

# RESEARCH ARTICLE: Assessing the Work-Life-Balance among Nurses in Sulu Sanitarium and General Hospital

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**ABSTRACT.** This research aimed to evaluate the extent of work–life balance experienced by nurses at Sulu Sanitarium and General Hospital. Utilizing a quantitative approach, the study relied on structured data collection and statistical analysis to objectively assess key variables. The methodology incorporated both descriptive and correlational designs descriptive to detail the characteristics of the nursing population without experimental manipulation, and correlational to explore associations between different factors. Data were gathered from nurses working at the hospital located in Barangay San Raymundo, within the Municipality of Jolo, the administrative center of Sulu Province in the Philippines. A total of 100 participants were surveyed, though this number may not fully capture the diversity of the hospital’s entire nursing staff. Results indicated that most respondents were relatively young, primarily female, and in contractual positions with limited tenure. Overall, nurses reported manageable workloads and supportive work environments that facilitated effective time use and work–life integration. Additionally, demographic variables such as age, sex, civil status, employment classification, and years of service showed no significant impact on how work–life balance was perceived. The study further emphasized a strong link between workload perception, time management, and overall balance between professional and personal life.

**KEYWORDS:** *Work, Life, Balance, Nurses*

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## **Introduction**

Nurses play an essential role in the healthcare system, ensuring patient safety, delivering quality care, and promoting recovery. Despite this critical role, they face mounting challenges such as high patient loads, staffing shortages, and physically and emotionally demanding work settings. These conditions contribute to job dissatisfaction, stress, burnout, and increased turnover, which in turn affect both care quality and workforce sustainability (Lake et al., 2020; Shahbal et al., 2022). Studies also show that prolonged exposure to such pressures can compromise a nurse's mental health and professional commitment (Alharbi et al., 2020; Salehi et al., 2020). Similar patterns of stress and insecurity have also been observed in other professional groups during crisis periods, where economic instability and role strain forced individuals to develop adaptive strategies (Chavez, 2020; Chavez, Del Prado, & Estoque, 2023).

In healthcare, nurses are frequently under pressure to fulfill institutional demands while also managing their personal lives. Work–life balance (WLB) has thus become a central issue in occupational health, especially within nursing, where long hours and heavy responsibilities are common. Since nurses are central to patient outcomes, understanding and promoting their well-being is vital to maintaining effective healthcare delivery. Identifying the factors that influence WLB is therefore essential for both individual growth and organizational stability. Workplace support systems, legal protections, and policy compliance frameworks such as those outlined in the Magna Carta for Women can play a vital role in enabling health workers, especially women, to advocate for safer, more balanced work environments (Chavez, Gregorio, Araneta, & Bihag, 2024; Chavez, Gregorio, Araneta, et al., 2024).

While global literature has explored these concerns extensively, there remains limited data focused on Filipino nurses, particularly in the aftermath of the COVID-19 pandemic and the "New Normal." Specifically, research examining the intersection of socio-demographic factors and the work environment among Filipino nurses remains scarce (Dones et al., 2016). Despite Department of Health (DOH) guidelines recommending a nurse-to-patient ratio of 1:12, many hospitals fall short of this standard. Reports show imbalanced ratios such as 2:64 in some surgical wards, highlighting how staffing deficits contribute to excessive workloads (Mata 2 Press Service, 2017). Such overload can create an environment where nurses not only face physical and emotional fatigue but also lack institutional mechanisms for self-protection or support (Chavez, W. Gregorio, Araneta, et al., 2024).

These challenges are similarly evident in Sulu hospitals, where nurses often juggle non-nursing tasks, further straining their capacity. Regional findings also show mixed outcomes in terms of WLB: while some report adequate balance (Laguador et al., 2017), others reflect a concerning 44% balance level among nurses (Abdurajad et al., 2021). In addition, communication-related stressors such as those encountered in leadership and high-pressure professional roles—can contribute to psychological burden and limit job performance (Savellon, Asiri, & Chavez, 2024). In the case of Sulu Sanitarium and General Hospital, nurses face added complexities stemming from the unique cultural and institutional context. Balancing professional duties with personal responsibilities here may impact job satisfaction, performance, and overall quality of life.

This study seeks to address the knowledge gap by evaluating work–life balance among nurses in Sulu Sanitarium and General Hospital. It explores how various socio-demographic characteristics relate to their experiences of workload, time management, and workplace support. The findings aim to inform administrators, nursing leaders, and policymakers in creating strategies that enhance the working conditions and well-being of nurses, ultimately contributing to better patient outcomes and a more resilient healthcare workforce.

## **Research Questions**

This study aimed to assess the level of work-life balance among nurses at Sulu Sanitarium and General Hospital. Specifically, it sought to answer the following research questions:

1. What is the socio-demographic profile of the nurses assigned at Sulu Sanitarium and General Hospital in terms of;
  - 1.1 Age;
  - 1.2 Gender;
  - 1.3 Civil status;
  - 1.4. Status of employment; and
  - 1.5. Length of service?

