

MODERATION ANALYSIS OF DEMOGRAPHICS TO WORK EFFECTIVENESS AND PROFESSIONAL QUALITY OF LIFE OF FILIPINO NURSE EDUCATORS

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ABSTRACT

Understanding the interplay between demographics, work effectiveness, and professional quality of life has emerged as a critical research focus in an era characterized by rapid organizational transformations. This study aimed to determine the moderation effects of demographic profiles on the relationship between work effectiveness and professional quality of life (ProQOL) among Filipino Nurse educators. Specifically, it explored the respondents' demographic variables in terms of age, gender, years of teaching, and highest educational attainment; assessed the levels of work effectiveness and ProQOL; examined the linear, monotonic, and predictive relationships between work effectiveness and ProQOL; investigated the moderating role of demographic factors to work effectiveness to professional quality of life; and an interventional program aimed at enhancing work effectiveness and ProQOL among respondents was developed based on the findings. Employing a multi-phased research design, the study collected data from Filipino nurse educators, the majority of whom were aged 40 or below (78.1%), female (68.8%), had less than 10 years of teaching experience (56.3%), and held a master's degree (62.5%) with only 18.8% having doctoral qualifications. Results indicated high levels of work effectiveness and very high compassion satisfaction among respondents. Correlational analysis revealed a very strong positive linear and monotonic relationship between work effectiveness and ProQOL (Pearson's $r = 0.952$, $p < .001$). Regression analysis confirmed that work effectiveness is a significant predictor of ProQOL ($R^2 = 0.907$, $p < .001$). Furthermore, demographic variables significantly moderated this relationship, indicating that demographic characteristics influence how work effectiveness impacts ProQOL. Based on these findings, an interventional program was developed, targeting nine critical areas: professional growth, access to organizational information, workplace support, resource availability, empowerment, compassion satisfaction, and strategies to reduce burnout and secondary traumatic stress. This program offers a strategic framework for enhancing the well-being and effectiveness of nurse educators within academic institutions.

Keywords: Nurse Educators, Work Effectiveness, Professional Quality of Life (ProQoL), Demographic Profile, Moderation Analysis.

INTRODUCTION

In an era characterized by rapid organizational transformations, understanding the interplay between demographics, work effectiveness, and professional quality of life has emerged as a crucial research focus. Employee performance is influenced by multiple factors, including age, gender, education level, job tenure, and work conditions, which may moderate the relationship between work effectiveness and well-being. Prior studies indicate that burnout significantly

affects the quality of work life (Leitão, Pereira, & Gonçalves, 2021). The pandemic has further emphasized the necessity of work-life balance, as increased stress levels and mental health burdens among professionals have been associated with declines in productivity (Inocian et al., 2021). A growing body of research underscores how demographic factors interact with workplace conditions to influence employee satisfaction and performance. For instance, professional quality of life among healthcare workers was found to be significantly affected by occupational stress and emotional exhaustion, with younger employees exhibiting higher vulnerability to burnout (Buselli et al., 2020). Moreover, generational differences have also been linked to variations in work engagement and coping strategies, with millennials in the commercial sector expressing distinct preferences for job flexibility and autonomy (Martínez-Buelvas & Jaramillo-Naranjo, 2021).

Another significant moderating factor involves gender differences, particularly in professions with high caregiving demands. Studies have revealed that female nurses experience higher emotional exhaustion compared to their male counterparts, which in turn affects their quality of work life and patient care behaviors (Babapour et al., 2022). Similarly, job stress in relation to demographic variables has been found to impact not only the individual but also team performance and organizational success (Nappi et al., 2021).

Given the complexity of these interrelated factors, this study aims to examine how demographics moderate the relationship between work effectiveness and professional quality of life. Through empirical analysis, this research seeks to provide insights into tailored workplace policies that can enhance employee well-being while optimizing productivity. This is particularly relevant in the post-pandemic landscape, where organizations are restructuring workforce strategies to adapt to new work dynamics.

The global nursing profession presents unique challenges and opportunities, particularly for overseas Filipino workers (OFWs) transitioning between healthcare systems. The researcher, an OFW nurse in the Middle East, has firsthand experience navigating the complexities of cross-border professional mobility and adapting to diverse work environments. In many Middle Eastern healthcare institutions, nurses often face high patient-to-nurse ratios, cultural differences, and institutional hierarchies that may influence their professional quality of life and work effectiveness. These challenges, coupled with the necessity of providing for families back home, contribute to occupational stress and varying levels of job satisfaction. As the researcher prepares for the transition to nursing practice in the United States, understanding how demographic factors moderate the relationship between work effectiveness and professional quality of life becomes a crucial area of study.

In this study, the researcher seeks to examine how age, gender, years of experience, and differences in educational attainment affect job performance and well-being among nurses undergoing similar career transitions. Prior research suggests that demographic factors significantly shape professional experiences, influencing resilience, job adaptability, and overall satisfaction in nursing roles (Leitão, Pereira, & Gonçalves, 2021). Nurses working in the Middle East often encounter rigid work schedules, strict hierarchical structures, and limited career mobility, which may lead to burnout and reduced job effectiveness (Buselli et al., 2020). Conversely, the U.S. healthcare system offers a more structured professional development pathway, greater autonomy, and enhanced career progression, factors that may positively or

negatively impact the professional quality of life depending on individual demographics (Martínez-Buelvas & Jaramillo-Naranjo, 2021).

The researcher recognizes that the transition from one healthcare system to another requires a period of adjustment that may impact work performance, emotional well-being, and career fulfillment. In this study, the focus is to analyze whether demographic factors moderate the experiences of transitioning nurses, shaping their ability to adapt to new professional expectations and work cultures. As previous research indicates, job satisfaction and retention rates among internationally trained nurses are influenced by factors such as cultural competence, social support, and alignment with institutional policies (Babapour et al., 2022).

This study highlighted the critical interplay between work effectiveness and professional quality of life (ProQOL) among nurse educators, revealing a workforce that is predominantly young, female, and largely Master's-prepared, yet still developing in terms of experience and academic progression. Findings of this study revealed that nurse educators generally perceive their work environments as supportive and empowering, with ample opportunities for professional growth, collaboration, and skill application.

A statistically significant and robust positive relationship between work effectiveness and ProQOL confirmed that institutional support, empowerment, and resource availability directly influence educators' well-being, engagement, and resilience. Moreover, the predictive strength of work effectiveness on ProQOL highlighted its value as a strategic focus for faculty development initiatives. The moderation analysis further revealed that demographic variables—such as age, gender, years of teaching, and highest educational attainment—influence how nurse educators experience and respond to their work environments, underscoring the need for personalized and inclusive support mechanisms.

In response to these findings, an interventional program was developed that integrates structured professional development with wellness strategies, tailored to the diverse needs of the faculty. Ultimately, investing in work effectiveness not only enhances productivity but also cultivates purpose, mitigates emotional strain, and fosters a thriving educational climate. By prioritizing both structural empowerment and emotional well-being, institutions can ensure that nurse educators are not only effective in their roles but also fulfilled in their career.

LITERATURE REVIEW

Moderation Analysis of Demographics on Work Effectiveness and Professional Quality of Life

The relationship between demographics and work effectiveness, as well as professional quality of life, is moderated by several factors, including burnout, workplace stress, leadership support, and personal resilience. Recent studies have explored how demographic characteristics such as age, gender, experience, and cultural background interact with work performance and well-being, offering valuable insights into workforce management and policy-making (Leitão, Pereira, & Gonçalves, 2021). One key moderating factor is burnout, which has been shown to significantly influence the extent to which demographic variables impact job performance and satisfaction (Buselli et al., 2020). Employees with higher levels of burnout tend to exhibit lower work

effectiveness, irrespective of their age or experience. Younger nurses and healthcare workers, in particular, face a greater risk of emotional exhaustion, often resulting from high workload demands, lack of autonomy, and minimal institutional support.

Another crucial factor is the interplay between socio-demographics and job satisfaction. Research indicates that older employees, particularly those with more years of experience, tend to report higher job satisfaction levels, mainly due to increased competence and professional resilience (Inocian et al., 2021). However, professional quality of life can still be negatively affected by workplace stressors, such as staff shortages and lack of organizational recognition, even among experienced employees.

Gender differences also play a moderating role in work effectiveness and quality of life. Studies have found that female healthcare workers report higher levels of compassion fatigue and emotional stress than their male counterparts, largely due to additional caregiving responsibilities and societal expectations (Babapour et al., 2022). Conversely, male workers often exhibit higher levels of job control and autonomy, which positively correlates with work effectiveness.

The COVID-19 pandemic has further underscored the impact of demographic factors on professional well-being. Studies have shown that frontline healthcare workers experienced heightened levels of psychological distress, with younger professionals and those in lower socioeconomic brackets being particularly vulnerable (Ruiz-Fernández et al., 2020). Work environments that provided strong leadership support and mental health resources saw better retention rates and improved job performance, highlighting the importance of institutional interventions in mitigating demographic-related disparities.

Cultural background and expatriate status also serve as moderating factors. Expatriate nurses working in diverse healthcare systems often face challenges in adapting to new workplace norms, which can lead to increased stress and reduced work effectiveness (Martínez-Buelvas & Jaramillo-Naranjo, 2021). However, research suggests that structured orientation programs and cross-cultural training can significantly improve job satisfaction and professional quality of life among foreign-trained employees.

In light of these findings, organizations must adopt tailored strategies to address demographic disparities in work effectiveness and professional well-being. Institutional policies that promote workplace flexibility, gender equity, and burnout prevention can enhance employee productivity and job satisfaction. Furthermore, leadership development programs that foster inclusivity and support professional growth across different demographic groups can contribute to a more resilient workforce.

Future research should continue exploring the intersection of demographic factors with evolving workplace dynamics, particularly in the post-pandemic era. Understanding these moderating effects will be critical in shaping sustainable workforce policies that promote both employee well-being and organizational success.

Demographics Affecting Work Effectiveness and Professional Quality of Life

The findings of this study highlight the significant role demographics play in shaping work effectiveness and professional quality of life among healthcare workers, particularly nurses. Research has consistently shown that demographic factors such as age, gender, years of experience, and work setting can either facilitate or hinder job performance and satisfaction (Martínez-Buelvas & Jaramillo-Naranjo, 2021). The effect of these factors is particularly evident among nurses transitioning between different healthcare systems, such as those migrating from the Middle East to the United States.

Studies indicate that younger nurses, often less experienced, are more susceptible to workplace stress, burnout, and emotional exhaustion compared to their older counterparts (Buselli et al., 2020). The lack of familiarity with institutional policies, hierarchical structures, and patient care expectations in a new country can contribute to reduced work effectiveness. On the other hand, senior nurses with extensive work experience tend to demonstrate higher adaptability and resilience, which positively impacts their quality of life and work engagement (Inocian et al., 2021). However, despite their experience, older nurses may face challenges related to technology adaptation and the physical demands of the job.

Gender also plays a crucial role in shaping workplace experiences. Research suggests that female nurses, particularly in high-stress environments such as critical care and emergency units, report higher levels of emotional fatigue than their male counterparts (Babapour et al., 2022). This phenomenon is largely attributed to societal expectations, caregiving responsibilities outside of work, and the psychological burden of dealing with patient suffering. Gender disparities also influence work effectiveness, with female nurses often experiencing more difficulties in achieving work-life balance, which in turn affects job performance and professional well-being (Egami & Highfield, 2023).

Another essential demographic factor is the work setting. Nurses working in high-intensity environments, such as intensive care units (ICUs) or COVID-19 wards, tend to experience lower professional quality of life due to extreme workloads and emotional distress (McFadden et al., 2021). The COVID-19 pandemic has further underscored these disparities, as healthcare workers in frontline settings have reported increased levels of anxiety and depression, ultimately affecting their job performance and overall well-being (Bidzan et al., 2020). This is particularly relevant for nurses transitioning to the U.S. healthcare system, where workplace dynamics, patient care standards, and professional expectations may differ significantly from their previous work environments.

Moreover, cultural adaptation is another key factor affecting work effectiveness and quality of life for internationally trained nurses. Studies have shown that cultural competence and social integration play a significant role in reducing stress and increasing job satisfaction among foreign-trained nurses (Korkmaz et al., 2020). Without adequate institutional support, language barriers, cultural misunderstandings, and professional isolation may negatively impact work performance and overall job fulfillment.

