

Original Research Article

## Work Attitude and Job Stress Encountered by Clinical Instructors and Hospital Nurses in Cavite"?

**Jeffrey Alcantara Lucero**

Congressional National High School, City of Dasmariñas, Cavite, Lyceum of the Philippines University, City of General Trias, Cavite, Philippines

**\*Corresponding Author:**

Jeffrey Alcantara Lucero

Email: [nurse\\_jeff@live.com](mailto:nurse_jeff@live.com)

---

**Abstract:** This paper presents the difference between hospital nurses' and clinical instructors' experienced job stress as well as their attitude towards performing their work. Results revealed that clinical instructors experience moderate stress in terms of their physical environment, workload and responsibilities, and social relationship. Despite their perception with respect to their stress level, they can still cope with their stressors as evidenced by their good work attitude. Hospital nurses, on the other hand, experience high stress level in terms of physical environment and moderate stress level in terms of their workload and responsibilities and social relationship. Clinical instructors still utilize their coping strategies in dealing with stressors as supported by their fair and good work attitude in terms of their organizational commitment and job satisfaction.

**Keywords:** Nursing, Nursing Education, Clinical Nursing, Nurse, Job Stress, Work Attitude

---

### INTRODUCTION

The nursing profession has been viewed as a discipline with a very broad spectrum of knowledge there being considered as both an art and a science. At present, nursing has not only confined itself to the clinical setting or taking care of the sick. It has also underwent evolution as it sought integration with other disciplines as education thus; the emergence of nursing education as field under the nursing dogma where nurses devote their professional life in the academe. Other fields of nursing aside from the mentioned above have already been established and each plays essential roles in the society towards fostering the optimal level of health amongst humankind.

Job stress affects the psychological aspect of an individual. This occurs when an individual can no longer overcome the demands of work, leading to poor performance. When this takes place, it will develop into a serious problem. No one is excused to experience job stress once or more in their entire life. Healthcare professionals particularly nurses are greatly jeopardized by job stress given that they encounter unique stressors. In the academe, there is also stress to cope with since they are dealing with students perhaps of different kind. Due to stress, nurses would have found to have a decreased job satisfaction.

Work attitude of nurses affect how they perceived their stressors. Nurses, both in the academe

and in hospitals, with a good work attitude perceive stressors as less threatening thus, limiting their job stress level. Moreover, nurses with a less work attitude will have difficulty in compensating to stressors hence, developing stress.

The involvement of job stress to nurses working in the academe and those in hospitals can be affected by work attitude and vice versa. This relationship has significant effects on nurses working in different fields. Comparing nurses' job stress and attitudes towards work will be critical for them to lessen, if not avoid, their stressors.

### Statement of the Problem

This study involved a great deal of problems with regards to job stress and work attitude of nurses in two different fields. Furthermore, it revealed information in terms of who had a greater deal of job stress and who had a better work attitude.

The study sought to answer the following questions:

1. What is the demographic profile of the nurses working in the academe and in hospitals as to:
  - a. sex;
  - b. age;
  - c. marital status;
  - d. number of children;
  - e. length of experience/ service; and

- f. monthly income?
2. What is the level of job stress as perceived by nurses working in academe and hospitals in terms of:
  - a. physical environment;
  - b. workload and responsibilities; and
  - c. social relationships?
3. What is the kind of work attitude of nurses working in academe and hospitals in terms of:
  - a. organizational commitment and
  - b. work satisfaction?
4. Is there a significant difference in the level of job stress between nurses in academes and hospitals when grouped according to their demographic profile?
5. Is there a significant difference in the work attitude of nurses in academes and hospitals when grouped according to demographic profile?
6. What is the significant relationship between the participants' job stress and work attitude?

## **METHODOLOGY**

### **Research Design**

This study utilized the descriptive research design in answering the research problem. This study was conducted to determine the relationship and significant differences of job stress and work attitude of nurses working in the academe and in hospitals with respect to their demographic profile.

