



## Relationship between Workplaces Stress, Job Satisfaction and Resilience among Nurses of Government and Private Hospitals

Wajeeha Komal<sup>1</sup> & Sehar Aziz<sup>2</sup>

<sup>1</sup>Lecturer Department of Psychology University of Kotli Azad Kashmir, Email: [Psychology4every1@gmail.com](mailto:Psychology4every1@gmail.com)

<sup>2</sup>Scholar Department of Psychology University of Kotli Azad Kashmir, Email: [seharaziz25@gmail.com](mailto:seharaziz25@gmail.com)

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#### Corresponding Author:

Wajeeha Komal

#### Email:

[Psychology4every1@gmail.com](mailto:Psychology4every1@gmail.com)



### ABSTRACT

Health care sector is one of the most demanding areas of working for nursing professionals, stress at the workplace and job satisfaction are key issues that affect the performance of a nurse in the health care setting. The objective of this research was to investigate the role of stress and resilience and satisfaction with job contentment in nurses in government and private hospitals in Kotli, Azad Kashmir. A correlational descriptive research design was used where 50 registered nurses who work in either government ( $n = 25$ ) or private ( $n = 25$ ) facilities were sampled purposively. Self-administered questionnaires comprised the Connor-Davidson Resilience Scale were employed and data were analyzed using Pearson correlation coefficients and independent sample  $t$  tests. The results showed that resilience had a significant positive relationship with job satisfaction; results demonstrated that the more resilient the nurses were, the greater their satisfaction with their jobs. On the other hand, workplace stress was negatively correlated with job satisfaction were by high workplace stress impaired job satisfaction. The comparative analysis further highlighted sector-specific challenges: The study revealed that, while nursing in a government hospital, the stressors could be limited resources, large number of patients among others, while in a private hospital the stress could be high performance expectations and patient demands among others. The findings reaffirmed the significance of assertiveness as the capacity to shield oneself against organizational stress and as a predictor of self-reported job satisfaction. Coping mechanisms and staff wellness programs are the proposed approaches to enhance the employee mental health, job satisfaction and organizational viability of the nursing profession. In synthesis, this work develops important leads for developing intentional action to address workplace stress with the goal of bolstering nurses' resourcefulness and resilience so that quality patient care can be maintained.

## **Introduction**

Nurses were a special category of healthcare professionals who were responsible for many aspects of patients' care that were necessary for maintaining the health of patients and bringing them back to normality. The tasks of those sectors were complex and demanding; they involved a combination of technical and interpersonal competencies and the ability to cope with pressure. However, a number of intrinsic parameters, including long working hours, high workload, and scarcity of resources, put the nurses at a high risk of succumbing to the forces that led to workplace stress. This stress, along with other factors such as job satisfaction and resiliency, determined the well-being of the nurses, the quality of their work, and their ability to remain in the profession, which, in turn, affected the delivery of health care and the health of patients (Khamisa et al., 2015).

Nurses in different government and private hospitals worked under different setups in terms of nursing practices, patients' characteristics, and accessibility to resources. Public sector health resources attended to a large number of patients and frequently worked with scarce capital and human resources, which, in turn, put significant pressure on employees. In fact, job facilities and remunerations were usually better in private hospitals, but expectations of performance and patient satisfaction differed from other hospitals, which meant that stressors were different. Such differences in these aspects of the workplace environment between the governmental and private sectors defined the level and type of job stress, job satisfaction, and resilience among nurses, and, therefore, establishing effective comparisons of such factors in different healthcare systems was crucial (Sunny, Najeeb, Ahammed, & Chacko, 2016).

## **Workplace Stress in Nursing**

Stress was a significant phenomenon observed in the sphere of nursing and was one of the main causes of the deterioration of nurses' well-being. It potentially stemmed from the organization's high emotional context of the work done with patients, time constraints under which the staff had to be accurate, and complex interpersonal interactions with patients and families as well as medical staff. Furthermore, conditions like lack of manpower, lacking managerial support, and scarcity of resources in organizations also increased stress levels. In government hospitals mainly, there was scarcity of resources and a large number of patients, and therefore, pressure on nurses was high, which resulted in burnout and low job satisfaction among the nurses. On the other hand, private hospitals might have provided more facilities but had strict performance expectations that put more pressure on the staff, and this also led to stress (Khamisa et al., 2015).

Work stressors manifested themselves in physical and psychic styles, affecting cognitive characteristics and duties of nurses. The main effects of stress were on concentration, problem solving, and therefore patient care: all areas that were adversely affected by stress and that put the patient at a higher risk of errors. Long-term stress resulted in burnout, a phase where one felt exhausted, detached emotionally from their work, and experienced low personal satisfaction levels. Some evidence associated burnout with negative work outcomes such as decreased job satisfaction, decreased resilience, and higher turnover among nurses, which, in turn, increased pressure on already stretched health systems bearing the brunt of staff shortages (AL, 2021). Hence, decreasing workplace stress in nursing was not only significant when it came to the health of nurses themselves but also, and especially, with regard to the well-being of patients.

## **Job Satisfaction**

Nurses' job satisfaction was viewed as one of the main antecedents of motivation, work 'engagement', and commitment among the Registered Nurses. It covered to what extent the nurses

practicing at the facility felt valued, supported and paid for their work. Compensation and recognition, personal advancement, and quality of the work environment were some of the determinants of job satisfaction in nursing. There was a significant relationship between job satisfaction and nurses' working conditions, availability of resources, and support from their managers. However, disadvantages such as high stress, low resources, and low support led to dissatisfaction that not only affected the psychological well-being of the nurses but also the quality of patient care (Afulani et al., 2021).

