Perceived Organizational Support and Taskload on the Work-Life Balance Among Nurses in Cebu City

Lovella S. Granada, RN

Graduate School of Allied Health Sciences, University of the Visayas

ABSTRACT

This study assessed the relationship between perceived organizational support, task load, and work-life balance among nurses in selected hospitals in Cebu City. Nurses are critical to healthcare delivery but frequently encounter excessive workloads and demanding schedules that may hinder their ability to maintain a healthy work-life balance. Using a descriptive-correlational research design, the study surveyed 150 nurses selected through stratified random sampling from both public and private healthcare institutions. Standardized instruments measured levels of perceived organizational support, task load, and work-life balance. Descriptive statistics and Pearson correlation were employed for data analysis. Results revealed a significant positive correlation between perceived organizational support and work-life balance, suggesting that nurses who feel supported by their institutions are more capable of managing their professional and personal responsibilities effectively. In contrast, task load showed a significant negative correlation with work-life balance, indicating that heavier workloads contribute to decreased work-life integration. These findings highlight the critical role of organizational support in mitigating the adverse effects of workload on nurse well-being. The study recommends that hospital administrators and policy-makers prioritize strategies that enhance institutional support and optimize workload distribution. Such efforts may improve nurse satisfaction, promote healthier work environments, and support long-term workforce retention in the healthcare sector.

Keywords: Perceived organizational support, Task load, Work-life balance, nurses, Workload job satisfaction

INTRODUCTION

Work-life balance is an important concern in today's workforce, especially in high-demand professions like nursing. It refers to the ability to manage work duties while maintaining a fulfilling personal life. A healthy balance promotes overall well-being, reduces stress, prevents burnout, and enhances both job satisfaction and productivity. When this balance is disrupted, it can lead to physical exhaustion, emotional distress, and poor job performance. According to Bandura (2023), imbalance in work and life affects not only the employee but also the healthcare system. Boamah et al. (2022) emphasized that lack of balance can decrease job efficiency, while Elrayah and Zakariya (2023) noted its role in employee dissatisfaction. Perlines (2020) found that maintaining balance positively affects workplace morale.

In nursing, work-life balance is especially difficult to achieve due to long hours, unpredictable schedules, and the emotional burden of patient care. Nurses often juggle night shifts, emergencies, and family responsibilities, increasing the risk of burnout. Kumar et al. (2024) highlighted that nurses struggle to maintain well-being without sufficient support. Khalfan et al. (2023) found that the emotional toll of caregiving worsens when support is lacking. Weaver et al. (2023) pointed out that achieving balance improves patient care outcomes by keeping nurses mentally and physically healthy.

Perceived organizational support plays a crucial role in helping nurses manage these challenges. When nurses feel supported by their institutions through flexible schedules, wellness resources, and recognition, they are more likely to experience balance. This support also buffers the negative effects of workload and improves job satisfaction. Holland et al. (2019) emphasized that perceived support reduces emotional fatigue. Macphee et al. (2017) stressed the importance of managerial recognition in boosting morale. Okonkwo (2024) concluded that

without organizational backing, nurses face greater risks of burnout and turnover.

While support is vital, the actual task load assigned to nurses remains a significant barrier. Excessive workload can lead to stress, poor health, and job dissatisfaction, even when support exists. Duffy (2022) found that heavy workloads lower job performance and care quality. Hagemann et al. (2020) reported that unmanageable duties affect nurses' personal time and mental health. Jermsittiparsert et al. (2021) emphasized that balanced workload policies are essential for staff retention. This study, guided by Sustainable Development Goal 8, aims to assess the relationship between perceived organizational support, task load, and work-life balance among nurses in selected hospitals in Cebu City, where limited research has addressed these interacting factors in the local healthcare context.

Research Questions

This study aimed to assess t the relationship of perceived organizational support and task load to work-life balance among nurses in Cebu City during the first half of 2025.

Specifically, it sought to answer the following question:

What was the perceived organizational support of nurses?

What was the task load of nurses?

What was the work-life balance of nurses in terms of:

work interference with personal life;

personal life interference with work; and

work personal life enhancement?

Was there a significant relationship between perceived organization support and work life balance?

Was there a significant relationship between task load and work life balance?

Based on the findings, what work life balance enhancement plan can be proposed?

