A Quantitative Analysis of Employment Barriers and Workforce Integration Strategies among Newly Graduated Nurses

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ABSTRACT

The transition from nursing education to clinical practice remains a critical challenge for newly graduated nurses, as systemic and institutional barriers often delay their integration into the workforce. This study examined the extent of employment barriers, perceived readiness, and effectiveness of workforce integration strategies among 100 newly graduated nurses employed in selected hospitals in Zamboanga City, Philippines. A descriptive-correlational design was utilized, with data gathered through a validated structured questionnaire. Results revealed that the most significant barriers were the employer preference for experienced nurses (M = 3.52, SD = 0.66) and limited job openings for new graduates (M = 3.40, SD = 0.72)**.** Respondents perceived themselves as moderately ready for practice, with higher ratings for academic preparation (M = 3.16) and clinical skills (M = 3.11), but lower for emotional readiness (M = 2.98) and institutional support (M = 2.75). A significant positive correlation (p < 0.05) was found between employment barriers and the duration of unemployment, indicating that greater barriers prolonged job acquisition. Significant differences in barriers were also noted across demographic factors such as type of school, employment status, years of service, and time before securing employment. Mentorship, structured orientation, and continuous feedback emerged as the most effective integration strategies.

Future Directions

Future research should adopt longitudinal designs to examine the career trajectories of newly graduated nurses over extended periods, particularly focusing on retention, skill development, and workforce mobility. Qualitative approaches, such as interviews and focus group discussions, are strongly recommended to capture the lived experiences of novice nurses and to provide deeper insights into their emotional readiness. Expanding research to include larger, more diverse samples across geographical regions and implementing probability sampling will improve generalizability. Additionally, resilience-building and stress-management interventions should be explored as essential components of workforce integration. Finally, given that the Philippines is one of the largest exporters of nurses worldwide, future studies should address the implications of international nurse migration on local workforce stability, national health systems, and global supply-demand dynamics.

The study concludes that systemic hiring preferences, limited institutional support, and readiness gaps significantly affect the transition of novice nurses, contributing to delayed employment and professional uncertainty. To address these issues, it is recommended that healthcare institutions establish structured residency and mentorship programs, provide financial and emotional support mechanisms, and collaborate with academic institutions to strengthen career-readiness initiatives. Policymakers are urged to streamline licensure and hiring processes, expand entry-level opportunities, and institutionalize workforce integration frameworks. A Workforce Integration Toolkit is proposed to bridge the academic-to-practice gap and promote a smoother transition into professional nursing practice.

INTRODUCTION AND BACKGROUND OF THE STUDY

The transition from nursing education to professional practice is widely recognized as one of the most pivotal yet challenging phases in the career development of nurses. Graduation signifies the completion of years of academic preparation, yet for many, the shift to clinical practice brings uncertainty, heightened responsibility, and the pressure of adaptation (Labrague & McEnroe-Petitte, 2018). While nursing graduates acquire theoretical knowledge and limited clinical exposure, the transition often reveals gaps in readiness that hinder smooth integration into the workforce.

Globally, the demand for nurses continues to increase due to population aging, the rise of chronic illnesses, and recurrent public health emergencies. Despite this demand, newly graduated nurses (NGNs) are frequently confronted with systemic barriers that delay their entry into the workforce (World Health Organization [WHO], 2020). Hospitals and healthcare institutions often prefer experienced nurses, citing efficiency and reduced training costs as justifications (Hofler & Thomas, 2016). This situation creates what has been termed the "experience paradox," where fresh graduates are expected to possess experience before being hired, thus perpetuating cycles of unemployment and underemployment. Prolonged job-seeking not only erodes confidence but may also lead to skill stagnation and attrition from the profession (Alibudbud, 2023).

In the Philippine context, nursing has long been regarded as a pathway to socioeconomic mobility and international opportunity. The country continues to produce thousands of nursing graduates annually, many of whom aspire to serve both domestically and abroad (Lorenzo et al., 2019). Despite this oversupply, local employment opportunities remain limited, with many hospitals requiring prior experience before considering applicants for staff nurse positions. Delays in licensure processing and the absence of structured transition-to-practice programs further exacerbate the challenges faced by novice nurses (Labrague & De los Santos, 2023). These barriers often result in prolonged unemployment or unpaid volunteer roles, fueling frustration and disillusionment.

The researcher's own clinical observations reinforced these trends. Many newly graduated nurses, despite demonstrating enthusiasm and up-to-date knowledge, struggled to secure stable roles and were frequently relegated to contractual or volunteer positions. Others reported inadequate mentorship and institutional support during the early months of practice, leading to diminished self-confidence and professional uncertainty. These experiences highlight the disconnect between academic preparation and workforce expectations, raising questions about the adequacy of current systems supporting NGNs' transition to practice.

