

Relation between Job Crafting, Staff Nurses' Job Satisfaction and Counterproductive Work Behaviors

Fatma Mohamed Ahmed Mohamed* Assist. Dr. Heba Ali Hassan** Dr. Laila Ahmed Abd El-hamid ***

* B.Sc.Nursing, ** Assist Professor of Nursing Administration

*** Lecturer of Nursing Administration, Faculty of Nursing- Ain Shams University

Abstract

Background: Job crafting is an example of constructive behavior in which workers aggregate resources to meet their needs which increases their job satisfaction and leads to decrease counterproductive work behaviors. **Aim:** This study aimed at assessing the relation between job crafting, staff nurses' job satisfaction and counterproductive work behaviors. **Research design:** A descriptive, correlational design was used. **Setting:** The study was conducted at Ain Shams University hospital. **Subjects:** 169 staff nurses were included in the study using simple random sampling technique. **Tools of data collection:** Data were collected by using job crafting scale, nurses' job satisfaction scale, and counterproductive work behavior questionnaire. **Results:** More than half 58% of studied staff nurses had low job crafting level, half (50%) of them had high job satisfaction level and half of them (50%) had high engagement in Counterproductive Work Behavior level. **Conclusion:** there was negative significant correlation between job crafting and counterproductive work behavior. Moreover, there is negative significant correlation between job satisfaction and counterproductive work behavior. **Recommendations:** Take corrective disciplinary approaches, actions and strategies against counter productive work behaviors. Provide fair amount of bonuses and incentives for appreciating positive behaviors of staff nurses.

Keywords: Counterproductive work behavior, Job crafting, Job satisfaction, Staff nurses.

Introduction

Nursing is a profession within the healthcare sector focused on the care of individuals, families and communities so that they may attain, maintain or recover optimal health and quality of life. Nurses may be differentiated from other health care providers by their approach to patient care, training, and scope of practice. Nurses practice in many specialties with differing levels of prescription authority (Abhayasinghe & Seneviratne, 2022).

Job crafting is a kind of proactive behavior defined as, the changes that nurses make in their levels of job demands and job resources to align them with their own abilities and preferences (Hyesun, 2021). Staff nurses can initiate job crafting in three ways, namely; relational, task, and cognitive crafting. Relational crafting refers to alterations in interpersonal relationships at work during performing a task such as duration and frequency of social interaction with clients and colleagues. Task crafting refers to temporal or physical changing of tasks boundaries by

removing or adding a task, considering the effort and time assigned to different tasks. While, cognitive crafting indicates changing the way that employees think about the job. By making such modifications in job, employees are capable of better recognizing their job and using their skills in the best possible technique (Baghdadi et al., 2021).

Job satisfaction is a satisfying or favorable emotional state brought on by an evaluation of staff nurse's employment or professional experience. Job satisfaction has also been defined as a measure of the fulfillment that employees get from their jobs. So the more an employee's work tasks and working environment fulfills the employee's personal characteristics, needs and values, the higher the level of job satisfaction (Jasiński, & Derbis, 2023).

Counterproductive work behavior (CWB) refers to the behaviors that employees voluntarily violate organizational norms and purposefully harm the interests of organization members. This kind of behavior includes

counterproductive work behaviors against colleagues and organizations, which can be summarized as follows: Property damage (theft, injury, abuse), production damage (absence, tardiness, unnecessarily long breaks, deliberate slowing down of work, time theft), personal damage (harassing colleagues, making fun of colleagues), and political damage (favoritism, gossip, passing the blame) (Ni et al., 2023).

All counterproductive behaviors activities are in breach of an organization's legitimate interests by damaging the members of the organization. The behavior, which harms workers, consumers and/or the organization, includes a wide variety. These conducts differ from serious, systemic and violent to milder and vague occupational unity episodes (Ali et al., 2021).