Statement of Null Hypothesis

H_{o1}: There was no significant relationship between perceived organization support and work life balance.

H_{o2}: There was no significant relationship between task load and work life balance.

REVIEW OF RELATED LITERATURE AND STUDIES

Perceived Organizational Support (POS). Perceived Organizational Support (POS) refers to employees' belief that their organization values their contributions and cares about their well-being (Eisenberger et al., 2020). Eisenberger's Organizational Support Theory suggests that when employees perceive high levels of support, they develop a stronger emotional attachment to their organization, leading to increased job satisfaction and commitment. In the healthcare sector, where nurses face demanding workloads and emotional strain, POS plays a crucial role in shaping their work experiences and overall job performance (Sam et al., 2020). Organizations demonstrate support through fair treatment, job security, career development, and a positive work environment. When nurses perceive strong organizational support, they report lower job stress, reduced burnout, and improved morale. Supportive policies such as flexible work arrangements, mental health programs, and professional development opportunities enhance employee well-being and patient care quality (Eisenberger et al., 2020).

Leaders are viewed as agents of the organization who align employees with management goals. They influence organizational decision-making and shape perceptions of support. Studies have shown that strong leader-member relationships foster higher perceptions of organizational support. Both POS and leader-member exchange rely on social exchange, where valuable support from leaders compels employees to reciprocate with increased dedication (Sluss et al., 2022). POS also helps improve nurses' work-life balance by buffering the effects of job stress and heavy workloads. Institutions that offer mentorship, proper staffing, and recognition programs foster a sustainable work environment. POS enhances nurses' psychological well-being and supports their ability to balance professional and personal roles effectively (Abdulaziz et al., 2022; Hoichuk et al., 2024).

Task Load in Nursing. In organizational behavior and human resource management, understanding the factors that influence employee performance is critical for enhancing productivity and job satisfaction. Numerous studies have examined how workload, motivation, supervision, and standard operating procedures (SOPs) shape performance outcomes (Sahabuddin et al., 2024). In the nursing profession, workload is a key concern influenced by patient acuity, staffing levels, and institutional policies. Higher patient-to-nurse ratios increase task complexity, contributing to fatigue, medical errors, and reduced care quality. Additional responsibilities, such as documentation and administrative duties, further limit time for patient care, resulting in elevated stress and job dissatisfaction (Porcel-Gálvez et al., 2021). Mental and emotional demands in nursing are equally taxing, as nurses make high-stakes decisions while managing patients' emotional needs. Continuous exposure to emergencies and end-of-life situations can lead to compassion fatigue, emotional exhaustion, and decreased cognitive functioning (Broetje et al., 2021; Font-Jimenez et al., 2020).

Excessive workload also affects nurses' physical and psychological health, increasing the risk of burnout, sleep disturbances, and chronic illnesses such as hypertension and musculoskeletal problems. These conditions disrupt work-life balance and decrease intrinsic motivation (Flaubert et al., 2021). Effective workload management strategies—such as adjusting nurse-to-patient ratios, using digital health tools, and delegating non-clinical tasks—\can alleviate burden and promote optimal patient care (Mueller, 2021). Factors like patient acuity and staffing levels are significant contributors to workload. Patients with complex needs demand more time and interventions, particularly in high-dependency units. A lack of adequate staffing due to budget constraints or poor scheduling results in greater strain and a higher risk of error, while balanced staffing improves efficiency and reduces burnout (Huber et al., 2021; Van Merode et al., 2024).

Factors influencing nurses' task load. Beyond workload, job-related stress remains a growing global concern. Nearly 90% of workers in multiple sectors including healthcare reported work-related stress in 2016. Depression and anxiety cause a productivity loss equivalent to US$ 1 trillion annually. Organizational Role Stress (ORS), introduced by Pareek (1983), conceptualizes stress arising from one's role within the organization. This includes role ambiguity, role overload, and resource inadequacy, among others. These role-based stressors, distinct from general stress, negatively impact job satisfaction, emotional resilience, and organizational commitment, and are linked to higher turnover intentions and long-term health issues (Lal Dewangan et al., 2024). Quality of Work Life (QWL) is another important construct that encompasses job satisfaction, work-life balance, safety, growth opportunities, and workplace culture. It offers a broader perspective than satisfaction alone, aiming to improve employee well-being. Enhancing QWL has been shown to reduce stress, improve productivity, and lower attrition rates, while supporting psychological well-being and long-term performance (Lal Dewangan & Goswami et al., 2024).

