

Relation between Job Crafting Behaviors and Work Alienation among Staff Nurses

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Research Article

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Abstract

Background

Job crafting and work alienation have emerged as important factors influencing nurses' workplace experiences and organizational outcomes. Proactive job crafting behaviors may enable nurses to better align their work with their abilities and professional needs, potentially reducing feelings of alienation and promoting a more positive work experience. Understanding the relationship between these variables may establish strategies to support nurse well-being and workforce sustainability.

Objectives

This study aimed to examine the relation between job crafting behaviors and work alienation among staff nurses.

Design:

A descriptive correlation design was adopted.

Setting:

The study took place at Manshiet El Bakery Hospital which is affiliated to the Ministry of Health and Population, Cairo, Egypt. It provides care for patients in different specialties. The total bed capacity is 184 beds. It includes one building, this building consists of six floors, which contains different units and departments such as (Emergency Department, Operations Department, ENT department, Pediatric department, Orthopedic department, Surgical department, Obstetrics and Gynecological department, medical department, Adult intensive care unit, Neonatal intensive care unit, and outpatient clinics).

Participants:

The subjects of this study included (143) out of (227) staff nurses who working in above mentioned setting during the time of the study. They were selected via a simple random sampling method.

Methods

Data for this study were gathered via three instruments: a Demographic Data Sheet, Job Crafting Scale and the Work Alienation Scale.

Results

less than half (49.6%) of staff nurses had a moderate level of job crafting behaviors, followed less than one third (32.2%) had a low level, while less than one fifth (18.2%) demonstrated a high level of job crafting behaviors. Meanwhile, more than half (54.5%) of staff nurses experienced a moderate level of work alienation, followed by more than one quarter (25.2%) had a low level, whereas about one fifth (20.3%) of staff nurses reported a high level of work alienation.

Conclusion

There was a highly statistically significant correlation between job crafting behaviors and work alienation among staff nurses. Future longitudinal and interventional studies are recommended to clarify causal pathways.

Trial Registration Number:

Not applicable.

Clinical Trial Number:

Not applicable

Background

The dynamic and highly competitive environment requires employees to continuously demonstrate innovation, adaptability, and the ability to respond proactively to changing job demands and organizational challenges (1; 2). As organizations face rapid technological advancements, globalization, evolving customer expectations, and increasing market competition, employees are expected to be flexible in performing their roles and capable of adjusting to new work requirements. Traditional job designs, in which employees strictly follow predefined tasks and responsibilities, are becoming less effective in addressing the complexities of modern workplaces. Consequently, organizations increasingly encourage employees to take an active role in shaping their work experiences and improving the way they perform their jobs. In response to these changing workplace demands, the concept of job crafting has gained considerable attention in the fields of organizational behavior and human resource management. Job crafting enables employees to proactively modify the boundaries of their jobs by adjusting their tasks, workplace relationships, and perceptions of their work to better align with their strengths, interests, skills, values, and personal identities (3).

Job crafting originally introduced by (4), who represents a bottom-up approach to job design that differs from traditional organizational job design models. Rather than passively accepting predefined roles,

employees proactively modify their job tasks, responsibilities, and workplace interactions to improve person-job fit and create greater meaning in their work (4; 5). Through job crafting, employees reshape their work according to their preferences, abilities, and work styles while utilizing available resources to enhance their work experience and performance (6).

Building on this conceptualization, (4) proposed three forms of job crafting: task crafting, which involves modifying job tasks; relational crafting, which focuses on changing workplace relationships; and cognitive crafting, which involves altering employees' perceptions of their work. Within the Job Demands–Resources (JD-R) model, job crafting is viewed as a proactive behavior that enables employees to balance job demands with available resources (7; 1). Accordingly, four dimensions of job crafting have been identified: increasing structural job resources, increasing social job resources, increasing challenging job demands, and decreasing hindering job demands (8). These proactive behaviors help employees optimize their work environment while enhancing motivation, well-being, and job performance.

In contrast to these positive outcomes, work alienation has emerged as an important organizational issue because of its negative consequences for both employees and organizations. Work alienation refers to employees' psychological detachment from their work and is characterized by reduced motivation, organizational commitment, job satisfaction, well-being, and work performance (9). Recent evidence has further associated work alienation with burnout, reduced work engagement, turnover intentions, and lower perceived job performance (10).

Several organizational factors contribute to the development of work alienation. Employees working in large bureaucratic organizations may experience social isolation, reduced cooperation, and limited workplace support. Bureaucratic control often restricts employees' autonomy, thereby increasing feelings of work alienation (11). These concerns are particularly relevant in healthcare organizations, where hierarchical structures and standardized procedures may limit nurses' participation in decision-making and reduce professional autonomy (12; 13). Moreover, because work alienation reflects employees' psychological separation from their work environment, it may reduce access to workplace resources and contribute to emotional and physical exhaustion (14).

Consequently, work alienation has significant implications for nursing practice. Among nurses, work alienation has been associated with poorer professional performance, increased missed nursing care, reduced professional quality of life, lower emotional commitment and job satisfaction, and higher turnover intention (15; 16). Furthermore, recent studies have shown that work alienation negatively influences job performance both directly and indirectly through reduced job satisfaction (17). These findings highlight work alienation as a significant challenge for healthcare organizations seeking to improve workforce well-being and quality of patient care.

