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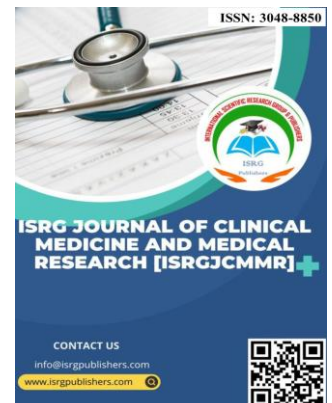
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## Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance

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### Abstract

*This study examined the factors affecting work satisfaction among nurses in selected government hospitals in Northern Palawan and served as the basis for an enhanced work-life balance program. Using a descriptive-correlational design, data were collected from 112 nurses through a researcher-made questionnaire and analyzed using frequency, percentage, weighted mean, Chi-square, and ANOVA. Most respondents were young, female, single, bachelor's degree holders, permanently employed, working 8-hour shifts, and had one to two years of experience. Findings showed that nurses were generally dissatisfied with compensation, benefits, workload, staffing, work environment, and leadership. They reported slight satisfaction with interpersonal relationships and teamwork, and moderate satisfaction with professional growth and recognition. Overall, job satisfaction was rated as slight. Significant relationships were found between work satisfaction and variables such as age, civil status, employment status, years of experience, position, shift, department, patient load, and salary. However, sex and educational attainment showed no significant relationship. The study concluded that despite nurses' commitment to their profession, issues like low compensation, heavy workload, inadequate staffing, and limited career advancement reduce satisfaction. To address these concerns, an enhanced work-life balance program was proposed, focusing on stress management, flexible scheduling, wellness promotion, professional development, leadership support, and employee recognition to improve satisfaction, retention, and well-being.*

**Keywords:** Nurses' work satisfaction, work-life balance, government hospitals

### 1. INTRODUCTION

This chapter presents the background of the study, the statement of the problem, the significance of the study, the scope and delimitation, and the definition of terms.

#### Background of the Study

Nurses play a vital role in maintaining the sustainability of healthcare systems. With the rapid advancement of technology, new opportunities have emerged to support innovative and critical thinking approaches that improve healthcare delivery while

preserving the unique role of nursing (Peltonen & Junger, 2022). As the healthcare system evolves, the nursing workforce continues to expand, allowing nurses to provide care across various settings and address diverse patient needs, including those facing complex social challenges.

Despite these strengths, nurses are confronted with increasing challenges that affect both their profession and the healthcare system. These challenges are largely driven by societal changes that increase healthcare demands, workforce shifts, and policies that influence the number, distribution, and education of nurses (Mbau et al., 2022). In the Philippines, the situation is particularly concerning. It is estimated that around 200,000 to 250,000 nurses have left the profession and are no longer practicing locally (Jackson, 2021). At the same time, approximately 240,000 Filipino nurses are working abroad, making the country one of the largest suppliers of nurses to developed nations (Buchan & Catton, 2020). As a result, the Philippines faces a shortage of about 127,000 nurses, which significantly affects the delivery of healthcare services (Lalu, 2023).

Nurses are also among the most vulnerable healthcare professionals when it comes to workplace stress. They frequently encounter high workloads, psychological pressure, and even workplace violence, which may lead to burnout and secondary traumatic stress (Ertem et al., 2020). These conditions negatively impact their physical, mental, and social well-being. When nurses experience mental distress, their efficiency decreases, which can lead to poorer patient outcomes and reduced quality of care.

Work satisfaction is an important factor in addressing these challenges. It is often defined by positive feelings toward job conditions, fulfillment of personal needs, and a sense of fairness and value in the workplace. In hospital settings, work satisfaction is strongly associated with professional autonomy, supportive relationships with colleagues, and meaningful patient interactions (Penconek et al., 2021). When nurses are satisfied with their jobs, they are more motivated and productive, contributing to better patient care and a healthier work environment.

On the other hand, low work satisfaction has serious consequences. It can negatively affect nurse performance and patient satisfaction, and it is one of the primary reasons why nurses leave their jobs or the profession altogether (Salahat & Al-Hamdan, 2022). Studies have shown that both individual factors, such as burnout and work engagement, and organizational factors, such as adequate support and access to resources, significantly influence nurses' work satisfaction (Coughlin & Squires, 2021). These findings highlight the importance of improving workplace conditions and organizational culture.

The quality of a nurse's work life is closely linked to work satisfaction. Nurses experience a better quality of life when their work allows them to meet personal needs while contributing to organizational goals. This balance not only affects their job performance but also influences their family life and social relationships. Work satisfaction plays a crucial role in career decisions, including staying in a job, transferring to another workplace, or leaving the profession entirely. It also affects absenteeism, burnout, and overall commitment to the organization (Javanmardnejad et al., 2021).

Another important factor is work-life balance. Research shows that when nurses are able to balance their professional and personal responsibilities, their job satisfaction increases (Lee et al., 2022).

Flexible work arrangements and supportive policies help reduce stress and improve overall well-being. When nurses feel that they have control over their schedules, they are more likely to feel satisfied and engaged in their work.

The global nursing shortage and high turnover rates remain major concerns that require immediate attention. Work satisfaction is widely recognized as a key factor influencing nurses' intention to stay in their jobs. Although research findings may vary, there is consistent evidence showing a positive relationship between work satisfaction and retention. Improving work satisfaction, along with increasing salaries—especially in the private sector—can help address workforce shortages and retain skilled nurses in the country (Sapar & Oducado, 2021).

Work engagement also plays a significant role in improving both nurse and patient outcomes. Nurses who are highly engaged in their work are less likely to leave their jobs and are more likely to find their roles personally and professionally fulfilling. Healthcare institutions should focus on enhancing job resources and creating supportive environments to strengthen work engagement and improve the quality of care provided (Acta Medica Philippina, 2023).

This study focused on three government hospitals in Northern Palawan, a setting that presents both challenges and opportunities for examining nurses' work satisfaction. As remote public healthcare institutions, these hospitals provide a meaningful context for understanding the realities faced by nurses. The findings of this study aimed to contribute not only to local improvements but also to broader discussions on healthcare workforce well-being and retention in the Philippines.

Specifically, this study sought to identify and analyze the factors influencing work satisfaction among nurses in these hospitals. Despite efforts to improve working conditions, many nurses continue to experience dissatisfaction, leading to burnout, decreased productivity, and high turnover rates. By identifying the key factors that affect work satisfaction, this research aims to propose strategies that promote better work-life balance, enhance well-being, and ultimately improve nurse retention and quality of patient care.

### **Statement of the Problem**

This study focused on the factors affecting the work satisfaction of nurses employed in government hospitals as a basis for an enhanced work-life balance.

Specifically, this study sought answers to the following questions:

1. What is the demographic profile of the respondents as to:
  - a. age;
  - b. sex;
  - c. civil status;
  - d. highest attained education credential;
  - e. employment status;
  - f. length of current hospital stay;
  - g. years of experience as a nurse;
  - h. current position;
  - i. work shift;

- j. department/unit assigned;
  - k. number of patients handled per shift; and
  - l. salary?
2. What are the factors affecting the work satisfaction of nurses working in government hospitals in relation to:
    - a. compensation;
    - b. benefits;
    - c. workload staffing;
    - d. work environment and resources;
    - e. professional growth and recognition;
    - f. leadership and management;
    - g. interpersonal relationship and teamwork; and
    - h. overall job satisfaction?
  3. Is there any significant relationship between the respondents' demographic profiles and the factors affecting their work satisfaction in government hospitals?
  4. Is there any significant difference in the factors affecting work satisfaction of nurses in government hospitals when grouped according to demographic profile?
  5. Based on the results, what program could be proposed to promote work-life balance among nurses employed in government hospitals?

#### Significance of the Study

The findings of this study will be deemed significant to the following:

**Department of Health** The data gathered can be a reference for reviewing the factors affecting the work satisfaction of nurses working in government hospitals in the real world which will help execute solutions to lessen the burnout rates in nurses; ultimately, this can lead to a more effective and successful healthcare system, benefiting nurses and the communities.

**Palawan State University** This study will add to the existing body of knowledge on work satisfaction, offering a comprehensive analysis of its contributing factors. It will provide a valuable reference for future research, facilitating ongoing studies and the development of new theoretical frameworks.

**Hospital Administration** This research may serve as a baseline for them to be aware of the factors affecting work satisfaction, which may provide solutions to present problem to yield an effective and quality nursing service to patients.

**Nursing Service Office** This study will serve as their baseline in knowing the factors affecting the work satisfaction of nurses in government hospitals. This will serve as their guide on how to retain nurses in their institution and provide a work-life balance to their nurses to render safe and quality care to patients.

**Future researchers** The data gathered will also serve as a reading material and reference for similar studies on factors affecting the work satisfaction of nurses.

#### Scope and Delimitation of the Study

This study examined the factors influencing job satisfaction among nurses employed in three selected Northern Government Hospitals in Palawan: Coron District Hospital (Level 1), Culion Sanitarium and General Hospital (Level 2), and Northern Palawan Provincial Hospital in Taytay (Level 1). The study targeted the total population of staff nurses working in these hospitals. Only staff nurses—regardless of employment status (job order, contract of service, or regular)—who did not hold any administrative or supervisory roles and had at least six months of continuous work experience in their current institution were included. A descriptive quantitative research design was used, incorporating descriptive-evaluative, comparative, and correlational approaches to comprehensively examine the factors affecting the work satisfaction of nurses employed in government hospitals. A purposive sampling technique was applied to ensure that only qualified respondents were selected. Data were collected through a structured survey questionnaire, which was administered using both Google Forms and paper-based formats, depending on the accessibility and preference of the respondents. The study was conducted over a six-month period, from December 2025 to May 2026.

Since the study focused only on staff nurses, individuals holding administrative or leadership positions—such as nursing supervisors, nurse leaders, or nursing officers—were excluded. Nurses with less than six months of experience in their current hospital were also not included, as they were considered to be in the early stage of adjustment and may not have had sufficient exposure to workplace conditions affecting job satisfaction. Although the study aimed to recommend strategies to improve work-life balance based on its findings, it did not include the actual development or implementation of such programs. The execution of any proposed interventions would require coordination with healthcare authorities and institutional stakeholders.

#### Definition of Terms

In order to have a better understanding of the study, the following terms are defined operationally:

**Demographic profile.** A comprehensive description of the characteristics of the study respondents that define their social and statistical group. The demographic profile for this study consists of the following information collected from each respondent through a questionnaire:

- a. Current Position. This refers to the nature of position of the nurse-respondent whether a nurse one or nurse two.
- b. Department/Unit assigned. Refers to the current area of assignment of a nurse in their current employment.
- c. Duty hours. This refers to the working hours in a day whether an eight (8) hour shift or a twelve (12) hour shift.
- d. Employment Status. Refers to the classification of employment of the nurse whether Regular or Permanent, Contractual, and/or Job Order.
- e. Highest Attained Education Credential. Refers to the highest level of education a nurse has completed, such as a bachelor's, master's, or doctorate degree. It represents their formal academic achievement.

- f. Length of current hospital stay This refers to the number of months/years a nurse has rendered in their current employment.
- g. Number of patients handled per shift. This refers to the quantity of nurse patient ratio per shift.
- h. Salary. Refers to the received monthly income of nurses
- i. Work Shift. This refers to the schedule of duties of nurses which includes morning shift, afternoon shift, night shift or rotating shift which includes the morning, afternoon and night shift.
- j. Years of experience as a nurse. This refers to the number of years rendered working as a nurse in the field.

**Factors affecting work satisfaction.** These are the causes that influence job contentment of the nurses.

- a. Benefits. Refer to the non-monetary provisions and support services granted to nurses in addition to their regular salary. These typically include health insurance, paid leaves (such as sick, vacation, and maternity leave), hazard allowances, opportunities for continuing professional development, and retirement or pension plans.
- b. Compensation. Direct monetary payments for nursing services, including base salary, overtime, bonuses, shift differentials.
- c. Interpersonal relationship and teamwork. This refers to the relationship of nurses with their co-workers and their satisfaction with regard to teamwork
- d. Leadership and management. This refers to how the nurses are satisfied as to how the institution implements guiding, supporting, and organizing the nursing team to make sure patients get the best care possible.
- e. Professional growth and recognition. This refers to how their institution promotes and supports nurses for training, education, work recognition and leadership.
- f. Work Environment and Resources. This refers to the condition of the environment and availability of resources in their hospital they are currently employed.
- g. Workload staffing. This refers to the number of duty per shift and the amount of work needed to be done per shift.

**Government Hospitals.** Refer to healthcare facilities managed and funded by the Philippine government. In this study this refers to the three (3) selected government hospitals in northern Palawan namely: Northern Palawan Provincial Hospital in Taytay, a level 1 hospital; Culion Sanitarium and General Hospital, a level 2 hospital in Culion, Coron; and the Coron District Hospital in Coron, Palawan.

**Overall job satisfaction.** This refers to how happy and content nurses feel about their job as a whole.

**Registered Nurses.** Refers to full-time nurses in non-managerial or non-supervisory roles who provide direct patient care.

**Staff nurses.** This refers to the nurses who do not hold any official designation on their current hospital employment and those with more than 6 months of employment.

**Work Satisfaction.** Refers to how fulfilled and happy employees feel with their job, including their responsibilities, work environment, and overall experience at the workplace.

**Work Life-Balance.** Refers to the state of maintaining a healthy separation between work and personal time.

## 2. REVIEW OF RELATED LITERATURE AND STUDIES

This chapter contains a variety of readings from literature written and studies undertaken from both international and domestic settings that are considered relevant to the current topic.

In the study of Ramos (2022) there was a deficit of approximately 106,000 nurses in the Philippines. The epidemic, along with the government's sluggish and disrespectful response to healthcare workers' grievances, has exacerbated the "push factors" that contribute to nurses resigning, such as an elevated nurse-to-patient ratio and inadequate earnings.

According to the data from Culion Sanitarium and General Hospital (2025), there are currently sixty eight (68) staff nurses employed in the institution. In comparison, Northern Palawan Provincial Hospital (2025) reports a total of thirty (30) employed staff nurses, while Coron District Hospital (2025) states that fifteen (15) staff nurses are currently working in their facility.

In relation to this, burnout, a condition characterized by emotional exhaustion, depersonalization, and decreased personal accomplishment, has been studied in many disciplines in health care, including nursing, medicine, and social work (Lowe et al., 2020).

In a study related to work performance, Postrado and Matildo (2023) conducted research that ascertained the work performance, personnel engagement, and demographic profile of employees in a Philippine school. It is revealed that age and the duration of service are connected to work performance and that there is a substantial association between educational achievement and teacher employment status. Moreover, a strong correlation exists between the degree of work performance and the amount of employee engagement.

Sociodemographic factors such as being younger, single marital status, and having less professional experience in the intensive care unit (ICU) were associated with burnout levels. Age was negatively correlated with EE, and the effort-reward imbalance was positively correlated with EE. For nursing professionals, for each year of work that they spent in the ICU, there was an increase in the levels of low PA. Other related factors of burnout were a lack of time for physical exercise, work in a high-quality hospital, the presence of comorbidities, and years of experience (Lowe, M. A., Prapanjaroensin, A., Bakitas, M. A., Hites, L., Loan, L. A., Raju, D., & Patrician, P. A., 2020).

The study of Lee et al. (2022) shows that work-life balance is a key factor in job satisfaction across various industries. Employees who successfully balance their work and personal lives tend to be more content in their roles, which positively impacts overall

organizational performance. Work-life balance programs enable employees to manage their professional and personal responsibilities more efficiently, lowering stress levels and increasing engagement. Offering flexible work schedules and giving employees greater control over their time has been linked to higher job satisfaction. As a result, organizations are encouraged to develop work-life balance policies that align with their industry and workforce requirements.

Job satisfaction among nurses is a critical factor influencing their performance, retention, and overall well-being. Various studies have explored the determinants of job satisfaction in nursing, identifying multiple intrinsic and extrinsic factors.

**Work Environment.** The work environment plays a significant role in nurse job satisfaction. A positive work setting, characterized by adequate staffing, supportive leadership, and a collaborative team, enhances job satisfaction (Laschinger et al., 2016). Conversely, a stressful work environment with excessive workload and poor interpersonal relationships can lead to dissatisfaction and burnout (Aiken et al., 2018).

**Compensation and Benefits.** Salary and benefits are crucial factors influencing job satisfaction. According to Blegen et al. (2017), competitive wages, health benefits, and retirement plans significantly contribute to nurses' contentment in their roles. Insufficient compensation, on the other hand, is linked to high turnover rates and reduced job morale (Hayes et al., 2019).

**Career Development and Opportunities.** Nurses who have access to professional development opportunities, including training and career advancement, report higher levels of job satisfaction. Studies suggest that organizations investing in continuous education and skill development retain more satisfied nursing staff (Khan et al., 2020).

**Work-Life Balance.** Work-life balance is another critical factor affecting nurse job satisfaction. Flexible scheduling, manageable working hours, and support for personal time contribute positively to job fulfillment (Liu et al., 2019). Nurses experiencing work-life imbalance are more prone to job stress and decreased motivation (Dall'Ora et al., 2020).

**Recognition and Reward System.** Recognition for good performance fosters motivation and job satisfaction among nurses. Studies indicate that appreciation from supervisors, peers, and patients increases job commitment and reduces job-related stress (Gandi et al., 2016). In contrast, a lack of recognition can lead to frustration and disengagement from work.

**Patient-Nurse Relationships.** Positive interactions with patients and their families contribute to nurses' sense of purpose and job satisfaction. Empirical research suggests that when nurses feel their efforts are appreciated by patients, they report higher job fulfillment (Lu et al., 2018). However, difficult patient interactions and emotional strain can negatively impact satisfaction levels. Aiken, L. H., et al. (2018). Rodriguez-Fernandez et al. (2021) identified stress, burnout, and turnover intention as significant issues needing management. They developed a conceptual framework of organizational commitment aimed at enhancing performance and health quality. The primary goal is to create effective management policies to retain employees by fostering commitment and job satisfaction. They stress the importance of a staff involvement model for hospital managers that focuses on relationships with "patients" rather than "customers" by

maintaining a positive and strong work environment. To eliminate sources of uncertainty and tension in healthcare duties, they advocate for innovative approaches to simple work design and recommend training initiatives.

In the study of Diehl et al. (2021) where a total of 51, 406 registered nurses in 311 Chinese cities completed the questionnaire, fifty per cent of the participants suffered burnout; 33.8% of nurses had high scores on emotional exhaustion, 66.6% had high scores on depersonalization and 93.5% had low scores on personal accomplishment; 16.2% reported a high level of job satisfaction, only 0.4% was satisfied with their jobs and 70.7% intended to leave their jobs. Marital status, educational level, income, and years of working experience affected job burnout. Nurses with a high level of burnout were more likely to have a high degree of job dissatisfaction and intend to leave their jobs.

Consequently, "Burnout experience leads to job dissatisfaction, prevention of professionalism, patient dissatisfaction, reduced nurse productivity, low quality of life and low quality of care" (pp 6- 9). "Meanwhile, studies assert that burnout contributes to the problem of nurse scarcity." (p 10). "The effect of burnout not only is limited to the nurses experiencing it but also filters thru their patients, institutions, affiliated society, family and friends." (p11) In addition, It was determined that the nurses with 5 years and below work experience compared to the nurses with 6-10 years of work experience had scored higher in "Emotional Burnout" and "Desensitization" subscales. (Diehl et al. 2021) Parallel to these findings, Ertem quoting Capa et al. (2020) Moreover, he stated in the same study that the working environment factor has a direct impact on the peace and success of the people.

In a study aimed at investigating the underlying reasons of psychological stress in burnout from a nurse standpoint, problems in communication with doctors (57%), patient relatives (52%), nursing management (49%), and lastly, patients (40%) were enumerated in a descending order of magnitude (25). Another study, having reported "lack of respect" as the leading source of stress in nursing, enumerated an array of subordinate factors such as complaints of patients and their families, attitudes of patients under the influence of alcohol and pace of work, accountable for increased emotional burnout among nursing staff.

The impact of nurse "poaching" on the Philippines and its healthcare system was discussed in a news article. It highlighted the significant nurse shortage in the Philippines, which was estimated to be over 120,000 and possibly as high as 350,000. This shortage presents substantial challenges for the country in meeting its healthcare needs, resulting in difficulties in providing healthcare services and the potential closure of some hospitals. Additionally, the article examined the effects of nurse "poaching" on the recruitment of nurses in other countries and suggested measures to address the nurse shortage and protect the nurse workforce in vulnerable countries (Devereux (2023).

Zamel et al. (2020) emphasized that the retention of nurses is a vital concern for any organization. An organization's ability to provide high-quality treatment is affected by high nurse turnover. Their research findings indicate that the main aspects that affect a nurse's decision to stay or quit their employment are job satisfaction, organizational commitment, work-life quality, work environment, leadership, mistreatment, motivations, considerations in family, and security in work.

