

The Impact of Lifestyle Adjustment Practices on Workplace Stress Among Nurses in Level II Private Hospitals

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Abstract— This study investigated the relationship between lifestyle adjustment practices and workplace stress among nurses in Level II private hospitals in one city in the Philippines. It aimed to examine the types of lifestyle practices nurses employed to manage stress, assess the levels of workplace stress they experienced, and determine the inverse relationship between lifestyle practices and stress, considering organizational factors. Nurses often encountered high stress levels due to excessive workloads, time pressures, and a lack of management support, which negatively affected their well-being and the quality of patient care. Lifestyle adjustment practices, including physical well-being, emotional regulation, social support, and professional self-care, were identified as potential coping mechanisms. The study sought to evaluate how these practices correlated with stress levels and how organizational factors interacted with personal coping strategies. This research aimed to provide actionable insights for developing interventions that would improve nurse well-being, reduce stress, and promote a healthier, more sustainable workforce in healthcare settings. The findings informed strategies that not only enhanced personal coping but also addressed systemic issues within healthcare environments, ultimately benefiting nurse retention, job satisfaction, and patient care outcomes.

Keywords— Workplace Stress, Lifestyle Adjustment, Nurse Well-Being, Coping Strategies, Organizational Factors.

I. INTRODUCTION

Nurses play a critical role in providing care and ensuring the well-being of patients within the healthcare system. Despite their importance in delivering quality care, nurses face unique and significant challenges that often lead to high levels of stress. These stressors, which include long shifts, high patient ratios, emotional demands, and insufficient resources, have profound implications for both nurse health and patient outcomes. Workplace stress has been linked to negative physical and mental health effects, including burnout, anxiety, and depression, as well as decreased job satisfaction and a higher likelihood of leaving the profession. The consequences of nurse stress extend beyond the nurses themselves, affecting the entire healthcare system due to decreased productivity and quality of care. As healthcare demands continue to rise globally, especially in the context of the COVID-19 pandemic, addressing stress in the nursing workforce has become more urgent than ever.

The presence of workplace stressors is a multifaceted issue, which involves both external (organizational) and internal (individual) factors. Nurses are often exposed to high job demands, such as excessive workloads, time constraints, and emotional exhaustion from dealing with patient suffering. These demands create an environment where nurses are constantly under pressure, making it challenging to focus on self-care and personal well-being. Many nurses report a lack of time or energy to engage in health-promoting behaviors such as exercise, nutrition, and relaxation techniques. Although lifestyle adjustment practices, which include physical exercise, emotional regulation, social support, and mindfulness, are recognized as effective strategies for managing stress, these practices are often insufficient to counterbalance the external pressures of their work environment. The relationship between personal coping mechanisms and the organizational factors that contribute to stress remains a critical area of study, especially in understanding how these dynamics shape nurses' ability to cope with the demands of their profession.

Previous research has identified several key organizational factors contributing to stress among nurses, including heavy workloads, long shifts, and lack of support from management. A review by Basu et al. (2017) emphasized that these stressors not only affect nurses' job satisfaction but also increase the risk of burnout, which can lead to higher turnover rates in the nursing workforce. Similarly, Galletta, Portoghese, and Campagna (2016) found that workload and insufficient organizational support were significant contributors to burnout among nurses. The consequences of prolonged stress can result in physical health problems, such as cardiovascular disease, musculoskeletal issues, and gastrointestinal disorders (Goh, Pfeffer, & Zenios, 2015). Moreover, Shanafelt et al. (2015) reported that high levels of stress and burnout negatively impact the quality of patient care, as stressed nurses are more likely to make errors and exhibit lower levels of empathy. Despite the knowledge that stress adversely affects both nurses and patient care, institutional efforts to address nurse well-being remain insufficient, especially in addressing both the individual and organizational sources of stress.