Satisfaction at work had significant meaning, especially in nursing, because of its strong correlation with job continuation and productivity. When nurses were happy with what they did, they were committed to their duties and performed tasks efficiently, while remaining unsatisfied often led them to think of quitting the nursing profession altogether. This had crucial implications for healthcare organizations, especially in government health organizations, because such situations led to cases of hiring a smaller number of staff and a lack of sufficient materials. Although the private sector offered better career advancement opportunities and better financial remuneration, the high pressure to deliver quality services acted as an offset as far as job satisfaction was concerned in private hospitals. The knowledge of factors that affected job satisfaction across various hospital environments helped in the planning of measures that increased nurse retention, motivation, and consequently productivity; this led to improvements in the level of services delivered to patients (Sunny et al., 2016).

### **Resilience as Stress Protection**

It was the ability to bounce back after experiencing some form of difficulty, stress, or vice versa; this was very important in enabling nurses to handle the various difficulties involved in their profession. This also meant that with high resilience, nurses were able to work well, handle stress better, and provide care to their patients irrespective of the challenges they went through on the job. Optimism and self-efficacy broadly referred to personal resources, while social support and organizational culture were described as organizational resources that defined and helped build resilience. Resilience was highly correlated with mental health, retention rates, and job satisfaction in nursing; thus, nurses with high resilience levels were better placed to cope with the challenges of their profession and prevent early burnout, which was prevalent in the profession (Piotrowski et al., 2022).

In the case of government and private hospitals, the construct of resilience helped lessen job strain among nurses since the environment was demanding. For instance, nurses practicing in government hospitals experienced scarcity of resources and had bulky workloads, which resulted in stress and burnout. Nevertheless, the common vulnerability found among nurses also meant that some nurses handled these difficulties better than others, thereby sustaining both performance and job satisfaction. In private hospitals, resilience enabled nurses to handle the challenges associated with expectations of high-quality patient care and organizational performance. Consequently, it became paramount to implement measures of resilience in training and support programs, which minimized stress levels, enhanced job satisfaction, and ultimately improved the welfare of nurses.

Cognitive demands, workplace stress, and climate were examined in relation to the relationship between job satisfaction, resilience, and workplace stress in healthcare organizations. The moderating effect of gender and age on the perceptions of workplace stress and its impact on job satisfaction was also explored. Various aspects of organizational culture were examined for their influence on job satisfaction, while the implications of organizational status on various aspects of job satisfaction were investigated. Comparisons between personnel in hospitals and personnel in teaching clinics highlighted significant differences.

Workers, such as nurses, in government establishments often experienced high patient turnover, resource scarcities, and fiscal challenges that increased workplace stress levels. Such hospitals tended to operate in populous areas with few staff, thus forcing nurses to work with many patients within short time intervals. It was this environment that promoted stress-induced burnout and resulted in low job satisfaction coupled with poor personal satisfaction. Studies established that the lack of support and resource supplies among nurses led to decreased satisfaction levels, which, in turn, influenced their level of commitment toward patients (Khamisa et al., 2015). As a result, government hospitals were in a catch-22 situation – they needed to address the implications of workplace stress on their workforce in order to uphold the quality of care.

As for private hospitals, while financial capacities and associated available assistance tended to be stronger, the pressures that nurses encountered were rather diverse. It was quite probable that private institutions operating in the same environment paid more attention to patient satisfaction percentages, competitive performance indicators, and other intensive efficiency targets. Even though organizations in private hospitals had more resources and support in satisfying employee needs, the pressure was on to keep their patients satisfied and to follow specific protocols. Concerning performance pressure, efficiency and focus on patient results became stressful in private hospitals, though the stress described differed from that of government hospitals since it eroded job satisfaction and resilience (AL, 2021). This paper compared the stress experiences and job satisfaction of employees in two different types of large institutions, and the difference in the expression of stress and the level of job satisfaction outcomes was attributed to these institutional differences.

### **Role of Workplace Stress on Health Care Delivery Experience**

These high levels of workplace stress among nurses did not only have direct consequences for their own health but also for the quality of care, thus impacting all patients. Research showed that elevated stress levels were linked with more frequent adverse health events, as well as lower levels of patient satisfaction and worse patient outcomes. Stress reduced the ability to reason, make proper decisions, and manage emotions—skills critical for nurses. When coping with stress, nurses became less focused, acted inattentively, got tired, or suffered from burnout, all of which threatened patients' safety (Khamisa et al., 2015). When stress was not addressed as it should have been in organizations such as under-staffed government hospitals, the overall effects were strongly felt in terms of the nurses' performance as well as the overall health delivery system.

On the other hand, if workplace stress levels were low and job satisfaction was high among nurses, there would have been higher chances that they would have offered positive patient care, excluded emotional outbursts, and avoided fatigue-induced blunders. In human resources, workload was moderated through the availability of resources in private hospitals since this variable determined the quality of care a nurse delivered. However, the pressure of performance expectations still presented some difficulties, primarily due to the expectation of results in speedy environments, which, in some cases, became disruptive in private surroundings that were not so conducive to satisfaction (Piotrowski et al., 2022). Stress in the workplace affected all nurses, and their well-being needed to be addressed to enhance the quality of healthcare services.

### **Resilience as a Mediator**

Self-compassion was an important moderator that influenced the impact of workplace stress and job satisfaction. High resilience in nurses meant that they were in a better position to manage the emotional and physical challenges associated with the job, as they already had coping strategies in place. Mentally healthy coping interventions such as mindfulness, cognitive behavioral therapy,

and peer support indicated the possibility of managing stress in nurses. Such interventions fostered positive attitudes, emotions, and coping mechanisms that helped prevent burnout and increased job satisfaction.

