Relation between Organizational Compassion and Work Engagement among Nurses at Health Care Organizations

Nora Ahmed AbdelAzeem Taha[1]; Sanaa Abdel Azeem Ibrahim[2]; Amal Sobhy Mahmoud Farag[3]; Ghada Mosaad Mohamed El-Ghabbour[4]

*B.Sc of Nursing[1]; Professor of Nursing Administration[2]; Professor of psychiatric Nursing and Mental Health[3]; **Assistant** Professor of Nursing Administration dapartment[4]; Faculty of Nursing, Port Said University*

ABSTRACT

Background: Compassion and work engagement are essential to healthcare organizations and have a good effect on medical facilities, patients, and healthcare practitioners. To ascertain whether a relationship exists that could be advantageous to the healthcare organization, the possible relationship between work engagement and compassion should be investigated. **Aim:** To explore the relation between organizational compassion and work engagement among nurses in healthcare organizations. **Subjects and Method:** The current study used a descriptive correlational research design. 265 out of the 413 nurses employed on Damietta General Hospital and Heartand Digestive System Institute at all units of the hospitals' during the study's duration.. Along with a questionnaire on personal and clinical factors, two measures were used to gather data: the job engagement scale and the organizational compassion scale, in addition to personal and job characteristics questionnaire. **Results:**The study showed that whereas 1.1% of the nurses tested reported having a low opinion of organizational compassion, more than half (53.6%) of the the studied nurses had a moderate perspective. 60.8% of respondents reported being highly engaged at work, compared to 0.4% who reported being lowly engaged. Additionally, a positive statistically significant difference was discovered between the overall ratings of work engagement and organizational compassion perception. **Conclusion:** Work engagement and overall organizational compassion perception scores exhibited a statistically significant positive correlation. **Recommendations:** It is advised that nurses' compassion and level of work involvement be routinely assessed and monitored. Creating a motivating work environment and strengthening the nurses' perception of organizational compassion.

Keywords: Nurses, Organizational Compassion, Work Engagement.

INTRODUCTION

The 21st century has brought out both positive and negative challenges in the field of health, along with a wealth of scientific discoveries and therapies. An prominent source of stress and compassion fatigue among workers is the health sector's severe workload combined with workplace hazards. Employee performance and engagement have been impacted by this. To promote organizational engagement and success, workers require greater organizational assistance in their jobs to improve service quality, compassion, and contentment (Şanliöz, Sağbaş, & Sürücü, 2022).

In the healthcare industry, healthcare providers are regarded as the main source of compassion. From their perspective, healthcare providers need an evidence-based understanding of the notion and its associated dimensions, even though most of them want to show compassion and patients and families demand it (Sinclair et al., 2018). Compassion and caring are the cornerstones of professional nursing, according to the American Nurses Association's (ANA) code of ethics. Helping others, supporting others, attending to their needs, fostering and encouraging another's healing, and developing a personal relationship with the person or group are all considered forms of caring. Caring and the capacity to empathize with others are both components of compassion (Gurney, Gillespie, McMahon, & Kolbuk, 2017 & Henson, 2017).

High-quality care requires compassion, and care staff members' tendency for stress and burnout may make it more difficult for them to provide compassionate care. As a result, efforts have been directed on enhancing self-care to fortify healthcare workers' resilience and augment their ability to provide patients with compassionate care (Sinclair et al., 2017). Through the mediating influence of a positive job-related identity, compassion at work increases service personnel' creativity (Hur, Moon, Rhee, 2016).

Compassion at work enhanced positive work-related identity, supported employees' affective attachment to their organizations and organizational citizenship behavior, and reduced turnover intention, according to Moon, Hur, Ko, Kim, & Yoo (2016). Additionally, Ko and Choi (2019) found that organizational identification raised employee engagement and satisfaction and that social workers' compassion had a beneficial impact on positive feeling.

Healthcare professionals, particularly nurses who face high workplace stress, workload, occupational injury, and burnout, work engagement can be a lifesaver (Imani, Zandi, Mostafayi, & Zandi, 2022). The amount of dedication that employees have to the organization is known as organizational engagement. According to Davis and Van van

Heijden (2018), an engaged, stable, and supported workforce is necessary for the best possible service delivery, high-quality treatment, successful harm reduction implementation, and cost effectiveness.