In the study of Xie (2021). Burnout among newly graduated nurses was divided into three dimensions based on the Maslach Burnout Inventory Scale. Their findings provided new evidence that newly graduated nurses had average levels of emotional exhaustion and depersonalization and low levels of personal accomplishment. Job satisfaction, professional rank, hospital level, gender, professional values, negative emotions and core competence were predictors of job burnout among newly graduate nursing in China. Nursing managers should pay attention to burnout management, standardize training about professional values, core competence and coping mechanisms and promote mental health and job satisfaction among newly graduated nurses.

Workforce studies often identify burnout as a nursing 'outcome'. Yet, burnout itself—what constitutes it, what factors contribute to its development, and what the wider consequences are for individuals, organizations, or their patients—is rarely made explicit. The patterns identified by these studies consistently show that adverse job characteristics—high workload, low staffing levels, long shifts, and low control—are associated with burnout in nursing. The potential consequences for staff and patients are severe. The literature on burnout in nursing partly supports Maslach's theory, but some areas are insufficiently tested, in particular, the association between burnout and turnover, and relationships were found for some MBI (Maslach Burnout Inventory) dimensions only. (Dall'Ora et al., 2020).

Occupational burnout is related to individual, interpersonal and organizational feelings. There is an interrelationship between personality traits, where a higher level of occupational burnout was found among nurses with a pessimistic attitude. Higher life satisfaction and an optimistic attitude to life are key factors that positively affect occupational burnout among nurses. Greater burnout is observed in nurses working in inpatient health care, shift nurses, and those with less than 20 hours of free time per week. Workplace and life orientation are identified as crucial predictors of higher burnout among nurse professionals. Health programs should be implemented to identify and eliminate burnout through mental health support, improved communication skills, optimized teamwork, and evidence-based interventions such as yoga, meditation, mindfulness, and motivational training. It would be helpful for policymakers, managers, and researchers to implement nationwide solutions and programs for burnout prevention. These programs can provide organizations with a systems-based and proactive method of prevention, as well as a holistic and effective way to manage burnout in nursing professionals (Zborowska et al., 2021).

Workload, professional support, training arrangement, and working environment found main factors that influence job satisfaction. It is evident from the study that the nurses working in the public sectors are more satisfied than in the private sector (Ullah et al., 2018).

The study of Ullah et al. (2018) identified three key themes affecting nurses' job satisfaction and dissatisfaction: (1) spiritual fulfillment, (2) workplace conditions, and (3) motivation. Nurses found job satisfaction through spiritual fulfillment, which was enhanced by their involvement in patient care. Workplace conditions played a significant role in dissatisfaction, with factors such as team cohesion, benefits and rewards, working conditions, inadequate medical resources, unclear job responsibilities, perceptions of patients and doctors, ineffective leadership, and workplace discrimination contributing to dissatisfaction. In terms of motivation, job satisfaction was influenced by task

requirements, opportunities for professional growth, and limited clinical autonomy.

Emotional exhaustion (EE) was notably higher among individuals with moderate life satisfaction (SWLS). Additionally, EE was significantly more pronounced in pessimists and those with a neutral outlook compared to optimists (LOT-R). Housing conditions and family-related issues were key factors influencing depersonalization (DEP). A lower sense of personal accomplishment (PA) was more prevalent among those with a bachelor's degree than those with a master's degree. Furthermore, reduced PA was significantly greater in individuals with low life satisfaction compared to those with moderate life satisfaction. Life satisfaction and life orientation were important factors distinguishing job dissatisfaction among health-related and psychological variables. Moreover, burnout was linked to individual, interpersonal, and organizational factors. A connection was observed between personality traits, with higher levels of occupational burnout occurring among nurses with a pessimistic outlook. To address burnout, health programs should be introduced to provide mental health support, enhance communication skills, strengthen teamwork, and implement evidence-based strategies. (Zborowska et al., 2021).

Enhancing autonomy, decision-making authority, social support, team cohesion, and stress-reduction strategies can contribute to greater job satisfaction among front-line nurse managers. Innovative approaches, including co-management and the use of specialized administrative and electronic resources, require further exploration. Encouraging prosocial group behaviors, team-building initiatives, coaching, and wellness programs may strengthen social support, team cohesion, and overall well-being. Additionally, investigating factors influencing nurse managers' job satisfaction beyond acute care settings could offer deeper insights into the impact of the practice environment on their overall job fulfillment. (Penconek et al., 2021)

Moreover, in the study of Galanis et al. (2023), 91.1% of nurses experienced high levels of burnout, while the respective percentage for the other Health Care Workers was 79.9%. Nurses' satisfaction was lower than other HCWs. In particular, 61.0% of nurses experienced low levels of satisfaction, while the respective percentage for the other HCWs was 38.8%. Multivariable analysis identified that nurses, HCWs with an MSc/PhD diploma, shift workers, and those who considered their workplace as understaffed had higher burnout score and lower satisfaction score. Results showed that the nursing profession was an independent factor of burnout and satisfaction. Several other demographic and job characteristics affected burnout and satisfaction. Policy makers, organizations, and managers should adopt appropriate interventions to improve work conditions.

A total of 193 registered nurses (RNs) participated in the study, reporting moderate satisfaction with their quality of work life (QNWL) and overall job satisfaction. QNWL demonstrated a positive correlation with job satisfaction ( $r = 0.579$ ,  $p = 0.000$ ) and a negative correlation with intent to leave ( $r_s = -0.204$ ,  $p = 0.002$ ). Additionally, job satisfaction was negatively associated with intent to leave ( $r_s = -0.174$ ,  $p = 0.008$ ). Sociodemographic and work-related factors, including hospital type, sex, education level, and salary, showed significant correlations and differences with at least one of the key variables. These findings can help healthcare managers and policymakers develop effective strategies to enhance RNs' QNWL and job satisfaction. Improving these factors may

lead to better individual and organizational performance, improved work and home environments, greater nurse commitment, and increased retention. Further research is recommended to establish effective measures for improving QNWL and job satisfaction among RNs. (Salahat et al., 2022).

In the study of Alzailai, et al. (2021), three categories of factors were found to be associated with burnout and nursing job satisfaction: intrapersonal, interpersonal, and extra-personal factors. The review highlighted important findings for policy and nursing practice that can inform future studies and the development of burnout management strategies.

The findings of Pérez Fuentes, et al. (2021) revealed that violence and bullying from coworkers, patients, family members, or others accompanying the patient had a direct negative impact on both internal and external job satisfaction. This effect was partially mediated by perceived social support. These results highlighted the importance of strengthening a robust healthcare support network to enhance nurses' job satisfaction .

In the study of Hwang, W. J., & Park, E. H. (2022). Their model demonstrated a good fit with the data ( $\chi^2 = 96.420$ , GFI = 0.966, CFI = 0.956, RMSEA = 0.084). Display rules, self-efficacy, job autonomy, and job stress explained 20.5% of the variance in surface acting. Meanwhile, self-efficacy, emotional intelligence, job autonomy, and job stress accounted for 23.3% of the variance in deep acting. Job stress, self-efficacy, job autonomy, surface acting, and deep acting collectively explained 45.0% of the variance in job satisfaction. Additionally, self-efficacy, job autonomy, emotional intelligence, and deep acting contributed to 43.3% of the variance in job performance. These findings confirmed that display rules, emotional intelligence, job stress, self-efficacy, and job autonomy are key factors in reducing nurses' emotional labor while enhancing job satisfaction and performance. The results support the development and implementation of targeted interventions aimed at minimizing emotional labor and improving both job satisfaction and performance among nurses.

Nurses and midwives experience significantly higher mental workload compared to administrative workers, with nurses' workload also differing significantly from that of midwives ( $P < 0.001$ ). Additionally, nurses and midwives reported considerably greater job satisfaction than administrative workers ( $P < 0.001$ ). Both groups also had higher levels of job control than administrative workers ( $P < 0.001$  for nurses and  $P = 0.002$  for midwives). According to the proposed model, mental workload had a significant negative correlation with job satisfaction ( $r = -0.22$ ). However, when job control was factored in, the negative relationship between workload and job satisfaction was slightly reduced ( $r = -0.19$ ,  $P < 0.001$ ). This pattern remained consistent across all three professional groups. The study concluded that mental workload negatively affects both job satisfaction and job control. Strengthening job control is crucial for improving working conditions among healthcare professionals (Rostami et al., 2021).

In the study of Maghsoud et al. (2022) They mentioned that workload affects the quality of the provided nursing care by affecting implicit rationing of nursing care, job satisfaction, and emotional exhaustion. Nurse managers need to acknowledge the importance of the quality of nursing care and its related factors. Regular supervision of these factors and provision of best related strategies will ultimately lead to improved quality of nursing care.

The determinants of job satisfaction were categorized into 6 themes: personal characteristics, job demands, employment services, working conditions, work relationships, and organizational culture. The main determinants for job retention were job satisfaction, career development and work-life balance. European and non-European countries showed similarities and differences in determinants influencing retention. Identifying these factors supports the development of multifactorial interventions, which can aid the formulation of medical strategies and help to maximize retention. (De Vries et al., 2023).

An analysis of survey data from interviews with 428 participating nurses revealed that their attitudes toward their behavior had a significant positive impact on both burnout and overall job satisfaction. Additionally, subjective norms and perceived behavioral control were significantly associated with increased burnout. Burnout, in turn, had a significant negative effect on nurses' citizenship behavior, whereas overall job satisfaction had a significant positive influence on their citizenship behavior. Furthermore, burnout partially mediated the relationship between nurses planned behavior and citizenship behavior. Similarly, overall job satisfaction partially mediated the link between subjective norms, perceived behavioral control, and citizenship behavior. (Torlak et al., 2021).

In another study, that of Hu et al. (2022), hope ( $r = -0.227$ ,  $p < 0.001$ ) and career identity ( $r = -0.342$ ,  $p < 0.001$ ) showed a negative correlation with turnover intention. Job satisfaction fully mediated the relationships between hope and career identity, with turnover intention ( $\beta_1 = -0.09$ ,  $\beta_2 = -0.33$ ). This suggested that job satisfaction plays a crucial role in linking career identity and hope to turnover intention. To improve job satisfaction and reduce turnover intention, effective strategies should focus on strengthening nurses' sense of hope and career identity. Providing greater support, fostering a sense of purpose, and organizing mindfulness activities that promote positive emotions can be beneficial. Additionally, nursing education programs should emphasize career identity and nursing values to better prepare students for their professional roles.

The findings of Sesen et al. (2022) highlighted that Certified Nursing Assistants' (CNAs) perception of training positively influences their job satisfaction and reduces workplace stress. Additionally, workplace stress mediates the relationship between their perception of training and job satisfaction. The results suggested that while motivation for and support of training contribute to job satisfaction, access to and benefits of training do not have a significant impact. Workplace stress plays a key mediating role in this relationship. This study confirms that CNAs' perception of training and job-related stress influences job satisfaction. Furthermore, workplace stress mediates the connection between training and job satisfaction, aligning with the principles of social exchange theory.

In the study of Cao et al. (2023), nearly half of the healthcare workers in China's tertiary public hospitals experienced verbal violence in the past year, leading to strong emotional responses. Exposure to verbal violence significantly predicted higher emotional exhaustion ( $r = 0.20$ ,  $p < 0.01$ ) while negatively impacting job satisfaction ( $r = -0.17$ ,  $p < 0.01$ ) and work engagement ( $r = -0.18$ ,  $p < 0.01$ ). However, no significant association was found between verbal violence and turnover intention. Emotional exhaustion partially mediated the relationship between verbal violence and both job satisfaction and work

engagement. The findings highlighted the high prevalence of workplace verbal violence in China's tertiary public hospitals, emphasizing the need for urgent intervention. Their study aimed to shed light on the organizational-level impact of verbal violence on healthcare workers and suggested implementing training programs to reduce its occurrence and mitigate its effects

The findings highlighted the relationships between the proposed hypotheses. Interestingly, all three job resources showed a positive correlation with work-life balance (WLB), which, in turn, was positively linked to job satisfaction among nursing professionals during the pandemic. However, only WLB partially mediated the relationship between two specific job resources—job autonomy and supervisor support—and job satisfaction. Their study explored the perceptions of Indian nursing professionals regarding job resources, WLB, and job satisfaction during the COVID-19 pandemic. It aimed to analyze these relationships in the context of nurses working tirelessly, applying their expertise with caution, and efficiently managing scarce resources to ensure quality patient care. (Rashmi, & Kataria, 2023).

The study of Specchia, (2021) aimed to examine and analyze the existing knowledge on the relationship between leadership styles and nurses' job satisfaction. A systematic review was conducted using PubMed, CINAHL, and Embase, applying inclusion criteria that focused on the impact of various leadership styles on nurses' job satisfaction in secondary care settings, with full-text availability in English or Italian. Out of 11,813 initial titles, 12 studies were selected, with 88% demonstrating a significant correlation between leadership style and job satisfaction.

Among the leadership styles, transformational leadership showed the strongest positive correlation with job satisfaction, followed by authentic, resonant, and servant leadership. Conversely, passive-avoidant and laissez-faire styles were consistently associated with negative job satisfaction. Transactional leadership was the only style that exhibited both positive and negative correlations. In the face of ongoing challenges, healthcare leaders must not only enhance technical and professional competencies but also prioritize strategies that boost staff satisfaction and morale. Identifying and addressing gaps in leadership knowledge is crucial for improving nurses' job satisfaction, which in turn can positively influence healthcare quality indicators.

Nurses working in teaching hospitals in Oman perceived their work environment as highly favorable. The work environment was both directly and indirectly linked to nurse-assessed quality of care, adverse patient events, and job satisfaction, with interprofessional collaboration playing a key role in these associations. The study's findings suggested that strengthening the nursing work environment could serve as an effective strategy to promote interprofessional collaboration, enhance job satisfaction, and improve patient safety outcomes. To achieve better patient safety and job satisfaction among nurses, organizations should focus on improving working conditions and fostering collaboration through supportive leadership, evidence-based approaches, hospital accreditation/certification, and relevant workplace policies. (Labrague et al., 2022)

This study provided evidence that increasing the level of job satisfaction among nurses will increase their levels of organizational citizenship behavior. Therefore, healthcare organizations must focus on certain interventions that could increase nurses' jobs satisfaction, such as providing adequate

remuneration, increasing the capacity of nursing schools, emphasizing psychological support and participative leadership, and improving the community's perception of the nursing profession. (Al-Ahmadi et al., 2022).

Zeng, et al. (2022) examined the impact of intrinsic and extrinsic work motivation on nurses' work engagement in long-term care (LTC) facilities, a random selection of 1,200 facilities was made from 6,055 LTC facilities in eastern Japan. Two nurses from each facility participated by completing a newly developed self-report questionnaire designed to evaluate intrinsic and extrinsic motivation, work engagement, and job satisfaction. A multiple regression analysis of 561 valid responses revealed that intrinsic work motivation, job satisfaction, and age had a significant positive influence on work engagement, while extrinsic work motivation showed no significant effect. However, half of the nurses reported working due to extrinsic motivation, which may contribute to the high turnover rate in LTC facilities. These findings underscored the importance of fostering intrinsic motivation to enhance nurses' work engagement. Further research is needed to explore effective strategies for strengthening intrinsic motivation among nurses in LTC settings.

### Synthesis

The job satisfaction among nurses as a complex and multidimensional phenomenon shaped by the interaction of individual, organizational, and systemic factors. Rather than being influenced by a single variable, job satisfaction emerges from the combined effects of working conditions, personal characteristics, and broader healthcare system issues. Across studies, a consistent pattern shows that structural challenges such as workforce shortages, high patient demands, and limited resources create an environment that predisposes nurses to dissatisfaction and burnout.

A key analytical insight is the central role of burnout as both an outcome and a contributing factor to low job satisfaction. Burnout does not occur in isolation; it develops from prolonged exposure to stressors such as excessive workload, inadequate staffing, and lack of organizational support. In turn, burnout leads to reduced work performance, decreased motivation, and a higher intention to leave the profession. This cyclical relationship suggests that burnout functions not only as a consequence of poor working conditions but also as a mechanism that perpetuates workforce instability.

The literature further indicates that the work environment acts as a mediating factor between job demands and job satisfaction. Supportive leadership, effective communication, and collaborative workplace relationships can buffer the negative effects of high workload and stress. Conversely, environments characterized by poor leadership, lack of recognition, and interpersonal conflict amplify dissatisfaction and disengagement. This highlights that organizational culture is not merely a background condition but a critical determinant that can either mitigate or intensify workplace stressors.

Another important theme is the interaction between extrinsic and intrinsic motivators. While compensation and benefits remain essential in influencing job satisfaction and retention, they are not sufficient on their own. Intrinsic factors—such as professional growth, sense of purpose, autonomy, and meaningful patient relationships—play an equally significant role in shaping nurses' attitudes toward their work. The literature suggests that when intrinsic and extrinsic factors are aligned, higher levels of job satisfaction and engagement are achieved. However, when these

factors are imbalanced, dissatisfaction and turnover intentions increase.

Work-life balance also emerges as a significant moderating variable. It influences how nurses experience job demands and manage stress. Nurses who have access to flexible schedules and supportive policies are better able to cope with workplace pressures, resulting in higher satisfaction and well-being. In contrast, poor work-life balance exacerbates fatigue and emotional exhaustion, reinforcing the cycle of burnout and dissatisfaction.

Additionally, individual characteristics such as age, experience, and personal outlook contribute to variations in job satisfaction. Less experienced nurses and those with limited coping mechanisms are more vulnerable to stress and burnout. However, these individual factors are often shaped by organizational conditions, suggesting that personal resilience alone cannot compensate for systemic deficiencies.

Generally, improving job satisfaction requires a holistic and systems-based approach. Interventions must address not only immediate workplace conditions but also broader organizational policies and workforce issues. Enhancing leadership practices, ensuring adequate staffing, promoting professional development, and supporting work-life balance are critical strategies. Without addressing these interconnected factors, efforts to improve nurse retention and performance are likely to remain limited.

### **Theoretical Framework**

This study was anchored on the Nursing Work Life Model (NWLM), which provides a comprehensive framework for examining how organizational and unit-level factors shape nurses' work experiences and outcomes. The model posits that workplace conditions do not operate in isolation; rather, they interact to either exacerbate or mitigate burnout, ultimately influencing job satisfaction, retention, and quality of care. Grounded in organizational and nursing theories, the NWLM conceptualizes the work environment as a critical determinant of both nurse well-being and patient outcomes. It underscores that improvements in structural and relational aspects of the workplace can lead to more sustainable and effective healthcare systems.

Central to the NWLM are five interrelated domains: workload, control and autonomy, nurse-physician relationships, leadership support, and organizational support. These domains collectively explain how the practice environment shapes nurses' professional experiences. Excessive workload and inadequate resources increase stress and contribute to burnout, whereas manageable assignments promote efficiency and satisfaction. Similarly, autonomy in decision-making enhances professional identity and accountability, leading to improved job satisfaction and patient outcomes. Collaborative nurse-physician relationships further strengthen communication and teamwork, which are essential for safe and effective care delivery. Leadership support plays a pivotal role in fostering a positive organizational climate, as effective leaders provide guidance, recognition, and emotional support. Lastly, organizational support—including policies, professional development opportunities, and work-life balance initiatives—serves as a structural mechanism that sustains nurse engagement and retention. Analytically, the NWLM demonstrates that job satisfaction is not merely an individual response but a systemic outcome shaped by interconnected organizational conditions.

To complement this systems-oriented perspective, the study also integrated Orem's Self-Care Deficit Nursing Theory (SCDNT),

which emphasizes the importance of self-care in maintaining health and well-being. While traditionally applied to patient care, its relevance extends to nurses themselves. The theory suggests that when individuals are supported in meeting their self-care needs, they are better able to function effectively. In the context of nursing, self-care practices such as mindfulness, stress management, and health-promoting behaviors enhance resilience and self-efficacy. This perspective provides a critical link between personal well-being and professional performance, suggesting that nurses' ability to care for others is closely tied to their capacity to care for themselves. Thus, self-care operates as both a protective and enabling factor against burnout.

Further reinforcing the relational dimension of nursing practice, Jean Watson's Theory of Human Caring highlights the significance of interpersonal relationships, emotional connections, and holistic care. Watson's framework expands the understanding of job satisfaction by incorporating the emotional and spiritual aspects of nursing. It posits that caring relationships—both with patients and within the healthcare team—contribute to a deeper sense of meaning and fulfillment in work. At the same time, the theory acknowledges that nurses must maintain balance by addressing their own physical, emotional, and spiritual needs. From an analytical standpoint, this theory situates job satisfaction within a broader humanistic context, where well-being and professional fulfillment are achieved through harmony between self-care and caring for others.

In addition, Maslow's Hierarchy of Needs provides a motivational lens for understanding nurse satisfaction and retention. The framework suggests that individuals are driven by the fulfillment of hierarchical needs, ranging from basic physiological requirements to self-actualization. In the nursing context, these needs manifest as adequate compensation and working conditions (physiological), job security and safe environments (safety), supportive relationships (belongingness), recognition and professional respect (esteem), and opportunities for autonomy and career fulfillment (self-actualization). The theory offers an analytical structure for examining how unmet needs at any level can hinder motivation and satisfaction. It further implies that higher levels of professional fulfillment can only be achieved when foundational needs are adequately addressed.