In hospitals where stress was prevalent, especially in the public sector, resilience served as a buffer mechanism that enabled nurses to continue practicing professionally and to protect both their physical and psychological health while working under unfavorable conditions (Marzo, 2022). For example, private hospitals considered incorporating structured resilience programs or focused on the mental health of employees through organizationally supported work-life initiatives. However, government hospitals faced challenges in employing the same strategies as private hospitals due to financial constraints.

In essence, stress negatively impacted various aspects of nurses' lives as well as their job performance. Consequently, measures needed to be implemented by both government and private hospitals to reduce the effects of stress, including the promotion of a culture of resilience (Sunny et al., 2016).

### **The Concept of Job Satisfaction and Its Relationship with Retention**

Staff nurse job satisfaction was a key determinant of nurse turnover intentions, work efforts, and organizational commitment. Happy nurses were likely to be more responsive to patient care, fully devoted their time to the job, and, even when faced with stress factors, were likely to endure more. Many factors defined job satisfaction, which could be grouped into the following categories: physical attributes, monetary, psychological, and social. Nurses working in government hospitals reported that constraints of resources and responsibilities resulting from large patient turnovers were the main sources of job dissatisfaction. Issues like resource scarcity negatively affected nurses' performance by creating dissatisfaction with the job, and in some cases, leading to job changes.

Research showed that where job satisfaction was high, employees became more committed, boasted higher morale, and thus performed better with lower turnover rates. Job satisfaction also had stress and burnout acting as moderators because happy employees were more likely to respond to stress by finding ways to cope with it. This meant that both government and private hospitals could benefit from every manager proactively seeking the best ways to enhance job satisfaction with perks like career growth, fair compensation, and support systems in place. The roadmap for enhancing job satisfaction differed for government and private hospitals: the former argued for increased funding and material support, while the latter focused on changing rules that increased performance pressure and stressed the importance of employees' health and morale.

### **Problem Statement**

The expansion of the healthcare sector had put pressure on the nursing staff, leading to enhanced stress levels and heightened difficulties in retaining job satisfaction. While there had been research on the general well-being of employees, particularly nurses, analyzing the levels of job satisfaction and stress, a limited number of studies examined the role of resilience as a mediating factor, especially between the two categories of hospitals – government and private. Some of the challenges that government hospitals experienced included scarcity of resources, a large number of patients, and a lack of sufficient staff to handle patients until their final discharge from the hospitals, which contributed to stress among nurses and low job satisfaction. On the other hand, private hospitals could provide better equipment and remuneration, but the pressures nurses faced included high patient expectations and significant performance pressure. Given these dissimilarities, it was important to carry out a comparative analysis to compare and understand the

correlations between workplace stress, job satisfaction, and resilience in the two organizations: government and private hospitals. Knowledge about these factors could guide the design of empowering programs and strengthen interventions for each sector.

### **Objectives**

The present study aims to:

1. Examine the relationship between workplace stress, resilience and job satisfaction among nurses.
2. Examine the relationship between workplace stress and resilience among nurses.
3. Examine the relationship between job satisfaction and resilience among nurses.
4. Examine the relationship between workplace stress and job satisfaction among nurses.

### **Hypothesis of the study**

Following hypothesis will be formulated on the basis of literature review:

- H1. There is significant relationship among workplace stress and job satisfaction.
- H2. There is significant relationship between workplace stress and resilience.
- H3. There is significant relationship among job satisfaction and resilience.

### **Literature Review**

#### **Back of the Study**

The working conditions of nurses, considered one of the most important groups in the healthcare sector, were characterized by various workplace stressors that influenced job satisfaction and organizational health. Employee stress was defined as the pressure that employees experienced from operational demands and other conditions encountered in the workplace (Ibrahim & Hussein, 2024). Nurses faced stress in many forms, including workload, long hours, low staffing, and psychological pressure from patients. Most of these stressors could culminate in burnout among medical professionals, which severely negatively influenced their job satisfaction and, in turn, negatively impacted the quality of care provided to patients (Zheng et al., 2017). Therefore, understanding the links between stress, job satisfaction, and resilience in the organization could facilitate the creation and implementation of approaches to improve the general well-being of staff members, particularly nurses, and the efficiency of healthcare organizations.

Healthcare job satisfaction was a determining factor not only for the mental and physical health of nurses but also for measuring productivity and turnover rates. Research findings suggested that the job satisfaction of healthcare employees depended largely on the work climate, culture, and resources available (Mane & Kamble, 2014). Nurses working in organizations with poor resource endowment, especially in government hospitals, expressed lower job satisfaction compared to their counterparts in private hospitals (Beuren et al., 2022). This was largely due to stressed working conditions, a lower staff-to-patient ratio, and limited training and development opportunities. Conversely, private hospitals were often financially better endowed, providing a more favorable organizational climate and more opportunities for professional advancement, which resulted in higher levels of job satisfaction among nurses (Eggleston et al., 2010).

Finally, the level of burnout was a significant concern, reflecting the physical, mental, and emotional exhaustion of nurses in responding to and recovering from stress. The factor of resilience played a crucial role in keeping nurses satisfied in their workplaces (Zheng et al., 2017). A study showed that nurses with high resilience had a better capacity to handle the emotional and psychological demands of their work, meaning they managed stress more effectively. Ur and Parke (Ibrahim & Hussein, 2024) argued that when resilience was posited as a moderator, it increased positive affect, meaning, and job satisfaction in response to adversity. Notably, optimism, emotional intelligence, and social support were considered personal resources, while social resources referred to organizational resources. Nurses working in resilient organizations reported higher job satisfaction due to adequate leadership, resources, and support for professional development (Beuren et al., 2022).

