Role Clarity and its Impact on Nursing Staff Work Alienation at Malawi Specialized Hospital

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Abstract

Background: Role clarity helps nurses to focus on the patients' needs and enables a shift from 'provider-driven' to patient-centered care. In contrast, higher role ambiguity was associated with greater severity. of emotional exhaustion, thereby increasing the occurrence and development of work alienation in nurses. **Aim:** to assess role clarity and its impact on nursing staff work alienation at Malawi Specialized Hospital. **Research design:** A descriptive correlation research design was utilized in this study. **Setting**: The study was conducted at Malawi Specialized Hospital. **Subjects:** All staff nurses available (N=353), who worked at Malawi Specialized Hospital during the data collection period. **Tools:** two tools were as follows: tool (I), the first part was personal data, and the second part was the Role Clarity Questionnaire. Tool (II) Work Alienation Scale. **Results:** There was a high level of role clarity among the highest percentage of the studied nursing staff; the majority of them had a moderate level of total work alienation. **Conclusion:** There was a strong negative correlation between perceived role clarity and work alienation among nursing staff at Malawi Specialist Hospital. **Recommendation: Fostering** a supportive work environment to reduce work alienation, continuous professional development opportunities for new nurses, and implementing mentorship programs for knowledge sharing and role clarification

Keywords: *Nursing Staff, Role Clarity, Work Alienation*

Introduction

Over the past three decades, nurses' roles have evolved due to increasing care demands, increased acuity among residents, and sector underfunding. While they still provide direct care, some nurses are now involved in coordination and administration activities at unit and facility levels. This requires clear coordination of roles between professional nursing categories like registered nurses and nursing assistants to provide excellent nursing care in healthcare organizations **(Seabrook, 2023)**. Role clarity refers to nurses' belief in a clear direction for their tasks and actions. It is essential job information that allows them to perform their duties efficiently. A clear understanding of their roles increases work engagement, emphasizing the importance of fostering supportive work relationships and providing a comprehensive understanding of their roles within the organization **(Ojeleye et al., 2023)**.

The social exchange theory suggests that when organizations invest in providing nurses with clear role expectations, nurses are more likely to reciprocate by displaying higher levels of job satisfaction and commitment **(Ojeleye, et al., 2022)**. Also, role clarity is crucial for nurses' growth and development, as it allows leaders to focus on facilitating staff growth rather than ensuring compliance. This fosters creativity and small wins within the role's scope. Successful role implementation requires clear and well-defined roles, which are essential for patient satisfaction, recruitment, and retention. Failure to address these roles can result in a lack of impact on healthcare providers and organizations **(Schwingrouber et al., 2024)**.

Role unclarity is a gap between information and the necessary skills to perform a role correctly. It can arise from poor job descriptions, unclear instructions from supervisors, or inappropriate cues from co-workers. Nurses often face this. Issue due to unclear information about their duties and ambiguous job expectations. This issue is more common in unhealthy practice environments, where poor communication about expectations and responsibilities between team members can lead to ambiguity **(Cininta & Wisesa, 2023; Khanal & Ghimire, 2024)**. Nurses may experience uncertainty in their roles and group membership, as well as in their work responsibilities, expectations, and job performance, leading to feelings of uncertainty and a lack of clarity in their roles **(Abdou et al., 2024)**.

Role ambiguity in nursing negatively impacts planning, leading to ineffective plans and wasted time. It also results in low self-esteem and erodes self-confidence. Nurses without a clear understanding of their strengths and weaknesses may doubt their abilities and self-worth. Ignoring clarity can result in regret and difficulty. In career progression. Nurses struggle to differentiate themselves from others, secure promotions, or find new job opportunities due to role ambiguity. Therefore, nurses must understand their true desires and priorities early in their careers **(Lee et al., 2024)**.