In this sense, even in difficult care settings, meaningful work and nurse engagement support job happiness which is facilitated by meaningful work recognition programs and purposeful positive feedback from leadership. Compassion satisfaction is raised by meaningful work and meaningful job recognition (Anderson & Papazoglou, 2019; Kelly, Johnson, Bay, & Todd, 2021).

Significance of the study

Compassion and work engagement are essential to healthcare companies and have a good effect on medical facilities, healthcare providers, and patients. If a relationship exists that could be advantageous to the healthcare organization, it is important to investigate the potential relationship between work engagement and compassion (Lenz, 2017).

There is a connection between work engagement and compassion; would add significantly to understanding of the two topics. Organizations can use this information to better understand their hiring and employee development procedures, allowing them to capitalize on compassion's positive effects on both employee satisfaction and organizational performance (Walt, 2018).

AIM OF THE STUDY

Was to explore the relation between organizational compassion and work engagement among nurses at healthcare organizations.

Objectives

The following objectives were met by the study

- Assess the nurses' perception of organizational compassion at health care organizations.
- Measure work engagement level among nurses at health care organizations.
- Find out the correlation between organizational compassion and work engagement among nurses at health care organizations.

Research Question

Is there a relation between organizational compassion and work engagement among nurses at health care organizations exists?

SUBJECTS AND METHOD

Study Design

A descriptive correlational research design was used to conduct the study.

Study Setting

The study was conducted at all of the hospitals' units in Damietta General Hospital and the Heart and Digestive System Institute, two distinct healthcare sectors connected to the Ministry of Health and the general secretariat of the city's specialized centers. The Ministry of Health is associated with Damietta General Hospital, which has 127 beds and 325 nurses. With 88 nurses and 105 beds, the Heart and Digestive System Institute is connected to the General Secretariat of the Specialized Centers.

Study Subjects

265 Out of the 413 nurses employed in the aforementioned settings. Using the following formula and a 99% confidence level, the sample size was determined (Daniel, 1999). 265 staff nurses make up the total sample, as determined by the equation.

$$n= \frac{N \times P(1-P)}{N-1 \times (d^2 \div z^2)+P(1-P)}$$

$$n= \frac{413 \times 0.5(1-0.5)}{413-1 \times (0.05^2 \div 1.96^2)+ 0.5 (1-0.5)} =265 \text{ nurses}$$

The following equation was used to compute the proportionate number of nurses taken from each hospital:

The total number of nurses in the hospital; total sample size / total population size equals the number of nurses taken from each hospital.

Damietta General Hospital is the first sector (n1): Heart and Digestive System Institute (n2) is the second sector. Institute of the Heart and Digestive System

Methods of sampling:

During the time of data collection, nurses were selected using a basic random sampling technique from all units of two hospitals.

Inclusion criteria:

All of the aforementioned hospitals' inpatient units employ both male and female nurses. The nurses possessed over six months of experience in their respective fields.

Two distinct tools were used to gather data for this research, and they were as follows:

Tool I: The Organizational Compassion Scale:

Pommier (2010) created it in English, and the researcher translated it into Arabic to gauge the nurses' opinions of organizational compassion. It featured six domains, with four items each for kindness, shared humanity, awareness, indifference, detachment, and disengagement. The total number of items was twenty-four.

Scoring system:

Five-point Likert scales, ranging from 1 to 5, were used to quantify organizational compassion issues. Five on the scale means almost always, four to some extent, three occasionally, two mostly no, and one virtually never (Pommier, 2010). The following nurses' perspective levels were used to calculate the organizational compassion score overall:

- A score between 88 and 100 indicates a high perception of compassion.
- A score of 56 to 87 indicates a modest perception of compassion.
- A score ranging from 24 to 55 indicates a low perception of compassion.

Tool II: Job Engagement Scale:

Rich, LePine, and Crawford (2010) created this tool, which the researcher translated into Arabic. The work engagement of nurses was measured. This instrument has eighteen items total, six for each of the three domains cognitive, emotional, and physical (Pommier, 2010).

