

WORK STRESS AND ORGANIZATIONAL CLIMATE AS PREDICTORS OF CARING BEHAVIOR OF NURSES ON THE SELECTED FACILITY IN DAVAO DE ORO

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ABSTRACT

This study examined the relationship between work stress, organizational climate, and the caring behavior of nurses in a selected healthcare facility in Davao de Oro, with a particular focus on identifying key predictors of caring behavior. Utilizing a quantitative research design, data were gathered through validated survey instruments assessing nurses' perceived stress levels, organizational climate, and caring practices. The findings revealed that nurses generally demonstrated strong caring behaviors, particularly in the areas of compassion and competence; however, organizational commitment emerged as a relative weakness. The organizational climate was rated positively overall, suggesting a supportive work environment, while work stress was perceived at a moderate level. Correlation analysis indicated a moderate, statistically significant positive relationship between organizational climate and caring behavior, and a weaker yet significant relationship between work stress and caring behavior. Regression analysis identified organizational climate as a significant predictor of caring behavior, explaining 26.2% of the variance, whereas work stress did not significantly predict caring behavior.

Keywords: work stress, organizational climate, caring behavior, nurses, Davao de Oro, healthcare facility

INTRODUCTION

Background of the study

Nursing management in today's society may face a serious problem with work related stress due to rapid changes in the hospital setting, especially after dealing with COVID19. Because hospitals are on the forefront of what is happening in today, they are responsible for implementing state, and locally-mandated nursing-education programs. The leadership qualities of clinical nurse are consistently identified as primary factors in explaining hospital effectiveness.

Improving the productivity and organizational climate of health care workers in order to enhance efficiency in health interventions, is a major challenge for Asian countries. Human resources for health (clinical and non-clinical) staff are paramount as staff is the most important asset of health systems. Organizational climate of health care organizations depends on the knowledge, skills and motivation of individual employees. Employers should provide working conditions which support the caring behavior of employees s continues to decrease, which then leads to a low quality of

care. As they are bombarded with several workloads, nurses have work stress related problems in terms of time management, quality of care, job satisfaction and job retention and many other challenges. Meanwhile, as almost all healthcare providers, they are expected and required to overcome these challenges as they are instilled with the fact that they are dealing with lives. Improvement of managerial aspects must be built to find appropriate measures suitable to compensate and cope up with the effects of a shortage of nurses. (Stephan, 2020).

Work stress and problems in the organization are the fact that cannot be avoided. It is difficult, if not impossible, to imagine a society of the nursing institution of conduct for nurses or methods for determining what is desirable or healthy versus what is undesirable or unhealthy. Work stress of nurses' which include: time management, task completion/productivity, and attitude/behavior towards performance, working habits, and nurses' personal belief. As to the basis of knowing its impact, nurses are the basis of identifying the factors towards the nurses' work ethics. Even if such codes are only perceived as a means of survival, there will be implicit commitment (Jojo, 2022).

In Davao de Oro, one of the major concerns is the nursing performance of the nurses. The assurance of appropriate nurse-patient ratio and working hours is important to improve the quality and the performance of tasks on time. An increased number of nurse-patient ratios due to nursing shortage was significantly associated with higher odds of reporting poor quality of care and of performing care and other tasks on time which leaves it undone due to the lack of time. Compared with RNs who did not work overtime, RNs working overtime reported a 45% increase in a fair or poor quality of nursing care and an 86% increase in care left undone. The performing task assigned on time for nurses is necessary to allow them to give proper care for their patients. Nurses need effective time management to settle their nursing tasks. Also, it aids in prioritization like when there is an urgency or a patient needs healthcare immediately, a nurse can respond and prioritize on time.

Statement of the Problem

This study determined the relationship between Work Stress and Organizational Climate as Predictors of Caring Behavior of Nurses on the selected facility in Davao de Oro.

Specifically, this paper sought to answer the following questions:

1. What is the level of work-related stress of nurses in terms of:
 - 1.1 Administrative Constraints;
 - 1.2 Administrative Responsibility;
 - 1.3 Interpersonal Relations;
 - 1.4 Intrapersonal Conflicts; and
 - 1.5 Role Expectations?