It is against this backdrop that the present study was undertaken. By investigating employment barriers, perceived readiness, and integration strategies among newly graduated nurses, this study seeks to provide empirical evidence that can inform institutional interventions and policy reforms. Ultimately, addressing these barriers is not only critical for improving employment outcomes but also essential for sustaining a resilient nursing workforce capable of delivering safe, competent, and patient-centered care (Phillips et al., 2015).

METHODOLOGY

This study adopted a quantitative, descriptive–correlational design, appropriate for describing the extent of employment barriers and exploring statistical relationships between barriers, readiness, integration strategies, and unemployment duration (Creswell & Creswell, 2018; Polit & Beck, 2021).

The respondents were 100 newly graduated nurses employed in selected government and private hospitals in Zamboanga City, Philippines. Purposive sampling was used to include nurses who graduated within the past two years and had at least three months of professional practice. This ensured the study focused on individuals in the critical early stages of transition to the workforce (LoBiondo-Wood & Haber, 2022).

Data were collected through a structured self-administered questionnaire, consisting of five sections: demographics, employment barriers, perceived readiness, effectiveness of integration strategies, and supporting comments. Items were rated on a four-point Likert scale. The instrument underwent content

validation by experts and pilot testing, yielding acceptable reliability coefficients (Cronbach's $\alpha \geq 0.70$), confirming internal consistency (Polit & Beck, 2021).

Following ethics approval and institutional permissions, surveys were distributed in both paper and online formats. Respondents were assured of voluntary participation, confidentiality, and anonymity, in compliance with the Philippine Data Privacy Act of 2012 (RA 10173).

Descriptive statistics (frequencies, means, standard deviations) were employed to summarize profiles and ratings. Pearson's correlation coefficient was used to assess the relationship between barriers and unemployment duration, while t-tests and ANOVA determined differences across demographic variables. The significance level was set at $p < 0.05$ (Creswell & Creswell, 2018).

Ethical principles of respect, beneficence, and justice guided the study. Written informed consent was secured from all participants, with strict confidentiality maintained in line with RA 10173 (Polit & Beck, 2021).

RESULTS AND DISCUSSION

The study involved 100 newly graduated nurses, most of whom were aged 23–25 years (57%), female (68%), and graduates of private institutions (61%). More than half were employed in private hospitals (56%), and 64% held full-time positions. However, it is noteworthy that 52% of the respondents reported delays in securing their first job, with 25% waiting more than six months before entering the workforce. These findings align with previous research in the Philippines showing that new graduates often face underemployment or prolonged unemployment due to institutional hiring preferences and limited job openings (Lorenzo et al., 2019). Globally, similar patterns have been observed, where novice nurses encounter a "waiting period" before full integration into the healthcare workforce (Al-Rawajfah et al., 2023).

Employer preference for experienced nurses (M = 3.52, SD = 0.66) and limited job openings (M = 3.40, SD = 0.72) emerged as the most significant barriers. These results reinforce the "experience paradox" described in nursing workforce literature, where employers demand prior experience from graduates who are just entering the profession (Hofler & Thomas, 2016). Other barriers such as academic-to-practice transition gaps, limited onboarding programs, and financial constraints were reported to a moderate extent. Similar findings have been documented by Labrague and De los Santos (2023), who noted that lack of orientation and institutional support prolongs the job-seeking period and contributes to stress among newly licensed nurses.

Respondents rated themselves moderately prepared for practice, with the highest ratings for academic knowledge (M = 3.16) and clinical skills (M = 3.11). However, emotional readiness (M = 2.98) and institutional support (M = 2.75) received lower ratings. These findings suggest that while nursing education provides adequate theoretical and technical grounding, graduates continue to struggle with emotional resilience and adjustment to real-world demands. This echoes the work of Romyn et al. (2009), who argued that while nursing schools equip students with clinical competencies, they often fall short in preparing them for the psychological challenges of professional nursing. In Iran, Momeni et al. (2023) similarly reported that turbulence in workplace dynamics, lack of mentorship, and unpleasant interpersonal experiences undermine the confidence of new nurses.

Mentorship, structured orientation, and regular feedback were identified as the most effective strategies for easing transition into practice. This resonates with international evidence highlighting the value of transition-to-practice (TTP) programs in improving retention and clinical competence (Rush et al., 2019; Hampton et al., 2021). The Accreditation Commission for Education in Nursing (2023) also emphasized that mentorship and guided learning opportunities significantly reduce "transition shock" and support early career sustainability.