Work alienation is a global concern affecting both public and private organizations, negatively impacting productivity and individual performance **(Karayaman, 2024; Shahzad et al., 2023)**. It refers to the subjective psychological experience in which the material, spiritual, and other important needs of individuals cannot be met at work, which leads to the separation of nurses from work and negative coping at work **(Cui et al., 2023)**. Work alienation includes organizational, socio-demographic, and individual elements **(Stănescu & Romaşcanu, 2024)**. Organizational elements like interpersonal relationships, attachment, and affiliation are crucial for employee well-being. Insufficient quality can lead to emotional alienation and work alienation **(Bougherza et al., 2024)**. Work alienation among nurses is influenced by factors like age, education, and marital status, with gender, marital status, experience, and age playing significant roles.

Education and hierarchy negatively affect alienation, with unmarried nurses experiencing more alienation **(Singh & Randhawa, 2024)**.

Scholars introduced dimensions for alienation. According to Karl Marx's theory, including powerlessness, meaninglessness, isolation, social and self-estrangement, and normlessness **(Faiyez et al., 2023; ELsaeed et al., 2023; Salehian et al., 2023)**. Powerlessness is the absence of independence, leading to limited control over work activities. Meaninglessness results from a lack of understanding between work and social purposes. Isolation occurs when nurses feel rejected or unwanted by their group or community. Social estrangement occurs when management guidelines do not effectively govern nurses' behavior, preventing them from achieving their full potential. Anomie is an imbalance in individuals or society due to a lack of purpose or a collapse of values **(Basiony & Ibrahim, 2023; Elsaeed et al., 2023)**.

Three successive stages through which alienation passes; psychological, mental, and physical job alienation. Each stage becomes more dangerous than the one before it, and the negative matters become more cumulative in each stage **(Abdelgalil, 2022).** Work alienation significantly impacts job satisfaction, motivation, nurse-patient relationships, and turnover intentions. It negatively impacts organizations and nurses, leading to decreased performance, loyalty, isolation, and powerlessness. Nurses often feel like they're just surviving, neglecting their skills and knowledge **(Cui et al., 2022; Torlak, 2024; Abouelenien et al., 2024)**. Clear job roles enhance nurses' engagement and energy, while role ambiguity hinders problem-solving and leads to burnout, reduced motivation, and work alienation. Higher role ambiguity is associated with greater emotional exhaustion, thereby increasing work alienation in nurses **(Zhang et al., 2023)**.

Nurse Managers pay more attention to nurses' physical and mental health, encourage them to learn emotional regulation methods, reduce the occurrence of negative emotions, distribute nurses' work tasks fairly, and reduce work pressure and psychological burden. They improve nurses' sense of professional value through reward mechanisms, oral praise, and making them aware of the importance of nursing work by helping them explore the positive aspects of their job so that they can maintain strong interest and enthusiasm in their nursing work **(Al-Gharaibeh et al., 2021)**.

Significance of the study:

Nurses face high uncertainty in their work. Environment, expectations, and roles increase their risk of anxiety, stress, and burnout. Role clarity is crucial for their mental health and work experience (**Zettna et al., 2024**). A nurse leader's behavior in an organization serves as a key driver of experienced role clarity, which directly provides a better understanding of the job to nurses, which increases their performance. Also, a better job understanding (role clarity) should lead nurses towards a less stressful condition, which reduces their burnout. Conversely, the lack of role clarity leads them to risk of stress and anxiety **(Chen et al., 2022).**

Internationally, a study done by **Orgambídez & Almeida (2020) about** social support, role clarity, and job satisfaction: a successful combination for nurses found that the effect of role clarity. Nursing staff with high social support from their supervisors and peers showed higher scores in job satisfaction when role clarity was high. Another study was done by **You & Gao (2022).** About the Status of Work Alienation Among Nurses in China: A systematic review found that Chinese nurses had a moderate level of work alienation.