Scoring system:

The six-point Likert scale, which runs from one refers to strongly disagree to six strongly agree, was used to measure the items on the job engagement scale. Six is highly

agree, five is mostly agree, two is disagree, three is neither agree nor disagree, and four is agree.

The following levels were used to calculate the overall job engagement score:

- A score ranging from 79 to 108 was deemed indicative of a high degree of job engagement.
- A score ranging from 48 to 78 was deemed indicative of a moderate degree of job engagement.
- A low level of job involvement was indicated by a score between 18 and 47.

In addition to the personal and Job characteristic questionnaire, such as age, sex, gender, years of experience, education, and marital status, in addition to the personal and job characteristic questionnaire.

Tools' validity

The researcher translated the study tools into Arabic and then retranslated them into English. The tools of this study were revised by a jury composed of five experts in relevant fields from the Nursing Administration Department and psychiatric and mental Department, FON Port Said University, to ensure the content validity for all tools used.

Pilot Study:

In order to test applicability, feasibility, and objectivity as well as to estimate the time needed to fill out the sheets (20–25 minutes), a pilot study involving 10% of the studied nurses 29 nurses from Damietta General Hospital and 6 nurses from the Heart and Digestive System Institute was conducted. Any necessary modifications were then made in accordance with the pilot study's findings.

Tools Reliability:

The Cronbach's alpha test was used to assess the dependability and revealed comparatively homogeneous tools. The organizational compassion scale had an internal consistency of 0.820, whereas the job engagement scale had an internal consistency of 0.828.

Field Work:

After receiving official approval from the directors of the hospitals under study, the fieldwork was initiated. In order to obtain their participation during the data collection procedure and to explain the goals of the study, the researcher first visited with the director of nursing services at each hospital. After obtaining a list of all the hospitals' nurses, the researcher used a straightforward random sampling approach to choose the sample. Following their meeting, the researcher gave each nurse an explanation of the purpose and methodology of the study and got their verbal informed consent to take part. The tool and filling instructions were sent to those who consented to participate. During this period, the researcher was available to answer any questions. As a result, some nurses filled the tool when it was given out, and others gave it back later. In total, the data collection process began in April 2023 and ended at the end of June 2023, having taken nearly three months..

Administrative Design

The director of the chosen study area received an official letter from the vice dean for graduate studies and the dean of the faculty of nursing before any action in the study was taken. the researchers got in touch with the director of the aforementioned setting and asked for permission to use the nurses in this research.

Ethical Considerations

The Port Said University faculty of nursing's research ethics committee granted ethical approval, using code number (NUR)(1/5/2024)(37). Nurses gave their informed consent to take part in the trial. Anonymity and confidentiality were ensured for the data gathered. The nurses who were being studied were made aware that their involvement in the study was entirely voluntary and that they might leave at any time. The results were utilized as part of the required research, and the study sample's privacy was guaranteed. further for upcoming books and instruction.

Statistical Analysis

IBM Corp., Armonk, New York, published SPSS (Statistical for Social Sciences) version 21.0, which was used to analyze the data that had been gathered. Frequencies and percentages were used to characterize the qualitative data. Standard deviations and means were among the descriptive statistics used to present quantitative data. The correlation between the variables was examined using Pearson's correlation coefficient. A statistically

significant P value was defined as 0.05 or less, and a very statistically significant P value was defined as 0.01 or less.

The personal and professional traits of the nurses under study are displayed in Table 1. It was discovered that 48.7% of the nurses in the study were under 40 years old. Furthermore, it was observed that 82.6 percent of them were female. In terms of educational background, 59.2% of the nurses under study had completed secondary technical nursing school. As a result, of the staff nurses who were evaluated, approximately half (50.2%) had experience of at least 15 years. When it came to their marital status, more than three-quarters (79.6%) were married.

Table 2: Summarizes how the nurses under study saw the organizational compassion domain. The study revealed that the majority of the nurses under investigation had positive opinions of kindness, mindfulness, and shared humanity, with scores of 75.8%, 64.5%, and 62.6%, respectively. Additionally, the data demonstrated that a majority of the nurses under investigation had a moderate view of these compassion categories: 51.7% and 50.9%, respectively, for the indifference and disengagement domains. At the same time, the separation domain was viewed negatively by less than half of the staff nurses in the study (44.2%).