### **Participants of the Study**

The participants of the study included 92 clinical instructors and 110 staff nurses from various colleges of nursing and hospitals, respectively, in the province of Cavite. Proportional allocation was used as the sampling technique where 50 percent of the total population was used to determine the actual number of participants from different hospitals and academes, both private and public.

### **Research Instrument**

A self-prepared questionnaire adopted from different questionnaires was utilized in this study. The said questionnaire was divided into three parts: demographic profile, job stress and work attitude. The demographic profile included the participants' age, sex, marital status, monthly income, number of children, position, and length of service. Job stress was subdivided into three: physical environment, workload and responsibilities, and social relationship. Questions related to job stress were taken and modified from the National Institute for Occupational Safety and Health's Generic Job Stress Questionnaire. Work attitude was subdivided into two: organizational commitment from the Employee Opinion Survey – OCQ created by Meyer and Allen [1] and job satisfaction from NIOSH Generic Job Stress Questionnaire. To determine the level of job stress and work attitude of the participants, each item

was rated along a four-point scale, with 1='Strongly Disagree', 2='Disagree', 3='Agree', and 4='Strongly Agree'. Reverse coded questions were given considerations and were reversely scored in accordance to the given four-point scale.

### **Data Gathering Procedure**

Prior to the collection of data, permission to conduct the study was obtained from the deans of selected colleges of nursing and the chief nurses of the hospitals, both private and government, in Cavite from October 2015 to February 2016.

Each questionnaire was placed in an envelope along with the cover letter. The cover letter explains the purpose of the research study, and assurance of anonymity and confidentiality of answers of the participants. Participation in the research study was made voluntary and the names of the universities and hospitals were coded to ensure the privacy of the involved school and nurses.

### **Demographics**

The demographic profile of each individual was evaluated. Such included sex, age, marital status, number of children, and length of working experience, and monthly income.

### **Job stress**

Responses to stress to different situations in terms of physical environment, workload and responsibilities, and social relationship were measured. Responses were given along a four-point scale, with 1='Strongly Disagree', 2='Disagree', 3='Agree', and 4='Strongly Agree' and with equivalent interpretations of severely stressed, highly stressed, moderately stressed, and slightly stressed, respectively.

### **Work attitude**

Participants answered questions regarding their work attitude in terms of organizational commitment and job satisfaction. Responses were given along a four-point scale, with 1='Strongly Disagree', 2='Disagree', 3='Agree', and 4='Strongly Agree' and with the corresponding equivalent interpretations as poor work attitude, fair work attitude, good work attitude, and excellent work attitude, respectively.

### **Validation and Reliability of the Instrument**

The instrument was subjected to a pretest to ensure its validity and reliability before the conduct of the study. Results from the pretest were statistically authenticated to determine its reliability using Cronbach's alpha.

The internal consistency reliability coefficients for the scales used in this study were all well above 0.7 which means acceptable for the analysis purpose.

**Statistical Treatment of Data**

The demographic profile of the participants was analyzed using the frequency and percentage distribution. Job stress and work attitude were tested in terms of their relationships and significant differences. Spearman Correlation and Chi Square Test were used to

determine relationships of variables whereas Mann-Whitney U Test and Kruskal Wallis Analysis of Variance were utilized to verify the significant differences of the variables.