Staff nurses should take initiative for their careers and craft their own work roles by navigating self-development opportunities, such as training and challenging assignments, rather than just relying on career paths determined by their organization, nurses should construct a work environment that helps them to attain both personal and organizational objectives. Accordingly, job crafting is staff nurses' driven technique to work redesign that helps them to better attain these goals while using less resources. This well designed environment is not only significant for nurses but also influence patients (Elsayed, 2019).

Significance of the study

Health care organizations are facing many challenges such as personnel diversity, national and international competition, innovations, new leadership and globalization. On the other hand, organizations face many serious problems, such as Job boredom that is a common experience at work due to person job incongruity which leads to decrease thriving at work, stress, burnout, absenteeism and disengagement which effect on innovative behavior of nurses (Oprea, et al., 2019).

Also the job satisfaction generates boosts nurse's satisfaction, so the dissatisfaction may lead to Lack of innovation and decisions will be

taken slower. So, organizations are now motivating their employees to generate and implement new ideas that may improve overall service quality and performance (Niskala et al., 2020). It is significant for a teaching hospital to understand the individual level characteristics such as job crafting and counterproductive work behaviors affecting the performance and job satisfaction of nurses.

There is no scientific research in Egypt and limited studies internationally were done to study the relation between job crafting, staff nurses' job satisfaction and counterproductive work behaviors. Thus, the current study will be conducted to assess the relation between job crafting, staff nurses' job satisfaction and counterproductive work behaviors.

Aim Of The Study

This study aimed to assess the relation between job crafting, staff nurses' job satisfaction and counterproductive work behaviors.

Research Question:

Is there a relation between job crafting, staff nurses' job satisfaction & counterproductive work behaviors?

SUBJECTS AND METHODS

Research design:

A descriptive correlational design was used to carry out this study. This design used to determine the association between job crafting, job satisfaction and counter productive work behaviors of staff nurses.

Setting:

This study was conducted at Ain Shams University Hospital which affiliated to Ain Shams University. It provides care for patients in different medical specialties with a wide range. It includes two buildings: the first building consists of three floors are limited to administrative offices and the bone marrow transplant unit, the second building consists of

five floors and contain all units and departments in the hospital their total number is (37) units and departments. Its total bed capacity is 618 beds.

Subjects:

The total population of Staff nurses was (300) who working in aforementioned setting.

Sample size:

The sample size calculated according to this equation was (169) staff nurses were selected from total population at the time of data collection and working full time and had at least one year experience in nursing work at current unit \ department.

$$n = \frac{Np(1-p)}{(N-1)(d^2/z^2) + p(1-p)}$$

N= Population (300)

Z= confidence level 95% (1.96)

P= probability (50%)

d= margin of error (0.05)

So, sample size (n) = 169

Thompson, (2012).

Sampling technique:

Staff nurses were selected by simple random sampling technique who meet inclusion criteria working full time and had at least one year experience in nursing work at current unit \ department.

Data collection tools:

Three tools were used to collect data for the current study namely; job crafting scale, nurses' job satisfaction scale, and counterproductive work behavior questionnaire.

Tool I: Job Crafting Scale:

This tool consists of two parts:

Part 1:

This part was for collection of data related to the personal and job characteristics of

staff nurses including: unit name, age, gender, marital status, qualification, and years of experience.

Part 2:

This part consists of job crafting scale adopted from **Times et al., (2012)** to assess job crafting level among staff nurses.

It included 21 items divided into 4 dimensions; increasing structural job resources (5 items) e.g. " I decide on my own how I do things.", decreasing hindering job demands (6 items) e.g. " I try to ensure that I do not have to make many difficult decisions at work.", increasing social job resources (5 items) e.g. " I ask my supervisor to coach me.", and increasing challenging job demands (5 items) e.g. " When an interesting project comes along, I offer myself proactively as project".

Scoring system:

Staff nurses responses were measured on 3-point Likert scale (1= never 2=sometimes and 3= always). The total score was calculated by cut off points and summing scores of all categories. The total scores represent varying levels as: High level of nurses' job crafting >75%, Moderate level of nurses job crafting 60-75% and Low level of nurses job crafting < 60%.