Given these adverse consequences, researchers have increasingly explored strategies to reduce work alienation. Among these, job crafting has emerged as a promising approach because it enables employees to proactively modify their work tasks, workplace relationships, and cognitive perceptions of

work to better align with their abilities, needs, and personal values. By increasing autonomy, optimizing job resources, and enhancing work meaningfulness. Job crafting strengthens employees' psychological attachment to their work and reduces feelings of alienation. Empirical evidence supports this relationship. For example, (18) reported that higher levels of job crafting were associated with lower levels of work alienation among nurses during the COVID-19 pandemic. Similarly, (19) found that employees who engaged in higher levels of job crafting experienced lower levels of work alienation. Collectively, these findings suggest that job crafting may serve as an effective organizational strategy for mitigating work alienation by fostering a more engaging and meaningful work environment.

Despite these promising findings, empirical evidence examining the relationship between job crafting and work alienation among nurses remains limited. Existing studies have primarily focused on the antecedents and consequences of work alienation, including burnout, job satisfaction, turnover intention, and work performance, whereas comparatively few studies have investigated job crafting as a potential mechanism for reducing work alienation. Moreover, the available evidence has been generated within specific organizational and cultural contexts, limiting the generalizability of the findings to other nursing populations. Therefore, further research is needed to examine the relationship between job crafting and work alienation among nurses in healthcare settings. Such evidence may provide valuable insights for developing organizational strategies that enhance nurses' well-being, strengthen their attachment to work, and improve the quality of healthcare services.

Significance of the study and research gap

Despite growing interest in job crafting, research examining its relationship with work alienation among nurses remains limited. Most previous studies have focused on the outcomes of work alienation, such as burnout, job satisfaction, turnover intention, and job performance, while relatively few have explored job crafting as a potential way to reduce work alienation (15; 20). In addition, the available evidence has been conducted in different organizational and cultural settings, limiting its applicability to nursing practice. Therefore, further research is needed to examine the relationship between job crafting and work alienation among nurses.

Nurses are usually considered an important part of the health care sector, whose job attitude is carefully allied with patient health outcomes and safety. The researcher observed the workplace that the staff nurses are working firmer and yield their effort much more extremely, they still appear dissatisfied and low motivated because they remain limited from being employed easily and rarely take decisions about their effort by themselves. Furthermore, high levels of work alienation can lead to emotional exhaustion, reduced job satisfaction, and ultimately higher turnover rates, which are detrimental not only to the nurses but also to patient care and organizational efficiency. So, the researcher is interested in assessing the relation between job crafting behaviors and work alienation among staff nurses.

Theoretical Framework

This study is grounded in the Job Demands–Resources (JD-R) model, which provides a comprehensive framework for understanding how job demands and job resources influence employees' well-being and work-related outcomes (1; 3). According to the JD-R model, employees experience optimal motivation and psychological well-being when they have sufficient job resources to cope with work demands. In contrast, excessive job demands combined with limited resources may lead to psychological strain and negative work outcomes.

Within this framework, job crafting is viewed as a proactive behavior through which employees modify their job demands and resources to better fit their abilities, needs, and personal preferences (6). By increasing structural and social job resources, seeking challenging job demands, and reducing hindering demands, employees create a more meaningful and supportive work environment. These proactive changes enhance autonomy, competence, and work meaningfulness while reducing the negative effects of demanding work environments (1).

The concept of job crafting was originally proposed by (4), who suggested that employees actively shape their work by modifying their tasks, workplace relationships, and perceptions of their jobs. Based on the JD-R model, the present study proposes that nurses who engage in job crafting are more likely to perceive greater control and meaning in their work, thereby reducing feelings of work alienation. Accordingly, the JD-R model provides an appropriate theoretical foundation for examining the relationship between job crafting and work alienation among staff nurses. As illustrated in figure (1).

Figure (1) Study conceptual model

Methodology

Aim of this study:

This study aimed to investigate the relation between job crafting behaviors and work alienation among staff nurses through:

1. Assessing job crafting behaviors as perceived by staff nurses.
2. Assessing work alienation level among staff nurses.
3. Finding out the relation of job crafting behaviors and work alienation among staff nurses.

Research Question

Is there a relation between job crafting behaviors and work alienation among staff nurses?

Research Design:

This study employed a descriptive correlational design, following the STROBE (Strengthening the Reporting of Observational Studies in Epidemiology) guidelines.

Research Setting:

This study will be carried out in Manshiet El Bakery Hospital which is affiliated to the Ministry of Health and Population, Cairo, Egypt. It provides care for patients in different specialties. The total bed capacity is 184 beds. It includes one buildings, this building consist of six floors, which contains different units and departments such as (Emergency Department, Operations Department, ENT department, Pediatric department, Orthopedic department, Surgical department, Obstetrics and Gynecological department, Medical department, Adult intensive care unit, Neonatal intensive care unit, and outpatient clinics).

Sample:

A simple random sampling technique was utilized to select participants from the target population during the data collection period. The sampling frame comprised a comprehensive list of all 227 staff nurses working at Manshiet El Bakery Hospital who fulfilled the inclusion criteria. Each nurse was assigned a unique identification number, and a final sample of 143 participants was drawn utilizing a computer-generated random number table. This rigorous approach minimized selection bias by ensuring that every eligible nurse possessed an equal and independent probability of being included in the study.