2. What is the level of work-life balance of the respondents in Sulu Sanitarium General Hospital in the areas of;
  - 2.1 Workload;
  - 2.2 Time management; and
  - 2.3 Work environment?
3. Is there a significant difference on the work-life balance among nurses in Sulu Sanitarium General Hospital when data are grouped according to socio-demographic profile in terms of;
  - 3.1 Age;
  - 3.2 Gender;
  - 3.3 Civil status;
  - 3.4 Status of employment; and
  - 3.5 Length of service?
4. Is there a significant correlation among sub-categories subsumed under work-life balance?

## **Literature Review**

### ***Foreign Studies and Literature***

*Nursing as a High-Stress Profession.* Nursing is widely recognized as one of the most stressful professions, necessitating effective work-life balance (WLB) to maintain nurse well-being and ensure quality patient care (Paudel, 2023). Nurses often contend with extended hours, shift work, and emotional strain, all of which can negatively impact their physical, emotional, and mental health. As highlighted by Jensen (2023), the promotion of personal wellness through healthy habits, adequate rest, and stress management is crucial in avoiding burnout and sustaining job satisfaction. Sarla (2024) further defines WLB as the equilibrium between work responsibilities and personal life, which underpins a healthy, sustainable career. In line with this, Greenhaus and Beutell (1985) and Greenhaus and Allen (2011, as cited in Paudel, 2023) conceptualize WLB as a critical measure of overall work quality.

*Workload and Its Impact on Work-Life Balance.* Several studies examine how work-related variables influence WLB. Carayon and Gurses (2008) emphasize the harmful effects of staff shortages and administrative burdens on nurse retention and patient safety. Workload was also found to significantly affect nurses' quality of life, independent of demographic or work-related variables (Koca et al., 2024). Studies from Permadi et al. (2023) and Charath et al. (2022) show that while WLB impacts job satisfaction, workload more directly influences performance and well-being. Similarly, Ali et al. (2023) and Alruwaili et al. (2022) identify high workloads driven by institutional shortcomings as a primary cause of burnout, commitment issues, and reduced work-life harmony.

*Supportive Work Environment.* Other research underscores the value of supportive work environments. For example, Poulouse and Sudarsan (2017) show that work overload reduces satisfaction, while strong workplace support improves it. Nordin (2019) found that work-family conflict contributes to emotional exhaustion, supporting the need for targeted organizational interventions.

*Time Management and Personal Productivity.* Time management also plays a pivotal role in achieving WLB. Bella (2023) and Zyoud (2023) emphasize how proper time allocation reduces stress and increases personal and professional satisfaction. Studies by Goldsby et al. (2020) and

Filomeno et al. (2023) advocate for training in time management and self-leadership to enhance productivity and decision-making among nurses.

*Work Environment and Nurse Outcomes.* Lastly, the work environment has a notable impact on nurse outcomes. A poor environment can increase emotional exhaustion and turnover intentions, while supportive settings are linked to improved job satisfaction and performance (Boudreau & Rhéaume, 2024; Almutairi et al., 2022; Akinwale & George, 2020). This is further supported by Klang et al. (2023) and Nurumal (2019), who found positive associations between WLB, time management, and workplace conditions. Social support and a positive organizational culture also contribute to nurses' overall quality of life and care outcomes (Rao & Shailashri, 2021; Alresheidi & Alsharari, 2021).

### ***Local Studies and Literature***

*Practice Environment and Perceptions in the New Normal.* Research on Filipino nurses has increasingly focused on the evolving demands of their work environments and how these impacts their professional satisfaction and overall well-being. Jabonete et al. (2023) explored nurses' perceptions of their practice environment in the "New Normal," using the Practice Environment Survey – Nurse Work Index (PES-NWI). Their findings indicated generally favorable perceptions, particularly in the areas of leadership and nurse manager support. However, staffing levels and resource adequacy were viewed less positively. The study also found that nurses with more years of experience, higher professional rankings, and specific unit assignments such as pediatric or medical-surgical units tended to report more favorable work environments. Recommendations included enhancing continuing education, implementing nurse-driven policies, and ensuring adequate staff support.

*Work-Life Balance, Workload, and Job Performance.* Meanwhile, Permadi, Diputra, and Sanjiwani (2023) assessed the roles of work-life balance (WLB) and workload on job satisfaction and performance in a private hospital setting in Denpasar. Although WLB was linked to improved job satisfaction, it showed no direct effect on performance. In contrast, workload had a direct positive impact on both satisfaction and performance. Interestingly, job satisfaction alone was not a strong predictor of performance. The study emphasized the importance of managing workload efficiently to boost care quality and nurse output.

*Work Environment and Quality of Life.* In another study, Barandino et al. (2019) surveyed 103 nurses in Zamboanga City and discovered a significant positive relationship between the perceived practice environment and work-related quality of life. Among the subscales, the foundation for quality care rated highest, while staffing adequacy remained the lowest. Nonetheless, nurses reported relatively high job satisfaction and low stress levels, suggesting that targeted support programs such as professional development and incentive-based initiatives could further enhance both job quality and care outcomes.