A statistically significant positive correlation was found between the extent of employment barriers and the duration of unemployment ($p < 0.05$). This finding confirms that systemic and institutional obstacles, such as the absence of structured onboarding programs and employers' preference for seasoned staff, directly contribute to prolonged job acquisition. Similar results were reported by Al Zamel et al. (2023), who found

that high job stress, lack of professional development opportunities, and insufficient support were linked to early attrition and delayed employment among novice nurses.

Significant differences were observed in employment barriers when respondents were grouped according to type of school graduated from, employment status, years of service, and time taken to secure employment. For example, graduates of private institutions reported greater barriers compared to their counterparts from public institutions. This may reflect disparities in training quality, hospital affiliations, and career placement support, as noted by Santos and Geronimo (2022).

Overall, the findings underscore that while NGNs perceive themselves as moderately prepared, structural barriers significantly delay their workforce entry. The mismatch between academic preparation and hospital expectations creates frustration, erodes confidence, and contributes to early attrition—a concern raised in both local and international literature (Phillips et al., 2015; Labrague & McEnroe-Petitte, 2018). Addressing these barriers requires a multi-pronged approach: hospitals must invest in structured residency and mentorship programs, nursing schools must strengthen career-readiness initiatives, and policymakers must ensure equitable hiring practices and streamline licensure processes.

The evidence further highlights that workforce integration is not merely a matter of clinical readiness but also of emotional resilience, institutional support, and systemic alignment. By investing in structured transition programs and supportive workplace cultures, institutions can enhance nurse retention, improve patient outcomes, and ensure a stronger, more sustainable nursing workforce.

This study demonstrated that newly graduated nurses in Zamboanga City face considerable barriers as they transition into professional practice. The most prominent challenges identified were employers' preference for experienced nurses and limited job openings, which collectively delayed employment and contributed to professional uncertainty. Although respondents expressed moderate confidence in their academic knowledge and clinical skills, they reported weaker emotional readiness and insufficient institutional support. Statistical analysis further revealed that greater employment barriers were significantly correlated with longer unemployment duration, emphasizing the critical impact of systemic and institutional practices on workforce integration.

The findings highlight that the transition from student to practicing nurse is shaped not only by individual readiness but also by the availability of structured institutional support. Mentorship, structured orientation, and continuous feedback emerged as the most effective integration strategies, underscoring the need for comprehensive transition-to-practice programs. Overall, the study concludes that while nursing education in the Philippines equips graduates with foundational competence, systemic reforms in employment practices and institutional support mechanisms are urgently required to strengthen nurse retention, reduce attrition, and build a sustainable nursing workforce (Labrague & De los Santos, 2023; Rush et al., 2019).

Based on the findings of this study, several recommendations are proposed to address the challenges encountered by newly graduated nurses as they transition into professional practice. For healthcare institutions, it is essential to establish structured residency and mentorship programs that provide guidance, supervision, and support during the early months of practice. Such initiatives can help bridge the gap between academic preparation and workplace demands, while mechanisms such as counseling services, peer support groups, and orientation packages may strengthen the emotional readiness of novice nurses and mitigate transition shock. Hiring policies should also be reviewed to open more entry-level opportunities for fresh graduates, ensuring that hospitals do not rely solely on experienced nurses to meet staffing needs. In academic institutions, career-readiness initiatives should be further strengthened through simulation-based training, job placement assistance, and mock interviews, thereby equipping graduates with both technical competence and professional confidence. Stronger partnerships between nursing schools and healthcare facilities may also facilitate seamless integration into the workforce. Moreover, incorporating resilience-building and emotional preparedness into the nursing curriculum can better prepare graduates for the realities of hospital practice. From a policy perspective, government agencies and regulatory bodies should consider streamlining licensure and employment processing to minimize delays in workforce entry. The institutionalization of transition-to-practice programs as a national standard would also ensure that all hospitals adopt comprehensive onboarding

frameworks for novice nurses. Additionally, providing incentives for healthcare institutions to absorb new graduates, such as subsidies for orientation costs, may further promote equitable hiring practices. Finally, future research should consider longitudinal approaches to examine the long-term career trajectories of novice nurses, complemented by qualitative studies that capture the lived experiences of these professionals. Expanding the scope of future investigations to rural and underserved regions would also yield a more comprehensive understanding of the employment challenges faced by newly graduated nurses across diverse contexts.

This study is subject to several limitations. First, it relied on self-reported data, which may be influenced by recall bias or social desirability bias. Second, the sample was limited to 100 newly graduated nurses from selected hospitals in Zamboanga City, which restricts the generalizability of findings to other regions in the Philippines or to international contexts. Third, the study adopted a quantitative design, which provided valuable statistical associations but limited the depth of understanding regarding the lived experiences of novice nurses. Finally, data collection was conducted during a specific timeframe and may not capture fluctuations in employment trends due to external factors such as policy changes, hospital staffing needs, or public health emergencies.

