Supervisor's Organizational Embodiment, Organizational Dehumanization and its Relation with Job Attraction as Perceived by Nurses

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Abstract

Background: The degree to which nurses feel rooted in their profession and are less likely to plan to leave is influenced by the strength of the interaction between them and their superiors. Additionally, it's possible that dehumanizing encounters inside healthcare organizations are a prevalent problem right now. This problem affects the recruitment of nurses. **The research aimed to** assess the supervisor's organizational embodiment, organizational dehumanization and its relation with job attraction as perceived by nurses. **Research design:** A descriptive correlation research design. **Sample:** Convenience sample composed of 277 nurse. **Setting:** The study was applied at Cardio Thoracic Minia University Hospital. **Tools of data collection:** Three tools were used, 1st tool consisted of two parts, part one was personal data sheet, the 2nd part was supervisor's organizational embodiment scale; also the 2nd tool was organizational dehumanization scale and the 3rd tool was job attraction scale. **Results:** Reveals that less fifty percent of nurses have high level of perception about supervisor's organizational embodiment, above half of nurses have high moderates level of perception about organizational dehumanization, and above one-third of nurses have high level of perception about total of job attraction. **Conclusion:** There was positive relation between nurse's perception about supervisor's organizational embodiment and their perception about job attraction and there was negative relation between nurse's perception about organizational dehumanization and their perception about job attraction. **Recommendations:** Motivate the best ways to lessen employees' perception of dehumanization are through workshops, conferences, and team-building activities that encourage active participation from people at all levels of management.

Keywords: Job Attraction, Nurses, Organizational Dehumanization & Supervisor's Organizational Embodiment.

Introduction

Employee mobility and the ability to transfer skills to other firms have been made possible by ongoing phenomena changes in the external global environment for many organizations **(Christophe, 2021)**. In a concept known as supervisor's organizational embodiment (SOE), workers frequently identify their supervisor as an agent of the organization. They also may have views about their supervisors and interpret their actions as representing the organization officially. Organizational leaders need to be aware of their own leadership style, how they are guiding others within the business, and how their staff perceives them as the organization's representatives. Employee opinion of how much their boss embodies the organization is known as SOE **(Tseng, 2020).**

Additionally, supervisor's organizational embodiment (SOE) refers to the way in which a worker views their boss as a representative of the organization and links the latter's actions or demeanor to the former. An employee attests to the qualities of the organization and sees a stronger relationship between the leader and the group when their SOE level is greater. Employees may reduce positive SOE and, as a result, emotional commitment when they believe that the supervisor's actions are an act of the organization and are negative **(Brison et al., 2024).**

Moreover, the impact of organization and supervisors' support on workers' organizational citizenship behavior may be further amplified through SOE. The organizational embodiment of the supervisor will increase the positive impact of leader humor on worker engagement. In particular, humor from leaders would demonstrate their want to be involved, appease subordinates, and reduce the gap between superiors and subordinates as an interpersonal communication technique improves relationships. **(Zhang& Su, 2020)**

In addition to improve organizational performance, leaders need to be aware of how their staff perceives them as potential relationship agents. Relationship problems with workers put the organization and the person at serious danger. Perceptions of organizational dehumanization (ODH) can occur when people believe that their psychological needs

such as competence, autonomy, and control are not being met. **(Demoulin et al., 2021).**

The organizational dehumanization (ODH) is the negation or lessened attribution of humanity to employees or managers, who may be viewed or encountered as mere objects. Employees who thought their boss was using them as a tool expressed greater degrees of burnout. Workers' impression of ODH is further aided by organizational fairness and inherent job design elements including reliance, activity fragmentation, and movement repetition. **(Venegas et al., 2022).**

Additionally, the organizational dehumanization (ODH) is frequently characterized as a negative phenomenon with negative effects on organizations and workers alike, including higher organizational deviance, plans to leave, and lower engagement in safety. Employee effects include increased emotional tiredness and decreased job satisfaction. Strengthen the clan—the link of commitment, organizational justice, and ODH views are related to various work relationships (e.g., the employer and the staff vs interpersonal) **(Stinglhamber et al., 2021; Lagios et al., 2022)**. It might be beneficial to think about the organizational embodiment function of managers **(Caesens & Brison, 2023; Stinglhamber et al., 2023).**

Employees who are employed by organizations that embrace pragmatic ideals like humanity have higher levels of emotional engagement. Employees may have a deeper emotional tie with their organization if they believe it is driven by goals, methods, and ends that are all devoted to their well-being. Therefore, a job's attractiveness is its demand for complete dedication **(Hamel et al., 2023).**