Table 3 displays the distribution of the nurses under study based on how they felt about organizational compassion. It was discovered that whereas 1.1% of the nurses in the study reported having a low opinion of organizational compassion, more than half of the

Table 4 depicts the distribution of the nurses under study based on their levels of work participation. The results showed that the nurses under study had high levels of emotional, cognitive, and physical work engagement—62.3%, 60.0%, and 56.2%, respectively.

The distribution of the nurses' work involvement levels under study is shown in Table 5. 60.8% of respondents were determined to have high levels of work engagement. Conversely, the smallest proportion of them (0.4%) exhibited poor engagement at work.

The association matrix between the examined nurses' perceptions of the organizational compassion domain and their work engagement domains is displayed in Table 6. All organizational compassion categories, with the exception of the kindness domain, showed a significant correlation (p <0.001) with the work engagement domains.

Table 7 presents the relationship between the overall organizational compassion perception score and the nurses under study's work engagement. The results showed that there was a statistically significant positive difference (p<0.001) between the overall organizational compassion perception and work engagement scores.

Table 1: Frequency and distribution of personal and Job characteristics of studied nurses (n = 265).

Personal and Job characteristic	N	%
Age Groups		
< 20 years	2	0.8
20 : < 30 years	53	20.0
30 : < 40 years	81	30.6
≥ 40 years	129	**48.7**
Mean age ± SD	**38.27± 8.739**	
Range	**20-56**	
Gender		
Male	46	17.4
Female	219	82.6
Educational Qualification		
Diploma of Secondary Technical Nursing School	157	59.2
Diploma of Technical Institute of Nursing	69	26.0
Bachelor of Nursing	36	13.6
Master's degree in nursing	3	1.1
Years of Experience		
< 5 years	41	15.5
5: 15 years	91	34.3
> 15 years	133	50.2
Mean age ± SD	**16.22±9.11**	
Range	**1-38**	
Marital status		
Single	35	13.2
Married	211	79.6
Widow	9	3.4
Divorced	10	3.8

Table 2: Distribution of the studied nurses according to their perception of organizational compassion domains (n=265).

Organizational compassion domains	Nurses' perception					
	Low perception		Moderate perception		High perception	
	No	%	No	%	No	%
Kindness	6	2.3	58	21.9	201	75.8
Common Humanity	3	1.1	96	36.2	166	62.6
Mindfulness	3	1.1	91	34.3	171	64.5
Indifference	40	15.1	137	51.7	88	33.2
Separation	117	44.2	104	39.2	44	16.6
Disengagement	48	18.1	135	50.9	82	30.9

Table 3: Distribution of the studied nurses according to their perception of organizational compassion (n=265).

Organizational Compassion Perception	N	%
Low perception	3	1.1
Moderate perception	142	53.6
High perception	120	45.3

Table 4: Distribution of the studied nurses according to their work engagement domain levels (n=265).

Work Engagement Domains	Nurses' work engagement levels					
	Low		Moderate		High	
	No	%	No	%	No	%
Physical Engagement	7	2.6	109	41.1	149	56.2
Emotional Engagement	2	0.8	98	37.0	165	62.3
Cognitive Engagement	1	0.4	105	39.6	159	60.0

Table 5: Distribution of the studied nurses' work engagement levels (n=265).

Nurses' work engagement levels	N	%
Low	1	0.4
Moderate	103	38.9
High	161	60.8

Table 6: Correlation matrix between organizational compassion and work engagement domains (n=265).