Tool II: Nurses' Job Satisfaction Scale:

This tool aimed to assess staff nurses' job satisfaction adopted from **João et al., (2017)**. It consisted of 37 items divided into six dimensions as follows: satisfaction with the leadership (12 items) e.g. " I am satisfied with my superiors' respect for my work", satisfaction with the organization and resources (8 items) e.g. " I am satisfied with the organization of my workplace.", satisfaction with professional recognition; (5 items) " I am satisfied with the patients' respect for my work", satisfaction with co-workers (5 items) e.g. " I am satisfied with the level of trust that I have in my coworkers", satisfaction with the recognition and remuneration (5 items) e.g. " I am satisfied with

my salary taking into account my skills/knowledge" and satisfactions with staffing (2 items) e.g. " I am satisfied with the nurse to patient ratio in a shift".

Scoring system:

Staff nurses' responses were measured on a three-point Likert scale (1= dissatisfied, 2= neither satisfied nor dissatisfied and 3= satisfied). The total score was calculated by cutoff point and summing scores of all categories. The total score represent varying levels of nurses' satisfaction as: High level of nurses' satisfaction < 75%, Moderate level of nurses' satisfaction 60-75% and Low level of nurses' satisfaction <60%.

Tool III: Counterproductive Work Behavior Questionnaire:

This tool aimed to assess staff nurses how often nurses engaged in counterproductive work behavior adopted from **Spector et al (2006)**. It consisted of 33 items which divided into five dimensions: abuse (18 items) e.g. " Started or continued a damaging or harmful rumor at work", production deviance (3 items) e.g. " Purposely did your work incorrectly", sabotage (3 items) e.g. " Purposely wasted your employer's materials/supplies", theft (5 items) " Took supplies or tools home without permission", and withdrawal (4 items) e.g. "Came to work late without permission".

Scoring system

Staff nurses' responses were measured on three points Likert scale (1= never, 2= sometimes and 3= always). The total scores were calculated by cutoff point and summing scores of all categories. The total scores represent varying levels as: High level of engagement in counterproductive work behavior >75, Moderate level of engagement in counterproductive work behavior 60-75% and Low level of engagement in counterproductive work behavior <60%.

Validity and reliability:

These tools were tested for validity by original authors. These tools were translated back to back into Arabic language by researcher to achieve the criteria of trust worthiness; these tools were tested and evaluated for their face and content validity by jury group. The five experts from faculty members in the nursing field with specialties of Nursing Administration, to ascertain relevance, clarity, and completeness of the tools. Experts elicited responses were either agree or disagree for the face and content validity.

The reliability of the tools that was assessed through measuring their internal consistency by determining Cronbach alpha coefficient, proved to be high as indicated in the following table:

Table (I): Description of tools reliability:

Tools	Cronbach Alpha Coefficient	
	No of items	Cronbach alpha
Job crafting scale	21	0.93
Nurses' job satisfaction scale	37	0.95
Counterproductive work behavior scale	33	0.92

II. Operational Design:

The operational design of this study included three phases namely: preparatory phase, pilot study and field work.

Preparatory phase:

This phase started from the beginning of August 2022 and completed at the end of October 2022. In this phase the researcher reviewed the national, international, current and past related literature, and using text books, articles, journals, and internet to be acquainted by the topic of the study, subjects of the study and tools.

Pilot study:

The pilot study was carried out on 17 studied staff nurses who selected randomly and represent about 10% of 169 staff nurses the main study sample. The aim of the pilot study was to examine the applicability of the tool, clarity of language, test the feasibility and suitability of the designated tools. It also served to estimate the time needed to fill the forms by each study subject and identifying potential obstacles and problems that may be encountered during data collection. The pilot study took one month beginning of November 2022 to December 2022. It showed that the staff nurses took 35-45 minutes to fill in the questionnaire sheet. Data obtained from the pilot study was analyzed, and no modifications were done. So, the study subjects who participated in the pilot were included in the main study sample.