Lastly, Herzberg's Two-Factor Theory provides a complementary perspective by distinguishing between factors that prevent dissatisfaction (hygiene factors) and those that actively promote satisfaction (motivators). In nursing, hygiene factors such as salary, working conditions, and institutional policies are necessary to minimize dissatisfaction but are insufficient to generate true engagement. Motivators, including recognition, professional growth, and meaningful work, are essential in fostering intrinsic satisfaction and commitment. This distinction is analytically significant, as it explains why improvements in external conditions alone may not lead to sustained job satisfaction unless accompanied by opportunities for personal and professional fulfillment.

Taken together, these theoretical frameworks offer a multidimensional understanding of nurses' job satisfaction. The NWLM emphasizes systemic and organizational influences, while Orem's, Watson's, Maslow's, and Herzberg's theories collectively highlight the psychological, relational, and motivational dimensions of the nursing experience. Integrating these perspectives allows for a more comprehensive analysis,

recognizing that job satisfaction is shaped by the dynamic interplay of workplace structures, individual well-being, interpersonal relationships, and intrinsic motivation. This integrated approach provides a strong foundation for examining the factors influencing nurses' work satisfaction and for developing holistic and sustainable interventions.

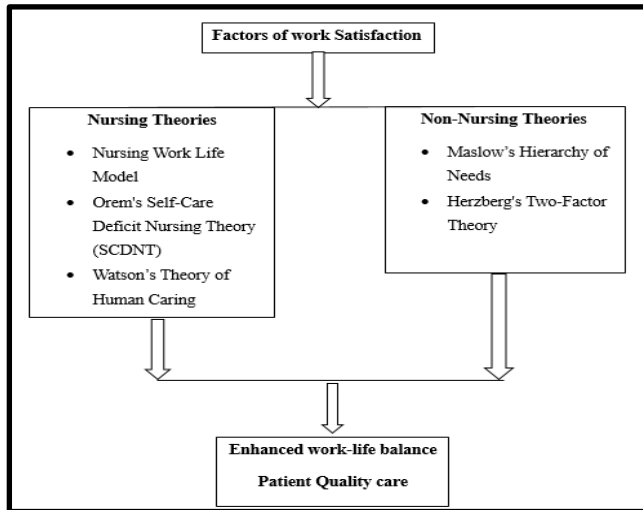


Figure 1. Theoretical Framework

**Conceptual Framework**

A positive work environment—characterized by sufficient staffing levels, supportive leadership, and strong team collaboration—greatly contributes to work satisfaction. Additionally, maintaining a healthy work-life balance is recognized as a key factor influencing work satisfaction across various industries. Employees who successfully manage both professional and personal responsibilities often experience greater fulfillment in their roles, which in turn enhances organizational performance. Initiatives that promote work-life balance enable employees to manage their tasks more effectively, reduce stress levels, and boost engagement. Offering flexible work schedules and giving employees more control over their time have been shown to improve work satisfaction. As such, organizations are encouraged to implement work-life balance policies that are specifically tailored to their industry and workforce.

**Research Paradigm**

| INPUT  | PROCESS  | OUTPUT  |
|--|--|---|
| <p>Demographic Profile:</p> <ol style="list-style-type: none"> <li>age,</li> <li>sex,</li> <li>civil status,</li> <li>highest attained education credential,</li> <li>Employment status</li> <li>Length of current hospital stay</li> <li>Years of experience as a nurse</li> <li>Current position</li> <li>Work shift</li> <li>Department/Unit Assigned</li> <li>Number of patients handled per shift</li> <li>salary</li> </ol> <p>Factors affecting work satisfaction of nurses working in government hospitals in relation to:</p> <ol style="list-style-type: none"> <li>compensation</li> <li>benefits</li> <li>workload Staffing</li> <li>work environment and resources</li> <li>professional growth and recognition</li> <li>leadership and management;</li> <li>interpersonal relationship and teamwork</li> <li>overall job satisfaction</li> </ol> | <ol style="list-style-type: none"> <li>Formulation of survey questions</li> <li>Validation of the survey questionnaire</li> <li>Pilot testing and final validation</li> <li>Administration of the survey questionnaire to the respondents.</li> <li>Statistical analysis of data and interpretation of results.</li> </ol> | <p>Enhanced Work-life balance – Nursing Work-life balance Program</p> |

Figure 2. Research Paradigm

Figure 2 shows the relationships of the variables studied using the Input-Process-Output (IPO) model. The variables in the Input involved the respondents' socio-demographic profile and the factors affecting their satisfaction in their current work in the government hospitals in northern Palawan. The variables in the Process include: formulation, validation and pilot testing of the validated questionnaire; final validation of the questionnaire; administration of the said instrument; statistical analysis of data and interpretation of the results. Finally, the Output of the study was a proposal for an enhanced work-life balance that is based on the findings of the study.

### 3. METHODOLOGY

This chapter presents the research design, locale, participants, instrumentation, data collection and analysis procedure, and ethical considerations that the study utilized.

#### Research Design

This study used a descriptive quantitative research design, incorporating descriptive evaluative, comparative, and correlational methods to comprehensively examine the factors influencing nurses' work satisfaction in government hospitals.

The descriptive evaluative method was used to describe and assess the current status of nurse work satisfaction based on the perceptions and experiences of the respondents. This approach focuses on capturing subjective insights without attempting to compare groups or establish relationships. It enables the researcher to evaluate the extent and nature of the factors affecting nurses' satisfaction in their present work environments.

The descriptive comparative method was applied to determine whether significant differences exist in work satisfaction factors when respondents are grouped according to their demographic profiles (e.g., age, sex, years of experience, department). This allows for the identification of group-specific trends and variations that may impact work satisfaction.

Meanwhile, the descriptive correlational method was also used to explore the relationships between the nurses' demographic characteristics and the factors influencing their work satisfaction. This approach does not imply causation but seeks to identify patterns of association that may provide meaningful insights for workforce management.

Ultimately, this study aimed to serve as a reference for healthcare institutions in developing and implementing strategies that promote positive work-life balance, enhance nurse retention, and improve overall job satisfaction among nursing professionals in the public health sector.

#### Locale of the Study

This study was conducted at three (3) selected government hospitals located in Northern Palawan, Philippines. These include Culion Sanitarium and General Hospital, a Department of Health (DOH)-designated Level 2 facility located in the municipality of Culion island. It has a bed capacity of 200, and offers a wider range of medical services. Next, is in Coron District Hospital, a Level 1 facility located in Coron Island, Palawan. It has a bed capacity of twenty-five (25) and mainly provides basic healthcare services. The third is Northern Palawan Provincial Hospital, which is also a Level 1 hospital and has a bed capacity of forty (40) and is located in Sitio Arado II, in the municipality of Taytay.

#### Data Collection Strategy

Before data collection, the study completed a thorough approval process, which included the panel's approval of the thesis concept, a validation review, and the forthcoming certification from the Don Mariano Marcos Memorial State University Ethics Review Committee. After securing ethical certification, the researcher formally requested approval from the Graduate School Dean to conduct the study. The researcher ensured that the study adheres to the ethical standards and guidelines prescribed by the university.

Following this, the researcher contacted the medical directors of the three selected government hospitals in Northern Palawan—Culion Sanitarium and General Hospital, Coron District Hospital, and Northern Palawan Provincial Hospital, by email and through personal visits. Once granted by the medical directors, courtesy visits were made to the chief nurses, chief nursing assistants, and nursing supervisors on duty. Data gathering commenced after all necessary approvals and ethical clearances have been obtained. The data collection period was from February 2026 to March 2026.

Informed consent was obtained from all participants following a thorough explanation of the study's objectives, procedures, potential risks and benefits, and their right to voluntarily withdraw at any stage without penalty. The researcher coordinated the data collection schedule in consideration of the participants' availability and professional commitments to ensure minimal disruption. This study utilized both pen-and-paper and online Google Forms as data collection tools to offer flexibility and accommodate the preferences and availability of the respondents. Google Forms, a web-based application, was used to allow participants to access and complete the questionnaire using a computer, laptop, or mobile device at any time and from any location with an internet connection. It is widely used in education and research for purposes such as online examinations, gathering feedback, student registration, and attendance tracking (Nawir, 2022). In this study, the chief nurses or nursing supervisors of the participating hospitals were requested to share the Google Form link through their respective group chats, enabling respondents to participate at their convenience. For those who prefer the traditional method, printed questionnaires were distributed personally. After data gathering the questionnaires collected were placed in sealed envelopes to ensure confidentiality and secure handling of data. All respondents were encouraged to answer truthfully and assured that their responses will remain confidential. They are informed that the results of the study will not affect their performance evaluations nor reflect on the reputation of the government hospitals involved.

The research instrument is a researcher-developed survey questionnaire, which was designed based on a thorough review of relevant literature. The instrument consists of two parts: demographic information and items related to the factors affecting nurses' job satisfaction. Respondents were informed that answering the questionnaire will require approximately ten (10) to fifteen (15) minutes of their time. After data is collected, the data is organized and encoded using Microsoft Excel. The platform's accessibility, versatile features, and collaborative capabilities will enable the researcher to manage and compile the quantitative data efficiently. After the data is encoded, it is forwarded to a qualified statistician for comprehensive analysis and interpretation.

#### Sampling Procedure

This study utilized a purposive sampling method, which involves the deliberate selection of participants based on specific criteria rather than employing a predetermined sampling frame (Robinson, 2024). The sample consists exclusively of staff nurses who do not

hold official leadership or managerial positions and who have at least six months of continuous experience in their current hospital setting regardless of their employment status. Nursing supervisors, managers, and other nursing leaders are excluded from the study. Additionally, staff nurses with less than six months of experience in their present employment were not included. This sampling approach is intended to capture the insights and experiences of frontline nursing staff who possess sufficient tenure to provide meaningful perspectives related to the study's objectives.

### **Respondents of the Study**

The participants of this study consist of the total population of staff nurses employed in three (3) selected government hospitals located in Northern Palawan. Eligible participants included those with permanent, non-permanent, or contractual employment status, who have been working in their current hospital for a minimum of six (6) months, and who do not hold any official designations such as supervisory, managerial, or leadership roles. This inclusion criterion is intended to focus the research on the experiences of rank-and-file nursing personnel, who are directly involved in bedside care and more likely to be exposed to the workplace conditions relevant to this study.

The participating hospitals and their corresponding number of nurse respondents are as follows: Northern Palawan Provincial Hospital (Level 1), located in Taytay, Palawan – thirty (30) nurses; Culion Sanitarium and General Hospital (Level 2), located in Culion, Palawan – sixty eight (68) nurses and Coron District Hospital (Level 1), located in Coron, Palawan – fifteen (15) nurses. In total, one hundred fifteen (115) staff nurses were included as participants. Selection was carried out through purposive sampling, a non-probability sampling technique that allows the deliberate inclusion of individuals who possess relevant experience and insights. This approach ensures that participants have sufficient workplace exposure and potential experiences related to work satisfaction. Nursing administrators, including supervisors, managers, and leaders, are excluded from the study to maintain the research emphasis on frontline nursing staff.

### **Instrument Design**

This study utilized a researcher-made questionnaire as the primary data collection instrument. The questionnaire underwent content validation by three (3) healthcare professionals to ensure its relevance and clarity. Following this, a pilot study was conducted to test the instrument. The results of the pilot test were analyzed using Cronbach's alpha to determine its reliability. After establishing acceptable reliability, the questionnaire was finalized and used for the actual data gathering. The questionnaire has two (2) parts. Part 1 of the questionnaire consists of demographic questions like sex, civil status, highest attained education credential, Employment status, Length of current hospital stay, Years of experience as a nurse, Current position, Work shift, Department/Unit Assigned, Number of patients handled per shift and Salary. Part 2 of the questionnaire focuses on the various factors influencing the work satisfaction of staff nurses employed in the three (3) selected government hospitals in Northern Palawan. This section is structured into eight (8) subtopics, each comprising a total of six (6) items—three (3) positively worded and three (3) negatively worded statements—resulting in a total of forty-eight (48) items. These items are designed to comprehensively assess the respondents' perceptions and experiences related to work satisfaction within their respective healthcare settings. To measure responses, the researcher employs a four-point Likert scale,

allowing participants to express the degree to which they agree or disagree with each statement. This scaling method facilitates consistent quantification of attitudes and opinions, and eliminates a neutral midpoint to encourage more decisive responses. The Likert scale includes the following descriptions: 4 - Strongly Agree - signifies the participant's complete agreement with the statement or question; 3 - Agree and represents moderate agreement, suggesting that the participant leans towards agreeing with the statement; 2 - Disagree - represents moderate disagreement, signifying that the participant leans towards not agreeing with the statement; and 1 - Strongly Disagree - indicates that the participant completely disagrees with the statement or question.

The nurse managers were requested to handle the distribution of links of questionnaires via google form. Respondents answered the questionnaire during their free time. This research formulated questionnaire was validated by three (3) health care experts and a pilot testing was implemented prior to the actual data gathering.

### **Statistical Analysis**

This study used various statistical tools to determine the factors affecting work satisfaction of nurses employed in three (3) northern government hospitals that explored relationships and differences between variables. The demographic profiles of the respondents were analyzed using descriptive statistics, specifically frequency, percentage, and rank. Frequency (f) counts how often a specific characteristic appears in the data set. Percentage (%) showed what portion of the respondents fall into each category. Additionally, rank ordered the data points based on their values

The Chi-square test was used to determine whether there was a significant relationship between the respondents' profile variables and their level of work satisfaction. This statistical tool was appropriate because both the profile variables and the level of work satisfaction were categorized into groups. This statistic assesses whether increases or decreases in specific factors are associated with corresponding changes in work satisfaction.

On the other hand, Analysis of Variance (ANOVA) was utilized to examine whether significant differences exist in the work satisfaction levels of nurses when grouped according to selected demographic variables (e.g., age, sex, years of experience, department). This analysis reveals whether demographic characteristics have a statistically significant effect on the perceived work satisfaction of nurses.

### **Ethical Considerations**

The research was examined by Don Mariano Marcos Memorial State University URERC prior to data gathering. The researcher strictly followed ethical standards throughout the study to ensure the protection of participants' dignity, rights, and welfare. To safeguard privacy and minimize bias, the questionnaire omits any personal identifiers. All collected data are anonymized prior to analysis and reporting. Individual responses remain confidential and were not used to evaluate any nurse's professional performance or impact the reputation of their respective government hospitals. Completed questionnaires are securely kept in a locked container and will be destroyed by shredding five years after the study's final defense and publication.

All prospective respondents underwent a comprehensive informed consent process, which clearly outlined the study's aims, procedures, potential risks and benefits, and the expected time needed to complete the survey. Acknowledging that some questions may require personal reflection, respondents were

allowed to complete the questionnaire at a time and place convenient to them, ensuring voluntary participation without any form of coercion. The questionnaire was reviewed and validated by three (3) experts in the health field to ensure its relevance and reliability. The researcher provides contact information to support participants with any inquiries or concerns throughout the study. These steps fostered a secure and supportive environment, encouraging sincere and willing participation. Data collection was arranged to avoid interference with respondents' work schedules, and an online Google Form option was offered to facilitate accessibility. The study protocol upholds participants' right to withdraw at any stage without penalty or repercussions, allowing them to participate only as long as they feel comfortable.

By implementing these ethical safeguards, the researcher conducted the study respectfully and responsibly, protected participants' privacy, and contributed valuable knowledge to enhance support for nursing staff.

#### 4. PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

This chapter presents a comprehensive analysis of the statistical data gathered to address the research questions of the study. It provides a systematic presentation, analysis, and interpretation of the findings to ensure a clear and coherent understanding of the results. Furthermore, the outcomes of the statistical tests are critically examined and discussed in relation to the study's objectives.

##### Respondents' Demographic Profiles

The following tables show the demographic profiles of the nurse respondents across the following parameters, namely: age, sex, civil status, highest attained education credential, employment status, length of current hospital stay, years of experience as a nurse, current position, work shift, department/unit assigned, number of patients handled per shift, and salary. Descriptive statistical measures, such as frequency counts, percentages, and ranking, were utilized to provide a clear, organized, and systematic description of the distribution of the respondents' profiles.

**Table 4.1**

##### Respondents' Demographic Profiles in terms of Age

| Respondents' Age       | Frequency (f) | Percentage (%) | Rank            |
|------------------------|---------------|----------------|-----------------|
| 18 – 22 years old      | 7             | 6.3            | 5 <sup>th</sup> |
| 23 – 27 years old      | 71            | 63.4           | 1 <sup>st</sup> |
| 28 – 32 years old      | 8             | 7.1            | 4 <sup>th</sup> |
| 33 – 37 years old      |               | 14.3           | 2 <sup>nd</sup> |
| 38 years old and above | 10            | 8.9            | 3 <sup>rd</sup> |
| <b>TOTAL</b>           | <b>112</b>    | <b>100.0</b>   |                 |

The data presented in Table 4.1 reveal that the majority of the nurse respondents belong to the 23–27 years old age group, comprising 63.4% of the total sample, followed by those aged 33–37 years (14.3%), 38 years and above (8.9%), 28–32 years (7.1%), and 18–22 years (6.3%). This distribution indicates that most

nurses in government hospitals are relatively young and likely in the early stages of their professional careers.

This finding suggests that the nursing workforce in these settings is largely composed of early-career practitioners who may still be developing clinical competence, professional identity, and coping mechanisms in demanding healthcare environments. Likewise, the predominance of younger nurses may reflect current employment trends in the Philippines, where newly licensed nurses actively enter government service for experience and career advancement. However, this also pinpoints that younger nurses may be more vulnerable to work-related stress, adjustment challenges, and job dissatisfaction due to heavy workloads and limited experience.

This aligns with the findings of Aba Ali and Bangcola (2022), who found that many nurses in the Philippines are in the early stages of their careers and that job satisfaction plays a crucial role in their decision to remain in the profession. Similarly, Bautista et al. (2020) reported that younger or newly qualified nurses often undergo an adjustment period where job satisfaction may be unstable due to role transition and workplace demands.

**Table 4.2**

##### Respondents' Demographic Profiles in terms of Sex

| Respondents' Sex | Frequency (f) | Percentage (%) | Rank            |
|------------------|---------------|----------------|-----------------|
| Male             | 18            | 16.1           | 2 <sup>nd</sup> |
| Female           | 94            | 83.8           | 1 <sup>st</sup> |
| <b>TOTAL</b>     | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.2 shows that the respondents are predominantly female, accounting for 83.8% of the total population, while male nurses comprise only 16.1%. This indicates a clear gender imbalance in the nursing workforce within government hospitals, reflecting the long-standing perception of nursing as a female-dominated profession. The relatively small proportion of male nurses suggests that, despite increasing acceptance of men in the profession, gender disparities in nursing participation remain evident.

Furthermore, this gender distribution may influence workplace dynamics, communication patterns, and even perceptions of job roles and responsibilities. Female nurses, being the majority, may shape the organizational culture and norms within hospital settings. On the other hand, male nurses, as a minority group, may experience unique challenges such as role stereotyping or increased expectations in physically demanding tasks. These dynamics can have implications for work satisfaction, as experiences in the workplace may differ based on gender.

The findings are consistent with the study conducted by Oducado et al. (2020), which emphasizes that women constitute the majority of the nursing workforce in hospital settings, although there has been a gradual increase in male participation in recent years. This also coincides with Stanley et al. (2016), who posited that male nurses often remain underrepresented but contribute significantly to workforce diversity and patient care outcomes. Moreover, they further indicated that while gender may not always directly determine job satisfaction, it can influence workplace experiences, professional interactions, and career advancement opportunities.

**Table 4.3****Respondents' Demographic Profiles in terms of Civil Status**

| Respondents' Civil Status | Frequency (f) | Percentage (%) | Rank            |
|---------------------------|---------------|----------------|-----------------|
| Single                    | 96            | 87.7           | 1 <sup>st</sup> |
| Married                   | 16            | 14.3           | 2 <sup>nd</sup> |
| <b>TOTAL</b>              | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.3 indicates that the overwhelming majority of the respondents are single, representing 87.7% of the total sample, while only 14.3% are married. This distribution suggests that most nurses in government hospitals are not yet engaged in marital or family responsibilities, which may be closely associated with their relatively young age profile, as reflected in the previous table. The dominance of single respondents implies that the nursing workforce in these settings is largely composed of individuals who may still be in the early stages of establishing both their professional careers and personal lives.

Moreover, civil status is an important variable that can shape work satisfaction, as it often influences priorities, responsibilities, and work-life balance. Single nurses may have greater flexibility in terms of work schedules, overtime, and shift assignments, allowing them to adapt more easily to the demanding nature of hospital work. However, they may also experience higher levels of work-related stress due to increased workload expectations and fewer personal obligations that justify work limitations. In contrast, married nurses may face the challenge of balancing professional duties with family responsibilities, which can either enhance their sense of purpose or contribute to role strain and reduced job satisfaction.