- **Inclusion Criteria:** Staff nurses with a minimum of six months of tenure at the hospital who voluntarily agreed to participate.
- **Exclusion Criteria:** Newly hired nursing staff with less than six months of work experience

Calculation of the required sample size by using this equation

$$n = \frac{N \times P (1 - p)}{[N - 1(d^2/z^2)] p(1-p)}$$

n = sample size

N = population size

d = the error rate is 0.05

z = the standard score corresponding to the significance level is 0.95 and is equal to 1.96

p = availability of property and neutral = 0.50 (42)

Measurement tools

Tool 1: A demographic data sheet

This tool was aimed to collect personal data and job characteristics of staff nurses, were included age, marital status, educational qualifications, and years of nursing experience.

Tool 2: Job Crafting Scale

At developed by Tims and Derks (2012) (23) and modified by the researcher, was used to assess job crafting as perceived by staff nurses. The scale consists of 21 items categorized into four dimensions: increasing structural job resources (5 items), decreasing hindering job demands (6 items), increasing social job resources (5 items), and increasing challenging job demands (5 items). Responses are recorded on a 5-point Likert scale (1 = strongly disagree to 5 = strongly agree). The total scores represented a high perception level if the total score was more than 75%, a moderate perception level if the total score ranged from 60% to 75%, and a low perception level if the total score was less than 60% with Cronbach's alpha = 0.90 (23).

Tool 3: Work Alienation Scale

This scale was developed by Çelik& Damar (2017) (24) and modified by the researcher, it was used to assess work alienation levels among staff nurses. The scale consisted of 16 items divided into three dimensions: self-alienation (5 items), meaninglessness (8 items), and powerlessness (3 items). Staff nurses' responses were measured using a 5-point Likert scale ranging from strongly agrees to strongly disagree. The total score was calculated by summing the scores of all items. The score was considered high if it was $\geq 75\%$, moderate if the percentage ranged from 60% to less than 75%, and low if it was less than 60% (24). In the current study, the work alienation scale demonstrated high internal consistency for the total scale ($\alpha = 0.88$).

Tools validity

The face and content validity of the study instruments were evaluated by a panel of five experts in Nursing Administration and psychiatry and mental health nursing from Ain Shams University, Egypt. The experts reviewed the instruments for clarity, relevance, comprehensiveness, and cultural appropriateness. Based on their recommendations, minor revisions were made to improve the wording and clarity of some items. The Job Crafting Scale and the Work Alienation Scale were translated into Arabic using the forward-backward translation method. The back-translated versions were compared with the original scales to ensure that the meaning of all items was preserved.

The construct validity of the Arabic versions was examined using Confirmatory Factor Analysis (CFA). The Job Crafting Scale demonstrated a good model fit (CFI = 0.95, TLI = 0.94, RMSEA = 0.05), while the Work Alienation Scale also showed an acceptable fit to the data (CFI = 0.93, TLI = 0.92, RMSEA = 0.06), supporting the validity of both instruments.

Internal consistency reliability was assessed using Cronbach's alpha coefficient. The job crafting scale showed excellent reliability (Cronbach's $\alpha = 0.90$), whereas the work alienation Scale demonstrated good reliability (Cronbach's $\alpha = 0.88$). These findings indicate that both instruments were valid and reliable for measuring the study variables.

Ethical considerations:

This study was conducted in full compliance with the ethical principles outlined in the Declaration of Helsinki. Ethical approval was obtained from the Research Ethics Committee of the Faculty of Nursing Ain shams University, Egypt (Approval Code: 26.02.1135), in accordance with institutional guidelines. A formal approval letter, including the study title and objectives, was issued by the Dean of the Faculty of Nursing and submitted to the Director of Manshiet El Bakery Hospital to obtain permission for data collection.

Prior to participation, each nurse received a clear explanation of the study objectives and procedures and provided written informed consent. Participants were informed of their right to withdraw from the study at any time without penalty or consequences. Confidentiality and anonymity were ensured, and all collected data were used exclusively for research purposes. Participation was entirely voluntary, with no coercion or undue influence at any stage. The authors declare no conflicts of interest.

Pilot Study

A pilot study was conducted with 15 nurses from Manshiet El Bakery Hospital, Egypt, accounting for 10% of the total study sample. The primary objective was to assess the feasibility and clarity of the research instruments. Additionally, the pilot helped estimate that completing the tools required approximately 20 to 25 minutes. Upon reviewing the pilot data, no modifications to the instruments were found necessary. Therefore, participants in the pilot study were excluded from the final sample used in the main study.

Data collection:

The field work of the study took two months started in August 2025 and completed in October 2025. The researcher head nurse of each unit for determining the suitable time to collect the data. The researcher introduced herself to staff nurses in their workplace and explained the aim of the study and components of the questionnaires. The researcher was present during the data collection period to explain how to fill the questionnaire, clarify any ambiguity and answer any questions. Data was collected 4 days per week at the morning and afternoon shifts. The researcher collected about 15–20 questionnaire every week. The filled forms were handed back to the researcher to check its completeness.