Field work:

The field work started after getting official permissions to conduct the study. It took three months started in the beginning of December 2022 and completed at the end of February 2023. The researcher visited the study setting, met with medical and nursing directors of the hospital to explain the aim of the study, got their approval and cooperation. The researcher introduced herself to staff nurses in the workplace to explain the aim and component of the tools and invited staff nurses to participate in data collection and instructed in how to fill them in.

The researcher was present during the data collection period to explain how to filling the tools, clarify any ambiguity and answer any questions. Data was collected through two days per week at the morning and afternoon shifts. The researcher collected about 13 to 15 questionnaire every week. The filled tools were handed back to the researcher to check each one to ensure its completion.

III. Administrative Design:

Before any attempt to collect data, an official approval to conduct the study was obtained from medical and nursing directors of

the Ain Shams University Hospitals. This was done by issuing letters from the Faculty of Nursing clarifying the aim of the study. The letter stated the aim of the study and forms of data collection tools. Meetings were held between the researcher and the nurse manager, and staff nurses of each unit. The aim of the study was discussed with them, and the time of data collection to gain their approval, cooperation and seek their support.

Ethical consideration:

Prior to the actual work of research study, ethical approval was obtained from the scientific research ethical committee of the Faculty of Nursing at Ain Shams University. In addition, written agreement was obtained from each participant in the study. The aim and purpose of the study were explained to staff nurses who were included in the study. Also, it assured maintaining anonymity and confidentiality of the subject data. The subjects were informed that they were allowed to choose to participate or not in the study and that they had the right to withdraw from the study at any time without giving any reason and the collected data kept confidential and used for research only.

IV. Statistical Design:

Data entry was done using SPSS V20 computer software package. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables and means and \pm standard deviations for quantitative variables. Qualitative variables were compared using chi-square test.

Cronbach's Alpha coefficient was calculated to assess the reliability of the tools through their internal consistency. Pearson correlation coefficient (r) was used for assessment of the inter-relationship among quantitative variables. In order to identify the independent predictor workplace deviance behavior scores among staff nurses, multiple linear regression analysis was used. The confidence level chosen for the study was 95%. Statistical significance was considered at p value <0.05

Results

Table (1): The study sample consisted of 169 staff nurses. According to their demographic characteristics, slightly more than half of them (53.8%) their age less than 30 years old with Mean± SD (37.45±9.93), and (56%) of them were married. While, only (6.6%) aged more than 40 years and slightly less than two thirds (62.8%) of them were female. So, 62% of them had experience years less than 15 years with mean ±SD (14.38 ±9.61).

Figure (1): It shows that, slightly more than half (58%) of studied staff nurses had low job crafting level, (17%) of them had moderate job crafting level, meanwhile (25%) of them had high job crafting level. **Figure (2):** It shows that half (50%) of them had high job satisfaction level and (15%) of them had

moderate job satisfaction level, while (35%) of them had low job satisfaction level.

Figure (3): It shows that, half (50%) of them had high engagement in counterproductive work behavior level, only (15%) of them had moderate engagement in counterproductive work behavior level, while (35%) of them had low engagement in counterproductive work behavior level.

Table (2): It notices that there is moderate positive statistical correlation between job satisfaction and job crafting ($r= 0.431$ and $p<0.001^*$). Meanwhile, there is negative significant correlation between job crafting and counterproductive work behavior ($r = -0.125$ and $p<0.001^*$). Moreover, there is negative significant correlation between job satisfaction and counterproductive work behavior ($r= -0.216$ and $p <0.001^*$).