The findings align with the study of Oducado et al. (2021), which noted that a significant proportion of hospital nurses are single, particularly among younger cohorts, and that this group often demonstrates high workforce mobility and varying levels of job satisfaction. Similarly, a study by Lu et al. (2019) found that marital status can influence job satisfaction and stress levels among nurses, with single nurses often reporting higher adaptability but also increased exposure to workplace demands.

**Table 4.4****Respondents' Demographic Profiles in terms of Highest Educational Attainment**

| Respondents' Education Level | Frequency (f) | Percentage (%) | Rank            |
|------------------------------|---------------|----------------|-----------------|
| Bachelor's Degree            | 109           | 97.3           | 1 <sup>st</sup> |
| Master's Degree              | 3             | 2.7            | 2 <sup>nd</sup> |
| Doctorate Degree             | -             | -              | 3 <sup>rd</sup> |
| <b>TOTAL</b>                 | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.4 presents a clear concentration of respondents at the bachelor's degree level, with 97.3% of the participants holding this qualification. Only a small proportion, 2.7%, have attained a master's degree, while none reported having a doctorate degree. This distribution underscores that the nursing workforce in government hospitals is largely composed of degree holders who

meet the minimum professional qualification for practice, with very limited representation in advanced academic training.

The analysis also suggests that while the respondents are academically prepared for entry-level and clinical roles, opportunities for higher education and specialization may be underutilized or less accessible. The minimal number of nurses with graduate degrees may reflect barriers such as financial constraints, workload demands, or limited institutional support for continuing education. This situation has direct implications for work satisfaction, as advanced education is often linked to career progression, leadership opportunities, and professional recognition. Nurses who are unable to pursue further studies may experience stagnation or reduced motivation, whereas those with higher qualifications may have increased expectations regarding promotion, autonomy, and compensation.

This pattern is consistent with Oducado et al. (2021), who indicate that most practicing nurses hold bachelor's degrees, with relatively few advancing to graduate-level education due to workload pressures and limited incentives. Moreover, they further emphasize that higher educational attainment is positively associated with job satisfaction, professional autonomy, and quality of care, as it equips nurses with enhanced competencies and decision-making skills.

The implications of these findings point to the need for stronger institutional support for continuing professional development. Government hospitals may consider implementing scholarship programs, flexible study arrangements, and incentives for advanced education to encourage nurses to pursue graduate studies.

**Table 4.5****Respondents' Demographic Profiles in terms of Employment Status**

| Respondents' Employment Status | Frequency (f) | Percentage (%) | Rank            |
|--------------------------------|---------------|----------------|-----------------|
| Permanent                      | 66            | 58.9           | 1 <sup>st</sup> |
| Contractual                    | 42            | 37.5           | 2 <sup>nd</sup> |
| Job Order                      | 4             | 3.6            | 3 <sup>rd</sup> |
| <b>TOTAL</b>                   | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.5 highlights the employment status of the respondents, showing that a majority are in permanent positions (58.9%), while a considerable proportion are employed on a contractual basis (37.5%), and only a few are under job order status (3.6%). This distribution suggests that although more than half of the nurses benefit from stable and secure employment, a significant number still experience less stable work arrangements. Such a pattern reflects the dual nature of employment in government hospitals, where both regular and non-regular positions coexist to meet staffing demands.

Examining this more closely, employment status plays a crucial role in shaping nurses' work satisfaction and overall professional experience. Permanent employees typically enjoy greater job security, consistent income, and access to government-mandated benefits, which can contribute positively to their level of satisfaction and organizational commitment. In contrast, contractual and job order nurses may face uncertainty regarding tenure, limited benefits, and fewer opportunities for advancement.

These conditions can lead to feelings of instability and reduced motivation, potentially affecting their job performance and intention to remain in the organization.

The present findings are supported by Dilig-Ruiz et al. (2018), who echoed that employment status significantly influences nurses' job satisfaction, noting that those in more secure positions tend to report more favorable work experiences due to better access to resources and support systems. Similarly, Labrague et al. (2020) reinforced the idea that stability in employment is a key factor in maintaining a satisfied and committed nursing workforce. They further echoed that job stability significantly influences nurses' intention to stay in their organization, with permanent employees demonstrating stronger organizational satisfaction.

**Table 4.6**

**Respondents' Demographic Profiles in terms of Length of Current Hospital Stay**

| Respondents' Length of Current Hospital Stay | Frequency (f) | Percentage (%) | Rank            |
|--|---------------|----------------|-----------------|
| 6 months – 1 year                            | 21            | 18.8           | 2 <sup>nd</sup> |
| 1 – 2 years                                  | 53            | 47.3           | 1 <sup>st</sup> |
| 2 – 3 years                                  | 14            | 12.5           | 4 <sup>th</sup> |
| 3 – 4 years                                  | 5             | 4.5            | 5 <sup>th</sup> |
| 5 years and above                            | 19            | 17.0           | 3 <sup>rd</sup> |
| <b>TOTAL</b>                                 | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.6 presents the distribution of respondents according to their length of current hospital stay, with the largest proportion (47.3%) having served between 1–2 years. This is followed by those with 6 months to 1 year of service (18.8%) and those with 5 years and above (17.0%), while smaller percentages are observed among respondents with 2–3 years (12.5%) and 3–4 years (4.5%) of tenure. This pattern indicates that a substantial portion of the nursing workforce is relatively new to their current hospital, suggesting moderate staff turnover or continuous entry of new personnel into government healthcare institutions.

Length of stay is a significant factor that can influence work satisfaction, as it reflects both experience within the organization and level of adaptation to the work environment. Nurses with shorter tenure, particularly those within the 1–2 year range, are often in the process of adjusting to workplace demands, institutional policies, and professional responsibilities. During this period, job satisfaction may fluctuate as they encounter challenges related to workload, role expectations, and workplace relationships. On the other hand, nurses with longer tenure, especially those with five years or more of service, are more likely to have developed coping mechanisms, clinical competence, and stronger organizational commitment, which may contribute to higher levels of job satisfaction and stability.

The results of this study conform with Alshammari et al. (2021), who found that nurses with shorter organizational tenure tend to report lower levels of job satisfaction due to adjustment difficulties and perceived lack of support. Similarly, a study by Molero Jurado et al. (2019) emphasized that work experience and tenure are positively associated with job satisfaction, as longer-serving nurses typically demonstrate greater confidence and role mastery.

**Table 4.7**

**Respondents' Demographic Profiles in terms of Length of Experience as Nurse**

| Respondents' Length of Experience as Nurse | Frequency (f) | Percentage (%) | Rank            |
|--|---------------|----------------|-----------------|
| 6 months – 1 year                          | 21            | 18.8           | 2 <sup>nd</sup> |
| 1 – 2 years                                | 53            | 47.3           | 1 <sup>st</sup> |
| 2 – 3 years                                | 14            | 12.5           | 4 <sup>th</sup> |
| 3 – 4 years                                | 5             | 4.5            | 5 <sup>th</sup> |
| 5 years and above                          | 19            | 17.0           | 3 <sup>rd</sup> |
| <b>TOTAL</b>                               | <b>112</b>    | <b>100%</b>    |                 |

Table 4.7 presents the distribution of respondents based on their length of experience as a nurse, showing a pattern almost identical to their current hospital tenure. As depicted by the analysis, nearly half of the respondents (47.3%) have between 1–2 years of nursing experience, followed by those with 6 months to 1 year (18.8%) and 5 years or more (17.0%). Nurses with 2–3 years (12.5%) and 3–4 years (4.5%) of experience represent smaller proportions. This indicates that the workforce in the surveyed government hospitals is largely composed of relatively early-career nurses, with fewer seasoned professionals, suggesting a predominantly young and developing workforce in terms of clinical experience.

Notably, early-career nurses often face a period of professional adjustment where challenges such as high patient loads, unfamiliar procedures, and time management can impact their satisfaction levels. While these nurses may be enthusiastic and adaptable, they may also experience stress and uncertainty that could affect retention. Conversely, nurses with longer experience—particularly those with five or more years—are likely to have greater confidence, competence, and familiarity with hospital systems, which can contribute to higher job satisfaction, resilience, and organizational commitment.

These findings are consistent with Labrague et al. (2020), who observed that nurses in the first two years of practice often report higher stress levels and fluctuating satisfaction as they transition from academic preparation to full clinical responsibility. Similarly, Dilig-Ruiz et al. (2018) reported that less experienced nurses are more susceptible to job dissatisfaction due to uncertainty and adjustment challenges, while more experienced nurses exhibit higher resilience and satisfaction. This also corroborates with Hayes et al. (2008), who emphasize that early-career nurses face critical adaptation periods where supportive work environments and mentorship significantly influence their job satisfaction and retention.

**Table 4.8**

**Respondents' Demographic Profiles in terms of Current Position**

| Respondents' Current Position | Frequency (f) | Percentage (%) | Rank            |
|-------------------------------|---------------|----------------|-----------------|
| Nurse I                       | 83            | 74.1           | 1 <sup>st</sup> |
| Nurse II                      | 29            | 25.9           | 2 <sup>nd</sup> |

|              |            |              |  |
|--------------|------------|--------------|--|
| <b>TOTAL</b> | <b>112</b> | <b>100.0</b> |  |
|--------------|------------|--------------|--|

Table 4.8 illustrates the distribution of respondents according to their current nursing positions. The majority of respondents hold the rank of Nurse I, accounting for 74.1% of the total sample, while the remaining 25.9% occupy the Nurse II position. This distribution indicates that most of the nursing workforce in the surveyed government hospitals occupies entry-level positions, with comparatively fewer nurses holding higher-ranking posts. Such a profile suggests a hierarchical structure dominated by early-career practitioners who are still progressing through professional advancement and promotion pathways.

Interestingly, the predominance of Nurse I positions has implications for work satisfaction and professional development. Entry-level nurses often face the dual challenge of acclimating to the clinical environment while developing the competencies required for promotion. These challenges can affect both job satisfaction and motivation, as early-career nurses may feel limited in terms of decision-making authority, leadership opportunities, and recognition. Conversely, the smaller proportion of Nurse II respondents, who have likely achieved additional experience, training, or responsibilities, may experience higher levels of professional autonomy, recognition, and job satisfaction due to their elevated roles.

The results of the analysis are consistent with Oducado et al. (2021), who highlight that a significant portion of nurses in government hospitals remain in entry-level positions due to limited promotion opportunities and a high influx of newly licensed nurses. This also aligns with Aiken et al. (2014), who note that the concentration of early-career nurses in entry-level roles is a common characteristic of hospital workforce structures, which can impact overall job satisfaction, retention, and career progression.

**Table 4.9**

**Respondents' Demographic Profiles in terms of Work Shift**

| Respondents' Work Shift | Frequency (f) | Percentage (%) | Rank            |
|-------------------------|---------------|----------------|-----------------|
| 8-hour Shift            | 86            | 76.8           | 1 <sup>st</sup> |
| 12-hour Shift           | 26            | 23.2           | 2 <sup>nd</sup> |
| <b>TOTAL</b>            | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.9 presents the respondents' demographic profiles in terms of work shift, which is a relevant variable in examining the factors affecting the work satisfaction of nurses employed in government hospitals. The findings show that the majority of the respondents, comprising 86 out of 112 (76.8%), are assigned to an 8-hour shift, while only 26 respondents (23.2%) are working on a 12-hour shift. This indicates that most nurses in the study are operating under the standard 8-hour work schedule, suggesting that the participating government hospitals largely implement conventional duty hours. Further, the predominance of the 8-hour shift may imply that the institution prioritizes work-life balance, reduced fatigue, and manageable workloads for its personnel. This type of schedule is commonly associated with maintaining employee well-being and sustaining productivity over time.

Conversely, although fewer in number, nurses assigned to 12-hour shifts may experience increased physical and emotional demands due to extended working hours, which can affect their satisfaction

levels. This corroborates with Geiger-Brown and Trinkoff (2010), who emphasized that long work hours contribute to fatigue and decreased performance among nurses, which may negatively influence their job satisfaction. Hence, the distribution of work shifts among respondents may provide meaningful insight into how scheduling practices may contribute to variations in work satisfaction.

**Table 4.10**

**Respondents' Demographic Profiles in terms of Department/Unit of Assignment**

| Respondents' Department       | Frequency (f) | Percentage (%) | Rank             |
|-------------------------------|---------------|----------------|------------------|
| Out-Patient Department        | 11            | 9.8            | 5 <sup>th</sup>  |
| Emergency Room                | 24            | 21.4           | 1 <sup>st</sup>  |
| Intensive Care Unit           | 4             | 3.6            | 9 <sup>th</sup>  |
| Neonatal Intensive Care Unit  | 6             | 5.4            | 8 <sup>th</sup>  |
| Pediatric Intensive Care Unit | 3             | 2.7            | 10 <sup>th</sup> |
| High-Risk Pregnancy Unit      | 1             | 0.9            | 11 <sup>th</sup> |
| Surgical Ward                 | 8             | 7.1            | 7 <sup>th</sup>  |
| Pediatric Wards               | 12            | 10.7           | 4 <sup>th</sup>  |
| Obstetric and Gynecology Ward | 15            | 13.4           | 3 <sup>rd</sup>  |
| Operating Room                | 19            | 17.0           | 2 <sup>nd</sup>  |
| Others                        | 9             | 8.0            | 6 <sup>th</sup>  |
| <b>TOTAL</b>                  | <b>112</b>    | <b>100.0</b>   |                  |

Table 4.10 presents the respondents' demographic profiles in terms of department or unit of assignment. The findings reveal that the highest proportion of respondents is assigned in the Emergency Room (21.4%), followed by the Operating Room (17.0%) and the Obstetric and Gynecology Ward (13.4%). Conversely, only a small number of nurses are assigned to highly specialized units such as the Intensive Care Unit (3.6%), Pediatric Intensive Care Unit (2.7%), and High-Risk Pregnancy Unit (0.9%). This distribution suggests that a greater number of nurses are deployed in high-demand and high-patient-turnover areas, particularly in emergency and surgical settings.

In the context of work satisfaction, the department of assignment plays a significant role, as nurses working in high-acuity areas such as the Emergency Room and Operating Room are often exposed to increased workload, time pressure, and emotional stress, which may affect their job satisfaction. This result corroborates the findings of Adriaenssens et al. (2015), who have shown that nurses in critical and emergency care settings tend to experience higher levels of stress and burnout due to the intensity and unpredictability of their work environment. Similarly, Aiken et al. (2012) found that demanding work environments with high patient loads are associated with lower job satisfaction and higher burnout

among hospital nurses. Moreover, Dyrbye et al. (2017) emphasized that workplace stressors, including unit assignment and workload, significantly influence healthcare professionals' well-being and job satisfaction. On the other hand, nurses assigned to less acute areas may experience comparatively lower stress levels, which can contribute to more favorable perceptions of their work environment. These findings imply that the variation in departmental assignments among respondents may lead to differences in work satisfaction levels, thereby highlighting the need for targeted interventions that address unit-specific challenges in government hospitals.

**Table 4.11**

**Respondents' Demographic Profiles in terms of Average Number of Patients Handled per Shift**

| Respondents' Number of Patients Handled | Frequency (f) | Percentage (%) | Rank            |
|---|---------------|----------------|-----------------|
| 1 – 5 patients                          | 26            | 23.2           | 2 <sup>nd</sup> |
| 6 – 10 patients                         | 17            | 15.2           | 4 <sup>th</sup> |
| 11 – 20 patients                        | 32            | 28.6           | 1 <sup>st</sup> |
| 21 – 30 patients                        | 24            | 21.4           | 3 <sup>rd</sup> |
| More than 30 patients                   | 13            | 11.6           | 5 <sup>th</sup> |
| <b>TOTAL</b>                            | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.11 illustrates the respondents' demographic profiles in terms of the average number of patients handled per shift. The data reveal that the largest proportion of respondents (28.6%) handle 11–20 patients per shift, followed by those managing 1–5 patients (23.2%) and 21–30 patients (21.4%), while a smaller percentage attend to more than 30 patients (11.6%). This distribution indicates that a considerable number of nurses are exposed to moderate to high patient loads during their shifts, reflecting the demanding nature of healthcare service delivery in government hospitals.

Conversely, nurses handling fewer patients are more likely to provide individualized care and experience lower stress levels, which may positively influence their job satisfaction. These findings suggest that the variation in patient load among respondents plays a crucial role in shaping their work experiences and satisfaction levels, thereby underscoring the need for staffing policies and workload management strategies as part of an enhanced program to improve nurses' working conditions in government hospitals.

The results of this study conform with Labrague et al. (2020), who highlighted that in the Philippine context, nurse-to-patient ratios have been identified as a persistent concern, particularly in public healthcare facilities where limited staffing often leads to heavier workloads. These further echoes that high patient loads are associated with increased physical and emotional strain, which may adversely affect nurses' work satisfaction, performance, and overall well-being. Similarly, De Guzman et al. (2019) found that excessive workload and high patient-to-nurse ratios significantly contribute to job stress and decreased satisfaction among Filipino nurses. Moreover, Ramos et al. (2018) emphasized that managing a large number of patients per shift can lead to fatigue, reduced quality of care, and higher risk of burnout, particularly in resource-constrained hospital settings.

**Table 4.12**

**Respondents' Demographic Profiles in terms of Monthly Salary**

| Respondents' Monthly Salary | Frequency (f) | Percentage (%) | Rank            |
|-----------------------------|---------------|----------------|-----------------|
| Below P20,000.00            | -             | -              | -               |
| P20,001.00 – P30,000.00     | 25            | 22.3           | 3 <sup>rd</sup> |
| P30,001.00 – P40,000.00     | 37            | 33.0           | 2 <sup>nd</sup> |
| P40,001.00 – P50,000.00     | 50            | 44.6           | 1 <sup>st</sup> |
| Above P50,000.00            | -             | -              | -               |
| <b>TOTAL</b>                | <b>112</b>    | <b>100.0</b>   |                 |

Table 4.12 presents the respondents' demographic profiles in terms of monthly salary, providing a structural perspective on the economic positioning of nurses within government hospitals and its potential implications for work satisfaction. The data indicate that a plurality of respondents (44.6%) fall within the P40,001.00–P50,000.00 salary bracket, followed by those earning P30,001.00–P40,000.00 (33.0%) and P20,001.00–P30,000.00 (22.3%). Notably, there are no respondents in the lowest (below P20,000.00) and highest (above P50,000.00) income categories, suggesting a relatively compressed and standardized compensation structure among the participants.

Furthermore, the concentration of salaries within mid-range brackets may indicate a degree of financial adequacy and equity among respondents, potentially reducing perceptions of dissatisfaction within the workplace. This aligns with Valdez and Dela Cruz (2019), who emphasized that competitive salaries contribute to retention; however, they further underscore that non-monetary factors such as recognition, professional growth, and work environment play a more substantial role in shaping overall job satisfaction among Filipino nurses.

**Factors Affecting the Work Satisfaction of the Respondents**

The succeeding tables present a comprehensive analysis of the factors affecting the work satisfaction of nurses employed in government hospitals, examined across the following key parameters: compensation, benefits, workload and staffing, work environment and resources, professional growth and recognition, leadership and management, interpersonal relationships and teamwork, and overall job satisfaction. To ensure a systematic and objective interpretation of the data, descriptive statistical measures—particularly mean ratings—were utilized to quantify and summarize the respondents' perceptions.

**Table 4.13. Factors Affecting the Respondents' Work Satisfaction in terms of Compensation**

| Statement   | Mean | Descriptor |
|---|------|------------|
| a. <i>My basic salary is fair for my level of work and responsibility</i> | 2.48 | Disagree   |
| b. <i>I am paid consistently and on time.</i>                             | 2.21 | Disagree   |
| c. <i>Night shift differentials are paid fairly</i>                       | 2.54 | Agree      |

|   |             |                              |
|---|-------------|------------------------------|
| d. <i>I am given adequate hazard pay based on my work conditions</i>      | 2.48        | Disagree                     |
| e. <i>I receive bonuses or performance-based rewards when appropriate</i> | 2.41        | Disagree                     |
| f. <i>I receive proper compensation for working overtime.</i>             | 1.98        | Disagree                     |
| <b>Overall Mean Rating</b>  | <b>2.35</b> | <b>Slightly Dissatisfied</b> |

**Legend for the Mean:** *Strongly Disagree:* 1.00 – 1.75; *Disagree:* 1.76 – 2.50; *Agree:* 2.51 – 3.25; *Strongly Agree:* 3.26 – 4.00

**Legend for the Overall Mean Rating:** *Dissatisfied:* 1.00 – 1.75; *Slightly Dissatisfied:* 1.76 – 2.50; *Slightly Satisfied:* 2.51 – 3.25; *Satisfied:* 3.26 – 4.00

Table 4.13 presents the respondents' perceptions of their work satisfaction in terms of compensation. The overall mean rating of 2.35 indicates that the nurses expressed dissatisfaction with several aspects of their remuneration while acknowledging some areas of adequacy.