Interest value, social value, economic value, development value, and application value are all factors in the appeal of jobs. Interest value evaluates an applicant's attractiveness to an organization that provides a creative, inventive, and forward-thinking work environment and that produces high-caliber, innovative goods and services. An enjoyable and joyful work atmosphere as well as positive connections with coworkers and superiors are evaluated based on social values. Economic worth evaluates the allure in terms of pay, benefits, chances for advancement, and work stability. Development value evaluates an employee's attractiveness to jobs that offer experience, recognition, confidence, and self-worth that can further their career. Lastly, application value is associated with acceptance, the chance to use and impart knowledge, and a customer-focused and humanitarian atmosphere **(Abdallah &Mostafa, 2021).**

So pay, recognition for work well done, and leadership style are said to be the main elements that impact recruiting and retaining the finest nurses, encourage their dedication, and motivate them to joyfully focus their efforts and skills toward achieving a hospital objective **(Pratt et al., 2020).**

Last and not least the rising worldwide nursing shortage is the key problem for nurse leaders and management **(International Council of Nurses, 2021)**. The public's perception of nursing as a job and the working lives of nurses must be improved immediately since these factors affect the field's appeal and, in turn, labor availability**.** Ageing populations and changing climatic conditions are two societal factors that increase the need for care and the nursing profession to deliver it. However, a number of issues, including underpaying in particular and an excessive workload **(Kox et al., 2020),** have been identified as impeding nurses' willingness to engage in their job **(Pratt et al., 2020).**

Significance of the study

The supervisor's organizational embodiment (SOE) outlines how much workers believe their managers or leaders to be the organizational agent. Workers frequently use SOE as a gauge for how well they are getting along with their employer. Put differently, workers who exhibit a high degree of self-esteem typically credit the organization's willingness to show them support and encouragement **(Nguyen et al., 2021).**

Organizational dehumanization **(ODH)** may be caused by unfair assessments, negative characteristics of the job such as regular work, task fragmentation, and the emotional detachment that nurse supervisors display from staff nurses. Only interpretations of procedural fairness, abusive monitoring, and perceived organizational support, however, were found to be connected with ODH perceptions at the experimental level **(Sarwar; Muhammad, 2021).**

Additionally, there have been several difficulties throughout the years in luring and keeping different types of workers, particularly in the medical field and for nurses in particular. The literature has frequently discussed the growing challenges in luring and keeping young nurses in particular, which exacerbates the labor shortage brought on by the aging population and the retirement of a large number of nurses. The need for health services is rising as the population ages, which adds to the concern over the labor shortage **(Tremblay, 2021).**

There were no previous studies linked those three interrelated variables together. So the researchers introducing this study to assess the supervisor's organizational embodiment, organizational dehumanization and its relation with job attraction as perceived by nurses.

Research Aim

The present study aims to offer to assess the supervisor's organizational embodiment, organizational dehumanization and its relation with job attraction as perceived by nurses

Research questions:

▪ What is the level of supervisor's organizational embodiment, and job attraction as perceived by nurses?

▪ What is the level of organizational dehumanization and job attraction as perceived by nurses?

▪ What is the relation between supervisor's organizational embodiment, organizational dehumanization and job attraction as perceived by nurses?

Subjects and Method:

Research Design:

The purpose of the current research was accomplished by using a descriptive correlational research design.

Study Setting:

The study was conducted at Cardiothoracic Minia University Hospital, New Minia City, Minia governorate, Egypt.

This hospital located In front of the Traffic Authority, New Minia, New Minya City. Also, this hospital was founded to offer specialist cardiac and thoracic healthcare to the residents of Minia and the surrounding governorates. In addition to eight chest beds, the hospital has a chest section with twenty-seven beds, a chest and chest surgery department with sixteen beds, an intensive care unit for children and the elderly, a heart surgery department, and a cardiology department. It consisted of one building that has two floors with bed capacity (175) bed.

Subjects:

A Convenience sample of nurses who worked during data collection at Cardio thoracic Minia University Hospital. Their total number is (277) nurses.

Tools of Data Collection:

Data was collected through the utilization of three tools as follows:

Tool I: self-administered tool, it consisted of two parts the 1st part was **personal data sheet:** This developed by the researchers to collect data such as: age, gender, marital status, years of experience, educational qualification, and residence.

2nd part: Supervisor's Organizational Embodiment Scale: This scale was developed by **Eisenberger et al., (2010)**. To measure nurses' perception of SOE, and consists of 9 items. A Likert scale with three points, from "1" for disagree to "3" for agree, was used to rate the nurses' answers.

Score system

A total score ranged from 9: 27 the scoring summed as: < 60% was (low level), from 60% to less than 75 was (moderate level) and > 75 was (high level) of SOE

Tool II: Organizational Dehumanization Scale: This scale developed by **Caesens et al., (2017** to measure the nurses' perception of ODH. It consists of 11 items. A Likert scale with three points, from "1" for disagree to "3" for agree, was used to rate the nurses' answers for positive items on the other hand negative items response 3" Disagree to "1" for agree.