Statistical analysis:

Data were collected, coded, and entered into a personal computer, then analyzed using the Statistical Package for Social Sciences (SPSS) version 26. The collected data were organized, revised, analyzed, and presented as numbers and percentages in tables and figures. Descriptive statistics, including mean and standard deviation, were used to summarize quantitative data. The chi-square test was applied to

examine the independence between categorical variables, including Pearson’s chi-square and likelihood-ratio chi-square, while Fisher’s exact test and Yates’ corrected chi-square were used for 2×2 tables when appropriate. Pearson’s correlation coefficient was used to assess the relationship between two quantitative variables. Multiple linear regression analysis was conducted to identify predictors of outcome variables. Statistical significance was considered at $p < 0.05$, and high statistical significance was considered at $p < 0.001$.

Results

Table (1): Personal data and job characteristics of staff nurses (n = 143)

Table (1) illustrates the largest proportion of nurses were aged less than 40 years (42%) with mean age of the participants was 31 ± 5.68 years, more than half of the nurses (58%) were working in non-critical units and the majority of the staff nurses were married (59.4%). In addition, more than one-third of the nurses (36.4%) held a bachelor's degree in nursing, and the highest percentage of nurses (42%) had less than 10 years of experience with mean was 9 ± 2.13 years.

Table (2): Mean and standard deviation of the studied nurses’ job crafting behavior dimensions (n = 143).

Table (2) concludes that the studied nurses demonstrated a moderate to relatively high level of job crafting behaviors across all dimensions. The highest mean score was observed for increasing challenging job demands (Mean = 19.43 ± 5.68), followed by decreasing hindering job demands (Mean = 18.67 ± 4.59) and increasing social job resources (Mean = 18.10 ± 5.26). The lowest mean score was reported for increasing structural job resources (Mean = 17.55 ± 7.68).

Figure (2) Distribution of total perception level of staff nurses’ regarding job crafting behavior (n = 143)

Figure 2: illustrates that less than half (49.6%) of staff nurses had a moderate level, followed by more than one quarter (32.2%) of staff nurses had a low level. Finally, less than one fifth (18.2%) of staff nurses had a high-level regarding job crafting behavior.

Table 3: Mean and standard deviation of the studied nurses’ work alienation dimensions (n = 143).

Table (3) concludes that the studied nurses experienced a moderate level of work alienation across its dimensions. The highest mean score was reported for meaningfulness (Mean = 28.23 ± 4.90), followed by self-alienation (Mean = 18.78 ± 5.68). The lowest mean score was observed for powerlessness (Mean = 10.55 ± 6.10).

Figure (3) Distribution of total work alienation level among staff nurses

Figure 3: illustrates that more than half (54.5%) of staff nurses had a moderate level, followed by more than one quarter (25.2%) of staff nurses had a low level. Finally, one fifth (20.3%) of staff nurses had a

high level regarding work alienation.

Table (4) Correlation between total staff nurses’ job crafting behavior and work alienation levels

Table (4) indicates that there was a moderate positive and highly significant correlation between total job crafting behavior and total work alienation among staff nurses ($r = 0.564$, $P = 0.000$).

Table (5): Best fitting multiple linear regression model for staff nurses’ levels regarding job crafting behavior

Table (5) shows that marital status, educational qualification, and years of experience were significant predictors of staff nurses’ job crafting behavior.

Table (6): Best fitting multiple linear regression model for staff nurses’ levels regarding work alienation

Table (6) demonstrates that educational qualification, age,, marital status, and years of experience significantly predicted work alienation among staff nurses.

Table (1): Personal data and job characteristics of staff nurses (n 143)

Personal data and job characteristics	Staff nurses in studied sample (n = 143)	
	N	%
Age (year)		
> 30	60	42
< 30 > 40	50	35
< 40 > 50	23	16
< 50	10	7
Mean $\pm$ SD 31 $\pm$ 5.68		
Workplace		
Critical unit	60	42
Non critical unit	83	58
Marital status		
Married	85	59.4
Unmarried	58	40.6
Educational Qualification		
Nursing Diploma	42	29.4
Above average diploma of nursing	42	29.4
Bachelor degree of Nursing	52	36.4
Post grade studies	7	4.8
Experiences years		
< 10	60	42
10–20	45	31.4
> 20	38	26.6
Mean $\pm$ SD 9 $\pm$ 2.13		

Table (2): Mean and standard deviation of the studied nurses' job crafting behavior dimensions (n = 143).

Job crafting behaviors Dimensions	No, item	Minimum	Maximum	Mean	SD
Increasing structural job resources	5	1.00	25.00	17.55	7.68
Decreasing hindering job demands	6	1.00	30.00	18.67	4.59
Increasing social job resources	5	1.00	25.00	18.10	5.26
Increasing challenging job demands	5	1.00	25.00	19.43	5.68

Figure (2) Distribution of total perception level of staff nurses' regarding job crafting behavior

Table (3): Mean and standard deviation of the studied nurses' work alienation dimensions (n = 143).

Work alienation Dimensions	No, item	Minimum	Maximum	Mean	SD
Self-alienation	5	1.00	25.00	18.78	5.68
Meaningfulness	8	1.00	40.00	28.23	4.90
Powerlessness	3	1.00	15.00	10.55	6.10

Figure (3) Distribution of total work alienation level among staff nurses'

Table (4) Correlation between total staff nurses' job crafting behavior and work alienation levels

Items	Total work alienation
Total job crafting	R = 0 .564 P = 0.000**

R = correlation coefficient test. P = p-value **highly significant at $p < 0.01$.