Study Variables	Sig	Kindness	Common Humanity	Mindfulness	Indifference	Separation	Disengagement	Physical Engagment	Emotional Engagement	Cognitive Engagement	Total Organizational Compassion	Total Work Engagment
Kindness	r	-										
	p	-										
Common Humanity	r	.561**	-									
	p	.000	-									
Mindfulness	r	.643**	.702**	-								
	p	.000	.000	-	-							
Indifference	r	.317**	.186**	.395**	-							
	p	.000	.002	.000	-							
Separation	r	.014	-25**	-.109-	298**	-						
	p	.819	.000	.075	.000	-						
Disengagement	r	.176**	-.003-	.049	.280**	.430*	-					
	p	.004	.959	.426	.000	.000	-					
Physical Engagment	r	.390**	.312**	.475**	.242**	.113	.170**	-				
	p	.000	.000	.000	.000	.067	.006	-				
Emotional Engagement	r	.327**	.275**	.382**	.127*	.054	.168**	.841**	-			
	p	.000	.000	.000	.039	.384	.006	.000	-			
Cognitive Engagement	r	.378**	.290**	.443**	.217**	.065	.184**	.775**	.745**	-		
	p	.000	.000	.000	.000	.290	.003	.000	.000	-		
Total Organizational Compassion	r	.687**	.541**	.667**	.692**	.467**	.589**	.447**	.347**	.412**	-	
	p	.000	.000	.000	.000	.000	.000	.000	.000	.000	-	
Total Work Engagment	r	.394**	.315**	.468**	.211**	.084	.188**	.943**	.931**	.904**	.434**	
	p	.000	.000	.000	.001	.174	.002	.000	.000	.000	.000	

Table 7: Correlation between total score of organizational compassion perception and work engagement (n=265).

Study Variables		Organizational Compassion perception
Work Engagement	r	.434**
	p	.000
**. Correlation is significant at the 0.01 level (2-tailed). Bivariate Person correlation test used		

DISCUSSION

The nursing profession has never encountered such difficulties. A major factor influencing nurses' job satisfaction, intention to leave the position or the profession, and lower level of work engagement was the high rates of burnout and diminished well-being they reported. To address these problems and support nurses' work performance and the standard of patient care, health systems must get a deeper understanding of these phenomena (Heidari Parizad, Goli, Mam-Qaderi, & Hassanpour 2022; Subih, Salem, & Al Omari, 2023).

Nurses working in compassionate healthcare organizations report higher job satisfaction and lower stress levels; compassion at work may also encourage engagement, commitment, and loyalty. Compassionate nurses are more inclined to work together and support one another (Iqbal, Adawiyah, Suroso, & Wihuda, 2020). Being compassionate toward coworkers benefits both sides, has a favorable effect on the culture of performance, and raises employee engagement (Graban & Swartz, 2018). One strategy that could help improve an ethic of care is to facilitate compassion systematically by concentrating on healthcare organizational level issues. This can be accomplished by creating a more peaceful, encouraging, and positive work environment for caregivers (Simpson, Farr-Wharton, & Reddy, 2019).

The current study explored the relationship between organizational compassion and work engagement among nurses in healthcare organizations. The results of the current study showed that the majority of the nurses under investigation had positive impressions of organizational kindness, compassion, mindfulness, and common humanity. These findings may be explained by research theories that suggest nurses who practice self-compassion have better mental health, higher levels of work engagement, and more efficacious jobs. Alternatively, the results may reflect the current situation in which nurses are pressured to repress their emotions and opinions at work because of the increasing emphasis on customer service within medical institutions. This result is consistent with research by Erbil and Pamuk (2023), who examine the connection between nurses' professional demeanor and compassion.

According to the study's findings, half of the nurses under investigation thought that organizational compassion was moderate. The study's findings of disinterest and

apathy regarding organizational compassion, along with the fact that the majority of nurses had positive perceptions of kindness, mindfulness, and shared humanity compassion domains, may help to explain this. This finding is in line with the findings of Erbil and Pamuk (2023), who investigated the relationship between nurses' compassion and their professional attitude and discovered that while nurses' perceptions of the organizational compassion domains decreased, most of them had high opinions of the kindness, common humanity, and mindfulness domains.

Furthermore, Sabanciogullari, Yilmaz, and Karabey (2021) investigated the relationship between the compassion levels of clinical nurses and their propensity to commit medical errors. They noted that compassion was a significant predictor of medical error tendency and that the nurses' propensity to commit medical errors decreased as their compassion levels increased.

According to the current research, over 50% of the nurses under investigation exhibit high levels of emotional, cognitive, and physical work engagement. Because they focus longer and pay closer attention to their work, employees with high work engagement are known to have an emotional connection to their work, which may account for this.