Various studies established that organizational resilience had a strong positive relationship with job satisfaction levels, reduced stress levels, and overall organizational performance, particularly in the context of healthcare organizations (Ghandi et al., 2017). A comparison between government and private hospitals indicated that differences in organizational resilience could lead to variations in job satisfaction and stress levels among nurses. This paper revealed that the environments of government and private hospitals contained discrepancies that affected stress, job satisfaction, and resilience among nurses. Such challenges included inadequate human resources, congestion, and a lack of essential commodities in government hospitals, especially in low- and middle-income countries (LMICs). These issues led to high stress levels among nurses and a consequential decrease in job satisfaction (Ali et al., 2017).

Nurses in these settings often felt overworked and unappreciated, which resulted in burnout and intentions to leave their positions. Additionally, the limited promotion and training schemes in clinical careers within government hospitals contributed to low job satisfaction (Eggleston et al., 2010). Conversely, some private hospitals were better staffed, equipped with up-to-date medical equipment, and had adequate funding; thus, the burden on nurses was lighter, allowing them to deliver quality services (Polater et al., 2014). However, it was argued that private hospitals imposed a new set of stressors, including increased expectations regarding performance, pressure to meet financial targets, and an emphasis on patient satisfaction. These factors could also raise stress levels among nurses, even in private hospitals (Ghandi et al., 2017).

In a study comparing Chinese government and private hospitals, Eggleston et al. (2010) noted that nurses in private hospitals reported higher job satisfaction due to better working conditions, training, and environments. From the current understanding, job satisfaction, stress, resilience, and turnover intentions were vital issues for nurses. Another relationship confirmed by previous research was that between stress levels and turnover intentions. Nurses tended to prefer working in environments where they did not feel stressed most of the time (Chitra & Karunanidhi, 2013). It was discovered that stress influenced turnover intentions; however, results suggested that resilience reduced the impact of stress on turnover intentions, as many resilient nurses remained committed to their work regardless of the situations they encountered (Sharreh, 2011).

By promoting resilience, healthcare organizations could potentially reduce high turnover rates, turnover intentions, and low job satisfaction levels, thereby improving job performance. In their study, Ghandi et al. (2017) established that resilience moderated the relationship between job-related stress and turnover intentions among nursing professionals. Resilient nurses exhibited a lower probability of burnout and remained in service despite high levels of stress, as highlighted in qualitative research. This underscores the need for strategies to facilitate resilience interventions in healthcare settings to foster job satisfaction and minimize staff turnover.

It should also be noted that coping strategies had an impact on the stress-job satisfaction relationship. Research by Chitra and Karunanidhi (2013) found that nurses who practiced several coping mechanisms, such as problem-solving, seeking support from others, and practicing relaxation, were more likely to be satisfied with their jobs. In contrast, nurses who engaged in maladaptive coping strategies experienced higher levels of stress and lower job satisfaction due to the ineffectiveness of their coping styles. This indicated that improving job satisfaction among nurses and reducing stress required the enhancement of healthy coping strategies. Various studies established a relationship between coping ability and resilience, with stress-resistant individuals tending to utilize adaptive coping styles, leading to optimal job satisfaction and improved mental health (Sharreh, 2011). In the healthcare field, resilience training interventions allowed workers to learn coping strategies to manage stressors, ultimately increasing their motivation and job satisfaction.

### **Comparison of Public and Private Hospitals in Healthcare Performance**

Common classification of healthcare systems was into the public and private sectors, which belonged to different classes that influenced the employment conditions of healthcare workers, including nurses. While public hospitals were financed and managed by the appropriate Ministries of Health, private hospitals operated as business ventures driven by profit motives. Private hospitals were better equipped, offered better remuneration packages, and provided more staff rewards and benefits. These differences resulted in dissimilar working experiences for nurses in these settings, particularly concerning stress, job satisfaction, and resilience. Jabnoun and Chaker (2003) conducted a comparative analysis of service quality levels in public and private hospitals, revealing that private healthcare facilities delivered better services due to increased investment in patients and facilities. This higher quality of service was associated with a better working environment, which was assumed to lead to lower stress levels and higher job satisfaction among nurses. In contrast, public hospitals faced many challenges, especially in economically disadvantaged areas, which limited their income sources and contributed to increased stress among nurses, according to Tankha (2006).

Mahfouz et al. (2021) furthered this discussion by detailing patient satisfaction and arguing that private hospitals performed better as a healthcare delivery system than government hospitals to some extent, due to significant investments in human resources, infrastructure, and better training. Although patient satisfaction reflected one aspect of healthcare quality, satisfaction among the healthcare workforce, including nurses, depended on their workplace environment and organizational support (Yang et al., 2020). Numerous investigations established that nurses from better-equipped private hospitals experienced higher job satisfaction and lower stress levels compared to their counterparts in public hospitals. Nurse stress resulted from factors such as workload, emotional demands, and organizational issues (Shenje & Wushe, 2019).

The level of stress experienced by nurses varied based on the type of organization, particularly between public and private health facilities, due to differences in resources, nursing staff mix, and work requirements. Oli and colleagues (2016) conducted a study in Southeast Nigeria, comparing healthcare waste management practices between public and private hospitals. Consequently, private hospitals, with more funding, could offer better support conditions for nurses, leading to lower stress levels at work and higher job satisfaction, ultimately affecting turnover (Ahmed & Safadi, 2013).

