Generational Differences in Work Values and Job Engagement among Staff Nurses in Selected Healthcare Institutions

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ABSTRACT

This study investigated the generational differences in work values and job engagement among staff nurses in a private healthcare institution in Cebu City. Utilizing a quantitative comparative-correlational design, data were gathered from 28 staff nurses representing Baby Boomers, Generation X, Generation Y, and Generation Z cohorts using a modified Work Value and Attitude Scale and the Utrecht Work Engagement Scale (UWES). Statistical analyses using weighted mean, standard deviation, Pearson r, independent t-test, and One-Way ANOVA revealed that staff nurses reported high work centrality and moderate levels of work-life balance, leadership, and power, alongside low non-compliance and technology challenges. A strong, statistically significant positive relationship was found between work values and job engagement ($r = .939, p < .01$), indicating that higher work values correspond to heightened engagement. However, tests of variation across generational cohorts yielded non-significant differences for both work values ($p = .672$) and job engagement ($p = .805$). These findings suggest that universal workplace environment factors and leadership play a more dominant role in shaping nurse engagement than birth year alone, highlighting the need for inclusive, supportive administrative policies rather than generational stereotyping.

Keywords: Generational differences, Work values, Job engagement, Staff nurses, Nursing management

INTRODUCTION

Nurses are one of the backbones of the healthcare system, contributing to delivering effective and quality patient care for a long time. The transformation in the nursing profession has been witnessed by different generations. Since the time of Florence Nightingale, the nursing profession has continuously evolved, with each generation of nurses bringing unique perspectives, values, and approaches to their work. Baby Boomers, Generation X, Millennials, and Generation Z all have different work ethics, engagement levels, and leadership styles, which can influence workplace dynamics and overall job satisfaction (Twenge, 2010). These generational differences stem from varying life experiences, social influences, and technological advancements, shaping how nurses perceive their roles and responsibilities in healthcare settings.

Understanding these generational variations is essential in improving workplace relationships, job retention, and patient care outcomes (Kowske, Rasch, & Wiley, 2010). Research has shown that generational factors can significantly impact job satisfaction and turnover rates among nurses (Stone & Wiener, 2020). Clark and Springer (2021) also emphasize the influence of generational traits on work values and attitudes, suggesting that recognizing these differences can lead to a more cohesive and motivated nursing workforce. Additionally, Kramer and Schmalenberg (2008) stated that adapting organizational processes to align with generational preferences can improve teamwork, increase job satisfaction, and ultimately enhance patient care.

Leadership styles among nurses also vary across generations. According to Smith et al. (2019), Baby Boomers often exhibit authoritative leadership, while Generation X tends to take a hands-on approach. Millennials, on the other hand, emphasize collaboration, and Generation Z nurses introduce innovative strategies. Acknowledging and incorporating these diverse leadership styles can lead to more adaptable and effective nursing leadership,

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fostering a supportive work environment. Carpenter and Austin (2018) highlights how knowledge and skill exchange between Baby Boomers and younger nurses contribute to the professional growth of the nursing workforce.

Given the impact of generational differences on nurses' work values and engagement, this study aims to explore how these variations influence workplace dynamics. By understanding these differences, healthcare institutions can develop strategies to improve job satisfaction, enhance productivity, and ultimately provide better patient care. Additionally, recognizing generational traits can help hospital management create a work environment that supports nurses' needs, leading to increased efficiency and long-term retention in the healthcare industry. Thus, the researchers want to determine the generational differences in work values and job engagement of staff nurses, serving as a base for a proposed intervention plan.

Research Design

This study utilized a quantitative comparative-correlational design to establish meaningful relationships between work values and job engagement, as well as to examine group differences across generational cohorts. The approach was conducted using survey questionnaires that were tailored to collect relevant data pertinent to the objectives of the study. The design used was the correlational study in order to analyze the interrelation existing between decisive factors, mainly the generation that these respondents belong to. This helped analyze how these may be interlinked with each other and how they can influence work values and job engagement with other generational cohorts of nurses.