In a similar vein, nurses demonstrated high levels of work engagement across all dimensions, according to a study conducted in Spanish by Allande-Cussó et al. in 2021 and titled "Work Engagement in Nurses during the Covid-19 Pandemic". Regarding this, the study "Nurses' Work Engagement and its Impact on the Job Outcomes," by Ghazawy, Mahfouz, Mohammed, and Refaei (2021), indicated that almost half of the studies had high/very high work engagement levels. The workplace, the availability of incentives and motivations, and the autonomy or capacity to make decisions were found to be major predictors of the high work engagement levels among nurses.

Additionally, Pérez-Fuentes, Gázquez Linares, Molero Jurado, Simón Márquez, and Martos Martínez (2020) conducted a study titled "The mediating role of cognitive and affective empathy in the relationship of mindfulness with engagement in nursing" and reported that nurses found that mindfulness influences the vigor and dedication factors of engagement through cognitive empathy. Though it is less powerful than cognitive empathy, the affective aspect of empathy also plays a mediating function in the

absorption factor. Among the individual factors that mediated the relationship between mindfulness and the engagement characteristics in healthcare workers was cognitive empathy.

The results of this study clarified that fewer than two thirds of the nurses who were examined had high levels of work engagement. This outcome could be the consequence of democratic management, effective communication, and job satisfaction. among a similar vein, nurses demonstrated high levels of overall work engagement, according to Allande-Cussó et al. (2021), who conducted a study titled "Work Engagement in Nurses during the Covid-19 Pandemic" in Spanish. Furthermore, Abd Elkader (2017) discovered that a smaller percentage of individuals demonstrated high levels of work engagement.

The results of a study conducted in 2019 by Engelbrecht, Rau, Nel, and Wilke (2019) on the work engagement and emotional well-being of nurses who work part-time in private hospitals are in line with this. The researchers found that nurses had high levels of compassion satisfaction and work engagement and were less likely to experience emotional exhaustion. Three factors were shown to be statistically significant and distinct in their contribution to the prediction of job engagement: mental health, compassion satisfaction, and personal success. Emotional tiredness and compassion fatigue were significantly higher among nurses who were thinking about quitting.

The study's findings, however, did not align with those of Badawy, Shazly, and Elsayed (2022), who investigated the connection between organizational justice and work engagement among Tanta staff nurses and discovered that over half of them had a low opinion of their overall level of engagement. The poor work involvement of nurses was also reported in a study by Shang, Wan, Zhou, and Li Z (2018). Additionally, Ozer, Ugurluoglu, and Saygil (2017) conducted a study in Turkey and discovered that the work engagement of healthcare employees was modest.

The majority of organizational compassion dimensions showed positive correlations with work engagement domains, according to the current study. Lown, Manning, and Hassmiller (2020) investigated Does Organizational Compassion Matter? in relation to that issue. It found that high involvement with the hospital and highly perceived organizational compassion were linked to compassionate individuals and

teams. Emotional intelligence and resilience were found to be direct, substantial, and positive predictors of work engagement in hemodialysis nurses, according to a study conducted in Japan by Cao and Chen (2020) titled "The impact of empathy on work Engagement in hemodialysis Nurses". Additionally, resilience was directly, favorably, and significantly predicted by empathy. By partially moderating the effect of resilience, empathy had an indirect and considerable impact on work engagement.

Statistically significant positive connections was found between nurses' work engagement and overall organizational compassion perception scores. Organizational commitment positively influences work engagement; that is, organizational commitment is a significant determinant of nurses' work engagement. Tang et al. (2022) conducted a study titled "The Relationship between Organizational commitment and work engagement among clinical nurses in China" and discovered that nurses had a high level of work engagement and a moderate level of organizational commitment.

In contrast, Ryu and Shim (2022) found that nurses with higher levels of compassion have lower levels of engagement in shift nurses' patient safety-related activities. This is because compassion leads to physical exhaustion and sleep disorders, which impair professional judgment, lead to erroneous understanding of a patient's condition, and result in a lack of care for patients, which increases turnover rates and lowers nursing productivity.

