

Plights and Aspirations of the New Breed of Nurses: Explanatory Sequential Analysis

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ABSTRACT

Newly licensed nurses often face multifaceted challenges as they transition into professional practice, which may influence their long-term career aspirations. Understanding their lived experiences is essential for nursing management to support retention and professional growth. This study utilized a mixed-method explanatory sequential design. Quantitative data were collected through a survey assessing the relationship between demographic profile, plights, and aspirations of newly licensed nurses. Qualitative data were obtained through in-depth interviews with selected participants to contextualize the statistical findings. Quantitative analysis revealed a significant relationship between plans to work abroad and levels of aspiration, while other demographic variables showed no significant associations. Qualitative findings highlighted themes such as overwhelming clinical expectations, emotional burden, systemic limitations, mentorship gaps, and strong personal ambitions. Despite adversities, participants expressed hope, resilience, and a desire for professional advancement through further education, specialization, and advocacy roles. The findings affirm Maslach Burnout Theory, which explains emotional dissonance in early clinical practice, and align with Savickas' Career Construction Theory, emphasizing purposeful career shaping despite constraints. The study underscores the need for structured mentorship and supportive policies in nursing management.

Keywords: newly licensed nurses, career aspirations, nursing challenges, reality shock, career construction, nursing management

INTRODUCTION

The nursing profession is experiencing a generational shift as a new breed of nurses enters the workforce, bringing with them fresh perspectives, evolving career aspirations, and distinct educational experiences. This new breed refers to recently licensed nurses predominantly millennial and Gen Z nurses who entered the profession amidst the unprecedented challenges posed by the COVID-19 pandemic (Chen et al., 2021). These nurses are unique not only because of their generational characteristics but also because many of them completed their nursing education through online and distance learning modalities during the height of the pandemic (Mukhtar et al., 2020). This pandemic era educational experience significantly shaped their clinical preparedness, professional identity formation, and initial career expectations (Dewart et al., 2020).

The researcher finds their study very interesting because of the significant influence Generation Z nurses' distinctive traits have on the changing healthcare scene. These young professionals, who are digital natives, show ease with electronic health records, telehealth platforms, and digital communication technologies that improve efficiency and patient care, so integrating technology into their practice. Unlike earlier generations, they highly prioritize work-life balance, thereby questioning the long-standing assumptions about nursing scheduling and supporting flexibility without sacrificing patient care. Their great dedication to diversity and inclusivity particularly fascinates the researcher since they raise cultural understanding, gender sensitivity, and a patient-centered style of healthcare. Growing up in a globally linked world, they naturally promote an environment of acceptance and fair treatment, which helps nursing to be more flexible for different patient populations. Their love of lifelong learning and professional development also distinguishes them. The researcher notes a change in how professional advancement is seen in nursing as this generation aggressively searches chances for leadership roles, mentoring, and specialization far earlier than their predecessors. Although these traits show promise, they also provide difficulties for medical facilities that call for changes in

workplace policies, training courses, and retention policies. The researcher thinks that a more strong and responsive nursing staff depends on an awareness of these qualities. Studying Generation Z nurses can help one to get important insights to improve patient care, boost professional development, and guarantee the long-term viability of the healthcare system. Generation Z, which the New Breed of nurses, are creative, tenacious, forward-looking professionals changing the nursing field to fit contemporary healthcare demands.

These new breed nurses now face plights - challenges that stem from the evolving nature of healthcare, workforce shortages, work-life balance struggles, and the pressures of adapting to increasingly complex clinical environments (Nantsupawat et al., 2017). Their plights encompass high workloads, role ambiguity, lack of mentoring, low salaries, poor staffing ratios, and professional stress (Rosa et al., 2019). At the same time, they harbor aspirations, personal and professional goals centered around career advancement, specialization, international migration opportunities, work-life balance, and professional autonomy (Pajakoski et al., 2020).

Moreover, these new breed nurses enter the workplace with a nontraditional clinical training background, having experienced a significant portion of their clinical education virtually due to pandemic restrictions (Swift et al., 2020). This shift to online learning disrupted traditional hands-on skills development, patient interaction, and immersion in clinical culture, all of which are crucial components of professional socialization in nursing (Goni-Fuste et al., 2021). As a result, their transition into actual practice may present additional stressors and challenges, influencing their early career perceptions, satisfaction, and resilience (Chan et al., 2021).

One can understand the study as having a wide reach, covering the whole Philippine nursing workforce or perhaps from a worldwide standpoint. The researcher thinks that the lack of a particular geographical place in the title points to inclusivity, hence enabling a more complete knowledge of the difficulties and goals experienced by recently hired nurses in different environments. Using the phrase "New Breed of Nurses," the researcher acknowledges that, independent of their particular location, nursing practitioners in many areas may have similar challenges and objectives.

Furthermore relevant in many instances is an Explanatory Sequential Analysis, which suggests a methodical strategy to grasp these experiences. Should the study involve different individuals from different areas, healthcare environments, and professional backgrounds, its results could offer insightful analysis pertinent to the larger nursing workforce. The qualitative phase enriches the study by giving voice to their personal narratives, providing a deeper understanding of the meaning behind the quantitative results (Creswell & Creswell, 2018).

Understanding the plights and aspirations of these pandemic era new breed nurses is essential to nursing leadership, workforce planning, policy development, and retention strategies. Addressing their unique challenges and supporting their career goals is critical not only to ensure their well-being and professional satisfaction but also to safeguard the delivery of quality patient care and promote a resilient nursing workforce in the years to come (Hussein et al., 2017). As nursing shortages persist globally, especially after the pandemic highlighted the fragility of healthcare systems, listening to and supporting this new generation of nurses becomes an urgent priority for healthcare institutions, professional organizations, and policymakers (Cheng et al., 2022).

Despite the growing body of research exploring job satisfaction, burnout, and retention among nurses, studies focusing specifically on the long-term career aspirations of recently licensed nurses remain limited. This gap is particularly evident in local contexts such as Maasin City, where little to no research has documented how the COVID-19 pandemic affected the career changes, aspirations, and retention of newly hired nurses.

Being a nurse, the researcher observed and heard stories circulated in hospitals about new nurses experiencing anxiety when performing basic procedures like inserting IV lines, handling emergencies, or communicating effectively with patients and families. These training gaps created a fragile sense of professional identity, which influenced both their confidence and their aspirations for career growth. Newly licensed nurses in Maasin City and many other areas reported being thrown into high-pressure work environments, with some assigned to COVID-19 wards almost immediately after licensure. Short staffing, long hours, emotional distress

from patient deaths, and limited mentoring due to overburdened senior nurses created an environment where new nurses felt overwhelmed and unsupported. Some nurses resigned within months, while others stayed but expressed feelings of disillusionment and uncertainty about their future in the profession.

Ensuring the well-being and professional satisfaction of nurses plays a critical role in strengthening healthcare systems and enhancing the quality of patient care. This study aligns closely with Sustainable Development Goal 8 (Decent Work and Economic Growth), which emphasizes the importance of promoting safe working environments, fair employment practices, and sustainable workforce retention strategies, particularly in essential sectors like healthcare (United Nations, 2015). Addressing the plights and aspirations of newly breed nurses directly supports this goal by highlighting the factors that contribute to job satisfaction, professional fulfillment, and long-term retention.

The findings of this study will have direct and practical implications for nursing management, particularly in the areas of workforce planning, employee retention, performance management, and professional development. By identifying the plights—or workplace challenges faced by newly breed nurses, nurse managers and administrators can proactively address organizational stressors, such as inadequate staffing, unclear career pathways, limited mentoring, and work-life imbalance. These insights allow nursing leaders to design targeted interventions that improve job satisfaction, reduce early-career burnout, and foster a supportive work environment tailored to the needs of the new breed of nurses.

Additionally, understanding the aspirations of these nurses helps nursing management align institutional programs with employee goals, creating career development pathways that promote specialization, continuing education, leadership training, and opportunities for advancement. This alignment can enhance organizational commitment and increase retention rates, reducing the costly cycle of turnover and recruitment.

Research Objectives

The main purpose of the study assessed the relationship between the demographic profile, plights and aspirations and further explored the relevant experiences of the newly breed nurses in Maasin City for the 2nd quarter for the year 2025.

Specifically, the study answered the following queries:

1. What was the demographic profile of new breed of nurses in terms of:

1.1 age;

1.2 gender;

1.3 current employment status;

1.4 type of healthcare institution;

1.5 monthly income; and

1.6 Plans to work abroad?

2. What were the plights of the new breed nurses?

3. What were the aspirations of the new breed nurses?

4. Was there a significant relationship between:

4.1 demographic profile and the plights of the new breed nurses;

4.2 demographic profile and the aspirations of the new breed nurses;

4. plights and aspirations of the new breed nurses?
5. How did the participants describe their experiences on their plights and aspirations?
6. How did the experiences explain the quantitative findings?
7. What Professional Development program for new breed nurses was proposed based on the findings of the study?

Statement of Null Hypotheses

Ho1: There was no significant relationship between demographic profile and the plights of new breed nurses.

Ho2: There was no significant relationship between demographic profile and the aspirations of new breed nurses..

Ho3: There was no significant relationship between plights and aspirations of new breed nurses.

REVIEW OF RELATED LITERATURE AND STUDIES

Plights of New Breed of Nurses. The interval between nursing education and professional practice of the new breed of nurses is a crucial as it shapes their career paths and affects their professionalism commitment. The COVID-19 pandemic has brought before unheard-of difficulties that have changed the terrain of healthcare and affected their goals and experiences. The COVID-19 pandemic has profoundly changed new breed of nurses' migration into clinical practice. Nursing education's disruptions—limited access to clinical settings and a move to virtual learning environments—have hampered hands-on patient care experiences vital for developing competency and confidence (Djukic et al., 2023). For the new breed of nurses joining the workforce during a worldwide health crisis, these educational interruptions have caused unpreparedness.

Over the Further aggravating these difficulties is new breed of nurses hiring into critical care sectors during the pandemic. These inexperienced nurses have been under more pressure from the high-acuity settings and excessive quantity of critically sick patients, maybe affecting their job satisfaction and retention (Renkema & Gallagher, 2024). Pandemic, new breed of nurses have had major social and emotional difficulties. New breed of nurses joining the job during this period have been more likely experiencing worry, emotional strain, and worries about personal well-being (Linnea, 2022). Their stress has been exacerbated by their concern about catching the illness and passing it on to family members, therefore compromising their mental health and performance at work. The pandemic changed the social dynamics of professional contacts. The necessity of infection control strategies limits new breed of nurses' chances to ask colleagues for help, which causes isolation. Lack of mentoring and social connection could hinder their professional growth and fit into the healthcare team (Linnea, 2022).

Many of the new breed of nurses are nonetheless driven by altruism, self-fulfillment, and the goal for a demanding profession despite the difficulties. Their dedication to the nursing profession keeps driven by the influence of role models and the hope to have a significant impact in patient care (Kovner et al., 2022). The pandemic has, however, also caused some them to rethink their career objectives in light of elements including job stability, work-life balance, and chances for professional development. Retention of new breed of nurses has grown to be a major issue in the post-COVID age. Higher turnover rates among them have been caused in part by growing workloads, burnout, and insufficient support. Attenuating this trend to inadequate staffing levels, rising patient demands, and bad morale, the Royal College of Nursing (RCN) noted a notable increase of nurses leaving the field within the first five years of registration. The viability of healthcare systems depends on early-career nurses, hence their departure emphasizes the need of good retention policies. The pandemic has also influenced the future nursing pipeline. Applications for nursing programs have clearly dropped in several areas. For example, England saw a dramatic decline in nursing students; some regions saw a 40% drop in successful applications between 2020 and 2023 (Campbell, 2024). This drop accentuates

already present workforce shortages and emphasizes the need of making nursing education more interesting to future students.

Strong support systems and transition-to-- practice (TTP) programs are absolutely necessary to help new breed of nurses overcome obstacles. Among recent nurses, structured nursing residency programs have been found to raise confidence, competency, and job satisfaction (Renkema & Gallagher, 2024). To guarantee participant safety and well-being, the pandemic has, however, forced changes in these programs including virtual mentoring and modified clinical rotations. The worldwide character of the pandemic has affected patterns of nurse migration. Historically, nurses from countries like the Philippines have traveled to other countries in pursuit of greater possibilities. Emphasizing the need of laws protecting and supporting migrant nurses amid worldwide health emergencies, the pandemic has exposed the weaknesses of these nurses, both in their home countries and elsewhere (Masselink & Daniel Lee, 2022). The COVID-19 pandemic has fundamentally changed the goals and experiences of recently certified nurses. Even although many people are still dedicated to their field of work, the difficulties they encounter call for thorough support systems to guarantee their retention and professional development. Resilient and sustainable nurse workforce capable of satisfying future healthcare needs depends on addressing these challenges.

Aspirations of Newly Breed Nurses. For new breed of nurses, the change from nursing education to professional practice marks a pivotal point in their careers. Many elements influence their goals: personal motivations, educational background, professional surroundings, and changing needs of the healthcare sector. Improving nursing retention, work happiness, and the general caliber of patient treatment depends on an awareness of these goals. The new breed of nurses often hope to progress their professions by means of additional education and specialty. The shift to professional practice marks a time of great learning, adaptation, and self-discovery (Smith et al., 2021). Through certificates, postgraduate study, and specialized training programs, the new breed of nurses looks for chances for professional development. Emphasizing the value of lifelong learning in nursing, the American Association of Colleges of Nursing (2023) advises nurses toward higher degrees and ongoing education to improve their competencies. The new breed of nurses also frequently report hopes to enter leadership roles or specialty sectors including critical care, emergency nursing, and anesthesia, according a (Johnson & Taylor research, 2022). Experiences in mentoring, exposure to many clinical domains, and institutional support for professional growth all shape these goals. Offering residency programs, mentoring chances, and tuition support for additional study, hospitals and healthcare organizations significantly help to build professional aspirations (Williams & Clark, 2021).