Score system

The score of the whole items was summed up and the entire was distributed by the number of the items reflecting a mean score of ODH, a higher score indicates the extent to which the studied nurses feel dehumanized by their organization. A total score ranged from 11 to 33, which was transformed into a percentage score. Scores higher than 50% suggested participants' feeling of being dehumanized by their organization, while scoring less than or equal 50% was considered a feeling of not being dehumanized by their organization.

Tool III: Job attraction Scale: This scale developed by **Tezi (2008)** and consists of 29 items classify into two factors happiness (25 items) and unhappiness (4 items). A Likert scale with three points, from "1" for never to "3" for always, was used to rate the nurses' answers for positive items on the other hand negative items response 3" never to "1" for always.

Score system

A total score ranged from 29: 87 the scoring calculated as follow: < 60% was (low level), from 60% to less than 75 was (moderate level) and > 75 was (high level) of job attraction

The tools Validity and Reliability

Five nursing administration specialists were the jury assessed the instruments' face validity. The instruments were sent to each expert panel to review in terms of material coverage, general look, length, clarity, phrasing, and structure. The jury panel also made the required alteration, they recommended to changing the five-point Likert scale for SOE and ODH to a three-point scale. In order to determine dependability, the tools' internal consistency was examined using the Cronbach's alpha test. So SOE scale alpha was 0.92, ODH scale alpha was 0.94, and job attraction scale alpha was 0.95.

Pilot Study

A pilot research was conducted on 10% of the participants (n = 27 nurses) at Cardio thoracic Minia University Hospital to verify that the tool items were applicable and clear, as well as to find out how long the tools took to complete. The findings indicated that filling the instruments took a total of 25 to 30

minutes. There were no tool adjustments made in response to the analysis of the pilot research, and the nurses involved in the pilot study were included in the final sample.

Ethical Consideration:

The Faculty Ethics Committee was consulted once the nature of the work was explained in order to acquire official clearance. The participants in the study were verbally informed about the nature and purpose of the investigation, granted the option to decline, withdraw, or continue participation, and assured that the information they provided would be kept private and used exclusively for study purposes.

Data Collection Procedure:

- An Arabic translation of the tools was made.
- After outlining the nature of the work, the director of the hospitals granted official clearance.
- To improve collaboration throughout research implementation, the researchers provided each participant with an explanation of the purpose, design, and importance of the study.

- Each study participant gave their get acceptance after being informed of the study's objectives. The participants were given questionnaire sheets one- by the researchers -one during data collection, who also gave them an explanation before asking for their involvement.
- The participants had to finish the sheets before the researchers could go on.
- Data was gathered from the beginning of February until the end of March 2024.

Statistical analysis of data

Data input and statistical analysis were done using computer software, the Statistical Package for Social Studies (SPSS), version 21. Appropriate descriptive statistics have been used to qualitative variables, means, and standard deviations, and frequencies and percentages for quantitative variables. Using the correlation coefficient (r) test, the close link between variables was estimated. For every test that was employed, a p-value of less than 0.05 was deemed to indicate statistical significance.

Result

Table (1): Percentage distribution of nurses' personal data (no. =277)