2. What is the level of organizational climate of nurses in terms of:
 - 2.1 Patient Care;
 - 2.2 Collaboration with other Teams; and
 - 2.3 Rewards in Nursing Performance?

3. What is the level of Caring Behavior of Nurses in terms of:
 - 3.1 Compassion;

- 3.2 Competence;
 - 3.3 Confidence;
 - 3.4 Communication; and
 - 3.5 Commitment?
4. Is there a significant relationship between work stress and organizational climate on the caring behavior of nurses?
 5. Do work stress and organizational climate significantly predict the caring behavior of nurses?

Framework

This study is anchored on the "Multidimensional Theory of Burnout" by Leiter and Maslach (1997) which states that work-related stress manifests itself differently in everyone, it shows three common effects: erosion of emotions, erosion of engagement and organization problems. It manifests itself with certain characteristics such as efficacy and efficiency, unsuitable implementation of policies, problems between the members of the company or organization. Work-related stress can be generated when work demands exceed the time limits, physical capacity, and skills of those who are in the field of nursing-education.

Another theory that anchors this study is the transactional theory of Lazarus and Folkman (1987) which states that stress is the direct product of a transaction between an individual and their environment which may tax their resources and thus threaten their well-being. Yet a more recent version of this theoretical model suggests that it is the appraisal of this transaction that offers a causal pathway that may better express the nature of the underlying psychological and physiological mechanisms which underpin the overall process and experience of stress.

One recent study by Gurses, Carayon, and Wall, (2020) emphasized how a satisfied nursing workforce is more likely to engage in safe work practices and effective communication, ultimately contributing to enhanced patient safety. Their findings underscore the importance of considering job satisfaction as a key driver of safety culture in healthcare settings. In addition, Al-Hussami, Darawad, and Alnawaiseh (2019) focused on the relationship between nurse work related stress, organizational climate, and caring behavior. They found that when nurses are satisfied with their work, they tend to exhibit higher levels of commitment to their organizations and reduced intentions to leave. This research highlights the stress on nurses plays a significant role in retaining experienced staff, which is vital for maintaining consistent, high-quality patient care.

More recently, Abdelhakim and El-Dosoky (2021) explored the relationship between nurse job satisfaction and patient experience. Their study found that higher job satisfaction among nurses was associated with improved patient experiences and higher patient satisfaction. The research underscores how nurse satisfaction not only affects clinical outcomes but also patient perceptions of the care they receive, which is increasingly emphasized in healthcare quality assessments.

METHODOLOGY

This study used a quantitative descriptive–correlational research design to examine the relationship between work ethics and nurses’ performance in selected healthcare facilities in Davao de Oro during the nursing year 2024–2025. Data were collected through a standardized survey questionnaire distributed to nurses. The design allowed the researcher to describe the level of work ethics and determine whether a significant relationship existed between work ethics and job performance without manipulating the variables. This approach is supported by Salaria Surbhi (2015), who explained that descriptive survey research systematically collects data to understand observable conditions.

The study was conducted in a selected government hospital in Davao de Oro, a Level I hospital with a 100-bed capacity under the Department of Health. The respondents were 60 registered nurses working in different hospital departments. A complete enumeration technique was used, meaning all eligible nurses were included in the study to ensure comprehensive and unbiased representation. The sample size met the recommended guideline for correlational studies suggested by Samuel B. Green (1991).

The study used a structured questionnaire consisting of three parts: Work-Related Stress, Organizational Climate, and Caring Behavior. The instruments were adapted from established tools developed by William H. Gmelch, George H. Litwin, Robert A. Stringer, and Zane Wolf. All items used a 4-point Likert scale. The questionnaire underwent expert validation and pilot testing, with Cronbach’s alpha values above 0.80, indicating good reliability and internal consistency.