Given these findings, it is evident that demographic factors serve as moderating influences in the relationship between work effectiveness and professional quality of life. Institutions should implement targeted strategies such as mentorship programs, cultural sensitivity training, and psychological support services to help nurses transition smoothly into new work environments. Future research should further explore how specific interventions, such as leadership support and career development programs, can mitigate demographic disparities and enhance the work experiences of internationally trained nurses.

Work Effectiveness of Nurses in the Middle East

The work effectiveness of nurses in the Middle East is influenced by a range of factors, including workplace conditions, cultural expectations, job satisfaction, and the impact of global healthcare crises. Research highlights that interprofessional collaboration plays a crucial role in enhancing work effectiveness and ensuring patient safety (Labrague et al., 2022). The region's hierarchical and often rigid hospital structures can create barriers to effective teamwork, yet collaborative approaches improve nurses' ability to manage workloads, reducing burnout and increasing job satisfaction. The COVID-19 pandemic has further tested the resilience of Middle Eastern nurses, leading to unprecedented workloads, psychological stress, and ethical dilemmas that have affected their performance (Al Sabei et al., 2022).

One of the primary factors affecting nursing effectiveness in the Middle East is the stressful work environment. Studies indicate that nurses in the region often work extended shifts under high-pressure conditions, leading to significant burnout (Kisely et al., 2020). This is particularly prevalent in ICU and emergency departments, where nurses experience heightened emotional exhaustion. Job burnout, coupled with limited workplace empowerment, has been found to decrease motivation and work effectiveness (Al-Rawajfah et al., 2022). In contrast, when nurses feel valued and supported through structured professional development programs and organizational support, their performance improves significantly.

Cultural and demographic influences also shape nursing effectiveness. Many Middle Eastern healthcare systems employ a diverse, multinational nursing workforce, with a high percentage of nurses coming from countries such as the Philippines and India. Adapting to different cultural expectations, communication styles, and patient care norms can be challenging for expatriate nurses (Chaabane et al., 2021). Furthermore, language barriers and varying levels of medical training contribute to differences in work effectiveness, with nurses often required to undergo additional orientation and training to align with regional healthcare standards.

Additionally, workplace violence and lack of job security have been identified as key issues affecting nursing performance in the region. Studies have reported high rates of workplace bullying and verbal abuse against nurses, especially those in public hospitals (Varghese et al., 2022). These hostile environments contribute to decreased job satisfaction, lower morale, and reduced effectiveness in patient care. Addressing these issues through institutional reforms, anti-harassment policies, and psychological support services is essential for improving work conditions and retaining skilled nurses.

The role of training and continuous education is another determinant of nursing effectiveness. Research conducted in Jordanian hospitals indicates that nurses who receive ongoing

professional development opportunities exhibit higher levels of competency and efficiency in patient care (Rawashdeh & Tamimi, 2020). In contrast, facilities that fail to invest in nurse training face higher turnover rates and diminished work effectiveness. Similarly, access to psychological resilience programs has been shown to improve nurses' ability to cope with stress and maintain performance levels during crises (Alameddine et al., 2021).

Given the findings of recent studies, improving the work effectiveness of nurses in the Middle East requires comprehensive reforms. Institutional strategies such as promoting team collaboration, addressing burnout through workload adjustments, enforcing workplace safety measures, and investing in training programs can enhance nurse performance. As global healthcare standards evolve, Middle Eastern healthcare systems must prioritize the well-being and professional growth of their nursing workforce to ensure high-quality patient care and effective healthcare delivery.

Professional Quality of Life of Nurses in the Middle East

The professional quality of life among nurses in the Middle East is shaped by various factors, including job satisfaction, workplace stressors, cultural expectations, and institutional support. Studies show that Middle Eastern nurses often experience moderate levels of professional quality of life, which is significantly influenced by their demographic characteristics, workload, and psychological well-being (Inocian et al., 2021). The impact of the COVID-19 pandemic has further exacerbated workplace challenges, leading to increased burnout, emotional fatigue, and secondary traumatic stress among healthcare workers in the region (Al Dhaheri et al., 2021).

Burnout remains one of the most critical issues affecting the professional quality of life of Middle Eastern nurses. Research indicates that nurses in critical care and emergency departments are particularly vulnerable to exhaustion and compassion fatigue, which negatively impact their job performance and mental health (Salimi et al., 2020). Additionally, the hierarchical structure of many healthcare institutions in the Middle East can contribute to workplace stress, as nurses often experience limited decision-making autonomy and are subject to strict administrative control (Cao et al., 2021). Studies suggest that improving workplace empowerment and leadership support can mitigate these challenges, thereby enhancing job satisfaction and overall well-being among nurses.

Cultural influences also play a vital role in shaping the professional experiences of nurses in the Middle East. Many hospitals in the region employ a diverse, multinational nursing workforce, which can sometimes lead to workplace conflicts, communication barriers, and variations in patient care practices (Bandari et al., 2021). Additionally, gender disparities persist in many healthcare institutions, where female nurses often report higher levels of emotional exhaustion due to both workplace demands and societal expectations (Abbas et al., 2020). Addressing these issues through cultural competence training and workplace inclusivity programs could significantly enhance the professional quality of life for nurses in the region.

Another major factor affecting nursing well-being is workplace safety. Studies reveal that workplace violence, verbal abuse, and job insecurity are prevalent concerns among Middle Eastern nurses, contributing to stress and decreased job satisfaction (Jarrad & Hammad, 2020). The implementation of strict workplace safety policies and the provision of psychological

support services can help create a more supportive and secure work environment. Furthermore, professional development opportunities have been identified as crucial in improving nurse retention and job fulfillment. Research conducted in Iran and Saudi Arabia highlights that nurses who receive continuous education and skill enhancement opportunities report higher levels of job satisfaction and reduced burnout (Javanmardnejad et al., 2021).

Given the challenges identified in recent studies, healthcare institutions in the Middle East must prioritize strategies that improve the professional quality of life for nurses. This includes providing better mental health support, promoting workplace empowerment, addressing burnout through manageable work schedules, and fostering a more inclusive and culturally competent work environment. Policymakers should also focus on strengthening workplace safety regulations and ensuring fair compensation and career advancement opportunities to enhance nurse retention and job satisfaction. Future research should further explore how institutional reforms and psychological resilience programs can improve the long-term well-being of nurses in the region.

The professional quality of life among nurses in the Middle East is shaped by a combination of workplace conditions, job satisfaction, cultural dynamics, and institutional policies. Studies indicate that burnout, workload intensity, emotional fatigue, and workplace support significantly influence the well-being of nurses, ultimately affecting their performance and retention in healthcare institutions (Inocian et al., 2021). One of the most pressing concerns is the impact of excessive workloads, particularly in critical care units where nurses experience heightened levels of stress due to patient demands and the emotional toll of their responsibilities (Javanmardnejad et al., 2021).

Another major factor is workplace violence and safety. Research suggests that nurses in the Middle East frequently encounter verbal abuse and workplace bullying, which negatively affect their job satisfaction and mental well-being (Jarrad & Hammad, 2020). The lack of institutional policies to address workplace harassment contributes to high turnover rates and reduced professional quality of life. Additionally, job insecurity and contractual instability, especially among expatriate nurses, create further stressors that diminish workplace morale (Varghese et al., 2022).

Cultural and demographic influences also play a crucial role. The Middle East employs a highly diverse nursing workforce, consisting of expatriate nurses from various countries, including the Philippines, India, and neighboring Arab nations. Adapting to different healthcare systems, language barriers, and cultural expectations often leads to feelings of isolation and professional dissatisfaction among foreign nurses (Bandari et al., 2021).

Workplace empowerment and leadership support have been identified as critical determinants of nursing quality of life. Studies show that nurses who receive organizational support, professional development opportunities, and leadership encouragement exhibit higher levels of job satisfaction and reduced burnout (Labrague et al., 2022). Conversely, nurses who work under authoritarian or unsupportive leadership structures are more likely to experience job dissatisfaction, affecting their long-term commitment to their profession.

The COVID-19 pandemic has further exposed vulnerabilities in the nursing profession, leading to increased cases of anxiety, depression, and compassion fatigue among Middle Eastern nurses (Al Dhaheri et al., 2021). The crisis placed immense pressure on healthcare workers, with many reporting emotional exhaustion due to prolonged work hours, lack of mental health support, and uncertainty about job security (Salimi et al., 2020).

Addressing these issues requires institutional reforms that prioritize the well-being of nurses. Implementing policies to reduce workplace violence, promoting cultural competence training, ensuring job security, and enhancing leadership support are necessary strategies to improve the professional quality of life of nurses in the Middle East. Additionally, integrating psychological resilience programs and mentorship initiatives can help mitigate stress and enhance the job satisfaction of nurses across various healthcare settings. Future research should focus on exploring long-term interventions that enhance nurse retention, promote workplace well-being, and ensure the sustainability of the healthcare workforce in the region.

Influencing Factors Affecting Work Effectiveness of Nurses in the Middle East

The work effectiveness of nurses in the Middle East is shaped by a complex interplay of factors, including workload intensity, professional burnout, leadership support, workplace environment, and cultural dynamics. Research suggests that a significant proportion of nurses in the region experience work-related stress due to heavy patient loads, long working hours, and understaffing, which negatively impacts their productivity and job satisfaction (Al Sabei et al., 2022). The high prevalence of burnout, particularly among critical care nurses, is attributed to emotional exhaustion, lack of autonomy, and insufficient managerial support, all of which hinder work effectiveness and increase turnover rates (Kisely et al., 2020).

One of the most prominent factors influencing work effectiveness is the quality of the work environment. Studies indicate that nurses who work in well-supported and collaborative environments tend to perform more effectively, demonstrating better patient care outcomes and increased job satisfaction (Labrague et al., 2022). Conversely, nurses who face workplace bullying, verbal abuse, and lack of professional recognition report diminished motivation and a decline in performance, ultimately affecting healthcare service delivery (Varghese et al., 2022).

Another crucial factor is leadership and workplace empowerment. Research highlights that nurses who receive positive reinforcement, professional development opportunities, and decision-making autonomy exhibit higher levels of efficiency and productivity (Alameddine et al., 2021). However, in many Middle Eastern hospitals, hierarchical leadership structures and bureaucratic constraints often limit nurses' involvement in decision-making, leading to disengagement and lower job effectiveness (Mohammadnezhad et al., 2023).

The COVID-19 pandemic has further exacerbated work-related stressors, with nurses reporting increased workloads, mental health burdens, and job dissatisfaction (Peng et al., 2021). The unprecedented demand for healthcare services led to extreme physical and emotional exhaustion, highlighting the urgent need for psychological support programs and improved work-life balance measures to sustain nurse performance. In particular, nurses who worked in COVID-19 referral hospitals in the region exhibited higher rates of stress and lower resilience, emphasizing the necessity of institutional reforms to support healthcare workers during crises (Al Dhaheri et al.,

2021). Cultural and demographic factors also play a critical role in shaping nurse effectiveness. The Middle East employs a multinational nursing workforce, with many expatriate nurses struggling with cultural adaptation, language barriers, and varying healthcare expectations (Bandari et al., 2021). Studies show that culturally competent training programs can significantly improve communication, teamwork, and patient care outcomes, thereby enhancing work effectiveness (Abdelwahed & Doghan, 2023).

To improve the work effectiveness of nurses in the Middle East, healthcare institutions must implement policies that prioritize mental health support, promote leadership engagement, reduce burnout through manageable workloads, and foster a culture of workplace safety and respect. The integration of resilience training and mentorship programs has been found to boost morale and enhance the long-term sustainability of the nursing workforce (Alhumaid et al., 2021). Future research should focus on exploring how targeted interventions, such as flexible work schedules and professional upskilling, can further optimize nursing performance in the region.

Concept of Well-being

Well-being is defined as the capacity for individuals to realize their potential, engage in productive and creative work, cultivate positive relationships, and make important contributions to the community (Foresight Mental Capital and Well-being Project, 2008, cited by Browne, C. et al 2024). Well-being is an all-encompassing notion that transcends physical health, incorporating work satisfaction and overall quality of life. This idea is shaped by social circumstances and extends beyond the workplace, serving as a vital predictor of productivity at individual, organizational, and societal levels. Moreover, the significance of safety and health considerations in the workplace is paramount to overall employee well-being. Recognizing and fostering workplace well-being is crucial for establishing healthy and productive work environments (Schulte P, et al. 2010 cited by Almeida, D. 2024).