| Personal data	Nurses (n.=277)	
	No	%
Age		
• <30	128	**46.2**
• 30-40	70	25.3
• 41-50	62	22.4
• 51-60	17	6.1
Mean ± SD	29.0253± 1.850	
Gender		
• Male	89	32.1
• Female	188	**67.9**
Marital status		
• Single	87	31.4
• Married	170	**61.4**
• Divorce	12	4.3
• Widowed	8	2.9
Years of experience		
• <10	126	**45.5**
• 10-20	97	35.0
• 21-30	54	19.5
Mean ± SD	8.2453 ± 2.345	
Educational qualification		
• Secondary School Nursing Diploma	53	19.1
• Technical Institute of Nursing	180	**65.0**
• Bachelor Degree of Nursing	44	15.9
Residence		
• Urban	139	**50.2**
• Rural	138	49.8
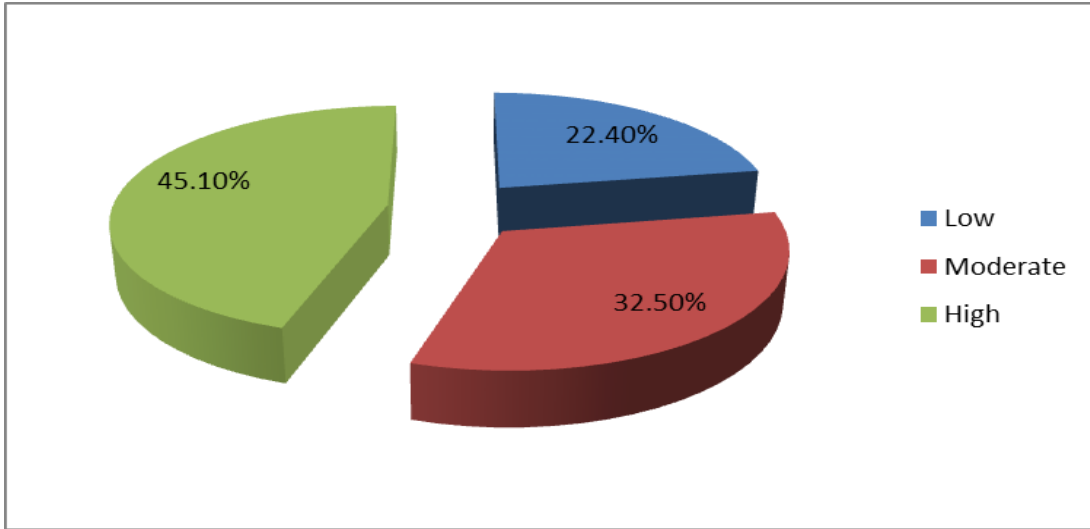
Figure (1): Percentage of total level of nurses' perception of supervisor's organizational embodiment (n=277)
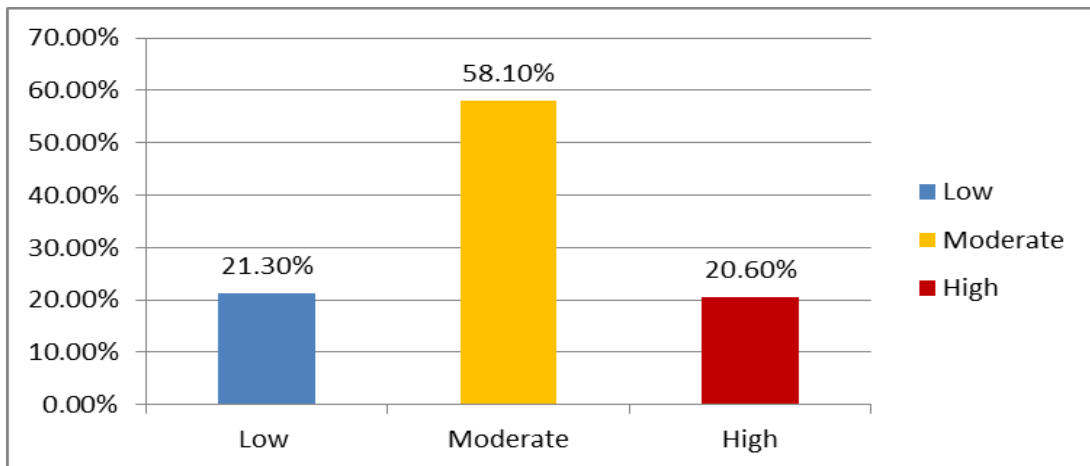

Figure (2): Percentage of total level of nurses' perception about organizational dehumanization (n=277)
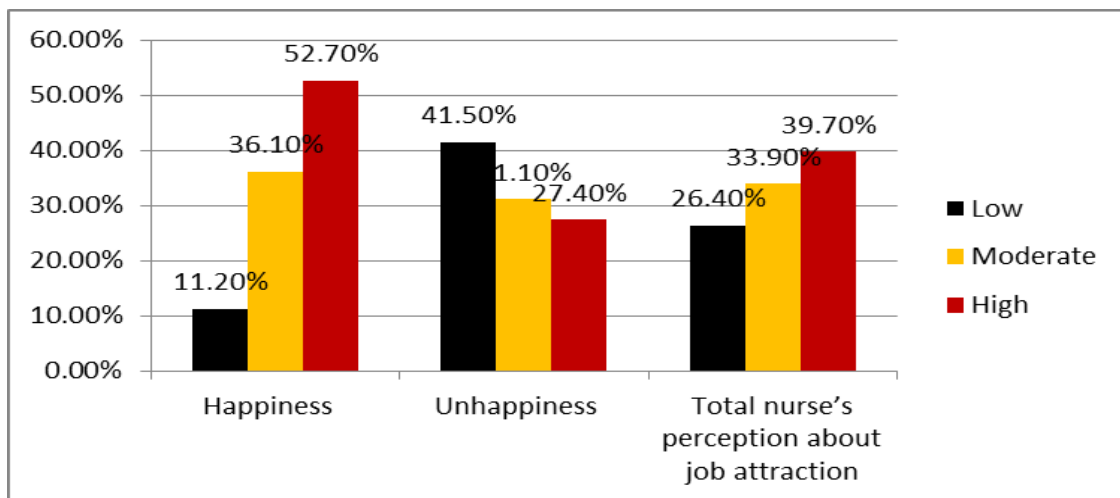

Figure (3): Percentage of total level of nurses' perception about job attraction (n= 277)

Table (2): Relation between nurses' perception of supervisor's organizational embodiment and their personal characteristics (n= 277)