Nationally, a study done by **Mohamed et al. (2020)** about role clarity as a predictor of nurses' job satisfaction among nurses at Assiut University found job satisfaction and nurses' awareness of causes of role ambiguity and nurses' perception of role clarity correlated positively with the job satisfaction dimension of communication and relations. Also, a study done by **Gabra et al. (2023)** about the influence of perceived ethical work climate on work alienation among nursing staff found a negative correlation between ethical work climate and work alienation of study subjects, and more than half of the study subjects had had a negative ethical work climate and a high level of work alienation.

From the researcher's point of view, it suggests that understanding nurses' roles and the causes of role ambiguity can improve job satisfaction and reduce turnover, absenteeism, and work alienation. This study aims to reduce clashes in healthcare settings caused by role ambiguity, which can lead to dissatisfaction and a shortage in patient care, as there are few studies on this relationship.

So, the current study aimed to assess role clarity and its impact on nursing staff work alienation at Malawi Specialized Hospital.

Aim of the study

The current study aimed to assess role clarity and its impact on nursing staff work alienation at Malawi Specialized Hospital.

Research Questions:
1. What are the levels of role clarity and work alienation among nursing staff?
2. Is there a relation between role clarity and work alienation among nursing staff?

Research Design

A descriptive correlational research design was implemented to achieve the aim of the present study.

Setting

The study was conducted at Malawi Specialized Hospital which is affiliated with the Ministry of Health and Population in Minia, Egypt.

Study Subjects

A convenience sample included all nursing staff (total number = 353) who worked in Malawi Specialized Hospital during the period of data collection and distribution.

Inclusion Criteria:
- Nurses who have at least 6 months of experience working at the hospital

Exclusion Criteria:
- Nurses with fewer than 6 months of work experience at the hospital.

Tools of Data Collection:
Data was collected by using two tools as following:
Tool (I): Role Clarity Questionnaire: it was divided into two parts:

Part I: Personal Data: -

This part was intended to collect data about nursing staff encompassing items such as age, gender, educational qualification, marital status, department, years of experience in the nursing field, residence, and attendance in previous training courses about role clarity and work alienation.

Part II: Role Clarity Questionnaire: -

This questionnaire was developed by **El-Sayed. (1997)** and translated into Arabic by the researcher to assess the role clarity of nursing staff. It consisted of (28) items forming two dimensions: 1st one related to Causes of Role Ambiguity (22 items): each item was measured with the scoring system (Yes" = 2, and "No" = 1). The second dimension is nursing staff's perception about role clarity, which included 6 items. Items were measured by 3 points. Likert scale as: "disagree "= 0, "neutral "= 1, "agree = 2.

The scoring system was ranked from (22 to 56), and it is classified as follows:

• High level of role clarity: Scores ranged between (46:56).
• Moderate level of role Clarity: Scores ranged between (34:45).
• Low level of role clarity: Scores ranged between (22:33).

Tool (II): Work Alienation Scale (WAS):

This scale was developed by **Osman (2017).** and modified by the researcher to assess work alienation as perceived by nursing staff, it consisted of 24 items, and it was categorized into four dimensions, as follows: powerlessness (5 items), meaninglessness (6 items), normlessness (6 items), and self-estrangement (7 items). Each item was measured by a three-point Likert scale: "agree= 3, "neutral= 2, and "disagree= 1.

The scoring system was ranked from (24 to 72), and it is classified as follows:

• High level of work alienation: Scores ranged between (56:72),
• Moderate level of work alienation: Scores ranged between (40:55).
• Low level of work alienation: Scores ranged between (24:39).

Validity of the tool:

The tools were tested for the content validity by a jury of 5 experts in the field of nursing administration at Minia and Assiut University; it consisted of one professor of nursing administration - faculty of nursing - Assiut university, and four assistant professors of nursing administration - faculty of nursing - Minia university. Each of the expert panels was asked to examine the instruments for content coverage, clarity, wording, length, format, and overall appearance. And necessary modification was done by the jury panel.