**RESULTS AND DISCUSSION**

**Demographic Profile**

**Table 1: Demographic profile of the participants**

CHARACTERISTIC	CLINICAL INSTRUCTOR		HOSPITAL NURSE	
	f	%	f	%
<b>Sex</b>				
Male	26	28.3	39	35.5
Female	66	71.7	71	64.5
<b>Age</b>				
20-24	2	2.2	52	47.3
25-29	23	25.0	40	36.4
30-34	18	19.6	6	5.5
35-39	29	31.5	7	6.3
40-44	17	18.5	5	4.5
≥45	3	3.3	0	0.0
<b>Marital Status</b>				
Single	58	63.0	29	26.4
Married	30	32.6	76	69.1
Separated	1	1.1	2	1.8
Widow/Widower	3	3.3	3	2.7
<b>No. of Children</b>				
0	18	19.6	69	62.7
1-2	60	65.2	35	31.8
3-4	14	15.2	5	4.6
≥5	0	0.0	1	0.9
<b>Length of Service</b>				
1 year	2	2.2	44	40.0
2 years	6	6.5	25	22.7
3 years	13	14.1	16	14.5
4 years	20	21.7	8	7.3
5 years	9	20.7	7	6.4
≥6 years	32	34.8	10	9.1
<b>Monthly Income</b>				
5,000 –10,000	0	0.0	104	94.5
11,000 –15,000	1	1.1	6	5.5
16,000 –20,000	12	13.0	0	0.0
21,000 –25,000	3	3.3	0	0.0
≥25,000	76	82.6	0	0.0

**Sex**

Results (Table 1) show that female clinical instructors dominated the male clinical instructors with a frequency of 66 (71.7%) and 26 (28.3%), respectively. Likewise, female hospital nurses outnumbered the male hospital nurses with a frequency of 71 (64.5%) and 39 (35.5%), respectively.

This result confirmed the statement of Avery [2] that by the 20<sup>th</sup> century, nursing has developed into a predominantly female profession and males have become a forgotten part of nursing. Men only represent

a very small proportion of nurses in the profession today.

**Age**

Out of 92 clinical instructors, 35-39 year-old range got the highest frequency of 29 (31.5). The 20-24 year-old range got the lowest frequency of two (2.2%). Conversely, out of 110 hospital nurses, 20-24 year-old range got the highest frequency of 52 (47.3%). No hospital nurse was over 45 years old.

Results of this study revealed that hospital nurses are much younger than the clinical instructors. This may be explained by The Philippine Nursing Act of 2002 which includes qualifications of clinical instructors and hospital nurses. Clinical instructors should be a registered nurse, a holder of a master's degree in nursing, education, or any allied medical profession, and must have one year continuous clinical practice. In addition, nursing board passers can only acquire their license in the Professional Regulation Commission (PRC) at the age of 21. Hospital nurses, on the other hand, can practice nursing once they have acquired their license from the PRC. Furthermore, hospital nurses do not need experience in terms of service and advanced degree before they can practice professionally.

#### **Marital status**

From the total population of 92 clinical instructors, majority were single (58, 63.0%) followed by the married ones (30, 32.6%), one was separated and three were widows or widowers.

In contrast, from the total population of 110 hospital nurses, majority (76, 69.1%) were married and a little more than 25 percent were single.

Most clinical instructors are single probably because they have greater responsibilities and longer working hours. This situation resulted to them having shorter leisure time to do their self-fulfilling activities like dating and consequently having a partner. In contrast, hospital nurses work only for a minimum of eight hours daily giving them enough time to fulfill their needs regarding love and belongingness which is essential for self-actualization [3].

#### **Number of children**

Clinical instructors with one to two children living with them had a frequency of 60 (65.2%). Clinical instructors with three to four children had the lowest frequency of 14 (15.2%). On the other hand, hospital nurses with none to one child range had the highest frequency of 69 (62.7%). Hospital nurses with four to five and six to seven children had lowest frequency of five (4.6%) and one (0.9%), respectively.

Hospital nurses and clinical instructors differ from one another based on the number of children living with them. The total number of children was obtained regardless of their relationship with the participants.

#### **Length of service**

Out of 92 clinical instructors, those with six years of service or more had the highest frequency (32 or 34.8%). The lowest frequency was observed with one year of experience. However, this was the opposite among hospital nurses having 44 (40%) with one year of experience.

This is explained by the fact that hospital nurses are comprised mostly of newly registered nurses. Most clinical instructors, on the other hand, are older than hospital nurses as seen in the preceding result. Moreover, better benefits given to clinical instructors can contribute to their decision to stay longer in the organization. Significant from these benefits is the higher salary received by clinical instructors compared to the salary of the hospital nurses.