At its core, well-being encompasses both subjective and objective dimensions. Subjective well-being often refers to an individual's self-assessment of their life satisfaction, emotional experiences, and overall happiness (Bautista et al., 2023). This perspective emphasizes the importance of positive emotions, fulfillment, and the absence of negative feelings as integral components of well-being (Bautista et al., 2023; Wongpakdee et al., 2023). For instance, the Centers for Disease Control and Prevention (CDC) describes well-being as “the presence of positive emotions and moods, the absence of negative emotions, satisfaction with life, fulfillment, and positive functioning” (Bautista et al., 2023). This definition highlights the subjective nature of well-being, which can vary significantly from person to person based on individual experiences and perceptions.

On the other hand, objective well-being is often linked to external factors such as physical health, social relationships, and economic stability. The World Health Organization (WHO) defines well-being as a "resource for healthy living" and a "positive state of health" that goes beyond merely the absence of illness (Wongpakdee et al., 2023). This definition suggests that well-being is not only about individual happiness but also involves the ability to function effectively within society and contribute positively to the community (Wongpakdee et al., 2023). Furthermore, well-being can be viewed through various lenses, including psychological, social, and environmental perspectives. For example, McNeish et al. discuss the operationalization of mental

well-being, which includes both internal constructs like subjective well-being and external factors such as community engagement (McNeish et al., 2020). This aligns with the notion that well-being is influenced by a range of factors, including personal relationships, community support, and environmental conditions (Burkut & Yılmaz, 2024).

The relationship between well-being and quality of life is also noteworthy. Many researchers argue that the terms "well-being" and "quality of life" are often used interchangeably, although they may encompass different dimensions (Näsman et al., 2022). Well-being can be seen as a broader concept that includes various aspects of life quality, such as emotional, social, and physical health (Näsman et al., 2022).

Workplace well-being is a multifaceted phenomenon shaped by various aspects of professional life, including quality of life, safety of the physical and psychosocial environment, organizational climate, and work structure (Niinihuhta M. et al. 2022). It can be defined as a state of happiness characterized by contentment, minimal distress, and sound physical and mental health, which affects individuals' daily life management (Altman M. et al. 2021).

Healthcare professionals' psychological well-being at work, is an increasing area of interest in research since the COVID-19 pandemic. However, the term well-being in relation to healthcare professionals does not have a universally accepted definition (Bamforth et al., 2023). Nurse well-being at work should be defined as a nurse's positive evaluation of oneself and one's contributions to the work of nursing, allowing for the nurse to be the best possible at any given point in time with the ability to adapt to and overcome adversity to the extent possible. Nurses' well-being requires that basic and higher-level needs are met, at both the individual and organizational/community levels (Patrician et al., 2022). The International Society for Professional Identity in Nursing (International Society for Professional Identity in Nursing (ISPI) 2021) state it is the nursing profession's ability to work in accordance with the principles of our professional identity, encompassing ethics and values, knowledge, professional conduct, and leadership, which underpins nurse well-being.

Challenges in the Well-being of Nurse Educators

Burnout among nurse educators is a pressing concern that has been extensively documented in recent studies. Burnout is not merely an individual issue but a systemic one that requires integration into nursing education curricula (D'Aoust, 2023). The unique demands placed on nurse educators, including teaching responsibilities, administrative duties, and the emotional labor involved in mentoring students, contribute to high levels of stress and burnout. This is compounded by the increasing expectations for faculty to engage in research and community service, which can lead to an overwhelming workload (Dugger, 2024).

Burnout among nursing faculty is a pressing concern, particularly as it can lead to decreased job satisfaction and increased turnover rates. Research indicates that nursing faculty experience significant levels of burnout, with emotional exhaustion, depersonalization, and reduced personal accomplishment being prevalent symptoms. A systematic review highlighted that nursing faculty members reported moderate levels of burnout, with emotional exhaustion scores averaging 21.24 out of 54, indicating a substantial burden on their mental health (Hosseini et al., 2022). This emotional exhaustion is often exacerbated by high workloads and insufficient institutional

support, which can create a stressful work environment that diminishes job satisfaction (Boamah et al., 2023). A study about the role of administrative support in mitigating burnout among nursing educators concluded that strong institutional support, including opportunities for professional development and recognition of educators' contributions, helped improve job satisfaction and well-being (Cruz, et a. 2020). Burnout and psychological distress have become prominent issues among Filipino nurses, notably those in academic settings. (Alibudbud, 2023).

The implications of burnout extend beyond the individual educator, affecting the overall quality of nursing education and student outcomes. The prevalence of burnout among nurse educators is further exacerbated by the challenges posed by the COVID-19 pandemic. Many educators reported heightened levels of stress and emotional exhaustion during this period, as they navigated the transition to online teaching and the associated challenges of maintaining student engagement (Galanis et al., 2021). The pandemic has underscored the importance of social support in mitigating the psychological distress experienced by nurse educators. Studies indicate that a lack of social support is a crucial risk factor for developing negative psychological outcomes, emphasizing the need for robust support systems within educational institutions (Galanis et al., 2021).

The idea of compassion fatigue is especially pertinent within the realm of nursing education. Ruth-Sahd and Grim identified that elevated work empowerment and diminished compassion fatigue were substantial determinants of job satisfaction among nurse educators (Ruth-Sahd & Grim, 2020). This suggests that fostering an empowering work environment can mitigate the negative effects of compassion fatigue, enhancing educators' overall well-being. Furthermore, the study highlights the importance of recognizing early warning signs of compassion fatigue and implementing targeted resources to support nurse educators in managing their emotional health.

One of the primary factors influencing the retention of nurse educators is the need for effective mentorship and support systems. A study by Crawford et al. highlights that 68% of nursing faculty prioritize work-life balance as a critical aspect of mentorship (Crawford et al., 2022). This finding underscores the importance of creating structured mentorship programs that not only focus on professional development but also address personal well-being. Addressing these issues is vital for ensuring that nurse educators remain in their roles and continue to contribute to the education of future nursing professionals. The type of institution where nurse educators work can also influence their job satisfaction. Job satisfaction varies significantly based on the type of hospital, with private institutions often providing a more supportive and satisfying work environment compared to government or charitable hospitals (Kumar, 2024). This finding suggests that the institutional context plays a critical role in shaping the experiences of nurse educators.

Dugger's research indicates that high workload levels and a lack of work-life balance are the primary contributors to burnout and the intent to leave nursing academia (Dugger, 2024). This finding underscores the need for educational institutions to implement policies that promote work-life balance, such as flexible scheduling and reduced administrative burdens, to support the well-being of nurse educators.

Moreover, the interplay between job satisfaction and personal factors, such as educational background and family responsibilities, can significantly impact the wellbeing of nurse educators. Expatriate nurses often face unique challenges that affect their job satisfaction, including limited opportunities for career advancement (Almansour et al., 2021). To address these challenges, it is essential for nursing education programs to prioritize the well-being of their faculty members. Strategies such as integrating well-being practices into the curriculum, providing access to mental health resources, and fostering a supportive work environment can significantly enhance the resilience and job satisfaction of nurse educators (D'Aoust, 2023; Ruth-Sahd & Grim, 2020).

Nurse educators in the Philippines face unique challenges that influence their teaching methodologies and the overall quality of nursing education. The Commission on Higher Education mandates that nursing instructors possess at least one year of clinical and teaching experience, which is crucial for bridging the gap between theoretical knowledge and practical application (Appiah, 2020). The World's Nursing 2020 projects that, without action, there will be a shortfall of 4.6 million nurses worldwide by 2030. In the Philippines, the projected shortfall of nurses is expected to be 249,843 by 2030, unless greater investment is made now to retain them in the Philippine health sector (WHO Philippines, 2020).

A well-prepared nursing workforce is essential for addressing the complexities of modern healthcare, and the lack of qualified instructors can hinder the development of critical thinking and clinical reasoning skills among nursing students (House-Kokan, 2024). Furthermore, the emotional exhaustion experienced by nursing faculty, which is often higher than that of their clinical counterparts, can lead to increased turnover rates, further exacerbating the shortage (Wells-Beede et al., 2023).

Nursing educators often face heavy workloads that combine teaching responsibilities, research, administrative duties, and clinical supervision. The balance between these roles can lead to stress, burnout, and role strain, especially for educators who also maintain clinical practice. While nursing educators play a vital role in the healthcare education system, they often receive lower salaries compared to their counterparts working in clinical settings or abroad. This discrepancy can lead to dissatisfaction and may contribute to the outflow of nursing talent to other countries. Many nursing schools in the Philippines face resource constraints, including outdated facilities, limited access to technology, and insufficient funding for research and development.

Work Effectiveness

Work effectiveness can be broadly defined as the degree to which tasks and responsibilities are accomplished successfully within an organization, reflecting both individual employee performance and overall organizational efficacy. Central to this definition are several interrelated factors including job resources, the work environment, and the individual characteristics of employees.

One key component of work effectiveness is the work environment. Research suggests that a conducive work environment significantly enhances employee motivation and performance. Sugma notes that an uncomfortable workplace can lead to diminished motivation, negatively impacting job quality and, consequently, organizational performance (Sugma, 2022). This sentiment is echoed by Wibawanti, who emphasizes the essential nature of work effectiveness

for organizational success, especially in planning sectors within public organizations (Wibawanti, 2024). A supportive work environment, characterized by clear policies and a supportive organizational culture, is crucial in fostering this effectiveness (Rashid et al., 2023; Emmanuel, 2021). The role of the work environment is particularly significant, as it encompasses both physical and psychological aspects that affect employee well-being and performance. Research indicates that a supportive work environment can mediate factors influencing work effectiveness, such as professional competency and career identity (Guan et al., 2023). Furthermore, the quality of the work environment correlates with employee satisfaction and overall performance, whereby inadequate conditions can lead to heightened stress and diminished productivity (Rajagukguk et al., 2023; Gopar et al., 2022).

Moreover, organizational resources and capabilities play a pivotal role in enhancing work effectiveness. Tanesab and Park highlight that improved organizational performance is often mediated by effective management of work resources, which can catalyze innovative performance (Tanesab & Park, 2020). Similarly, Kusnadi and Prijono argue that quality resources, which include substantial employee support systems, are directly correlated with heightened work effectiveness (Kusnadi & Prijono, 2023). This notion aligns with evidence from studies that argue for adequate job resources, such as interpersonal support and access to development opportunities, which facilitate employees in achieving their work goals and reduce burnout and exhaustion (McKenna & Jeske, 2020; Salehi et al., 2020). Moreover, the psychological climate of the workplace—including elements like leadership style and recognition—plays a crucial role in shaping employee motivation. A positive work climate, characterized by clear communication and supportive relationships, fosters greater employee engagement, which in turn promotes effective work behaviors (Satrina et al., 2021; Pambudi & Utomo, 2023). Specifically, research shows that recognition and rewards significantly enhance employee morale and motivation by providing the necessary reinforcement for sustained performance (Peiris & Jayathilake, 2022).

Additionally, personal and contextual factors, including job crafting and person-environment fit, significantly influence work effectiveness. Job crafting, as described by Rizkawati and Andrias, allows employees to modify their roles and work environments to better suit their abilities and preferences, potentially enhancing their effectiveness (Rizkawati & Andrias, 2022). Parent-Lamarche and Marchand further note that the fit between individual employee values and workplace expectations shapes engagement levels, which in turn affects work effectiveness and commitment (Sabrina et al., 2023; Novianti et al., 2024). Moreover, job satisfaction—a direct outcome of competence, work conditions, and employee engagement—has been consistently correlated with high performance levels (Ismainar et al., 2021; Salleh et al., 2022). Factors such as equitable remuneration, opportunities for personal development, and a conducive work atmosphere are crucial for enhancing job satisfaction, which subsequently drives effectiveness and productivity (Liu et al., 2021; Ali et al., 2024).