*Predictors of Professional Quality of Life.* Adolfo (2021) conducted a cross-sectional study involving 374 nurses from both public and private hospitals across the Philippines. Using the Nursing Work Index and Professional Quality of Life (ProQOL) scale, the results showed that while the professional quality of life was moderate, the perceived work environment scored low. Factors such as age, income level, and working hours were significantly associated with outcomes like burnout, compassion satisfaction, and secondary traumatic stress. Notably, higher salaries and reduced hours correlated with improved well-being. The findings stress the need for hospital

systems to address environmental and compensation-related factors to support nurse welfare and professional resilience.

*Role Overload and Professional Challenges.* Dagoy et al. (2024) examined the professional interests and integrity of teachers with multiple administrative functions, revealing that role overload and conflicting responsibilities can lead to ethical dilemmas and stress. These findings parallel challenges faced by nurses balancing clinical duties with administrative tasks, underscoring the need for clear role definitions and support systems to mitigate stress and maintain professional integrity.

*Ethical Stress in Professional Roles.* Chavez et al. (2024) conducted a discourse analysis on the ethical dilemmas arising from the use of AI in academic settings, highlighting concerns about overreliance and academic dishonesty. This study offers insight into ethical stress in professional roles, which can draw parallels to decision fatigue in nursing, where nurses may face ethical challenges due to workload and resource constraints.

*Work-Related Barriers and Inclusive Practices.* Leon et al. (2024) analyzed the implementation of inclusive classrooms, discussing work-related barriers and compliance issues. These concepts translate well to nursing settings, where inclusive practices and overcoming institutional barriers are crucial for effective patient care and staff collaboration.

*Coping Strategies for Stress.* Inoferio et al. (2024) explored how AI-assisted learning helps students cope with math anxiety and lack of confidence. Their findings on psychological coping strategies are applicable to the stress aspect of nurses' work-life balance, suggesting that technological interventions could support nurses in managing stress and enhancing self-efficacy.

*Legal Awareness and Workplace Empowerment.* Bucoy et al. (2024) investigated teachers' comprehension of their legal rights, emphasizing the importance of legal awareness in workplace empowerment. This is relevant for nurses, as understanding their rights can contribute to a supportive work environment and enhance job satisfaction.

## **Methodology**

This chapter outlines the methodology used to evaluate the work-life balance of nurses at Sulu Sanitarium and General Hospital. It details the study's design, setting, participants, sampling approach, research tools, ethical considerations, and data collection procedures. Emphasis was placed on ensuring that the research process followed ethical guidelines and maintained methodological integrity throughout the data collection phase.

### **1. Sampling Design and Respondents**

The study used the purposive sampling method. Purposive sampling is a non-probability sampling method in which researchers choose participants based on specific features or criteria related to the study subject. Purposive sampling allows the researcher to collect detailed data from individuals who can provide useful insights into the study variables.

The study was conducted with a sample size of 100 nurses, which may not have been representative of the entire nursing population at Sulu Sanitarium and General Hospital. Primary data was collected directly from nurses through survey questionnaires. This type of data referred to original, firsthand information gathered specifically for the purpose of the research study. It was unique to the study, ensuring that the data was directly relevant to the research question. By collecting primary data, the researcher obtained fresh, up-to-date insights that were tailored to the specific objectives of the study, making it a crucial source of information for addressing the research problem.

No.	Locale	Number of Respondents
1.	Pediatric Ward	14
2.	Obstetric and Surgical Ward	11
3.	Medical Ward	14
4.	Private Room	10
5.	Communicable Ward	10
6.	Emergency room	10
7.	Outpatient	6
8.	Delivery room	6
9.	Operating room	11
10.	Special baby care unit	8
	Total	100

## 2. Research Instruments

The numerical data for this study were collected through a modified survey questionnaire. The original version was based on the study entitled 'Determinants of Work-Life Balance among Nurses in Public Hospitals in Klang Valley' (Ali et al., 2023; Ahmad et al., 2023; Nawi et al., 2023; Sabar et al., 2023; Husin et al., 2023), which examined the impact of workload, time management, and workplace factors on nurses in hospital settings. The modified version of the questionnaire consisted of two parts:

Part I focused on the socio-demographic profile of the respondents, including variables such as age, gender, civil status, employment status, and length of service.

Part II assessed the level of work-life balance of nurses at Sulu Sanitarium General Hospital, covering areas such as workload, time management, and work environment. This section included a total of 30 items, where respondents were asked to rate their agreement with each statement using a 5-point Likert scale, with 5 representing 'Strongly Agree' and 1 representing 'Strongly Disagree.'

The following rating scale intervals were adopted in the analyses of the results of the computations to be yielded by both descriptive and inferential statistical tools:

Point	Scale Value	Descriptors	Interpretation
5	4.51-5.00	Strongly Agree (SA)	Very High level of work-life balance
4	3.51-4.50	Agree (A)	High level of work-life balance
3	2.51- 3.50	Neutral (N)	Moderate level of work-life balance
2	1.51- 2.50	Disagree (D)	Low level of work-life balance
1	1.00- 1.50	Strongly Disagree (SD)	Very low level of work-life balance

## 3. Data Gathering Procedure

The study began with a literature review to guide the development of a tailored questionnaire. A request for permission was submitted and approved by the hospital chief, with endorsement from the Dean and research adviser. One hundred nurses from Sulu Sanitarium and General Hospital, aged 23 to 55 and above, were selected as respondents. Participation was

voluntary, with informed consent obtained after explaining the study’s purpose and ensuring confidentiality. The researcher distributed and collected the questionnaires, addressed participant inquiries, and maintained anonymity. Collected data were analyzed using SPSS with the assistance of a statistician.