Table (1): Personal and job characteristics of studied staff nurses (N=169)

Characteristics	No.	Percent
Age:		
<30	91	53.8
30≥40	67	39.6
<40	11	6.6
Mean ± SD 37.45±9.93		
Gender:		
Female	106	62.8
Male	63	37.2
Marital Status:		
Married	95	56
Un married	104	44
Nursing qualification:		
Nursing Diploma	56	33
Technical Institute of nursing	51	30
Bachelor of nursing	62	37
Experience years in nursing:		
<15	104	62
15≥25	47	28
<25	18	10
Mean ± SD 14.38 ±9.61		

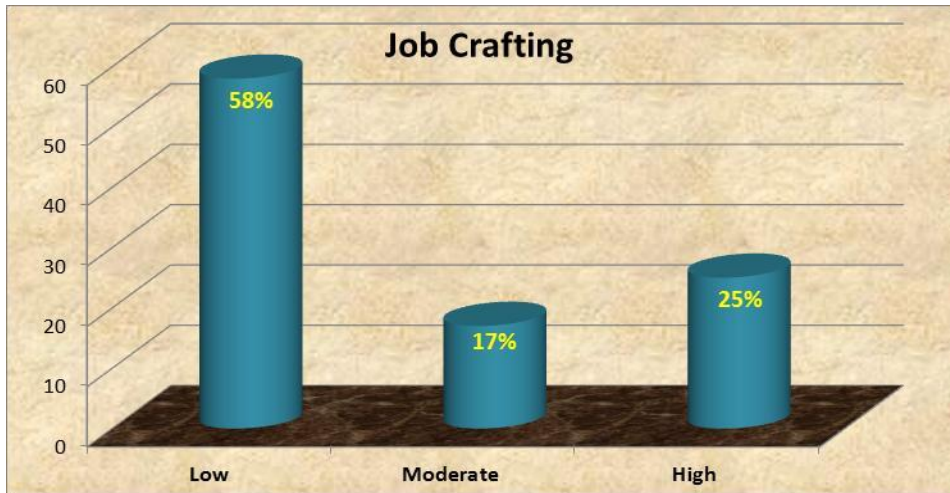


Figure (1): Total job crafting levels of studied staff nurses (N=169).



Figure (2): Total job satisfaction levels of studied staff nurses (N=169).

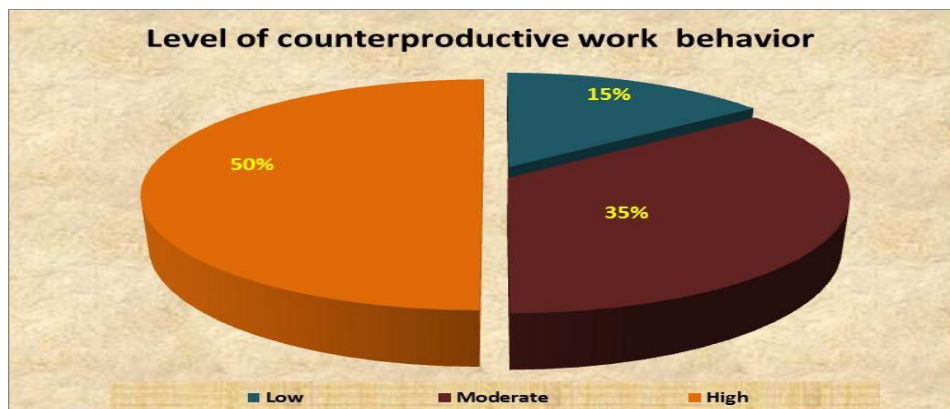


Figure (3): Levels of engagement in Counterproductive Work Behavior of studied staff nurses (N=169).

Table (2): Correlations matrix between Job Crafting, Staff Nurses' Job Satisfaction and Counterproductive work Behaviors (n=169):

work satisfaction dimensions	Job crafting		Job satisfaction		Counterproductive work behavior	
	r	P	r	P	r	p
Job crafting						
Job satisfaction	0.431	0.001*				
Counterproductive work behavior	-0.125	0.001*	-0.216	0.001*		

(*) Statistically significant at $p < 0.01$

Discussion

Job crafting captures what staffs do to voluntarily redesign their jobs in ways that can foster job satisfaction, as well as engagement, resilience, and the ability to thrive at work. Organizations generally design work as embodied in job descriptions; however, it is challenging for organizations to design jobs that fit the specific needs of all individual employees (McKevitt et al., 2022). This study aimed to assess the relation between job crafting, staff nurses' job satisfaction, and counterproductive work behaviors.