Based on the analysis, the respondents disagreed with the statement, “*My basic salary is fair for my level of work and responsibility*” (mean = 2.48), suggesting that nurses perceive their base pay as insufficient relative to their workload and responsibilities. This implies that perceived inequity in salary can decrease motivation and negatively affect work performance. Similarly, respondents disagreed with “*I am paid consistently and on time*” (mean = 2.21), indicating that delays or inconsistencies in payroll can reduce trust in administration and overall job satisfaction.

In contrast, nurses agreed with “*Night shift differentials are paid fairly*” (mean = 2.54), suggesting some recognition for working non-standard hours. This demonstrates that while supplementary compensation is appreciated, it does not fully address overall dissatisfaction with pay. Likewise, respondents also disagreed with “*I am given adequate hazard pay based on my work conditions*” (mean = 2.48), highlighting that compensation does not sufficiently reflect the risks inherent in their work environment. Similarly, nurses disagreed with “*I receive bonuses or performance-based rewards when appropriate*” (mean = 2.41), suggesting that performance incentives are either insufficient or inconsistently applied. Additionally, the statement, “*I receive proper compensation for working overtime*” (mean = 1.98), also received disagreement, indicating that extra hours are not adequately remunerated.

These findings indicate that although some forms of supplemental pay (e.g., night shift differentials) provide recognition for additional effort, the core issues of base salary, hazard pay, and performance-based incentives remain significant contributors to dissatisfaction. Such gaps in compensation can affect motivation, job commitment, and retention, particularly in high-stress and high-demand healthcare environments.

This is parallel with the study of Labrague, De los Santos, and Fronda (2018), who posited that inadequate compensation is strongly associated with lower job satisfaction and increased turnover intentions among Filipino nurses. Similarly, De Guzman, Peralta, and Guieb (2020) highlighted that insufficient hazard pay and lack of performance-based incentives exacerbate stress and reduce satisfaction in public hospital settings.

The results of the analyses further suggest that hospital administrators should prioritize reviewing and improving the compensation structure, particularly regarding base pay, hazard pay, and performance-based rewards. Ensuring timely and equitable remuneration for both regular and overtime duties can enhance financial satisfaction, reduce turnover intentions, and positively influence overall work satisfaction. Furthermore, aligning compensation policies with the risk, workload, and responsibilities inherent in different nursing roles can foster motivation and support the delivery of high-quality patient care.

**Table 4.14.**

**Factors Affecting the Respondents' Work Satisfaction in terms of Benefits**

| Statement  | Mean        | Descriptor                   |
|--|-------------|------------------------------|
| a. <i>I have access to quality health insurance</i>              | 2.59        | Agree                        |
| b. <i>I am given enough paid vacation leave each year.</i>       | 2.43        | Disagree                     |
| c. <i>I can take emergency leave without complications</i>       | 2.13        | Disagree                     |
| d. <i>The organization contributes to my retirement savings</i>  | 2.68        | Agree                        |
| e. <i>I benefit from free uniforms, meals, or transportation</i> | 2.05        | Disagree                     |
| f. <i>The hospital provides support for medical emergencies.</i> | 2.65        | Agree                        |
| <b>Overall Mean Rating</b>                                       | <b>2.42</b> | <b>Slightly Dissatisfied</b> |

**Legend for the Mean:** *Strongly Disagree:* 1.00 – 1.75; *Disagree:* 1.76 – 2.50; *Agree:* 2.51 – 3.25; *Strongly Agree:* 3.26 – 4.00

**Legend for the Overall Mean Rating:** *Dissatisfied:* 1.00 – 1.75; *Slightly Dissatisfied:* 1.76 – 2.50; *Slightly Satisfied:* 2.51 – 3.25; *Satisfied:* 3.26 – 4.00

Table 4.14 shows the respondents' perceptions of their work satisfaction in terms of benefits. The overall mean rating of 2.42 indicates that nurses are slightly dissatisfied with the benefits provided by their hospitals.

Based on the analysis, the highest mean rating of 2.68 was obtained by the statement “*The organization contributes to my retirement savings*”. This statistic highlights that financial benefits for the future are perceived positively by the respondents. This stresses that retirement support may contribute to long-term job security, job satisfaction and may enhance organizational loyalty. It is also worth noting that the respondents **agreed** that “*The hospital provides support for medical emergencies*” (mean = 2.65), reflecting that some institutional support exists in urgent health situations, which can improve employees' sense of safety and well-being. In addition, the respondents agreed with the statement, “*I have access to quality health insurance*” (mean = 2.59), indicating that health coverage is available and considered satisfactory. This implies that health insurance contributes positively to nurses' sense of security and well-being, which can reduce stress and absenteeism.

However, the analysis revealed that the nurses disagreed with “*I am given enough paid vacation leave each year*” (mean = 2.43), signaling insufficient rest periods. The implication is that inadequate vacation leave can increase fatigue, reduce work-life balance, and potentially impact patient care quality. Similarly, respondents disagreed with “*I can take emergency leave without complications*” (mean = 2.13), suggesting that accessing emergency leave may be challenging. This limitation can heighten work-related stress and reduce satisfaction, especially during personal or family crises. Similarly, the respondents disagreed with “*I benefit from free uniforms, meals, or transportation*” (mean = 2.05), suggesting that these supplementary benefits are largely absent or insufficient. The implication is that lack of these practical benefits may reduce overall job satisfaction and increase out-of-pocket costs for staff.

The results imply that while certain benefits are satisfactory, the overall benefits do not fully meet nurses’ needs. The analysis further underscores that limited leave, inadequate retirement contributions, and insufficient emergency support may reduce job satisfaction and affect retention. Local studies support this observation, indicating that benefits play a significant role in nurses’ motivation and commitment (De Guzman et al., 2020; Labrague et al., 2018). This also corroborates with Yao, et al. (2022), who highlights that both financial and non-financial benefits are critical for enhancing work satisfaction and reducing turnover.

**Table 4.15. Factors Affecting the Respondents’ Work Satisfaction in terms of Workload and Staffing**

| Statement  | Mean        | Descriptor                   |
|--|-------------|------------------------------|
| a. <i>The nurse-to-patient ratio in my unit is reasonable</i>                        | 2.12        | Disagree                     |
| b. <i>I am not overloaded with responsibilities during my shift.</i>                 | 2.10        | Disagree                     |
| c. <i>Staffing shortages compromise patient care or safety. *</i>                    | 3.43        | Agree                        |
| d. <i>Overtime and additional tasks are not fairly distributed among nurses. *</i>   | 2.96        | Agree                        |
| e. <i>Inadequate staffing often leads to burnout or stress. *</i>                    | 3.64        | Agree                        |
| f. <i>I feel overwhelmed by the number of tasks I have to complete in a shift. *</i> | 3.18        | Agree                        |
| <b>Overall Mean Rating</b>   | <b>1.82</b> | <b>Slightly Dissatisfied</b> |

**Legend for the Mean:** Strongly Disagree: 1.00 – 1.75; Disagree: 1.76 – 2.50; Agree: 2.51 – 3.25; Strongly Agree: 3.26 – 4.00 **Legend for the Overall Mean Rating:** Dissatisfied: 1.00 – 1.75; Slightly Dissatisfied: 1.76 – 2.50; Slightly Satisfied: 2.51 – 3.25; Satisfied: 3.26 – 4.00

Table 4.15 illustrates the respondents’ perceptions of workload and staffing and its effect on their work satisfaction. The overall mean rating of 1.82, interpreted as slightly dissatisfied, indicates that nurses are generally unhappy with the current staffing and workload conditions.

Specifically, the respondents disagreed with the statements, “*The nurse-to-patient ratio in my unit is reasonable*” (mean = 2.12) and “*I am not overloaded with responsibilities during my shift*” (mean = 2.10). This data shows that the respondents generally consider their workload excessive relative to the available staff.

At the same time, respondents agreed with statements that highlight the consequences of understaffing, including “*Staffing shortages compromise patient care or safety*” (mean = 3.43), “*Overtime and additional tasks are not fairly distributed among nurses*” (mean = 2.96), “*Inadequate staffing often leads to burnout or stress*” (mean = 3.64), and “*I feel overwhelmed by the number of tasks I have to complete in a shift*” (mean = 3.18). These results indicate that the respondents agreed that insufficient staffing not only increases stress and fatigue but may also affect their job satisfaction.

The findings suggest a clear link between staffing levels, workload, and nurses’ satisfaction. Excessive patient loads and unevenly distributed responsibilities can lead to burnout, low morale, and higher turnover. This validates the study of Labrague et al. (2018), who underscored that understaffing and high workloads are major contributors to dissatisfaction among Filipino nurses. Likewise, this also supports the findings of Aiken et al. (2018), who highlighted that high workloads and poor staffing are associated with burnout, reduced job satisfaction, and compromised patient care.

**Table 4.16. Factors Affecting the Respondents’ Work Satisfaction in terms of Work Environment and Resources**

| Statement  | Mean        | Descriptor                   |
|--|-------------|------------------------------|
| a. <i>I feel physically safe in my workplace.</i>  | 2.69        | Agree                        |
| b. <i>Our hospital provides enough medical supplies and equipment.</i>                         | 2.12        | Disagree                     |
| c. <i>My work environment promotes focus and efficiency.</i>                                   | 2.69        | Agree                        |
| d. <i>Facilities (e.g., ventilation, rest areas, lighting) are conducive for nurses.</i>       | 2.37        | Disagree                     |
| e. <i>The hospital promotes a culture of safety and professionalism.</i>                       | 2.69        | Agree                        |
| f. <i>Equipment in my unit are regularly maintained and are not in good working condition.</i> | 2.41        | Disagree                     |
| <b>Overall Mean Rating</b>   | <b>2.49</b> | <b>Slightly Dissatisfied</b> |

**Legend for the Mean:** Strongly Disagree: 1.00 – 1.75; Disagree: 1.76 – 2.50; Agree: 2.51 – 3.25; Strongly Agree: 3.26 – 4.00

**Legend for the Overall Mean Rating:** Dissatisfied: 1.00 – 1.75; Slightly Dissatisfied: 1.76 – 2.50; Slightly Satisfied: 2.51 – 3.25; Satisfied: 3.26 – 4.00

Table 4.16 presents the respondents’ perceptions of their work satisfaction in terms of work environment and resources, revealing an overall mean rating of 2.49, interpreted as slightly dissatisfied. This indicates that nurses are generally unhappy with the current state of their work environment and available resources.

It can be gleaned in the analysis that the respondents agreed with “*I feel physically safe in my workplace*” (mean = 2.69). This suggests that in general, nurses feel protected from immediate hazards which can reduce stress and increase confidence in performing duties. Similarly, respondents agreed in the statement “*My work environment promotes focus and efficiency*” (mean = 2.69), suggesting that some structural and procedural aspects support productivity, despite other limitations. Also, nurses agreed that “*The hospital promotes a culture of safety and professionalism*” (mean = 2.69), reflecting the presence of policies and practices that encourage adherence to standards and professional behavior. The implication is that such a culture fosters accountability and engagement, even when material resources are limited.

However, nurses disagreed with “*Our hospital provides enough medical supplies and equipment*” (mean = 2.12), indicating insufficient or inadequate resources. This implies that limited supplies can compromise patient care quality, increase workload, and cause frustration among staff. Furthermore, the respondents disagreed with “*Facilities (e.g., ventilation, rest areas, lighting) are conducive for nurses*” (mean = 2.37), indicating that physical infrastructure may not adequately support staff well-being or comfort. Poor facility conditions can lead to fatigue, stress, and reduced job satisfaction.

Notably, the respondents also disagreed with “*Equipment in my unit are regularly maintained and are not in good working condition*” (mean = 2.41), highlighting issues with the maintenance and reliability of critical tools. This can directly affect efficiency, patient safety, and staff morale.

The results of this study underscore that inadequate resources, poorly maintained equipment, and suboptimal facilities negatively affect nurses’ ability to perform efficiently and safely. Hence, the findings of this study emphasize the need for hospital administrators to improve workplace facilities, ensure proper maintenance of equipment, and maintain sufficient medical resources. Enhancing the work environment can boost nurses’ satisfaction, reduce stress and fatigue, and support better patient care and safety.

Overall, the results suggest that while the hospital maintains a culture of safety and professionalism, resource-related limitations hinder optimal work performance. Such shortcomings can lead to dissatisfaction, reduced efficiency, and potential safety risks for both staff and patients. Local studies support this observation, showing that inadequate medical supplies, insufficient equipment maintenance, and poor work environment conditions significantly affect nurses’ satisfaction and perceived quality of care (De Guzman et al., 2020; Labrague et al., 2018). Yao et al. (2022) further confirms this finding that well-resourced, safe, and supportive work environments are crucial for improving nurses’ job satisfaction, engagement, and patient outcomes.

**Table 4.17. Factors Affecting the Respondents’ Work Satisfaction in terms of Professional Growth and Recognition**

| Statement   | Mean | Descriptor |
|---|------|------------|
| • I have opportunities to attend training or seminars to improve my skills. | 2.93 | Agree      |
| • The hospital supports continuing education and specialization.            | 2.90 | Agree      |

|  |             |                           |
|--|-------------|---------------------------|
| • My efforts and hard work are recognized and appreciated.         | 2.63        | Agree                     |
| • I have access to promotions or career advancement opportunities. | 2.44        | Disagree                  |
| • My professional achievements are acknowledged by management.     | 2.57        | Agree                     |
| • I feel that I have a clear career path in this organization      | 2.63        | Agree                     |
| <b>Overall Mean Rating</b>   | <b>2.68</b> | <b>Slightly Satisfied</b> |

**Legend for the Mean:** *Strongly Disagree:* 1.00 – 1.75; *Disagree:* 1.76 – 2.50; *Agree:* 2.51 – 3.25; *Strongly Agree:* 3.26 – 4.00

**Legend for the Overall Mean Rating:** *Dissatisfied:* 1.00 – 1.75; *Slightly Dissatisfied:* 1.76 – 2.50; *Slightly Satisfied:* 2.51 – 3.25; *Satisfied:* 3.26 – 4.00

Table 4.17 presents the respondents’ perceptions of professional growth and recognition and its effect on their work satisfaction. The overall mean rating of 2.68 indicates moderate satisfaction among nurses regarding professional development and recognition.

The analysis further reveals that the respondents agreed with the statement “*I have opportunities to attend training or seminars to improve my skills*” (mean = 2.93), suggesting that access to continuing education is available and positively perceived. This implies that skill development enhances nurses’ competence, confidence, and overall work performance, which may also contribute to better patient care outcomes. Similarly, nurses agreed that “*The hospital supports continuing education and specialization*” (mean = 2.90), highlighting institutional encouragement for advanced learning. The implication here is that formal support for specialization and education fosters career growth and professional development, which can improve staff retention and motivation.

Regarding recognition, respondents agreed with “*My efforts and hard work are recognized and appreciated*” (mean = 2.63) and “*My professional achievements are acknowledged by management*” (mean = 2.57). These results indicate that while recognition exists, it may not be consistently formalized. The implication is that structured acknowledgment programs, such as awards or commendations, can strengthen morale, engagement, and loyalty among nurses.

However, respondents disagreed with “*I have access to promotions or career advancement opportunities*” (mean = 2.44), signaling limited formal promotion pathways despite available professional development. This finding implies that the lack of clear advancement opportunities may reduce motivation, long-term commitment, and overall job satisfaction. Finally, the statement “*I feel that I have a clear career path in this organization*” (mean = 2.63) received agreement, indicating some clarity in career expectations. This suggests that while nurses perceive a general career framework, enhancing mentorship and clearly communicated advancement criteria could further improve satisfaction and professional engagement.

Overall, the findings suggest that professional growth and recognition are moderately present, but gaps in formal promotion opportunities and structured acknowledgment may hinder satisfaction. Hospitals that strengthen training programs, provide

consistent recognition, and establish clear promotion pathways are likely to increase nurses' motivation, engagement, and retention, ultimately benefiting both staff and patient care. This coincides with the study of Santiago et al. (2019), which found that nurses' job satisfaction increases when professional development programs are available, yet a lack of promotion opportunities can reduce engagement.

**Table 4.18. Factors Affecting the Respondents' Work Satisfaction in terms of Leadership and Management**

| Statement  | Mean        | Descriptor                   |
|--|-------------|------------------------------|
| ● <i>The hospital leadership is transparent and fair in their decisions.</i> | 2.31        | Disagree                     |
| ● <i>Nurse supervisors and managers provide clear guidance and support.</i>  | 2.68        | Agree                        |
| ● <i>Policies and rules are implemented fairly among staff.</i>              | 2.30        | Disagree                     |
| ● <i>Management listen and responds to staff concerns.</i>                   | 2.37        | Disagree                     |
| ● <i>I feel confident in the leadership of our institution.</i>              | 2.44        | Disagree                     |
| ● <i>Leaders promote a positive and respectful work environment</i>          | 2.54        | Agree                        |
| <b>Overall Mean Rating</b>   | <b>2.44</b> | <b>Slightly Dissatisfied</b> |

**Legend for the Mean:** Strongly Disagree: 1.00 – 1.75; Disagree: 1.76 – 2.50; Agree: 2.51 – 3.25; Strongly Agree: 3.26 – 4.00

**Legend for the Overall Mean Rating:** Dissatisfied: 1.00 – 1.75; Slightly Dissatisfied: 1.76 – 2.50; Slightly Satisfied: 2.51 – 3.25; Satisfied: 3.26 – 4.00

Table 4.18 presents the respondents' perceptions of leadership and management practices within their hospitals and how these factors affect work satisfaction. The overall mean rating of 2.44, interpreted as slightly dissatisfied, indicates that nurses perceive moderate shortcomings in leadership effectiveness and management support.

Among the statements, the highest-rated items were "Nurse supervisors and managers provide clear guidance and support" (mean = 2.68) and "Leaders promote a positive and respectful work environment" (mean = 2.54), suggesting that, on a day-to-day basis, immediate supervisors provide some level of direction and encouragement, and that there is recognition of efforts to maintain respect and professionalism in the workplace.

In contrast, lower-rated items revealed significant concerns. Respondents disagreed with "The hospital leadership is transparent and fair in their decisions" (mean = 2.31), "Policies and rules are implemented fairly among staff" (mean = 2.30), "Management listen and responds to staff concerns" (mean = 2.37), and "I feel confident in the leadership of our institution" (mean = 2.44). These findings imply that while supervisors may provide operational guidance, broader institutional leadership is perceived as lacking transparency, fairness, and responsiveness to staff needs. Such deficiencies can lead to feelings of uncertainty,

decreased motivation, and diminished trust in organizational decisions, ultimately affecting job satisfaction and retention.

The results of the analyses imply that hospital administrations need to strengthen leadership practices by fostering transparency in decision-making, consistently applying policies, actively listening to staff concerns, and building confidence through visible accountability and engagement. Effective leadership can enhance staff morale, reduce turnover, and promote a culture of trust, professionalism, and collaboration.

These results are supported by Labrague et al. (2018), who found that poor leadership and lack of managerial support are strongly associated with lower job satisfaction and higher burnout among nurses in Philippine hospitals. Likewise, Santiago et al. (2019) emphasized that transparent, supportive, and fair leadership positively affects nurses' engagement and retention. This also coincides with Aiken et al. (2018), who demonstrated that hospitals with strong, responsive leadership achieve better nurse satisfaction and patient care outcomes.

**Table 4.19. Factors Affecting the Respondents' Work Satisfaction in terms of Interpersonal Relationship and Teamwork**

| Statement   | Mean        | Descriptor                |
|---|-------------|---------------------------|
| ● <i>I am comfortable asking help from other team members when needed</i> | 2.61        | Agree                     |
| ● <i>All team members contribute equally to patient care</i>              | 2.64        | Agree                     |
| ● <i>I feel respected and supported by my colleagues.</i>                 | 2.99        | Agree                     |
| ● <i>Conflicts are resolved constructively in our unit.</i>               | 2.63        | Agree                     |
| ● <i>The communication within the team is clear and effective</i>         | 2.54        | Agree                     |
| ● <i>I have a good working relationship with my fellow nurses.</i>        | 3.07        | Agree                     |
| <b>Overall Mean Rating</b>  | <b>2.75</b> | <b>Slightly Satisfied</b> |

**Legend for the Mean:** Strongly Disagree: 1.00 – 1.75; Disagree: 1.76 – 2.50; Agree: 2.51 – 3.25; Strongly Agree: 3.26 – 4.00

**Legend for the Overall Mean Rating:** Dissatisfied: 1.00 – 1.75; Slightly Dissatisfied: 1.76 – 2.50; Slightly Satisfied: 2.51 – 3.25; Satisfied: 3.26 – 4.00

Table 4.19 highlights the respondents' perceptions of interpersonal relationships and teamwork in their hospital units, with an overall mean rating of 2.75, interpreted as slightly satisfied. This suggests that nurses generally perceive their working relationships positively, though there is still room for improvement.