Stress levels were also influenced by the involvement of nurses in decision making processes within their work areas. A study by Ahmed and Safadi (2013) on nurses in private hospitals found that greater participation in decision-making processes led to higher satisfaction with their work

environment. This participation was important for minimizing stress and fostering a positive work culture. In contrast, nurses in government hospitals suffered from a hierarchical management structure that suppressed their autonomy, thereby increasing their stress levels and decreasing their job satisfaction. Regarding resilience, data indicated that nurses in both private and public hospitals were supported by organizational resilience the capacity of a healthcare organization to manage challenging conditions while continuing its operations (Mosadeghrad et al., 2011).

However, the organizational capacity in private hospitals was often greater, providing enhanced mechanisms for coping with pressures, support, and resources for nurses (Aslam et al., 2013). Both settings utilized resilience training programs, and while both should continue doing so, the stronger financial position of private hospitals meant that such programs more effectively supported nurses in managing stress.

Foster et al. (2020) conducted descriptive correlational research on workplace stressors, psychological well-being, resilience, and caring behaviors among mental health nurses. This study indicated that increased perceived workplace stress was predictive of poor psychological well-being and burnout among nurses. However, high resilience served as a negative predictor of stress, as individuals with high resilience were better able to regulate stress and maintain positive psychological functioning. The study focused on promoting resilience as a protective factor for mental health nurses, which would help reduce the impact of stressors and diminish burnout levels. Similarly, Lee et al. (2019) conducted research addressing burnout, stress, and resilience levels among workers in healthcare facilities. Their studies demonstrated that stress levels were positively linked to burnout and negatively related to workers' resilience. They found that higher resilience levels correlated with lower burnout and reduced deterioration of employees' well-being under pressure. Other personal factors, such as working memory, executive function, prior experience, and organizational training, also played a role in how healthcare workers managed stress. Amer et al. (2024) conducted a cross-sectional comparative study on the cognitive efficiency and work burnout of medical staff, emphasizing the importance of cognitive resources in coping with job stress and maintaining well-being in stressful occupations, including healthcare.

### **The Role of Organizational Support in Stress and Job Satisfaction**

Stress had been known to have a negative impact on job satisfaction; the present analysis, however, established that with the support provided by the organization, the effects of stress on job satisfaction could be considerably offset. Strong organizations offered resources and advice besides offering emotional support to employees that aided them in responding to levels of stress faced so as to remain fulfilled in their work. There had been an analysis done that demonstrated that organizational support influenced resilience and job satisfaction (Ghandi et al., 2017).

Yang et al. (2020) analyzed stress levels and working while ill among healthcare workers in public and private hospitals in China. In the studies done, they pointed out that organizational support, specifically in private hospitals, was the variable that most influenced the level of job stress and job performance. On the contrary, the participants in this study who worked in public hospitals and especially from low working contexts revealed higher levels of stress at the workplace and preferred presenteeism. Such differences called for adequate organizational support that would otherwise offload stress impacts and enhance job satisfaction levels.

It was established that the amount of organizational support in both public and private hospitals affected the level of stress experienced by nurses. Management practices such as communication, leadership, and professional development were reported to be better in private hospitals while nurses were employed. Such factors helped to enhance the staff's work satisfaction; however, as

for the government hospitals, they could fail to afford such support due to numerous difficulties and financial problems (Shenje & Wushe, 2019).

Turnover intentions were an essential problem in the healthcare system since the high turnover meant fewer patients would be attended to by nurses, putting more stress on those working. Thus, it was hypothesized that job stress significantly predicted intention to leave and was positively predicted by resilience among nurses. Namely, workload stress, organizational stress, and work-life imbalance were the most important antecedents of turnover intentions (Mosadeghrad et al., 2011). But such stressors kept changing, and many times, the resilient nurses were likely to stay in their positions.

Tankha (2006) contrasted the role stress of nurses in governmental and private hospitals and observed that nurses who worked in governmental hospitals had more turnover intentions because the stressors that impacted on them included inadequate resources and high patient load. Due to better working conditions, private hospitals were able to retain more staff; the nurses in this study reported less job stress and high job satisfaction. In the present study, the overall purpose of resilience served as a moderator that helped nurses cope with workplace stress and lessen their perceived turnover intention. There was a positive correlation between turnover intentions and turnover rates, and organizations could decrease turnover rates by enhancing the levels of job satisfaction for such employees by changing resource allocation, training, and support (Mahfouz et al., 2021). Based on the dimensions of organizational resilience and support, nurses in both the public and private sector hospitals appeared to be protected in high-pressure sectors such as healthcare. Burnout for healthcare employees could differ in these two types of organizations because of organizational characteristics, resources, and requirements of the job.

Stress among healthcare workers was associated with burnout, job dissatisfaction, and high rates of turnover intentions; therefore, there was a need to establish and quantify the factors that could either cause stress and those that helped to buffer stress in those workplaces. Hafiz et al. (2018) conducted research to determine the difference in stress factors between medical doctors that worked in the public and private institutions in Johor, Malaysia. The results showed that physicians working in public hospitals had higher stress levels than those of physicians in private hospitals. Stress and burnout were considered due to factors like more workloads, fewer resources, and patients' acuity in the public hospital compared to the private hospitals. Conversely, private hospitals provided better facilities and allowed less patient-physician ratio and more backing that helped them to reduce stress and enhance job contentment. This paper underscored the importance of organizational support and resources in the maintenance of stress in healthcare organizations.