#### **Monthly income**

Majority (76, 82.6%) of clinical instructors had a monthly income of Php26,000 and above. On the other hand, majority of hospital nurses (104, 94.5%) had a monthly income of Php5,000 to Php10,000 only.

Obviously, the minimum monthly income of clinical instructors is greater than the minimum monthly income of hospital nurses. The monthly income is being affected by the qualifications and work setting as cited by Mee [4]. Nurses with advanced degrees generally earn more. In addition, the work setting greatly influences the compensations the nurses receive.

#### **Level of Job Stress between Clinical Instructors and Hospital Nurses**

Table 2 shows the level of job stress between clinical instructors and hospital nurses. From the results of the statistical analysis, clinical instructors were moderately stressed in terms of physical environment with a mean of 2.53 (0.94), workload and responsibilities with mean of 2.60 (1.04) and social relationship with a mean of 2.62 (0.99). However, hospital nurses were highly stressed in terms of physical environment with a mean of 2.42(0.78). They were moderately stressed in terms of workload and responsibilities with a mean of 2.63 (0.72) and social relationship with a mean of 2.56 (0.81). Overall, clinical instructors and hospital nurses perceived that they are "moderately stressed" with a mean of 2.58 and 2.54, respectively.

**Table 2: Level of job stress as perceived by clinical instructors and hospital nurses**

JOB STRESS	CLINICAL INSTRUCTOR			HOSPITAL NURSE		
	Mean	SD	Verbal Interpretation	Mean	SD	Verbal Interpretation
Physical Environment	2.53	0.94	Moderately Stressed	2.42	0.78	Highly Stressed
Workload and Responsibilities	2.60	1.04	Moderately Stressed	2.63	0.72	Moderately Stressed
Social Relationship	2.62	0.99	Moderately Stressed	2.56	0.81	Moderately Stressed
Overall Mean	2.58	0.99	Moderately Stressed	2.54	0.77	Moderately Stressed

Legend:

Range	Verbal Interpretation	Equivalent Interpretation
1.00 to 1.75	Strongly Disagree	Severely Stressed
1.76 to 2.50	Disagree	Highly Stressed
2.51 to 3.25	Agree	Moderately Stressed
3.26 to 4.00	Strongly Agree	Slightly Stressed

Job stress, as perceived by clinical instructors and hospital nurses, does not vary. Both nursing professionals experience the same level of job stress in relation to the given stressors as to physical environment, workload and responsibilities, and social relationship.

Clinical instructors and hospital nurses are considered eustress regardless of their age groups. Eustress, as cited by Fevre *et al.* [5], Leka *et al.* [6], is often defined as individuals who have experienced moderate to low stress levels. Individuals who experience eustress are able to meet job demands and this may help them to increase positive work life.

Due to routine activities given to hospital nurses in the steady environment they are in, they have experienced higher level of stress compared to clinical instructors who were being rotated in different hospitals with varying set up thus; environmental stressors do not have an effect on them.

**Kind of Work Attitude between Clinical Instructors and Hospital Nurses**

Table 3 shows the kind of work attitude between clinical instructors and hospital nurses. Clinical instructors and hospital nurses did not differ with regards to the kind of their work attitude. They have the same kind of work attitude considering their organizational commitment and job satisfaction.

In terms of organizational commitment, clinical instructors had good work attitude with a mean of 2.55 (SD 0.94) while the hospital nurses had fair work attitude with a mean of 2.47 (SD 0.75). Both clinical instructors and hospital nurses had good work attitude in terms of job satisfaction with a mean of 2.57 (SD 1.09) and 2.60 (SD 0.88), respectively. In general, clinical instructors have a mean of 2.56 (SD 0.18) while hospital nurses have a mean of 2.53 (SD 0.23), both with verbal interpretation of “good work attitude.”