It can be gleaned in the analysis that the highest-rated statements were "I have a good working relationship with my fellow nurses" (mean = 3.07) and "I feel respected and supported by my colleagues" (mean = 2.99), indicating that nurses experience mutual respect, support, and camaraderie within their teams. Such

positive interactions are essential for reducing work-related stress, improving collaboration, and enhancing patient care outcomes.

Other statements also received favorable responses, including “All team members contribute equally to patient care” (mean = 2.64), “Conflicts are resolved constructively in our unit” (mean = 2.63), “I am comfortable asking help from other team members when needed” (mean = 2.61), and “The communication within the team is clear and effective” (mean = 2.54). These findings suggest that nurses generally trust their colleagues, rely on team support, and experience effective communication in their units, all of which contribute to teamwork efficiency and collective problem-solving.

The results of the analysis imply that strong interpersonal relationships and collaborative teamwork serve as a buffer against stress and burnout, promote job satisfaction, and enhance the delivery of quality patient care. This stresses that hospital management should continue to foster team-building initiatives, encourage open communication, and provide conflict-resolution training to further strengthen cohesion and collaboration among nurses.

These findings are supported by Santos and Cruz (2019), who emphasized that positive collegial relationships, mutual respect, and effective communication improve nurse satisfaction and commitment to patient care. Further, this also corroborates with Tourangeau et al. (2014), who demonstrated that teamwork and strong professional relationships correlate positively with job satisfaction, engagement, and patient safety outcomes.

**Table 4.20. Factors Affecting the Respondents’ Work Satisfaction in terms of Overall Job Satisfaction**

| Statement  | Mean        | Descriptor                |
|--|-------------|---------------------------|
| ● <i>I am generally satisfied with my current job as a government nurse.</i> | 2.47        | Disagree                  |
| ● <i>I find my work meaningful and fulfilling.</i>                           | 2.67        | Agree                     |
| ● <i>I am proud to be a nurse in a government hospital.</i>                  | 2.88        | Agree                     |
| ● <i>I am thinking about leaving my current job.</i>                         | 2.79        | Agree                     |
| ● <i>I plan to stay in this organization for the next few years</i>          | 2.32        | Disagree                  |
| ● <i>I would recommend this hospital as a good workplace for nurses.</i>     | 2.81        | Agree                     |
| <b>Overall Mean Rating</b>   | <b>2.66</b> | <b>Slightly Satisfied</b> |

**Legend for the Mean:** *Strongly Disagree: 1.00 – 1.75; Disagree: 1.76 – 2.50; Agree: 2.51 – 3.25; Strongly Agree: 3.26 – 4.00*

Table 4.20 depicts the respondents’ perceptions of overall job satisfaction, capturing general attitudes toward their employment as government nurses. The overall mean rating of 2.66, interpreted as slightly satisfied, indicates that while nurses hold some positive views about their work, there remains a considerable degree of dissatisfaction.

Among the individual statements, the highest mean was recorded for “*I am proud to be a nurse in a government hospital*” (mean = 2.88, Agree), suggesting that professional identity and institutional affiliation contribute significantly to nurses’ positive perceptions of their role. Similarly, respondents agreed with “*I would recommend this hospital as a good workplace for nurses*” (mean = 2.81), reflecting a level of endorsement for their organization despite recognized challenges.

Moreover, it is worth noting that the respondents with “*I am thinking about leaving my current job*” (mean = 2.79) and “*I find my work meaningful and fulfilling*” (mean = 2.67), revealing a nuanced combination of professional fulfillment and retention concerns. These data reveal that although nurses find intrinsic value in their work, many are actively contemplating leaving their positions, likely due to extrinsic factors such as compensation, workload, or limited growth opportunities identified in previous tables.

In contrast, nurses disagreed with “*I am generally satisfied with my current job as a government nurse*” (mean = 2.47) and “*I plan to stay in this organization for the next few years*” (mean = 2.32), indicating that overall satisfaction and long-term retention intentions are relatively low. This pattern suggests that while nurses derive meaning and pride from their roles, systemic issues may be driving dissatisfaction and turnover intentions.

These findings are consistent with Lu et al. (2022), who found that nurses often report moderate levels of job satisfaction rooted in professional identity and meaningful work but are concurrently at risk of turnover due to workload, compensation, and managerial support challenges. In the Philippine context, Labrague and de los Santos (2021) observed that although nurses value their role and professional contribution, factors such as inadequate compensation, insufficient career development, and high stress contribute to intentions to leave. Similarly, this validates with Said and El-Shafei (2020), who highlighted that positive professional attitudes coexist with moderate overall satisfaction when organizational conditions do not fully support nurses’ needs.

**Relationship between the Respondents’ Demographic Profiles and the Factors Affecting their Work Satisfaction**

**Table 4.21.**

**Relationship between the Respondents’ Demographic Profiles and the Factors Affecting their Work Satisfaction**

| Demographic Profile             | p-value  | Interpretation  |
|---------------------------------|----------|-----------------|
| Age                             | 0.0021** | Significant     |
| Sex                             | 0.1079   | Not Significant |
| Civil Status                    | 0.0083** | Significant     |
| Highest Educational Attainment  | 0.0604   | Not Significant |
| Employment Status               | 0.0016** | Significant     |
| Length of Current Hospital Stay | 0.0375** | Significant     |
| Years of Experiences as a Nurse | 0.0281** | Significant     |
| Current Position                | 0.0009** | Significant     |

|                                      |          |             |
|--------------------------------------|----------|-------------|
| Work Shift                           | 0.0036** | Significant |
| Department/Unit of Assignment        | 0.0026** | Significant |
| Number of Patients Handled per Shift | 0.0006** | Significant |
| Salary                               | 0.0003** | Significant |

**Legend:** \*\*Significant at 0.05 level of significance

Table 4.21 presents the relationship between the respondents' demographic profiles and the factors affecting their work satisfaction in government hospitals. The findings indicate that age ( $p = 0.0021$ ), civil status ( $p = 0.0083$ ), employment status ( $p = 0.0016$ ), length of hospital stay ( $p = 0.0375$ ), years of professional experience ( $p = 0.0281$ ), current position ( $p = 0.0009$ ), work shift ( $p = 0.0036$ ), department/unit assignment ( $p = 0.0026$ ), number of patients handled per shift ( $p = 0.0006$ ), and salary ( $p = 0.0003$ ) are significantly associated with nurses' work satisfaction. These results suggest that both personal and job-related characteristics play a meaningful role in shaping nurses' perceptions of their compensation, benefits, workload, professional growth, leadership, teamwork, and overall job satisfaction. Conversely, sex ( $p = 0.1079$ ) and highest educational attainment ( $p = 0.0604$ ) were not statistically significant, indicating that male and female nurses, as well as nurses with different educational backgrounds, experience comparable levels of work satisfaction.

The significance of age implies that older nurses often report higher satisfaction, likely due to accumulated clinical experience, mastery of skills, and professional recognition, while younger nurses may place greater emphasis on career advancement and compensation opportunities (Labrague et al., 2020). Similarly, civil status affects satisfaction, as married nurses may prioritize work-life balance and benefits to support family responsibilities, whereas single nurses may focus more on career development (Santos & Cruz, 2019). Employment status also plays a critical role, with permanent nurses enjoying greater job security, access to benefits, and stability, which contribute positively to satisfaction, whereas contractual or probationary staff may feel less secure and report lower satisfaction (Labrague et al., 2020).

Additionally, the analysis reveals that length of current hospital stay and years of professional experience are positively correlated with satisfaction. Nurses who have served longer in their current hospital are likely to be more familiar with institutional procedures, develop stronger interpersonal relationships with colleagues, and demonstrate loyalty to the organization. Similarly, more experienced nurses tend to appreciate autonomy, leadership support, and professional growth opportunities, all of which contribute to higher satisfaction levels (Tourangeau et al., 2014).

The influence of current position, work shift, department/unit assignment, and number of patients handled per shift highlights the impact of job-related factors. Nurses in higher positions may enjoy greater authority, recognition, and access to professional development, while those working in high-stress units or with heavy workloads may be prone to fatigue and burnout. This underscores the importance of equitable staffing, balanced workloads, and strategic scheduling to promote job satisfaction (Tourangeau et al., 2014). Salary remains a critical determinant of satisfaction, with fair and competitive compensation enhancing

motivation, retention, and overall morale (Labrague et al., 2020; Santos & Cruz, 2019).

### Differences in the Factors Affecting Nurses' Work Satisfaction when Grouped According to their Profiles

The following table examines the significant differences in the factors affecting nurses' work satisfaction in government hospitals when they are grouped according to their profiles. To test whether the differences are statistically significant, analysis of variance was employed, tested at 0.05 level of significance.

**Table 4.22.**

### Differences in the Factors Affecting Nurses' Work Satisfaction when Grouped According to their Profiles

| Demographic Profile                 | p-value  | Interpretation  |
|-------------------------------------|----------|-----------------|
| Age                                 | 0.0192** | Significant     |
| Sex                                 | 0.307    | Not Significant |
| Civil Status                        | 0.0294** | Significant     |
| Highest Educational Attainment      | 0.1184   | Not Significant |
| Employment Status                   | 0.0002** | Significant     |
| Length of Current Hospital Stay     | 0.0005** | Significant     |
| Years of Experiences as a Nurse     | 0.0061** | Significant     |
| Current Position                    | 0.0084** | Significant     |
| Work Shift                          | 0.0092** | Significant     |
| Department/Unit of Assignment       | 0.0004** | Significant     |
| Number of Patients Handle per Shift | 0.0071** | Significant     |
| Salary                              | 0.0014** | Significant     |

**Legend:** \*\*Significant at 0.05 level of significance

Table 4.22 analyzes the differences in the factors affecting nurses' work satisfaction when grouped according to their demographic profiles. The analysis shows that age ( $p = 0.0192$ ), civil status ( $p = 0.0294$ ), employment status ( $p = 0.0002$ ), length of current hospital stay ( $p = 0.0005$ ), years of experience as a nurse ( $p = 0.0061$ ), current position ( $p = 0.0084$ ), work shift ( $p = 0.0092$ ), department/unit assignment ( $p = 0.0004$ ), number of patients handled per shift ( $p = 0.0071$ ), and salary ( $p = 0.0014$ ) all display statistically significant differences in work satisfaction. In contrast, sex ( $p = 0.307$ ) and highest educational attainment ( $p = 0.1184$ ) were not significant, suggesting these variables do not lead to meaningful differences in satisfaction levels.

The significance of these demographic variables indicates that nurses' perceptions of their work satisfaction vary depending on their personal and professional characteristics. For instance, age-related differences suggest that younger and older nurses evaluate their work satisfaction differently, potentially reflecting differing expectations for career growth, compensation, and recognition (Labrague et al., 2020). Meanwhile, civil status differences indicate that married and single nurses prioritize aspects of satisfaction

differently, with married nurses often valuing benefits and work-life balance more, while single nurses may focus on professional development (Santos & Cruz, 2019).

Similarly, employment status significantly affects satisfaction, highlighting that permanent nurses experience higher satisfaction due to job security and access to benefits, whereas contractual nurses may report lower satisfaction (Labrague et al., 2020). Differences in length of hospital stay and years of experience further illustrate that tenure and professional experience influence satisfaction levels, with more experienced nurses reporting higher contentment due to familiarity with institutional processes and established collegial relationships (Tourangeau et al., 2014).

Significant differences in current position, work shift, department/unit, and patient load reveal that job roles and work conditions affect satisfaction. This means that nurses in supervisory positions or less demanding units tend to report higher satisfaction, while those in high-intensity departments with heavier workloads experience lower satisfaction, emphasizing the importance of equitable staffing and workload distribution (Lu et al., 2022). Notably, salary differences underline the role of fair and competitive compensation as a determinant of satisfaction, motivation, and retention.

#### **Proposed Program to promote work-life balance among nurses employed in government hospitals**

##### *Proposed program to enhance work-life balance of nurses*

The proposed Enhanced Work-Life Balance Program was formulated based on the findings of the study regarding the factors affecting the work satisfaction of nurses employed in government hospitals. The results revealed that nurses experienced dissatisfaction in areas such as compensation, benefits, workload and staffing, work environment, and leadership and management. On the other hand, interpersonal relationships and professional growth were identified as relatively positive factors contributing to work satisfaction.

In response to these findings, the proposed program aims to strengthen nurses' work satisfaction and overall well-being through various interventions. These include stress management and resilience training, time management and work-life balance seminars, leadership and communication workshops, wellness and mental health promotion activities, recognition programs, mentorship for early-career nurses, and flexible scheduling strategies.

Furthermore, the program emphasizes the importance of improving teamwork, enhancing supervisory support, providing opportunities for career advancement, and reducing stress caused by heavy workloads and staffing shortages. Through the implementation of these interventions, the program is expected to improve nurses' morale, retention, productivity, and quality of patient care.

Therefore, the proposed Enhanced Work-Life Balance Program may serve as a practical basis for hospital administrators and nursing managers in developing policies and interventions that will promote nurses' job satisfaction and organizational commitment.

## **5. SUMMARY OF FINDINGS, CONCLUSION, AND RECOMMENDATION**

This chapter presents the summary of findings, conclusions drawn from the study, and recommendations for stakeholders and future research.

### **Summary of Findings**

#### *Respondents' Demographic Profiles*

The data reveal that the majority of nurse respondents belong to the 23–27 years age group, representing 63.4% of the sample. This is followed by those aged 33–37 years (14.3%), 38 years and above (8.9%), 28–32 years (7.1%), and 18–22 years (6.3%). The distribution indicates that most nurses in government hospitals are relatively young and likely in the early stages of their careers. This suggests that the workforce is composed largely of early-career practitioners who are still developing clinical competence and professional identity.

In addition, The respondents are predominantly female, accounting for 83.8% of the population, while males make up only 16.1%. This gender imbalance highlights the female-dominated nature of the nursing profession within government hospitals. The findings suggest that workplace dynamics, communication patterns, and perceptions of job roles may be influenced by this majority, while male nurses may face unique challenges such as role stereotyping or increased physical expectations.

Moreover, Most respondents are single, representing 87.7% of the sample, while only 14.3% are married. This indicates that the majority of nurses have fewer family responsibilities and may enjoy greater flexibility in adapting to work schedules, overtime, and shift assignments. Single nurses may be more exposed to work-related stress due to high expectations, whereas married nurses might balance career and family priorities, potentially influencing their satisfaction levels differently.

In terms of educational attainment, the overwhelming majority of respondents hold a bachelor's degree (97.3%), while a small fraction have a master's degree (2.7%), and none hold a doctorate. This suggests that most nurses meet the minimum professional qualification for practice, with limited representation in advanced academic training.

Furthermore, a majority of nurses are in permanent positions (58.9%), followed by contractual (37.5%) and job order staff (3.6%). This distribution reflects a workforce where most have job stability and access to benefits, which can enhance satisfaction. Conversely, contractual and job order nurses may experience insecurity and limited career advancement, which can negatively impact their motivation, engagement, and overall satisfaction.

Also, the largest proportion of respondents (47.3%) have been employed in their current hospital for 1–2 years, followed by 6 months–1 year (18.8%), and five years or more (17%). Smaller percentages are observed for 2–3 years (12.5%) and 3–4 years (4.5%). This pattern indicates a workforce that is relatively new to their hospital assignments. Nurses with shorter tenure may be adjusting to institutional policies and procedures, potentially experiencing fluctuating satisfaction, whereas those with longer tenure are likely more familiar with the environment and better adapted to their roles, contributing to higher satisfaction.

In addition, the distribution of respondents' total nursing experience mirrors their current hospital tenure, with nearly half having 1–2 years of experience (47.3%) and a smaller proportion reporting five years or more (17%). Nurses with less experience

may face challenges in managing workloads, time, and responsibilities, which can influence satisfaction. Experienced nurses, by contrast, likely possess greater confidence and competence, which enhances their engagement and satisfaction with their work environment.

Moreover, Most respondents hold the position of Nurse I (74.1%), while 25.9% are Nurse II. This indicates that the majority occupy entry-level roles, suggesting a workforce still progressing through professional advancement pathways. Entry-level nurses may experience limited autonomy and recognition, affecting motivation and job satisfaction, whereas higher-ranking nurses may enjoy greater responsibility and acknowledgment, contributing positively to their satisfaction.

On the other hand, majority of nurses (76.8%) are assigned to 8-hour shifts, with only 23.2% working 12-hour shifts. Shorter shifts are likely to support work-life balance, reduce fatigue, and sustain productivity. Longer shifts may increase physical and emotional demands, potentially affecting satisfaction and well-being.

The highest proportion of respondents work in the Emergency Room (21.4%), followed by the Operating Room (17%) and Obstetrics/Gynecology (13.4%). Fewer nurses are assigned to specialized units such as the ICU, Pediatric ICU, and High-Risk Pregnancy Unit. Nurses in high-acuity areas may face higher workloads and emotional stress, influencing satisfaction, while those in less acute areas may have more favorable work experiences.

Furthermore, most nurses handle 11–20 patients per shift (28.6%), followed by 1–5 patients (23.2%) and 21–30 patients (21.4%), while a smaller group handles over 30 patients (11.6%). Higher patient loads can lead to stress and reduced satisfaction, whereas manageable workloads can support quality care and enhance morale.

In terms of monthly salary, respondents primarily earn between ₱40,001–₱50,000 (44.6%), followed by ₱30,001–₱40,000 (33%), and ₱20,001–₱30,000 (22.3%). No respondents earn below ₱20,000 or above ₱50,000. Salaries appear concentrated in mid-range brackets, which may support financial stability and moderate satisfaction.

#### ***Factors Affecting the Work Satisfaction of the Respondents***

The analysis of compensation indicates that nurses are generally dissatisfied with their core salary, hazard pay, overtime remuneration, and performance-based incentives, as reflected by an overall mean rating of 2.35. While night shift differentials are perceived as fair, the respondents view their base salary as inadequate relative to responsibilities, and they report inconsistencies in payment. This dissatisfaction with compensation can negatively influence motivation, job commitment, and retention, highlighting the need for hospital administrators to review and improve salary structures, hazard pay, and incentive programs to ensure equitable and timely remuneration.

Moreover, Nurses expressed slight dissatisfaction with the benefits provided by their hospitals, with an overall mean of 2.42. While retirement contributions, health insurance, and emergency support are perceived positively, respondents reported insufficient paid vacation, challenges in accessing emergency leave, and a lack of supplementary benefits such as free meals, uniforms, or transportation. These gaps suggest that while some financial and health-related benefits are adequate, the overall package does not

fully meet nurses' needs, potentially impacting work-life balance, well-being, and long-term organizational loyalty.

In addition, respondents indicated dissatisfaction with workload and staffing conditions, as shown by an overall mean of 1.82. Nurses perceived the nurse-to-patient ratio as unreasonable, reported feeling overloaded, and highlighted that understaffing compromises patient care, leads to burnout, and results in uneven distribution of overtime and additional tasks. These findings underscore the strong link between staffing levels, workload, and work satisfaction, emphasizing the need for hospitals to improve nurse-to-patient ratios and equitable task distribution to reduce stress and improve retention.

The overall mean rating of 2.49 reflects slight dissatisfaction with the work environment and available resources. Nurses feel physically safe and recognize a culture of safety and professionalism, yet they report inadequate medical supplies, poorly maintained equipment, and suboptimal facilities. These limitations negatively impact efficiency, patient care quality, and staff morale. The findings suggest that enhancing facilities, ensuring regular equipment maintenance, and providing sufficient resources can improve job satisfaction and support safer, more effective care.

In terms of professional growth and recognition received an overall mean of 2.68, indicating moderate satisfaction. Nurses appreciate access to training, seminars, and institutional support for continuing education, and they generally feel their efforts are recognized. However, limited formal promotion opportunities and unclear advancement pathways hinder overall satisfaction. This suggests that while skill development is valued, hospitals should provide structured recognition programs and clear career progression paths to enhance motivation, engagement, and retention.

Furthermore, Leadership and management received an overall mean of 2.44, reflecting slight dissatisfaction. Immediate supervisors were seen as providing guidance and fostering a respectful environment, but broader institutional leadership was perceived as lacking transparency, fairness, and responsiveness. Nurses expressed limited confidence in management decisions and policy implementation, which may reduce trust, motivation, and job satisfaction. Strengthening transparency, accountability, and staff engagement in leadership practices can improve morale and retention.

On the other hand, Respondents reported slight satisfaction with interpersonal relationships and teamwork, with an overall mean of 2.75. Nurses feel respected, supported, and able to communicate effectively with colleagues. Team members generally collaborate and contribute equally, with conflicts resolved constructively. Strong collegial relationships and teamwork contribute positively to job satisfaction, reduce stress, and support effective patient care, highlighting the importance of continued team-building initiatives and open communication within hospital units.

