satisfaction.^{8,11} Compassion fatigue refers to the physical, emotional, social, and spiritual burnout which causes a widespread decrease in caregivers' willingness, capability and energy to empathize with and care for others.¹²⁻¹⁵ Compassion fatigue is expressed as a cost of nursing care incurred as a natural consequence of the nurse-patient care relationship.¹⁻³ High compassion fatigue shows low compassion satisfaction.⁸ Compassion fatigue is commonly observed especially in forensic nurses and nurses working in oncology, pediatrics, gynecology and intensive care clinics, emergency services and hospices.^{7,12}

One of the most important requirements for individuals to be successful, happy and productive is to have satisfaction in their jobs. In general, job satisfaction refers to the level of harmony between individual and institutional expectations, or the degree to which physical, mental and social needs of employees are met in line with their expectations. Job satisfaction is very important for every profession, but it is even more important for nurses who are responsible for the protection and maintenance of community health, have very difficult working conditions and should be devoted to their work.^{16,17}

Studies report a significant relationship between compassion fatigue and burnout, indicating that job satisfaction affects compassion fatigue. Compassion fatigue also adversely affects job satisfaction by decreasing nurses' energy and willingness to care for patients.^{7,18}

In studies conducted in our country, mostly studies conducted about compassion fatigue and job satisfaction and the factors affecting these were found, while no studies were found on the association between compassion states and job satisfaction.

This study was conducted to examine the relationship between the compassion of nurses and the affecting factors on their level of job satisfaction.

MATERIAL AND METHODS

DESIGN, PARTICIPANTS AND SETTING

This descriptive study was conducted between February and May 2018 at a university hospital in the north of Turkey. The population of this descriptive study consisted of 550 nurses working in the university hospital. No sampling selection method was used, and the study sample included 452 nurses who were available within this period, who met the inclusion criteria (at least 1 year of experience, working in clinics), and agreed to participate in the study. Thus, the study was conducted with 209 nurses. In the study, 46.2% of the population was reached.

INSTRUMENTS

The research data was collected using the Introductory Information Form developed by the researchers in line with the literature, the Compassion Scale and the Nurse Job Satisfaction Scale. The form developed by the researchers consists of nine questions about nurses' sociodemographic and professional characteristics such as age, gender and professional experience.

Compassion Scale was developed by Pommier and its Turkish validity and reliability study was conducted by Akdeniz and Deniz.^{19,20} This is a five-point Likert type scale consisting of 24 items and six subscales: Kindness, Indifference, Common humanity, Disengagement, Mindfulness and Separation. Higher scale scores refer to higher compassion levels (ranging from 24 to 120 points). The Cronbach's alpha value for the scale was found to be 0.85.^{19,20} In this study, the Cronbach alpha coefficient was found to be 0.87.

Nurse Job Satisfaction Scale was developed by Muya et al. to determine the level of job satisfaction in nurses, and its Turkish validity and reliability study was conducted by Türe Yılmaz and Yıldırım.^{21,22} This is a five-point Likert type scale, from 1 (definitely no) to 5 (absolutely yes), consisting of 24 items and four subscales: "Positive Emotions toward Work",

“Appropriate Support from Superiors”, “Perceived Significance in the Workplace”, and “Pleasant Working Environment”. The scale has no cut-off point. Higher scale scores close to five refer to higher job satisfaction levels, whereas lower scale scores close to one refer to lower job satisfaction levels (ranging from 24 to 120 points). The Cronbach’s alpha values were found to be $\alpha=0.94$ for the original scale, and $\alpha=0.81-0.91$ for the subscales.^{21,22} In this study, the Cronbach alpha coefficient was found to be 0.90.

DATA COLLECTION

Data were collected in the nurses’ room in the hospital during the nurses’ resting time. Prior to conducting the study, the nurses were informed about the study in detail, and their questions were answered.