#### 4. Data Analysis Process

This study aims to evaluate the level of work-life balance among nurses at Sulu Sanitarium and General Hospital using both descriptive and inferential statistics. Descriptive statistics, specifically frequency and percentage, were applied to profile respondents based on age, gender, civil status, employment status, and years of service. To assess the level of work-life balance across workload, time management, and work environment, weighted mean and standard deviation were used to summarize central tendencies and data variability. To examine significant differences in work-life balance across demographic groups, t-tests were applied for gender, while ANOVA was used for variables like age, civil status, employment status, and service length. Finally, Pearson correlation was employed to explore the relationship between the various components of work-life balance.

### Results and Discussion

*Question 1. What is the socio-demographic profile of the nurses assigned at Sulu Sanitarium and General Hospital in terms of: 1.1 Age, 1.2 Gender, 1.3 Civil Status, 1.4 Status of Appointment, and 1.5 Length of Service?*

#### *In terms of Age*

**Table 1.1** Socio-Demographic Profile of Nurse-respondents by Age.

Age	Number of respondents	Percent
25 years old and below	29	29
26-34 years old	51	51
35-44 years old	19	19
45-54 years old	1	1
Total	100	100

**Table 1.1** the age distribution of the nurse-respondents at Sulu Sanitarium and General Hospital shows that the majority (51%) are between 26 and 34 years old, followed by 29% who are 25 years old or younger. Additionally, 19% of respondents fall within the 35-44 age range, and only 1% are aged between 45 and 54 years. These results highlight that most of the nurse-respondents are in the early to mid-stages of their careers, with the largest group being within the 26-34 years age bracket.

#### *In terms of Gender*

**Table 1.2** Demographic Profile of Nurse-respondents by Gender.

Gender	Number of respondents	Percent
Male	15	15
Female	85	85
Total	100	100

**Table 1.2** the demographic profile of the nurse-respondents at Sulu Sanitarium and General Hospital, broken down by gender, shows that 85% of the respondents are female, while 15% are male. These results underscore the predominantly female composition of the nursing staff at the hospital, reflecting the broader trend in the nursing profession where women represent a larger share of healthcare providers

***In terms of Civil Status***

**Table 1.3** Demographic Profile of Nurse-respondents by Civil Status.

Civil Status	Number of respondents	Percent
Single	50	50
Married	48	48
Divorced	1	1
Widowed	1	1
Total	100	100

**Table 1.3** the demographic profile of the nurse-respondents at Sulu Sanitarium and General Hospital, categorized by civil status, reveals that 50% are single, while 48% are married. A small proportion, 1%, are either divorced or widowed. These results show an almost equal distribution between single and married respondents, with a minimal representation of divorced or widowed individuals. This distribution implies that a large segment of the nursing staff is likely in the earlier stages of both their personal and professional lives.

***In terms of Status of Appointment***

**Table 1.4** Demographic Profile of Nurse-respondents by Status of Appointment.

Status of Appointment	Number of respondents	Percent
Permanent	35	35
Job Order	64	64
Contractual	1	1
Total	100	100

**Table 1.4** the demographic profile of the nurse-respondents at Sulu Sanitarium and General Hospital, categorized by their employment status, shows that 64% are employed under Job Order status, while 35% hold Permanent positions. A small proportion, 1%, are employed on a Contractual basis. These results suggest that a large segment of the nursing staff at the hospital is engaged in temporary or non-permanent employment, which could potentially impact job security, benefits, and long-term career prospects within the institution.

***In terms of Length of Service***

**Table 1.5** Demographic Profile of Nurse-respondents by Length of Service.

Length of Service	Number of respondents	Percent
Less than 1 year	26	26
1-3 years	36	36
4-6 years	16	16
7-10 years	17	17
More than 10 years	5	5
Total	100	100

**Table 1.5** the demographic profile of the nurse-respondents at Sulu Sanitarium and General Hospital, categorized by their length of service, reveals that 36% of the respondents have been employed for 1 to 3 years, making this the largest group. This is followed by 26% who have been with the hospital for less than a year. Additionally, 17% of the nurses have 7 to 10 years of experience, while 16% have worked for 4 to 6 years. Only 5% of the respondents have been employed for over 10 years. These results suggest that the majority of nurse-respondents have

relatively short tenure at the hospital, with the largest segment having between 1 and 3 years of service, indicating a workforce composed mainly of newer or younger nurses.

*Question 2. What is the level of work-life balance of the respondents in Sulu Sanitarium General Hospital in the areas of: 2.1 Workload, 2.2 Time Management, and 2.3 Work Environment?*

***In terms of Workload***

**Table 2.1** Level of Work-Life Balance of the Respondents in Sulu Sanitarium General Hospital in the Areas of Workload.