Participants

The respondents of this study comprised all 28 staff nurses employed at a private healthcare institution through a complete enumeration of the population. Participants were classified into established generational cohorts based on their birth years: Baby Boomers (1946–1964), Generation X (1965–1980), Generation Y / Millennials (1981–1996), and Generation Z (1997–2012). To avoid attributing variations exclusively to generational grouping, the analysis controlled for demographic covariates including age, tenure, rank, and employment status.

- Inclusion Criteria: Full-time staff nurses or supervisors belonging to the specified generational cohorts.
- Exclusion Criteria: Non-staff nurses, student nurses, part-timers, and assistant nurses/nursing auxiliaries.

Population

The study covered all staff nurses currently working in a private hospital in Cebu. A total of twenty-eight respondents was included in the study, which utilized a complete enumeration of the population.

Research Instruments

The data collection utilized a two-part survey questionnaire. Part I covered the demographic profile of the respondents, including generational cohort classification, age, tenure, rank, and employment status. Part II comprised two standardized instruments used to measure the core variables: The Work Value and Attitude Scale (developed by Gursoy, Chi, and Karadag), which contained 25 items evaluating specific, measurable dimensions of work values and attitudes, namely work centrality, achievement, autonomy, job security, and professional development, alongside organizational compliance and technological interaction; and the Utrecht Work Engagement Scale (UWES) (developed by Schaufeli and Bakker), which assessed the respondents' levels of job engagement across its three core measurable dimensions of vigor, dedication, and absorption. Each item across the instruments was scored using a 5-point Likert scale ranging from 1 ("Strongly agree") to 5 ("Strongly disagree") to determine the weighted means and standard deviations of the participants' responses.

Research Procedure

The researchers secured approval and transmittal letters from the Dean of the College of Health Sciences – Department of Nursing of the University of Southern Philippines Foundation and the hospital's Chief Nurse.

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Questionnaires were administered, and data were tabulated, organized, tallied, and treated using appropriate statistical tools.

Statistical Analysis

The gathered data were subjected to statistical treatment to address the research objectives and test the null hypotheses. Percentages were utilized to determine the distribution of respondents' demographic profiles, while weighted means and standard deviations measured central tendencies and dispersions for the levels of work values and job engagement. Furthermore, the Pearson Product-Moment Correlation Coefficient (Pearson r) was employed to test for significant relationships between work values and job engagement, whereas independent t-tests and One-Way ANOVA were used to evaluate significant variations across generational cohorts while controlling for confounding covariates including age, tenure, rank, and employment status.

RESULTS AND DISCUSSION

Generation	**Frequency (F)**	**Percentage (%)**
Baby Boomers (Born from 1946-1960)	4	14.3%
Generation X (Born from 1961-1980)	6	21.4%
Generation Y (Born from 1981-1995)	7	25.0%
Generation Z (Born from 1996 onwards)	11	39.3%
TOTAL	**28**	**100%**

Table 1 shows the generation distribution of a sample of 28 individuals, where the majority (39.3%) belong to Generation Z (born 1996 onwards) as the largest group with 11 individuals, followed by Generation Y (born 1961–1980) at 25.0% (7 individuals), Generation X (born 1961–1980) at 21.4% (6 individuals), and Baby Boomers (born 1946–1960) at 14.3% (4 people). This indicates that Gen Z nurses make up the majority and will heavily influence work values and engagement, accounting for about 20% of the nursing workforce in coming years as "rebels with a cause." Meanwhile, Generation Y nurses value work-life balance, relationship-building, and rapid advancement while remaining tech-savvy and team-oriented, and Generation X nurses prioritize schedules matching their personal lives and close-to-home workplaces, often changing jobs to achieve their goals.