**Table 3: Kind of work attitude as perceived by clinical instructors and hospital nurses**

WORK ATTITUDE	CLINICAL INSTRUCTOR			HOSPITAL NURSE		
	Mean	SD	Verbal Interpretation	Mean	SD	Verbal Interpretation
Organizational Commitment	2.55	0.94	Good Work Attitude	2.47	0.75	Fair Work Attitude
Job Satisfaction	2.57	1.09	Good Work Attitude	2.60	0.88	Good Work Attitude
Overall Mean	2.56	0.18	Good Work Attitude	2.53	0.23	Good Work Attitude

Legend:

Range	Verbal Interpretation	Equivalent Interpretation
1.00 to 1.75	Strongly Disagree	Poor Work Attitude
1.76 to 2.50	Disagree	Fair Work Attitude
2.51 to 3.25	Agree	Good Work Attitude
3.26 to 4.00	Strongly Agree	Excellent Work Attitude

Despite their differences in their work environment, it is interesting to note that clinical

instructors and hospital nurses have the same work attitude. This implies that they had very good and



similar foundations in terms of health care services which they ought to do to be called true nurses.

Majority of the hospital nurses were found to have shorter years in service in their respective organization than clinical instructors. This might be the reason why they were less committed to their organization. The results of the study confirmed the statement of Meyer and Allen [1] that organizational commitment is the most mature and developed of all the work commitment constructs. In addition, to have a good organizational commitment, one must have a longer stay in an organization.

Clinical instructors and hospital nurses had good work attitude with respect to their job satisfaction. Perhaps, this was due to the overall policies of their respective organization regarding personnel management. If the overall policies of the organization are up to satisfaction level of the nurses, they may decline to quit.

#### **Differences in the Job Stress Levels of According to Demographic Profile**

The results in this section are summarized in Table 4.

##### **Sex**

Based on Mann-Whitney U Test, the level of job stress for both clinical instructors and hospital nurses according to sex was not significant. Therefore, the null hypothesis, which states that there are no significant differences in the level of job stress of hospital nurses, male or female, is accepted.

Research suggested that working is generally related to positive health for men and women [7]. In addition, it has been reported that there are no differences between men and women in relation to workplace stress.

##### **Age**

Kruskal Wallis Analysis of Variance for clinical instructors and hospital nurses revealed insignificant results. This means that there is no significant difference in the level of job stress among clinical instructors and hospital nurses according to their age. The clinical instructors and hospital nurses have the same level of stress despite their differences in age.

Results of this study are in contrast to the common information that stress is directly related to age but are in consonance with the findings of Moustaka *et al.* [8] that age does not affect job stress level as perceived by nurses.

##### **Marital status**

Analysis showed that there is no significant difference in the job stress level of single, married,

separated, and widowed/widower clinical instructors. Kruskal Wallis Analysis of Variance for clinical instructors generated a score of 3.144 with a significant level of 0.370. This signifies that regardless of the marital status of the clinical instructors, they all uniformly experience job stress. Conversely, there are no significant differences in the job stress level of hospital nurses with different marital statuses. This implies that hospital nurses experience stress regardless of their marital status.

The family, according to Sayce [9], may have either positive or negative effect to an individual. He emphasized that a nagging or an understanding partner contribute to the stress an individual may experience in relation to job. This statement was contradictory to the statement of Apolri [10] that the effect of stress cannot be attributed to family situation or marital status alone. The latter supported the result of the study posing insignificance of differences between marital status and job stress.

##### **Number of children**

Result shows that differences between the job stress level of clinical instructors and hospital nurses according to the number of children living with them or their number of children was insignificant. Based on Kruskal Wallis Analysis of Variance, the level of job stress among clinical instructors and hospital nurses regardless of the number of children living with them did not differ from each other.

Having children can be one of life's most joyful experiences, but there are times when they impose demands and hassle, hence, contributing to stress [11]. Results of this study, however, showed that the number of children does not affect the level of stress of clinical instructors and hospital nurses.