	Statements	Mean	S.D	Rating
1	I have appropriate patient loading during my shift.	3.89	.863	Agree
2	I don't have to work overtime to complete my tasks.	3.34	1.066	Neutral
3	My workload allows me to provide quality patient care.	3.76	.842	Agree
4	I have sufficient time to complete my daily responsibilities.	3.70	.835	Agree
5	I feel that my duties are evenly distributed among the nursing staff.	3.83	.805	Agree
6	I am satisfied with the number of patients I am assigned.	3.72	.817	Agree
7	I can manage my patient workload over the intended shift without rushing.	3.45	.903	Neutral
8	My workload does not impede my personal life.	3.63	.884	Agree
9	I feel supported by my management regarding workload issues.	3.48	.785	Neutral
10	I have enough resources (e.g., staff, equipment) to manage my workload effectively.	3.28	.986	Neutral
Total Weighted Mean		3.6080	.69073	Agree

*Legend:* (5) 4.50-5.00=Strongly Agree; (4) 3.50-4.49=Agree; (3) 2.50-3.49=Neutral; (2) 1.50-2.49=Disagree; (1) 1.00- 1.49=Strongly Disagree

**Table 2.1** the overall level of work-life balance in terms of workload among the nurse-respondents at Sulu Sanitarium and General Hospital shows a total weighted mean of 3.6080, which falls under the 'Agree' category. The standard deviation is 0.69073, reflecting some variation in the responses from the participants. These findings indicate that, by and large, the nurse-respondents perceive their workload as manageable and well-balanced.

The highest-rated statement among the respondents is, 'I have appropriate patient loading during my shift' (3.89), reflecting an 'Agree' rating, which suggests that most nurses find their patient assignments to be reasonable. Other statements with high ratings include 'I feel that my duties are evenly distributed among the nursing staff' (3.83), 'My workload allows me to provide quality patient care' (3.76), and 'I am satisfied with the number of patients I am assigned' (3.72), all also rated as 'Agree.' These results indicate that nurses generally perceive their workload and patient care responsibilities as fair. However, the lowest-rated statement is 'I have enough resources (e.g., staff, equipment) to manage my workload effectively' (3.28), which was rated as

'Neutral,' suggesting some uncertainty about the adequacy of resources. Other statements that were rated as 'Neutral' include 'I don't have to work overtime to complete my tasks' (3.34), 'I can manage my patient workload over the intended shift without rushing' (3.45), and 'I feel supported by my management regarding workload issues' (3.48). These findings highlight that while nurses find their overall workload manageable, there are concerns related to resource availability, overtime work, and management support. Overall, while nurse-respondents generally agree on a balanced workload, there is room for improvement in terms of resources, management assistance, and reducing overtime work.

***In the context of Time Management***

**Table 2.2** Level of Work-Life Balance of the Respondents in Sulu Sanitarium General Hospital in the Areas of Time Management.

	Statements	Mean	S.D	Rating
1	I effectively prioritize my daily tasks.	4.05	.770	Agree
2	I can find time for breaks during my shifts.	3.66	.879	Agree
3	I am able to balance my nursing duties with personal commitments	3.78	.905	Agree
4	I use time management tools (e.g., planners, apps) to organize my work.	3.34	.966	Neutral
5	My shifts allow adequate time for patient care and documentation.	3.75	.757	Agree
6	I feel I manage my time efficiently during busy periods.	3.63	.774	Agree
7	I am able to complete my work by the end of my shift.	3.75	.857	Agree
8	I receive adequate training on time management strategies.	3.57	.879	Agree
9	I believe better time management could improve my work-life balance.	4.22	.824	Agree
10	I don't have to worry about the work after my shift ends.	3.72	.944	Agree
Total Weighted Mean		3.7470	.59687	Agree

*Legend:* (5) 4.50-5.00=Strongly Agree; (4) 3.50-4.49=Agree; (3) 2.50-3.49=Neutral; (2) 1.50-2.49=Disagree; (1) 1.00- 1.49=Strongly Disagree

**Table 2.2** the overall level of work-life balance among the nurse-respondents at Sulu Sanitarium and General Hospital in relation to time management shows a total weighted mean of 3.7470, which translates to an "Agree" rating. The standard deviation of 0.59687 suggests moderate variability in how the respondents perceive their ability to manage time. These findings indicate that, generally, the nurse-respondents believe they are successful in balancing their work responsibilities with personal commitments through effective time management.

The mean scores indicate that the highest-rated statement is "I believe better time management could improve my work-life balance" (4.22), categorized as "Agree," suggesting that most respondents recognize the importance of time management in achieving a healthy work-life

balance. Other statements with high mean scores include "I effectively prioritize my daily tasks" (4.05), "I am able to balance my nursing duties with personal commitments" (3.78), and "I am able to complete my work by the end of my shift" (3.75), all rated as "Agree." These results indicate that the majority of respondents feel confident in managing their workload and completing their tasks within their shifts. However, the lowest-rated statement is "I use time management tools (e.g., planners, apps) to organize my work" (3.34), rated as "Neutral," which suggests that respondents may be inconsistent or uncertain about using structured time management tools. Other relatively lower-rated statements include "I receive adequate training on time management strategies" (3.57) and "I feel I manage my time efficiently during busy periods" (3.63), both rated as "Agree" but with slightly lower scores, indicating areas that could be further improved. Overall, while the nurse-respondents generally feel that they manage their time well, there is potential for enhancing the use of time management tools and providing more structured training opportunities.