DATA ANALYSIS

The data was analyzed using IBM SPSS Version 23. The independent variables consisted of nurses’ descriptive characteristics and opinions about compassion fatigue; whereas the dependent variables consisted of nurses’ scores on the compassion scale and the nurse job satisfaction scale. Firstly, the Kolmogorov-Smirnov test was used to determine whether the data was distributed normally. Number, percentage, mean, standard deviation and median were used as descriptive statistics; parametric tests (the independent two-sample t-test, one-way analysis of variance (ANOVA) and the TUKEY test) were used to analyze the data with normal distribution; and nonparametric tests (the Mann-Whitney U test and the Kruskal-Wallis test) were used to analyze the data without normal distribution. The Spearman correlation analysis was used to determine the relationship between nurses’ scores on the job satisfaction scale and the compassion scale and subscales. The significance level was considered 0.05 for all comparisons.

ETHICAL CONSIDERATIONS

Ethical approval was obtained from the Ethics Research Committee of Ondokuz Mayıs University of Medical Science (B.30.2.ODM.0.20.0871516, on March 30, 2018). Informed, written consent was obtained from the participants who were informed about the purpose and design of the study and assured that participation was voluntary and confidential. All par-

TABLE 1: Nurses’ descriptive characteristics (n=209).

Characteristics	Number (n)	Percent (%)
Age (year)		
20-25	32	15.3
26-30	34	16.3
31-35	47	22.5
36-40	55	26.3
41 and over	41	19.6
Marital status		
Married	148	70.8
Single	61	29.2
Education level		
High school degree	11	5.3
Associate’s degree	50	23.9
Bachelor’s degree	129	61.7
Master’s degree	19	9.1
Professional experience (years)		
1-5	44	21.1
6-10	52	24.9
11-15	48	23.0
16-20	37	17.7
21 and over	28	13.4
Sector where employed at most		
Pediatric unit	72	34.4
Internal medicine unit	30	14.4
Surgical unit	55	26.3
Intensive care unit	35	16.7
Operating room	17	8.1
Sector where currently employed		
Pediatric unit	69	33.0
Internal medicine unit	30	14.4
Surgical unit	62	29.7
Intensive care unit	29	13.9
Operating room	19	9.1
Willingly chose the nursing profession		
Yes	145	69.4
No	64	30.6
Willingly chose the current sector where employed		
Yes	34	16.3
No	175	83.7
Job satisfaction		
I am not satisfied at all	18	8.6
I am not satisfied	22	10.5
I am undecided	43	20.6
I am satisfied	116	55.5
I am very satisfied	10	4.8
Total	209	100.0

ticipants voluntarily agreed to participate in the study, which was carried out in accordance with the Helsinki Declaration Principles.

RESULTS

SAMPLE CHARACTERISTICS

Of the nurses, 26.3% were in the age group of 36-40, 70.8% were married, 61.7% had a bachelor's degree in nursing, and 24.9% had 6-10 years of professional experience. In addition, 34.4% and 26.3% were employed in pediatrics and surgery units, respectively. Moreover, 69.4% of the nurses willingly chose the nursing profession, 83.7% did not want to be employed in the unit they were working, and 55.5% were satisfied with their jobs (Table 1).

JOB SATISFACTION AND COMPASSION

The nurses' job satisfaction scale mean, median, minimum and maximum scores were 92.43 ± 18.65 , 92, 35 and 135, respectively. Their compassion scale total mean, median, minimum and maximum scores were 95.96 ± 11.90 , 98, 59 and 118, respectively. In addition, the nurses' mean score was 16.34 ± 2.94 for the kindness subscale, 16.05 ± 2.8 for the indifference subscale, 15.33 ± 2.76 for the common humanity subscale, 15.79 ± 2.51 for the disengagement scale, 16.28 ± 2.74 for the mindfulness subscale, and 16.17 ± 2.57 for the separation subscale (Table 2).