##### **Length of service**

Shown in Table 4 are the significant differences in the job stress level of clinical instructors and hospital nurses as regards their length of service in their organization. Kruskal Wallis Analysis of Variance for clinical instructors yielded a score of 3.557 and a level of significance of 0.615. This denotes that there are no significant differences in the level of jobs tress of clinical instructors with respect to their length of service in their organization. For hospital nurses, Kruskal Wallis Analysis of Variance yielded a score of 3.384 and a level of significance of 0.199. This denotes that there is no significant difference in the level of job stress of clinical instructors as regards their length of service in their institution.

Clinical instructors who stayed for six or more years show their preference to continue working in their organization because of the advantages they perceive from it. Such advantages can lessen their job stress for

they feel a sense of fulfillment after finishing every task assigned to them.

The hospital nurses are comprised mainly of newly registered nurses because of the fewer requirements before practice. They feel secure in the organization because they are new and other older nurses whom they considered seniors assist them in their duties. Through this, they prevent the occurrence of stressful situations.

**Monthly income**

Table 4 shows the differences in the job stress level of clinical instructors and hospital nurses regarding their monthly income. Statistical analysis revealed that the level of job stress is not affected by the monthly income of the clinical instructors and hospital nurses. Therefore, nurses with low pay have the same job stress level with those having a high pay.

This result is similar to the result of Braxton [12] and Preyra and Pink [13], regarding incentives in the compensation contracts of nonprofit hospital CEOs. They found out that income is just a small factor of acquiring work related stress.

**Table 4: Differences in the job stress level of clinical instructors and hospital nurses according to demographic profile**

CHARACTERISTIC	CLINICAL INSTRUCTOR		HOSPITAL NURSE	
	Sig.	Decision	Sig.	Decision
Sex	0.425 <sup>ns</sup>	Accept H <sub>o</sub>	0.649 <sup>ns</sup>	Accept H <sub>o</sub>
Age	0.37 <sup>ns</sup>	Accept H <sub>o</sub>	0.599 <sup>ns</sup>	Accept H <sub>o</sub>
Marital Status	0.37 <sup>ns</sup>	Accept H <sub>o</sub>	0.576 <sup>ns</sup>	Accept H <sub>o</sub>
No. of Children	0.258 <sup>ns</sup>	Accept H <sub>o</sub>	0.759 <sup>ns</sup>	Accept H <sub>o</sub>
Length of Service	0.615 <sup>ns</sup>	Accept H <sub>o</sub>	0.199 <sup>ns</sup>	Accept H <sub>o</sub>
Monthly Income	0.295 <sup>ns</sup>	Accept H <sub>o</sub>	0.086 <sup>ns</sup>	Accept H <sub>o</sub>

<sup>ns</sup> not significant at 0.05 level (2-tailed)

**Differences in the Kind of Work Attitude According to Demographic Profile**

The results in this section are summarized in Table 4.

**Sex**

Mann-Whitney U Test revealed no significant differences in the kind of work attitude of clinical instructors and hospital nurses according to sex (Table 5).

There is no significant difference to the work attitude according to the sex of the clinical instructors and hospital nurses. The commitment to their organization and their corresponding job satisfaction did not vary regardless of their sex. In terms of the hospital nurses, this could be a good indicator of good quality patient care and communication skills.

**Age**

Amongst the age groups presented, statistical analysis showed no significant difference to the work attitude of clinical instructors. In contrast, there is a significant difference between work attitude and age of hospital nurses.

Age is not a factor in determining the kind of work attitude of clinical instructors. Furthermore, clinical instructors, regardless of their age groups, have just about the same work attitude. On the contrary, work attitude of hospital nurses can be affected by their age and can be directly or indirectly related to each other.

Age can predispose hospital nurses to their differences in terms of their work attitude.

**Marital status**

Statistical analysis revealed no significant differences in the kind of work attitude of single, married, separated, and widowed/widower clinical instructors.