***In the Context of Work Environment***

**Table 2.3** Level of Work-Life Balance of the Respondents in Sulu Sanitarium General Hospital in the Areas of Work Environment.

	Statements	Mean	S.D	Rating
1	I feel supported by my colleagues in the workplace.	4.22	.760	Agree
2	The hospital's culture promotes work-life balance.	3.64	.811	Agree
3	I have access to resources that support my well-being at work.	3.62	.749	Agree
4	My work environment is conducive to providing quality care.	3.74	.787	Agree
5	I feel safe and secure in my work environment.	3.99	.798	Agree
6	There is effective communication among the nursing staff and management.	3.86	.779	Agree
7	I believe that my work environment affects my mental health	3.94	.908	Agree
8	I receive recognition for my contributions at work.	3.48	.810	Neutral
9	The physical environment (e.g., cleanliness, noise level) is comfortable for working.	3.84	.788	Agree
10	I have opportunities for professional development in my workplace.	3.87	.661	Agree
Total Weighted Mean		3.8200	.54198	Agree

*Legend:* (5) 4.50-5.00=Strongly Agree; (4) 3.50-4.49=Agree; (3) 2.50-3.49=Neutral; (2) 1.50- 2.49=Disagree; (1) 1.00- 1.49=Strongly Disagree

**Table 2.3** this section presents the level of work-life balance among the nurse-respondents at Sulu Sanitarium and General Hospital in relation to their work environment. The total weighted mean is 3.8200, which corresponds to an overall rating of "Agree," with a standard deviation of 0.54198, indicating that the responses were fairly consistent. These findings suggest that, overall, the nurse-respondents view their work environment as supportive of their well-being and work-life balance.

"The mean scores indicate that the statement "I feel supported by my colleagues in the workplace" received the highest rating (4.22), categorized as "Agree," which suggests that most respondents perceive their coworkers as a strong source of support. Other statements with high mean scores include "I feel safe and secure in my work environment" (3.99), "I believe that my work environment affects my mental health" (3.94), and "I have opportunities for professional development in my workplace" (3.87), all rated as "Agree." These results highlight the respondents' recognition of the importance of workplace safety, professional development, and mental well-being in their work-life balance. Conversely, the lowest-rated statement was "I receive recognition for my contributions at work" (3.48), which was rated as "Neutral," suggesting that some respondents may feel overlooked or believe recognition programs are insufficient. Other statements with relatively lower ratings include "I have access to resources that support my well-being at work" (3.62) and "The hospital's culture promotes work-life balance" (3.64), both categorized as "Agree" but with slightly lower scores, pointing to areas where improvement is possible. Overall, these results suggest that while the nurse-respondents generally view their work environment as supportive and positive, there is still room for enhancement in areas such as employee recognition and access to well-being resources

*Question 3. Is there a significant difference on the work-life balance among nurses in Sulu Sanitarium General Hospital when data are grouped according to socio-demographic profile in terms of: 3.1 Age, 3.2 Gender, 3.3 Civil Status, 3.4 Status of Appointment, and 3.5 Length of Service?*

**According to Age**

**Table 3.1** Differences on the Work-Life Balance Among Nurses in Sulu Sanitarium General Hospital When Data are Grouped According to Socio-Demographic Profile in Terms of Age.

Sources of Variation		Sum of squares	df	Mean Square	F	Sig.	Descript
Workload	Between Groups	1.508	3	.503	1.055	.372	Not Significant
	Within Groups	45.726	96	.476			
	Total	47.234	99				
Time Management	Between Groups	.862	3	.287	.802	.496	Not Significant
	Within Groups	34.407	96	.358			
	Total	35.269	99				
Work Environment	Between Groups	.506	3	.169	.567	.638	Not Significant
	Within Groups	28.574	96	.298			
	Total	29.080	99				

Note. \* Significant at alpha 0.05

**Table 3.1** this section highlights the differences in work-life balance levels among the nurse-respondents at Sulu Sanitarium and General Hospital, categorized by age. The table presents the F-values and significance (Sig.) levels for the three dimensions of work-life balance: workload, time management, and work environment. Since all significance values exceed the alpha level of 0.05, the results indicate that age does not lead to significant differences in work-life balance levels.

For Workload, the F-value is 1.055, with a significance value of 0.372, indicating no significant difference. Similarly, for Time Management, the F-value is 0.802, with a significance value of 0.496, suggesting that time management practices do not differ significantly across age

groups. Lastly, for Work Environment, the F-value is 0.567, with a significance value of 0.638, which also shows no significant difference.

The findings suggest that the age of the nurse-respondents does not have a significant impact on their work-life balance concerning workload, time management, and work environment. Consequently, the hypothesis stating, 'There is no significant difference in the work-life balance among nurses at Sulu Sanitarium General Hospital when categorized by age' is accepted. This implies that, irrespective of their age, nurses perceive their work-life balance similarly across the evaluated areas.

**According to Gender**

**Table 3.2** Differences on the Work-Life Balance Among Nurses in Sulu Sanitarium General Hospital When Data are Grouped According to Socio-Demographic Profile in Terms of Gender.