Finally, the interplay between work-life balance and employee engagement cannot be underestimated. Studies indicate that a healthy work-life balance correlates with increased employee satisfaction and retention, positively affecting work effectiveness (Becker et al., 2022; Hasan et al., 2021). Thus, organizations that prioritize flexible working policies and recognize the significance of employee well-being create a robust framework for maximizing work effectiveness. Importantly, organizational culture and work discipline also have far-reaching

impacts on employee performance. A culture that encourages participation and supports ethical work practices can nurture commitment and loyalty among employees, directly affecting their work outcomes (Sahadi et al., 2021; Aryata & Marendra, 2023). Conversely, a lack of discipline may lead to decreased performance and inefficiency, indicating that structural and cultural elements of organizations must align to support effective strategies for employee engagement and productivity (Pambudi & Utomo, 2023). In conclusion, work effectiveness encompasses individual performance, the quality of the work environment, the availability of organizational and job resources, and the intrinsic factors influencing employee engagement. A multifaceted approach that integrates these components is essential for fostering an environment where employees can thrive, and organizations can succeed.

Professional Quality of Life

The concept of "professional quality of life" (ProQOL) has recently emerged to depict levels of occupational stress. ProQOL is particularly significant in the examination of healthcare professionals (Salimi et al., 2020). It is defined as "the quality of one's feeling in relation to his/her job as a helper" (Stamm, 2010, p. 8 cited by Bahari, G. et al 2022). Three factors influence nurses' ProQOL in the workplace: compassion satisfaction, burnout, and secondary traumatic stress. Compassion satisfaction occurs when empathy drives the helper to act altruistically and alleviate patients' suffering, thereby aiding in coping with the adverse aspects of the profession (Sacco & Copel, 2018 cited by Bahari, G. et al 2022). Nurses are imbued with hope, optimism, and a commitment to continue their roles as professional caregivers. The care, compassion, and empathy exhibited towards patients are believed to affect care professionals' personal and professional lives (Salimi et al., 2020).

Professional quality of life encompasses the beneficial elements of employment in the healthcare sector (compassion fulfillment) and the detrimental factors (compassion weariness). Compassion satisfaction (CS) is the gratification an individual experiences from performing their work effectively. It is the affirmative emotions derived from assisting others, whether through direct contributions to an individual's welfare or the enhancement of societal conditions. Compassion satisfaction engenders feelings of joy, empowerment, vitality, and exhilaration, as caregivers observe the beneficial effects of their patients' enhanced health, improved functioning, personal development, and therapeutic progress (Stamm, 2010 cited by Remegio, W. et al 2021).

Conversely, compassion fatigue (CF) represents the detrimental facet of professional engagement. CF encompasses two dimensions: burnout (BO) and secondary traumatic stress (STS). BO correlates with excessive workloads and unsupportive work environments, manifesting as exhaustion, frustration, anger, and depression. STS is characterized by adverse effects such as sleep disturbances, intrusive imagery, and avoidance of reminders related to the individual's experiences, stemming from fear and work-related trauma (Stamm, 2010 cited by Remegio, W. et al 2021).

Burnout poses a significant issue in professional settings because to its detrimental effects on employee productivity (De-Oliveira et al., 2019 cited by Farber et al., 2023). Burnout is a psychiatric illness characterized by emotional difficulties, depersonalization, and a sense of reduced achievement in daily tasks (Patel et al., 2018 cited by Farber et al., 2023). Patel et al. define emotional exhaustion as a state of feeling overburdened, leading to the depletion of both

emotional and physical energy, culminating in fatigue. Depersonalization, or the objectification of individuals, can lead to adverse, hostile attitudes and unpleasant sentiments towards patients. Insufficient daily achievements correlate with diminished self-esteem, a sense of inadequacy, and reduced workplace efficacy. Burnout has been documented among all tiers of nurse faculty jobs in recent years (Holland et al., 2019; Kelly et al., 2019 cited by Farber et al., 2023).

Nurse professors may be aware of the consequences of professional pressures and burnout, but they might not be aware of their own burnout symptoms (Luckett, 2020). A study indicated that early career, PhD-qualified faculty experienced emotional overextension and exhaustion during their transition to the faculty role, exacerbated by the pressure to enhance productivity in research and scholarship for promotion and tenure (Aquino et al., 2018 cited by Farber et al., 2023).

The third aspect affecting nurses' ProQOL is subsequent traumatic stress. This element refers to natural follow-up behaviors and sentiments that occur after learning about a horrible incident or experience (Bock et al., 2020). Secondary traumatic stress symptoms are negative thoughts, feelings, and/or actions generated by awareness of terrible events that others have gone through, as well as involvement in aiding trauma patients. Individuals exhibiting secondary traumatic stress symptoms may present symptoms analogous to those of post-traumatic stress disorder (Ogińska-Bulik et al., 2021).

Research indicates that the quality of professional life is significantly affected by stress levels and workplace conditions. For instance, studies have shown that high levels of stress correlate with lower ProQOL scores among healthcare workers, suggesting that stress management is essential for maintaining a healthy work environment (Hanh et al., 2023). Furthermore, the COVID-19 pandemic has exacerbated these challenges, leading to increased anxiety and burnout among healthcare professionals (Aydin et al., 2021; Trumello et al., 2020). The importance of social support has also been highlighted, as it plays a protective role against burnout and enhances overall ProQOL (Theofilou & Moschopoulos, 2024; Theofilou et al., 2022). Understanding ProQOL is crucial, as it directly impacts healthcare professionals' performance, job satisfaction, and overall quality of care provided to patients (Magharei et al., 2021; Sansó et al., 2020).

Optimizing Nurse Educators Well-being

Coping strategies play a crucial role in maintaining the wellbeing of nurse educators, particularly in high-stress environments such as healthcare. The relationship between personal wellbeing and effective coping mechanisms is well-documented, suggesting that adaptive coping strategies can significantly enhance the working environment for nurses, including educators. Dimunová et al. (2021) emphasize that adaptive coping strategies are effective in resolving conflicts and managing work-related stress, which is critical for maintaining the health and wellbeing of nursing professionals (Dimunová et al., 2021). This assertion is supported by Lee et al., who found that adaptive coping strategies positively impact the wellbeing of nurses, reinforcing the idea that effective coping mechanisms are essential for stress management in nursing (Dimunová et al., 2021).

In addition to individual coping strategies, the educational environment itself plays a significant role in the well-being of nurse educators. The pedagogical approaches employed by nurse educators can influence not only their own mental health but also that of their students. For example, a qualitative study revealed that nurse educators who utilized diverse pedagogical methods, including person-centered approaches, were better able to address students' mental health care competencies (Marriott et al., 2023). This approach not only prepares students for the emotional demands of nursing but also fosters a supportive learning environment that can alleviate stress for educators themselves. By focusing on the mental health preparedness of their students, nurse educators may also find a sense of purpose and fulfillment in their roles, further enhancing their well-being. Personal characteristics such as resilience play a significant role in the well-being of nurse educators. Singh et al. highlight the importance of resilience-building strategies in addressing occupational stress and burnout among nurse academics (Singh et al., 2020). The interplay between workload, work-life balance, and burnout is another critical area of concern for nurse educators.

Job satisfaction among nurse educators is intricately linked to their educational experiences and the support they receive during their transition into the workforce. Koskinen et al. found that satisfaction with nursing education significantly correlates with job satisfaction one year after graduation, indicating that positive educational experiences can lead to enhanced job satisfaction in the long term (Koskinen et al., 2023). This suggests that institutions must prioritize the quality of nursing education to ensure that nurse educators feel prepared and satisfied in their roles. Furthermore, understanding the factors that influence job satisfaction is critical for improving the wellbeing of nurse educators. Shorif emphasizes that job satisfaction is closely tied to various elements, including recognition, working conditions, and opportunities for professional development (Shorif, 2023).

Organizational commitment is another factor that influences job satisfaction among nurse educators. A strong positive correlation between job satisfaction and organizational commitment, indicating that satisfied educators are more likely to be committed to their institutions (Hakami et al., 2020). This relationship suggests that fostering a supportive organizational culture can enhance both job satisfaction and commitment among nurse educators. Gusar et al. emphasized the significance of active participation in educational programs to enhance motivation among nurse educators. Their study suggests that involvement in professional development activities not only increases motivation but also fosters a sense of purpose and contribution to the nursing profession. This is crucial in maintaining psychological well-being, as educators who feel connected to their professional community are more likely to experience job satisfaction and lower levels of burnout (Gusar et al. 2020). The findings indicate that fostering an environment that encourages continuous learning, and professional growth is essential for enhancing the motivation and psychological well-being of nurse educators.

Furthermore, the development of coping strategies among nurse educators can be supported through targeted training and professional development programs. Educational interventions that focus on stress management and coping skills have been shown to improve the mental health of nursing professionals (Alzahrani & Sharif, 2023). By providing nurse educators with the tools and resources necessary to manage stress effectively, educational institutions can promote a healthier work environment and improve retention rates among faculty.

In addition to formal training, peer support and mentorship programs can serve as valuable resources for nurse educators. Engaging in mentorship relationships allows educators to share experiences, coping strategies, and emotional support, which can significantly enhance their resilience (Mahmoud et al., 2021). Such programs can also facilitate the exchange of best practices in teaching and stress management, further contributing to the well-being of nurse educators. Moreover, the integration of interprofessional education (IPE) into nursing curricula has been identified as a beneficial strategy for nurse educators. IPE fosters collaboration among healthcare professionals, which can reduce feelings of isolation and stress among nurse educators (Switzer, 2023). By engaging with colleagues from various health disciplines, nurse educators can share coping strategies and support each other in managing the challenges of their roles. This collaborative approach not only enhances the educational experience for students but also contributes to the well-being of educators by creating a more supportive professional network.

Self-care strategies among nurse educators are vital for fostering resilience and managing the emotional labor associated with their roles. Gantt's mapping review elucidates diverse self-care practices utilized by nurses, which might be applied to nurse educators encountering analogous stressors in their work settings (Gantt, 2023). This review found three primary categories: self-care and stress; self-care and burnout; and self-care in relation to leadership, workplace characteristics, and physical activity. The emotional burdens of teaching, combined with the obligation to equip students for the challenges of nursing practice, may result in burnout if self-care is not prioritized.

Prerequisite of being a Nurse Educator

The requirements for nurse educators in the Philippines are shaped by a complex interplay of educational standards, clinical experience, and the overarching context of healthcare workforce migration. The Commission on Higher Education (CHED) in the Philippines mandates that nursing instructors must possess a minimum of a master's degree in nursing or a related field, along with at least one year of clinical practice and one year of teaching experience (Appiah, 2020). This dual requirement is critical as it ensures that educators not only possess theoretical knowledge but also practical insights that bridge the gap between classroom instruction and real-world nursing practice (Appiah, 2020). Furthermore, nurse educators must continuously assess and update the curriculum to reflect advancements in medical knowledge and technology, thereby ensuring that graduates are equipped to provide high-quality care (Appiah, 2021). Also, by instilling a sense of professionalism and ethical practice, nurse educators help shape the attitudes and values of future nurses, preparing them to navigate the complexities of the healthcare landscape (Oducado, 2021).

In addition to educational qualifications and clinical experience, nurse educators in the Philippines must also engage in continuing professional development (CPD). The Nursing Law of 2002, along with the CPD Act of 2016, mandates that nurses, including educators, participate in ongoing education to maintain their competence and adapt to evolving healthcare practices (Cabangal et al., 2023; Palma et al., 2020). This requirement underscores the commitment to lifelong learning within the nursing profession and ensures that educators remain current with the latest advancements in nursing science and practice.

The role of nurse educators also extends to research and the development of evidence-based practices within the nursing profession. The National Nursing Core Competency Standards of the Philippines emphasize the importance of research as a core competency for professional nurses (Oducado, 2021). This expectation places additional responsibilities on nurse educators to not only teach but also engage in research activities that contribute to the advancement of nursing knowledge and practice (Oducado, 2021; Appiah, 2021).

The importance of clinical experience cannot be overstated. It serves as a foundation for effective teaching and learning, particularly in nursing education, where practical skills are paramount. Research demonstrates that clinical exposure improves the quality of nursing education by equipping educators with direct understanding of the issues and realities encountered by nursing professionals (Appiah, 2020). The use of high-fidelity simulation (HFS) into nursing courses is increasingly acknowledged as an effective educational instrument, enabling nurse educators to promote skills transfer in a regulated setting. While HFS is not mandatory in the Philippines, its adoption is encouraged to enhance the learning experience and prepare students for clinical settings (Pananganan, 2023).