Personal data	Nurses (no.= 277)						Fisher-exact or Chi-square	p-value
	Low (no.=62)		Moderate (no.= 125)		High (no.=90)			
	no.	%	no.	%	no.	%		
Age								
▪ <30	16	12.5	69	53.9	43	33.6	26.827	.001*
▪ 30-40	18	25.7	23	32.9	29	41.4		
▪ 41-50	26	41.9	24	38.7	12	19.4		
▪ 51-60	2	11.8	9	52.9	6	35.3		
Gender								
▪ Male	3	3.4	44	49.4	42	47.2	35.953	.001**
▪ Female	59	31.4	81	43.1	48	25.5		
Marital status								
▪ Single	12	13.8	32	36.8	43	49.4	20.974	.001**
▪ Married	48	28.2	81	47.6	41	24.1		
▪ Divorce	2	16.7	6	50	4	33.4		
▪ Widowed	0	0	6	75	2	25		
Years of experience								
▪ <10	22	17.5	65	51.5	39	31.0	23.726	.001**
▪ 10-20	30	30.9	26	26.8	41	42.3		
▪ 21-30	10	18.5	34	63.0	10	18.5		
Educational qualification								
▪ Secondary School Nursing Diploma	9	17.0	15	28.3	29	54.7	20.703	.001**
▪ Technical Institute of Nursing	47	26.1	90	50	43	23.9		
▪ Bachelor Degree of Nursing	6	13.6	20	45.5	18	40.9		
Residence								
▪ Urban	28	20.2	63	45.3	48	34.5	.985	.620
▪ Rural	34	24.6	62	44.9	42	30.5		NS

Table (3): Relation between nurse's perception of organizational dehumanization and their personal data (= 277)

Personal data	Nurses (no.= 277)						Fisher-exact	p-value
	Low (n=59)		Moderate (n.= 161)		High (n.=57)			
	No.	%	No.	%	No.	%		
Age								
▪ <30	28	21.8	76	59.4	24	18.8	16.412	.011*
▪ 30-40	23	32.9	32	45.7	15	21.4		
▪ 41-50	4	6.5	43	69.3	15	24.2		
▪ 51-60	4	23.5	10	58.8	3	17.7		
Gender								
▪ Male	28	31.5	54	60.6	7	7.9	16.802	.001**
▪ Female	31	16.5	107	56.9	50	26.6		
Marital status								
▪ Single	27	31.1	39	44.8	21	24.1	11.826	.046*
▪ Married	28	16.5	111	65.3	31	18.2		
▪ Divorce	3	25	6	50	3	25		
▪ Widowed	1	12.5	5	62.5	2	25		

Personal data	Nurses (no.= 277)						Fisher-exact	p-value
	Low (n=59)		Moderate (n.= 161)		High (n.=57)			
	No.	%	No.	%	No.	%		
Years of experience								
▪ <10	26	20.6	72	57.2	28	22.2	10.268	0.031*
▪ 10-20	26	26.8	48	49.5	23	23.7		
▪ 21-30	7	13.0	41	75.9	6	11.1		
Educational qualification								
▪ Secondary school nursing diploma	18	34.0	26	49.0	9	17.0	10.417	0.032*
▪ Technical institute of nursing	28	15.5	111	61.7	41	22.8		
▪ Bachelor degree of nursing	13	29.5	24	54.6	7	15.9		
Residence								
▪ Urban	33	23.7	83	59.7	23	16.6	3.105	.209 NS
▪ Rural	26	18.8	78	56.5	34	24.7		

Table (4): Relation between nurse's perception about job attraction and their personal data (no.= 277)

Personal data	Nurses (no.= 277)						Fisher-exact	p-value
	Low (no.=73)		Moderate (no.= 94)		High (no.=110)			
	no.	%	no.	%	no.	%		
Age								
▪ <30	17	13.3	55	43.7	56	43.0	35.589	.001*
▪ 30-40	20	28.6	22	40.0	28	31.4		
▪ 41-50	33	53.2	10	30.6	19	16.2		
▪ 51-60	3	17.6	7	41.2	7	41.2		
Gender								
▪ Male	9	10.2	40	44.9	40	44.9	20.380	.001**
▪ Female	64	34.1	54	28.7	70	37.2		
Marital status								
▪ Single	13	14.9	48	55.2	26	29.9	32.245	.001**
▪ Married	58	34.1	38	22.4	74	43.5		
▪ Divorce	2	16.7	4	33.3	6	50.0		
▪ Widowed	0	0	4	50.0	4	50.0		
Years of experience								
▪ <10	23	18.3	51	40.5	52	41.2	12.901	0.012*
▪ 10-20	33	34.0	32	33.0	32	33.0		
▪ 21-30	17	31.5	11	20.4	26	48.1		
Educational qualification								
▪ Secondary school nursing diploma	14	26.4	18	34.0	21	39.6	3.718	0.449NS
▪ Technical institute of nursing	52	28.9	57	31.7	71	39.4		
▪ Bachelor degree of nursing	7	15.9	19	43.2	18	40.9		
Residence								
▪ Urban	35	25.2	49	35.3	55	39.5	.301	.875 NS
▪ Rural	38	27.5	45	32.6	55	39.9		