The work environment has a major influence on the goals and paths taken by recently produced nurses. Strong leadership, good communication, and cooperative team dynamics define supportive work environments, which according to studies improve job satisfaction and retention (Lopez et al., 2023). On the other hand, severe workloads, inadequate staffing, and workplace incivility could discourage nurses from choosing long-term professions in bedside nursing (Adams & Moore, 2022). According to qualitative research by Davis et al. (2023), the new breed of nurses frequently want to work for organizations that support professional autonomy, give enough tools, and give employee well-being top priority. Absence of these elements can cause burnout in newly hired nurses, which would cause them to reevaluate their career trajectories or look for work in other healthcare environments, including administrative positions or outpatient care.

Keeping on work-life balance is becoming more and more important to the new breed of nurses. Many want to land jobs that let them juggle obligations to their families and their careers. Research by Patel et al. (2021) indicates that among nurses, job satisfaction and retention are much influenced by their work-life balance. Long shifts, required overtime, and mental tiredness add to stress and could cause nurses to look at other career options. Aspirations about work-life balance can influence choices about job locations. Many of them say they prefer flexible schedule choices like part-time employment, telemedicine nursing, or careers in less demanding specialties (Bennett & Green, 2024). Among the new breed of nurses who started their careers with prior caregiving responsibilities or other personal obligations, these inclinations are very strong.

The new breed of nurses can face obstacles that affect their paths of employment. Reality shock typically marks the change from student to professional nurse as new graduates deal with high expectations, more work,

and difficult patient care obligations (Martinez et al., 2022). Affecting their long-term work objectives, the phenomena of "transition shock" can cause emotions of inadequacy, worry, and self-doubt (Harris & Walker, 2023). By giving new nurses direction, confidence, and professional support, mentoring and organized orientation programs can help to offset these difficulties. Research indicate that first-year of practice mentoring nurses are more likely to stay in the field and achieve advanced positions (Thompson, 2024). By investing in transition-to--practice programs, hospitals and other healthcare facilities can assist close the discrepancy between clinical expectations and academic preparation, therefore preserving the hopes of recently graduated nurses.

As ambitions of the new breed of nurses are shaped in great part by institutional policies and leadership. Strong leadership helps to create a culture of support, professional development, and innovation all of which can boost motivation and job satisfaction—by means of which one can improve their. Helping recent nurses reach their professional goals depends critically on organizational support in the form of mentoring programs, career counseling, and financial incentives for ongoing education. Mitchell et al. (2024) conducted a study whereby nurses working under transformational leadership were more likely to have good career goals and stick to their companies. Transformational leaders create chances for skill development, acknowledge successes, and advocate for their well-being, so inspiring and empowering new nurses.

A complex interaction of personal motivations, professional ambitions, workplace settings, and institutional support shapes the aspirations of recently produced nurses. Many new breed of nurses want to grow in their professions by means of specialization, leadership positions, and lifelong learning. Their long-term career decisions can be influenced, nevertheless, by factors including job-life balance, transfer shock, and working environment. Healthcare facilities, teachers, and legislators must all understand these goals if they are to establish encouraging surroundings that foster the professional development of new nurses. The healthcare sector can guarantee a motivated and competent nursing workforce by tackling the obstacles they encounter and offering tools for professional growth, therefore enhancing the results of patient treatment.

Plights on Aspirations of Newly Breed Nurses. When a nurse is in the process of advancing their career, one of the most critical stages is the transition from nursing education to professional practice. This transition is generally accompanied by a mixture of excitement and considerable challenges. In the course of a nurse's career, this transition is a phase that is absolutely necessary. As they enter the profession in the healthcare industry, new breed of nurses do so with the purpose of providing patients with care of the highest possible quality, improving their careers, and making contributions that are relevant to the sector for which they are working. These are the objectives that they wish to achieve in the future. Nevertheless, in spite of these aims, individuals frequently find themselves presented with challenges that have the ability to limit their progress, increase the level of satisfaction they have, and prevent them from remaining in the industry.

The new breed of nurses encounter a number of significant problems, the most significant of which are the ability to properly manage one's time and to plan one's tasks. Under circumstances in which persons are tasked with the management of complex health care commitments in addition to administrative tasks, it is not uncommon for them to experience feelings of being overwhelmed. According to Madison (2023), excellent time management is not only necessary for protecting the health and safety of patients, but also for improving the efficiency of workflow and increasing the degree to which an individual is satisfied with their employment. Not only do a considerable proportion of new breed of nurse's battle with time constraints, but they also struggle with their confidence and their ability to carry out their various job responsibilities. When transitioning from a controlled academic atmosphere to a high-pressure clinical one, individuals may have feelings of self-doubt, asking questions about their capacity to make judgments and their talents. This can be a challenging transition for individuals. There are instances when individuals may experience these sentiments as a result of this development. Mentorship and orientation programs that have been pre-planned are absolutely necessary in order to provide assistance for this transformation (Madison, 2023!). This is due to the fact that a lack of confidence can have a detrimental effect on them, not only in terms of their levels of performance but also in terms of their capacity to advance in their professional lives.

They frequently suffer with communication, which is another area that they regularly deal with. One of the things that new breed of nurses frequently struggle with is communication. Nevertheless, despite the fact that

good communication is of the utmost value in the healthcare context, a significant number of the newly breed of nurses struggle to properly articulate patient information, particularly when engaging with multidisciplinary teams. This is especially true in situations where more than one discipline is involved. According to Madison (2023), there is a possibility that undesirable impacts could be brought about as a consequence of these issues. These adverse effects could be brought about in the areas of patient safety, team collaboration, and the overall quality of care that is offered. In addition, the stress that is brought on by one's employment is another significant factor that should be of worry. Because of the demanding nature of nursing, particularly in high-acuity settings, it is easy to experience tremendous stress. This is especially true in intensive care units. It is imperative that this stress be managed in a proper manner in order to prevent clinical burnout, which is something that should be avoided at all costs. Madison (2023) asserts that individuals who are not qualified nurses new breed of nurses are at a greater risk of suffering emotional exhaustion and job dissatisfaction if they do not have proper coping mechanisms and institutional support. Such individuals are also more likely to be dissatisfied with their jobs. This is the case due to the fact that New breed of nurses are more likely to be confronted with stressful circumstances.

Another challenge that a lot of individuals have to deal with is learning how to maintain a good equilibrium between their personal and work lives. Numerous new breed of nurses struggle to strike a healthy balance between their professional and personal lives due to a variety of variables that contribute to the difficulty they experience in doing so. The long working hours, the emotionally draining contact with patients, and the instability of the schedule are some of the variables that contribute to this. It is possible that this imbalance may have a negative affect not only on their mental health but also on their rates of work retention (Clinical24, 2023). This would be an insult to the hurt that they have already suffered. The ability to respond to these difficulties will require institutions to take preventative measures in order to give help for newly qualified nurses as they enter the workforce. This will allow the institutions to be able to provide aid.

Profile on the Plights of Newly Breed Nurses. When it comes to the new breed of nurses, the transition from nursing education to professional practice is an important phase that they must go through. This phase is marked by a variety of issues that can significantly influence their career trajectories and their ability to continue working within the healthcare system. These issues can impede their capacity to continue working. A comprehensive understanding of the demographic profile of this developing cohort is essential. This profile includes aspects such as age, gender, civil status, educational attainment, licensure timing, job status, working settings, experience duration, salary scales, and aspirations to work abroad. It is essential to have this understanding. When it comes to the process of building procedures that successfully support the new breed of nurses, having this kind of comprehension is particularly helpful. The objective of this literature study is to investigate the demographic elements that are being discussed as well as the challenges that are commonly encountered by the new breed of nurses. The findings of studies that were carried out between the years 2020 and 2025 are utilized in this compilation of information.

When it comes to workforce planning and support systems, the age at which individuals enter the nursing profession involves a variety of problems and factors that need to be taken into account. The fact that the average age of newly licensed nurses is approximately 27 years old, as indicated by data that was recently collected (Vizient, 2025), is indicative of a workforce that is significantly younger than the average age of the workforce. As a result of this demographic trend, there is a pressing need for the establishment of tailored support systems that are capable of meeting the specific needs of younger workers who are transitioning into demanding healthcare professions.

In terms of gender, the nursing profession has traditionally been dominated by women throughout its history. There are approximately 86 percent of newly licensed nurses who are female, as indicated by the most recent statistics (Vizient, 2025). In spite of the fact that this indicates that there is a gradual increase in the number of male representation, the profession is still controlled by women majority. This change contributes to a workforce that is more diverse, which has the potential to enrich the dynamics of teams as well as the ways that are adopted to provide care to patients.

In addition to the demand for healthcare and the state of the economy, there are a number of other factors that can have an impact on employment rates among new breed of nurses.. Despite the fact that a large number of

people are able to secure positions in clinical settings, there are other people who are compelled to work in non-healthcare sectors or are underemployed due to a range of issues. These issues include the conditions of their workplace as well as their level of happiness with their job (Feliciano et al., 2019). In order to ensure that the nursing profession continues to have a skilled labor force, it is imperative that these problems be acknowledged and addressed.

The Philippine Nurses Association is able to look for employment opportunities in a wide range of healthcare settings, including hospitals, clinics, and community health centers, among others. It is possible that the workplace that they choose will have an impact on both their professional development and the degree to which they are satisfied with their career. People who are working in institutions that have appropriate resources, for example, may have access to more favorable chances for aid and progress than those who are employed in settings that have inadequate resources. This is because adequate resources provide for greater opportunities for growth and assistance (Gadin, 2024).

There is a significant relationship between the quantity of money earned and the level of job satisfaction as well as the rate of employee retention. There are a significant number of nurses who are of the opinion that their pay does not appropriately reflect the quantity of labor they perform and the tasks they are responsible for. This leads to dissatisfaction with their jobs and resignations (Feliciano et al., 2019). When it comes to retaining experienced specialists, offering compensation that is competitive is an imperative must.

Nursing professionals who are looking for better opportunities and working conditions frequently have the idea that they would like to work in a different nation. This is a normal occurrence. It is because of this propensity that local healthcare systems that are experiencing a shortage of professionals are contending with problems. It is vital to address the issues that are driving migration in order to fulfill the goal of maintaining talented individuals within the population of the country (Feliciano et al., 2019). The new breed of nurses face a number of challenges and obstacles in their professional lives. They find themselves confronted with a number of challenges as they transition into professional practice, some of which include the following:

Adjustments Made to the Working Environment. One of the most common challenges that people have in the healthcare profession is the challenge of adjusting to the fast-paced and high-pressure environment that occurs there. When it comes to the responsibilities and expectations that have been placed upon them, the new breed of nurses regularly report feeling as though they are being overwhelmed (Gadin, 2024). Through the deployment of planned orientation programs and coaching, it is possible to achieve a shift that is perceived as being more seamless.

Knowledge and confidence in one's own abilities and capabilities. Notwithstanding the extensive academic preparation that they have received, it is possible for the new breed of nurses to experience a sense of unpreparedness when they are placed in clinical settings that are more representative of the real world (Gadin, 2024). This can have a detrimental effect on both their confidence and their performance. In order to build one's self-assurance and competence, it is essential to participate in continuous professional development and to be supervised by someone who is supportive.

Problems with the amount of work and the number of employees. The new breed of nurses are more likely to experience burnout and unhappiness with their jobs due to problems such as high patient-to-nurse ratios and staffing shortages (Advisory Board, 2025). It is absolutely necessary to have appropriate staffing standards in place in order to ensure that nurses are able to provide high-quality treatment while also protecting their health.

Emotional and Physical Stress. The demands of nursing can lead to significant emotional and physical stress, which can have an influence on the health of professional nurses as well as their performance on the job (Gadin, 2024). It is of the utmost importance to have access to wellness programs and other forms of aid for mental health in order to address these challenges.

The Combination of Professionalism for Integration. When it comes to healthcare, the new breed of nurses may find it challenging to establish professional ties and integrate themselves into preexisting teams. In order to achieve successful integration, it is necessary to have work environments that are supportive and that

encourage collaboration and inclusion (Gadin, 2024). For the purpose of establishing tailored strategies to support the new breed of nurses in their transition into professional practice, it is essential to have a comprehensive understanding of the demographic profile and issues faced by newly licensed nurses. It is possible to improve job satisfaction and retention among the new breed of nurses by addressing concerns related to workplace adaptation, skill competency, workload, stress, and professional integration. This will ultimately contribute to a healthcare system that is more strong and effective.

Profile on the Aspirations of Newly Breed Nurses. The aspirations that recently graduated nurses have for their professions are shaped in part by a complex interaction among demographic traits, educational experiences, and the environment in which nurses operate (Nursing in the United Kingdom, 2023). Healthcare companies first and most importantly have to have a strong awareness of these effects if they are to be successful in attracting, keeping, and supporting this vital part of the workforce. Among other demographic factors, like age, gender, educational background, and socioeconomic status, the job aspirations of the new breed of nurses are much shaped. For instance, a research conducted in the United Kingdom found that, with an average age of over forty-four years, over ninety percent of the nursing workforce was female (Nursing in the United Kingdom, 2023). This demographic distribution suggests that, in the nursing profession, gender and age could influence career trajectories and ambitions.