Work-Life Balance Among Nurses. Work-life balance is a critical aspect of a nurse's overall well-being, as it affects both personal and professional satisfaction. The demanding nature of nursing often requires long shifts, irregular schedules, and high levels of emotional and physical exertion. These challenges make it difficult for nurses to allocate time for personal activities, family responsibilities, and self-care. Maintaining a balance between work obligations and personal life is essential to prevent burnout and sustain motivation in the profession (Rashmi & Kataria, 2023).

Stress has centered on so-called positive mental measures, which focus on identifying and further developing the individual workers and workplace groups' strengths. The psychological concept of work engagement (WE) is at the center of these positive mental measures. WE is defined as "a positive, fulfilling, work-related state of

mind characterized by vigor, dedication, and absorption." A relatively large number of studies on WE among nurses have focused on the relationship between WE and work environment factors, and have reported that job resources, which refer to supervisor support and rewards, are related to WE. In Japan, many studies of nurses have focused on the association between WE and work environment factors, and the association between WE and subsequent factors such as intention to continue, intention to leave, and sense of well-being have also been examined. Emotional and psychological demands also play a role in nurses' work-life balance. The profession requires continuous interaction with patients, families, and healthcare teams, often in high-stress or emotionally charged situations. Dealing with critical cases, loss of patients, and ethical dilemmas can take a psychological toll, making it difficult for nurses to disconnect from work even during their time off (Fukuzaki et al., 2021). Emotional exhaustion can lead to difficulties in maintaining personal relationships and engaging in leisure activities, further straining work-life balance (Yayla & Eskici-İlgin, 2021).

Relationship Between Perceived Organizational Support, Task Load, and Work-Life Balance. Perceived Organizational Support (POS) influences how nurses manage task load and achieve work-life balance. Feeling supported through fair policies, adequate resources, and recognition helps nurses handle demanding workloads, reduce stress, and increase job satisfaction (Özgül, 2023; Shah, 2023). Task load, including patient care, administrative duties, and long shifts, affects nurses' ability to balance work and personal life. Excessive workloads cause exhaustion and limit time for rest, while manageable workloads support well-being (Babamohamadi et al., 2023). Limited studies have examined how technological knowledge risks digitalization, outdated technology, and cybercrime moderate the relationship between work-life balance and job performance, prompting Borgia et al. (2022) to explore this during the pandemic in cooperative credit banks. Overall, nurses' perception of support and task load management directly influence their work-life balance, highlighting the need for supportive policies and realistic workload expectations (Flaubert et al., 2021; Rashmi & Kataria, 2023).s.

RESEARCH METHODOLOGY

Design. The study utilized a quantitative, descriptive correlational design The descriptive-correlational design was utilized to examines the relationships between perceived organizational support, task load, and work-life balance among nurses in Cebu City.

Environment. This study was conducted in Cebu City.

Respondents. The respondents of this study were the 325 registered full time Filipino nurses employed in Cebu City.

Sampling Design. This study used a quota sampling design.

Inclusion Criteria and Exclusion Criteria. The study included nurses who are currently employed in either private or public hospitals in Cebu City, regardless of whether they are casual or full-time employees, and have been working for at least six months. Nurses who are 60 years old and above, those who are resigning or awaiting the effective date of their retirement, those who are in job orders or relievers, and those who are unwilling to provide voluntary consent were excluded from the study.

Instrument. T=This study used a three-part questionnaire. Part One was an adopted version of the Perceived Organizational Support Scale, originally developed by Eisenberger et al. (1986) and later revised by Zuo and Yang (2019) with a Coefficient alpha value ranged from .74 to .95. This instrument consists of nine items. The scale employs a five-point Likert scale, where 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree. The parametric scores were interpreted using the following scale: a mean score of 1.00 to 1.80 was classified as Not Supportive, 1.81 to 2.60 as Slightly Supportive, 2.61 to 3.40 as Moderately Supportive, 3.41 to 4.20 as Supportive, and 4.21 to 5.00 as Very Supportive.