Variables	Grouping	Mean	S.D	Mean Difference	t	Sig.	Descriptive
Workload	Male	3.493	.69227	-.13490	-.696	.488	Not Significar
	Female	3.628	.69258				
Time Management	Male	3.713	.63568	-.03961	-.236	.814	Not Significar
	Female	3.753	.59353				
Work Environment	Male	3.767	.58269	-.06275	-.412	.681	Not Significar
	Female	3.829	.53759				

*Note.* \* Significant at alpha 0.05

**Table 3.2** this section presents the differences in work-life balance levels among the nurse-respondents at Sulu Sanitarium and General Hospital, categorized by gender. The table shows the mean scores, standard deviations (S.D.), mean differences, t-values, and significance values (Sig.) for the three work-life balance dimensions: workload, time management, and work environment. Since all significance values exceed the alpha level of 0.05, the results indicate that gender does not lead to significant differences in work-life balance levels.

For Workload, the mean score for male respondents is 3.493, compared to 3.628 for female respondents, resulting in a mean difference of -0.13490, a t-value of -0.696, and a significance value of 0.488. This suggests there is no significant difference in the perceptions of workload between male and female nurses. For Time Management, male respondents have a mean score of 3.713, while female respondents score 3.753, with a mean difference of -0.03961, a t-value of -0.236, and a significance value of 0.814. This indicates that both male and female nurses perceive their time management skills similarly. Lastly, for Work Environment, male respondents scored 3.767, while female respondents scored 3.829, with a mean difference of -0.06275, a t-value of -0.412, and a significance value of 0.681. This shows no significant difference in how male and female nurses perceive their work environment.

The findings suggest that gender does not have a significant impact on the work-life balance of the nurse-respondents concerning workload, time management, and work environment. Therefore, the hypothesis stating, 'There is no significant difference in the work-life balance among nurses at Sulu Sanitarium General Hospital when categorized by gender' is accepted. This implies that male and female nurses perceive their work-life balance similarly across the various areas evaluated.

**According to Civil Status**

**Table 3.3** Differences on the Work-Life Balance Among Nurses in Sulu Sanitarium General Hospital When Data are Grouped According to Socio-Demographic Profile in Terms of Civil Status.

Sources of Variation		Sum of squares	df	Mean Square	F	Sig.	Description
Workload	Between Groups	.658	3	.219	.452	.717	Not Significant
	Within Groups	46.576	96	.485			
	Total	47.234	99				
Time Management	Between Groups	.566	3	.189	.522	.668	Not Significant
	Within Groups	34.703	96	.361			
	Total	35.269	99				
Work Environment	Between Groups	1.200	3	.400	1.378	.254	Not Significant
	Within Groups	27.880	96	.290			
	Total	29.080	99				

Note. \* Significant at alpha 0.05

**Table 3.3** this section presents the differences in work-life balance levels among nurse-respondents at Sulu Sanitarium and General Hospital, categorized by civil status. The table shows the F-values and significance (Sig.) levels for the three areas of work-life balance: workload, time management, and work environment. Since all significance values are greater than the 0.05 threshold, the results suggest that civil status does not result in significant differences in work-life balance levels.

For Workload, the F-value is 0.452, with a Sig. value of 0.717, which is not significant. For Time Management, the F-value is 0.522, with a Sig. value of 0.668, which is also not significant. Lastly, for Work Environment, the F-value is 1.378, with a Sig. value of 0.254, which is not significant.

The findings indicate that civil status does not have a significant impact on the work-life balance of the nurse-respondents in terms of workload, time management, and work environment. As a result, the hypothesis stating, 'There is no significant difference in the work-life balance among nurses at Sulu Sanitarium General Hospital when categorized by civil status' is accepted. This suggests that, regardless of being single, married, divorced, or widowed, nurses perceive their work-life balance similarly across the various areas evaluated.

#### ***According to Status of Appointment***

**Table 3.4** Differences on the Work-Life Balance Among Nurses in Sulu Sanitarium General Hospital When Data are Grouped According to Socio-Demographic Profile in Terms of Status of Appointment.

Sources of Variation		Sum of squares	df	Mean Square	F	Sig.	Description
Workload	Between Groups	.877	2	.438	.917	.403	Not Significant
	Within Groups	46.357	97	.478			
	Total	47.234	99				
Time Management	Between Groups	.446	2	.223	.621	.539	Not Significant
	Within Groups	34.823	97	.359			

	Total	35.269	99				
Work Environment	Between Groups	.976	2	.488	1.684	.191	Not Significant
	Within Groups	28.104	97	.290			
	Total	29.080	99				

Note. \* Significant at alpha 0.05

**Table 3.4** this section highlights the differences in work-life balance levels among nurse-respondents at Sulu Sanitarium and General Hospital, categorized by their status of appointment. The table shows the F-values and significance (Sig.) values for the three dimensions of work-life balance: workload, time management, and work environment. Since all significance values exceed the 0.05 threshold, the results suggest that employment status does not lead to significant variations in the levels of work-life balance.