Nurse Educator's Role and Responsibilities

The role of nurse educators in the Philippines is multifaceted and integral to the development of competent nursing professionals. Nurse educators have the responsibility with developing the curriculum, delivering knowledge, and ensuring that nursing students obtain the essential skills to address the healthcare requirements of the population. The Philippine National Nursing Core Competency Standards emphasize this duty by outlining the standards for nursing education and practice throughout the nation (Oducado, 2021).

One of the primary responsibilities of nurse educators is to develop and implement a curriculum that aligns with both national standards and the evolving needs of the healthcare system. This involves integrating clinical experience into the educational framework, as clinical exposure is crucial for bridging the gap between theoretical knowledge and practical application (Appiah, 2020).

Moreover, the quality of nursing education in the Philippines is significantly influenced by the qualifications and experiences of faculty members. Studies indicate that while clinical experience is essential, it does not always correlate with the perceived quality of education across different institutions (Appiah, 2020). This suggests that other factors, such as teaching methodologies and institutional support, play a crucial role in shaping educational outcomes. Nurse educators are therefore encouraged to engage in continuous professional development to enhance their teaching strategies and adapt to the evolving needs of the healthcare sector. The introduction of mandatory Continuing Professional Development (CPD) for nurses in the Philippines underscores the commitment to maintaining high educational standards and ensuring that nurse educators remain current in their knowledge and skills (Cabangal et al., 2023).

In addition to curriculum development and teaching, nurse educators in the Philippines are also pivotal in fostering research engagement among nursing students. Research is recognized as a fundamental component of nursing practice, and educators are responsible for instilling a research-oriented mindset in their students (Oducado, 2021). This is particularly important in a

country where the nursing workforce is often exported to meet the demands of developed nations, necessitating a strong foundation in evidence-based practice (Appiah, 2021). By encouraging students to participate in research activities, nurse educators contribute to the advancement of nursing knowledge and the improvement of healthcare practices both locally and internationally.

Nurse educators are pivotal in shaping the future of nursing by ensuring that educational programs are relevant, comprehensive, and aligned with contemporary healthcare needs. Their involvement in curriculum development not only enhances their own professional identity but also significantly impacts the educational experiences of nursing students. Nurse educators who engage in curriculum development gain a deeper understanding of their professional identities, which in turn fosters a more enriching learning environment for students (Buthelezi, 2023). This engagement is echoed by Albilehi et al., who assert that such participation improves educators' attitudes towards curricular changes, thereby enhancing the overall educational framework (Buthelezi, 2023).

Furthermore, nurse educators are expected to master a set of competencies that are critical for effective teaching and learning. Dhawo identifies eight essential competencies for nurse educators, including mastery of adult learning theories, curriculum implementation, and ethical principles (Dhawo, 2024). These competencies are crucial for equipping nursing students with the necessary knowledge, skills, and attitudes required for clinical practice. The emphasis on these competencies underscores the importance of a well-rounded educational approach that integrates theoretical knowledge with practical application, thereby preparing students for the complexities of modern healthcare environments.

In addition to these responsibilities, nurse educators must also focus on bridging the theory-practice gap in nursing education. Saifan et al. argue that this gap is a shared responsibility among academic faculties, registered nurses, and nursing students (Saifan et al., 2021). Nurse educators are tasked with creating educational experiences that connect theoretical knowledge with practical application, thereby enhancing students' readiness for clinical practice. This involves not only teaching nursing concepts but also providing opportunities for hands-on experiences that reinforce learning and build confidence in students' clinical skills.

The evolving landscape of nursing education also necessitates a focus on innovative teaching methodologies. Shin and Rim highlight the importance of virtual simulation in nursing education, which can enhance students' metacognitive abilities and prepare them for real-world clinical scenarios (Shin & Rim, 2023). Nurse educators must be adept at integrating such innovative approaches into their teaching to ensure that students are well-prepared for the complexities of modern healthcare environments.

Nurse educators play an essential part in creating the future of nursing leadership, functioning as both educators and leaders within the healthcare system. Their effect extends beyond the classroom, impacting the professional development of nursing students and the overall quality of patient care. The integration of leadership education into nursing curricula is essential for fostering the next generation of nurse leaders, as it equips students with the necessary skills to navigate the complexities of the healthcare environment. This is particularly important given the increasing demands placed on the nursing workforce due to an aging population and evolving healthcare needs (Kim et al., 2022; Dabas, 2023).

The role of nurse educators encompasses the responsibility of conducting research and contributing to the evidence base of nursing education. Engaging in scholarly activities not only enhances the educator's professional development but also informs best practices in nursing education. Darnell et al. note that the lack of scientific evidence in nursing education can lead to role conflict for educators, as they must navigate between experiential knowledge and evidence-based practices (Darnell et al., 2020). By participating in research and disseminating findings, nurse educators can influence educational policies and practices, ultimately improving the quality of nursing education.

METHODOLOGY

This study employed a **multi-method research design**, which is distinct from mixed-methods research. Unlike mixed methods, which integrates qualitative and quantitative data within the same study, a **multi-method approach** applies multiple methods separately, where each method addresses specific research questions (Creswell, 2015). The advantage of using a multi-method design is its ability to provide a more comprehensive understanding of the research problem by employing different analytical strategies while maintaining their methodological independence. The rationale for selecting this approach is to **specifically address the Statement of the Problem (SOP)**, ensuring that each research question is systematically answered using the most appropriate method.

The study incorporated three distinct methodological approaches: **survey correlational analysis, regression and moderation analysis, and an Outcome-Based Education (OBE) framework intervention program development**. Each method corresponded to specific SOPs, allowing for a detailed exploration of the relationships between demographic factors, work effectiveness, and professional quality of life.

Method 1: Survey Correlational Analysis

To answer SOPs 1 to 4, a **survey correlational design** was employed. This method used to describe the demographic profiles of the respondents, including **age, gender, years in teaching, and highest educational attainment**. Furthermore, it assessed the levels of work effectiveness and professional quality of life, while also determining whether a **linear and monotonic relationship existed between work effectiveness and professional quality of life**. The correlational approach is appropriate because it allows for an **empirical examination of the association between variables without manipulating them** (Creswell, 2015). Data was collected through structured survey instruments that measure these constructs, and statistical tests such as Pearson's correlation and Spearman's rank correlation were applied to assess relationships.

Method 2: Regression and Moderation Analysis

To address SOPs 5 and 6, **regression and moderation analysis** was conducted. This method investigated whether **work effectiveness serves as a significant predictor of professional quality of life**, as well as the **moderating role of demographic variables in this relationship**. A hierarchical regression model was used to determine the extent to which demographic characteristics such as **age, gender, years in teaching, and educational attainment** influence

the predictive power of work effectiveness on professional quality of life. The moderation analysis tested whether these demographic factors significantly alter the strength or direction of the relationship between the independent and dependent variables. This approach was crucial in determining **whether different demographic groups experience variations in their professional quality of life as a function of work effectiveness.**

Method 3: Outcome-Based Education (OBE) Framework Intervention Program Development

To answer SOP 7, an **Outcome-Based Education (OBE) framework was applied to develop an interventional program** aimed at enhancing work effectiveness and professional quality of life among respondents. The OBE model emphasizes competency-based education and performance-driven outcomes, making it suitable for designing workplace interventions that address the specific needs identified in the survey and regression analyses. The intervention program was structured based on empirical findings from the previous methods, ensuring that recommendations are data-driven and aligned with the key factors affecting work effectiveness and professional quality of life. This method is particularly significant because it **translates statistical findings into actionable strategies** that can be implemented in educational and professional settings to improve workforce well-being and productivity.

The combination of these methods under the **multi-method research** design ensured that the study captures the **descriptive, relational, and predictive** aspects of the research problem. This approach allowed for a nuanced understanding of the moderating role of demographics in the relationship between work effectiveness and professional quality of life, while also facilitating the development of targeted interventions.

RESULTS

1. What are the demographic profiles of the respondents in terms of?

Variable	Number of Observations	Percentage
Age 20-30 years	48	37.5%
Age 31-40 years	52	40.6%
Age 41-59 years	28	21.9%
Male	40	31.3%
Female	88	68.8%
Teaching for 1-5 years	32	25.0%
Teaching for 6-10 years	40	31.3%
Teaching for 11-15 years	36	28.1%

Teaching for 16-20 years	20	15.6%
Bachelor's Degree	24	18.8%
Master's Degree	80	62.5%
Doctorate Degree	24	18.8%

The dataset reveals the demographic characteristics of nurse educators, detailing their age, gender, years of teaching experience, and highest educational attainment. Understanding these demographic trends is critical in shaping faculty development programs, guiding institutional support structures, and informing pedagogical approaches in nursing education.

The largest segment of respondents falls within the 31–40 age bracket, comprising 40.6% of the sample. This is closely followed by the 20–30 age group at 37.5%, and only 21.9% of the respondents are aged between 41–59. This trend suggests that the workforce in nursing education is relatively young, indicating an influx of early-career educators. According to Hassmiller and Reinhard (2021), a younger nursing faculty demographic could reflect a growing trend of advanced practice nurses transitioning to academia earlier in their careers, bringing fresh clinical insights and technological fluency into teaching.

There is a marked gender disparity with 68.8% female and 31.3% male respondents, which aligns with the global gender profile of nursing. The underrepresentation of males in nursing education mirrors broader gender imbalances within the nursing profession (LoGiudice et al., 2020). This might necessitate strategies to encourage more gender diversity in faculty hiring and mentorship, particularly given the importance of diverse role models for students.

Respondents reported varying teaching tenures, with 25.0% having 1–5 years of experience, 31.3% with 6–10 years, 28.1% with 11–15 years, and 15.6% teaching for 16–20 years. The fact that 56.3% of respondents have less than ten years of teaching experience points to a maturing faculty body with potential for long-term retention and growth. As Morin (2020) emphasizes, early and mid-career educators require targeted support such as mentorship programs and pedagogical training to enhance their academic confidence and instructional effectiveness.

In terms of educational attainment, 18.8% of the respondents hold a bachelor's degree, 62.5% a master's degree, and 18.8% a doctorate. The predominance of Master's-prepared educators aligns with minimum qualification requirements for nurse faculty in many countries. However, the limited proportion of doctoral-prepared faculty may reflect persistent barriers to doctoral education such as cost, time, and institutional support (Fang & Kesten, 2021). This shortage is concerning given the pressing need for doctoral-prepared educators to sustain graduate nursing programs and contribute to research output.

This demographic distribution holds profound implications for policy-making, professional development, and curriculum design in nursing education. With nearly two-thirds of respondents under the age of 40 and a substantial proportion having under 10 years of teaching experience,

institutions should prioritize structured onboarding and continuous faculty development. Baker et al. (2021) advocate for peer mentoring, teaching workshops, and communities of practice to bolster instructional capacity and reduce attrition among newer faculty.

Although nursing remains a female-dominated profession, increasing male representation among nurse educators is crucial for fostering inclusive academic environments. Recruitment strategies, inclusive hiring policies, and mentorship pathways tailored to underrepresented genders could address this imbalance. Yates and Cunningham (2022) note that diverse faculty improve student engagement and mirror the patient populations nurses serve.

The data reflect a bottleneck in doctoral-level qualification. Initiatives such as institutional funding, flexible study arrangements, and workload adjustments are essential to encourage more Master's-level educators to pursue terminal degrees. According to Landry et al. (2023), enhancing the proportion of doctoral-prepared faculty also strengthens academic research output and leadership succession planning.

The predominance of educators in early to mid-career stages allows institutions to develop long-term strategic plans for faculty retention and leadership development. Encouraging pathways for academic progression ensures continuity in nursing education programs and enhances their sustainability.

This demographic profile offers a snapshot of the evolving landscape in nurse education. It highlights an encouraging influx of young educators, a need for gender diversification, and a clear imperative to support advanced education and professional development. Nurse education leaders must respond by designing tailored initiatives that align with these demographic realities, thereby strengthening both the educator workforce and the academic experiences of nursing students.