NURSES' COMPASSION AND JOB SATISFACTION MEAN SCORES BY THEIR DESCRIPTIVE CHARACTERISTICS

A statistically significant difference was found between nurses' job satisfaction scale mean scores with respect to education level ($F_3=2.71$, $p=0.046$). The job satisfaction scale mean score of nurses with a bachelor's degree was statistically, significantly

higher than the mean score of nurses with an associate's degree. A statistically significant difference was found between nurses' job satisfaction scale mean scores with respect to the sector where nurses were employed at most ($F_4=8.58$, $p<0.001$). In this regard, the job satisfaction scale mean score of nurses working in pediatric units was statistically, significantly higher than the mean scores of nurses working in internal medicine units and operating rooms; and the job satisfaction scale mean score of nurses working in an operating room was statistically, significantly lower than the mean scores of nurses working in other units. This was similar in terms of the variable of the sector where currently employed ($KW_4=22.35$, $p<0.001$). The job satisfaction scale mean scores of nurses working in surgical and intensive care units were statistically, significantly higher than the mean score of nurses working in internal medicine units. A statistically significant difference was found between nurses' job satisfaction scale mean scores with respect to having willingly chosen the nursing profession ($F_{204}=1.91$, $p<0.05$). The job satisfaction scale mean score of nurses who willingly chose their profession was statistically, significantly higher than the mean score of nurses who did not (Table 3).

A statistically significant difference was found between nurses' mean scores on the job satisfaction ($F_4=5.88$, $p<0.001$) and compassion scales ($F_4=9.77$, $p<0.001$) with respect to the state of being satisfied with the job. The compassion and job satisfaction scales mean scores of nurses who were very satisfied with their jobs were statistically, significantly higher than the mean scores of nurses who were not. (Table 3).

TABLE 2: Descriptive statistics regarding nurse job satisfaction and compassion.

Variables	Mean (SD)	Median	Minimum	Maximum
Compassion scale (total)	95.96 (11.90)	98	59	118
Kindness	16.34 (2.94)	17	4	20
Indifference*	16.05 (2.81)	16	8	20
Common humanity	15.33 (2.76)	16	4	20
Disengagement*	15.79 (2.51)	16	7	20
Mindfulness	16.28 (2.74)	16	4	20
Separation*	16.17 (2.57)	16	8	20
Job satisfaction scale	92.43 (18.65)	92	35	120

SD: Standard deviation; *Reverse-scored in the calculation of total mean score.

TABLE 3: Nurses' compassion and job satisfaction mean scores by their descriptive characteristics.

	Compassion				Job satisfaction			
	Mean (SD)/Median (minimum-maximum)	Test statistics	df	p value	Mean (SD)/Median (minimum-maximum)	Test statistics	df	p value
Education level								
High school degree	95 (71-105)				95.27 (9.77) ab			
Associate's degree	98 (59-118)	2.50*	3	0.476	86.62 (18.59) a	2.71**	3	0.046
Bachelor's degree	99 (68-118)				94.91 (18.58) b			
Master's degree	100 (72-118)				89.21 (20.47) ab			
Sector where employed at most								
Pediatric unit	97.57 (10.61)				98.75 (18.95) a			
Internal medicine unit	96.37 (13.56)				87.93 (15.83) b			
Surgical unit	94.40 (12.01)	0.69**	4	0.597	92.07 (14.09) ab	8.58**	4	<0.001
Intensive care unit	95.74 (13.08)				93.60 (18.77) ab			
Operating room	93.94 (11.56)				72.29 (20.11) c			
Sector where currently employed								
Pediatric unit	97 (70 - 118)				94 (60 - 135) a			
Internal medicine unit	98.50 (71 - 118)				85.50 (62 - 125) b			
Surgical unit	96.50 (59 - 118)	1.52*	4	0.823	93.50 (62 - 128) ac	22.35*	4	<0.001
Intensive care unit	99 (68 - 111)				92 (51 - 130) ac			
Operating room	97 (72 - 111)				74 (35 - 105) b			
Willingly chose the nursing profession								
Yes	99 (68 - 118)	3.97***	207	0.096	94.41 (19.03)	1.91****	204	0.020
No	95.50 (59 - 118)				87.94 (17.07)			
Job satisfaction								
I am not satisfied at all	90.94 (13.95) ab				83.83 (23.86) a			
I am not satisfied	93.23 (12.90) ab				79.64 (12.23) a			
I am undecided	91.63 (12.24) a	5.88**	4	<0.001	86.19 (16.43) a	9.77**	4	<0.001
I am satisfied	97.93 (10.50) bc				97.15 (17.58) b			
I am very satisfied	106.80 (8.00) c				108.10 (10.85) b			

*Kruskal-Wallis H and Tamhane's T2 testi, **One-way analysis of variance and TUKEY test, ***Mann-Whitney U test, ****Independent two-sample t test. a, b, c: There is difference between answers with the different signs (only for some data with significant differences).