CONCLUSION

Based on the results of this study, it can be said that the majority of nurses who were studied had low perception levels of kindness, mindfulness, and organizational compassion related to common humanity. On the other hand, approximately half of the nurses who were studied had a moderate perception of total organizational compassion. Additionally, over half of the nurses who were studied had high levels of emotional, cognitive, and physical work engagement domains, and over half had high levels of total work engagement.

All organizational compassion domains and work engagement domains, on the other hand, showed a statistically significant positive correlation. Additionally, the total organizational compassion perception scores and work engagement showed a statistically significant positive correlation.

RECOMMENDATIONS

In light of the results of this study, the following recommendations were suggested:

1. Regular assessments and monitoring of nurses' compassion and work engagement levels are recommended

2. Nursing supervisors should consider enhancing the engagement of their nurses by creating a motivational work environment and improving nurses' perceptions of organizational compassion.

3. Encourage nurses' participation in decision-making.

Further Research

1. Assess the relationship between organizational compassion and job performance among nurses.

2. Study the relation between nurses perception compassion regarding patient length of stay and satisfaction.

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العلاقة بين التعاطف المؤسسى والأندماج فى العمل لدى ممرضى مؤسسات الرعاية الصحية

نورا أحمد عبد العظيم طه[1]; سناء عبد العظيم ابراهيم[2]; أمل صبحى محمود فرج[3]; غادة مسعد محمد الغبور[4]

بكالوريوس تمريض[1]; أستاذ أدراة التمريض[2]; أستاذ التمريض النفسي والصحة العقلية[3]; أستاذ مساعد بقسم إدارة التمريض[4]كلية التمريض -جامعة بورسعيد

الـخــــلاصـــة

الـمـقـدمــة: يعد كل من المشاركة في العمل والتعاطف جزءًا لا يتجزأ من منظمة الرعاية الصحية ولديهما القدرة على التأثير بشكل إيجابي على المرضى ومقدمي الرعاية الصحية والمرافق الطبية. يجب استكشاف العلاقة المحتملة بين المشاركة في العمل والتعاطف لتحديد ما إذا كانت هناك علاقة من شأنها أن تفيد منظمة الرعاية الصحية. الـهدف: هدفت هذه الدراسة إلى استكشاف العلاقة بين التعاطف التنظيمي والمشاركة في العمل بين الممرضين في منظمات الرعاية الصحية. طـرق وأدوات الـبحـث: تم استخدام تصميم البحث الارتباطي الوصفي في الدراسة الحالية. اشتملت هذه الدراسة على 265 ممرضًا وممرضة يعملون بمستشفى دمياط العام ومعهد القلب والجهاز الهضمي، وتم إجراؤها بجميع وحدات المستشفيتين، من أصل 413 ممرضة. تم استخدام ثلاثة أدوات لجمع البيانات وهي؛ مقياس التعاطف التنظيم، ومقياس المشاركة الوظيفية، بالإضافة إلى استبيان الخصائص الشخصية والسريرية. الـنتائــج: كشفت الدراسة أن أكثر من نصف تصور الممرضات فيما يتعلق بالتعاطف التنظيمي (53.6%) كان تصوراً متوسطاً في حين أن 1.1% فقط من الممرضات المدروسات أفادن بإدراك منخفض. وتبين أن 60.8% منهم لديهم مستوى مرتفع من الارتباط بالعمل، بينما أقل نسبة منهم (0.4%) لديهم مستوى منخفض من الارتباط بالعمل. ووجدت أيضًا أن هناك فرقًا إيجابيًا ذو دلالة إحصائية بين إجمالي درجات إدراك التعاطف التنظيمي والمشاركة في العمل. وقد خلصت الدراسة إلي أن توجد علاقة ارتباطية موجبة ذات دلالة إحصائية بين مجموع درجات إدراك التعاطف التنظيمي والمشاركة في العمل. الـتـوصـيــات: يوصى بإجراء تقييمات منتظمة ومراقبة لتعاطف الممرضات ومستويات مشاركتهن في العمل ويجب على مشرفي التمريض النظر في تعزيز مشاركة الممرضات من خلال خلق بيئة عمل تحفيزية وتحسين تصور الممرضين للتعاطف التنظيمي.

الكلمـات المرشِـدة: الممرضات، الرحمة التنظيمية، المشاركة في العمل.