

Investigating the Perspectives of Millennial and Gen Z Nurses on Quiet Quitting in Marawi City, Lanao del Sur, Philippines

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ABSTRACT

Background: Quiet quitting, the act of meeting job requirements without striving for overachievement, remains understudied in healthcare contexts. **Objective:** This research explores how millennial and Gen Z nurses perceive quiet quitting and identifies factors contributing to it in a hospital setting, particularly among healthcare workers in Marawi City, Lanao del Sur, Philippines. **Methods:** The study surveyed 214 registered nurses employed in Amai Pakpak public hospital in Marawi City, Lanao del Sur. The study employed a mixed-methods approach, starting with qualitative interviews with (5) five chosen nurses to develop themes for a subsequent quantitative survey. Trustworthiness was ensured through member checks, multiple data sources, saturation, and validity and reliability measures. Quantitative analysis primarily utilized descriptive statistics using SPSS software. **Results:** Qualitative analysis revealed six prominent themes: Lack of Management Support, Workplace Environment and Pressure Response, Poor Work-Life Balance, Inadequate Compensation, Security of Tenure, and Motivations and Determinants of Nurse Retention. With a weighted mean of 3.502, the quantitative findings found a high level of quiet quitting among Gen Z and young millennial nurses. Factors such as poor management, workload disparities, and toxic organizational culture significantly contribute to this trend, highlighting the importance of addressing these issues to retain nurses and enhance their job satisfaction and well-being. **Conclusion:** The factors contributing to quiet quitting among Gen Z and young millennial nurses align with the themes identified in the qualitative part of the study. The quantitative results confirm the qualitative findings related to poor management issues, disruption of work-life balance, and toxic organizational culture as major factors influencing quiet quitting among nurses in healthcare organizations.

Keywords: Gen Z; Lanao Del Sur; Millennials; Nursing Administration; Philippines; Quiet Quitting

INTRODUCTION

Quiet quitting is a newly-coined term that attracted much attention in 2022 and has emerged only recently in the wake of the ongoing COVID-19 pandemic due to a viral TikTok video posted by a Generation Z (Gen Z) who narrated how he learned of this new concept which meant doing just what one's job requires and refusing to succumb to the idea of being an overachiever at work and allowing it to define one's value and existence (Gurley, 2024). It has particularly resonated with the younger generation of the workforce such as younger millennials (below 35 years old that are born between 1996 to 1987) and Gen Z (born between 1997 to 2012) workers (Nahas, 2023).

Although several articles have been written to understand, explain, and describe the emergence of this phenomenon and its effects on the present-day labor workforce, organizations, and the economy, based on the available literature, only a few studies have been conducted on this subject (Duggan *et al.*, 2021). Furthermore, most of these studies explained the occurrence of quiet quitting among remote workers, whose work setup became common among many companies and different organizations due to the restrictions imposed on going to offices to work during the pandemic. Locally, there has been no published study on this phenomenon much less those that are done in the healthcare setting.

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This study investigates the perspectives of millennials and Generation Z nurses regarding the practice of quietly quitting their jobs as healthcare providers, as well as the potential determinants that influenced the formation of such attitudes and behaviors. The study utilizes the *Self-Determination Theory* as its framework. According to the Self-Determination Theory (SDT) of Motivation (Deci & Ryan *et. al*, 2000), there are types of motivations or behavior regulations that drive a person to perform tasks. Humans have three basic psychological needs namely autonomy, competence or confidence, and relatedness that when met, a person is said to be more autonomously motivated. Consequently, the more a person is autonomously motivated, the better his performance or outcome. In addition, the study also borrows from the *Khan Model on Psychological Conditions of Personal Engagement and Disengagement at Work* (Kahn, 1990) which assumes that employees use varying degrees of their selves physically, cognitively, and emotionally in the performance of roles at work while maintaining the integrity of the boundaries between who they are and the roles they occupy. In addition, Kahn's model also posits that given the appropriate conditions, people have dimensions of themselves that they prefer to use and express (a process referred to as self-employment) in the course of role performances by driving these personal energies into physical, cognitive, and emotional labors (Villacarlos & Daño, 2020; Mandal, Basu, & De, 2020).

Specifically, the study aimed to explore how millennials and Gen Z nurses in a hospital in Marawi City, Lanao del Sur, Philippines understood the concept of quiet quitting in their work setting.

METHODOLOGY

Study Design

This study utilized a mixed methods research design, combining qualitative and quantitative approaches to address the research question comprehensively. Specifically, it adopted an exploratory sequential mixed methods design, following Creswell and Plano's (2003) framework, which involves initially collecting and analyzing qualitative data, followed by quantitative data collection and analysis.

In the qualitative phase conducted between August 10, 2023, and October 9, 2023, a case study design was employed to delve into the prior experiences, thoughts, and behaviors of millennial and Gen Z registered nurses regarding quiet quitting in their workplace. This qualitative exploration provided insights and themes that formed the basis for developing a survey questionnaire used in the subsequent quantitative phase.

The quantitative phase, which took place in February 2024, utilized a descriptive, cross-sectional survey design to gather data on the socio-demographic profiles of the nurses and the factors contributing to the development of quiet quitting behaviors in the workplace. These inquiries were informed by the themes and statements identified during the qualitative phase.

Study Participants

The study's population comprised of registered nurses at a public hospital in Marawi City, Lanao del Sur, Philippines, including both regular and contractual employees, who were distributed across various areas within the medical center. The researcher determined a sample size of 139 registered nurses belonging to Nurse Level 1 using Slovin's formula, maintaining a 5% margin of error based on a total population of 214. Participants for the qualitative phase were selected through non-probability purposive sampling, with (5) five cases chosen intentionally to provide insightful responses to the research questions, aligning with the study's exploratory nature.