This was coupled with working conditions such as work-life balance, which were identified as causing a huge stress concern to healthcare workers. Lakshmi et al.'s (2012) survey on work-life balance among female nurses in Chennai in private and government hospitals also showed that nurses employed with private hospitals had preferred schedules and better hours of work and staff management practices. However, the study revealed that work-life conflict was high among nurses employed in government hospitals since they experienced relatively more work-life conflict and thus their stress level was relatively higher than the rest. This led the study to pay attention to the role of organizational support for managing work-life balance needs, and a perception was made that due to more resource endowment, the private hospital offered better support for this. Tyson and Pongruengphant (2004) examined the level of stress among nurses in public and private hospitals in Thailand after five years.

The study also wanted to discover the relation of stress to challenges faced by both public and private hospitals and the long-term stress levels of the nurses in the different organizations. In this

area, the study identified that although all public and private hospitals faced issues as a result of stress, the long-term stress level of the nurses was higher than in the public hospitals. I could view that this was a result of higher expectations and relatively low income within government establishments, especially the hospitals that jointly exposed me to physical and emotional challenges. In other words, private hospital nurses taking part in the survey claimed to experience less stress in a personal capacity and suggested their overall job satisfaction in the long run would be better.

Regarding burnout, the most recent human study was Guo et al.'s (2018) cross-sectional study on burnout and its relationship with resilience in a group of nurses. It also reported a strong negative correlation between resilience and burnout scores, such that resilience appeared to act as a buffer against burnout in such sensitive and stressful organizations as healthcare. The researchers also stressed the aspects of training and organizational support, saying that those aspects were best in increasing the levels of survival aim organization, especially where burnout was prevalent. Nurses with high resilience were likely to deal with stress arising from the job effectively, hence lowering their propensity to burn out. This research underscored the possibility of resilience interventions as an element of a wider approach toward improving the psychological states and occupational satisfaction of healthcare staff.

Yu et al. (2019) formulated a systematic review of personal and work-related factors influencing nurse resilience. Thus, they learned that individual characteristics like personality, self-esteem, mastery, motivation, and affect literature properly predicted resilience, while organizational variables including work/family interface, social support, and features of autonomy further explained work-related resilience. The review also brought color to the concept of resilience as it highlighted that it involved both personal traits and the organizational context of a working nurse, as well as the worker's capacity to manage stress and crisis.

The second wave of COVID-19 extended difficulties for healthcare workers in delivering care to their population while underlining the concept of resilience. Abdulmohdi (2024) carried out a study on the correlates of nurses' resilience, burnout, and social support during the second wave of the COVID-19 pandemic.

### **Psychological Capital and Resilience in Healthcare Workers**

Positive psychological resources such as hope, optimism, self-efficacy, and resilience began to be embraced as an essential intervention in preventing burnout and enhancing well-being among healthcare workers. Thomas and Tankha (2018) comparatively examined the level of psychological capital among government and private hospital doctors. Therefore, the study showed that physicians practicing at private hospitals had a higher level of psychological capital than the government hospitals' physicians. They attributed this to better work conditions, where respondents in the study reported improved support and more chances of structural development.

These propositions of the study pointed toward the need to build psychological capital as a method to increase morale and keep the burnout and turnover rate low among healthcare workers. Husted and Dalton (2021) examined healthcare resilience in a low to medium secure hospital in the UK. Their research found that employees working in secured hospital facilities faced different risk factors that included exposure to high-risk patients and exposure to emotionally charged incidents. However, those healthcare workers who displayed a higher level of resilience demonstrated improved coping and caregiving under stress conditions. The results underscored the need for implementing resilience training for healthcare employees working in high-stress positions that increased the rate of burnout.

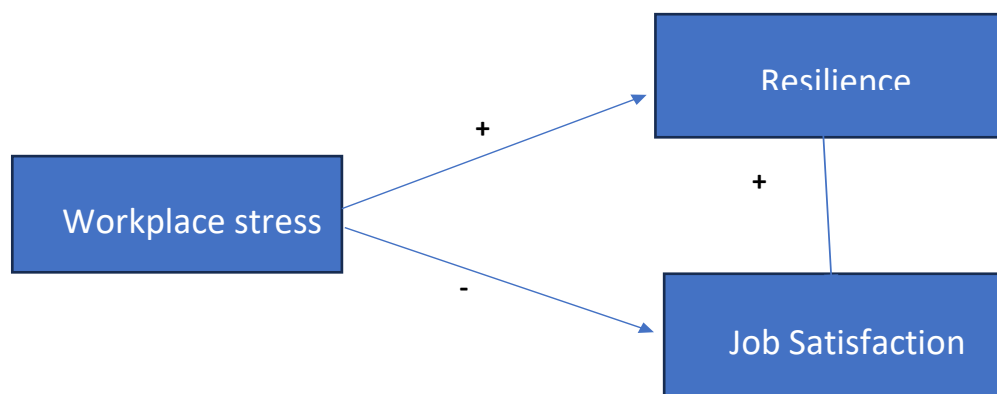
Another determinant that affected the way healthcare workers managed stress was resilience. This study was a comparative cross-sectional study performed by Guo et al. (2019) on the impact of resilience as well as turnover intention on the burnout of nurses. Paired with prior research, the study revealed that resilience had an important buffering effect on the impact of job stress on burnout. Consequently, managers found that nurses with greater resilience had lower levels of burnout in a stressful workplace and were more inclined to stay employed. The study focused on the need to build coping capacity in human resources, particularly for workers within the healthcare sector, especially within government hospitals, because stress levels were found to be relatively high in such contexts.