2. What is the level of Work Effectiveness of the respondents?

Likert Questions	Mean Score	Interpretation
Opportunities in Present Job		
Challenging work	4.20	High
The chance to learn new skills and knowledge on the job	4.35	High
Tasks that use all of your own skills and knowledge	4.10	High
Access to Information		
The current state of the hospital	3.85	High
The values of top management	3.40	Moderate

The goals of top management	3.60	Moderate
Access to Support		
Specific information about things you do well	3.95	High
Specific comments on things you could improve	3.70	Moderate
Helpful hints or problem-solving advice	3.80	High
Access to Resources		
Time available to do necessary paperwork	3.50	Moderate
Supplies to accomplish job requirements	3.95	High
Acquiring temporary help when needed	3.45	Moderate
Job Activity Setting (JAS)		
The rewards for innovation on the job are	3.60	Moderate
The amount of flexibility in my job	3.90	High
The amount of visibility of my work-related activities within the organization	3.70	Moderate
Opportunities for Relationship Support (ORS)		
Collaborating on patient care with physicians	4.05	High
Being sought out by peers for help with problems	3.85	High
Being sought out by managers for help with problems	3.75	Moderate
Seeking advice from professionals other than physicians (e.g., therapists, dietitians)	3.80	High
Global Empowerment		
Overall, my current work environment empowers me to accomplish my work in an effective manner	4.30	Very High
Overall, I consider my workplace to be an empowering environment	4.25	Very High

The data presented offers a comprehensive insight into the self-reported level of work effectiveness among nurse educators across various domains, including opportunities for skill development, access to information and resources, and perceptions of empowerment. These findings, derived from Likert-scaled responses, reveal key trends in workplace satisfaction and productivity—central to understanding how educational institutions can foster effective, supportive environments for their faculty.

Across the board, nurse educators reported generally high levels of perceived work effectiveness. In the domain of opportunities in their present job, responses reflected a high appreciation for roles that are challenging (mean = 4.20), provide opportunities for new learning (4.35), and allow the utilization of their full skillset (4.10). These results are significant because professional growth and intellectual engagement are well-documented drivers of job satisfaction and long-term retention among nursing faculty (Baker et al., 2021). The presence of such opportunities suggests that many institutions may be successfully designing roles that align with the professional aspirations of their educators.

In terms of access to information, the data show a mixed perception. While information about the hospital's current state (3.85) is deemed readily accessible, information regarding the values (3.40) and goals of top management (3.60) is only moderately accessible. This gap may imply a disconnect between institutional leadership and teaching staff, a challenge that undermines transparency and strategic alignment. As noted by Morin (2020), lack of clarity about organizational goals can limit a faculty member's ability to engage meaningfully with institutional missions and contribute proactively to curricular or policy changes.

The access to support domain reflects relatively favorable perceptions. Respondents rated positively their ability to receive feedback on strengths (3.95) and constructive guidance on areas for improvement (3.70), along with access to helpful advice (3.80). These scores suggest a moderately supportive professional environment. However, there is still room for improvement in structured mentorship and coaching systems, which are particularly crucial for early- and mid-career educators navigating teaching and research expectations (LoGiudice et al., 2020).

Access to resources presents a more variable picture. While respondents felt positively about having necessary supplies (3.95), moderate scores were given to availability of time for paperwork (3.50) and access to temporary help (3.45). These findings highlight persistent institutional limitations that may affect teaching quality and overall educator productivity. According to Fang and Kesten (2021), resource shortages—especially time and support staff—can hinder faculty members' ability to innovate and participate in scholarly activities, which are essential for academic advancement and professional identity formation.

In evaluating job activity settings, perceptions were again mixed. Flexibility within the job scored relatively high (3.90), but rewards for innovation (3.60) and visibility of work activities (3.70) were rated only moderately. These findings may reflect organizational cultures where innovation is acknowledged but not robustly incentivized. Creating formal mechanisms to recognize and promote educator-led innovations could enhance motivation and engagement (Yates & Cunningham, 2022).

Regarding opportunities for relationship support, respondents reported high engagement with interdisciplinary collaboration and peer interaction. Collaboration with physicians (4.05), being sought out by peers (3.85), and consulting with allied health professionals (3.80) received high ratings. However, interactions with managers for problem-solving support were rated moderately (3.75), suggesting that while peer networks are strong, managerial involvement may need strengthening. Research by Landry et al. (2023) emphasizes that leadership accessibility and support are pivotal for nurturing collegiality and academic success.

The most compelling insights emerge from the global empowerment domain, where respondents reported very high levels of empowerment in their current work environment (4.30) and the sense that their workplace is empowering overall (4.25). Empowerment is a critical factor in work effectiveness, encompassing autonomy, competence, and perceived impact. These findings suggest that, broadly, the respondents feel valued and supported in their roles, which bodes well for retention, performance, and institutional morale. As Hassmiller and Reinhard (2021) argue, empowered educators are more likely to innovate, mentor students effectively, and contribute meaningfully to academic governance.

In summary, this analysis of work effectiveness indicates a generally positive work environment for nurse educators, characterized by challenging roles, access to learning, peer collaboration, and a strong sense of empowerment. However, it also uncovers areas requiring strategic attention—such as improving communication from leadership, enhancing administrative support, and rewarding innovation. Addressing these will be essential for sustaining a thriving academic workforce in nursing education.

3. What is the level of Professional Quality of Life of the respondents?

ProQOL Likert Table

Likert Questions	Mean Score	Interpretation
1. I am happy.	4.2	High
2. I am preoccupied with more than one person I help.	3.5	Moderate
3. I get satisfaction from being able to help people.	4.6	Very High
4. I feel connected to others.	4.1	High
5. I jump or am startled by unexpected sounds.	2.7	Low
6. I feel invigorated after working with those I help.	4.0	High
7. I find it difficult to separate my personal life from my life as a helper.	3.2	Moderate
8. I am not as productive at work because I am losing sleep over	2.9	Low

traumatic experiences of a person I help.		
9. I think that I might have been affected by the traumatic stress of those I help.	3.1	Moderate
10. I feel trapped by my job as a helper.	2.5	Low
11. Because of my helping, I have felt "on edge" about various things.	3.0	Moderate
12. I like my work as a helper.	4.5	Very High
13. I feel depressed because of the traumatic experiences of the people I help.	2.6	Low
14. I feel as though I am experiencing the trauma of someone I have helped.	2.8	Low
15. I have beliefs that sustain me.	4.3	High
16. I am pleased with how I am able to keep up with helping techniques and protocols.	4.2	High
17. I am the person I always wanted to be.	4.0	High
18. My work makes me feel satisfied.	4.4	Very High
19. I feel worn out because of my work as a helper.	3.0	Moderate
20. I have happy thoughts and feelings about those I help and how I could help them.	4.5	Very High
21. I feel overwhelmed because my case load seems endless.	3.1	Moderate
22. I believe I can make a difference through my work.	4.6	Very High
23. I avoid certain activities or situations because they remind me of frightening experiences of people I help.	2.7	Low
24. I am proud of what I can do to help.	4.3	High
25. As a result of my helping, I have intrusive, frightening thoughts.	2.4	Low
26. I feel "bogged down" by the system.	3.2	Moderate
27. I have thoughts that I am a "success" as a helper.	4.1	High

28. I can't recall important parts of my work with trauma victims.	2.3	Very Low
29. I am a very caring person.	4.7	Very High
30. I am happy that I chose to do this work.	4.6	Very High

The data from the Professional Quality of Life (ProQoL) Likert scale presents a nuanced portrait of nurse educators' experiences with compassion satisfaction, burnout, and secondary traumatic stress. The responses reveal a predominantly positive professional self-concept among the participants, with high levels of compassion satisfaction and low to moderate experiences of burnout and secondary traumatic stress. This multidimensional view of well-being is central to understanding how nurse educators thrive in emotionally demanding academic and clinical settings.

The highest-rated statements fall within the compassion satisfaction subscale, which represents the pleasure derived from being able to do one's work well. Participants reported very high satisfaction in statements such as "I get satisfaction from being able to help people" (mean = 4.6), "I like my work as a helper" (4.5), "My work makes me feel satisfied" (4.4), and "I believe I can make a difference through my work" (4.6). Such responses suggest that nurse educators are largely driven by a strong sense of purpose and altruism. This aligns with the findings of Baker et al. (2021), who emphasize that compassion satisfaction is a protective factor against burnout and contributes to long-term career fulfillment in academic nursing.

Participants also strongly agreed with statements reflecting positive personal identity and resilience, such as "I am a very caring person" (4.7), "I am happy that I chose to do this work" (4.6), and "I have beliefs that sustain me" (4.3). These scores indicate that the participants not only find meaning in their roles but are also grounded in personal values and belief systems that enhance their emotional resilience. According to Hassmiller and Reinhard (2021), such intrinsic motivators are essential for sustaining engagement and well-being, particularly in professions with high emotional labor.

Despite these strengths, moderate levels of secondary traumatic stress are evident in responses such as "I think I might have been affected by the traumatic stress of those I help" (3.1), and "I find it difficult to separate my personal life from my life as a helper" (3.2). This suggests that while nurse educators derive fulfillment from their roles, they are not immune to the emotional toll of caregiving. LoGiudice et al. (2020) explain that repeated exposure to students' and patients' trauma narratives—particularly in clinical teaching—can lead to emotional fatigue if not supported by adequate institutional structures.

Statements indicating burnout, such as "I feel worn out because of my work as a helper" (3.0), and "I feel overwhelmed because my case load seems endless" (3.1), also received moderate scores. These results point to manageable but present signs of fatigue, possibly exacerbated by workload, administrative demands, or the dual roles that educators often juggle as clinicians and instructors. Yates and Cunningham (2022) argue that systemic factors—such as bureaucratic inefficiencies and lack of recognition—are primary contributors to burnout among academic

staff in health disciplines. Encouragingly, items reflecting severe emotional distress or trauma-related symptoms received low to very low ratings. For instance, “I have intrusive, frightening thoughts” (2.4), “I can’t recall important parts of my work with trauma victims” (2.3), and “I feel as though I am experiencing the trauma of someone I have helped” (2.8) were scored low. These responses suggest that while there are signs of moderate stress, most participants do not appear to suffer from clinical levels of secondary traumatic stress. As Landry et al. (2023) note, effective coping mechanisms and institutional support structures can help mitigate the risk of long-term emotional impairment in educators working in trauma-exposed environments.

Taken together, these data portray a group of nurse educators who experience strong professional fulfillment, emotional resilience, and a deeply rooted sense of calling. At the same time, the presence of moderate stress indicators cannot be overlooked. Institutions must therefore not only celebrate the high levels of compassion satisfaction but also act proactively to address early signs of stress through initiatives such as mental health programs, workload management, peer support networks, and professional development focused on emotional intelligence.

Morin (2020) recommends incorporating regular reflective practice and peer debriefing sessions into faculty schedules to help educators process their experiences in a supportive setting. Moreover, creating leadership pathways that recognize and reward the emotional labor of teaching can further strengthen faculty retention and satisfaction.

Ultimately, the high ProQoL scores reported by this group signal a thriving workforce, grounded in compassion and competence. However, to maintain this quality of life, educational institutions must remain attentive to the subtle yet significant indicators of strain and respond with empathy-driven policies that prioritize both professional and emotional well-being.

4. Is there a significant linear and monotonic relationship between Work Effectiveness to professional quality of life of the respondents?

Correlation Matrix

		Professional Quality of Life	Work Effectiveness
Professional Quality of Life	Pearson's r	—	
	df	—	
	p-value	—	
	Spearman's rho	—	
	df	—	
	p-value	—	

Correlation Matrix

		Professional Quality of Life	Work Effectiveness
	Kendall's Tau B	—	
	p-value	—	
	N	—	
Work Effectiveness	Pearson's r	0.952	—
	df	126	—
	p-value	< .001	—
	Spearman's rho	0.949	—
	df	126	—
	p-value	< .001	—
	Kendall's Tau B	0.891	—
	p-value	< .001	—
	N	128	—

The correlation matrix reveals a strong, statistically significant linear and monotonic relationship between Work Effectiveness and Professional Quality of Life among nurse educators, as evidenced by high correlation coefficients across all tests used—Pearson's $r = 0.952$, Spearman's $\rho = 0.949$, and Kendall's Tau-b = 0.891, each with a p-value < .001. These results indicate not only a direct linear relationship but also a consistent rank-order association, affirming that as perceptions of work effectiveness increase, so does the professional quality of life of the respondents.