Part Two of the questionnaire is an adopted version of the NASA Task Load Index (NASA-TLX), a widely used tool for assessing subjective workload across six dimensions: Mental Demand, Physical Demand, Temporal Demand, Performance, Effort, and Frustration. The response scale consists of 21 evenly spaced

marks, with scores determined by counting the selected mark, subtracting one, and multiplying by five. The final workload score ranges from 0 to 100, with higher scores indicating greater perceived workload. Scores are categorized as follows: 0–9 (low), 10–29 (medium), 30–49 (somewhat high), 50–79 (high), and 80–100 (very high) (Hoonakker et al., 2011).

Part Three of the study utilizes an adopted work-life balance questionnaire from Agha et al. (2017), consisting of 15 items. The questionnaire uses a frequency scale where responses range from 1 – Strongly Disagree, 2 – Disagree, 3 – Neutral, 4 – Agree, and 5 – Strongly Agree. Based on the respondents' scores, work-life balance can be interpreted into five categories: a score of 1.00-1.80 indicates severe work-life imbalance. Parametric scores and interpretation were as follows. A score of 1.81-2.60 reflects some work-life imbalance, a score of 2.61-3.40 suggests moderate work-life balance, a score of 3.41-4.20 represents positive work-life balance, and a score of 4.21-5.00 indicates an excellent work- life balance. These categories help to assess the level of balance between work and personal life among the respondents.

Data Gathering Procedures. Before data collection began, the researcher submitted the study title for approval and was assigned a research adviser. Approval letters were secured and addressed from the Dean of Allied Health Sciences, Chief Academic Officer, A design hearing was conducted to assess the technical and ethical soundness of the study. Approval from the Ethics Committee or Institutional Review Board (IRB) was obtained prior to data collection. After obtaining all necessary permissions, the researcher distributed the survey questionnaires to the respondents. The objectives of the study were explained, and respondents were assured of voluntary participation and confidentiality. Respondents self-evaluated to complete the questionnaire, and all questionnaires were checked for completeness; incomplete forms were returned for completion. After data collection, data were collated and analyzed using appropriate statistical methods. Data analysis addressed the research questions and objectives. Results were interpreted and presented in tables with corresponding implications and supporting literature. Finally, all answered questionnaires and identifying data were shredded to ensure confidentiality.

Statistical Treatment of Data. The statistical data were analyzed. The Mean and Standard Deviation were used to summarize and interpret the results for perceived organization support, task load, and work-life balance among nurses. And the Pearson's r-Correlation were used to examine the relationships among perceived organization support, task load, and work-life balance among nurses.

Ethical Considerations. Ethical considerations are an essential component of any research study. The study was submitted for ethical approval prior to data gathering.

PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

Table 1 Summary of the Perceived Organizational Support of Nurses

Statements	Mean	SD	Verbal Interpretation
1. The organization strongly considers my goals and values.	3.86	.935	Agree
2. Help is available from the organization when I have a problem.	3.74	1.01	Agree
3. The organization really cares about my well-being.	3.58	1.06	Agree
4. The organization is willing to extend itself to help me perform my job to the best of my ability.	3.73	1.00	Agree
5. Even if I did the best job possible, the	2.89	1.14	Neutral

organization would fail to notice.			
6. The organization cares about my general satisfaction at work.	3.50	.998	Agree
7. The organization shows very little concern for me.	2.77	1.23	Neutral
8. The organization takes pride in my accomplishments at work.	3.64	.928	Agree
Grand Mean	3.48	.574	Supportive

Note. n=325.

Legend: 1.00-1.80=Not supportive;1.81-2.60=Slightly supportive;2.61-3.40=Moderately supportive ;3.41-4.20= Supportive ;4.21-5.00=Very supportive

As shown in Table 1, nurses in Cebu City generally perceived their organizations as supportive (grand mean = 3.48). The highest-rated item was "The organization strongly considers my goals and values" (M = 3.86), suggesting alignment with personal and professional aspirations. High scores for items like "Help is available when I have a problem" (M = 3.74) and "The organization takes pride in my accomplishments" (M = 3.64) indicate that many health institutions offer both practical and emotional support.

However, neutral ratings for statements like "Even if I did the best job possible, the organization would fail to notice" (M = 2.89) and "The organization shows very little concern for me" (M = 2.77) highlight weak areas in recognition and emotional support, pointing to gaps in acknowledging the efforts of frontline nurses. Interestingly, "I put personal life on hold for work" (M = 3.57) suggests that despite receiving support, nurses still face high work demands that strain work-life balance. These findings underscore the need for hospital administrators in the local context to improve recognition efforts, emotional validation, and wellness programs to sustain job satisfaction, retention, and patient care quality in the Philippine healthcare system.