Table (5): Correlation among total nurses' perception of supervisor's organizational embodiment, organizational dehumanization and job attraction (no. =277)

Variables	Supervisor's organizational embodiment	Organizational dehumanization	Job attraction
	r P- value	r P- value	r P- value
Supervisor's organizational embodiment		-.652** .001	.852** .001
Organizational dehumanization	-.652** .000		-.540** .001
Job attraction	.852** .001	-.540** .001	

Table (1): Reveals that (46.2%) of nurses are aged below thirty years old with mean 29.0253± 1.850, (67.9%) of them are female, also (61.4%) of them are married, (45.5%) of them have below ten years of experience with average mean 8.2453 ± 2.345, while (65.0%) of them have technical institute of nursing, finally (50.2%) of them from urban area.

Figure (1): Indicates that (45.1%) of nurses' have high level of perception about supervisor's organizational embodiment and (32.5%) of them have moderate level as well as (22.4%) of them have low level of perception about supervisor's organizational embodiment.

Figure (2): Displays that (58.1%) of nurses' have high moderates level of perception about organizational dehumanization and (21.3%) of them have low level as well as (20.6%) of them have high level of perception about organizational dehumanization.

Figure (3): Mentions that (52.7%) of nurses' have high level of happiness and (41.5%) of them have low level of unhappiness factors. Also in this figure shows that (39.7%) of nurses have high level of perception about total of job attraction and (33.9%) of them have moderate level as well as (26.4%) of them have low level of perception about total job attraction.

Table (3): Illustrates that there is significant statistical relation between nurses' perception about organizational dehumanization and their personal data except residence (p= .209).

Table (4): Shows that there is significant statistical relation between nurses' perception about job attraction and their personal data except educational qualification and residence (p=. 449 &. 875) respectively.

Table (5): Clarifies that there is positive relation between nurses' perception about supervisor's organizational embodiment and their perception about job attraction p value= .001. On the other hand, that there is negative relation between nurses' perception about organizational dehumanization and their perception bout supervisor's organizational embodiment as well as job attraction p value= .001

Discussion

The aging of the population and the quick advancement of health care provide an increasing need for high-quality healthcare, which poses serious challenges for nurses' in their line of work. However, by 2030, the World Health Organization (WHO) predicts that there will be a 5.7 million nursing shortfall worldwide by **(WHO, 2020).** The problem is becoming worse even with Egypt's acute lack of nurses (19.3 per 10,000 people), which is worse than the global average **(WHO, 2021).** Nurse turnover is expensive, with the expected cost of new nurse orientation being nearly 1.3 times the annual wage of a nurse. Furthermore, a scarcity of nurses has an indirect negative impact on nurse satisfaction, productivity, patient safety, and the standard of nursing care. Because of these negative consequences, scholars and professionals have spent years trying to figure out what makes nurses' quit their jobs. Regrettably, they haven't yet figured out how to draw in and keep nurses **(Abou Zeid et al., 2024).**

So this research introduced to assess the supervisor's organizational embodiment, organizational dehumanization and its relation with job attraction as perceived by nurses'

Regarding the total nurses' perception of the supervisor's organizational embodiment**,** the present study results reported that nearly half of the nurses' had a high level of perception about the SOE. From the researchers' point of view, effective supervisors often mirror the organization's values and practices. When supervisors provide support, clear communication, and uphold organizational standards, nurses view them as trusted representatives of the organization.

This is supported by **Zheng et al., (2024)** who found that nearly half of the nurses surveyed reported a high level of perception regarding their SOE and

highlighted that when nurses feel supported by their supervisors, they are more likely to perceive their work environment positively, which in turn enhances their overall well-being and professional quality of life.

Conversely, another study published by **Hashish et al., (2024)** who revealed that only thirty-five percent of the nurses perceived a high level of organizational embodiment by their supervisors and suggested that discrepancies in managerial behaviors and perceived fairness could lead to negative perceptions among nurses, thereby affecting their work environment and professional relationships.

Regarding the total nurses' perception of organizational dehumanization, the current study revealed that above half of the nurses had a moderate level of perception of ODH. This could be due to nurses occasionally experiencing feelings of being undervalued or unsupported, these instances are not extreme or consistent enough to indicate a high perception of dehumanization. Also, nurses adequately perceived that their organizational workplace supervisors might sometimes fail to address emotional or individual needs, but not to a degree that fully undermines their sense of being respected within the organization.

This finding is aligned with **Abou Zeid et al., (2024)** who examined the relationship between ODH and work engagement among nurses and found that above half of the nurses reported a moderate level of perception regarding their ODH. Also, **Gip et al., (2023)** who emphasized that ODH has detrimental effects for nurses' well-being, leading to a stressful work environment and negatively impacting their engagement and job satisfaction.