Table (5): Best fitting multiple linear regression model for staff nurses' levels regarding job crafting behavior

	Unstandardized Coefficients		Standardized Coefficients		
	B	Standard error	Beta	T	P. value
Constant	2.513	.543		4.629	0.000**
Marital status	0.458	.103	0.290	4.438	0.000**
Educational Qualification	0.262	.054	0.305	4.816	0.000**
Years of experiences	-0.406	0.106	-0.267	-3.838	0.000**
ANOVA					
Model	Sum of squares	DF	Mean Square	F	P. value
Regression	45.000	10	4.500	12.620	0.000**

(**) highly statistically significant at $P < 0.01$.

Model ANOVA: $F = 12.620$, $p < 0.001$

Table (6): Best fitting multiple linear regression model for staff nurses' levels regarding work alienation

	Unstandardized Coefficients		Standardized Coefficients		
	B	Standard error	Beta	T	P. value
Constant	1.662	0.444		3.748	0.000**
Age	-0.216	0.084	-0.137	-2.570	0.01*
Marital status	.164	0.084	0.102	1.946	0.05*
Educational Qualification	0.557	0.044	0.635	12.542	0.000**
Years of experience	-0.314	0.086	-0.202	-3.636	0.000**
ANOVA					
Model	Sum of squares	DF	Mean Square	F	p. value
Regression	70.707	10	7.071	29.714	0.000**

() highly statistically significant at $P < 0.01$.**

(*) statistically significant at $P < 0.05$.

Model ANOVA: $F = 29.714$, $p < 0.001$

Discussion

Job crafting behavior and work alienation are closely and inversely related concepts within organizational psychology. Job crafting refers to employees' proactive efforts to modify aspects of their jobs such as tasks, relationships, or cognitive perceptions to better align with their skills, values, and interests. In contrast, work alienation reflects a psychological state characterized by feelings of powerlessness, meaninglessness, isolation, and self-estrangement at work. When employees actively engage in job crafting, they increase their sense of autonomy, control, and meaningfulness, which reduces the likelihood of experiencing alienation (25). By reshaping their roles and building supportive interactions, employees can enhance work engagement and strengthen their connection to the organization. Conversely, employees who feel alienated may lack the motivation, energy, or perceived control necessary to craft their jobs effectively. Therefore, promoting job crafting behaviors can serve as an important strategy for organizations to mitigate work alienation and foster a more engaged, empowered, and psychologically connected workforce (19). The study aimed at assessing relation between Job Crafting Behaviors and Work Alienation among staff nurses through: Assessing job crafting behaviors as perceived by staff nurses, assessing job alienation level among staff nurses and Finding out the influence of job crafting behaviors on work alienation among staff nurses.

Regarding job crafting behavior dimensions, the current research findings showed that highest percentage of staff nurses at the high level was observed in the increasing structural job resources dimension. Regarding the moderate level, the highest percentage was reported for the increasing challenging job demands dimension, indicating that more than half of the staff nurses perceived a moderate level of engaging in challenging job demands. Concerning the low level, the highest percentage was found in the decreasing hindering job demands dimension, reflecting that more than one third of the staff nurses perceived a low level of reducing hindering job demands at work. From the researcher point of view staff nurses are more inclined to enhance positive aspects of their work particularly by increasing structural job resources while showing moderate engagement in seeking additional challenges. However, their limited tendency to reduce hindering job demands may reflect restricted authority, organizational constraints, and systemic workload pressures. Overall, nurses appear to focus more on strengthening available resources than on attempting to modify structural barriers within the work environment.

On the same line with a study conducted by (26) who conducted a study entitled Increasing nurses' occupational well-being: the role of career shocks, job crafting and supervisor autonomy support found that job crafting including increasing structural job resources is strongly associated with well-being in nurses, and that supportive contexts enhance nurses' ability to shape their work resources. This

supports your result that structural resources are the dimension most engaged in by nurses. This result was in the same context with (27) who conducted a study entitled Effect of Job Crafting Intervention Program on Harmonious Work Passion and Career Commitment among Nurses found that job crafting interventions helped nurses maximize job resources and optimize job demands, indicating that nurses can and do attempt to engage with challenging demands but often need structured support to do so effectively.

This result agreed with study who conducted by which entitled (28). The influence of job crafting on nurses' intent to stay: a cross-sectional study found that nurses who had decreasing in hindering demand, this job are less likely to leave their jobs. It highlights that reducing hindering demands is challenging but valuable suggesting why many nurses may report low levels in this dimension when organizational support is limited. These results in the same line with Ibrahim et al (2025) who conducted a study entitled Impact of job crafting and work engagement on the mental and physical health of palliative care nurses concluded that nurses demonstrate varying degrees of job crafting behaviors proactive role changes to match capacities and interests and that those who actively craft have better work outcomes. The research highlights that not all nurses engage equally in job crafting or related learning behaviors, which could explain why some reported high capability development while others reported lower workplace learning engagement.

This result was inconsistent with (29) Who conducted a study entitled the relationship between positive psychological capital and work engagement in clinical nurses: mediation effect of job crafting and found that nurses operating in positive work environments showed strong job crafting across all four dimensions, including decreasing hindering job demands and increasing challenging demands rather than showing low scores in any one dimension.