A research on nurses employed in major government hospitals in Cavite, Philippines, revealed in the International Journal of Research Publication and Reviews, 2024 that 56.7% of them were married and 62.7% of them fell between the ages of 30 and 39. Particularly with regard to the balance of work and family obligations, the above-mentioned demographic traits could affect the career aspirations of nurses. Age have a major impact on nurses' views of their professional responsibilities and goals. The results of a research done in Malaysia by Arsat et al. (2023) show that the caring activities shown by nurses were much influenced by demographic elements like age and experience. In the field of nursing, career goals are still much influenced by gender. The fact that women constitute the majority of the workforce could influence the dynamics of leadership and chances for development. Policies that are inclusive and assist in the development of leadership among people of both sexes will help to address gender-related goals.

Societal problems including money and obligations toward their family could affect a person's employment objectives. For nurses from poorer socioeconomic backgrounds, the stability of their positions and their immediate salaries could be more crucial than the long-term career development. Having a strong awareness of these problems is quite essential when developing support systems that remove financial obstacles to professional development. Whether or not recently minted nurses are ready for the workforce depends in part on demographic considerations. Problem-based and reflective learning were found to increase students' confidence in their capacity to think critically and independently, all of which are required for preparedness for practice, according to Al Mekkowitz and El Khalil's (2020) narrative literature review. Many demographic variables, including age and educational background, could affect how well certain educational policies and practices work. The worldwide need for nurses has led to an increase in migration, which influences professional goals. (A Global Survey on Filipino Nurses' incentives, challenges, and Aspirations, 2024). Research on Filipino nurses who desired to work overseas highlighted the challenges they faced—including cultural changes—as well as the rewards they had, like more employment opportunities. Among their several traits, demographic factors like age and marital status affected these goals and experiences. Demographic elements play a major influence on the objectives of newly graduated nurses. One must have a strong awareness of these traits in order to create targeted plans to support job happiness and professional development. Future research should be carried out to keep exploring these dynamics and affect policies and practices that support all nurses by means of a conducive environment.

RESEARCH METHODOLOGY

Design. This mixed method research design utilized the explanatory sequential design where the quantitative design utilized the descriptive, correlational research design and the descriptive qualitative design was used. The quantitative research made use of the descriptive, correlational research design. The descriptive design will be used to determine the profile, plights and aspirations of the nurses. The correlational design will be used to assess the relationship among profile, plights and aspirations of the nurses. The descriptive qualitative

design will be used also in the study. This will be used to explore the experiences on the plights and aspirations of the nurses. This will be done to further explain a set of quantitative data with additional qualitative information.

Environment. This study will be conducted in three selected hospitals , a school clinic and a dialysis center located in Maasin City, Southern Leyte. These centers will serve as the primary environment for the research, as they employ the new breed of nurses in various clinical roles. The selected health care centers represent both public and private healthcare institutions within the city, providing a relevant setting to observe and understand the early professional experiences of new nursing graduates.

Participants

Quantitative. This study's participants for quantitative survey are 42 recently hired nurses from Maasin working for different healthcare facilities—public and commercial sectors included.

Quantitative. For the qualitative data collection in a form of interview a systematic proportional stratified sampling will be done for the 10 participants for the qualitative interview in which they are all coming from the 42 participants who also take the qualitative survey.

Sampling Design

Quantitative- No sampling will take place for the quantitative data collection ; selection will be based on total enumeration. Every person that qualifies the inclusion and exclusion requirements will be requested to take part in the study by thorough counting.

Qualitative- For the qualitative data collection through interview , the research will use proportional stratified sampling to provide a fair participation from several institutions. It is reasonable to choose four respondents from Hospital A, a public hospital since 42.86% of the total 42 participants come from this establishment. Two interviews from each of the two private institutions, Hospital B and Hospital C, each account for 23.81% of the overall sample and are therefore chosen. While the school clinic, comprising 2.38% of the total, will also give one interviewee, the renal clinic, which accounts for 7.14% of the participants, will contribute one interviewee. This proportionate distribution guarantees that the chosen ten interviews fairly represent the general composition for the qualitative segment.

Inclusion Criteria

Quantitative. The study will include nurses who meet the following criteria: Must be a newly licensed nurse who entered the workforce within the last two years. Must be currently employed in one of the selected hospitals in Maasin City at the time of data collection. Must be willing to voluntarily participate and provide informed consent.

Qualitative. From the 42 respondents taking the survey, using proportional stratified sampling , 10 participants, with the use of draw by lots, will be invited for the qualitative part of the study which is the interview, respondents must be able to articulate their experiences and insights clearly and be available for an in-depth interview. With their consent , a voice recording will be used to accurately harvest the information.

Exclusion Criteria

Quantitative. Individuals who are currently employed in non-clinical or administrative positions that do not directly involve patient care but possess a nursing license are excluded from the study. Are employed on a contractual, part-time, or job-order basis, with irregular work schedules that may restrict consistent exposure to the hospital environment. Are currently under probationary review or disciplinary action at the time of data collection. Demonstrate indicators of emotional distress, exhaustion, or other conditions that may hinder their capacity to participate in the study in an objective and comfortable manner, as determined during the

initial screening. Have participated in a comparable study within the past six months, which may have influenced their responses or perspectives.

Qualitative. In the event that interviews are conducted, individuals who demonstrate signs of emotional distress, exhaustion, or any other condition that may impair their ability to participate in the study objectively and comfortably will be excluded. This will be evaluated while conducting the initial interview assessment. Additionally, the qualitative component of the study will exclude nurses whose current professional circumstances—such as being in a non-clinical role or having an irregular work schedule—may impede their capacity to offer meaningful, in-depth insights into clinical experiences. These nurses will be excluded.

Instrument. The study will make use of a Four-part instrument. First 3 parts are for the quantitative data collection that uses survey format to be followed by interview question guide which will be used for the qualitative data collection.

Quantitative. Part one of the instrument is the personal characteristics of the respondents. Part two is a ten-item, modified from MBI-Human Services Survey for Medical Personnel - MBI-HSS (MP): The MBI-HSS (MP) is derived from the Human Services Survey specifically for Medical Personnel. Ten statements on a five-point Likert scale make up the poll; 1 No Impact and five denotes Severe Impact. If a responder chooses Severe Impact for all questions, the survey's highest possible score-50—indicates extreme difficulties in many facets of nursing, including burnout, stress, and job discontent. On the other hand, the lowest potential score is 10 (should a respondent choose no impact for all the claims), implying little difficulties and generally good professional experiences. A higher total score indicates more difficulties and possible discontent with the nursing profession; a lower score suggests less challenges and better coping strategies. With a reported alpha of 0.89, the Revised Nursing Job Stress Scale proves dependability in gauging occupational stress among nurses. Likewise, Cronbach's alpha values for the Nurses' Professional Growth and Development Scale and the Career Aspirations Scale (CAS) range from 0.78 to above 0.80, so proving their dependability in evaluating career-related motives.

For the third segment, a seven-item The Career Aspirations Scale (CAS), originally developed by Gregor & O'Brien (2015). The poll measures ambitions including dedication to nursing, pursuit of higher education, specialization, leadership roles, research engagement, and career transitions using a 5-point Likert scale (1 – Not at All to 5 – Very Great Extent). A respondent choosing 5 – Very Great Extent for all seven items will have the highest possible survey score—35; the lowest possible score is 7, should they choose 1 – No at all for all seven items. Strong career aspirations, a dedication to professional development, and a proactive approach to rising in nursing through specialty, leadership, research, or more education define a high score—28–35. A moderate score (15–27) indicates mixed aspirations, in which the respondent may be unsure or selective about possibilities for career growth, expressing interest in some but not committed in others. A low score (7–14) on the other hand indicates limited career aspirations, perhaps discontent, or resistance to follow more professional growth.

Qualitative. The qualitative questions in the Thematic Analysis of Nursing Retention Factors probe many facets of nurses' Philippine experiences. First, nurses are asked to discuss certain events when they felt overburdened at work, therefore analyzing the emotional and professional effects of such circumstances. Notwithstanding these obstacles, the questions probe what drives nurses to remain in their field of work—such as a feeling of purpose or chances for professional development. Salary, job circumstances, and career opportunities all affect whether one chooses to migrate or stay in the Philippines. Furthermore connected to nurses' job happiness are management support and workplace policies, which can increase or decrease their sense of fulfillment.

Given many nurses pursue development in specialized skills and leadership roles, the need of improved training and development opportunities is underlined. Additionally questioned about their career goals are nurses, who see their professional destiny over the next five years. Examined is advocacy for improved working conditions and nurses' rights; many have shared their experiences raising issues regarding fair compensation and enough staffing. The future of nursing in the Philippines is examined in terms of both possibilities—such as legislative reform—and difficulties including understaffing and migration. Finally,

nurses are questioned about their future plans and how elements like work stability, pay, and healthcare changes affect their perspective of the direction of the vocation.

Data Gathering Procedure. The researcher will first have three separate research titles sent for approval. The next action will be the choice of a research adviser following the acceptance of the title. Following this will be a design hearing to assess, technically, the suitability of the paper. The article will subsequently be sent to the ethics committees of the university and the hospital for assessment of ethical soundness. A notice to continue will be needed before the recruitment process starts. Following the issuance of a notice to proceed, the recruiting of the initial respondent begins. Participants will be recruited through direct, face-to-face interaction. Participants will be enlisted prior to or following their shifts or during their recess or break time. Given the in-person format of the recruiting, strict compliance with health regulations will be mandated. Mask utilization, social distancing, and sanitation measures will be enforced as needed. The questionnaire shall be placed in a plastic envelope for ease of sanitization before to distribution and during the collecting of completed questionnaires. This procedure will be executed iteratively until the requisite sample size is achieved. Using proportional stratified sampling 10 respondents from the total number of respondents from five health centers are invited for a 10-15 minute face to face interview for an interview in a cafeteria of the health center they're currently working or in a quiet office with privacy. Upon completion of the sample size, all data will be aggregated and tabulated using Excel. Data will undergo suitable statistical analysis and will be displayed in tabular format. The tables will include their corresponding interpretations, consequences, and relevant literature and studies. Following interview-based qualitative data collecting, the researcher transcribes and arranges the material using coding and thematic analysis to spot important trends. Member-checking and triangulation are among data validation techniques used to guarantee accuracy. Especially in an explanatory sequential study, the data are then analyzed and combined with quantitative ones. Before concluding the report, which comprises of debates, conclusions, and suggestions based on the examined data, peer review or expert assistance could be sought to improve interpretations. Upon completion of the data analysis, all completed surveys will be shredded, and all raw data will be irrevocably lost.

Statistical Treatment of Data. The following Descriptive and inferential statistics will be used in the study: (a) Frequency Distribution and Simple Percentage. This will be used to present the data on the profile of the nurses. (b) Mean Score and Standard Deviation. This will be used in determining the plights and aspirations of the nurses. (c) Chi Square. This will be used to assess the significant relationship between the profile and plights and aspirations of the of the nurses. Cramer's V. This will be used to find out the strength of the relationship should there be a relationship using the chi square. Pearson's r a way to determine whether if there is no association between the two variables.

Data Analysis. The researcher transcribes and arranges the material using coding and thematic analysis to spot important trends.

Ethical Considerations. The study will be submitted for ethical approval for both the university and the hospital. See the appendices for the ethical considerations.

Presentation, Analysis, And Interpretation of Data

Table 1 Demographic Profile of the Respondents

Personal Characteristics	<i>f</i>	%
Age		
23 years old	22	52.40
24 years old	5	11.90
25 years old	11	26.20
26 years old and above	4	9.50
Gender		

Male	8	19.00
Female	34	81.00
Current employment status		
Contractual	21	50.00
Job Order	1	2.40
Probationary	6	14.30
Regular	14	33.30
Type of healthcare institution		
Clinic	4	9.50
Hospital	38	90.50
Monthly income		
< Php 15,000	5	11.90
Php 15,000 – 25,000	37	88.10
Plans to work abroad		
No	3	7.10
Yes	39	92.90

Note: $n=42$.

The study participants are predominantly young, suggesting they are early-career nurses who have recently transitioned into the healthcare workforce. This aligns with national patterns in the Philippines where a significant influx of newly licensed nurses enters the profession annually. According to de Castro et al. (2021), this early phase is characterized by optimism, yet often accompanied by disillusionment when confronted with the realities of workplace conditions, limited advancement, and systemic inequities.

Most respondents identify as female, reflecting the gendered nature of nursing as a profession. This has implications for workplace dynamics and underscores the need for gender-sensitive policies, particularly around support systems, leadership opportunities, and work-life balance, as emphasized in the World Health Organization's (2020) global report on nursing.

Employment status data reveals that a substantial portion of nurses are in non-regular roles either contractual, job order, or probationary which may lead to instability and reduced motivation. Such employment arrangements often correlate with restricted access to benefits and training, contributing to low job satisfaction and high turnover intentions (Pajo & Co, 2021). This insecure footing also weakens their long-term commitment to the local health system.

Nearly all respondents are employed in hospital settings, suggesting exposure to high patient loads and intense clinical demands. While hospitals offer essential hands-on experience, they can also be high-stress environments that contribute to emotional exhaustion and burnout, especially when support mechanisms are lacking (Galan et al., 2022).

In terms of financial compensation, most nurses earn modest salaries that may not align with the physical and emotional demands of their work. This economic concern is a recurring push factor behind the strong intention to seek employment overseas. The overwhelming aspiration to work abroad reaffirms what Lorenzo et al. (2023) describe as a persistent outflow of Filipino nurses who feel undervalued in their home country.