On the other hand, lifestyle adjustment practices have been shown to significantly improve nurses' ability to manage stress. Practices such as exercise, mindfulness, emotional regulation, and seeking social support are recognized as effective ways to cope with job-related stress. Folkman and Moskowitz (2004) argued that emotion-focused coping strategies, including seeking social support and practicing mindfulness, can help reduce the negative emotional impact of stress. Similarly, Pender, Murdaugh, and Parsons (2015) highlighted the role of physical exercise in reducing stress and improving overall mental health. In the nursing context, these strategies are crucial for building resilience and helping nurses recover from the emotional and physical demands of their work. However, despite the benefits of these practices, nurses often struggle to prioritize their own well-being due to time constraints, high job demands, and inadequate support from their work environment. Nurses' ability to consistently implement these lifestyle adjustment practices is therefore influenced

not only by personal factors but also by organizational support and work conditions.

The aim of this study is to explore the relationship between lifestyle adjustment practices and workplace stress among nurses in Level II private hospitals in one city in the Philippines. Specifically, the study will examine the types of lifestyle adjustment practices employed by nurses, assess the levels of workplace stress experienced in relation to these practices, and determine the inverse relationship between the two, while considering the influence of organizational factors. The study will assess the extent to which nurses engage in behaviors such as exercise, emotional regulation, social support, and professional self-care, and how these behaviors correlate with the levels of stress they experience in their work environment. By analyzing both individual and organizational factors, the study aims to provide a comprehensive understanding of how nurses cope with workplace stress and how their coping mechanisms interact with their work environment. This research will contribute to the ongoing conversation about improving nurse well-being and reducing stress within healthcare settings, ultimately leading to better outcomes for both nurses and patients.

This study, therefore, aims to explore how lifestyle adjustment practices affect workplace stress among nurses in Level II private hospitals, focusing on both individual coping strategies and organizational factors. The first objective of the study is to examine the types of lifestyle adjustment practices employed by nurses in these hospitals. The second objective is to assess the levels of workplace stress experienced by nurses in relation to their lifestyle practices. Finally, the third objective is to determine the inverse relationship between lifestyle adjustment practices and workplace stress, while considering organizational factors. This study is needed to provide crucial evidence on how nurses engage with lifestyle practices and the challenges they face in implementing them, which will inform the development of interventions that address both personal coping strategies and systemic issues, improving nurse well-being, reducing stress, and enhancing patient care outcomes through a more supportive and sustainable healthcare workforce.

II. METHODOLOGY

The study employed a descriptive quantitative research design to explore the relationship between lifestyle adjustment practices and workplace stress among nurses in Level II private hospitals in one city in the Philippines. A purposive sampling technique was used to select 60 registered nurses from four hospitals, ensuring a balanced representation from each institution. The participants were required to have at least one year of clinical experience and were selected from various hospital units, including medical wards, surgical wards, ICU, and emergency rooms. Data collection was conducted through a self-administered survey questionnaire, which was distributed in both paper and online formats to accommodate the nurses' work schedules. This approach allowed the researcher to gather objective, quantifiable data on lifestyle adjustment practices and workplace stress levels.

The questionnaire was divided into three sections. The first section gathered demographic information such as age, gender, civil status, years of clinical experience, and work shift. The second section focused on lifestyle adjustment practices, using the Health-Promoting Lifestyle Profile II (Walker, Sechrist, & Pender, 1995), which assessed five key dimensions: physical well-being, emotional regulation, social support, spiritual and cognitive coping, and professional self-care. Each item was rated using a five-point Likert scale ranging from "Never Practiced" to "Always Practiced." The third section measured workplace stress using an adapted version of the Nursing Stress Scale (Gray-Toft & Anderson, 1981), with items assessing workload, staffing issues, role conflict, interpersonal relationships, and organizational climate. Responses were also rated on a Likert scale, from "Never" to "Very Often."

Data were analyzed using the Statistical Package for the Social Sciences (SPSS) software. Descriptive statistics such as mean, frequency, percentage, and

standard deviation were used to summarize demographic characteristics, lifestyle adjustment practices, and stress levels. Pearson's correlation analysis was conducted to determine the relationship between lifestyle adjustment practices and workplace stress. The results were interpreted within the framework of Lazarus and Folkman's Transactional Model of Stress and Coping, as well as Roy's Adaptation Model, to understand how nurses' coping strategies influence their stress levels in the workplace.