Regarding work alienation, the current research findings that more than one fifth of staff nurses at the high level regarding powerlessness dimension. While, more than half of staff nurses had a moderate level regarding the meaningfulness dimension. Finally, more than one quarter of staff nurses had a low level regarding self-alienation dimension. A noticeable proportion reported a high level of powerlessness, while more than half experienced a moderate level of meaningfulness. Meanwhile, a considerable proportion showed a low level of self-alienation, suggesting that despite some feelings of limited control at work, many nurses still maintain a sense of connection and commitment to their profession. This result was consistent with (30) who conducted a study entitled Job security as perceived by staff nurses and its relation to their work alienation and found that work alienation among staff nurses and found that the powerlessness dimension had the highest mean score compared with other dimensions, indicating that many nurses feel limited control over their work and decision-making. This result agreed with (32) who conducted a study entitled Influence of Head Nurses' Resilience on Emergency Hospital Nurses' Innovative Behavior and Work Alienation and found that nurses experienced high levels of powerlessness while meaninglessness and self-estrangement were relatively lower, indicating variations among the dimensions of work alienation.

This result was in the same line with (33) who conducted a study entitled Relation between exploitative leadership and nurses' work alienation: The mediating role of moral disengagement and found that across-sectional study conducted among nurses showed that more than half of nurses experienced a moderate level of work alienation, which indicates that alienation dimensions such as powerlessness and meaninglessness are commonly present at moderate levels in nursing work environments. This result was consistent with (34) who conducted a study entitled Work alienation and organizational factors among hospital nurses: A cross-sectional study and found that most nurses experienced low levels of powerlessness and low self-alienation, and a relatively high sense of meaningfulness in their work.

The constant study showed that there was a moderate positive and highly significant correlation between total job crafting behavior and total work alienation among staff nurses ($r = 0.564$, $P = 0.000$). From the researcher point of view the moderate positive and highly significant correlation between total job crafting behavior and total work alienation suggests that the two variables are interrelated within the nursing work environment. This relationship may indicate that nurses engage in job crafting as a response to feelings of alienation, particularly in settings characterized by limited autonomy and organizational constraints. However, the coexistence of both variables highlights that job crafting alone may not fully eliminate feelings of alienation without broader organizational support and structural improvements. Therefore, enhancing supportive leadership and empowering work environments is essential to reduce alienation while promoting effective job crafting behaviors.

This result showed a significant inverse correlation between work alienation and job crafting., there was a study reported a significant inverse correlation between work meaningfulness and work alienation during the COVID-19 pandemic (32). Job crafting can change the overall meaningfulness of work for nurses and hence improve their feelings about their job and reduce their work alienation. Therefore, promoting job crafting among nurses through allowing them to make changes in their job, providing them with professional development opportunities, reducing their workload and creating environments that strengthen their peer relationships (33) can reduce their work alienation.

This result was consistent with (25) who conducted a study entitled Work alienation and its relationship with job crafting and job embeddedness among a group of Iranian nurses during the Coronavirus disease 2019 pandemic and found that job crafting was significantly related to work alienation, with job crafting explaining part of the variance in work alienation levels. Although they reported an inverse correlation, this supports the existence of a significant relationship between the two constructs, which is conceptually consistent with your finding of a correlation ($r = 0.564$, $P = 0.000$).

As regards this study explained that gender, educational qualification, and years of experience were significant predictors of staff nurses' job crafting behavior. From the researcher point of view, the finding that gender, educational qualification, and years of experience significantly predict job crafting behavior highlights the important role of individual characteristics in shaping proactive workplace behaviors among nurses. Nurses with different demographic and professional backgrounds may vary in their ability

and motivation to modify their job tasks, seek resources, and adapt to work demands. These results emphasize that promoting job crafting behavior requires consideration of personal factors alongside organizational support to enhance professional development and workplace adaptability.

This result was consistent with (37) who conducted a study entitled Psychological empowerment and job crafting among registered nurses working in public health: A quantitative study found that this quantitative study examined *registered nurses in public health* and found that job crafting was significantly influenced by personal and work-related experience (e.g., years in the profession, job resources, and experience in public health). It also showed that experience moderated the relationship between empowerment and job crafting. This result was agreeing with (38) who conducted a study entitled Job Crafting in Nursing: A Conceptual Analysis for Theoretical Advancements in Nursing Practice and found that Although not strictly quantitative, this research highlights that job crafting is influenced not only by organizational context but also by personal background factors such as past experience and knowledge accumulated over time. Experienced nurses are more likely to engage proactively in modifying their roles based on prior learning and confidence.

As regards this study explained that educational qualification, age, years of experience, and gender significantly predicted work alienation among staff nurses. From the researcher point of view, the finding that educational qualification, age, years of experience, and gender significantly predict work alienation highlights the important role of individual demographic and professional characteristics in shaping nurses' perceptions of their work environment. These factors influence how nurses experience autonomy, professional recognition, and workplace integration, which in turn affect their level of alienation. Therefore, addressing work alienation requires considering personal differences alongside organizational strategies to create a supportive and empowering work environment for all nurses.

This result was agreed with (39) who conducted a study entitled Status of work alienation among nurses in China and found that a study conducted among Chinese nurses found that work alienation levels differed according to gender, educational level, and years of experience. Male nurses and nurses with different educational backgrounds showed variations in alienation levels, indicating that demographic characteristics significantly influence work alienation. This result was consistent with (40) who conducted a study entitled Work alienation and quality of work life among nurses: A descriptive cross-sectional study. and found that found that age, education level, and professional experience were significantly associated with work alienation and quality of work life among nurses, confirming that demographic variables can predict differences in alienation levels.