Table 2 Summary of the Task Load of Nurses

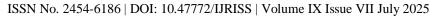| Statements	Mean	Verbal Interpretation	Rank
1. How mentally demanding are the tasks?	69.18	High	6
2. How physically demanding are the tasks?	74.45	High	3
3. How hurried or rushed was the pace of the task?	73.30	High	4
4. How successful are you in accomplishing what you are asked to do?	80.20	Very high	2
5. How hard did you have to work to accomplish your level of performance?	80.55	Very high	1
6. How insecure, discouraged, irritated, stressed, and annoyed were you?	51.48	High	7
Grand Mean	71.3	High	

Note. n=325.

Legend: 0.00-9.99=Low; 10.00-29.99=Medium; 30.00-49.99=Somewhat high; 50.00-79.99=High; 80.00-=Very High

Nurses in Cebu City reported a high level of task demand (M = 71.53), with the highest scores reflecting strong effort (M = 80.55) and perceived success in accomplishing tasks (M = 80.20), indicating high personal efficacy and job commitment despite intense workloads. High scores for physical (M = 74.45), hurried pace (M = 73.30), and mental demands (M = 69.18) highlight the fast-paced, cognitively intense nature of nursing roles. Although emotional strain (M = 51.48) was the lowest-ranked, it remained high, suggesting manageable emotional distress possibly due to coping strategies or workplace support.

These findings imply that while nurses perform under significant physical and mental pressure, intrinsic motivation, cultural values, and institutional support help sustain their resilience and task performance. However, the sustained burden poses risks of burnout, emphasizing the need for balanced workloads, recognition, and emotional support systems to protect nurse well-being and ensure quality care delivery in the local healthcare setting.

Table 3 Summary of the Work-Life Balance of Nurses

Statements	Mean	SD	Verbal Interpretation
1.My job still leaves me energy to pursue personal activities. (WPLE)	3.32	1.03	Neutral
2. My job makes personal life difficult. (WIPL)	3.16	1.05	Neutral
3. I am in a better mood at work because of personal life. (WIPL)	3.48	1.05	Agree
4. My work suffers because of my personal life. (PLIW)	2.04	1.03	Disagree
5. I neglect personal needs because of work. (WIPL)	2.79	1.28	Neutral
6. I find it hard to work because of personal matters. (PLIW)	2.09	1.04	Disagree
7. I miss personal activities because of work. (WIPL)	3.08	1.27	Disagree
8. My personal life suffers because of work. (WIPL)	2.68	1.27	Neutral
9. I am too tired to be effective at work. (PLIW)	2.35	1.11	Disagree
10. I put personal life on hold for work. (WIPL)	3.03	1.27	Neutral
11. My personal life drains me of energy for work. (PLIW)	2.27	1.09	Disagree
12. I struggle to juggle work and nonwork. (WIPL)	2.54	1.14	Disagree

13. Personal life gives me energy for my job. (WPLE)	3.69	.998	Agree
14. I am happy with the amount of time for non-work activities. (WPLE)	3.43	1.08	Agree
15. I am in a better mood because of my job. (WPLE)	3.25	1.01	Neutral
Grand Mean	2.88	.579	Fair

Note. n=325.

Legend: 1.00-1.80=Severe ;1.81-2.60=Poor ;2.61-3.40=Fair ;3.41-4.20=Good ;4.21-5.00=Excellent

The findings in Table 3 reveal a generally fair work-life balance among nurses in Cebu City (grand mean = 2.88), with many managing but still facing moderate challenges in harmonizing work and personal life. Nurses acknowledged that personal life positively influences work—boosting energy (M = 3.69) and mood (M = 3.48)—supporting the concept of work-life enrichment. However, neutral responses on putting personal life on hold (M = 3.03) and neglecting personal needs (M = 2.79) indicate unresolved tensions. While personal life rarely disrupts work, work frequently intrudes on personal time. These results imply that nurses draw emotional strength from family and community ties but remain vulnerable to role conflict due to the demanding nature of healthcare work. In the Philippine setting, cultural expectations of self-sacrifice and compassion often exacerbate stress, especially when institutional support is limited. The study highlights the need for hospital administrators to treat work-life balance as an organizational priority through flexible schedules, psychosocial support, and culturally sensitive policies. Doing so not only improves nurse well-being but also promotes retention and patient care quality.