Table 2 Plights of the New Breed Nurses

Level of plights	Average score	<i>f</i>	%
less challenges and better coping strategies	0.00	0	0.00
has challenges and low coping strategies	23.50	4	9.52
Moderate difficulties and challenges and discontent	32.10	10	23.81
has difficulties and less discontent	38.04	24	57.14
more difficulties and possible discontent	45.50	4	9.52
Average Score	35.95	Has difficulties and less discontent	

Note: $n=42$.

Legend: A score of 10 to 18 is less challenges and better coping strategies, 19 to 26 is has challenges and low coping strategies, 27 to 34 is Moderate difficulties and challenges and discontent, 35 to 42 us has difficulties and less discontent, and 43 to 50 is more difficulties and possible discontent

The results paint a clear picture every newly licensed nurse in this study reported facing challenges in their early clinical roles. Not a single one identified as having minimal problems or strong coping skills. This reflects what many frontline observations confirm: new nurses are often placed in high-pressure environments like emergency rooms or critical care units with very little guidance. They are expected to perform immediately, sometimes with full patient loads and without senior support. It's no surprise, then, that none of them feel they're having an "easy" start. Among the participants, a small group struggled not only with heavy workloads and emotional strain but also with weak coping mechanisms. These are the nurses most at risk of burnout. In the hospital setting, they're often the ones seen staying late trying to catch up on documentation, crying quietly in break rooms, or hesitating to ask for help out of fear of being judged. These signs echo what Galan et al. (2022) described as early professional distress, which can quickly turn into emotional fatigue if support is lacking.

Another portion of nurses reported moderate levels of difficulty along with clear signs of frustration. This group may not be collapsing under the pressure, but they're already feeling worn down. They're the ones who may show up every day, do their tasks, and go home but deep down, they're questioning if this is what they signed up for. Cruz and Salazar (2020) described this phase as emotional detachment, where nurses begin to lose their sense of connection to the profession, they once felt passionate about. The largest group, however, revealed a more balanced response. They are experiencing a tough reality, but they are not deeply dissatisfied yet. These are the resilient ones, holding on because they see the bigger picture. They draw strength from their families, personal goals, or the idea of gaining enough experience to move abroad or enter graduate school. From personal field experiences, these nurses are often the quiet workers who keep pushing, not because things are easy, but because they have no choice but to stay hopeful. Lorenzo et al. (2023) referred to this as "delayed fulfillment," where the present is endured in exchange for imagined future success.

A small but equally important group expressed serious challenges with growing discontent. These nurses are at a crossroads. They may not have left their jobs yet, but they are beginning to consider it. They show signs of withdrawal, disinterest, or even resentment toward their roles. These are the nurses who, if not seen and supported, could quietly leave the profession altogether. Labrague and Ballad (2021) found that when emotional strain is not matched with appropriate institutional support, nurses are more likely to mentally detach or resign. The overall picture reflects a health system that puts a heavy load on its newest members without adequately preparing or supporting them. Their stories highlight that while they come into the profession full of idealism, reality hits hard—and often too fast. From the standpoint of practical implications,

it's clear that the early months of practice are a vulnerable period. The lack of structured mentoring, emotional guidance, and realistic onboarding contributes to this fragile adjustment stage. Importantly, these findings suggest that many nurses don't necessarily give up in the face of hardship but how long they stay or how well they grow depends heavily on what support systems are available. As Wichaikhum et al. (2021) emphasized, resilience is not just a personal trait; it also depends on the organizational culture and resources provided. When support is absent, even the most dedicated nurse may eventually break.

The quantitative data (Table 2) revealed four distinct categories of plights experienced by newly licensed nurses, with most respondents falling under "has difficulties and less discontent." Below, qualitative themes are grouped to match these quantitative categories, offering deeper insight into the patterns observed.

Level of plights: Has Challenges and Low Coping Strategies. These nurses reported significant stressors alongside difficulty in coping effectively, showing signs of strain with limited internal or external support.

Emotional Turmoil and Mental Unreadiness. Nurses in this group expressed psychological distress due to early exposure to trauma and sudden responsibility. Lacking emotional readiness, they described situations that induced helplessness and anxiety, such as witnessing preventable deaths or taking full accountability without supervision.

The transition from student to nurse was accompanied by deep emotional strain, particularly when nurses encountered traumatic cases early in their careers. Several participants recounted stories of witnessing preventable deaths due to financial barriers or system limitations. One nurse admitted,

"I wasn't prepared for how heartbreaking some situations could be like seeing patient pass away because they couldn't afford to be transferred to another hospital." (Hany ,L2)

This emotional unpreparedness was compounded by the loss of the academic safety net. Another participant stated,

"Back in school, I had my clinical instructor to rely on. In the real world, I suddenly had to take full responsibility for my actions. It felt overwhelming."(Zack,L3)

These accounts underscore the emotional turbulence that characterizes the early nursing years, where new professionals must adapt rapidly not only to tasks but to existential and ethical realities. As supported by Numminen et al. (2020), such experiences without appropriate psychological preparation can hinder a nurse's adaptation and increase early burnout. This theme suggests the need for nursing curricula to include emotional resilience and ethics training tailored for real-world demands.

Level of Plight: Moderate Difficulties and Challenges and Discontent. This group experienced considerable challenges and also showed dissatisfaction with aspects of their working conditions or support systems.

Overwhelming Clinical Expectations. These nurses shared narratives of abrupt immersion into high-stakes clinical roles with minimal preparation, leading to emotional destabilization and performance anxiety. Newly licensed nurses described their early clinical experiences as intense, exhausting, and far beyond what they had imagined during their academic preparation. Most commonly, participants shared how they were immediately assigned to critical areas, managing multiple patients, medications, and documentation tasks under pressure. For some, the workload was not only physically draining but emotionally destabilizing. As one respondent explained,

"Handling medications for multiple patients, following doctors' orders, and updating numerous charts can be overwhelming. I constantly worry about making mistakes." (Juan ,L1-L2)

Another participant revealed how the absence of supervision at night amplified their anxiety:

"Working night shifts alone was one of the toughest parts. As a new graduate, having to make critical decisions without a doctor around was really scary." (Maria ,L1-L2)

These descriptions reflect the sudden immersion into real-world responsibilities and the pressure to perform flawlessly with little guidance. According to Deasy et al. (2021), early exposure to high-stakes tasks without adequate preparation contributes to stress and attrition among novice nurses. The implication is clear: hospitals must reexamine deployment practices to better align them with readiness and safety.

Unmet Support Needs in the System. Discontent stemmed from poor institutional support: lack of communication, resource constraints, and supervisors who were inconsistently helpful. This aligns with dissatisfaction noted in the survey results. Although nurses appreciated peer support, many felt neglected by their institutions. Respondents expressed frustration over lack of communication, supply issues, and inconsistent supervisory presence. One nurse stated,

"Management seems unaware of how short-staffed we really are." (Juan, L 3)

Another said,

"We find out about policy shifts through Facebook or tsismis." (Jo,L2))

"Supervisors are helpful sometimes, but other times they make you feel like your problem isn't theirs." (Remy, L1)

These sentiments suggest organizational deficits that impede nurse effectiveness and morale. Consistent with Labrague et al. (2022), nurses who perceive weak administrative support are more prone to job dissatisfaction and early exit. Addressing these systemic weaknesses is essential to build a culture of inclusion and accountability.

Level of Plight : Has Difficulties and Less Discontent. The majority of respondents fell into this category facing notable hardships but showing signs of coping, likely due to purpose, peer support, and internal motivation.

Anchors of Motivation. Despite their burdens, these nurses derived strength from helping patients, peer solidarity, and the affirmation of their professional role.

Despite the adversities, participants highlighted what kept them going: purpose, peer support, and patient outcomes. Many nurses anchored their motivation in the lives they touched and saved. As one shared,

"Even on the toughest days, saving lives and seeing patients stabilize keeps me going. It reminds me why I chose this profession." (Juan ,L1)

Others found solace in their team:

"Support from my coworkers helps me stay grounded. We help each other during toxic shifts. I never feel like I'm struggling alone." (Maria, L 3)

This social connection, combined with small affirmations from patients, seemed to sustain morale. These lived experiences portray the human side of nursing, where personal mission and collective support provide meaning amid chaos. These findings resonate with Karaca & Dicle (2022), who emphasized that a strong support system and professional identity play pivotal roles in nurse retention. The implication is that fostering a positive team culture and recognizing small successes may help buffer the effects of high stress environments.

Everyday Coping Mechanisms. Participants described how they engaged in personal rituals or family interactions to decompress. Though informal, these strategies enabled them to maintain functionality and emotional balance. Participants used various personal strategies to decompress after high-pressure shifts. These ranged from digital distractions to family bonding and simple rituals. One respondent shared,

"I binge-watch K-dramas after duty. Super effective pang-reset." (Juan ,L3)

Another said, "I talk to my mom. Just hearing her say, 'Kaya mo 'yan, anak,' reminds me why I'm doing this." (Maria, L1)

This adaptive behavior reflects the informal mental health practices common among young nurses. As noted by Molina-Mula et al. (2020), nurses develop unique, often creative self-care routines when formal wellness resources are unavailable. While these strategies are helpful, they also highlight the need for accessible and structured institutional mental health support.

Level of Plight: More Difficulties and Possible Discontent. This small group appears to be nearing or experiencing burnout, expressing critical dissatisfaction and concern about long-term sustainability in the profession.

Voices for Change. These nurses provided detailed suggestions for system improvement, reflecting accumulated frustrations with staffing, equipment, communication, and support services. Their desire for change stems from persistent discontent and systemic barriers that obstruct performance and morale. Most participants offered thoughtful suggestions on how their conditions could be improved. These included basic changes like increasing staff, improving rotation clarity, or ensuring equipment functionality.

"Just one more nurse per shift would make a world of difference," said one. (Juan, L1)

Others asked for better internet, working air-conditioning, and consistent transport support. Some called for administrative transparency and training for patient companions:

"I'd train our watchers properly. They panic over everything and just stress us more." (Hany, L1)

These proposals reflect frontline insight into workplace inefficiencies. They echo the findings of He et al. (2022), who argue that participative management where nurses' voices shape operations correlates with higher team satisfaction and lower turnover. Recognizing and integrating these voices is key to sustainable workforce development.

This phenomenological narrative captures the essence of the lived experiences of newly licensed nurses, who navigate their formative years in a complex web of clinical, emotional, and organizational challenges. Their voices reflect both vulnerability and resilience, and their reflections demand both empathy and action from nursing leaders and institutions.

The Hope vs. Burnout Dilemma. For some, hope is fading as they feel trapped in unchanging toxic environments. This group echoes early warning signs for attrition if unresolved.

Participants often balanced hope with apprehension. Some believed they would eventually adapt, while others viewed their struggles as enduring.

"I think once I get more used to the system, I'll learn to handle the stress and fast pace better." (Juan, L2)

"Our toxic shifting schedule honestly feels permanent. But I'm still hoping management will make changes." (Jose, L1)

This fluctuation between resilience and doubt reveals an internal conflict. A study by Al Maqbali et al. (2021) underscores that chronic stress and inconsistent institutional responses contribute to nurse burnout despite their initial optimism. Implicit here is the urgent need to promote psychological safety, which allows new nurses to voice concerns without fear of dismissal.

The results from the survey showed that most newly licensed nurses are facing real difficulties in their jobs, but many are still doing their best to cope in their own ways. More than half of the participants fell under the category of "has difficulties and less discontent," which means they are experiencing challenges but not to the

point of losing motivation or satisfaction. A few nurses showed lower coping abilities, while some expressed higher levels of discontent, which could be signs of early burnout or frustration. To better understand what these numbers mean, the researchers looked at the personal stories shared during interviews, which added more depth and helped explain the survey data.

For instance, those with low coping shared experiences of emotional and mental struggle. Many were caught off guard by the intense workload, lack of supervision, and emotionally heavy cases they encountered right after graduation. Some admitted feeling lost and unprepared when left to make critical decisions in high pressure situations. These stories explain why they scored low in coping they were still adjusting and lacked the tools, guidance, and emotional support to manage the stress. This echoes the findings of Deasy et al. (2021), who observed that early exposure to high-acuity tasks without enough training often leads to anxiety and turnover among novice nurses.

Nurses who had moderate difficulties and some discontent shared how they were placed in critical areas like the ER or ICU without proper orientation. They also experienced poor communication from supervisors, lack of feedback, and feelings of being undervalued. These kinds of workplace issues are common in many hospitals, where staffing shortages and administrative gaps leave new nurses overwhelmed and unsupported. Their stories help explain their moderate levels of discontent these were not isolated issues but signs of deeper organizational problems. Labrague et al. (2022) also found that weak supervisory support and unclear communication increase job stress and dissatisfaction, especially among young nurses trying to adjust to their new roles.

On the other hand, the largest group those who had difficulties but were not overly discontented described more balanced experiences. They admitted the job was tough, but they found motivation in helping patients, bonding with peers, and receiving small but meaningful affirmations like a thank-you from a patient. Many relied on simple ways to cope, like watching shows, talking to family, or joking with coworkers. These small acts of self care and social connection played a big role in helping them push through tough shifts. According to Karaca and Dicle (2022), strong peer relationships and a sense of purpose can protect new nurses from emotional exhaustion and help them stay in the profession.

A small group of nurses expressed high levels of difficulty and discontent, and their stories reflected burnout, hopelessness, and a desire for system change. They mentioned how exhausting it was to work short-staffed, how equipment issues made tasks harder, and how management often ignored their concerns. These nurses felt unheard and unappreciated. If left unaddressed, their struggles could lead to early resignation or migration. A study by Al Maqbali et al. (2021) showed that long-term stress, when combined with lack of support, strongly increases the risk of burnout and attrition among hospital nurses.