However, **Hashish et al., (2024)** research results revealed that only forty percent of the nurses perceived a moderate level of ODH, this was associated with higher levels of perceived organizational justice as well as managerial caring behaviors. Moreover, **Ahmed and Mohamed Makhbul, (2024)** study suggested that when employees perceive fairness and support from their supervisors, and managers the perception of ODH decreases, leading to a more positive work environment and reduced instances of workplace bullying.

Regarding the total of nurses' perceptions of job attraction, the actual research reported that more than half of the nurses had a high level of happiness factors, and above two-fifths of the nurses had a low level of unhappiness factors. Also, the present study finding noted that regarding the total job attraction, the highest percentage of them had a high level of perception.

Because nurse's work experiences involve both positive and negative aspects, when the nurses reported high levels of happiness factors, it was likely due to positive work conditions, supportive management, and job satisfaction. While, the fact that over two-fifths had low levels of unhappiness factors suggests that stressors and negative aspects of the job are effectively managed, contributing to a more balanced and fulfilling work environment.

Moreover, when nurses perceive a high level of job attraction it reflects a favorable view of their work environment, including aspects such as job stability, career growth opportunities, and overall job satisfaction. This positive perception suggests that nurses find their roles rewarding and well-aligned with their professional expectations and personal values.

This finding is attributed to **Yanık & Ediz, (2024)** who reported that the highest percentage of the nurses reported high levels of happiness regarding their job. This high level of happiness was attributed to factors such as supportive work environments, professional development opportunities, and positive work-life balance. Additionally, the study revealed that forty-five of the nurses experienced low levels of unhappiness, which was linked to effective stress management programs and strong peer support networks.

Also, the current study finding is supported by **Prosen & Ličen, (2023)** who found that the highest percentage of the nurses reported a high level of perception of job attraction. This high level of job attraction was attributed to factors such as supportive leadership, opportunities for professional development, and a positive work environment.

However, **Arulappan et al., (2021)** illustrated that only forty percent of the nurses reported high levels of happiness, and were associated with high job stress and workload. Also, **Ojedoyin & Jegede, (2022)** reported that the lower percentage of nurses was associated with high levels of job attraction due to work stress, workload, and lack of managerial support, and suggested that despite some positive aspects of the job, significant stressors can negatively impact nurses' perceptions of job attractiveness.

Regarding the relation between nurses' personal data as well as their total perception of the SOE, the current study noted that there was a highly statistically significant relation between nurses' personal data such (age, marital status, gender, years of experience, and educational qualification) except their residence.

Because these factors may influence how nurses view leadership and organizational values. Also, personal and professional experiences shape the expectations and perceptions of supervisors. However, residence

may not show significance as it might not directly impact day-to-day interactions or perceptions of leadership within the workplace environment.

This finding is supported by **Deborah Brennan and Lori Wendt, (2021)** who found that organizational embodiment found significant statistical relations for most demographic factors. Specifically, (age, years of experience, gender, and marital status).

However, the finding is not congruent with **Stokes, (2023)** found that educational qualification did not significantly affect perceptions of the nurses regarding organizational embodiment. Also, the study revealed that nurses with different educational backgrounds had similar perceptions of embodiment, suggesting that factors other than education might play a more critical role. Additionally, gender and marital status were not found to be significant predictors in this study, indicating that these personal data factors might not universally influence perceptions of embodiment.

Regarding the relation between nurses' personal data and their total perception of ODH, the present finding highlighted that there was a significant statistical relation between nurses' personal data such as (age, gender, marital status, years of experience, and educational qualification) except their residence.

From the researcher's point of view, this arises because these factors shape how individuals experience and interpret workplace treatment. Nurses' variance in age group, marital status, professional maturity, and educational background can affect how nurses perceive dehumanizing behaviors. However, residence may not significantly impact these perceptions, as it is less relevant to the direct interactions with supervisors, and organization that shape feelings of dehumanization.

This relation is supported by **Abou Zeid et al., (2024)** who illustrated that age and years of experience were strongly correlated with perceptions of dehumanization, with older and more experienced nurses reporting higher levels of dehumanization. Moreover, Gender and marital status also showed significant relations, where female nurses and those who were married reported higher perceptions of dehumanization compared to their counterparts.

However, **El-Sayed Aly et al., (2023)** reported that educational qualification did not significantly affect perceptions of organizational dehumanization.

Regarding the relation between nurses' personal data and their total perception of job attraction, the present study reported that there was a significant statistical relation between nurses' personal data such as (age, gender, marital status, and years of experience) except their residence, and educational qualification respectively.

This may likely exist because these factors influence career priorities and job satisfaction. Differences between nurses' ages, personal circumstances, and experience levels can affect what aspects of a job are appealing. However, residence and educational qualification may not show significance, as location might not directly impact job attractiveness, and educational background alone may not strongly influence day-to-day job perceptions compared to personal and experiential factors.