Table 4 Relationship between perceived organization support and work-life balance

Variables	R-value	p-value	Decision	Interpretation
Perceived organization support vs work-life balance	.302	<.001	Reject Ho	Significant

Legend: Correlation is significant at ≤ .05. Pearson r: A value of .90 – 1.00 (-.90 to -1.00) is very high positive (negative) correlation; .70 - .90 (-.70 to -.90) is high positive (negative) correlation; .50 - .70 (-.50 to -.70) is moderate positive (negative) correlation; .30 - .50 (- .30 to -.50) is low positive (negative) correlation; and .00 - .30 (.00 to -.30) is negligible correlation.

Table 4 shows a moderately positive and statistically significant correlation (r = 0.302, p < 0.001) between perceived organizational support and work-life balance among nurses in Cebu City. This means that nurses who feel valued, supported, and recognized by their organizations are more likely to manage both personal and professional responsibilities effectively. Key implications highlight that organizational support through flexible scheduling, empathetic leadership, and recognition directly contributes to improved well-being and job satisfaction. Conversely, the absence of such support increases the risk of stress and burnout, making work-life balance harder to achieve in high-pressure hospital settings.

In the local context, where Filipino nurses often juggle work and strong familial obligations, supportive workplaces act as psychological buffers, reducing role conflict and emotional fatigue. Supervisory support, culturally sensitive policies, and wellness initiatives enable nurses to maintain emotional boundaries between work and home. This dynamic reflects the social exchange theory, where nurses reciprocate organizational support with higher morale and performance. Ultimately, the study emphasizes that fostering a supportive environment is not optional but essential in sustaining nurse retention, performance, and patient care quality especially in the demanding healthcare landscape of Cebu City.

Table 5 Relationship between task-load and work-life balance

Variables	R-value	p-value	Decision	Interpretation
Task load vs work-life balance	.256	.001	Reject Ho	Significant

Legend: Correlation is significant at ≤ .05. Pearson r: A value of .90 – 1.00 (-.90 to -1.00) is very high positive (negative) correlation; .70 - .90 (-.70 to -.90) is high positive (negative) correlation; .50 - .70 (-.50 to -.70) is moderate positive (negative) correlation; .30 - .50 (-.30 to -.50) is low positive (negative) correlation; and .00 - .30 (.00 to -.30) is negligible correlation.

Table 5 presents a statistically significant but negligible positive correlation (r = 0.256, p = .001) between task-load and work-life balance among nurses in Cebu City. While the strength of the relationship is weak, the statistical significance indicates that even slight increases in workload are associated with changes in how nurses manage their personal and professional responsibilities. This suggests that although task-load does influence work-life balance, other factors may have a stronger impact.

The negligible correlation may be explained by the cumulative effect of daily stressors and the intense nature of nursing work. Long shifts, multitasking, and constant emotional labor drain nurses' energy, often leading to fatigue and reduced time for personal recovery. Studies have shown that consistent overwork, even in small amounts, can contribute to poor work-life balance and increased dissatisfaction. According to boundary theory, when work demands regularly intrude into personal time through overtime, staff shortages, or on-call duties nurses struggle to maintain clear boundaries, which affects their ability to rest and recharge.

In the context of Cebu City's urban hospitals, this finding points to systemic issues such as understaffing and high patient-nurse ratios. These chronic conditions force nurses to operate under continuous pressure, making even manageable workloads feel overwhelming over time. The results underscore the need for healthcare administrators to implement policies that reduce workload burden, ensure adequate staffing, and support nurses' recovery time. Addressing these factors is vital not just for maintaining work-life balance, but also for promoting nurse well-being and sustaining quality patient care.

CONCLUSION AND RECOMMENDATIONS

Conclusion. The findings reveal that nurses in Cebu City experience fair levels of work-life balance, moderate task-load, and generally supportive organizational environments. However, areas of concern remain, particularly emotional strain and blurred work-life boundaries. Results also show that both perceived organizational support and task-load are meaningfully associated with work-life balance, highlighting the need for targeted strategies to improve workplace support and manage workload demands.