Reliability of the tool:

Reliability of the scales was performed to confirm the consistency of the scales. The internal consistency was measured to identify the extent to which the items of the scales measured what it was intended to measure. Also, the scales were tested for their reliability. Using the Cronbach alpha test, which revealed good internal reliability for the scales; and distributed as follows:

Reliability analysis of the study tools:

Items	Cronbach' alpha
Total Role Clarity	.899
Total Work Alienation	.885

Pilot study:

A pilot study was carried out before starting data collection on 10% (35) of the studied sample, who work at Malawi Specialized Hospital. This pilot study aimed to test the clarity, comprehensiveness, accessibility, and applicability of the tools and to estimate the appropriate time required for filling out the questionnaire. Tools did not need modification based on the findings of the pilot study. So, participants of the pilot study were included in the study sample.

Data collection procedure:

• An official letter was granted from the Nursing Faculty Dean at Minia University, the Ethical Committee, and the Nursing Faculty at Minia University.
• The scales were adopted, and translated into Arabic; then the jury approved the scales to collect data for the study.
• Written approvals were obtained from the Malawi Specialized Hospital director after explaining the purpose of the study.
• After obtaining permission, the researcher began to introduce herself to the head nurse and nursing staff and then, explained the nature, and aim of the study and how they should fill the scales.
• A pilot study was done to assure scale clarity and applicability. Then the reliability of the scales was done.
• The scales were distributed to all nursing staff. Scales were administered directly and supervised by the researcher with the assistance of the head nurse of each unit.
• The researcher distributed those scales to nursing staff during the working days.
• The sheets were given individually to all of them and nursing staff were given from 20 minutes to 25 minutes to answer the scales. The researcher answers any questions that the nursing staff needs.
• The actual field work started from the beginning of March 2024 to the end of June 2024 for collecting data.
• The researcher scheduled the visits to each department based on the nursing staff's schedule of work.

Ethical Consideration:

• An official letter was granted from the Research Ethics Committee of the Faculty of Nursing, Minia University.
• Approval to conduct the study was obtained from the Dean of the Faculty of Nursing, at Minia University.
• Permission and consent were obtained from the director as well as the nursing managers of Malawi Specialized Hospital.
• Permission and consent were obtained from the head of the department and the head nurse working at Malawi Specialized Hospital.
• Before the conduction of the pilot study as well as

the actual study, oral consent was obtained from the participants that are willing to participate in the study, after explaining the nature and purpose of the study. The study subject has the right to refuse to participate or withdraw from the study without any rationale at any time. Study subject privacy will be considered during the collection of data. Participants were assured that all their data were highly confidential; anonymity was also assured by assigning a number for each nurse instead of names to protect their privacy.

Statistical Design

The data was analyzed using SPSS version 25 and descriptive statistical tests. Qualitative data was expressed as frequencies and percentages, while Microsoft Excel generated graphs for visualization. A significance level of less than 0.05 was considered, while a probability (P-value) of less than 0.001 was considered highly significant. Quantitative data was expressed as frequency and percentage, and comparisons between variables were made using t-tests and Pearson correlations.

Results

Table (1): Frequency distribution of the nursing staff's personal data (no=353).

Nurses' personal data	(no.=353)	%
Age		
• 20-<29yrs.	151	42.8
• 29- <39 yrs.	117	33.1
• 39- <49 yrs.	54	15.3
• > 49	31	8.8
Mean±SD = 27.83±6.384		
Gender		
• Male	150	42.5
• Female	203	57.5
Marital status		
• Single	62	17.6
• Married	280	79.3
• Divorced	6	1.7
• Widow	5	1.4
Residence		
• Urban	125	35.4
• Rural	228	64.6
Educational Qualification		
• Diploma degree in nursing	136	38.5
• Technical institution of nursing	132	37.4
• B.Sc. nursing	85	24.1
• Others	0	0
Years of experience in the nursing field		
1-5 yrs.	100	28.3
6-10yrs.	117	33.2
11-15yrs.	59	16.7
16-20yrs.	31	8.8
>20yrs.	46	13.0
Mean±SD = 7.183±3.321		