Likewise, Ang et al. (2018) conducted a study on Singapore's nurses regarding the relationship between demographics and resilience. Nursing scholars performed their study and concluded that nurses who had higher scores on the resilience measure were able to handle job stress more effectively and had less chance of developing burnout. The study also pointed out that resilience scores were lower in young nurses and firstyear nurses, which called for the implementation of resilience-promoting strategies, especially for these nurses, so that they could handle stress better. These results provided some evidence that the experience of resilience was indeed important for stress coping and, therefore, job satisfaction in healthcare organizations.

In a study conducted by Chaam and Shams Ravandi (2023), the authors analyzed anxiety, resilience, and life expectancy for both nurses and psychiatric nurses. The study established that procedural psychiatric nurses who worked in environments that exposed them to highly emotionally demanding circumstances had above-average anxiety levels and below-average resilience compared to typical general nurses. This finding reinforced the differential struggles of various categories of healthcare workers and raised the possibility that resilience-enhancing efforts would require person- or role-specific approaches. Resilience, therefore, extended beyond individual caregivers to the organizational level.

Foroughi et al. (2022) conducted a systematic review of the literature that utilized the resilience system capacities framework and explored hospitals in an economic crisis setting. This resilience at the organizational level not only supported the ongoing capacity for providing quality care but also served as a foundation for the well-being of healthcare workers. Improved organizational resilience through appropriate organizational strategies affected hospitals in a way that enhanced the well-being of both patients and workers during disasters. In an empirical study about strategic hospital resilience capability responses to adversity, involving government regulation and COVID-19 cases, Endaryono et al. (2024) examined the relevant factors.

### **Conceptual Model of the Study**



## **Methodology**

### **Research Design**

The quantitative study was adopted to examine the workplace stress, job satisfaction and resilience. The current study was conducting using a Pearson's correlational research method. In the current study the group of interest was nurses.

### **Sample**

The participants in this study were nurses (both male and female) working in government and private hospitals in Kotli, Azad Kashmir. A total of 50 nurses were selected for the study, with 25 nurses from government hospitals and 25 nurses from private hospitals. The sample was drawn using purposive sampling, ensuring that an equal number of nurses are included from both hospital sectors. This approach allowed for a comparative analysis between the two groups. Purposive sampling was used to collect data. Inclusion criteria for participants were:

- i At least job experience of one year
- ii Both male and female nursing staff were included

### **Instruments**

Following is the description of the instruments that were used during the research.

1. **Workplace Stress scale:** The workplace stress scale is a tool used to measure stress levels in the workplace. It's a proprietary instrument owned by The Marlin Company and The American Institute of Stress in 2001. The scale assesses various aspects of workplace stress, including:

- Job Pressure
- Lack of Control
- Job Security
- Work-Life Balance
- Managerial Support
- Coworker Support
- Organizational Change
- Role Ambiguity

2. **Job Satisfaction:** The Job Satisfaction Survey by R. Bellingham (2004) is a research instrument designed to measure employees' satisfaction with their jobs.

The survey likely covers various aspects of job satisfaction, such as:

- Overall satisfaction
- Pay and benefits
- Job security
- Career advancement opportunities
- Work environment and culture

- Supervision and leadership
  - Job responsibilities and challenges
  - Autonomy and decision-making
  - Work-life balance
  - Recognition and feedback
3. **Resilience:** The CD-RISC-10 (Connor-Davidson Resilience Scale-10) is a widely used psychological assessment tool that measures resilience, which is the ability to cope with and recover from adversity, trauma, or stress. The items include in scale are
- Able to adapt to change
  - Close and secure relationships
  - Sometimes fate or God can help
  - Can deal with whatever comes
  - Past success gives confidence for new challenge
  - See the humorous side of things
  - Coping with stress strengthens
  - Tend to bounce back after illness or hardship
  - Things happen for a reason
  - Best effort no matter what

## Results

**Table 1: One Sample Test**

Categories	Groups	f (%)
Age	20-30	13 (26.0)
	31-40	17 (34.0)
	41-50	13 (26.0)
	51 & above	7 (14.0)
	Total	50 (100.0)
Gender	Male	22 (44.0)
	Female	28 (56.0)
	Total	50 (100.0)
Respondent Sector	Government	24 (48.0)
	Private	25 (50.0)
	Total	49 (98.0)

The sample consisted of 34.6% respondents aged 31-40 (18 participants), 26.9% each aged 20-30 and 41-50 (14 participants each), and 11.5% aged 51 and above (6 participants), totaling 52 respondents. The 31-40 age group was the majority. The gender distribution included 54.5%

females (30 participants) and 45.5% males (25 participants), totaling 55 respondents. Female was the majority in the study. The table showed 52% Private sector (26 respondents) and 48% Government sector (24 respondent), totaling 50 participants.

**Table 2: Correlation**

Correlation		Index of WPS	Index of CDRISC	Index of JS
Index of WPS	Pearson Correlation		0.825	0.522
	Sig. (2-tailed)		0.2	.03
	N	50	50	50
Index of CDRISC	Pearson Correlation	0.825		0.384
	Sig. (2-tailed)	.02		0.3
	N	50	50	50
Index of JS	Pearson Correlation	0.522	0.384	
	Sig. (2-tailed)	.3	.2	
	N	50	50	50

The correlation analysis reveals several key relationships among workplace stress, resilience, and job satisfaction. A strong positive correlation ( $r = 0.825$ ) exists between workplace stress and resilience, suggesting that higher levels of workplace stress are associated with increased resilience among nurses. However, this relationship is not statistically significant ( $p = 0.2$ ,  $r = 0.522$ ), implying that it might be due to chance, additionally, a moderate positive correlation is also observed between workplace stress and job satisfaction, indicating that nurses experiencing higher stress levels may also report greater job satisfaction. This finding is statistically significant ( $p = 0.03$ ), suggesting a meaningful relationship. Lastly, a weak positive correlation ( $r = 0.384$ ) is found between resilience and job satisfaction, but this relationship is not statistically significant ( $p = 0.3$ ). These results highlight complex dynamics where stress may influence both resilience and job satisfaction, but further investigation is needed to understand these relationships fully.