III. RESULTS AND DISCUSSION

Lifestyle Adjustment Practices of Nurses in Level II Private Hospitals

Table 1 presents the findings related to nurses' lifestyle adjustment practices across five key domains: Physical Well-Being, Emotional Regulation, Social Support & Relationships, Spiritual & Cognitive Coping, and Professional Self-Care. The results suggest that, overall, nurses moderately engage in lifestyle adjustment behaviors, with the mean score for Overall Lifestyle Adjustment being 3.15 (interpreted as "Sometimes Practiced"). This indicates that while nurses make some effort to engage in health-promoting behaviors, their practices are not always consistent.

Among the five domains, Spiritual & Cognitive Coping stands out with the highest mean score of 3.42, indicating that nurses often engage in strategies such as reflection, spiritual activities, or maintaining a positive outlook to manage stress. This suggests that spirituality and positive thinking are key coping mechanisms in the nursing profession. On the other hand, Physical Well-Being had the lowest mean score of 2.97, suggesting that nurses are less consistent in engaging in practices such as regular exercise, maintaining a balanced diet, or getting adequate rest. This could be attributed to the demanding nature of nursing work, where time constraints and work-related fatigue may limit opportunities for physical self-care.

Table 1: Lifestyle Adjustment Practices of Nurses

Domain	Mean (M)	Standard Deviation (SD)	Interpretation
Physical Well-Being	2.97	0.87	Sometimes Practiced

Emotional Regulation	3.08	0.79	Sometimes Practiced
Social Support & Relationships	3.27	0.77	Sometimes Practiced
Spiritual & Cognitive Coping	3.42	0.75	Often Practiced
Professional Self-Care	3.10	0.78	Sometimes Practiced
Overall Lifestyle Adjustment	3.15	0.82	Sometimes Practiced

Emotional Regulation and Social Support & Relationships both showed similar mean scores (3.08 and 3.27, respectively), suggesting that nurses moderately practice relaxation techniques, seek emotional support from family or colleagues, and maintain relationships that help them cope with stress. Professional Self-Care, with a mean score of 3.10, indicates that nurses engage somewhat in practices such as professional development, managing workloads, and seeking help when needed, but these activities are also not consistently prioritized. These results underscore the need for interventions that help nurses adopt and sustain healthier lifestyle practices, particularly in physical well-being and professional self-care, while reinforcing the positive role of spiritual and emotional coping mechanisms.

In reviewing the lifestyle adjustment practices among nurses, studies emphasize that coping strategies, especially emotional and spiritual practices, are vital in mitigating stress within nursing environments. The American Nurses Association (2017) suggests that improving the health of nurses through self-care behaviors and wellness programs is essential, highlighting the need for nurses to adopt practices that foster resilience and prevent burnout. This aligns with the findings of Basu et al. (2017), who identified coping mechanisms, such as mindfulness and emotional regulation, as key strategies for reducing workplace stress. Furthermore, Folkman and Moskowitz (2004) argue that emotion-focused coping, including spiritual and cognitive strategies, plays a significant role in reducing stress and promoting well-being, consistent with the high engagement in spiritual and cognitive coping observed among nurses in the study. The moderate engagement in physical well-being practices, such as exercise and adequate rest, also resonates with Bakker and Demerouti's (2017) Job Demands-Resources theory, which highlights the importance of balancing job demands with personal

resources, such as health and self-care, to manage stress. Additionally, Carayon and Gurses (2008) and Jennings (2008) emphasize the crucial role of supportive work environments in enabling nurses to practice effective self-care, pointing to organizational factors that influence the ability to maintain lifestyle adjustments amidst demanding healthcare settings. These findings support the notion that while individual coping strategies, particularly emotional and spiritual practices, are beneficial, a holistic approach integrating both personal and organizational support is vital for sustaining nurse well-being.