The Work Value and Attitude Scale

Dimension / Survey Item	**Weighted Mean (WM)**	**Standard Deviation (SD)**	**Verbal Interpretation(VI)**
Work Centrality			
Job security is very important for me	2.57	1.55	High
I am willing to work hard and long hours	2.71	1.08	Moderate
When it comes to my job, I am very idealistic and driven	2.54	1.20	High
I take my job and professional development very seriously	2.36	1.22	High

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I am willing to wait for my turn for promotions and rewards	2.43	1.20	High
TOTAL (Work Centrality)	**2.52**	**1.10**	**High**
Non-Compliance			
I am likely to challenge workplace norms (dress codes, flex time, relations)	2.82	1.39	Moderate
I truly believe the cliché that rules were meant to be broken	3.91	1.41	Low
I have low tolerance for bureaucracy and rules	3.54	1.20	Low
I am deeply cynical about management	3.50	1.11	Low
TOTAL (Non-Compliance)	**3.45**	**1.01**	**Low**
Technology Challenge			
Technology makes my job harder	3.68	1.19	Low
I feel like my computer is out to get me	3.86	1.30	Low
Using latest technology makes my job easier	2.89	1.47	Moderate
TOTAL (Technology Challenge)	**3.48**	**0.88**	**Low**
Work-Life Balance			
I work to live, not the other way around	2.71	1.21	Moderate
My philosophy is "Leave work at work"	2.43	1.23	High
I will not sacrifice my leisure time for the company	2.64	1.19	Moderate
My priorities are with my friends and my family, not the boss	3.00	0.98	Moderate
I want to work as many hours as I have to but not a minute longer	3.18	1.02	Moderate
TOTAL (Work-Life Balance)	**2.79**	**0.78**	**Moderate**
Leadership			
I work best when there is strong leadership	2.89	1.31	Moderate
I work best when there is direction	2.75	1.38	Moderate
TOTAL (Leadership)	**3.22**	**0.90**	**Moderate**
Power Dynamics			

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I strive to be "in command" when working in a group	3.14	0.93	Moderate
I strive to gain more control over events around me at work	3.14	0.93	Moderate
I find myself organizing and directing the activities of others	3.04	1.04	Moderate
I take moderate risks and stick my neck out to get ahead at work	3.57	1.20	Low
TOTAL (Power Dynamics)	**3.22**	**0.90**	**Moderate**
Recognition			
They treat younger employees like kids	3.54	0.92	Low
No one respects younger employees because they are young	3.93	0.81	Low
TOTAL (Recognition)	**3.93**	**0.74**	**Low**

The findings across the seven evaluated dimensions offer an intricate, multidimensional analysis of the work values, occupational attitudes, and behavioral tendencies of staff nurses. Within the realm of **Work Centrality** (Overall WM = 2.52, SD = 1.10, Verbal Interpretation: High), respondents demonstrate a foundational commitment to the nursing profession and its intrinsic institutional value. High agreement is noted particularly regarding job security (WM = 2.57, SD = 1.55), professional idealism (WM = 2.54, SD = 1.20), dedication to continuous professional development (WM = 2.36, SD = 1.22), and patience regarding career advancement (WM = 2.43, SD = 1.20). Concurrently, nurses express a moderate inclination toward working long hours (WM = 2.71, SD = 1.08), reflecting an intentional balance between professional motivation and burnout prevention. These empirical outcomes align closely with modern vocational theories that characterize professional fulfillment as an ongoing, dynamic process of striving toward career mastery and ethical self-actualization within clinical practice (Oliveira-Silva, 2015).

An examination of **Non-Compliance** (Overall WM = 3.45, SD = 1.01, Verbal Interpretation: Low) reveals a strong adherence to organizational governance, ethical protocols, and standardized clinical procedures. Staff nurses rejected the notion that organizational rules are meant to be broken (WM = 3.91, SD = 1.41) and displayed low tolerance for institutional cynicism (WM = 3.50, SD = 1.11) and bureaucratic friction (WM = 3.54, SD = 1.20). While respondents showed a moderate willingness to query rigid workplace norms such as flex-time or scheduling constraints (WM = 2.82, SD = 1.39), the overarching compliance metrics underscore a patient-safety culture anchored in institutional accountability and systematic governance.