Regarding total job crafting levels of studied staff nurses. Present findings showed that slightly more than half of them had low job crafting level, some of them had moderate job crafting level, and some of them had high job crafting level. From the researcher point of view, this may have come back to staff nurses don't have thinking about in what way their job gives their life purpose, thinking about the methods in which their work positively impacts their life, and revealing the role their job had for their overall well-being as well as they give favorite work activities that suit their abilities or interests.

In the same line of the study findings, a study conducted in Egypt by Saad & Ahmed, (2020) who study "Emotional Stability of Nurses and its Relation to Their Job Crafting", revealed that near to half of the studied nursing staff had low job crafting levels. Another study in disagreement with these present findings was a study conducted in Saudi Arabia by Baghdadi et al., (2021) who study "The relationship between nurses' job crafting behaviors and their work engagement", which revealed that the

majority of the studied sample had low job crafting level.

However, in disagreement with these present findings, the study conducted in Egypt by Fekry & Moustafa, (2021) who study "Job Demands, Job Resources and its Relationship with Job Crafting among Head Nurses", indicated that more than half of the studied sample had a high level regarding job crafting. Also, the findings of the study were consistent with a another study in Egypt by Attia & Elsayed-ElAraby, (2021) who studied "Relationships among Organizational Identification, Cynicism, Job Demands-Resources and Nurses' Job Crafting" and revealed more than half of the studied sample had a high level regarding job crafting.

Concerning the total job satisfaction levels of studied staff nurses, the results of the current study showed that half of them had a high job satisfaction level, and more than a sixth of them had a moderate job satisfaction level. From the researcher point of view, this finding was a result of the staff nurses feeling valued and supported by the organization and supervisors so have higher satisfaction regarding their job.

These results are supported by a study conducted in Canada by Teruya et al.,(2019) entitled "Job Satisfaction of the nursing team in intensive care units", which indicated that the majority of staff nurses had a high satisfaction level. A similar study finding was conducted in Nigeria by Akinwale & George, (2020) entitled "Work environment and job satisfaction among nurses in government tertiary hospitals in Nigeria", which presented higher satisfaction among nurses.

Also, a disagreement study conducted in Saudi Arabia by **Al-Ahmadi & Mahran, (2021)** who study “Organizational Citizenship Behavior and Job Satisfaction from The Nurses' Perspective”, reported that less than half had moderate job satisfaction levels. Another study disagreement with the present findings conducted in Egypt by **Said & El-Shafei, (2021)** entitled “Occupational Stress, job satisfaction, and Intent to Leave: nurses working on the front lines during COVID-19 Pandemic in Zagazig City, Egypt”, presented that the majority of staff nurses had low satisfaction regarding their job and attention to leave.

Concerning total levels of engagement in Counterproductive Work Behavior of studied staff nurses. The present study findings revealed that half of them had high engagement in counterproductive work behavior levels, more than a tenth of them had moderate engagement in counterproductive work behavior levels, and more than one-third of them had low engagement in counterproductive work behavior levels. **From a researcher's point of view**, lack of fair practices, low financial rewards, work stress, increased workload, and a high level of ostracism lead to engagement in counterproductive work behavior.

This study finding was inconsistent with a study conducted in Egypt by **Makhdoom et al., (2019)** who study “Nurses' perception of organizational justice and its relationship to their workplace deviance”, and revealed that the level of counterproductive work behavior was low. Also, another study was inconsistent with these findings, a study was conducted in Egypt by **Dubbelt et al., (2019)** who study “Perceived Abusive Supervision and Its Influence on Counterproductive Work Behavior among Staff Nurses” and reported that only less than one-quarter of the study participants had high counterproductive work behavior level. Meanwhile, less than two-thirds of them had moderate levels of counterproductive work behavior.