TABLE 4: Correlation between nurse job satisfaction and subconcepts of nurse compassion subscales.

	Spearman	r value	Common					Separation	Compassion scale (total)
			Kindness	Indifference	humanity	Disengagement	Mindfulness		
Nurse job satisfaction scale			0.366**	0.054	0.220**	0.31	0.318**	0.190**	0.303**
		p value	0.000	0.434	0.001	0.058	0.000	0.006	0.000

r=0.00-0.25 very weak, r=0.26-0.49 weak, r=0.50-0.69 moderate, r=0.70-0.89 high, r=0.90-1.00 very high.

No statistically significant relationship was determined between nurses' total mean scores on the job satisfaction scale and the indifference and disengagement subscales. A positive, weak and statistically significant relationship was found between nurses' total mean scores on the job satisfaction scale, on the compassion scale (r=0.303, p<0.001), the kindness (r=0.366, p<0.001), common humanity (r=0.220, p=0.001), mindfulness (r=0.318, p<0.001) and sepa-

ration (r=0.190, p=0.006) subscales (p<0.001) (Table 4).

DISCUSSION

In the present study, nurses obtained a high compassion scale total mean score (Table 2). Meyer and Çingöl et al. also found a high level of compassion in nurses.^{18,23} The nurses who were satisfied with their jobs had higher levels of compassion (Table 3). Stud-

ies report that job satisfaction in nurses affects the level of their compassion.^{7,16} Kelly et al. found that variables such as job satisfaction and having willingly chosen the nursing profession were the most significant indicators of compassion fatigue in nurses working in emergency care services.²⁴

The nurses' job satisfaction scale total mean score was above the average value (Table 3). Kavlu and Pınar found a moderate job satisfaction in nurses working in emergency services.¹⁷ Intepeler et al. found that the overall job satisfaction of nurses working in a university hospital was moderate according to the measurements made in 2007, 2009 and 2011.²⁵ Gülyan also determined a moderate level of job satisfaction in general nurses.²⁶

The nurses with a bachelor's degree had a significantly higher job satisfaction mean score than the nurses with an associate's degree (Table 3). Studies of the effects of the level of education on job satisfaction determined a negative correlation between the level of education and job satisfaction, indicating that job satisfaction decreased as the level of education increased. However, controversial results have been found in the studies conducted in Turkey. Gülyan found that job satisfaction increased as the level of education of nurses increased; whereas Gölbaşı et al. and Yıldız and Kanan found that job satisfaction decreased as the level of education of nurses increased.²⁶⁻²⁸

The job satisfaction mean score of nurses working in pediatric units was higher than the mean scores of nurses working in other units; and the job satisfaction mean scores of nurses working in surgical and intensive care units were higher than the mean score of nurses working in internal units (Table 3). Patients with chronic diseases predominate in internal medicine clinics, resulting in recurrent hospitalization and delayed recovery. Surgical clinics usually have patients with acute diseases who recover and get discharged in a short time. These patient characteristics may affect job satisfaction in the nurses working in these clinics. However, studies report different results in this regard. Aksoy et al. found that the level of job satisfaction among intensive care nurses was higher than that of surgical clinic nurses, and the level of job

satisfaction among surgical clinic nurses was higher than that of operating room nurses.¹⁶ Tilev and Beydağ also found that nurses working in internal medicine units had higher job satisfaction than nurses working in surgical units.²⁹ Akman et al. found that nurses working in pediatric surgery units with a low number of patients had higher job satisfaction and lower burnout levels than nurses working in pediatric intensive care units.³⁰