For Workload, the F-value is 0.917, with a Sig. value of 0.403, which is not significant. For Time Management, the F-value is 0.621, with a Sig. value of 0.539, which is also not significant. Lastly, for Work Environment, the F-value is 1.684, with a Sig. value of 0.191, which is not significant.

The results indicate that the status of appointment does not significantly influence the work-life balance of the nurse-respondents in relation to workload, time management, and work environment. As a result, the hypothesis stating, 'There is no significant difference in the work-life balance among nurses at Sulu Sanitarium General Hospital when categorized by employment status' is accepted. This implies that, regardless of their employment status, nurses have similar perceptions of their work-life balance across the various areas evaluated.

#### **According to Length of Service**

**Table 3.5** Differences on the Work-Life Balance Among Nurses in Sulu Sanitarium General Hospital When Data are Grouped According to Socio-Demographic Profile in Terms of Length of Service.

Sources of Variation		Sum of squares	df	Mean Square	F	Sig.	Description
Workload	Between Groups	2.414	4	.603	1.279	.284	Not Significant
	Within Groups	44.820	95	.472			
	Total	47.234	99				
Time Management	Between Groups	1.467	4	.367	1.031	.396	Not Significant
	Within Groups	33.802	95	.356			
	Total	35.269	99				
Work Environment	Between Groups	.110	4	.027	.090	.985	Not Significant
	Within Groups	28.970	95	.305			
	Total	29.080	99				

Note. \* Significant at alpha 0.05

**Table 3.5** this section outlines the variations in work-life balance levels among nurse-respondents at Sulu Sanitarium and General Hospital based on their length of service. The table presents the F-values and corresponding significance (Sig.) levels for the three key aspects of work-life balance: workload, time management, and work environment. Since all significance values exceed the 0.05 threshold, the findings suggest that length of service does not lead to statistically significant differences in any of the assessed areas.

For Workload, the F-value is 1.279, with a Sig. value of 0.284, which is not significant. For Time Management, the F-value is 1.031, with a Sig. value of 0.396, which is also not significant. Lastly, for Work Environment, the F-value is 0.090, with a Sig. value of 0.985, which is not significant.

The results indicate that the length of service has no significant influence on the work-life balance of the nurse-respondents, specifically in the areas of workload, time management, and work environment. Consequently, the hypothesis stating that 'there is no significant difference in the work-life balance among nurses at Sulu Sanitarium General Hospital when categorized by length of service' is accepted. This suggests that nurses, regardless of their tenure at the hospital, share similar perceptions of their work-life balance across the evaluated dimensions.

*Question 4. Is there a significant correlation among sub-categories subsumed under work-life balance?*

**Table 4.** Correlations Among Sub-Categories Subsumed Under Work-Life Balance.

Variables		Pearson <i>r</i>	Sig.	N	Description
Dependent	Independent				
Workload	Time Management	.853**	.000	100	Very High
	Work Environment	.716**	.000	100	Very High
Time Management	Work Environment	.752**	.000	100	Very High

*Note.* \*\*Correlation coefficient is significant at alpha .01

Correlation Coefficient Scales Adopted from Hopkins, Will (2002):

0.0-0.1 = Nearly Zero; 0.1-0.3 = Low; 0.3-0.5 = Moderate; 0.5-0.7 = High; 0.7-0.9 = Very High; 0.9-1 = Nearly Perfect.

**Table 4.** the analysis reveals a significant correlation among the sub-categories under work-life balance as reported by nurse-respondents from Sulu Sanitarium and General Hospital. The Pearson correlation coefficient (*r*) was found to be statistically significant at the 0.01 level, indicating a meaningful association between the variables involved.

The degree of correlation is as follows:

1. A very high positive correlation ( $r = 0.853$ ) exists between Workload and Time Management, suggesting that as nurses perceive their workload to be manageable, their ability to manage time effectively also improves.

2. A very high positive correlation ( $r = 0.716$ ) exists between Workload and Work Environment, indicating that a well-balanced workload is strongly associated with a positive perception of the work environment.

3. A very high positive correlation ( $r = 0.752$ ) exists between Time Management and Work Environment, meaning that nurses who manage their time effectively are more likely to perceive their work environment as supportive and conducive to work-life balance.

These findings imply that the different aspects of work-life balance—Workload, Time Management, and Work Environment—are strongly interrelated. This strong correlation suggests

that improving one aspect, such as workload management, can significantly enhance time management and perceptions of the work environment.

Hence, the hypothesis which states, “There is no significant correlation among sub-categories subsumed under work-life balance of nurses in Sulu Sanitarium General Hospital.” is rejected. This indicates that workload, time management, and work environment are highly correlated and play a crucial role in shaping the overall work-life balance of nurses at Sulu Sanitarium and General Hospital.

### **Conclusion**

Based on the findings, the study concluded that the majority of respondents were relatively young, predominantly female, with most either married or widowed/divorced, holding contractual positions, and having limited tenure. Overall, nurses perceived their workload as reasonable, reported effective time management, and viewed their work environment as supportive of their well-being. Additionally, no significant differences in work-life balance were observed across age, gender, civil status, employment type, or length of service, indicating a consistent perception among respondents. Lastly, the study highlighted a strong interconnection among the dimensions of work-life balance, suggesting that effective workload management is associated with improved time management.

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