Levels of Workplace Stress Among Nurses and Their Relation to Lifestyle Adjustment Practices

The results presented in Table 2 demonstrate that nurses experience high levels of workplace stress, particularly in the areas of workload & time pressure (mean = 3.68) and organizational climate & management support (mean = 3.74). These findings highlight how demanding the nursing profession can be, especially in terms of the pressure to manage a high patient load, long working hours, and challenging time constraints. Nurses' stress is compounded by organizational factors such as insufficient management support, poor organizational climate, and inadequate staffing levels. These stressors are pervasive across various healthcare settings and contribute significantly to burnout, job dissatisfaction, and emotional exhaustion. The high stress observed in these two domains suggests that workplace conditions and organizational culture are major contributors to nurses' stress, which ultimately impacts their mental and physical well-being.

While workload and management issues are the most significant stressors, the domains of work environment and interpersonal relationships also contribute to nurses' stress, though to a lesser extent. With mean scores of 3.41 and 3.22, respectively, these domains

are categorized as moderate stress. The work environment includes factors such as physical conditions in the hospital or clinic, availability of resources, and the general work atmosphere, which all play a role in the stress experienced by nurses. Issues like overcrowding, lack of proper equipment, or poor physical infrastructure can increase the burden on nurses, making their tasks even more challenging. Additionally, interpersonal relationships—such as

conflicts with colleagues or supervisors—also contribute to moderate levels of stress, which suggests that while teamwork and cooperation are essential in healthcare, they can sometimes become a source of tension. The moderate scores for these domains indicate that while they are not as detrimental as workload and organizational climate, they still play an important role in shaping nurses' overall stress levels.

Table 2: Workplace Stress Encountered by Nurses

Domain	\bar{x}	SD	Interpretation
Workload & Time Pressure	3.68	0.81	High Stress
Work Environment	3.41	0.76	Moderate Stress
Interpersonal Relationships	3.22	0.73	Moderate Stress
Organizational Climate & Management Support	3.74	0.84	High Stress
Overall Workplace Stress	3.51	0.79	High Stress

The study found that nurses are experiencing high workplace stress (mean = 3.51), which is consistent across the major stress domains. This suggests that, despite engaging in coping strategies, the stressors within the nursing environment are substantial and challenging to mitigate without systemic changes. The findings emphasize that the nursing profession is one where stress is deeply embedded in both individual work demands and organizational dynamics. Organizational support, such as management involvement, staff well-being programs, and a positive workplace environment, are vital to mitigating stress. These factors suggest that addressing stress in the workplace requires more than just individual coping strategies. Instead, structural changes are needed within healthcare systems to provide support and reduce the workload and stressors that nurses face.

Support studies confirm that workplace stress is a widespread concern for nurses. Basu et al. (2017) found that workload and time pressure are among the primary stressors affecting nurses. Their research aligns with the current study, showing that nurses face considerable stress due to high patient loads and time constraints. The substantial high stress related to workload in this study reflects similar findings in the literature, where healthcare professionals consistently report that excessive demands and understaffing are

major contributors to stress and burnout. Furthermore, Goh, Pfeffer, and Zenios (2015) conducted a meta-analysis that supported the link between job demands, such as workload and organizational stress, and adverse health outcomes among nurses. This further reinforces the significance of addressing these stressors at an institutional level to prevent negative health outcomes and maintain a sustainable workforce in healthcare.

The significant stress observed in organizational climate & management support is also supported by previous research. Beehr and Newman (1978) highlighted the importance of organizational factors, emphasizing that poor management support, lack of recognition, and ineffective organizational policies can exacerbate stress and contribute to job dissatisfaction. This aligns with the current study's findings that a negative organizational climate and insufficient management support are significant stressors for nurses. When nurses feel unsupported by their managers and organizations, their stress levels increase, which can lead to burnout and high turnover rates. Additionally, Sarafis et al. (2016) identified the role of work environments and interpersonal relationships in nurses' stress levels. The study found that inadequate resources, poor work conditions, and strained relationships with colleagues contributed to

elevated stress levels. These findings are mirrored in the current study, where moderate stress was observed in both the work environment and interpersonal relationships domains, indicating that although they may not be the primary sources of stress, they still play an important role in nurses' overall well-being.