Nurses who willingly chose the nursing profession and those who were satisfied with their jobs were found to have higher job satisfaction mean scores than those who did not (Table 3). Similar results were found in the studies conducted in Turkey. Kavlu and Pınar found higher job satisfaction in those who willingly chose to work in the emergency service unit.¹⁷ Tambağ et al. report that being satisfied with the unit where employed positively affects job satisfaction in nurses.³¹ Gülyan observed that nurses who were happy and pleased with their jobs had higher job satisfaction, and similarly Durmuş and Günay found that nurses who perform their jobs with care had a higher job satisfaction mean score.^{26,32}

A positive, weak and statistically significant relationship was found between nurses' total mean scores on the job satisfaction scale, the compassion scale, and the kindness, common humanity, mindfulness and separation subscales ($p \leq 0.001$) (Table 4). There was a limited amount of research on the relationship between job satisfaction and compassion levels. Meyer et al. conducted a study using nurses working in pediatric clinics, and reported a significant relationship between job satisfaction, compassion fatigue and burnout.¹⁸ However, Roney and Acri found no significant relationship between compassion fatigue and job satisfaction in pediatric nurses.³³ Kolthoff and Hickman reported that nurses caring for elderly individuals intensively experienced compassion fatigue and job dissatisfaction because they were exposed to severe pain and loss. They also found that newly-recruited nurses experienced more compassionate fatigue and burnout than the experienced nurses.³⁴ Sekol and Kim found that nurses working in hematology/oncology units had higher job satisfaction and compassion satisfaction than nurses working in the surgical sector, and concluded that this

difference was because nurses working in oncology units received end-of-life care training and mentorship support.³⁵ Li et al. report that organizational commitment and group cohesion affect job satisfaction and compassion satisfaction, indicating that group incompatibility leads to compassion fatigue and exhaustion.³⁶

LIMITATIONS

There are two limitations to the current study. First, conducting the study in a single university hospital, not including private and public hospitals, and interpretation of the results based on the statements of the nurses comprises the limitation of the study. In addition, the study sample included only the Northern Anatolia region of Turkey; therefore, study findings cannot be generalized in terms of nursing in other regions. Second, although the majority of nurses from the units participated in the current study, there was still a significant fraction of nurses who did not participate, which may have introduced sample selection bias.

CONCLUSION

The nurses who were satisfied with their jobs had higher levels of job satisfaction and compassion. As the nurses' job satisfaction increased, the level of their compassion also increased. In addition, the nurses with bachelor's degrees, those working in pediatric units, those who were satisfied with their jobs and those who willingly chose the nursing profession had a higher level of job satisfaction.

IMPLICATIONS FOR NURSING MANAGEMENT

Provision of nursing care with a sense of compassion is an important value in nurse-patient care relationship. It should be noted that no humane care can be provided without mercy and each practice made with

compassion will cause less pain in individuals. Compassion fatigue, which is considered to be the cost of nursing care, is a risk for nurses. Converting compassion fatigue of nurses to compassion satisfaction is important in terms of increasing the quality of care and enabling nurses to get satisfaction from their job. In order to prevent compassion fatigue, nurses should be supported to know both themselves and their values and to develop healthy coping mechanisms against compassion fatigue. Nurses should be trained about compassion fatigue and programs should be created and implemented to prevent and treat compassion fatigue. In addition, measures should be taken to improve and develop the factors that influence institutional job satisfaction such as improving working conditions and providing managerial support.

Source of Finance

During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.

Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

Idea/Concept: Nazlı Baltacı, Esra Tural Büyük; **Design:** Esra Tural Büyük; **Control/Supervision:** Esra Tural Büyük, Nazlı Baltacı; **Data Collection and/or Processing:** Nazlı Baltacı, Esra Tural Büyük; **Analysis and/or Interpretation:** Nazlı Baltacı, Esra Tural Büyük; **Literature Review:** Esra Tural Büyük, Nazlı Baltacı; **Writing the Article:** Nazlı Baltacı, Esra Tural Büyük; **Critical Review:** Esra Tural Büyük, Nazlı Baltacı; **References and Fundings:** Esra Tural Büyük, Nazlı Baltacı.

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