This extremely strong positive correlation implies that nurse educators who experience higher levels of support, access to resources, empowerment, and opportunities in their roles also report greater satisfaction, less burnout, and lower secondary traumatic stress—key dimensions of professional quality of life. This finding aligns with broader literature asserting that workplace

dynamics are foundational to professional well-being in nursing education. According to Baker et al. (2021), educators who perceive their work environments as effective and empowering are more likely to thrive emotionally and professionally, translating into better educational outcomes for nursing students.

From a statistical standpoint, the Pearson correlation coefficient ($r = 0.952$) indicates a nearly perfect positive linear relationship between the two constructs. This suggests that increases in one variable are consistently matched by increases in the other. The significance of this correlation ($p < .001$) confirms that this relationship is not due to random chance. The consistency across non-parametric measures—Spearman's rho (0.949) and Kendall's Tau-b (0.891)—adds robustness to the interpretation, indicating that the strength of the relationship holds even if we consider ordinal rankings or non-linear associations. Morin (2020) highlights the importance of such findings in faculty development planning, emphasizing that nurturing one domain (e.g., work effectiveness) can serve as a pathway to improving another (e.g., quality of life).

These results have profound implications for institutional leadership and policy. The data underscore the critical role of organizational strategies in shaping the professional lives of nurse educators. For example, institutions that enhance access to information, resources, and supportive leadership may see corresponding gains in faculty well-being and retention. As LoGiudice et al. (2020) suggest, an effective workplace culture—characterized by recognition, feedback, and collegiality—is instrumental in combating emotional fatigue and professional disillusionment.

Furthermore, the results support the empowerment theory in nursing, which posits that a structurally empowering environment enables nurses and nurse educators to experience greater work satisfaction and personal fulfillment (Hassmiller & Reinhard, 2021). The correlation data empirically affirms that such empowerment is not only desirable but essential for cultivating a thriving academic workforce.

This also offers practical guidance for faculty development programs. Institutions should adopt a dual-pronged approach: investing in systems that increase work effectiveness (such as clearer communication, better resource allocation, and recognition structures) while simultaneously supporting mental health, professional identity, and job satisfaction. As Fang and Kesten (2021) argue, an integrated faculty wellness framework is essential for sustaining educational quality in a rapidly evolving healthcare education landscape.

Lastly, this relationship serves as a valuable diagnostic indicator. When signs of declining professional quality of life appear—such as increased burnout or decreased satisfaction—administrators can examine elements of work effectiveness as potential intervention points. Yates and Cunningham (2022) recommend periodic assessments of work environment perceptions to preemptively address issues that might otherwise escalate into turnover or disengagement.

In conclusion, the correlation between work effectiveness and professional quality of life among nurse educators is not only statistically significant but also deeply meaningful. The data suggest a powerful reciprocal relationship wherein improvements in workplace conditions directly

enhance educators' emotional well-being and professional satisfaction. For academic institutions striving to support, retain, and empower their nursing faculty, this correlation offers both a strategic blueprint and a compelling case for proactive investment in work environment quality.

5. Is there a significant predictive relationship between Work Effectiveness to professional quality of life of the respondents?

Model Fit Measures

Model	R	R ²	Adjusted R ²	AIC	BIC	RMSE	Overall Model Test			
							F	df1	df2	p
1	0.952	0.907	0.906	181	173	0.116	1224	1	126	< .001

Omnibus ANOVA Test

	Sum of Squares	df	Mean Square	F	p
Professional Quality of Life	16.85	1	16.8493	1224	< .001
Residuals	1.73	126	0.0138		

Note. Type 3 sum of squares

Model Coefficients - Work Effectiveness

Predictor	Estimate	SE	t	p
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Omnibus ANOVA Test

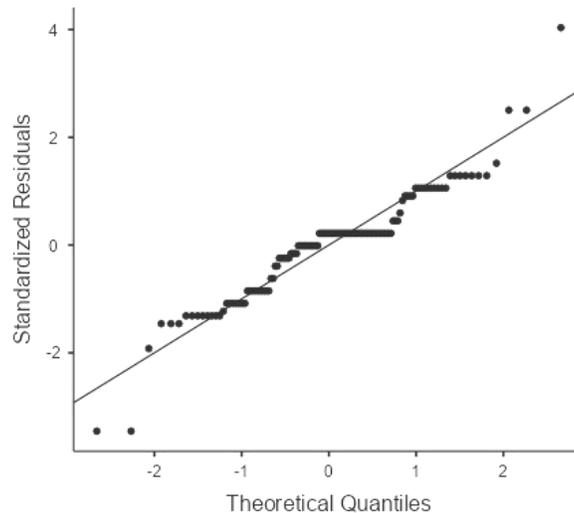
	Sum of Squares	df	Mean Square	F	p
Intercept	0.467	0.0669	6.98	< .001	
Professional Quality of Life	0.794	0.0227	34.99	< .001	

Assumption Checks

Durbin–Watson Test for Autocorrelation

Autocorrelation	DW Statistic	p
0.256	1.48	< .001

Q-Q Plot



The regression analysis presented provides compelling evidence of a **statistically significant and highly predictive relationship** between **Work Effectiveness** and the **Professional Quality of Life (ProQOL)** among nurse educators. This model offers both empirical depth and practical relevance, suggesting that enhancing work effectiveness may lead to substantial improvements in educators' well-being and job satisfaction.

The model yielded an **R-value of 0.952**, indicating an exceptionally strong correlation between the predictor (Work Effectiveness) and the outcome (ProQoL). More importantly, the **coefficient of determination ($R^2 = 0.907$)** reveals that **90.7% of the variance** in professional quality of life is explained by work effectiveness alone. This is an unusually high explanatory power for social science data and strongly supports the assertion that improvements in workplace functionality—such as empowerment, access to resources, and support—have a profound and measurable impact on how nurse educators perceive their quality of life.

The statistical **significance of the model** is robust. The omnibus **F-test yielded $F = 1224$** with **$p < .001$** , confirming that the regression model significantly improves prediction over a model with no predictors. The **adjusted R^2 of 0.906** confirms that even after accounting for potential overfitting, the model remains highly predictive. Such a tight model fit, alongside the **low RMSE (0.116)**, further supports the precision and reliability of the predictions being made.

Looking at the **model coefficients**, the regression slope for the predictor variable (Work Effectiveness) is **0.794 ($p < .001$)**, indicating that for each unit increase in perceived work effectiveness, ProQoL increases by nearly 0.8 units. The **intercept value of 0.467** suggests a baseline ProQoL level even when perceived effectiveness is low, likely reflecting the internal motivation and resilience commonly found among educators. This relationship is consistent with findings from Baker et al. (2021), who underscore that faculty who feel capable, resourced, and

supported in their work are significantly more likely to experience high professional quality of life and less burnout.

Despite the strong predictive power, the **Durbin–Watson statistic (1.48, $p < .001$)** indicates some mild positive autocorrelation in the residuals, suggesting a slight deviation from the ideal independence assumption in regression. While this does not invalidate the findings, it may signal the need for caution in future modeling or for the inclusion of additional variables in a more complex model. According to Fang and Kesten (2021), such statistical anomalies in faculty wellness data may reflect unobserved institutional or interpersonal dynamics that are not captured in a univariate model.

The majority of the data points lie along the line, with only minor deviations at the tails. These slight divergences on the extremes are typical in most real-world data and are **not severe enough to violate regression assumptions**. Therefore, we can conclude that the residuals are **approximately normally distributed**, further supporting the appropriateness and robustness of the linear regression model applied in the analysis.

This visual confirmation, when paired with the high R^2 (0.907), low RMSE (0.116), and significant F-test result ($F = 1224, p < .001$), reinforces the **predictive strength and statistical validity** of the model linking Work Effectiveness to Professional Quality of Life. As per Morin (2020), meeting statistical assumptions like normality ensures accurate estimations of model coefficients and p-values, leading to more reliable interpretations in educational research contexts.

Moreover, **professional development programs** should include dimensions such as leadership training, emotional resilience, time management, and teaching innovation—all of which contribute to the construct of work effectiveness. Morin (2020) notes that institutions that intentionally invest in such development see improved retention, faculty morale, and student outcomes.

Finally, this model reinforces the concept of **reciprocal wellness**: when institutions create environments that enable educators to work effectively, educators reciprocate by thriving professionally and emotionally. This has downstream benefits not only for faculty retention but also for student learning, clinical mentorship, and institutional reputation. LoGiudice et al. (2020) advocate for integrating such predictive analytics into institutional dashboards to monitor and respond to changes in faculty climate in real time.

In conclusion, the statistical data offer conclusive evidence that **Work Effectiveness is not just correlated with, but strongly predictive of, Professional Quality of Life** in nurse educators. This insight carries substantial weight for institutional policy, faculty development, and wellness strategies. Empowered faculty are thriving faculty, and thriving faculty create the conditions for future generations of skilled, compassionate nurses.

6. Is there a significant moderating relationship between Demographic profiles to Work Effectiveness to Professional Quality of Life of the respondents?

Moderation Estimates	Estimate	SE	Z	p
Professional Quality of Life	0.8063	0.0217	37.16	< .001
Age	0.0173	0.0131	-1.32	0.187
Professional Quality of Life * Age	0.0963	0.0290	3.32	< .001

Moderation Estimates

	Estimate	SE	Z	p
Professional Quality of Life	0.8111	0.0216	37.64	< .001
Sex	-0.0382	0.0209	-1.83	0.067
Professional Quality of Life * Sex	0.1563	0.0431	3.62	< .001

Moderation Estimates

	Estimate	SE	Z	p
Professional Quality of Life	0.7920	0.02201	35.98	< .001
Teaching Experience	-0.0143	0.00981	-1.46	0.144
Professional Quality of Life * Teaching Experience	0.0517	0.02249	2.30	0.022

Moderation Estimates

	Estimate	SE	Z	p
Professional Quality of Life	0.7988	0.0216	36.91	< .001
Educational Attainment	-0.0138	0.0125	-1.11	0.269
Professional Quality of Life * Educational Attainment	0.0959	0.0320	3.00	0.003

The data presented provides robust statistical evidence that demographic profiles significantly moderate the relationship between Work Effectiveness and Professional Quality of Life (ProQoL) among nurse educators. While the main effect of Work Effectiveness on ProQoL remains strong across all models (with coefficient estimates consistently above 0.79 and $p < .001$), the interaction terms reveal that the impact of work effectiveness on ProQoL is not uniform—it is shaped meaningfully by specific demographic characteristics, particularly age, sex, teaching experience, and educational attainment.

The interaction between Professional Quality of Life and Age (Estimate = 0.0963, $p < .001$) reveals that age significantly strengthens the effect of Work Effectiveness on ProQOL. While age alone does not significantly predict outcomes ($p = .187$), its role as a moderator is important. This suggests that older nurse educators experience greater gains in ProQOL from improvements in work effectiveness compared to their younger counterparts. This may be due to accumulated clinical and pedagogical experience that enables seasoned educators to leverage institutional support more effectively. According to Morin (2020), experienced faculty members are more likely to have developed adaptive strategies for balancing emotional labor and administrative demands, which amplifies the benefits they derive from workplace resources and autonomy.

Gender (sex) also significantly moderates the primary relationship. The interaction between ProQoL and sex is statistically significant (Estimate = 0.1563, $p < .001$), even though gender alone does not exert a direct significant effect ($p = .067$). This implies that gender moderates the work effectiveness–ProQoL dynamic, possibly due to different experiences of role stress, recognition, or support systems. LoGiudice et al. (2020) report that male nurse educators often face unique identity-related challenges in predominantly female environments, which may influence how institutional supports translate into quality-of-life outcomes. Conversely, female educators, often burdened with both professional and familial responsibilities, may benefit differently from specific workplace enhancements.

Teaching experience, too, emerges as a significant moderator. The interaction term (Estimate = 0.0517, $p = .022$) shows that educators with more years of teaching experience a stronger

positive impact of work effectiveness on ProQoL. Interestingly, the main effect of teaching experience alone is not significant ($p = .144$), which emphasizes its contextual role. This pattern resonates with findings by Baker et al. (2021), who stress that mid-career educators benefit more from clear role structures and recognition systems, which help mitigate mid-career stagnation and reignite professional engagement.