RESULTS AND DISCUSSION

Level of Work Stress

Table 1 shows the level of work stress among nurses based on administrative constraints. Administrative constraints scored a mean of 2.98 (SD = 0.390), indicating a moderate level of stress, while administrative responsibility scored 3.58 (SD = 0.497), reflecting a high level of stress. Interpersonal relations (mean = 3.25, SD = 0.437), intrapersonal conflicts (mean = 3.48, SD = 0.504), and role expectations (mean = 3.45, SD = 0.502) were all moderate, suggesting that interactions, internal struggles, and professional expectations contribute moderately to nurses’ work stress.

The overall mean of the five variables is 3.35 (SD = 0.47), indicating that, on average, nurses experience a moderate to high level of work-related stress, with relatively

consistent responses across the measured dimensions. Administrative responsibility emerged as the highest contributor, highlighting the need for hospitals to review workload, clarify roles, and provide support to reduce stress.

Table 1. Work Stress Based on Administrative Constraints

	Mean	Std. Deviation	Description
Administrative Constraints	2.98	.390	
Administrative Responsibility	3.58	.497	Moderate High
Interpersonal Relations	3.25	.437	Moderate
Intrapersonal Conflicts	3.48	.504	Moderate
Role Expectations	3.45	.502	Moderate
	3.35	0.47	Moderate

Overall, the results indicate that nurses experience moderate work stress in most administrative constraint areas, while administrative responsibility appears to be the most significant contributor to stress. This suggests the need for hospital administrators to review workload distribution, clarify job roles, and provide support mechanisms to help nurses effectively manage administrative demands and maintain their well-being.

Level of Organizational Climate

Table 2 shows an overall mean of 3.56 (SD = 0.51), indicating a high perception of organizational climate among nurses regarding patient care. Patient Care obtained the highest mean (3.68), followed by Rewards (3.53), both interpreted as High, suggesting that nurses perceive strong service quality and feel recognized for their work. Meanwhile, Collaboration with other healthcare team members (3.47) was rated Moderate, indicating a need to strengthen interdisciplinary coordination.

These findings are supported by Ali El-Salam et al. (2019), who found that a positive organizational climate significantly influences nurses' perceptions and performance in healthcare settings. Their study emphasizes that supportive environments and effective teamwork contribute to improved patient care outcomes.

Table 2.1

Organizational Climate Based on Patient Care

	Mean	Std. Deviation	Description
Patient Care	3.68	.469	High
Collaboration with Other Health Care Team	3.47	.566	Moderate
Rewards	3.53	.503	High
Overall Mean	3.56	0.513	

Level of Caring Behavior of Nurses

Table 3 shows that the overall mean score of 3.47 indicates a moderate level of caring behavior among nurses. This suggests that nurses generally demonstrate caring attitudes in their professional responsibilities. The highest rating was compassion (M = 3.75), followed by competence (M = 3.65), conscience (M = 3.60), and confidence (M = 3.50), all interpreted as high. These findings indicate that nurses consistently demonstrate empathy, professional skills, ethical awareness, and confidence in delivering patient care.

This result supports Watson's Theory of Human Caring, which emphasizes that caring is the foundation of nursing practice and essential in promoting patient well-being (Watson, 2021). Similarly, Labrague et al. (2020) found that nurses who demonstrate strong caring behaviors contribute to better patient satisfaction and quality of care. Furthermore, Li et al. (2021) noted that compassionate nursing care strengthens trust between patients and healthcare professionals.

However, commitment (M = 2.87) was rated moderate, suggesting that some nurses may experience challenges related to organizational attachment or workplace engagement. According to Al-Haroon and Al-Qahtani (2020), commitment among nurses is closely associated with job satisfaction, work environment, and organizational support. Likewise, Abusalem et al. (2021) explained that heavy workloads and limited institutional support may reduce nurses' level of commitment.

Overall, the findings indicate that while nurses exhibit strong caring behaviors, healthcare institutions should implement supportive strategies such as leadership support, recognition programs, and professional development opportunities to strengthen nurses' commitment and sustain quality patient care.