This result was in the same line with (41) who conducted a study entitled Work alienation influences nurses' readiness for professional development and willingness to learn: A cross-sectional correlation study and found that demographic factors, including gender and educational qualification, were significantly associated with work alienation. Higher educational levels were linked to variations in alienation scores, supporting the predictive role of personal characteristics.

Conclusion

The findings of this study indicate that most staff nurses demonstrated moderate levels of both job crafting behaviors and work alienation. A highly statistically significant negative correlation was found between job crafting behaviors and work alienation, suggesting that nurses who engage more frequently in job crafting tend to experience lower levels of work alienation. These findings highlight the potential value of promoting job crafting behaviors as an organizational strategy to enhance nurses' psychological attachment to their work and improve workplace well-being.

Implications for practice and future practice

The findings of this study suggest that promoting job crafting may be an effective strategy for reducing work alienation among staff nurses. Nurse managers should foster a supportive work environment by encouraging autonomy, participation in decision-making, professional development, and constructive feedback. Providing opportunities for nurses to proactively modify aspects of their work may enhance work meaningfulness, strengthen psychological attachment to the organization, and improve overall well-being. Incorporating job crafting principles into leadership practices and staff development programs may also contribute to improved job satisfaction, workforce retention, and quality of patient care.

Strengths and limitations of this research

This study has several strengths. It adds to the limited body of nursing research by examining the relationship between job crafting and work alienation among staff nurses. The use of validated instruments helped ensure the reliability of the data collected, while the relatively large sample size increased the robustness of the findings. In addition, the study provides evidence that may help nurse managers better understand the potential role of job crafting in reducing work alienation and promoting a healthier work environment.

However, some limitations should be considered when interpreting the findings. The cross-sectional design captures the relationship between the study variables at a single point in time and therefore does not allow conclusions about cause-and-effect relationships. Data were collected using self-report questionnaires, which may have been influenced by participants' perceptions or social desirability. Furthermore, the study was conducted in selected healthcare settings using a convenience sample, which may limit the generalizability of the findings to other nursing populations or healthcare organizations. Finally, other organizational and personal factors that may influence work alienation, such as leadership style, organizational support, workload, and work engagement, were not examined and should be considered in future studies.

Declarations

Ethics approval and consent to participate

This study was conducted in full compliance with the ethical principles outlined in the Declaration of Helsinki. Ethical approval was obtained from the Research Ethics Committee of the Faculty of Nursing, Ain Shams University, Egypt (Approval Code:26.02.1135), in accordance with institutional guidelines. A formal letter, including the study's title and objectives, was issued by the Dean of the Faculty of Nursing and submitted to the Director of Manshiet El Bakery to obtain permission for data collection. Prior to participation, each nurse received a thorough explanation of the study and provided written informed consent. Participants were assured of their right to withdraw from the study at any point without any negative consequences. Additionally, confidentiality was strictly maintained, and all data was used exclusively for research purposes. There were no conflicts of interest declared, and participation was entirely voluntary, with no coercion or undue influence applied at any stage.

Consent for publication

Not applicable.

Conflict of interest

The authors declare that they have no conflicts of interest.

Competing interests

The authors declare that they have no competing interests.

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Data availability

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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Figures