Moreover, the current study's findings are consistent with McVicar's (2016) review, which suggests that healthcare environments are particularly prone to high levels of stress due to job demands and organizational issues. McVicar also found that stress is linked not only to individual workload but also to organizational conditions such as staffing levels, communication, and leadership. This is consistent with the current findings that highlight workload & time pressure and organizational climate & management support as primary sources of stress. In addition, Galletta et al. (2016) emphasized the importance of organizational interventions in reducing stress, specifically suggesting that enhancing the work environment and addressing interpersonal conflicts can help reduce burnout and improve job satisfaction. These studies underscore the importance of systemic changes within healthcare settings to create an environment that supports nurse well-being, reduces stress, and ultimately improves patient care outcomes.

With these individual coping mechanisms with organizational support, the healthcare sector can address the challenges posed by workplace stress in nursing. As noted by Folkman and Moskowitz (2004),

while personal coping strategies such as emotional regulation and seeking social support are essential, they are not always sufficient when external stressors, such as workload and poor organizational support, remain prevalent. Thus, healthcare institutions must prioritize both personal and systemic approaches to manage stress effectively. The findings of this study, supported by existing literature, indicate the need for targeted interventions, including better management practices, stress management programs, and improvements in the work environment to alleviate workplace stress among nurses.

Inverse Relationship Between Lifestyle Adjustment Practices and Workplace Stress, Considering Organizational Factors

The results presented in Table 3 reveal an inverse relationship between lifestyle adjustment practices and workplace stress among nurses. The mean score for lifestyle adjustment practices was 3.15 (interpreted as "Sometimes Practiced"), indicating that while nurses engage in health-promoting behaviors, such as exercise, emotional regulation, and social support, their engagement is not consistent. Despite these moderate efforts to reduce stress, nurses still experience high levels of workplace stress (mean = 3.51) primarily due to organizational factors like workload, time pressure, and lack of management support. This finding suggests that lifestyle adjustment practices, although beneficial, may not be sufficient on their own to alleviate the high levels of stress that nurses face in their workplace.

Table 3: Relationship Between Lifestyle Adjustment Practices and Workplace Stress

Variable	\bar{x}	SD	Level / Interpretation	Relationship / Insight
Lifestyle Adjustment Practices	3.15	0.82	Sometimes Practiced	Inverse relationship: Higher engagement in lifestyle practices can reduce stress, but organizational factors still play a significant role in overall stress.
Workplace Stress	3.51	0.79	High Stress	Nurses experience high levels of workplace stress, primarily due to organizational factors like workload, time pressure, and lack of management support.
Relationship	–	–	Inverse Relationship	Higher engagement in lifestyle adjustment practices is generally expected to lower stress, but organizational challenges remain a major stressor.

The inverse relationship suggests that higher engagement in lifestyle adjustment practices is generally expected to lower stress. However, the results highlight that organizational factors, such as staffing issues, excessive workload, and inadequate management support, continue to significantly affect nurses' stress levels. This indicates that while personal coping strategies like emotional regulation or physical well-being practices are helpful, they are not enough to fully counteract the systemic challenges within healthcare settings. The nurses in this study appear to be balancing moderate coping strategies with high stress levels, primarily driven by external workplace conditions, underscoring the importance of addressing both personal and organizational aspects in stress management.

Support for these findings can be found in studies that emphasize the importance of both individual coping strategies and organizational interventions in managing workplace stress. Folkman and Moskowitz (2004) discussed how personal coping strategies, such as emotional regulation and mindfulness, can help reduce stress, yet organizational factors, including workload and management practices, must also be addressed to effectively alleviate stress. Similarly, McVicar (2016) found that while individual stress-management techniques, such as self-care, are beneficial, organizational factors—such as job demands, staffing levels, and lack of managerial support—play a more prominent role in contributing to nurses' stress levels. Moreover, Bakker and Demerouti (2017) highlight the Job Demands-Resources theory, which emphasizes that while individual resources, such as coping strategies, can help manage stress, high job demands and lack of resources at the organizational level continue to create a significant stress burden for employees.