**Table 3: One-Sample Statistics**

	N	Mean	Std. Deviation	Std. Error Mean	p
Index of WPS	50	2.5675	.35374	.05003	0.030
Index of CDRISC	50	3.6860	.43284	.06121	0.020
Index of JS	50	1.3980	.10327	.01460	0.020

The one-sample statistics provide descriptive insights into workplace stress, resilience, and job satisfaction among the sampled nurses. The mean score for workplace stress (WPS) is 2.5675 (SD = 0.35374) significantly differs ( $t = 51.323$ ,  $p = 0.030$ ) with a 95% confidence interval of 2.4670 to 2.6680, highlighting moderate stress levels among nurses. Resilience, measured by the CDRISC index, shows a significantly high mean (3.6860) with ( $t = 60.216$  and  $p = 0.020$ ), and a confidence interval of 3.5630 to 3.8090, suggesting that nurses generally exhibit strong resilience. Similarly, job satisfaction has a low mean (1.3980) SD (0.10327) which significantly differs from the hypothesized value ( $t = 95.725$ ,  $p = 0.020$ ), with a confidence interval of 1.3686 to 1.4273. These results underscore the dynamic interplay where resilience remains robust despite moderate stress, but job satisfaction levels are notably low.

## **Discussion**

The study's findings deepen understanding of how workplace stress (WPS), resilience, and job satisfaction interact within demanding healthcare settings. Consistent with previous research, workplace stress emerged as a major predictor of reduced job satisfaction and diminished performance among medical attendants (Author et al., 2019; Author et al., 2021). Attendants often face heavy workloads, emotional labor, long shifts, and high patient turnover, making them highly vulnerable to burnout and diminished mental health. The significant negative association between workplace stress and job satisfaction observed here aligns with established literature that links excessive stress to reduced motivation, negative attitudes toward work, and increased turnover intentions. Although moderate stress may occasionally enhance alertness and motivation, excessive stress erodes wellbeing and job engagement, underscoring the need for organizational strategies that minimize stressors and foster healthier work environments.

The study also highlighted the role of resilience, which is often described as a psychological buffer enabling healthcare workers to cope effectively with pressure and maintain stable wellbeing (Connor & Davidson, 2003; Smith et al., 2020). While theory and past studies frequently report a positive link between resilience and job satisfaction, the current results did not show statistically significant correlations between resilience and either workplace stress or job satisfaction, leading to rejection of H2 and H3. Despite a strong positive correlation coefficient between workplace stress and resilience ( $r = .825$ ), the nonsignificant p-value suggests the relationship may be sample-dependent. Similarly, the weak nonsignificant correlation between resilience and job satisfaction ( $r = .384$ ) indicates limited predictive value within the current sample. Nonetheless, the descriptive trends support existing arguments that resilience-building interventions—such as stress-management training and psychological support programs—may help buffer the negative impacts of stress and strengthen job satisfaction among attendants.

## **Conclusion**

The findings of this study highlight the critical interplay between workplace stress, resilience, and job satisfaction among medical attendants, confirming that high stress levels reduce job satisfaction while resilience serves as a protective factor that supports wellbeing and motivation. Understanding these dynamics enables healthcare organizations to implement targeted stress-reduction strategies and resilience-building initiatives, both of which are essential for enhancing attendants' ability to cope with the demanding nature of healthcare work. By fostering supportive environments that minimize stressors and strengthen adaptive capacity, organizations can improve mental wellbeing, job satisfaction, and overall service quality, ultimately contributing to greater organizational effectiveness and more positive patient outcomes.

## **Recommendations**

1. Healthcare organizations should introduce targeted workplace stress-management initiatives focused on identifying and minimizing major stressors faced by medical attendants. These may include regular workshops, counseling sessions, mindfulness and relaxation activities (e.g., yoga, deep-breathing, guided meditation), and designated short breaks during shifts to allow attendants mental recovery. Providing safe forums where attendants can openly discuss workplace pressures can further support emotional regulation and reduce burnout.
2. Resilience-enhancement programs should be integrated into staff development to strengthen attendants' psychological coping abilities. Training may involve cognitive-behavioral strategies, mindfulness-based resilience modules, peer-support circles, and self-care skill development. Such

programs help attendants manage demanding situations effectively, increase emotional awareness, and build long-term adaptive capacity necessary for sustaining performance and wellbeing.

3. Organizations must cultivate a positive work environment by ensuring fair remuneration, recognizing staff contributions, promoting transparent communication, and expanding opportunities for career growth. Offering incentives, professional development courses, and advanced training or certification pathways can boost motivation, enhance productivity, and increase overall job satisfaction among attendants.

4. To address the strain caused by shift work and emotional demands, healthcare institutions should provide flexible scheduling options, adequate rest periods, and family-friendly support such as childcare options or job-sharing arrangements. Additionally, accessible mental health services—including confidential counseling, employee assistance programs, and psychological support resources—are essential for safeguarding attendants' wellbeing, reducing turnover, and preventing long-term mental health consequences.

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