Regardless of the marital status of hospital nurses, they all uniformly demonstrated almost, if not exactly the same work attitude. Their approach to their work is independent from the marital status. The results of this study are similar to the results presented in the study of Bhaman [14]. Hospital nurses, whether single, married, or separated have a good working attitude.

**Number of children**

Result on this part reveals the differences of the kind of work attitude among clinical instructors and hospital nurses according to the number of children living with them. Based on statistical analysis, Kruskal Wallis Analysis of Variance for clinical instructors has a score of 0.041 with its corresponding significant level at 0.998. This means that there are no significant differences in the kind of work attitude of clinical instructors with respect to the number of children living with them. Also Kruskal Wallis Analysis of Variance for hospital nurses has a score of 8.006 with its corresponding significant level at 0.238. This means that there are no significant differences in the kind of

work attitude of hospital nurses with respect to the number of children living with them.

**Length of service**

Shown also in Table 5 are the differences in the work attitude of clinical instructors and hospital nurses in connection to their length of service in their organization. Kruskal Wallis Analysis of Variance for clinical instructors yielded a score of 8.658 and a level of significance of 0.124. This designates no significant differences in the kind of work attitude of clinical instructors with respect to their years of stay in their organization. Similarly, there are no significant differences in the kind of work attitude of hospital nurses with respect to their years of stay in their organization.

The kind of work attitude of clinical instructors did not vary in spite of the differences in the number of years they have been with their organization. Results of Stevens [15] confirmed the results this study. The length of stay of an individual in a certain organization did not affect one’s job satisfaction and organizational commitment which comprised their general work attitude.

**Monthly income**

Based on statistical analysis, the kind of work attitude was not affected by the monthly income of the clinical instructors and hospital nurses. Therefore, the null hypothesis stating that there is no significant difference in the kind of work attitude according to the monthly income of nurses working in the academe is accepted.

**Table 5: Differences in the job stress level of clinical instructors and hospital nurses according to demographic profile**

CHARACTERISTIC	CLINICAL INSTRUCTOR		HOSPITAL NURSE	
	Sig.	Decision	Sig.	Decision
Sex	0.73 <sup>ns</sup>	Accept H <sub>o</sub>	0.831 <sup>ns</sup>	Accept H <sub>o</sub>
Age	0.085 <sup>ns</sup>	Accept H <sub>o</sub>	0.05	Reject H <sub>o</sub>
Marital Status	0.593 <sup>ns</sup>	Accept H <sub>o</sub>	0.282 <sup>ns</sup>	Accept H <sub>o</sub>
No. of Children	0.998 <sup>ns</sup>	Accept H <sub>o</sub>	0.238 <sup>ns</sup>	Accept H <sub>o</sub>
Length of Service	0.124 <sup>ns</sup>	Accept H <sub>o</sub>	0.298 <sup>ns</sup>	Accept H <sub>o</sub>
Monthly Income	0.824 <sup>ns</sup>	Accept H <sub>o</sub>	0.131 <sup>ns</sup>	Accept H <sub>o</sub>

<sup>ns</sup> not significant at 0.05 level (2-tailed)

**Relationship between Job Stress and Work Attitude**

Table 6 shows the relationship between job stress and work attitude of nurses working in academe and hospitals. A coefficient of 0.126 and a p-value of 0.075 based on Spearman Correlation signified no relationship between job stress and work attitude of

clinical instructors and hospital nurses, thus, the null hypothesis stating that there is no significant relationship between job stress and work attitude of nurses working in the academe and in the hospitals is accepted.

**Table 6: Relationship between job stress and work attitude**

COEFFICIENT	P-VALUE	DECISION
0.126	0.075 <sup>ns</sup>	Accept H <sub>o</sub>

<sup>ns</sup> not significant at 0.05 level (2-tailed) using Spearman Correlation

The result implies that the job stress and work attitude of nurses working in academe and in hospitals do not differ with respect to their general work condition. Clinical instructors and hospital nurses have equal chance of acquiring job stress as to their physical environment, workload and responsibilities, and social relationship.