Lastly, Overall job satisfaction among nurses was slightly positive, with a mean of 2.66. Respondents take pride in being government nurses and recognize the meaningfulness of their work, yet they are concerned about retention and long-term satisfaction, as reflected in low agreement with statements regarding general satisfaction and plans to stay in the organization. While professional identity and fulfillment are strong, systemic issues such as compensation, workload, and limited growth opportunities contribute to

dissatisfaction and turnover intentions, indicating areas where hospital administration can focus improvement efforts.

### ***Relationship between the Respondents' Demographic Profiles and the Factors Affecting their Work Satisfaction***

The study found that age, civil status, employment status, length of hospital stay, years of professional experience, current position, work shift, department/unit assignment, number of patients handled per shift, and salary were significantly associated with nurses' work satisfaction. These findings suggest that both personal and job-related factors influence nurses' satisfaction in terms of compensation, workload, professional growth, leadership, teamwork, and overall work experience. Older nurses, those with longer years of service, permanent employment, higher positions, and better salary levels generally reported higher satisfaction. On the other hand, nurses assigned to demanding shifts, high-stress units, or handling more patients per shift tended to experience lower satisfaction. Meanwhile, sex and highest educational attainment were not significantly associated with work satisfaction, indicating that nurses experience similar levels of satisfaction regardless of gender or educational background.

### ***Differences in the Factors Affecting Nurses' Work Satisfaction when Grouped According to their Profiles***

The study found that age, civil status, employment status, length of current hospital stay, years of nursing experience, current position, work shift, department or unit assignment, number of patients handled per shift, and salary had significant differences in nurses' work satisfaction. These findings indicate that both demographic and work-related factors influence satisfaction levels among nurses. Higher satisfaction was commonly observed among older nurses, those with longer experience, permanent employment, higher positions, longer hospital stay, and better salary. Moreover, work-related conditions such as shift schedule, department assignment, and patient load significantly affected nurses' satisfaction. Nurses assigned to high-demand units, heavier workloads, and stressful shifts were more likely to experience lower satisfaction. In contrast, sex and highest educational attainment were not significantly associated with work satisfaction, indicating that gender and educational background do not create meaningful differences in nurses' satisfaction levels.

## **Conclusion**

The findings of the study reveal that the nursing workforce in government hospitals is predominantly composed of young, early-career, single, and female nurses, most of whom occupy entry-level positions with limited years of experience. While a majority hold permanent employment and work manageable 8-hour shifts, many are still in the process of adjusting to professional roles, institutional systems, and workplace demands. This demographic profile suggests a workforce that is developing in competence and stability but remains vulnerable to stress, workload pressures, and career uncertainty.

In terms of work satisfaction, the results indicate that nurses are generally only slightly satisfied overall, with notable dissatisfaction in critical areas such as compensation, benefits, workload and staffing, and leadership practices. In particular, heavy workloads, inadequate staffing, and perceived inequities in salary and incentives significantly contribute to stress, reduced motivation, and potential burnout. Similarly, limitations in resources and lack

of transparency in management further affect morale and trust in the organization.

Conversely, interpersonal relationships and teamwork, as well as opportunities for professional growth, emerged as relatively stronger areas, contributing positively to nurses' sense of support and engagement. Despite challenges, nurses continue to demonstrate professional pride and commitment, reflecting resilience and dedication to their roles.

Overall, the study concludes that while intrinsic factors such as professional fulfillment and teamwork sustain nurses' engagement, systemic and organizational issues remain major barriers to achieving higher job satisfaction and long-term retention. Addressing concerns related to compensation, staffing, leadership transparency, and career development is essential to improve nurses' well-being, strengthen workforce stability, and ensure the delivery of quality healthcare services.

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## **Recommendations**

Based from the findings of the study, the following are recommended:

1. For Hospital Administrators and Government Health Institutions: It is recommended that compensation systems be regularly reviewed and adjusted to ensure fairness, timeliness, and adequacy of salaries, hazard pay, overtime compensation, and performance-based incentives. Strengthening financial and non-financial rewards may improve nurses' work satisfaction, motivation, and retention in government hospitals.
2. For Hospital Management and Human Resource Departments: Additional employee benefits such as flexible work schedules, expanded leave privileges,

transportation assistance, emergency support, and meal provisions should be enhanced to promote work-life balance and reduce occupational stress among nurses.

3. For Nursing Administrators and Workforce Planners: Staffing patterns and nurse-to-patient ratios should be reassessed to ensure equitable workload distribution. Appropriate task delegation and adequate staffing may help minimize burnout, reduce fatigue, and improve the quality of patient care.
4. For Hospital Administrators and Government Agencies: Continuous upgrading and maintenance of medical equipment, supplies, and healthcare facilities should be prioritized to provide nurses with a safe, efficient, and supportive working environment conducive to professional practice.
5. For Nursing Service Offices and Professional Development Units: Structured career advancement pathways, recognition systems, and continuing professional development programs should be strengthened to foster professional growth, job satisfaction, and long-term retention among nurses.
6. For Hospital Leaders and Supervisors: Leadership and management practices should be enhanced through transparency, accountability, participatory decision-making, and leadership training programs for supervisors to cultivate trust, collaboration, and organizational commitment among nursing personnel.
7. For Nursing Departments and Training Offices: Teamwork and interprofessional collaboration should be sustained through regular team-building activities, communication enhancement programs, and conflict resolution initiatives to strengthen workplace relationships and organizational harmony.
8. For Human Resource Managers and Nursing Administrators: Intervention programs should be tailored according to nurses' demographic and work-related characteristics. Mentorship opportunities for early-career nurses, workload modifications, and additional support for contractual personnel may help address specific workplace concerns and improve job satisfaction.
9. For Scheduling Officers and Nursing Supervisors: Flexible scheduling systems, balanced shift rotations, and limitations on consecutive night duties or extended working hours should be implemented to reduce physical exhaustion, improve work-life balance, and enhance overall well-being.
10. For Nursing Education and Training Units: Comprehensive onboarding programs, mentorship initiatives, and continuing competency development activities should be provided for newly employed and early-career nurses to strengthen professional competence, confidence, and workplace adaptation.
11. For Government Health Agencies and Hospital Administrators: Greater career stability should be promoted by providing clear opportunities for contract renewal, plantilla positions, and pathways toward permanent employment to improve organizational loyalty and reduce workforce turnover.
12. For Hospital Quality Assurance and Research Offices: Regular employee satisfaction surveys, consultation meetings, and feedback mechanisms should be conducted

to continuously assess workplace concerns and guide evidence-based institutional improvements.

13. For Occupational Health Units and Hospital Management: Wellness initiatives, mental health support services, stress management programs, and recreational activities should be institutionalized to enhance nurses' psychosocial well-being and resilience in the workplace.
14. For Policy Makers and Hospital Administrators: Nurses should be actively involved in the formulation and evaluation of hospital policies, staffing systems, and clinical protocols to promote empowerment, professional engagement, and shared governance.
15. For Hospital Administrators, Nursing Leaders, and Future Researchers: A comprehensive work-life balance program integrating flexible scheduling, wellness initiatives, employee recognition, and professional development opportunities should be developed, implemented, and regularly evaluated to ensure its effectiveness in improving nurses' work satisfaction and organizational commitment.

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## APPENDICES

### APPENDIX A

#### Letter to the Dean to Conduct the Study



Republic of the Philippines  
**PALAWAN STATE UNIVERSITY**  
 Puerto Princesa City



**GRADUATE SCHOOL**

February 10, 2026

**TERESITA D. TAJOLOSA, PhD**  
 Dean, Graduate School  
 Palawan State University  
 Manalo Campus, Puerto Princesa City

Dear Dean Tajolosa,


Good day!

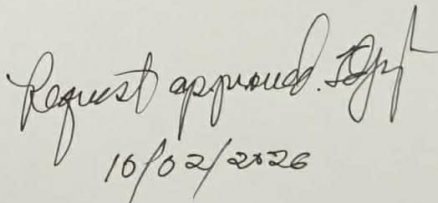
The undersigned is a graduate student of Master of Science in Nursing and is presently working on her graduate thesis entitled "**Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance**". This study aims to determine the factors affecting work satisfaction of regular nurses employed in Northern Government Hospitals which will be used as a baseline for the Institution to promote a healthy work-life balance, quality and effective nursing care.


The researcher would like to request permission from your office to allow her to conduct the study. Rest assured that the concerned research committees have reviewed the study. Your kind approval for the above-stated request is highly appreciated.

Thank you very much for your support and cooperation.  
 Respectfully yours,

Respectfully yours,

  
**FRANCESCA G. AMAR, RN**  
 MSN-NSA Student  
 Email: [202350198@psu.palawan.edu.ph](mailto:202350198@psu.palawan.edu.ph)  
 Contact number: 09093081335/09953504221

Request approved.   
 10/02/2026

Noted by:   
**OTELIO H. JUANZO Jr. RN, RM, MSN, LPT**  
 Thesis Adviser

### APPENDIX B

#### Letter to the Chiefs of Hospitals

February 20, 2026

**ARIANNE CAPALLA, MD**

Chief of Hospital

Coron district hospital

Municipality of Coron

Province of Palawan

Dear Dr. Capalla;

Greetings in the Name of the Most Merciful and Most Gracious!

I, **MS. FRANCESCA G. AMAR**, a Master of Science in Nursing major in nursing service administration student at Palawan State University in Puerto Princesa City, is currently working on my thesis paper entitled "**Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance**".

This study seeks to identify the factors influencing job satisfaction among nurses employed in Northern government hospitals. The findings will serve as baseline data for the institution in developing strategies to promote a healthy work-life balance and to enhance the quality and effectiveness of nursing care in the province of Palawan. In addition, the study will describe the demographic profile of the respondents and examine the significant relationships between their demographic characteristics and the factors affecting job satisfaction. It will also determine whether there are significant differences in the factors influencing job satisfaction when respondents are grouped according to their demographic profiles. Finally, the study aims to develop a program designed to promote work-life balance among nurses employed in government hospitals in Northern Palawan.

The respondents of the study are nurses with permanent, non-permanent, or contractual employment status, who have been working in their current hospital for a minimum of six (6) months, and who do not hold any official designations such as supervisory, managerial, or leadership roles. Answering the questionnaire would take 5 to 10 minutes and will be gathered not during duty hours. In the study, no name of hospitals will be mentioned. The anonymity of the respondents and hospitals will be assured and gathered information will be kept confidential. Moreover, the results of this undertaking will not reflect to you as the Chief of the Hospital nor to the Nurses in the hospitals.

In view of this, I would like to request permission to be allowed and be given with approval to conduct the study in your institution through a face to face/online gathering of data from February 9 to 28, 2026.

Attached here are the documents pertaining to my request for your reference

- a. Research instrument
- b. Ethics clearance

I am looking forward to your approval on this matter. Rest assured that the results of this study will be communicated into your office

Respectfully yours,



**FRANCESCA G. AMAR, RN**

MSN-NSA Student

Email: 202350198@psu.palawan.edu.ph

Contact number: 09093081335/09953504221

Noted by:

**OTELIO H. JUANZO Jr. RN, RM, MSN, LPT**

Thesis Adviser



Republic of the Philippines  
**PALAWAN STATE UNIVERSITY**  
Puerto Princesa City  
**GRADUATE SCHOOL**



February 09, 2026

**MAURA D. CATABIJAN, MD**  
Chief of Hospital  
Northern Palawan Provincial Hospital  
Municipality of Taytay  
Province of Palawan

Greetings in the Name of the Most Merciful and Most Gracious!

I, **MS. FRANCESCA G. AMAR**, a Master of Science in Nursing major in nursing service administration student at Palawan State University in Puerto Princesa City, is currently working on my thesis paper entitled "**Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance**".

This study seeks to identify the factors influencing job satisfaction among nurses employed in Northern government hospitals. The findings will serve as baseline data for the institution in developing strategies to promote a healthy work-life balance and to enhance the quality and effectiveness of nursing care in the province of Palawan. In addition, the study will describe the demographic profile of the respondents and examine the significant relationships between their demographic characteristics and the factors affecting job satisfaction. It will also determine whether there are significant differences in the factors influencing job satisfaction when respondents are grouped according to their demographic profiles. Finally, the study aims to develop a program designed to promote work-life balance among nurses employed in government hospitals in Northern Palawan.

The respondents of the study are nurses with permanent, non-permanent, or contractual employment status, who has been working in their current hospital for a minimum of six (6) months, and who do not hold any official designations such as supervisory, managerial, or leadership roles. Answering the questionnaire would take 5 to 10 minutes and will be gathered not during duty hours. In the study, no name of hospitals will be mentioned. The anonymity of the respondents and hospitals will be assured and gathered information will be kept confidential. Moreover, the results of this undertaking will not reflect to you as the Chief of the Hospital nor to the Nurses in the hospitals.

In view with this, I would like to request permission to be allowed and be given with approval to conduct the study in your institution through a face to face/online gathering of data from February 9 to 28, 2026.

Maura G. Catabijan, MD  
110-110-034497

APPENDIX C

Letter of Approval from Hospitals



Francesca Garcellano AMAR <202350198@psu.palawan.edu.ph>

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## Approval of Request for Data Collection

1 message

---

CSGH Planning and Training Unit <csghplanningandtrainingunit@gmail.com>

Thu, Feb 19, 2026 at 1:38 PM

To: 202350198@psu.palawan.edu.ph

Dear Ms. Amar,

Greetings!

We are pleased to inform you that your request to conduct data collection for your thesis entitled *"Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance."* has been **APPROVED** subject to the following conditions:

1. Coordination shall be made with the Nursing Division prior to data collection. Data collection shall be conducted such that it will not hamper nor interfere nursing services.
2. Participation of nursing staff shall be strictly voluntary.
3. No hospital-sensitive information shall be included in the study.
4. All ethical standards on confidentiality and data privacy shall be observed.
5. A copy of the final research output shall be furnished to CSGH for reference and possible policy improvement.

Kindly ensure compliance to the above-mentioned conditions throughout the duration of your study.

Thank you very much, and we wish you success in your research endeavors.

Truly yours,

**FRANCIS REGIS M. VILLARICO**

*Designated Training Officer*

*Culion Sanitarium and General Hospital*



Republic of the Philippines  
**PALAWAN STATE UNIVERSITY**  
 Puerto Princesa City



**GRADUATE SCHOOL**

April 06, 2026

**ARIANNE CAPALLA, MD**  
 Chief of Hospital  
 Coron district hospital  
 Municipality of Coron  
 Province of Palawan

**CORON DISTRICT HOSPITAL**  
 Office of the Chief of Hospital  
**RECEIVED**  
 APR 06 2026  
 B<sub>1</sub>: Ariane Capalla, MD  
 Time: 4:13 PM

Dear Dr. Capalla;

Greetings in the Name of the Most Merciful and Most Gracious!

I, **MS. FRANCESCA G. AMAR**, a Master of Science in Nursing major in nursing service administration student at Palawan State University in Puerto Princesa City, is currently working on my thesis paper entitled "**Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance**".

This study seeks to identify the factors influencing job satisfaction among nurses employed in Northern government hospitals. The findings will serve as baseline data for the institution in developing strategies to promote a healthy work-life balance and to enhance the quality and effectiveness of nursing care in the province of Palawan. In addition, the study will describe the demographic profile of the respondents and examine the significant relationships between their demographic characteristics and the factors affecting job satisfaction. It will also determine whether there are significant differences in the factors influencing job satisfaction when respondents are grouped according to their demographic profiles. Finally, the study aims to develop a program designed to promote work-life balance among nurses employed in government hospitals in Northern Palawan.

The respondents of the study are nurses with permanent, non-permanent, or contractual employment status, who have been working in their current hospital for a minimum of six (6) months, and who do not hold any official designations such as supervisory, managerial, or leadership roles. In the study, no name of hospitals will be mentioned. The anonymity of the respondents and hospitals will be assured and gathered information will be kept confidential. Moreover, the results of this undertaking will not reflect to you as the Chief of the Hospital nor to the Nurses in the hospitals.

In view with this, I would like to request permission to be allowed and be given with approval to conduct the study in your institution through a face to face/online gathering of data from February 9 to 28, 2026.

Scanned with CamScanner

## APPENDIX D

### Request letter for Questionnaire Validation

September 2025

Dear Ma'am/Sir,

Greetings of peace and respect!

I am Francesca G. Amar, a graduate student of the Master of Science in Nursing, Major in Nursing Service Administration at Palawan State University Graduate School. As part of the requirements for my thesis entitled:

“Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance,”

I have developed a research instrument (questionnaire) which will be used for data collection. In line with this, I humbly request your expertise to review and validate the questionnaire in terms of content, clarity, appropriateness, and relevance to ensure its accuracy and reliability.

Your valuable insights and recommendations will greatly contribute to strengthening the quality of this study. Rest assured that your time and effort will be deeply appreciated and properly acknowledged in my thesis.

Thank you very much for your kind consideration and support.

Respectfully yours,



**FRANCESCA G. AMAR, RN**

Researcher

Noted by:



**OTELIO H. JUANZO Jr. RN, RM, MSN, LPT**

Thesis Adviser

## APPENDIX E

### Letter to the Respondent

Date: \_\_\_\_\_

Dear Respondent,

I hope this message reaches you in good health. My name is Francesca G. Amar, RN, a graduate student at Palawan State University, currently pursuing a Master of Science in Nursing (MSN-NSA) with a major in Nursing Service Administration. I am conducting a research study titled “*Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance*,” under the guidance of my adviser, Otelio H. Juanzo, Jr., RN, MSN.

The purpose of this study is to explore the various factors that influence job satisfaction among nurses working in northern government hospitals in Palawan. Your insights and experiences as a practicing nurse are vital to this research, as they will greatly contribute to the development of strategies aimed at enhancing work-life balance—ultimately supporting both staff well-being and patient care quality. Attached to this letter are the informed consent form and the questionnaire for your review and participation. Please be assured that all responses will be treated with the utmost confidentiality and will be used solely for

academic purposes. Your participation is completely voluntary, and you may choose to withdraw at any time without any negative consequences.

Thank you very much for your time, support, and contribution to the advancement of nursing practice in our province.

Sincerely,

  
FRANCESCA G. AMAR, RN

Researcher

Noted by:



OTELIO H. JUANZO Jr. RN, RM, MSN

Thesis Adviser

**APPENDIX F**

**Informed Consent Form**



Republic of the Philippines  
PALAWAN STATE UNIVERSITY  
Puerto Princesa City  
GRADUATE SCHOOL



|                       |  |
|-----------------------|--|
| <b>Researcher:</b>    | FRANCESCA G. AMAR  |
| <b>School:</b>        | Palawan State University Graduate School   |
| <b>Degree:</b>        | Master of Science in Nursing, Major in Nursing Service Administration  |
| <b>Name of Study:</b> | Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance |
| <b>Adviser:</b>       | Otelio H. Juanzo, Jr., RN, MSN   |

|                                |  |
|--------------------------------|--|
| <b>Introduction</b>            | Work satisfaction is a worldwide concern, especially in healthcare, where it plays a key role in improving the quality of patient care and creating a positive work environment (Salahat & Al-Hamdan, 2022).   |
| <b>Purpose of the Study</b>    | This study aims to determine the factors affecting work satisfaction of nurses in three (3) Northern Government hospitals in Palawan, the pertinent data in this research can be used to lessen the burnout rates and increase work satisfaction which will provide quality and effective nursing care.  |
| <b>Type of Research</b>        | The study is descriptive-quantitative research using a survey which employ evaluative, comparative and correlational methods.  |
| <b>Participant Selection</b>   | The selection of the respondents will staff nurses without official designation and with at least six (6) months of employment in their current hospital stay.   |
| <b>Voluntary Participation</b> | Participation is voluntary. Kindly participate in the study with complete honesty  |
| <b>Procedures</b>              | The respondents will be asked to answer a paper-pen survey or an online google form. For the pen-paper the researcher will personally administer the survey at the convenient time and place and for the google form, nursing supervisors will be asked to distribute them thru their respective group chat Only the respondent/s will be present during data collection. The questionnaire has two parts; Part 1 include the socio-demographic profile of respondents while part 2 is about factors affecting work satisfaction answerable by 4-point Likert scale. |
| <b>Duration</b>                | Participating in this study may take a total of 10 to 15 minutes.  |
| <b>Risk</b>                    | Participation in this study may involve negligible risk of inconvenience. Completing the questionnaire requires a lot of time and effort. Some questions may require personal reflection   |

|                                   |  |
|-----------------------------------|--|
| <b>Benefits</b>                   | Answering the survey contributes to data needed for conclusion and recommendation of this study and for output for improvement as well. And will provide a basis for an enhanced work-life balance for nurses in the province.   |
| <b>Risks to the researchers</b>   | No harm to the researcher, the study will be funded by the researcher, time and effort will be needed to complete the study  |
| <b>Compensation</b>               | The respondents will be served with refreshments (drinks and light meals or snacks).   |
| <b>Sharing the Results</b>        | Information given will be collected and presented. The individual answers of each respondent will not be discussed   |
| <b>Data Privacy and Archiving</b> | the researcher will make every reasonable effort to maintain the confidentiality of participants' data. All collected information will be anonymized prior to analysis and reporting, and no personal identifiers or individual responses will be shared publicly. The findings will not be used to assess any participant's job performance or reflect on the reputation of their respective government hospital.   |
| <b>Right to Refuse or moment.</b> | Completed questionnaires will be kept in a locked storage box, accessible only to the researcher. Please note that while confidentiality will be prioritized, there may be limits—such as legal requirements or situations involving serious threats to public safety.<br>Digital Data Security – Electronic records, including transcripts, survey responses, will be stored on a password-protected computer and encrypted storage devices to prevent unauthorized access.<br>Five years after the study's final defense and publication, all questionnaires will be securely destroyed through shredding.<br>the participant may withdraw or refuse to participate at any <b>Withdraw</b> |

**Foreseeable Circumstances Under Which Participation**

**May Be Terminated by the Researcher**

Participation in this study may be terminated by the researcher under the following circumstances:

- If a participant withdraws consent or fails to meet the inclusion criteria.
- If the researcher determines that continued participation may pose undue risk or harm to the participant.
- If the study is discontinued due to unforeseen circumstances, ethical concerns, or institutional decisions.