Table (1): Presents that, more than two-fifths (42.8 %) of the studied nursing staff's ages ranged from 20 to less than 29 years old, with a mean age of (27.83±6.384). More than half (57.5%) of the studied nursing staff are females. The majority (79.3%) of the studied nursing staff are married and more than one-third (38.5%) have a diploma degree in nursing. As far as their experience, nearly one-third (33.2%) of the studied nursing staff have years of experience ranging from 6 to 10 years of experience with a mean of (7.183±3.321).
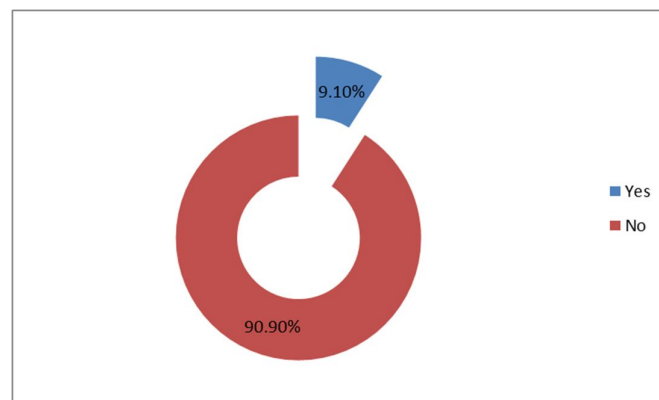

Figure (1): Distribution of the nursing staff's attendance in previous training courses about Work Alienation (no=353).

Figure (1): Mentions that, a small minority (9.1%) of the studied nursing staff attended previous training courses about work alienation.
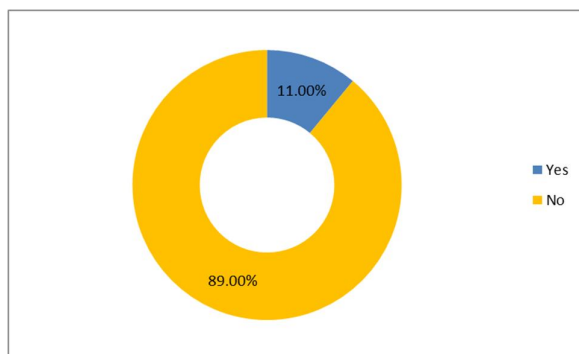
Figure (2): Distribution of the nursing staff's attendance in previous training courses about role clarity (no=353).
Figure (2): Illustrates that, a minority (11%) of the studied nursing staff attended previous training courses about role clarity.

Table (2): Frequency distribution of nursing staff department (no=353).

Nurses' department	(no.= 353)	%
Sterilization Department	12	3.4
Dialysis Unit	45	12.7
Operations Department	33	9.3
Obstetrics Unit	13	3.7
Internal Departments	59	16.7
Pediatric Care Unit	35	9.9
Cardio Care Unit	15	4.2
Intensive Care Unit	32	9.2
Neonatal Intensive Care Unit	5	1.4
Emergency Department	50	14.2
Outpatient Clinics	40	11.3
Blood Bank Department	7	2.0
Psychiatry Care Unit	7	2.0

Table (2): Presents that, the most common department among (16.7 %) of the studied nurses is internal departments.
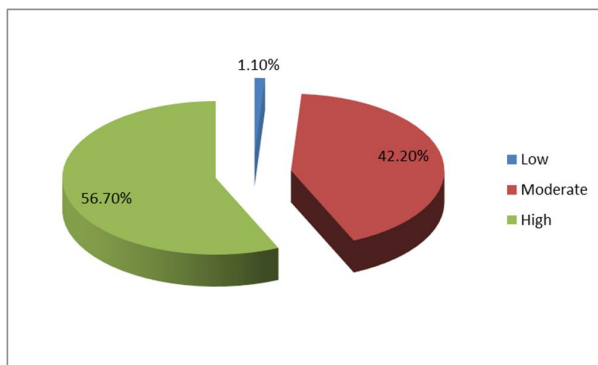