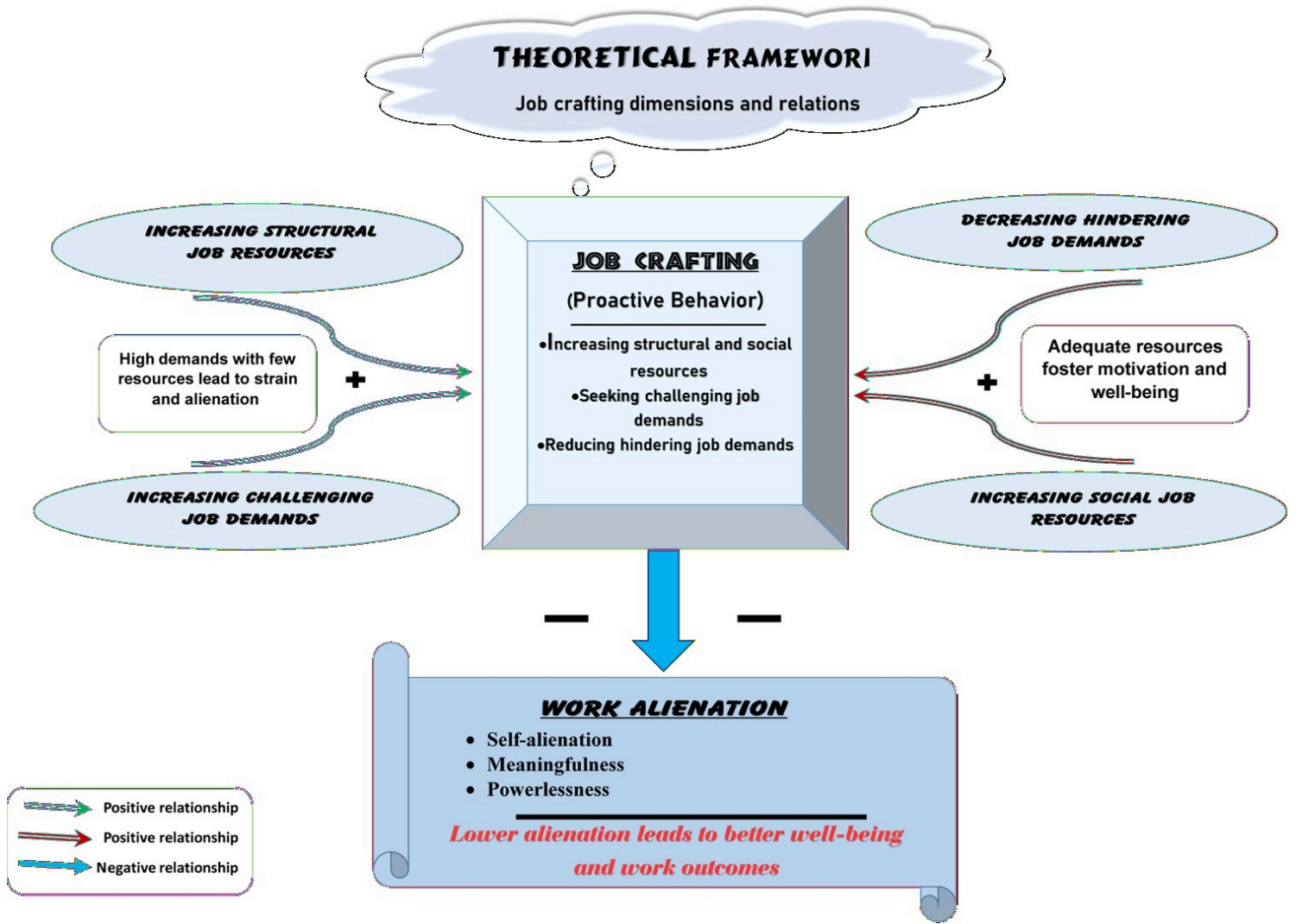


Figure 1

Study conceptual model

Total Job Crafting Behavior Perception Level

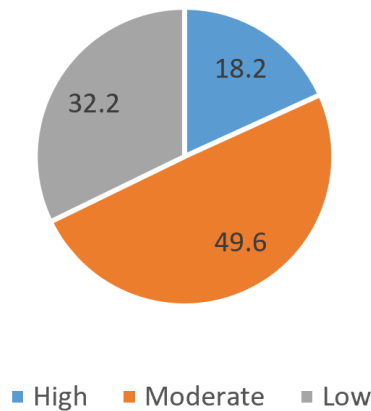


Figure 2

Distribution of total perception level of staff nurses’ regarding job crafting behavior (n = 143)

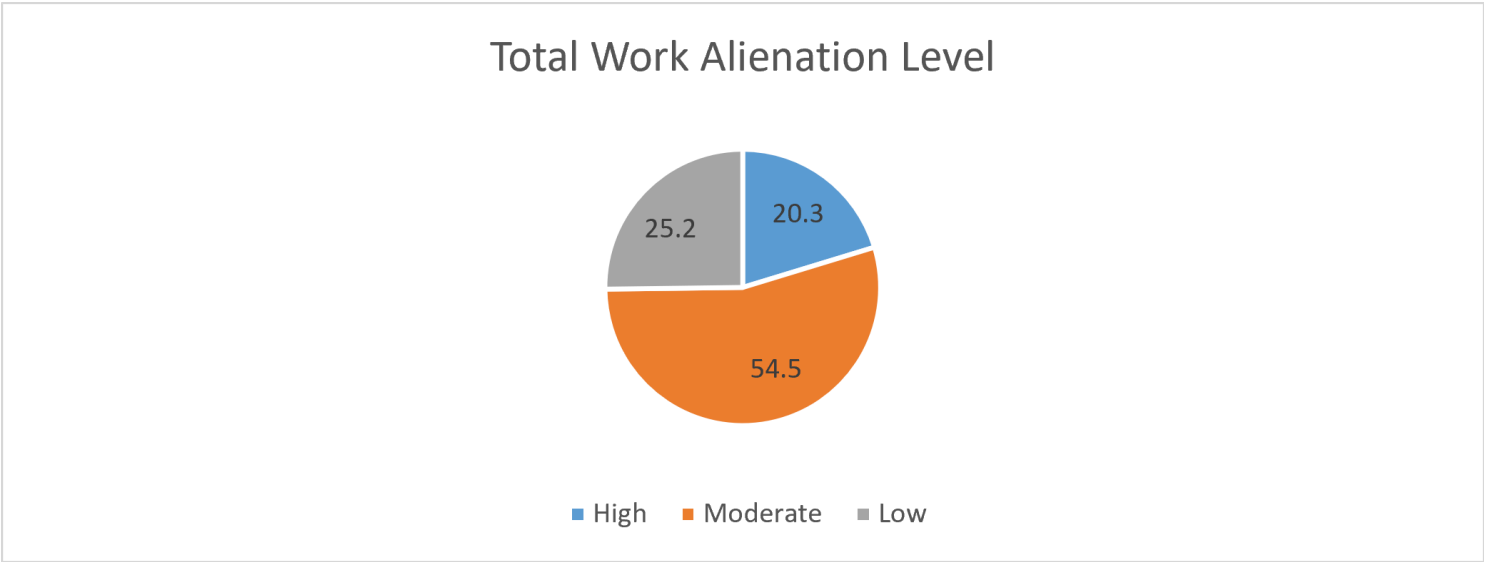


Figure 3

Distribution of total work alienation level among staff nurses