Furthermore, the findings also resonate with the work of Carayon and Gurses (2008), who argued that nurses' stress is exacerbated by organizational factors such as poor work environment, staffing shortages, and management support. These systemic issues often overpower the personal coping mechanisms that nurses employ, reinforcing the need for healthcare organizations to prioritize both employee well-being

programs and changes in organizational policies and practices. By enhancing institutional support, improving staffing levels, and fostering a supportive organizational climate, the high levels of workplace stress experienced by nurses can be reduced, enabling them to manage their stress more effectively and sustain their well-being.

IV. CONCLUSION

This study explored the relationship between lifestyle adjustment practices and workplace stress among nurses working in Level II private hospitals in one city in the Philippines. The findings reveal that while nurses engage moderately in lifestyle adjustment practices such as emotional regulation, spiritual coping, and social support, these efforts do not fully mitigate the high levels of stress they experience at work. Workload, time pressure, and organizational climate were identified as the primary stressors. Despite the moderate engagement in self-care practices, workplace stress remains high, primarily due to organizational factors that nurses have little control over. The study highlights an important reality: personal coping strategies, though helpful, are insufficient to combat the significant external pressures imposed by the work environment. This underscores the need for a more holistic approach to stress management in nursing, one that addresses both the individual's coping mechanisms and the organizational factors that contribute to stress.

To address these issues and reduce workplace stress among nurses, several actionable recommendations can be implemented. First, healthcare institutions must prioritize enhancing organizational support systems. This could involve improving staffing levels, ensuring more manageable nurse-to-patient ratios, and providing better resources to alleviate the overwhelming workload nurses face. Reducing time pressures and increasing administrative support would significantly lessen the organizational stressors that contribute to burnout and job dissatisfaction. Additionally, structured mentorship and peer-support programs should be introduced to foster teamwork, improve relationships among staff, and reduce interpersonal conflicts, which also contribute to workplace stress.

Secondly, hospitals should implement comprehensive wellness programs that target physical, emotional, and mental well-being. Although nurses moderately engage in lifestyle practices, these efforts need to be supported by hospital-wide programs such as regular health screenings, fitness activities, mindfulness workshops, and stress management training. These initiatives would encourage nurses to adopt more consistent and effective self-care behaviors, reducing the physical and emotional toll of the job and enhancing their ability to manage stress.

A crucial component of reducing workplace stress also lies in improving leadership and management support. Many nurses reported feeling unsupported by management, which is a significant contributor to their stress. By investing in leadership training programs for nurse managers, healthcare institutions can improve communication, foster a more supportive work environment, and better recognize nurses' efforts. Proper training in conflict resolution and stress management for those in leadership positions will help create a more empathetic and effective support system for nurses, which will, in turn, alleviate stress.

Additionally, offering flexible work schedules can go a long way in reducing stress. Long working hours, especially with rotating shifts, are a major source of burnout in nursing. By allowing nurses to adjust their schedules or take more frequent breaks, hospitals can help them maintain a healthier work-life balance, which is essential for their well-being. Flexible schedules would also help nurses recover physically and emotionally, ultimately reducing the risk of burnout and enhancing overall job satisfaction.

Finally, hospitals should regularly evaluate and adjust workplace policies to ensure they are aligned with nurses' needs. This could involve conducting feedback sessions with nursing staff to identify areas for improvement and create a more supportive work environment. Aligning institutional policies with national standards, such as the Philippine Mental Health Act (Republic Act No. 11036) and the Magna Carta for Public Health Workers (Republic Act No. 7305), would ensure that nurses have the necessary resources and protection to manage stress effectively.

Continuous policy adjustments and workplace improvements can lead to a more positive organizational climate, contributing to lower stress levels and improved job satisfaction.

Incorporating these recommendations would require a collective effort from healthcare administrators, policymakers, and nursing leaders to address both individual and organizational factors contributing to stress. By improving workplace conditions and supporting nurses' well-being, healthcare institutions can foster a healthier work environment that not only benefits nurses but also leads to better patient care outcomes.

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