These findings have serious implications. Based on real life hospital settings, it's common to see new nurses struggling to adjust, especially when placed in high-risk units without proper training. Many are expected to "just learn on the job" and are left alone on night shifts with little to no guidance. From experience, some new nurses even cry in locker rooms or think about quitting after only a few months. Yet, they continue to show up because they still believe in their role. This speaks to their resilience but also points to how the system is falling short. Hospitals need to do more than just assign duties they need to invest in mentorship programs, provide emotional support, and ensure realistic workloads for new nurses. Institutions should also consider onboarding programs, regular check-ins, and mental health resources that are accessible and stigma-free.

As Lorenzo et al. (2023) noted, many Filipino nurses endure difficult local conditions while keeping their eyes on long-term goals, such as working abroad or advancing their careers. However, the constant strain without proper support can push them to leave early or lose their passion. Cruz and Salazar (2020) described this as "emotional disconnection," where nurses mentally detach from their work just to survive it. This shows that without meaningful change in workplace culture, the cycle of burnout and turnover will continue.

In summary, the stories shared by new nurses gave life to the numbers gathered in the survey. The combination of both sets of data shows that while most new nurses are doing their best to adjust, many are struggling silently. The findings highlight the importance of creating a supportive, safe, and structured environment

where they can thrive not just survive. By listening to their lived experiences and making real improvements in practice, healthcare institutions can not only help new nurses cope but also build a stronger and more committed nursing workforce.

Table 3 Aspirations of the New Breed of Nurses

Level of aspirations	Average score	<i>f</i>	%
High	29.32	19	45.24
Moderate	24.00	23	54.76
Low	0.00	0	0.00
Average Score	26.40	Moderate	

Note: $n=42$.

Legend: A score of 28 to 35 is High, 15 to 27 is Moderate, and 7 to 14 is Low.

The findings show that all newly licensed nurses have either moderate or high aspirations for their future in the nursing profession. Most of them still aim to grow in their careers whether by studying further, specializing in certain fields, working abroad, or taking on leadership roles. None of the respondents showed low levels of aspiration, which means that despite the challenges they are currently facing, they still have strong hopes and plans for their future. In real life settings, many new nurses talk about taking the NCLEX or applying for work abroad. Others are already saving money or looking into scholarships for master's or doctoral degrees. Some show interest in becoming nurse educators, researchers, or managers. Their responses in the questionnaire also showed a clear interest in specializing in areas like critical care, pediatrics, or emergency nursing. These stories support the study by Lorenzo et al. (2023), which found that most Filipino nurses stay motivated by thinking about better career options here or abroad.

However, some nurses who fall under the “moderate” level of aspiration may be facing limitations like not having enough money, time, or support from their workplace to reach their goals. In hospitals, it's common to hear new nurses say they want to study more or get promoted but can't because of their workload or because opportunities are limited. As de Castro et al. (2021) noted, even if nurses want to improve themselves, their plans may be delayed by their current work situation. Overall, these findings show that new nurses still have big dreams, but they may need help and support to achieve them. While some are already working toward their goals, others are unsure how to start. It's important for hospitals and schools to recognize these goals and make space for growth because when nurses feel supported in their plans, they are more likely to stay, grow, and serve better.

The survey results showed that all newly licensed nurses had either moderate or high aspirations. This means that despite the challenges they face, none of them lost hope for their future in nursing. The interviews helped explain why these nurses felt the way they did and what fuels or limits their dreams.

Nurses with High level of aspirations. These nurses are highly motivated and actively working toward their goals. Many of them talked about further studies, getting certifications, becoming nurse leaders, or working abroad. Themes that match this level are :

Aspiring Toward Professional Growth and Specialization. These nurses have clear goals, like finishing graduate studies, working in specialized areas (e.g., ICU, ER), or gaining experience overseas. They believe that growing professionally will make them more effective and respected nurses. Their strong focus on education and career growth helps explain their high scores in the survey.

Many newly licensed nurses articulated aspirations focused on career advancement through continuing education, specialization, leadership roles, and international experience. These goals were seen not only as

personal ambitions but as means to enhance their effectiveness and competence in clinical practice. Juan , L1 shared,

“Right now, I just want to finish my master’s degree and maybe try applying abroad,”

while Zack,L1 stated,

“I will become a more competent nurse with certifications in specialties.”

The drive for academic and clinical growth underscores a vision of career success anchored in professional excellence. According to Kim and Park (2021), such aspirations are strongly linked to job satisfaction and long-term retention among nurses.

Aspirations Toward Community Impact and Health System Improvement. Some nurses also expressed dreams beyond personal success. They talked about wanting to improve healthcare in poor communities or help fix issues in the health system. These goals show that their aspirations are not just about themselves but about making a real difference.

A significant number of nurses expressed aspirations grounded in service to underserved communities and a desire to contribute to reforms in the healthcare system. Albert ,L1 shared,

“Daghan kaayong buntis sa barangay... so I want to assist more properly,”

reflecting a commitment to improving maternal care. Others like Handy, L2 voiced broader aims such as

“Enhancing the health systems... guaranteeing better working conditions for nurses.”

These aspirations reveal a moral and civic dimension to nursing, where personal goals align with social advocacy. As Lim and Enriquez (2022) emphasized, nurse involvement in policy and community programs fosters inclusive healthcare systems.

Support Systems as Drivers of Aspirational Growth. Having good mentors and strong support from friends and family helped boost their confidence and made their goals feel more reachable. Some even shared how senior nurses inspired them, and how friends shared learning resources. These positive influences likely helped them keep their aspirations high.

Support from mentors, colleagues, and family emerged as central to sustaining nurses’ career aspirations. Jose , L1 noted,

“The senior nurses here are like kuyas and ates... that stuck with me,”

while Remy appreciated peer dynamics:

“Friends and I share links to free webinars... murag barkada nga academic din.”

Family members also provided encouragement and resources, with Maria L1 stating,

“My family is my biggest cheerleader... They help me budget for trainings.”

The impact of a supportive environment is well-documented in Yu and Dizon (2020), who noted that mentorship and social networks strengthen professional identity and persistence in early-career nurses.

Redefining Career Success Through Personal Meaning and Balance. Not all high aspiration nurses were focused on titles or positions. Some simply wanted to become stronger emotionally or to stay in the job they love without burning out. They redefined success in a way that gives them purpose and helps them stay committed.

For some nurses, success was redefined not by title or salary but by emotional resilience, patient impact, and personal alignment. Hany shared,

“My goal is to be emotionally tougher... working on that pa,”

while Xian, L1 said,

“I just want to last... find a rhythm that lets me love this job.”

The desire for work-life balance, emotional strength, and authenticity was evident. Jo, L1 added,

“I want to be the kind of nurse nga patients remember... because they felt heard.”

These reflections align with Bautista and Llamas (2023), who emphasized that purpose-driven career planning supports retention and holistic well-being.

These thematic findings portray a resilient and forward-looking cohort of nurses whose aspirations are deeply intertwined with both internal motivations and external challenges. Their lived experiences illustrate that the

pathway to professional fulfillment is often nonlinear shaped by passion, persistence, and the systems in which they work. Institutions that acknowledge and support these aspirations are more likely to retain, empower, and grow a committed nursing workforce.

Nurses with Moderate level of Aspirations. This group still has goals, but they are facing more limitations—like money problems, time constraints, or workplace pressure. Their dreams are real, but harder to pursue.

Struggles and Sacrifices Amidst Aspiration. Many of these nurses said they wanted to study or specialize, but couldn't afford tuition or didn't have enough time because of their hectic shifts. Some even said their current goal was just to survive their duty. This helps explain why their aspiration scores were only moderate they still had dreams but were unsure how to achieve them.

Despite their strong ambitions, many participants disclosed financial, logistical, and emotional challenges that delay or hinder the realization of their goals. Juan, L1 confessed,

"Honestly? Financial jud. I want to specialize... pero walay budget,"

while Jose, L3 remarked,

"Grabe jud ka-busy sa duty... I miss my online classes."

Some even shared that their immediate aspiration was simply to survive each shift. These struggles highlight the tension between vision and viability. Literature by Mercado and Velez (2021) and Lozano et al. (2023) corroborates that financial strain and scheduling rigidity are significant barriers to continuing education and career progression among Filipino nurses.

Support Systems as Drivers of Aspirational Growth. For some nurses in this group, having friends or family who encouraged them kept their goals alive even if they were struggling. But those with less support found it harder to stay motivated, which could explain why they weren't aiming higher just yet.

Redefining Career Success Through Personal Meaning and Balance. Just like the high-aspiration group, some moderate-aspiration nurses saw success differently. They focused more on lasting in the profession and finding peace at work rather than chasing promotions. These nurses may not aim for bigger titles right now, but they still value their work deeply.

For some nurses, success was redefined not by title or salary but by emotional resilience, patient impact, and personal alignment. Hany shared,

"My goal is to be emotionally tougher... working on that pa,"

while Xian, L1 said,

"I just want to last... find a rhythm that lets me love this job."

The desire for work-life balance, emotional strength, and authenticity was evident. Jo, L1 added,

"I want to be the kind of nurse nga patients remember... because they felt heard."

These reflections align with Bautista and Llamas (2023), who emphasized that purpose-driven career planning supports retention and holistic well-being.

These thematic findings portray a resilient and forward-looking cohort of nurses whose aspirations are deeply intertwined with both internal motivations and external challenges. Their lived experiences illustrate that the pathway to professional fulfillment is often nonlinear shaped by passion, persistence, and the systems in which they work. Institutions that acknowledge and support these aspirations are more likely to retain, empower, and grow a committed nursing workforce.

The results of the survey showed that all newly licensed nurses in this study had either moderate or high levels of aspiration. This indicates that despite the challenges they face in their current roles, they still hold on to hopes of advancing their careers. Many shared dreams of working abroad, pursuing graduate studies, specializing in critical care or emergency nursing, or eventually becoming educators or leaders in the field. Interestingly, none of the respondents fell under the low aspiration category, suggesting that new nurses still see nursing as a meaningful and promising profession, even if they face limitations at the moment.

The qualitative interviews helped explain the reasons behind these aspiration levels. Nurses with high aspirations shared clear goals and an active drive to pursue them. They talked about taking graduate school

entrance exams, joining specialty training programs, or saving up for NCLEX reviews to work abroad. These nurses were often supported by mentors, coworkers, or family members, who encouraged them and sometimes helped them financially or emotionally. Some nurses were even motivated by a deeper purpose wanting to serve underserved communities or be part of healthcare reform. On the other hand, those with moderate aspirations also had ambitions, but many felt stuck. They wanted to grow but were limited by financial concerns, lack of time due to heavy workloads, or lack of access to opportunities. Some shared that they had to put their dreams on hold just to survive the demands of everyday duty. These stories help explain the difference in aspiration levels and reflect the reality that aspirations are not only shaped by motivation but also by life circumstances.

These findings have several important implications for the nursing profession and healthcare institutions. In many real-world hospital settings, it is common to see newly hired nurses handling stressful shifts while still trying to build their future. Based on real observations, some nurses take extra duties just to save up for further studies or for exams like the NCLEX, even if it means sacrificing rest or time with family. Others delay their plans because they cannot afford tuition fees or cannot take time off work. This shows that aspiration alone is not enough. Nurses need the right support systems to actually turn their goals into reality. Hospitals and schools should consider providing flexible duty schedules, scholarship opportunities, structured mentoring programs, and access to professional development activities. These supportive measures could help reduce the gap between a nurse's ambition and their ability to act on it.

Recent studies support these implications. Lorenzo et al. (2023) found that Filipino nurses often stay motivated by long-term career goals, but these are commonly delayed due to financial stress and workload. Lim and Enriquez (2022) emphasized that nurses involved in community and health policy work tend to feel more fulfilled and committed to their careers. Similarly, Mercado and Velez (2021) reported that the high cost of education and lack of flexible work options are major barriers that keep nurses from advancing. The importance of mentorship and social support was also highlighted by Yu and Dizon (2020), who found that nurses with strong peer relationships and mentor guidance are more likely to stay in the profession and work toward their goals. Moreover, Bautista and Llamas (2023) noted that some nurses find success not in titles or positions, but in personal growth, emotional strength, and being able to make a difference in their patients' lives ideas that were echoed by some participants in this study who defined success as simply lasting in the profession with a sense of purpose.

In summary, the qualitative findings clearly support and explain the survey results. Nurses today remain hopeful about their careers, but their ability to pursue those aspirations depends greatly on their environment. While motivation is strong, access and opportunity are not always equal. For healthcare institutions to truly support the development and retention of new nurses, they must look beyond workload management and offer concrete programs that recognize, guide, and empower nurses to achieve their dreams. Helping nurses reach their goals doesn't just benefit them it also strengthens the entire healthcare system by building a more skilled, satisfied, and committed workforce.

Table 4 Relationship between Demographic Profile and Plights of the New Breed of Nurses

Variables	chi value	p value	Cramer's V	Decision	Interpretation
Age	68.155	.148	--	Failed to reject Ho	Not significant
Gender	22.004	.284	--	Failed to reject Ho	Not significant
Current employment status	61.750	.310	--	Failed to reject Ho	Not significant
Type of healthcare institution	23.625	.211	--	Failed to reject Ho	Not significant

Monthly income	13.395	.818	--	Failed to reject Ho	Not significant
Plans to work abroad	30.692	.044	.855	Reject Ho	Significant

Legend: Significant if p value is $< .05$. Dependent variable: Plights. Cramer's V values: A value of >0.25 is very strong, >0.15 is strong, >0.10 is moderate, >0.05 is weak, and >0 is no association.