Table 3.1

Caring Behavior of Nurses Based on Compassion

	Mean	Std. Deviation	Description
COMPASSION.	3.75	.437	High
COMPETENCE	3.65	.481	High
CONFIDENCE	3.50	.504	High
CONSCIENCE	3.60	.588	High
COMMITMENT	2.87	.502	Moderate
Overall Mean	3.47	0.502	Moderate

Relationship Between the Variables

Table 4 presents the correlation analysis showing significant relationships among the variables. The results indicate a low but significant positive relationship between work stress and caring behavior ($r = .295$, $p = .022$). This suggests that moderate levels of stress may encourage nurses to become more attentive and responsive to patient needs. In stressful situations, nurses may strengthen their sense of responsibility and compassion in delivering care. This finding is supported by Labrague and Ballad (2020), who stated that moderate stress can enhance nurses' professional commitment and resilience. Similarly, Kim and Lee (2021) explained that nurses in high-pressure environments may channel stress into increased compassion and dedication to patient care.

The findings also reveal a moderate positive relationship between organizational climate and caring behavior ($r = .504$, $p = .000$). This indicates that a supportive organizational climate, characterized by effective communication, teamwork, trust, and leadership, promotes stronger caring behaviors among nurses. When nurses perceive their work environment as supportive, they are more likely to demonstrate compassion and commitment in providing quality care. This result is consistent with Yoon and Kim (2020), who emphasized that positive work environments enhance nurses' emotional engagement and caring practices. Likewise, Wei et al. (2019) and Al Sabei et al. (2020) found that supportive leadership and collaborative workplaces significantly improve compassionate nursing care.

Table 4. Relationship Between the Independent Variables and Dependent Variable

Variables Paired	r	p-value	Remarks
Work Stress & Caring Behavior	.295	.022	Significant
Organizational Climate & Caring behavior	.504	.000	Significant

Table 5 presents the results of the multiple regression analysis examining the influence of work stress and organizational climate on nurses' caring behavior. The model is statistically significant ($F = 10.101$, $p = .000$), indicating that the two variables significantly predict caring behavior. The R^2 value of .262 shows that 26.2% of the variance in caring behavior can be explained by work stress and organizational climate.

Among the predictors, organizational climate significantly predicts caring behavior ($B = .462$, $p < .05$), suggesting that a more positive work environment increases nurses' caring behavior. This supports previous studies which emphasize that a supportive organizational climate enhances nurses' motivation and ability to provide compassionate care (Li, Zhang, & Zheng, 2018; Hsiao, Chang, & Tu, 2014).

In contrast, work stress does not significantly predict caring behavior ($B = .099$, $p = .436$), indicating that stress may not directly influence caring behavior but may interact with other factors such as coping strategies and emotional intelligence (Xie, Wang, & Chen, 2020; García-Campayo et al., 2016).

Table 5
Variables that best predict to the *Work Stress and Organizational Climate* on *Caring Behavior* among nurses

Model	Unstandardized Coefficients		Standardized Coefficients Beta	t	p-value	Remarks
	B	Std. Error				
	(Constant)	2.049	.337	6.071	.000	
1	Work Stress	.074	.095	.099	.785	.436 Not Significant
	Organizational Climate	.322	.088	.462	3.670	.001 Significant

Note: $R = .512$, $R\text{-square} = .262$, $F = 10.101$, $p = .000$

Conclusions

Based on the findings of the study, the following conclusions were drawn:

1. Nurses generally demonstrate strong caring behaviors, particularly in terms of compassion and professional competence. However, their level of organizational commitment appears relatively lower, suggesting possible concerns related to engagement, sense of belonging, or loyalty to the institution.
2. Organizational climate significantly influences nurses' caring behavior. A positive and supportive work environment enhances nurses' ability to provide compassionate and effective patient care, indicating that institutional culture plays an important role in shaping professional practice.
3. Although work stress is present among nurses, it does not significantly predict caring behavior when organizational climate is considered. This suggests that a supportive organizational environment may help reduce the negative effects of stress and enable nurses to maintain high-quality care despite workplace pressures.

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