**Right to Access the Result of the study**

Respondents are entitled to access the study results upon request.

The findings will be summarized, ensuring that all personally identifiable information is excluded. Reports containing aggregate findings and conclusions may only be shared with the respondent's hospital.

**Expenses**

No expenses are expected to be incurred by respondents throughout the study.

**Source of Funds/Budget**

The budget for the conduct of this research is from personal expenses of the researcher and will not be incurred by the participants. This is a student-led academic study under Palawan State University. There is no external funding or sponsor.

**Conflict of Interest**

The researcher is self-funding this study and is a nurse, which has no commercial ties or affiliations with the selected government hospitals in Palawan.

**Who to Contact?**

This study is being done by Ms. Francesca G. Amar, RN. Her phone number is 09093081335. If I have any questions or concerns about the study, I can call and ask her about them.

DMMMSU has approved the study, and may be reached through the following contact for information regarding the rights of study participants, including grievances and complaints:

Don Mariano Marcos Memorial State University  
Address: Bacnotan, La Union, Philippines

### CERTIFICATE OF CONSENT

I have read all the information discussed above. I had the time to ask for clarifications about this study and I am satisfied with the answers given by the researcher. When I sign my name, this means that I agree to voluntarily participate in the study.

Name of Participant: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

### APPENDIX G Research Instrument

#### Instructions:

Please provide accurate and honest answers to the following questions. Your responses will be kept confidential and used for research purposes only.

#### PART 1: RESPONDENTS SOCIO-DEMOGRAPHIC PROFILE

##### 1. Age:

- 18-22 years old                       23-27 years old  
 28-32 years old                       33-37 years old  
 38 year old and higher

##### 2. Sex: Male Female

##### 3. Civil Status: Single Married Widowed Separated Others: \_\_\_\_\_

##### 4. Highest attained educational credential:

- Bachelor of Science in Nursing (BSN)  
 Master's Degree  
 Doctorate Degree  
 Others: \_\_\_\_\_

##### 5. Employment Status:

- Regular/Permanent  
 Contractual  
 Job Order  
 Others: \_\_\_\_\_

##### 6. Length of Current Hospital Stay (in years/months):

- 6 months to 1 year  
 1-2 years  
 2-3 years  
 3-4 years  
 5 years and above

##### 7. Total Years of Experience as a Nurse:

- 6 months to 1 year                       1-2 years  
 2-3 years                                       3-4 years  
 5 years and above

8. Current Position:

- Nurse I
- Nurse II
- Others: \_\_\_\_\_

9. Work Shift:

- 6am-2pm
- 2pm-10pm
- 10pm-6am
- 7am-3pm
- 3pm-11pm
- 11pm-7am
- 8am-5pm
- Others: \_\_\_\_\_

10. Department/Unit Assigned:

- Out patient department
- Emergency Room
- Intensive care unit (ICU)
- Neonatal intensive care unit (NICU)
- Pediatric intensive care unit
- High-risk pregnancy unit (HRPU)
- Surgical ward
- Pediatric ward
- Obstetrics and gynecology ward
- Operating room
- Others: \_\_\_\_\_

11. Average Number of Patients Handled per Shift:

- 1-5 patients
- 5-10 patients
- 15-20 patients
- 20-30 patients
- 31 patients and above

12. Monthly Salary Range:

- Below ₱20,000
- ₱20,001–₱30,000
- ₱30,001–₱40,000
- ₱40,001–₱50,000
- Above ₱50,000

**PART 2: FACTORS AFFECTING WORK SATISFACTION OF NURSES IN GOVERNMENT HOSPITALS**

Direction: Please check (✓) the option that best reveals factors affecting burnout of regular staff nurses. Please be guided by the following scale:

|   |                          |  |
|---|--------------------------|--|
| 4 | <b>Strongly Agree</b>    | signifies the participant's complete agreement with the statement or question                                    |
| 3 | <b>Agree</b>             | represents moderate agreement, suggesting that the participant leans towards agreeing with the statement         |
| 2 | <b>Disagree</b>          | represents moderate disagreement, signifying that the participant leans towards not agreeing with the statement. |
| 1 | <b>Strongly Disagree</b> | This indicates completely disagrees with the statement or question.  |

| No. | Factors affecting work Satisfaction                                      | 4 | 3 | 2 | 1 |
|-----|--|---|---|---|---|
|     | <b><i>Compensation</i></b>   |   |   |   |   |
| 1   | My basic salary is fair for my level of work and responsibility          |   |   |   |   |
| 2   | I am not paid consistently and on time                                   |   |   |   |   |
| 3   | Night shift differentials are paid fairly                                |   |   |   |   |
| 4   | I am not given adequate hazard pay based on my work conditions           |   |   |   |   |
| 5   | I receive bonuses or performance-based rewards when appropriate          |   |   |   |   |
| 6   | I do not receive proper compensation for working overtime                |   |   |   |   |
|     | <b><i>Benefits</i></b>   |   |   |   |   |
| 1   | I have access to quality health insurance                                |   |   |   |   |
| 2   | I am not given enough paid vacation leave each year                      |   |   |   |   |
| 3   | I can take emergency leave without complications                         |   |   |   |   |
| 4   | The organization does not contribute to my retirement savings            |   |   |   |   |
| 5   | I benefit from free uniforms, meals, or transportation                   |   |   |   |   |
| 6   | The hospital does not provide support for medical emergencies            |   |   |   |   |
|     | <b><i>Workload and Staffing</i></b>                                      |   |   |   |   |
| 1   | The nurse-to-patient ratio in my unit is reasonable                      |   |   |   |   |
| 2   | I am not overloaded with responsibilities during my shift.               |   |   |   |   |
| 3   | Staffing shortages compromise patient care or safety.                    |   |   |   |   |
| 4   | Overtime and additional tasks are not fairly distributed among nurses.   |   |   |   |   |
| 5   | Inadequate staffing often leads to burnout or stress.                    |   |   |   |   |
| 6   | I feel overwhelmed by the number of tasks I have to complete in a shift. |   |   |   |   |
|     | <b><i>Work Environment and Resources</i></b>                             |   |   |   |   |
| 1   | I feel physically safe in my workplace.                                  |   |   |   |   |
| 2   | Our hospital does not provide enough medical supplies and equipment.     |   |   |   |   |
| 3.  | My work environment promotes focus and efficiency.                       |   |   |   |   |


|    |   |  |  |  |  |
|----|---|--|--|--|--|
| 4. | Facilities (e.g., ventilation, rest areas, lighting) are not conducive for nurses.        |  |  |  |  |
| 5. | The hospital promotes a culture of safety and professionalism.                            |  |  |  |  |
| 6  | Equipments in my unit are not regularly maintained and are not in good working condition. |  |  |  |  |
|    | <b><i>Professional growth and recognition</i></b>   |  |  |  |  |
| 1  | I have opportunities to attend training or seminars to improve my skills.                 |  |  |  |  |
| 2  | The hospital does not support continuing education and specialization.                    |  |  |  |  |
| 3  | My efforts and hard work are recognized and appreciated.                                  |  |  |  |  |
| 4  | I do not have access to promotions or career advancement opportunities.                   |  |  |  |  |
| 5  | My professional achievements are acknowledged by management.                              |  |  |  |  |
| 6. | I do not feel that I have a clear career path in this organization                        |  |  |  |  |
|    | <b><i>Leadership and management</i></b>   |  |  |  |  |
| 1  | The hospital leadership is transparent and fair in their decisions.                       |  |  |  |  |
| 2  | Nurse supervisors and managers do not provide clear guidance and support.                 |  |  |  |  |
| 3  | Policies and rules are implemented fairly among staff.                                    |  |  |  |  |
| 4  | Management does not listen and responds to staff concerns.                                |  |  |  |  |
| 5  | I feel confident in the leadership of our institution.                                    |  |  |  |  |
| 6. | Leaders does not promote a positive and respectful work environment                       |  |  |  |  |
|    | <b><i>Interpersonal relationship and teamwork</i></b>                                     |  |  |  |  |
| 1  | I am not comfortable asking help from other team members when needed                      |  |  |  |  |
| 2  | All team members contribute equally to patient care                                       |  |  |  |  |
| 3  | I do not feel respected and supported by my colleagues.                                   |  |  |  |  |
| 4  | Conflicts are resolved constructively in our unit.  |  |  |  |  |
| 5  | The communication within the team is not clear and effective                              |  |  |  |  |
| 6. | I have a good working relationship with my fellow nurses.                                 |  |  |  |  |
|    | <b><i>Over-all Job satisfaction</i></b>   |  |  |  |  |
| 1  | I am generally satisfied with my current job as a government nurse.                       |  |  |  |  |

|    |   |  |  |  |  |
|----|---|--|--|--|--|
| 2. | I find my work not meaningful and fulfilling.                       |  |  |  |  |
| 3. | I am proud to be a nurse in a government hospital.                  |  |  |  |  |
| 4. | I am thinking about leaving my current job.                         |  |  |  |  |
| 5. | I plan to stay in this organization for the next few years          |  |  |  |  |
| 6. | I would not recommend this hospital as a good workplace for nurses. |  |  |  |  |


Thank you for accomplishing the questionnaire!

## APPENDIX H

### Ethical Clearance



**Don Mariano Marcos Memorial State University**  
**Research Ethics**  
 Bacnotan, La Union, Philippines  
 Email: [rec@dmmmsu.edu.ph](mailto:rec@dmmmsu.edu.ph)  
 Level I Accredited by the Philippine Health Research Ethics Board (PHREB)  
 Accreditation No: L1-2023-056-01



**ETHICAL CLEARANCE**

December 10, 2025

This is to certify that DMMMSU Research Ethics Committee has **APPROVED** the following study protocol.

Name of Principal Investigator: **Francesca G. Amar**


Title of Study / Protocol: **Factors Affecting the Work Satisfaction of Nurses Employed in Government Hospitals: Basis for Enhanced Work-Life Balance**

RETC Code: **2025-1451- Work Satisfaction-Amar**

The following are the responsibilities of the investigators / researchers after protocol approval:

1. Seek approval from DMMMSU Research Ethics for any protocol amendment after this date.
2. Submit SAE and SUSAR Reports to RETC when deemed necessary.
3. Submit progress report.
4. Notify DMMMSU RETC of any Protocol deviation/violation.
5. Abide by the principles of good clinical practice and ethical research
6. Comply with relevant international and national guidelines and regulations
7. Submit the final report after study completion using the Final Report Form (DMMMSU-RETC-F022).

This Ethical Clearance is valid until December 10, 2026.

  
**JOEL C. ESTACIO**  
 Chair  
 DMMMSU Research Ethics Committee

**Research Ethics Committee**

**Prof. Joel C. Estacio**  
(Health)  
Chair

**Engr. Luis A. Tattao**  
(Engineering and Technology)  
Vice-Chair

**Prof. Sherille A. Orejudos**  
(Health)  
Member Secretary

Members:

**Prof. Claudia Denise P. Barbadillo**  
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**Dr. Amy P. Balcita**  
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(Animal Science and Veterinary Medicine)

**Prof. Led Karen R. Zamudio**  
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**Dr. Genaro D. Omo**  
(Agriculture, Aquaculture and Natural Resources)

**Dr. Violeta F. Collado**  
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**Prof. Janna M. Boado**  
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**Mr. Enrico S. Del Rosario**  
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**Atty. Leenard S. Dulay**  
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(Criminal Justice Education)

Secretariat:

**Engr. Rhodora S. Mortela**  
Staff Secretary

**DMMMSU-RETC-F011**  
Rev.01 (02.15.2023)

## APPENDIX I

### Cronbach's Alpha Result

#### CRONBACH'S ALPHA RESULT

##### Scale Reliability Statistics

|       | Cronbach's $\alpha$ | McDonald's $\omega$ |
|-------|---------------------|---------------------|
| scale | 0.825               | 0.842               |

Based on the reliability analysis, the research questionnaire demonstrated a high level of internal consistency. The obtained Cronbach's alpha coefficient of 0.825 and McDonald's omega value of 0.842 both exceed the commonly accepted minimum threshold of 0.70, indicating that the items included in the instrument are consistently measuring the same underlying construct. These values suggest that the responses across items are stable and dependable, reflecting a strong degree of coherence among the questionnaire components.

## APPENDIX J

### Certificate for Content Validity of Questionnaire



Republic of the Philippines  
**PALAWAN STATE UNIVERSITY**  
Graduate School



#### Vision

An internationally recognized university that provides relevant and innovative education and research for lifelong learning and sustainable development.

#### Mission

The Palawan State University is committed to upgrade the people's quality of life by providing education opportunities through excellent instruction, research and innovation, extension, production services, and transnational collaborations.

#### CERTIFICATION

This is to certify that the undersigned checked the content validity of the questionnaire for the research study entitled **FACTORS AFFECTING WORK SATISFACTION OF NURSES EMPLOYED IN GOVERNMENT HOSPITALS: BASIS FOR ENHANCED WORK-LIFE BALANCE**

As far as content validation is concerned, there is a constructive alignment between the items included in the research questionnaire and the identified research problems. Furthermore, the statements in the said instrument were clearly stated and presented in a logical manner. Hence, this questionnaire may now be subjected to pilot testing for internal consistency and reliability.

  
**JAIRUS U. KATON, RN, MSN**  
Name & Signature

Designation

**SEPTEMBER 12, 2025**  
Date



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Palawan State University, Manalo Campus, Puerto Princesa City, Palawan 5300, Philippines +63-48  
4342707 gs@psu.edu.palawan.edu.ph www.psu.palawan.edu.ph



**Vision**

An internationally recognized university that provides relevant and innovative education and research for lifelong learning and sustainable development.

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**CERTIFICATION**

This is to certify that the undersigned checked the content validity of the questionnaire for the research study entitled **FACTORS AFFECTING WORK SATISFACTION OF NURSES EMPLOYED IN GOVERNMENT HOSPITALS: BASIS FOR ENHANCED WORK-LIFE BALANCE**

As far as content validation is concerned, there is a constructive alignment between the items included in the research questionnaire and the identified research problems. Furthermore, the statements in the said instrument were clearly stated and presented in a logical manner. Hence, this questionnaire may now be subjected to pilot testing for internal consistency and reliability.

  
**JOANNE FAITH ABRINA**  
 Name & Signature

Designation

DECEMBER 04, 2025

Date



Palawan State University, Manalo Campus, Puerto Princesa City, Palawan 5300, Philippines +63-48  
 4342707 gs@psu.edu.palawan.edu.ph www.psu.palawan.edu.ph

**CERTIFICATE OF QUESTIONNAIRE VALIDATION**

This is to certify that the research instrument (questionnaire) formulated for the thesis entitled:

**“FACTORS AFFECTING THE WORK SATISFACTION OF NURSES EMPLOYED IN GOVERNMENT HOSPITALS: BASIS FOR ENHANCED WORK-LIFE BALANCE”**

Prepared by **FRANCESCA G, AMAR**, in partial fulfillment of the requirements for the degree Master of Science in Nursing, Major in Nursing Service Administration, has been thoroughly reviewed, evaluated and validated

The questionnaire has been carefully examined in terms of clarity, content, relevance, and alignment with the objectives of the study, and is hereby deemed valid and appropriate for use in the conduct of research

  
**OTELIO H. JUANZO JR., MSN**  
 Adviser

  
**JOYCE ANN T. HERNANDEZ, RN, MSN**  
 Validator

## APPENDIX K

### Certificate of Readiness for Defense



Republic of the Philippines  
**PALAWAN STATE UNIVERSITY**  
Puerto Princesa City



**GRADUATE SCHOOL**

#### Certification of Readiness for Defense

April 14, 2026

**TERESITA D. TAJOLOSA, PhD**  
Dean, Graduate School  
This University  
Manalo Campus, Puerto Princesa City

Dear Dr. Tajolosa,

This certifies that I have seen the thesis proposal of **Ms. Francesca G. Amar** titled: **"FACTORS AFFECTING THE WORK SATISFACTION OF NURSES EMPLOYED IN GOVERNMENT HOSPITALS: BASIS FOR ENHANCED WORK-LIFE BALANCE"** and attest to its readiness in content and in mechanics. The thesis/dissertation proposal therefore is considered ready for defense. It is requested that proposal/final defense be scheduled.

Yours sincerely,

**OTELIO H. JUANZO, JR., MSN**

Adviser

Attested by:

**PROF. SHIRLEY M. DANGAN**

English / Language Edit

Cc:

Research Adviser  
Research Coordinator  
Department Chairperson  
Dean  
Proponent

PSU - GRADUATE SCHOOL  
Valencia St. Puerto Princesa City, Palawan, 5300  
gs@psu.palawan.edu.ph  
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## APPENDIX L

### Similarity Test Result

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APPENDIX M

Photo Documentation



APPENDIX N

Proposed Output of the Study

PROPOSED ENHANCED WORK-LIFE BALANCE PROGRAM

| Competency                       | Goal of Training              | Indicators                          | Training Activity          | Materials/Resources                     | Budgetary Requirement | Time Frame          | Persons Involved           | Evaluation                       |
|----------------------------------|-------------------------------|-------------------------------------|----------------------------|---|-----------------------|---------------------|----------------------------|----------------------------------|
| Stress Management and Resilience | To improve nurses' ability to | Reduced reports of stress, fatigue, | Seminar-workshop on stress | Projector, handouts, relaxation videos, | ₱15,000–<br>₱20,000   | 1 day every quarter | Nurses, nurse supervisors, | Pre-test and post-test, feedback |

|  |   |   |  |   |                     |                      |  |  |
|--|---|---|--|---|---------------------|----------------------|--|--|
|  | manage work-related stress and prevent burnout.                             | and burnout; improved coping strategies.  | management, mindfulness, relaxation techniques, and resilience building.                               | venue, speaker.   |                     |                      | HR personnel, mental health professionals          | forms, monitoring of absenteeism and burnout cases   |
| Time Management and Work-Life Balance        | To help nurses effectively balance work responsibilities and personal life. | Improved punctuality, reduced overtime complaints, improved satisfaction with schedule flexibility. | Training on prioritization, scheduling, time management, and work-life balance strategies.             | Training modules, planners, venue, LCD projector.               | ₱10,000–<br>₱15,000 | 1 day every 6 months | Nurses, nurse managers, HR staff                   | Participant evaluation forms and follow-up survey on work-life balance                           |
| Communication and Teamwork                   | To strengthen interpersonal relationships and teamwork among nurses.        | Improved teamwork, reduced conflicts, better communication among staff.                             | Team-building activities, communication workshops, conflict resolution sessions.                       | Team-building materials, workshop modules, venue.               | ₱20,000–<br>₱30,000 | 2 days annually      | Nurses, supervisors, facilitators, HR personnel    | Observation, feedback survey, reduction in reported workplace conflicts                          |
| Professional Development and Career Planning | To provide nurses with opportunities for career growth and advancement.     | Increased participation in seminars, training, and promotion opportunities.                         | Career planning seminar, continuing education programs, mentoring sessions.                            | Career guides, seminar materials, venue.                        | ₱10,000–<br>₱20,000 | Twice a year         | Nurses, supervisors, nursing educators             | Attendance record, satisfaction survey, number of nurses promoted or enrolled in further studies |
| Wellness and Mental Health Promotion         | To promote nurses' physical, emotional, and mental well-being.              | Increased participation in wellness activities, improved morale and attendance.                     | Wellness programs such as yoga, exercise sessions, counseling, and mental health awareness activities. | Recreational materials, venue, wellness kits, invited speakers. | ₱20,000–<br>₱30,000 | Quarterly            | Nurses, HR personnel, counselors, wellness coaches | Participation rate, wellness survey, reduced sick leave and turnover                             |

### Summary

The proposed enhanced work-life balance program focuses on the major factors affecting nurses' work satisfaction, particularly compensation, workload, staffing, leadership, work environment, professional growth, teamwork, and wellness. The program aims to strengthen nurses' coping skills, improve workplace relationships, provide opportunities for career advancement, and promote better work-life balance to improve satisfaction, retention, and quality of patient care.