The data show that among all the demographic factors examined, only the plans to work abroad had a statistically significant relationship with the plights experienced by newly licensed nurses. Specifically, nurses who expressed an intention to work overseas were more likely to report higher levels of difficulties and dissatisfaction in their current roles. This relationship, further supported by a very strong Cramer's V value, suggests that migration intent may not only be a career goal but also a response to challenging working conditions. In clinical observations, it is common to hear newly hired nurses express disillusionment with their workloads, lack of recognition, or limited opportunities prompting them to actively prepare for international employment as an escape or solution.

These findings align with the study of Lorenzo et al. (2023), which found that dissatisfaction with local conditions such as low pay, contract-based employment, and emotional burnout is a major "push factor" for Filipino nurses pursuing overseas careers. The emotional strain, absence of strong support systems, and feelings of being undervalued at work contribute to a greater desire to leave the country and seek better conditions abroad. This implies that the intention to migrate may serve as both a coping strategy and a career trajectory, especially among those experiencing the most significant professional hardships.

On the other hand, no significant relationships were found between plights and other demographic variables like age, gender, income, employment status, and type of healthcare institution. This suggests that the workplace challenges faced by new nurses are fairly uniform regardless of background. In actual settings, both male and female nurses, regardless of age group or whether they work in public hospitals or private clinics, report similar struggles such as exhaustion, lack of proper orientation, and limited mentorship. Cruz and Salazar (2020) also reported that regardless of demographic profile, newly licensed nurses often face a steep and unsupported transition into practice, which can lead to early signs of burnout and dissatisfaction.

The fact that age, employment type, and institutional category did not influence the level of plights indicates that the source of these difficulties is systemic rather than individual. Structural problems such as insufficient staffing, limited resources, poor onboarding systems, and unrealistic expectations are likely affecting all early-career nurses similarly.

These findings have several implications. While demographic differences may not greatly influence the challenges nurses face, the strong link between migration intent and negative experiences highlights a need for healthcare institutions to improve working conditions if they hope to retain talent. Failing to address the root causes of dissatisfaction may further accelerate nurse migration, ultimately weakening local healthcare systems. Recognizing that early-career nurses across various settings share similar difficulties also suggests that broad, standardized interventions such as orientation programs, wellness support, and career counseling could be more effective than targeted efforts.

The quantitative results showed that most demographic factors age, gender, income, employment status, and type of healthcare institution did not have a statistically significant relationship with the plights of newly licensed nurses. The only exception was plans to work abroad, which showed a very strong significant relationship with higher levels of difficulty and dissatisfaction. This means that nurses who plan to go abroad are more likely to report serious struggles in their current jobs.

To explain these findings, the researchers looked at the personal stories of the participants. Below is how the qualitative themes match with each demographic variable, helping to explain the results more clearly.

Plans to Work Abroad – Significant Relationship. The survey showed that nurses with stronger intent to work abroad reported greater plights, and the interviews confirmed this. Many participants shared that their

struggles with poor working conditions, lack of equipment, and absence of career growth pushed them to consider working overseas.

Intensified Desire to Work Abroad. A critical dimension to the plights of these nurses is the intensified desire to work abroad, driven not only by economic needs but by professional and psychosocial dissatisfaction. Maria, L1 reported,

“In the OR, we often improvise due to lack of proper instruments,”

and R4 mentioned being assigned to remote barangays without transport. These experiences led to sentiments of underappreciation and professional stagnation, prompting intentions to migrate in search of better systems and career development. López-Cabarcos et al. (2022) similarly noted that poor working conditions are among the strongest predictors of nurse migration in Southeast Asia.

Age – Not Significant. The statistical result showed no meaningful link between a nurse’s age and the level of difficulties experienced. However, some nuances were observed in the interviews. Younger nurses, such as Maria and Xian, seemed to adapt better to physical demands and hospital technology. Still, regardless of age, all nurses young or older shared similar stressors, like long shifts and emotional fatigue. This supports the idea that the challenges are systemic rather than age-related.

Gender – Not Significant. Survey data revealed that gender had no significant effect on the level of plights. In practice, both male and female nurses shared similar difficulties in patient care and staffing. While gender did not directly shape the level of distress, some interviewees hinted at how team dynamics or patient expectations might differ depending on gender. However, these did not strongly influence coping or satisfaction, which helps explain the non-significant result.

Monthly Income – Not Significant. Despite the assumption that low salary may increase dissatisfaction, the data showed no significant relationship between income and plights. Some participants did mention financial strain, but these comments were more linked to contractual status or desire to work abroad, not directly to their actual income range. Even nurses with better pay still faced stress from workload or lack of guidance, suggesting that pay alone does not buffer the emotional and physical demands of their work.

Employment Status – Not Significant Statistically, but Qualitatively Relevant. While the statistics showed no significant relationship, interview narratives showed that contractual nurses faced more insecurity and fewer opportunities.

Institutional Insecurity from Contractual Employment. The theme of institutional insecurity resulting from contractual employment where respondents who were on job order or contractual status reported limited access to training, lack of benefits, and feelings of exclusion. Albert lamented,

“As a contractual nurse, I have fewer opportunities for training... I often feel left behind.” Maria, L2 further emphasized the instability by stating,

“Sometimes, I don’t even know if my contract will be renewed.”

These feelings of exclusion and instability were not reflected in the survey significance level but are still important. Foster and Bennett (2020) support this by noting that job insecurity can affect motivation and professional identity.

Type of Healthcare Institution – Not Significant. Whether a nurse worked in a public or private hospital did not significantly affect their reported struggles. However, some differences appeared in the narratives.

Role Overload and Understaffing

Juan, L1 stated,

“Handling more than 20 patients per shift with only two of us on duty is extremely stressful.”

This issue was common in both public and private settings. The shared experience supports the idea that plights are widespread across institutions, not limited to one type of facility. Alfuqaha et al. (2023) confirm that high nurse-to-patient ratios harm satisfaction and performance regardless of setting.

Cross-Cutting Themes Relevant Across Profiles. While most demographics were not statistically linked to plights, several themes appeared across all groups, revealing common institutional issues:

Emotional Vulnerability and Lack of Psychological Safety
Xian shared,

The emotional impact of patient death was something I hadn't fully prepared for.”

Handy mentioned feeling isolated due to lack of mentorship. These stories reflect universal emotional burdens, reinforcing Galanis et al. (2021) who linked emotional labor with burnout.

Commitment to Local Service Despite Adversity. Some nurses said they'd rather stay if things improved. Juan stated,

“I'd rather stay if only the working conditions improved.”

This shows that migration is not always the first choice it becomes a fallback when local conditions fail. Yu et al. (2020) noted that a strong sense of purpose can help retain nurses when systems improve.

The results of the quantitative analysis revealed that most demographic variables such as age, gender, monthly income, current employment status, and the type of healthcare institution had no statistically significant relationship with the plights of newly licensed nurses. However, the data showed a significant relationship between plans to work abroad and the level of difficulty and dissatisfaction experienced in current work settings. This finding points to a deeper connection between the hardships nurses face and their growing desire to leave the country for better working conditions and career growth.

The qualitative interviews helped explain this connection more clearly. Nurses who expressed a strong intent to work abroad also shared more intense experiences of feeling unsupported, emotionally drained, or professionally stuck. Some described being placed in understaffed units, handling large numbers of patients without enough training or equipment, and feeling uncertain about their contracts. These experiences were not just frustrating they shaped how these nurses viewed their future. For many, migration appeared not only as an opportunity but also as a way out of a stressful and unrewarding situation. This sentiment is echoed in the study by Lorenzo et al. (2023), which found that dissatisfaction with local work conditions significantly drives migration intent among Filipino nurses.

Interestingly, the lack of significant relationships between most demographic factors and the nurses' plights suggests that their challenges are not limited to certain age groups, income brackets, or employment types. In real hospital settings, this is often observed when both young and older nurses, men and women, and staff from public or private hospitals share similar struggles such as overwhelming patient loads, lack of mentorship, and unclear expectations. Cruz and Salazar (2020) also noted that newly licensed nurses, regardless of background, often face a period of emotional disconnection as they adjust to the demands of the real-world clinical environment.

These findings point to the idea that the difficulties new nurses face are rooted more in the system they work in than in their personal circumstances. The stories of contractual nurses, for example, revealed that their sense of insecurity was linked more to how the institution treated them than to their employment type alone. Some expressed that being on contract limited their access to learning opportunities or support from supervisors, which in turn affected how they viewed themselves as professionals. This insight reflects what Foster and

Bennett (2020) discussed regarding the effect of employment insecurity on professional identity formation in healthcare settings.

Another layer of meaning comes from the emotional challenges nurses described. Many shared how they were mentally and emotionally unprepared to deal with patient death, trauma, and the lack of psychological safety in their units. These feelings were common across different demographic profiles. Galanis et al. (2021) found that unmanaged emotional labor among nurses often leads to burnout, particularly when new nurses are left without support or coping mechanisms in high-stress environments.

What also stood out from the interviews was that even though many nurses were thinking of leaving the country, some still expressed a desire to stay if only their work environment felt more secure, fair, and supportive. Their commitment to service was strong, but often tested by the everyday strain of their jobs. Yu et al. (2020) explained that a strong sense of purpose and professional calling can act as a protective factor, helping early-career nurses endure challenges. Yet, when that sense of purpose is constantly weighed down by poor systems, it becomes harder to hold on to.

Taken together, these findings highlight how intent to migrate may be shaped less by who the nurse is, and more by how the nurse is treated and supported. The shared nature of the plights across age, gender, and employment categories reinforces the idea that newly licensed nurses are operating within structures that place heavy demands but offer limited support. These patterns are not isolated to specific individuals but reflect broader institutional issues that affect morale, motivation, and professional development during one of the most crucial stages of a nurse's career.

Table 5 Relationship between Demographic Profile and Aspirations of the New Breed of Nurses

Personal characteristics vs. Mental Health Help-Seeking Intentions	chi value	p value	Cramer's V value	Decision	Interpretation
Age	35.559	.628	--	Failed to reject Ho	Not significant
Gender	17.140	.193	--	Failed to reject Ho	Not significant
Current employment status	53.429	.062	--	Failed to reject Ho	Not significant
Type of healthcare institution	18.789	.130	--	Failed to reject Ho	Not significant
Monthly income	25.314	.021	.776	Reject Ho	Significant
Plans to work abroad	15.615	.271	--	Failed to reject Ho	Not significant

Legend: Significant if p value is < .05. Dependent variable: Aspirations. Cramer's V values: A value of >0.25 is

very strong, >0.15 is strong, >0.10 is moderate, >0.05 is weak, and >0 is no association.

The data in Table 5 reveal that among all demographic variables, only monthly income has a statistically significant relationship with the level of aspirations of newly licensed nurses. This indicates that a nurse's financial situation plays an important role in shaping their career goals, especially when it comes to pursuing further education, specialization, international work opportunities, or leadership roles. Those with higher income levels may feel more capable of acting on their aspirations, while those with limited earnings may find it difficult to move forward despite their motivation.

In practice, this relationship is visible in hospital settings where nurses with more stable or better-paying jobs often talk about saving for postgraduate education, applying for licensure exams abroad, or attending specialty training. In contrast, those in contractual positions with lower pay are more likely to delay their career plans due to financial constraints. As observed in de Castro et al. (2021), Filipino nurses often have high aspirations, but their ability to pursue them is directly tied to economic resources and access to professional development opportunities. Financial pressure, especially for those supporting families, can slow or stall career growth plans.

The non significant relationship between aspirations and variables such as age, gender, type of institution, employment status, and migration plans suggests that the desire to grow professionally is shared across different backgrounds. Both younger and older nurses, male and female, and those in different types of institutions appear to hold similar career ambitions. This reflects a general trend of ambition and professional optimism among newly licensed nurses, as supported by Lorenzo et al. (2023), who noted that Filipino nurses across demographic groups consistently report high hopes for specialization, promotion, or global mobility.

However, while these aspirations may be present across groups, the capacity to act on them is not equal. This explains why income more than any other factor shows a significant influence. It shapes access to review centers, graduate school, licensure exams, and even time to study or train. In reality, several newly licensed nurses have expressed in interviews that while they dream of earning a master's degree or working abroad, their salaries are not enough to support these goals at the moment. This supports Delos Reyes and Nuqui's (2020) findings, where economic burden was a common barrier for nurses who wanted to pursue higher goals.

The implications of these findings highlight the need to understand aspirations not just as individual motivation but also as a product of social and economic conditions. While most new nurses are hopeful and goal-oriented, institutions should be aware that income inequality may limit growth opportunities and affect long-term workforce engagement. Without supportive structures like scholarships, training allowances, or career development programs, some of the most motivated nurses may not be able to fulfill their potential.

The results from the survey showed that among all the demographic variables examined, only monthly income had a significant relationship with the level of aspirations among newly licensed nurses. This means that a nurse's financial situation plays an important role in whether or not they feel able to pursue their professional goals, such as further studies, specialization, or international work. The qualitative findings supported this result through narratives that clearly described how income influenced their ability to take action. This was reflected in

Financial Limitations as a Determinant of Aspirational Mobility, where many nurses shared that while they had high hopes, limited income made it hard to move forward. Juan, L2 admitted,

"My salary is enough for basic needs, but it limits my ability to save for further studies."

Similarly, Jose, L1 expressed that,

"I want to attend workshops and seminars, but the cost of registration, travel, and accommodations is beyond what I can afford."