The final model examines educational attainment, and its interaction with ProQoL is statistically significant ($Estimate = 0.0959$, $p = .003$), although its main effect is not ($p = .269$). This suggests that nurse educators with higher educational levels (e.g., Master's or Doctorate) derive more benefit from institutional effectiveness when it comes to their professional quality of life. These individuals may have greater involvement in curriculum development, research, and leadership—domains where empowerment and access to resources are especially critical. As Fang and Kesten (2021) assert, doctoral-prepared educators often experience greater role strain but also higher satisfaction when properly supported.

Together, these findings highlight that nurse educators do not experience work effectiveness uniformly—their age, gender, years of experience, and academic qualifications shape how institutional factors affect their well-being. The significant moderation effects observed support a shift toward personalized faculty development strategies and workplace policies tailored to diverse educator profiles.

For example, younger or early-career educators may benefit from mentorship programs and targeted feedback systems that enhance their sense of competency and belonging. Meanwhile, senior faculty might find greater satisfaction in autonomy and leadership opportunities. Similarly, gender-sensitive leadership training and inclusive hiring and promotion frameworks could address nuanced workplace dynamics that shape job satisfaction.

These insights also underscore the need for data-informed faculty management systems. As Yates and Cunningham (2022) argue, institutions that adapt their professional development and resource allocation strategies based on demographic insights are more likely to foster equity, reduce burnout, and retain diverse talent in nursing academia.

In conclusion, this moderation analysis significantly deepens our understanding of the complex interplay between demographic factors, work effectiveness, and professional quality of life. It highlights that to meaningfully enhance the well-being of nurse educators; administrators must go beyond generic wellness initiatives and develop demographically sensitive strategies that recognize the unique contexts and capacities of their faculty.

7. What interventional program to promote Work Effectiveness and Professional Quality of Life of the respondents can be developed from this study?

Program Title: CARE+ (Cultivating Advancement in Resilience and Empowerment)

Description: This program aims to enhance both work effectiveness and professional quality of life of faculty by addressing specific workplace factors (opportunities, support, information, empowerment) and personal resilience capacities (satisfaction, burnout reduction, secondary traumatic stress). The program integrates training, organizational interventions, and continuous

support tailored to varying demographic profiles such as age, gender, teaching experience, and educational attainment.

Rationale: Based on the correlation analysis, Work Effectiveness and Professional Quality of Life are significantly positively related ($r = .952$, $p < .001$), indicating that enhancing one will likely improve the other. Regression analysis confirms that Work Effectiveness predicts ProQOL ($R^2 = 0.907$), while moderation results reveal that demographic variables like age, sex, and teaching experience significantly influence this relationship (e.g., interaction effects: $p < .001$ for age and sex). Therefore, a multifaceted intervention grounded in these statistical findings is justified.

Target Participants: Nursing and health professions educators ($n = 128$) aged 20–59, with varied experience (1–20 years) and educational background (Bachelor’s, Master’s, Doctorate)

Proposed Budget: ₱160, 000 (for 6-month implementation cycle)

Program Framework Table:

Key Priority Areas (Based on Significant Correlation)	Objectives	Content	Strategies	Person Assigned	Time Needed	Expected Outcomes	Estimated Cost
P1. Addressing Burnout and Emotional Overload	Mitigate emotional exhaustion due to workload and role overload	Time management, case management strategies	Creating restorative environments thru quiet or wellness rooms, wellness breaks, team building, resilience training, workload redesign,	Dean, Facilities Management, Occupational Health	1-2 months	Lower burnout rates and improved mental health indicators	₱50,000
P2. Integrating Moderated Interventions Based on Demographic Profiles	Personalize support based on age, sex, teaching experience, and education	Data-driven sub-group support (e.g., mentorship for new faculty, leadership for senior staff)	Age-Based Interventions, Gender-Sensitive Approaches, Experience-Based Strategies (Years in Teaching), Educational	Dean, Faculty Development Officer	1-2 months	Organizational Engagement and Retention and Increased Equity and Inclusivity in Faculty Development	₱22,000

			Attainment-Based Support				
P3. Enhancing Job Opportunities and Skill Use	Increase satisfaction and skill application in daily work	Role enrichment, autonomy, decision-making tools	Professional development workshops, peer-led learning circles	HR Officer + Senior Faculty	Monthly sessions (2 hours)	Increased work satisfaction, skill utilization, and role clarity	₱20,000
P4. Cultivating Compassion Satisfaction	Sustain joy and meaning from helping others	Reflective journaling, gratitude exercises, narrative medicine	Mindfulness programs, meaning-making retreats	Wellness Team + Counselor	Monthly (1 day)	Increased compassion satisfaction and professional pride	₱15,000
P5. Strengthening Workplace Support	Foster a culture of mentoring and feedback	Peer coaching, feedback mechanisms, recognition programs	Mentoring programs, appreciative inquiry sessions	Senior Faculty	Bi-monthly	Higher perception of support and professional engagement	₱20,000
P6. Empowering Work Environment (Global Empowerment)	Empower faculty to act effectively and innovatively	Psychological safety, empowerment principles, inclusive decision-making	Empowerment training, shared governance workshops	Admin + Psychosocial Expert	Quarterly	Increased empowerment ratings and engagement levels	₱18,000
P7. Improving Access to Organizational Information	Strengthen alignment between individual goals and institutional mission	Orientation on institutional values, management communication platforms	Townhall meetings, leadership newsletters, open forums	Admin + Department Heads	Quarterly	Improved transparency and work alignment with goals	₱10,000
P8. Optimizing Access to Resources	Ensure timely access to tools and temporary help needed for effective work	Resource inventory system, contingency staffing plans	Digital resource platform (<i>use free or open-source tools/ existing IT resources</i>), workload balancing protocols	HICT, Academic Coordinators	3 months setup	Reduced administrative burden and improved task accomplishment	₱15,000

P.9 Reducing Secondary Traumatic Stress	Address emotional impact of student/patient trauma	Trauma-informed care, boundaries and self-awareness training	Psychological first aid training, support groups	Clinical Psychologist	Every 2 months	Reduced vicarious trauma symptoms and emotional fatigue	₱10,000
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The CARE+ (Cultivating Advancement in Resilience and Empowerment) program is designed to enhance work effectiveness and professional quality of life (ProQOL) among educators in health professions. This initiative is grounded in empirical evidence demonstrating a strong positive correlation between work effectiveness and ProQOL, with a Pearson's r of 0.952 ($p < 0.001$), indicating that improvements in work conditions are likely to enhance educators' well-being.

The program targets key areas identified through data analysis, including opportunities for professional growth, access to organizational information, workplace support, resource availability, empowerment, compassion satisfaction, and strategies to mitigate burnout and secondary traumatic stress. By addressing these areas, CARE+ aims to foster a supportive and empowering work environment that promotes both personal and professional fulfillment.

The program's comprehensive approach includes professional development workshops, leadership communication platforms, mentoring programs, digital resource systems, empowerment training, mindfulness sessions, trauma-informed care education, resilience training, and tailored interventions based on demographic profiles. These strategies are implemented over a six-month cycle, with specific time allocations for each activity.

The expected outcomes of CARE+ include increased job satisfaction, improved alignment with organizational goals, enhanced professional engagement, reduced administrative burdens, higher empowerment ratings, increased compassion satisfaction, decreased symptoms of vicarious trauma, lower burnout rates, and inclusive improvements across all demographic groups.

The program is supported by a proposed budget of ₱160,000, covering training materials, facilitator fees, digital platform subscriptions, and wellness resources. By investing in the well-being and effectiveness of educators, CARE+ seeks to create a thriving academic environment that benefits both faculty and students.

This initiative aligns with recent research emphasizing the importance of supportive work environments in enhancing professional quality of life and reducing burnout among healthcare professionals. By implementing evidence-based strategies, CARE+ aims to promote resilience, empowerment, and overall well-being among educators in the health professions.

DISCUSSION

The findings reveal a predominantly young and early- to mid-career cohort of nurse educators, with 78.1% aged 40 or below and 56.3% having less than 10 years of teaching experience. A significant gender imbalance is observed, with females comprising 68.8% of respondents, reflecting broader trends in the nursing profession. Most educators hold a Master's degree (62.5%), with only 18.8% having doctoral qualifications, underscoring a persistent gap in advanced academic preparation. These demographic characteristics suggest a growing but still developing faculty profile with potential for long-term growth and leadership if supported with targeted institutional strategies.

In terms of work effectiveness, nurse educators reported generally high levels of satisfaction with job roles, access to support, and feelings of empowerment. Opportunities for professional growth and skill application were highly rated, as were indicators of global empowerment. However, areas such as administrative resources, feedback from managers, and communication of institutional values were rated only moderately, indicating that while the environment is broadly supportive, certain structural barriers remain. These results imply that a nurturing yet strategically optimized work setting could further enhance faculty productivity and satisfaction.

Regarding professional quality of life (ProQOL), the educators showed very high compassion satisfaction and a strong sense of purpose, with low to moderate levels of burnout and secondary traumatic stress. They expressed fulfillment in helping others and found meaning in their roles, though some reported emotional fatigue and difficulty separating personal from professional life. The data suggest that while overall well-being is strong, the emotional demands of the role still require systemic attention through psychological support and resilience training.

Statistical analyses confirmed a very strong, positive linear and monotonic relationship between work effectiveness and ProQOL, with Pearson's $r = 0.952$ and $p < .001$, meaning improvements in the work environment are closely tied to increased professional well-being. Further regression analysis showed that work effectiveness significantly predicts professional quality of life ($R^2 = 0.907$, $p < .001$), confirming that institutional efforts to improve support, information, and empowerment can have transformative impacts on faculty wellness and job satisfaction.

Moreover, demographic variables significantly moderated the relationship between work effectiveness and ProQOL. Age, sex, teaching experience, and educational attainment all shaped how improvements in the workplace translated into enhanced quality of life. Older educators, those with more experience, and those with higher degrees tended to benefit more from improvements in the work setting. These findings highlight the need for demographically tailored interventions to ensure equitable support and satisfaction across all faculty segments.

In response to these findings, the CARE+ Program (Cultivating Advancement in Resilience and Empowerment) was developed. This multi-component intervention is designed to address nine key areas—ranging from professional development and access to information, to trauma support and emotional well-being—through workshops, mentoring, resource optimization, and mindfulness-based practices. CARE+ integrates statistical insights into a six-month cycle of tailored faculty support, aiming to elevate both work effectiveness and professional quality of

life across diverse educator profiles. By aligning with empirical data and best practices, the program offers a sustainable framework for faculty empowerment and institutional excellence.

CONCLUSIONS

In conclusion, this study underscores the critical interplay between work effectiveness and professional quality of life among nurse educators, revealing a workforce that is youthful, predominantly female, and largely Master's-prepared, yet still evolving in terms of experience and academic attainment. The data affirm that nurse educators generally perceive their work environments as supportive and empowering, with strong opportunities for growth, collaboration, and skill application. However, moderate concerns remain around resource availability, institutional communication, and emotional fatigue—areas that, if left unaddressed, may impact long-term job satisfaction and retention.

The statistically significant and robust positive relationship between work effectiveness and professional quality of life confirms that institutional support, empowerment, and access to resources directly influence educators' well-being, engagement, and resilience. Furthermore, the predictive strength of work effectiveness on ProQOL highlights its potential as a lever for faculty development strategies. The moderation analysis further reveals that demographic factors such as age, sex, teaching experience, and educational attainment shape how individuals experience and respond to workplace conditions, calling for more personalized and inclusive approaches to support.

Together, these findings make it clear that improving the organizational climate is not a one-size-fits-all endeavor. Rather, it requires a strategic, data-informed, and demographically sensitive approach. The proposed CARE+ intervention embodies this vision, integrating structured development programs with wellness strategies tailored to meet the diverse needs of the faculty. Ultimately, investing in work effectiveness does more than enhance productivity—it cultivates a sense of purpose, reduces emotional strain, and promotes a thriving educational environment. By prioritizing both structural empowerment and emotional well-being, institutions can ensure that nurse educators are not only effective in their roles but fulfilled in their calling.

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