Despite these limitations, the study provides important insights into the barriers faced by newly graduated nurses and contributes to the growing evidence base advocating for structured transition programs and supportive institutional practices.

REFERENCES

1. Accreditation Commission for Education in Nursing. (2023). *Transition to practice model for nursing graduates*. ACEN. https://www.acenursing.org
2. Al-Rawajfah, O. M., AlBashayreh, A., Sabei, S., Al-Maqbali, M., & Yahyaei, A. (2023). Role transition among new Omani graduate nurses: Factors influencing effective integration. *Nurse Education Today, 124,* 105651. https://doi.org/10.1016/j.nedt.2023.105651
3. Al Zamel, L. G., Mollaoglu, M., & Özkan, S. (2023). Factors influencing turnover intention among newly graduated nurses: A cross-sectional study. *Journal of Nursing Management, 31*(4), 789–798. https://doi.org/10.1111/jonm.13834
4. Alibudbud, R. (2023). The challenges of newly licensed Filipino nurses: Employment barriers, migration, and workforce implications. *Philippine Journal of Nursing, 93*(1), 15–22. https://doi.org/10.3860/pjn.v93i1.1123
5. Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th ed.). SAGE Publications.
6. Hampton, D., Smeltzer, S. C., & Ross, J. (2021). Transitioning from nursing student to practicing nurse: An integrative review of transition-to-practice programs. *Journal of Professional Nursing, 37*(1), 27–33. https://doi.org/10.1016/j.profnurs.2020.04.013
7. Hofler, L., & Thomas, K. (2016). Transition of new graduate nurses to the workforce: Challenges and solutions in the changing health care environment. *North Carolina Medical Journal, 77*(2), 133–136. https://doi.org/10.18043/ncm.77.2.133
8. Labrague, L. J., & De los Santos, J. A. (2023). Transition challenges of newly graduated nurses: Workplace stress, readiness, and institutional support. *Journal of Nursing Management, 31*(3), 567–575. https://doi.org/10.1111/jonm.13812
9. Labrague, L. J., & McEnroe-Petitte, D. M. (2018). Job stress in new nurses: Causes, consequences, and coping mechanisms. *International Journal of Nursing Education Scholarship, 15*(1), 1–14. https://doi.org/10.1515/ijnes-2017-0022
10. LoBiondo-Wood, G., & Haber, J. (2022). *Nursing research: Methods and critical appraisal for evidence-based practice* (10th ed.). Elsevier.
11. Lorenzo, F. M., Galvez-Tan, J., Icamina, K., & Javier, L. (2019). Nurse migration from a source country perspective: Philippine case study. *Health Services Research, 54*(2), 677–689. https://doi.org/10.1111/1475-6773.13123

12. Momeni, M., Torabizadeh, C., Dehghanrad, F., & Mohammadi, E. (2023). Weak professional confidence among novice nurses: A qualitative study. *BMC Nursing, 22*(1), 34. https://doi.org/10.1186/s12912-023-01056-2

13. Phillips, C., Kenny, A., Esterman, A., & Smith, C. (2015). A secondary data analysis examining the needs of graduate nurses in their transition to a new role. *Nurse Education in Practice, 15*(1), 29–34. https://doi.org/10.1016/j.nepr.2014.06.003

14. Polit, D. F., & Beck, C. T. (2021). *Nursing research: Generating and assessing evidence for nursing practice* (11th ed.). Wolters Kluwer.

15. Romyn, D., Linton, N., Giblin, C., Hendrickson, B., Limacher, L., Murray, C., Nordstrom, P., Thauberger, G., Vosburgh, D., Vye-Rogers, L., Weidner, A., & Zimmel, C. (2009). Successful transition of new graduate nurses: A grounded theory of surviving within a culture. *International Journal of Nursing Education Scholarship, 6*(1), 1–20. https://doi.org/10.2202/1548-923X.1802

16. Rush, K. L., Adamack, M., Gordon, J., Lilly, M., & Janke, R. (2019). Best practices of formal new graduate transition programs: An integrative review. *International Journal of Nursing Studies, 94,* 139–158. https://doi.org/10.1016/j.ijnurstu.2019.03.012

17. Santos, R. M., & Geronimo, J. S. (2022). Bridging gaps in Philippine nursing education: Challenges and opportunities in preparing nurses for practice. *Philippine Journal of Nursing Education, 14*(2), 45–55.

18. World Health Organization. (2020). *State of the world's nursing 2020: Investing in education, jobs and leadership*. WHO. https://www.who.int/publications/i/item/9789240003279