This validates the quantitative finding that monthly income has a significant relationship with aspiration. As supported by Labrague et al. (2022), economic stability plays a pivotal role in early career nurses' decisions to invest in continuing education or professional advancement. Without sufficient financial resources, even the most motivated nurses. On the other hand, variables such as age, gender, employment status, type of healthcare institution, and plans to work abroad did not show statistically significant relationships with aspirations. However, the interviews revealed deeper insights that helped explain how these factors still influenced the way nurses experienced and expressed their goals. For instance, regarding age, some younger nurses expressed hesitation to take on leadership or advanced roles, even if they aspired to do so. This emerged as **Age as a Factor in Perceived Readiness and Confidence**. A younger participant shared that being new and young in the field made her feel less prepared, even if she wanted to grow. Others, especially older nurses, believed that age was not a barrier, but rather that growth came with experience. This supports Cruz et al. (2021), who noted that younger nurses often feel they need to prove themselves before actively pursuing more ambitious goals.

In terms of gender, both male and female nurses felt that professional growth was based more on competence than on gender identity. This was expressed through **Gender Neutrality in Career Aspirations**. Where Juan,L2 stated,

“Both male and female nurses are treated equally, and advancement depends more on dedication than gender.”

This view reflects the changing culture in nursing, where gender equity is becoming more evident, especially in public institutions. Barron et al. (2022) also observed that in modern healthcare settings, gender no longer plays a dominant role in determining access to advancement.

For nurses in different employment statuses or working in various types of institutions, the theme that emerged was

Aspirations Amid Contractual Employment and Facility Type. Revealed that while their career goals remained intact, some felt that their current status limited access to resources. Maria ,L1 stated,

“My employment status doesn’t stop me from planning, but I know it affects my eligibility for training and promotion.”

Meanwhile, Juan, L1 shared that being a contractual nurse is a stepping stone and does not dampen her motivation. These experiences suggest that while employment type may not significantly alter one’s aspirations, it can shape the path and pace of reaching those aspirations. As Foster and Bennett (2020) explain, contractual nurses often maintain strong career intentions but are held back by systemic barriers such as lack of benefits or access to development opportunities.

A supplementary yet relevant topic was migration intent, which, although not statistically significant, was frequently mentioned in the narratives. Although plans to work abroad were not significantly associated with aspiration in the survey data, they came up repeatedly in the interviews.

Migration as a Strategy for Aspirational Fulfillment. Where several participants said they hoped to work overseas not just for higher pay, but as a way to access better training, resources, and professional growth. Juan,L1 explained,

“I want to work abroad to earn more and support further studies,”

while Jose,L1 hoped that international experience would open more doors. These motivations align with Wichaikhum et al. (2021), who observed that young nurses in low-resource countries often equate migration with better access to specialization, recognition, and institutional support. Despite the obstacles, the nurses’ drive to pursue meaningful careers remained strong.

Beyond the variables tested, the interviews also highlighted two important themes that were common across all groups.

Intrinsic Motivation and Long-Term Vision. Showed how deeply personal and meaningful the nurses’ aspirations were. Many shared that their goals were not just about career titles, but also about serving others, supporting their families, and becoming better professionals. One nurse said that seeing a patient recover reminded her why she wanted to specialize, and another said her goal gave her strength during hard shifts. These stories show that aspirations are rooted in both purpose and passion. Yu et al. (2020) called this vocational resilience a quality that helps nurses remain focused even when the system around them is difficult. Finally,

Perceived Needs for Career Support Systems. Highlighted what nurses felt was missing. They talked about needing access to scholarships, mentorship, career guidance, and clear promotion pathways. Some mentioned how helpful it would be to have senior nurses guide them through their options. This supports Barron et al. (2022), who stressed the value of structured programs in helping early-career nurses realize their potential.

In summary, while the survey showed that only income had a significant effect on nurses’ aspirations, the interview findings revealed a more complete picture. Nurses from all backgrounds entered the profession with high hopes and long-term goals, but their ability to act on those goals was clearly shaped by their financial situation, job status, and access to institutional support. Field observations confirm this: it is not uncommon to hear nurses talk about their dreams of studying further or working abroad, but feel stuck because of limited

income or lack of opportunities. These findings remind us that aspirations are not only a matter of personal drive they are also shaped by structural conditions that either support or slow down growth. Understanding this helps paint a more realistic picture of what it takes for new nurses to move forward in their careers.

The results of the survey showed that among all the demographic factors, only monthly income had a statistically significant relationship with the aspirations of newly licensed nurses. This means that the level of income affected how far nurses felt they could go in their careers. Nurses with higher salaries were more likely to pursue further studies, plan for international exams, or specialize in their field. This was further explained by the qualitative data, where many nurses shared that their career dreams were often limited by financial concerns. Under Theme 1: Financial Limitations as a Determinant of Aspirational Mobility, participants said that while they wanted to study or train more, their salaries were mostly spent on daily needs. One nurse mentioned wanting to join a specialty training but couldn't afford the registration and travel costs. These real-life accounts help us understand how income shapes a nurse's sense of what is possible. This reflects the findings of Labrague et al. (2022), who stated that economic stability plays a big role in a nurse's ability to invest in career advancement, especially early in their profession.

Other demographic variables age, gender, employment status, type of healthcare institution, and plans to work abroad were not statistically significant, meaning they didn't have a measurable effect on aspirations based on the survey. However, when looking at the interview responses, the lived experiences still provided some insight into how these factors subtly influence nurses' goals. For age, some younger nurses expressed hesitation in taking on advanced roles or starting postgraduate studies right away. This became clear in Theme 2: Age as a Factor in Perceived Readiness and Confidence, where a few participants said they felt too inexperienced, even if they had the desire to grow. This kind of uncertainty, especially among newly licensed nurses, was also seen in a study by Cruz et al. (2021), which found that young professionals often take longer to act on career plans due to a need to "prove themselves" first.

As for gender, it was not seen as a barrier by the participants. Most nurses regardless of whether they were male or female believed that hard work and dedication mattered more than gender. This understanding is captured in Theme 3: Gender Neutrality in Career Aspirations, where participants said that promotion and specialization were equally available to all. One nurse pointed out that in today's hospital environment, performance matters more than gender. Barron et al. (2022) similarly found that modern nursing environments, particularly in the public sector, show fewer gender-based differences in career progress.

For employment status and type of healthcare institution, the nurses' stories showed that while their aspirations remained high, their current job setup affected the pace and ease with which they could reach their goals. This was captured in Theme 4: Aspirations Amid Contractual Employment and Facility Type. One participant shared that although she had long-term plans for graduate studies, her contractual status made her ineligible for internal trainings and scholarship grants. Another said that working in a small facility meant fewer chances to learn advanced skills. These insights show that even if these variables did not show significance in the numbers, they still influence how nurses experience the journey toward their goals. Foster and Bennett (2020) also explained that contractual employees often feel disconnected from long-term development programs, even when they are eager to grow.

Although plans to work abroad did not come out as significant in the quantitative test, it was commonly mentioned during the interviews. Nurses viewed overseas work not just for higher pay, but as a way to pursue the career opportunities that felt limited locally. This was discussed under Theme 5: Migration as a Strategy for Aspirational Fulfillment. One participant shared that working abroad would allow her to save for future studies and gain experience that would boost her nursing career. Wichaikhum et al. (2021) found that many Southeast Asian nurses consider migration a pathway to reach goals that would otherwise take much longer to achieve at home.

Across all these variables, the nurses' stories also highlighted two themes that did not depend on their profile. Under Theme 6: Intrinsic Motivation and Long-Term Vision, participants shared how their dreams were tied to helping others, improving family life, or becoming experts in their field. Despite hardships, they remained motivated by purpose. Another common thread was Theme 7: Perceived Needs for Career Support Systems,

where nurses spoke about needing mentorship, financial assistance, and clearer promotion pathways. While these don't show up in statistical charts, they speak loudly through experience.

The findings suggest that aspirations among new nurses are high across all backgrounds, but the ability to act on those aspirations depends on their financial situation and workplace setup. From real-life observation, it's common to hear newly licensed nurses talk about taking review classes or enrolling in master's programs, only to later postpone these plans because of budget issues or heavy shift schedules. Others dream of specializing but are unsure how to start due to lack of guidance. These experiences show that while personal drive is present, the conditions surrounding the nurses play a big part in what actually becomes possible. As Yu et al. (2020) pointed out, the presence of purpose is powerful, but without support, even the most motivated individuals may feel stuck. Understanding this gives a more realistic view of why some nurses move forward faster than others, even when they have the same goals in mind.

Table 6 Relationship between Plights and Aspirations of New Breed of Nurses

Variables	r value	p value	Decision	Interpretation
Plights vs. Aspirations	.270	.084	Failed to reject Ho	Not significant

Legend: Significant if p value is $< .05$. Dependent variable: Aspirations. Pearson r interpretation: A value greater than .5 is strong (positive), between .3 and .5 is moderate (positive), between 0 and .3 is weak (positive), 0 is none, between 0 and $-.3$ is weak (negative), between $-.3$ and $-.5$ is moderate (negative), and less than $-.5$ is strong (negative).

The results in Table 6 show a weak positive correlation between the plights and aspirations of newly licensed nurses, but this relationship is not statistically significant ($r = .270$, $p = .084$). This means that while nurses experiencing more challenges may still have aspirations, the link between the two is not strong or consistent enough across the group to be considered meaningful based on statistical evidence. In other words, the degree of difficulty that nurses face does not reliably predict the level of their career ambition.

This finding suggests that aspirations among new nurses may be shaped more by personal and long-term goals than by their current experiences. In real-world settings, many early-career nurses continue to talk about pursuing advanced degrees, specializations, or overseas employment despite facing high levels of stress, fatigue, or dissatisfaction. Some nurses even describe their current hospital work as a temporary phase—one that is meant to build experience before moving on to better opportunities. This is consistent with Lorenzo et al. (2023), who found that Filipino nurses often view their early professional struggles as necessary sacrifices on the way to bigger goals such as migration or graduate education.

Interestingly, the weak positive trend may also reflect a coping mechanism: nurses who are going through difficult times may hold on to future plans as a source of hope or motivation. As observed in several hospital interviews and informal discussions, newly hired nurses who feel unsupported in their current roles still talk about studying abroad, applying for scholarships, or preparing for licensure exams overseas. These aspirations may help offset the emotional weight of their current challenges, offering them a sense of purpose or direction. Delos Reyes and Nuqui (2020) described this mindset as a form of "goal-buffering," where long term plans help young nurses emotionally distance themselves from the pressures of their daily work.

On the other hand, the lack of a strong correlation also means that even those who are not currently overwhelmed may not necessarily have high aspirations. Some nurses, particularly those who are in stable roles or content with their job, may not feel the urgency to move forward quickly in their careers. Others may be unsure about how to begin planning their advancement due to financial limitations or lack of guidance. This further supports the idea that aspirations are not solely influenced by hardship, but by a mix of personal motivation, financial resources, and perceived opportunities as highlighted in the findings of de Castro et al. (2021).

From an interpretive standpoint, this finding shows that difficult experiences do not always demotivate new nurses, nor do they always drive them to plan for change. Aspirations remain present regardless of the level of difficulty faced, which reflects a broader cultural and professional value placed on continuous growth and mobility among Filipino nurses. However, it also implies that support systems and mentorship may still be necessary to help nurses convert their aspirations into action, especially when challenges are overwhelming.

Although the quantitative data showed that plights and aspirations were not significantly related, the qualitative data provided deeper insight into how newly licensed nurses understand and navigate their difficulties and goals. Several themes emerged from the narratives, reflecting a complex, and at times paradoxical, relationship between what they endure and what they hope to achieve.

Plights as Catalysts for Aspirational Clarity. Many participants reported that the struggles they face, such as limited resources, emotional exhaustion, and high workloads, actually clarified and strengthened their career goals. For example, Hany, L2 working in a public hospital, shared,

“Instead of discouraging me, this challenge has strengthened my desire to be a public health nurse focused on policy change.”

Similarly, Zack, L1 noted,

“The physical and emotional toll of public hospital work made me consider taking mental health nursing seriously.”

These narratives suggest that adversity can function not as a deterrent but as a catalyst for more purposeful career trajectories a finding that aligns with Yu et al. (2020), who emphasized the role of professional calling in buffering against burnout and sustaining vocational resilience.

Aspirations Shaped by Work Contexts and Patient Encounters. The settings in which nurses work significantly influence their professional direction. For instance, Xian, L2 assigned to a school clinic, reflected, *“It changed my career direction I now want to take further studies in community and mental health nursing to support youth wellness better.”* Meanwhile, Jo, L2, who works in a dialysis clinic, shared, *“It made me more committed to continuing in this specialty and someday opening a support group.”*

These accounts suggest that immersion in specific patient populations fosters specialized aspirations, mirroring the findings of Galanis et al. (2021), who noted that clinical exposure to underserved or emotionally vulnerable populations influences nurses' long-term goals.

Motivation as a Byproduct of Overcoming Challenges. Contrary to the assumption that hardships hinder ambition, participants generally expressed that plights heightened their motivation. As Jose, L2 stated,

“There were times I almost gave up... but I kept reminding myself this is part of my journey.”

Handy, L1 added,

“Every time I overcome a challenge, it gives me more confidence and makes my career goals feel more achievable.”

This resilience-oriented narrative supports the view of Labrague and Ballad (2021), who emphasized that nurses' ability to thrive amid adversity is often anchored in intrinsic motivation and aspirational vision.