Al-Harazneh et al., (2024) supported this finding, which noted that gender and marital status were significant predictors of job security and retention. They were indicating that these personal data factors might universally influence perceptions of job attraction. Also, **Qi et al., (2024)** study's findings, there were statistically significant differences in the total professional job attractiveness score depending on factors like age, gender, marital status, employment mode, years of work experience, nursing assistant certificate level, shift status, average daily care number, and average daily care disabled number.

On the other hand, **Solomon et al., (2022)** revealed that nurses with higher educational qualifications reported higher levels of job attraction, suggesting that advanced education significantly enhances job satisfaction and attractiveness.

Concerning the correlation among total nurses' perception of the supervisor's organizational embodiment, organizational dehumanization, and job attraction, the current study revealed that there was a positive statistically significant relation between nurses' perception of the SOE and their perception of job attraction (p value=. 001). this could be due to nurses viewing their supervisors as embodying organizational values, they feel more aligned with the workplace. This sense of alignment fosters a supportive and engaging environment, making the job more attractive. Supervisors who reflect the organization's commitment to employee well-being and development can enhance nurses' overall job satisfaction and motivation.

This finding is aligned with **Mirzaei et al., (2024)** who reported that nearly two-thirds of the nurses' who perceived high levels of organizational embodiment by their supervisors also reported high levels of job attraction. Also, highlighted that supportive and engaging leadership practices significantly enhance nurses' perceptions of job attractiveness, leading to higher job satisfaction and retention rates.

Also, **Potts, (2021)** found that when nurses perceive their supervisors as embodying the organization's values and goals, their job attraction increases. Moreover, **Fan et al., (2024)** concluded that nurses' who perceived their supervisors as embodying the organization's values and goals reported higher job

attraction. This indicates that while leadership is a significant factor, the overall work environment and available resources also critically impact job attraction.

However, **Mirzaei et al., (2024)** a weak significant relation between organizational embodiment by their supervisors, and job attraction. This indicated that while organizational embodiment is important, other factors such as work-life balance, compensation, and professional development opportunities also play crucial roles in influencing job attraction.

While the study findings reported that there was a negative statistically significant relation between nurses' perception of the ODH and their perception of the SOE as well as job attraction (p value= .001). This indicates that dehumanizing behaviors undermine trust, support, and respect. When nurses feel devalued by their supervisors, they are less likely to see them as embodying positive organizational values, which in turn diminishes their overall job satisfaction and attraction to the workplace. Dehumanization erodes the positive perceptions necessary for job appeal and organizational alignment.

This finding is attributed to **Abou Zeid et al., (2024)** study which highlighted that the nurses who perceived high levels of ODH reported low levels of job attraction and low perceptions of their SOE. Also, the study revealed that when nurses feel dehumanized by their organization, their overall job satisfaction and attraction to their role significantly decrease, emphasizing the importance of a supportive and humane work environment.

On the other hand, **Brison et al., (2024)** reported that organizational culture and nurse perceptions found that only 35% of the nurses who perceived high levels of ODH reported low levels of job attraction. This lower percentage suggests that while ODH negatively impacts job attraction, other factors such as personal resilience, peer support, and external job opportunities might mitigate this effect. Additionally, the study found that 45% of the nurses still perceived their SOE positively despite feeling dehumanized by the organization.

Conclusion

This research concluded that less fifty percent of nurses' had high level of perception about SOE and about one third of them had moderate level as well as less than one quarter of them had low level of perception about SOE. Moreover, above fifty percent of nurses had high moderates level of perception about ODH and slightly above two fifth of them had low level as well as high level of perception about ODH. Furthermore, above one third of nurses had high level of perception about total of job attraction and about thirty-three percent of them had moderate

level as well as above one quarter of them had low level of perception about total job attraction.

Also this research clarified that This conclusion between nurses' perception about SOE and their perception about job attraction p value= .001. On the other hand that there was negative relation between nurses' perception about ODH and their perception about SOE as well as job attraction p value= .001

Recommendations

The following recommendations were inferred from the research:

- Motivate managers to enhance the traits they have in common with the organization. Giving sense can encourage followers to participate in creative work.
- Teach managers how to adjust to organizational norms and needs while also focusing on hiring innovative workers based on actor-context interactions.
- Treat the employees equal and fairly by the organization
- Encourage the utilization of new technology in the organization to encourage nurses' attraction and retention in their job
- Promote a sense of dehumanization and support among employees. Hospitals and their managers may use specific human resource strategies, such reducing workloads, improving job security, and offering chances for training and development to foster employees' personal and professional development.
- Promote team-building activities, conferences, and workshops that foster active interaction between staff members from different management levels. These methods are significantly more effective in lessening the feeling of dehumanization among employees.
- Treating workers like human beings should occur before organizations evaluate their performance.

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