Recommendations. The study highlights that nurses face high task-load and only fair work-life balance. To address this, nursing practice should promote peer support, open communication, and recognition of efforts. Incorporating flexible shifts, self-care routines, and mental health awareness into daily practice can help nurses manage stress and maintain well-being, leading to better job satisfaction and patient care. The significant link between organizational support and work-life balance calls for nursing-led policies that ensure fair workload distribution, adequate rest, and access to emotional support. Clear guidelines on overtime, stress management, and staff recovery time can reduce burnout and support a healthier, more sustainable nursing workforce.

Nurses are encouraged to set personal boundaries between work and home life, engage in stress-reducing activities, and seek support when needed. Participation in self-care training, peer support groups, and time management workshops can help nurses better cope with work demands and maintain a healthy balance.

Further studies should consider exploring longitudinal effects of organizational support and task-load on work-life balance, as well as examining other variables such as shift patterns, family responsibilities, or coping strategies. The following research titles are recommended:

1. The Lived Experiences of Nurses Navigating Organizational Support and Work- Life Balance in High-Demand Clinical Settings.

2. The Mediating Role of Job Stress Between Task-Load and Work-Life Balance Among Shift-Working Nurses

Work-Life Balance Enhancement Plan

Rationale

Nurses are the backbone of the healthcare system, but their role often subjects them to high task demands, emotional strain, and irregular working hours, which can significantly impair their work-life balance. The findings from the study revealed areas of concern, including moderate to low perceived organizational support, demanding task loads, and only a fair level of work-life balance among nurses. These conditions can lead to fatigue, burnout, decreased job satisfaction, and compromised patient care. To ensure nurses remain engaged, productive, and personally well, it is imperative for institutions to implement structured interventions aimed at enhancing their work-life balance, increasing organizational support, and managing workload effectively.

General Objectives

To enhance the work-life balance of nurses in Cebu City by improving organizational support mechanisms and mitigating the impact of task load through comprehensive and targeted interventions.

Specific Objectives

To increase the perceived organizational support among nurses by recognizing their contributions, encouraging open communication, and promoting employee well-being.
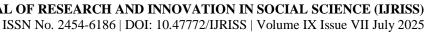
To reduce the emotional and physical burden caused by high task load through wellness initiatives and time management support.

To improve nurses' ability to manage work and personal life responsibilities by implementing flexible scheduling and providing support systems.

To foster a supportive and inclusive work environment that encourages peer interaction, mental health awareness, and recognition of personal and professional balance.

To evaluate the effectiveness of the enhancement program through measurable improvements in job satisfaction, perceived support, and overall work-life balance.

Areas of Concern	Specific Objectives	Activities	Persons Responsible	Resources Needed	Time Frame	Success Indicators
Low perceived organizational support (e.g., feeling unrecognized or undervalued)	To increase nurses' sense of value and recognition from the organization.	Monthly "Nurse Appreciation" program (e.g., awards, recognition wall)2. Regular staff feedback and consultation meetings	Nurse Supervisors, HR Department	Recognition materials, feedback forms, event budget	Monthly	Increase in satisfaction rating in POS survey by at least 20%

Emotional exhaustion due to task load	To reduce emotional burden through stress management and wellness support	Wellness seminars/work shops (e.g., stress management, mindfulness) Access to counseling and mental health services,	HR Department, Hospital Admin, External Speakers	Seminar kits, venue, counselors	Quarterly	Reduction in reported stress levels and increase in wellness participation
Lack of energy for non-work activities	To promote work- life integration and energy recovery outside work	Organized social activities, retreats, or bonding sessions. Encourage hobbies and personal development time.	Hospital Admin, Nursing Coordinators	Activity budget, venues, partnership s	Every six months	Increased participation in activities and improved morale feedback
Insufficient personal suppo rt from organization	To build a culture of care and open communicatio n	Establishment of Peer Support Groups Regular one-on-one wellness check-ins, Staffing models, Wellness programs	Assigned Peer Facilitators, Nurse Leaders	Training for facilitators, meeting space	Bi-monthly	More positive responses in "organization al care" survey items

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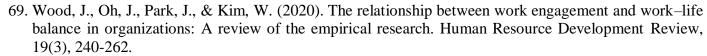
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