Temporary Disruptions, Not Abandonment, of Goals. While the majority of nurses affirmed that their goals remained intact despite difficulties, several admitted to delaying them. Remy, L1 explained,

“I wanted to enroll in a training course, but I had to use the money for family needs instead.”

Albert, L1 similarly, shared,

“I had to let go of a scholarship for now, but I'll try again when the time is right.”

These pauses highlight how economic and personal constraints can interrupt, but not necessarily derail, career advancement a theme consistent with Delos Reyes and Nuqui (2020), who found that financial strain and caregiving responsibilities were common reasons for postponed graduate study among Filipino nurses.

Vision-Driven Coping and Daily Reinforcement of Purpose. Several nurses identified their long-term aspirations as a primary coping mechanism. Juan, L2 reflected,

“My goal to work abroad keeps me going, even on the days I feel super tired.”

Maria, L2 connected her motivation to family, stating,

“Every stressful day at work just reminds me why I’m here.”

These accounts suggest that aspirational clarity not only buffers stress but also reorients the nurse's sense of purpose amid challenging conditions. As Cruz et al. (2021) observed, nurses who possess strong career visions demonstrate higher resilience and lower turnover intent, even in under-resourced settings.

Aspirations Exist Beyond Hardship. Interestingly, while much of the literature ties aspirations to adversity, participants also emphasized that ambition does not require suffering. Jose, L1 explained,

“It’s during calm times that I get to plan better.”

Juan, L1-L3 added,

“Just because I’m okay now doesn’t mean this is it, I still want to keep pushing toward my bigger dreams.”

This theme disrupts the notion that only hardship fuels ambition, instead pointing to internal motivation and future-oriented thinking as drivers of goal setting. This reflects the findings of Barron et al. (2022), who suggested that a stable environment can also be fertile ground for career planning and growth.

Work Environment as a Deciding Factor in Career Path Revisions

Lastly, many respondents highlighted how potential changes in their workplace could shift their future decisions. Juan, L1-L2 shared,

“If the environment improves, I might stay longer,”

while Remy, L2 expressed,

“If things get better like fairer shifts, more training, I might reconsider staying.”

These insights suggest that the workplace climate is not only a site of current stress or satisfaction but also a predictive factor for retention or migration intentions. This aligns with Wichaikhum et al. (2021), who found that perceived organizational support influences nurses’ decisions to pursue opportunities either locally or abroad.

The findings of this study show how the struggles faced by newly licensed nurses are closely connected to how their career goals develop over time. Observations from the field support what the nurses shared: even though many of them feel tired and discouraged, they continue to talk about their dreams whether it’s taking advanced studies, working abroad, or helping in community health. These goals don’t fade because of challenges; in fact, the difficulties often make their ambitions clearer and stronger.

From a practical point of view, the stories of these nurses highlight the need to support their career goals by offering guidance, emotional support, and opportunities for learning and growth. When it comes to policy, the results suggest that keeping nurses in the profession requires more than just good pay it also needs changes in the system to prevent burnout, recognize their efforts, and provide clear career paths. In education, the findings show that nursing schools should help students think seriously about their future careers and how to reach them, even before they enter the workforce.

The quantitative data showed a weak but positive relationship between the plights and aspirations of newly licensed nurses ($r = .270$), but it was not statistically significant. This means that although some nurses who experience more challenges also report having strong career goals, the trend is not consistent enough to suggest a meaningful pattern across all respondents. In simpler terms, the hardships they go through do not clearly determine how high or low their aspirations are. However, the qualitative findings provide a more detailed picture and help explain why this weak correlation exists.

From the interviews, it became clear that aspirations are influenced by more than just current struggles. Some nurses shared that their difficulties actually gave them a stronger sense of direction, like wanting to focus on public health or mental health nursing after seeing the gaps in their current setting. Others described how working in certain units like schools, dialysis centers, or rural clinics sparked their interest in specific fields, regardless of how difficult their jobs were. These insights explain why the statistical link between plights and aspirations was not strong: not all nurses respond to hardship in the same way. For some, challenges push them to dream bigger, while for others, their goals are shaped by exposure and interest more than stress.

Another reason for the weak statistical relationship is that many nurses view hardships as temporary. Several participants talked about postponing their plans for further studies or training not because they lacked ambition, but because of personal or financial limitations. This finding aligns with Delos Reyes and Nuqui (2020), who found that Filipino nurses often delay career goals due to family responsibilities or income constraints. So, while these nurses still have aspirations, they may not always show up clearly in survey data if their current situation is holding them back.

Interestingly, some nurses also said that it was their long-term goals that helped them survive their difficult days. This idea, called goal-buffering in the study by Delos Reyes and Nuqui (2020), means that having dreams for the future can help protect nurses emotionally from burnout or stress. That's why the weak positive trend in the quantitative result makes sense some of the most overwhelmed nurses are the ones who hold on tightest to their goals, using them as motivation.

At the same time, several respondents emphasized that ambition doesn't always come from hardship. Some nurses said they feel okay in their current job but still want to grow professionally. This shows that aspirations can also stem from personal values, curiosity, or family inspiration not just from the desire to escape challenges. This idea is supported by Barron et al. (2022), who pointed out that stable environments can also foster career planning and ambition, especially when support systems like mentorship and training are in place.

In real-life hospital settings, this pattern is often seen. Some of the most hopeful and driven nurses are also those juggling long shifts, understaffed units, and emotional exhaustion. They often speak about going abroad, pursuing a master's degree, or building something meaningful in the future. But there are also nurses who face the same tough conditions and feel too tired or unsupported to plan ahead. On the flip side, even nurses who are not struggling often talk about dreams for the future—proving that aspiration is not always a reaction to hardship.

The implications of these findings suggest that career goals among nurses are shaped by a mix of inner drive, lived experiences, and available opportunities, not just by the difficulties they face. In some cases, hardship acts like fuel that strengthens their goals, but in others, it temporarily delays or even clouds them. Aspirations, then, are less about how hard things are right now, and more about whether nurses can see a path forward something often influenced by finances, mentorship, and workplace culture. According to Yu et al. (2020), nurses with a strong sense of purpose tend to stay in the profession even during tough times, which explains why dreams persist even when circumstances are harsh.

In summary, the qualitative data helps explain why the relationship between plights and aspirations is not statistically strong. It shows that while hardship sometimes inspires ambition, this is not a universal rule. Nurses continue to aspire for more not just because they struggle, but because they hope, plan, and imagine better futures, regardless of where they currently stand. This nuanced understanding emphasizes that supporting nurses' aspirations requires more than addressing their challenges—it also means nurturing their hopes, even when things seem stable on the outside.

CONCLUSION AND RECOMMENDATIONS

Conclusion. Based on the findings of the study, it can be concluded that newly licensed nurses face a multidimensional landscape of challenges and aspirations shaped by both individual motivation and systemic realities. The quantitative data revealed that while most demographic variables were not significantly associated with the nurses' plights or aspirations, monthly income showed a strong link with career aspirations, and intent to work abroad was significantly related to their experienced challenges. These results underscore that personal and professional goals are often constrained by financial and structural barriers. Qualitative narratives further illuminated how early career nurses grapple with overwhelming workloads, emotional strain, and institutional gaps in support systems. Despite these hardships, many expressed strong career aspirations pursuing further studies, clinical specialization, and community service indicating that adversity often serves as a catalyst for personal growth and long-term goal setting.

The findings of this study affirm Maslach's Burnout Theory (1981) and Savickas' Career Construction Theory (2005). The emotional exhaustion and reduced sense of personal accomplishment described by the participants clearly reflect the dimensions of burnout outlined by Maslach. Nurses reported high levels of stress due to insufficient staffing, emotional demands, and lack of institutional support key contributors to professional burnout. Despite these conditions, the study also supports Savickas' theory, as nurses demonstrated agency by adapting, setting personal goals, and pursuing meaningful career directions. These results validate both theoretical frameworks, showing that while systemic pressures may contribute to burnout, nurses actively construct their careers with resilience and purpose.

Recommendations. Based on the findings of the study, the following recommendations are given:

Practice. Hospital administrators and nurse managers should develop and implement a Professional Development and Support Program that addresses the common plights faced by new nurses. This may include structured onboarding, mentorship initiatives, wellness sessions, and regular feedback systems. The goal is to ease the transition from student to staff nurse and reduce early burnout. Nursing supervisors should also ensure fair workload distribution and create mechanisms for emotional support such as peer debriefings and counseling access. Nursing leaders must promote a workplace culture that values resilience, empathy, and personal growth enabling young nurses to thrive despite the challenges of early clinical practice.

Policy. The results support the need for policy enhancement in human resource systems, particularly in developing retention strategies for entry-level nurses. Nurse managers, in coordination with hospital leadership, should advocate for institutional policies that equalize access to career advancement opportunities, especially for contractual or probationary nurses. This includes internal scholarship grants, protected time for training, and clear promotion pathways. Additionally, management should explore policy reforms related to mental health support, equitable scheduling, and improved communication across units to mitigate the effects of reality shock among new hires. This study will also strengthen the implementation of the 6th sustainable developmental goal.

Education. The findings suggest a gap between academic preparation and workplace expectations. Nurse managers in partnership with training institutions should review and redesign transition-to-practice programs and orientation modules to include simulations of high-pressure scenarios, emotional coping, ethical dilemmas, and communication skills. Hospitals may also establish academic linkages to support continuing education through flexible learning setups such as weekend classes or distance learning for staff nurses who aspire to take postgraduate courses.

Research. To build on this study, hospital research committees and graduate students in nursing management are encouraged to explore related areas such as organizational readiness for new nurse integration, the impact of mentorship on early-career nurse retention, and the effectiveness of career development plans in public hospitals. The study's abstract will be submitted for posting in the hospital bulletin board and shared via internal staff forums. It is also recommended for publication in peer-reviewed nursing journals and presentation in nursing management conferences to inform practice improvement in other settings.

- a. An action research on improving onboarding experiences of newly hired nurses in a provincial hospital;
- b. Lived experiences of contract based nurses: Navigating insecurity and ambition in early practice;
- c. Career motivation and job satisfaction among newly licensed nurses in relation to nurse manager support.

Professional Development Program for The New Breed of Nurses

Rationale

The findings of the study on the plights and aspirations of newly licensed nurses highlight a crucial transition period filled with considerable professional demands but met with persistent optimism. The majority of respondents reported having difficulties paired with less discontent, suggesting they are managing to cope despite system challenges. Simultaneously, their aspirations are moderate, reflecting a desire for advancement

tempered by real world barriers such as financial constraints, limited institutional support, and psychological stress. This contrast presents a vital opportunity: supporting nurses who are striving but struggling may help retain them and cultivate leadership in the profession. Therefore, this program aims to address these two key areas of concern "difficulties with less discontent" and "moderate aspirations" through integrated support in competence-building, career guidance, emotional resilience, and aspiration-aligned initiatives.

General Objective

To strengthen the career engagement, coping ability, and professional growth of newly licensed nurses experiencing high levels of workplace challenges and moderate aspirations.

Specific Objectives

- Enhance clinical adaptability and confidence among nurses with persistent difficulties.
- Build emotional resilience and reinforce positive coping strategies.
- Encourage aspiration fulfillment through structured academic, specialty, and leadership pathways.
- Normalize mentorship, feedback, and recognition practices.
- Address moderate aspiration levels through empowerment and goal alignment.

Areas of Concern	Specific Objectives	Activities	Persons Responsible	Resources	Time Frame	Success Indicators
Has difficulties and less discontent (early transition pressures)	To support clinical confidence and adaptive coping mechanisms	<ul style="list-style-type: none"> Structured mentorship and coaching Simulation-based clinical immersion Monthly "Transition Talk" open forums Shift shadowing and reflection journaling 	Nurse Educators Chief Nurse HRD	Training kits Feedback tools Reflection guides	Q3 2025	<ul style="list-style-type: none"> Reduced transition stress Improved clinical evaluations Mentorship attendance logs
	To foster emotional readiness and peer support culture	<ul style="list-style-type: none"> Emotional resilience workshops Monthly check-in circles- Mindfulness and stress release exercises- Psychological first aid training 	Wellness Committee Unit Heads External Psychologist	Psychosocial tools Wellness kits Facilitator honoraria	Q4 2025	<ul style="list-style-type: none"> Higher emotional well-being survey results Program participation rate- Referral tracking logs

Moderate aspirations (goal-oriented but constrained)	To empower aspirational thinking and structured advancement	<ul style="list-style-type: none"> - Vision board and goal-setting sessions- Career planning workshops - Testimonial sharing by successful nurse alumni - Regular "Aspirations Roundtable" with management 	Training Office Alumni Coordinator Admin Council	Visual materials Guest speaker budget Development modules	Q4 2025	<ul style="list-style-type: none"> - Attendance logs - Action plan submissions - Aspiration clarity tracking via surveys
	To widen access to career development programs	<ul style="list-style-type: none"> - Promotion of graduate study partners - In-house certification review assistance - Flexible scheduling and study breaks - Internal scholarship nomination program 	Academic Partnerships Office Nursing Directors	MOAs with institutions Funding assistance Online resources	Q1 2026	<ul style="list-style-type: none"> - Increased enrollment in further studies - Certifications earned - Scholarships availed
	To strengthen leadership readiness and systemic engagement	<ul style="list-style-type: none"> - Emerging Nurse Leader Bootcamp - Mentorship-to-Manager simulation path - Policy drafting and advocacy lab- Community health initiative pitch day 	Nurse Managers Community Liaison Officers	Leadership kits Campaign tools Facilitators	Q2 2026	<ul style="list-style-type: none"> - Readiness assessments - Policy proposals - Advocacy output completion

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