In line with this, clinical instructors and hospital nurse have almost the same work attitude. The former and the latter have the same kind of work attitude given consideration of their organizational commitment and job satisfaction.

**CONCLUSIONS**

Based on the obtained results, nursing today is considered to be a predominantly profession for female. Clinical instructors are generally older than hospital nurses because being in the field of teaching, certain qualifications must be met. Majority of the hospital nurses are newly registered nurses who belong to the younger age bracket, which shorten experience. In contrast, majority of the clinical instructors are older and have better benefits given to them making them stay longer in the organization. Most clinical instructors are single with higher month pay than hospital nurses.

Clinical instructors experience moderate stress in terms of their physical environment, workload and



responsibilities, and social relationship. Despite their perception with respect to their stress level, clinical instructors can still cope up to their stressors as evidenced by their good work attitude. Hospital nurses, on the other hand, experience high stress level in terms of physical environment and moderate stress level as to their workload and responsibilities and social relationship. Clinical instructors still utilize their coping strategies in dealing with stressors as supported by their fair and good work attitude in terms of their organizational commitment and job satisfaction.

## REFERENCES

1. Meyer, J. P., & Allen, N. J. (2007). Commitment in the workplace. *Thousand Oaks, CA: SAGE Publications*
2. Avery, R. (2007). *Number of male nurses in increasing*. Retrieved: January 23, 2016. <http://www.thestar.com/SpecialSection/article/209399>
3. Smeltzers, S. C. O., & Bare, B. G. (2016). *Brunner and Suddarth's Textbook on Medical- Surgical Nursing*. 10<sup>th</sup> Edition. Lippincott, Williams and Wilkins.
4. Mee, C. L. (2015). Nursing 2005: Factors influencing satisfaction for nurses in an academic medical centre. *Journal of Salary Survey*, 35(10), 46-50.
5. Feyre, M. L., Matheny, J., & Kolt, G. S. (2013). Eustress, distress and interpretation on occupational stress. *Journal of Managerial Psychology*, 18(7), 726-744.
6. Leka, S., Griffiths, A., & Cox, T. (2014). *Work organization and stress*. Nottingham: UK. World Health Organization.
7. Fielden, S., & Cooper, C. L. (2012). *Managerial stress: Are women at risk?* In: DL Nelson, RJ Burke (Eds), *Gender, Work Stress, and Health*, 19-34.
8. Moustaka, E., Malliarou, M., & Constantindis, T. C. (2009). Occupational stress and the mechanisms through which affects the human health. *Public Health and Health Care in Greece and Bulgaria: The Challenge of the Cross-border Collaboration*. Alexandroupolis, Greece.
9. Sayce, T. A. (2012). *How empowerment and social support affect Australian nurses' work stressor*. *Australian Health Review*, 28(1), 56-64.
10. Apolri, R. C. (2013). Moderating effects of social support in shiftworking and non-shifting nurses. *Work Stress* 10(6), 128-40.
11. Canadian Mental Health Association. (2010). *The Stress of Parenting*. Retrieved: December 2, 2015. <http://www.cmha.ca/bins/contentpage.asp?cid=2-70-71>
12. Braxton, T. P. (2009). Registered nurses' job satisfaction in relation to work-related stress. *Journal of Advanced Nursing*, 33 (3), 396-405.
13. Preyra, C., & Pink, G. (2011). Balancing Incentives in the Compensation Contracts of Nonprofit Hospital CEOs. *Journal of Health Economics*, 20, 509-525.
14. Bhaman, D. R. (2008). Predicting Registered Nurse Job Satisfaction and Intent to Leave. *Journal of Nursing Administration*, 33, 271-283.
15. Stevens, J. S. (2009). A tasklevel assessment of job satisfaction. *Journal of organizational behavior*, 16(2), 101-21.