Regarding the correlation matrix between job crafting, job satisfaction, and counterproductive work behavior, these study findings there are moderate positive statistical

correlations between job satisfaction and job crafting, and meanwhile, there is a negative significant correlation between job crafting and counterproductive work behavior. Moreover, there is a negative significant correlation between job satisfaction and counterproductive work behavior.

From the researcher point of view, the present findings because when the job crafting of the staff nurses increases, their job satisfaction of them will increase too, and staff nurses who design their jobs are less likely to participate in detrimental workplace behavior and work environment are more likely to be enthusiastic about their job and driven to behave in ways that serve the organization rather than participate in deviant behavior, the staff nurses who are dissatisfied with their job may become less productive because their needs not met. Thus, as a result of frustration toward the organization, they put less effort into their work or act destructively.

The study was consistent with a study conducted in, Turkey by **Polatci & sobaci, (2020)** who study “The effect of job crafting on job satisfaction research on teachers”, and revealed that job crafting has a favorable and significant impact on job satisfaction.

Conclusion

In the light of the current study findings, it can be concluded that, slightly more than half of staff nurses' had low job crafting level, half of them had high job satisfaction level and half of them had high engagement in Counterproductive Work Behavior level. There was moderate positive statistical correlation between job satisfaction and job crafting. Meanwhile, there is negative significant correlation between job crafting and counterproductive work behavior. Moreover, there is negative significant correlation between job satisfaction and counterproductive work behavior.

Recommendations

Based on the present study findings the following recommendations are suggested:

- Take corrective disciplinary strategies against Counter productive work behaviors among nursing staff.
- Provide spiritual and trustful work environment for creating emotional relationship with employees to enhance nurses' job satisfaction.
- Giving an opportunity to nurses to participate in decisions making related to their work so increase their feelings of satisfaction and engagement.
- Nurse Manager's stimuli nurses' job crafting process through the acceptance of job crafting as a positive and desirable practice.
- Carry out In-service training programs for enhancing managers' manipulation with employees' Counterproductive work behaviors.

References

- Abhayasinghe, K., & Seneviratne, S. (2022).** Why Nurses Should Continue Their Professional Education?. *Sri Lankan Journal of Nursing*, 1(2).
- Akinwale, O. E., & George, O. J (2020).** Work environment and job satisfaction among nurses in government tertiary hospitals in Nigeria. *Rajagiri Management Journal*, 14(1), 71–92. <https://doi.org/10.1108/ramj-01-2020-0002>
- Al-Ahmadi, A. T., & Mahran, S. M (2021).** Organizational Citizenship Behavior and Job Satisfaction from The Nurses' Perspective. *Evidence-Based Nursing Research*, 4(1), 9. <https://doi.org/10.47104/ebnrojs3.v4i1.230>
- Ali, R. M. N., Ali, H. D., & Zaki, S. M (2021).** Effect of occupational adjustment on nurse's counterproductive work behavior and job burnout. *Assiut Scientific Nursing Journal*, 9(24), 51-61.
- Attia, N. M., & Elsayed-ElAraby, A. A (2021).** Relationships among Organizational Identification, Cynicism, Job Demands-Resources and Nurses' Job Crafting. *Egyptian Journal of Health Care*, 12(4), 1234–1251. <https://doi.org/10.21608/ejhc.2021.207217>
- Baghdadi, N. A., Farghaly Abd-EL Aliem, S. M., & Alsayed, S. K (2021).** The relationship between nurses' job crafting behaviours and their work engagement. *Journal of Nursing Management*, 29(2), 214–219. <https://doi.org/10.1111/jonm.13141>.
- Dubbelt, L., Demerouti, E., & Rispens, S (2019).** The value of job crafting for work engagement, task performance, and career satisfaction: longitudinal and quasi-experimental evidence. *European Journal of Work and Organizational Psychology*, 28(3), 300-314.
- Elsayed, R. S (2019).** Nurses' Job Crafting and its' relationship with their Job Demands, Job Resources, and Career Competencies. *International Journal of Novel Research in Healthcare and Nursing*, 6(2), 1459-1474.
- Fekry Ahmed, M., & Moustafa Abd-ElGhani, A (2021).** Job Demands, Job Resources and its Relationship with Job Crafting among Head Nurses. *Egyptian Journal of Health Care*, 12(2), 594–607. <https://doi.org/10.21608/ejhc.2021.167095>
- Hyesun, K (2021).** Effects of job crafting on the quality of nursing services among clinical nurses: The mediating effect of work engagement. *Journal of Korean Academy of Nursing Administration*, 27(5), 423-432.
- Jasiński, A. M., & Derbis, R. (2023).** Social support at work and job satisfaction among midwives: The mediating role of positive affect and work engagement. *Journal of Advanced Nursing*, 79(1), 149-160.
- João A., Pereira Alves C., Silva C., Diogo F., Diogo N. (2017).** Validation of a Nurse Job Satisfaction Scale for the Portuguese population. *Revista de Enfermagem Referência*; 12.
- Makhdoom, I., Atta, M., & Malik, N (2019):** Counterproductive Work Behaviors as an Outcome of Job Burnout among High School Teachers. *Bulletin of Education and Research*, 41(2), 79-92.
- McKevitt, D., Carbery, R., & Collins, S (2022).** Job crafting in project management: Implications for project success and career satisfaction. *International Journal of Project Management*, 40(7), 741–749. <https://doi.org/10.1016/j.ijproman.2022.08.004>
- Ni, H., Duan, J., & Cao, Q. (2023).** The double-edged sword effect of employee impression