Figure (3): Total nursing staff's role clarity (no=353).
Figure (5): The highest percentage (56.7%) of the studied nursing staff have a high level of total role clarity, as well as (42.2% & 1.1%) of the studied staff nurses have moderate and low levels of role clarity respectively.
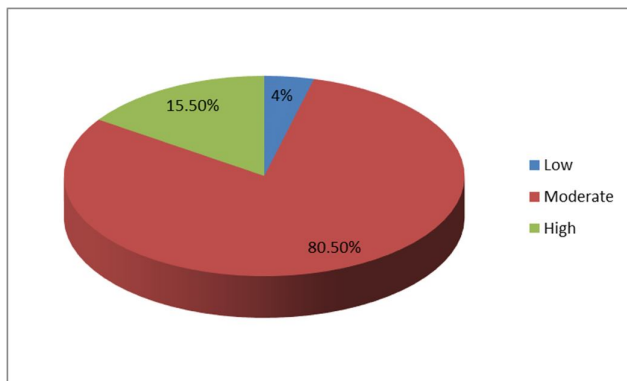

Figure (4): Total nursing staff's work alienation (no=353).
Figure (3): Represents the total nursing staff's work alienation. It is noticed that the majority (80.5%) of the studied nursing staff have a moderate level of total work alienation, as well as (15.5% & 4 %) of them have a high and low level of total work alienation respectively.

Table (3): Correlation between nursing staff's role clarity and work alienation (no= 353).

Items		Role clarity	Work alienation
Role clarity	r P- value		-.165** .002
Work alienation	r P- value	-.165** .002	

p≤0.05 (significant), NS= No Significant difference * * highly Statistically significant difference

Table (3): Illustrates that, there is a highly statistically significant negative correlation between the studied nursing staff' total role clarity and their total Work alienation (P – value= 002).

Discussion

Role clarity is crucial for nurses' growth and development, as it allows leaders to focus on facilitating staff growth rather than ensuring compliance. This fosters creativity and small wins within the role's scope. Successful role implementation requires clear and well-defined roles, which are essential for patient satisfaction, recruitment, and retention. Failure to address these roles can result in a lack of impact on healthcare providers and organizations **(Schwingrouber et al., 2024; Yuan et al., 2023)**.

Work alienation among nursing staff a negative aspect of organizational behavior, can lead to feelings of isolation and disconnection from the social structure of the workplace, potentially affecting the effectiveness and efficiency of organizations. Addressing this issue can provide valuable insights for practitioners and theoreticians in understanding organizational behavior **(Kızrak et al., 2023)**.

Lack of role definition, where nurses lack clear information about their job match, can lead to difficulties in job performance, loss of confidence, frustration, incompetence, and feelings of work alienation **(Üngüren & Arslan, 2021)**. Nurses' occupational disidentification mediates the relationship between role ambiguity and work alienation; role ambiguity increases occupational disidentification and ultimately induces work alienation among nurses **(Tang et al., 2024)**.

Regarding the Personal data of the studied staff nurses, the current study revealed that more than two-fifths of the studied staff nurses' age ranged from 20 to less than 29 years old, with a mean age of (27.83±6.384). This result was consistent with **Mohamed et al., (2024)** who assessed the influence of organizational silence on work alienation among staff nurses and found that more than two-fifths of the studied nurses were less than 30 years old. Also, the study finding was congruent the **Zhang et al., et al., (2023)** who examined how role ambiguity affects work alienation among Chinese nurses and reported that about two-fifths of studied nurses' ages were lower than 30 years old.