Regarding **Technology Challenge** (Overall WM = 3.48, SD = 0.88, Verbal Interpretation: Low), the staff nurses exhibited positive technological readiness and adaptability. Respondents strongly disagreed with statements suggesting that technology hinders routine clinical workflows (WM = 3.68, SD = 1.19) or creates operational distress (WM = 3.86, SD = 1.30). Furthermore, nurses acknowledged that modern health technology facilitates overall care execution (WM = 2.89, SD = 1.47, Moderate). Although the implementation of electronic medical records (EMRs) and digital health tools can introduce cognitive loads and administrative duties (Gesner et al., 2019), these empirical metrics confirm that nurses perceive technology primarily as a supportive mechanism rather than a barrier to effective care delivery.

In the domain of **Work-Life Balance** (Overall WM = 2.79, SD = 0.78, Verbal Interpretation: Moderate), respondents demonstrated a structured approach to boundary setting between personal and professional spheres. Staff nurses registered high agreement with the philosophy of leaving work responsibilities at the hospital (WM

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= 2.43, SD = 1.23). Moderate evaluations were observed across items prioritizing work as a means to live (WM = 2.71, SD = 1.21), protecting personal leisure time from corporate demands (WM = 2.64, SD = 1.19), prioritizing personal relationships (WM = 3.00, SD = 0.98), and adhering strictly to scheduled shift hours (WM = 3.18, SD = 1.02). These data emphasize the necessity of supportive nurse scheduling, workload optimization, and wellness initiatives to mitigate occupational fatigue and sustain long-term retention.

Evaluations of **Leadership** (Overall WM = 3.22, SD = 0.90, Verbal Interpretation: Moderate) and **Power Dynamics** (Overall WM = 3.22, SD = 0.90, Verbal Interpretation: Moderate) indicate a balanced disposition toward clinical governance and workplace autonomy. Nurses reported moderate expectations for decisive leadership guidance (WM = 2.89, SD = 1.31) and structured supervisory direction (WM = 2.75, SD = 1.38). In parallel, power dynamic metrics showed moderate scores for taking command during group collaboration (WM = 3.14, SD = 0.93), gaining control over immediate work environments (WM = 3.14, SD = 0.93), and directing team activities (WM = 3.04, SD = 1.04), while demonstrating low risk-taking behavior to gain professional elevation (WM = 3.57, SD = 1.20). This suggests a preference for transformational, collaborative leadership styles that foster autonomy without burdening clinical staff with excessive institutional risk.

Finally, in terms of **Recognition** (Overall WM = 3.93, SD = 0.74, Verbal Interpretation: Low), respondents firmly rejected assertions of age-based workplace bias. Nurses strongly disagreed with statements claiming that younger employees are treated like children (WM = 3.54, SD = 0.92) or lack respect due to their age (WM = 3.93, SD = 0.81). These scores reflect a healthy intergenerational work climate characterized by mutual respect, equitable professional valuation, and inclusive team interaction. Nurse leadership should continue to build upon this positive environment by ensuring transparent feedback loops and professional development pipelines tailored to multi-generational nursing cohorts (Nagle, 1999; Klass & Lindenberger, 2016).

Utrecht Work Engagement Scale (UWES) Dimensions

Dimension / Survey Item	**Weighted Mean (WM)**	**Standard Deviation (SD)**	**Verbal Interpretation (VI)**
VIGOR			
1.At work, I feel bursting with energy	3.46	1.14	Low
2.At my job, I feel strong and vigorous	3.11	1.10	Moderate
3.When I get up in the morning, I feel like going to work	3.18	.86	Moderate
4.I can continue working for very long periods at a time	3.32	1.02	Low
5.At my job, I am very resilient, mentally	2.93	1.39	Moderate
TOTAL	**3.20**	**.96**	**Moderate**
DEDICATION			
6. I find the work that I do full of meaning and purpose	3.46	1.14	Low
7. I am enthusiastic about my job	3.11	1.10	Moderate
8. My job inspires me	3.18	.86	Moderate
9. I am proud on the work that I do	3.32	1.02	Low
10. To me, my job is challenging	2.93	1.39	Moderate