- management and counterproductive work behavior: From the perspective of self-control resource theory. *Frontiers in Psychology*, 14, 1053784.
- Niskala, J., Kanste, O., Tomietto, M., Miettunen, J., Tuomikoski, A. M., Kyngäs, H., & Mikkonen, K (2020).** Interventions to improve nurses' job satisfaction: A systematic review and meta-analysis. *Journal of Advanced Nursing*, 76(7), 1498-1508.
- Oprea, B. T., Barzin, L., Vîrgă, D., Iliescu, D., & Rusu, A (2019).** Effectiveness of job crafting interventions: A meta-analysis and utility analysis. *European Journal of Work and Organizational Psychology*, 28(6), 723-741.
- Polatci, S., & Sobaci, F. (2020).** the Effect of Job Crafting on Job Satisfaction: a Research on Teachers. *Journal of Global Strategic Management*, 12(1), 49–56. <https://doi.org/10.20460/jgsm.2018.260>.
- Saad, E. S. S., & Ahmed, F. M (2020).** Emotional Stability of Nurses and its Relation to Their Job Crafting. *Evidence-Based Nursing Research*, 2(1), 10. <https://doi.org/10.47104/ebnrojs3.v2i1.101>
- Said, R. M., & El-Shafei, D. A (2021).** Occupational stress, job satisfaction, and intent to leave: nurses working on front lines during COVID-19 pandemic in Zagazig City, Egypt. *Environmental Science and Pollution Research*, 28(7), 8791–8801. <https://doi.org/10.1007/s11356-020-11235-8>
- Spector P. E., Fox S., Penney L., Bruursema K., Goh A., Kessler S. (2006):** The dimensionality of counterproductivity: Are all counter-productive behaviors created equal? *Journal of Vocational Behavior*; 68 (3):446-460.
- Teruya, K. Y., Costa, A. C. D. S., & Guirardello, E. D. B (2019).** Job satisfaction of the nursing team in intensive care units. *Revista latino americana de enfermagem*, 27. <https://doi.org/10.1590/1518-8345.3168.3182>.
- Thompson, S. (2012):** Sampling, 3rd Edition, Wiley Series in Probability and Statistics, New York Wiley, P.59.
- Tims M. Bakker A. B., Derks, D. (2012).** Development and validation of the job crafting scale. *Journal of Vocational Behavior*; 80(1):173–186.