Concerning the studied staff nurses' gender, the current study found that more than half of them were females. This result was in the same line with **Basiony & Ibrahim, (2023)** who examined staff nurses' perception regarding exploitative leadership and its effect on their work alienation and found that more than half of the studied nurses were females. Also, this result was agreed with **Manolache & Epuran, (2023)** who studied the mediating impact of goal–role clarity on the relationship between feedback-seeking behavior and goal orientations with job satisfaction intrinsic cognitions and person-organization fit and reported that more than half of the study participants were female nurses.

As regards the marital status of the studied nurses, the current study showed that the majority of them were married. This study result followed the study by **Zaki et al., (2023)** who conducted a study to assess organizational cynicism and work alienation among nurses and its relation to organizational loyalty they found that the majority of studied nurses were females.

As regards to educational level of the studied staff nurses, it was noted that more than one-third of the studied staff nurses had a diploma degree in nursing. This study finding was in the same line as **Zaki et al., (2023),** who showed that nearly one-third of the studied nurses had a diploma degree in nursing.

As far as their experience, nearly one-third of the studied nursing staff had years of experience ranging from 6 to 10 years of experience with a mean of (7.183±3.321), this result was in accordance with **Gabra et al., (2023)** who investigated the correlation between nurses' perception of ethical work climate and workplace alienation at Minia University Hospital and reported that nearly one-third of studied nurses had 5-10 years of experience.

As for the department that the studied nurses worked in, the most common department among less than one-fifth of the studied nurses was internal departments. This result was supported by **Mohamed et al., (2022)** who conducted a study to identify the influence of perceived organizational injustice on workplace alienation among nursing staff during COVID-19 and found that a higher percentage of studied nurses worked in inpatient wards.

Concerning attendance in courses about role clarity, the present study reported that a minority of the studied nursing staff attended previous training courses about role clarity and work alienation. From the researcher's point of view, this inadequate nurses' training may be due to a shortage in nursing staff, lack of time, the heavy workload in their workplace, and no availability of training programs produced for them by the hospital which may be due to unavailable training funds.

This study was in the same line with **Badran & Khaled, (2021)** who studied job security as perceived by staff nurses and its relation to their work alienation and reported no study participant attended training courses. Also, this result was consistent with **Mohamed et al., (2024)** who showed that all of them didn't attend any training course about work alienation.

Regarding the total role clarity among studied nurses, the current study indicated that the total role clarity among the highest percentage of the studied nursing staff was at a high level with a mean of (44.2635±4.827). From the researcher's point of view, the study found that the majority of nursing staff have a high level of total role clarity, this indicates a positive organizational environment and effective communication of roles within the workplace. The result also suggests that the hospital may implement uniform processes or policies to communicate roles effectively.

This finding was in agreement with **Orgambídez & Almeida, (2020)**, who analyzed the moderating effect of role clarity on the relationship between social support (supervisor and colleagues) and job satisfaction and pointed out that studied nurses had high scores in role clarity with a mean of

(4.83±1.15). This result was contrary to **Chen et al., (2024)** who investigated the mediating role of perception of decent work in role clarity and job embeddedness among Chinese nurses and displayed that the role clarity score was 32.67 ± 5.65, which was at a moderate level. Also, this finding was in disagreement with the study of **Alblihed & Alzghaibi, (2022)** who examined the impact of job stress, role ambiguity, work-life imbalance, and burnout on employee turnover intention and reported that nurses experienced high role ambiguity, which significantly associated with an increased intention to quit their job.

Concerning total nursing staff's work alienation, the findings of the current study indicated that, the majority of staff nurses had a moderate level of alienation at work, and only one-sixth had high levels, otherwise, the minority of them were not alienated. From the researcher's point of view, this finding may be due to current deficiencies related to knowledge and skills in nurses with the presence of causes of role ambiguity, it may worsen their adaptability to the workplace, consequently intensifying their feelings of alienation, nurses cannot use their judgment on the job, frequently believe that their work is insignificant, and may lack a sense of accomplishment in the type of work they conduct. So, they become alienated from their work.