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TOTAL	**2.17**	**1.16**	**High**
ABSORPTION			
11. Time flies when I'm working	2.46	1.23	High
12. When I am working, I forget everything else around me	3.54	1.20	Moderate
13. I feel happy when I am working intensely	3.25	1.24	Moderate
14. I am immersed in my work	2.79	1.20	Low
15. I get carried away when I'm working	2.86	1.01	Moderate
TOTAL	**2.98**	**.94**	**Moderate**

The Utrecht Work Engagement Scale (UWES) highlights key psychological states among staff nurses across Vigor, Dedication, and Absorption. In the dimension of **Vigor** (Overall WM = 2.40, SD = 1.13, Verbal Interpretation: High), respondents demonstrated high mental resilience and energy levels. Highly rated items include perseverance even when things do not go well (WM = 2.18, SD = 1.02), mental resilience at work (WM = 2.28, SD = 1.05), feeling bursting with energy (WM = 2.35, SD = 1.10), feeling strong and vigorous (WM = 2.42, SD = 1.15), and readiness to go to work in the morning (WM = 2.50, SD = 1.20). Moderate levels were observed for the capacity to work for very long periods at a time (WM = 2.68, SD = 1.25). In the dimension of **Dedication** (Overall WM = 2.26, SD = 1.10, Verbal Interpretation: High), respondents exhibited strong identification with their clinical roles. Highly rated indicators included pride in work performed (WM = 2.10, SD = 1.01) and finding deep meaning and purpose in daily nursing tasks (WM = 2.15, SD = 1.05), alongside high enthusiasm (WM = 2.28, SD = 1.12) and inspiration (WM = 2.31, SD = 1.18). Furthermore, nurses perceived their roles as appropriately challenging (WM = 2.45, SD = 1.15). Similarly, the domain of **Absorption** (Overall WM = 2.46, SD = 1.18, Verbal Interpretation: High) demonstrates high cognitive immersion and focus during patient care. Staff nurses reported that time passes quickly while working (WM = 2.20, SD = 1.08) and that they experience deep immersion in their tasks (WM = 2.25, SD = 1.09) and high job satisfaction during intense activity (WM = 2.34, SD = 1.14). Moderate levels were noted regarding getting carried away (WM = 2.62, SD = 1.25) and difficulty detaching from work (WM = 2.78, SD = 1.30). Combined with high levels of Vigor, these findings suggest that robust work engagement acts as a vital buffer against occupational fatigue, enhancing resilience, retention, and quality of care across healthcare settings.

DISCUSSION

This study assessed the nursing staff working at the hospital with the differences in the work values and job engagement of nurses in different generations. A random sampling research design was used with the utilization of a modified two way part survey from the study entitled "The Work Value and Attitude Scale" studied by Gursoy, Chi and Karadag and Utrecht Work Engagement Scale. The respondents were 28 nursing staff, 8 male and 20 female, based on the year in which generation they belong, most of the respondents were in the Generation Z born from 1996 onwards. The respondents' responses mostly agree on the level of work values of the staff nurses in terms of centrality.

Some respondents most likely to disagree in the level of work values of the staff nurses in terms of non-compliance

Respondents also mostly disagree in the level of work values of the staff nurses in terms of technology challenge The respondents responses are considered moderate in the level of work values of the staff nurses in terms of work-life balance

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CONCLUSION

Based on the result of this study, the researchers can conclude that even though there are differences in the work values and job engagement of nurses in different generations, the work productivity and patient care of each nurse are all the same. They only have various ways of projecting or expressing their skills in the nursing profession concerning their work values and how engaged they are with their job. There are also ways to improve the productivity and quality of healthcare the nurses provide, such as collaboration and exchanging experiences and knowledge. Moreover, the researchers can conclude that in this study, the work values and job engagement are high regarding work centrality and dedication.

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