This result was congruent with **Zhao et al., (2022)** who showed that nurses' work alienation score was at a medium level. Also, the study finding was supported by **(You & Gao, 2022).** who conducted a study about the Status of work alienation among nurses in China and found that Chinese nurses had a moderate level of work alienation. The study conducted by **Zaki et al., (2023)** demonstrated that more than half of nurses had a moderate level of work alienation. Meanwhile, less than one-fifth of them had a high level of work alienation. Additionally, this finding was supported by **Korkmaz & Torlak, (2024)** who identified moderate levels of work alienation among nurses .

Opposite to this, a study by **Abd-Elrhaman, et al., (2020)** about organizational justice, work alienation, and deviant behaviors among staff nurses found that about three-fifths of staff nurses were alienated level at work. Also, the study by **Mohamed et al., (2022)** showed that the overall nursing staff's perceptions of workplace alienation were significantly high. Furthermore, the current result disagreed with **Alfuqaha, et al., (2023)** who conducted a cross-sectional correlation study about how work alienation influences nurses' readiness for professional development and willingness to learn and mentioned that the work alienation level was increased among nurses.

Concerning the correlation between total role clarity among studied nursing staff and their work alienation, the current study illustrated there was a highly statistically significant negative correlation between the total studied nursing staff's role clarity and their total work alienation (P – value= 002). From the researcher's point of view, Clear nursing roles and responsibilities reduce feelings of alienation among staff by fostering confidence, control, and alignment with organizational goals. This reduces uncertainty, ambiguity, and inconsistencies in expectations, thereby reducing feelings of detachment from work.

This finding was consistence with the study of **Zhang et al., (2023)** who found that clarifying roles at work and being less emotionally drained are effective ways to reduce nurses' feelings of alienation, and that lack of clarity about the job leads to nurses feeling difficult to control their work, feeling that it is meaningless and they have no way to cope with the problem feelings. This leads to an acceleration of their alienation from their work.

Also, the current study result was supported by **Tang et al., (2024) who** examined why and when nurses' role ambiguity leads to their work alienation during the COVID-19 pandemic and reported that role ambiguity was positively correlated with work alienation (r 5 0.19, p < 0.01), and that lacking clarity about nurses' jobs' boundary, objectives and the ways to fulfill the job.

Conclusion

The total role clarity among the highest percentage of the studied nursing staff was at a high level; the majority of them had a moderate level of total work alienation. There was a highly statistically significant negative correlation between the total studied nursing staff's role clarity and their total work alienation (P – value= 002). There was a statistically significant relation between the studied nurses' personal data and their perception of role clarity except for marital status & attendance of previous training courses. Additionally, there was a strong statistically significant relation between nurses' perception of total workplace alienation and their age, educational qualification, years of experience, and department, while it was not related to other personal data.

Recommendations

In view of the above results of the current study, we suggest the following recommendations:

- Focus on clear communication of job expectations, responsibilities, and goals to reduce role ambiguity among nursing staff.
- Implement regular role clarification sessions to ensure nurses have a thorough understanding of their roles in the workplace.
- Develop programs aimed at reducing feelings of work alienation by fostering a supportive and engaging work environment.
- Promote teamwork, social support, and participation in decision-making to decrease alienation and improve job satisfaction.
- Implement mentorship programs that pair younger or less experienced nurses with more seasoned staff members to share knowledge, boost confidence, and clarify roles.
- Ensure that older, more experienced nurses are also engaged in leadership roles and supported in reducing work alienation through recognition and specialized programs.
- Address department-specific issues that may contribute to role ambiguity and alienation by implementing targeted interventions for each department.
- Encourage regular feedback from nurses in different departments to understand unique challenges related to role clarity and work alienation.
- Further research is to examine other personal and organizational factors that might influence role clarity and work alienation, such as leadership style, team dynamics, or organizational culture.

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