The selection criteria for participants in both the qualitative and quantitative components of the study involved the following inclusion criteria: (a) participants must be at nurse level 1, (b) they should fall within the age range of 22 to 35 years old, (c) they have been part of the hospital workforce for at least one year during the study's conduct, and (d) they must express willingness to participate.

Data Collection

Employing a mixed methods approach, specifically an exploratory sequential design, this study combined qualitative and quantitative data collection methods. Before data collection, approval was obtained from the

Additionally, a list of Nurse 1 designated nurses with their email addresses was obtained from the APMC's Human Resources department, considering them as potential respondents for the study.

The Qualitative Data collection involved semi-structured interviews using recording devices and writing tools, with sessions lasting around an hour and 40 minutes or until saturation was achieved. Interviews continued until no further valuable information could be obtained. The data, collected between August 10, 2023, and October 9, 2023, was manually transcribed, and participants were given the chance to review and correct their transcripts for accuracy.

After analyzing preliminary qualitative data and identifying themes, the quantitative data collection phase commenced on February 1, 2024, concluding on February 15, 2024. Survey instrument reliability validation was conducted based on qualitative themes. The questionnaire included instructions, informed consent, and agreement statements. Initial evaluation of collected questionnaires excluded ineligible responses based on age and hospital tenure criteria. Following data collection, analysis involved tallying, tabulation, and statistical tools application.

To determine the level of quiet quitting among the nurses, a ranking and scoring system was utilized. The respondents' levels of quiet quitting were assessed by allocating points to them. The resulting scores were then classified into three categories: low, moderate, and high. The study participants' level of quiet quitting was assessed using the following weights assigned to each category: A 20 percent weight was given to poor management issues and disruption of work-life balance, and a 15 percent weight was given to disparities in workload and payments, toxic organizational culture, risk to physical and mental health, and pressure to earn or provide. The high rate of quiet quitting among nurses in this group can be attributed, in part, to factors like toxic organizational cultures and poor management issues, which had higher weighted scores.

Data Analysis

In the study, the analysis of the five selected nurses' cases began by identifying recurring themes within each case. Subsequently, the researcher compared these themes across all cases to determine shared or distinct patterns. This process helped to understand the influence of the identified factors on the research participants' quiet quitting experiences, highlighting similarities and differences among them. Finally, the researcher interpreted the overall meaning derived from the cases' analysis.

The study employed Statistical Package for Social Sciences software (SPSS), version 28 for managing, organizing, and conducting statistical analyses on the quantitative data. Prior to statistical analysis, the data underwent univariate screening to ensure data quality and identify potential issues including outliers. During the data screening process, descriptive statistics were calculated for all variables. Univariate analysis involved examining each variable individually.

To present the quantitative survey findings, descriptive statistics were used to describe the data and summarize the results. These included calculating frequencies, valid percentages, and determining means and standard deviations. The study utilized various statistical tools to analyze the data and draw meaningful conclusions. Participants were provided with comprehensive informed consent forms outlining their rights, ensuring their protection, and their voluntary participation. Anonymity was preserved through the allocation of numerical codes for questionnaires and the use of fictitious identities during interviews. All collected data were securely stored and treated with strict confidentiality, with only summary data shared within the professional community. The research strictly adhered to ethical principles, including safeguarding participants' dignity and welfare, refraining from offensive language, appropriately citing sources, and maintaining objectivity throughout the research process.

Ethical Consideration

The study obtained ethical approval from the Medical Director's office, the Professional Training Officer, and ethics clearance from the Research Ethics Committee (REC) of Amai Pakpak Medical Center (APMC), Philippines with reference number APMC REC 2023-016 on 12th September 2023.

RESULTS

The first phase presents the thoughts and actions of young millennial and Gen Z nurses regarding quiet quitting, while the second phase shows the factors contributing to the development of quiet quitting within the healthcare organization.

Qualitative Results

Theme 1: Lack of Management Support

Within the challenging work environment, many young millennial and Gen Z nurses interviewed for this study perceive a lack of support from management. Various sub-themes encompass this lack of support, such as feelings of undervaluation, insufficient resources and guidance, limited opportunities for professional growth and development, and breakdowns in communication.

Sub-theme 1: Feeling Undervalued - Lack of Recognition and Appreciation

Young millennial and Gen Z nurses expressed feeling undervalued due to a lack of recognition and appreciation from upper management. They emphasized the importance of acknowledgment and validation for their efforts, linking it to job satisfaction and overall engagement. This finding aligns with previous research indicating that feeling unappreciated negatively impacts healthcare professionals' well-being and job satisfaction (Joseph, Ravindran & Sahoo, 2023).

Sub-theme 2: Inadequate Resources and Lack of Guidance from the Management

Participants highlighted concerns about inadequate resources and guidance from management, leading to feelings of being ill-equipped and unsupported in their roles. The lack of resources, including an unfavorable nurse-patient ratio, contributed to emotional exhaustion and physical fatigue. Additionally, a perceived lack of support for further education and training hindered professional growth. These findings are consistent with previous studies showing that inadequate resources and guidance from management impact nurses' daily work and career advancement (Iheduru-Anderson, 2020).

Sub-theme 3: Limited Professional Growth and Development Opportunities

Participants expressed frustration with limited opportunities for further education and career advancement within their current workplaces. Challenges included arbitrary selection processes for training programs and financial constraints, such as return service obligations. These findings resonate with existing research highlighting barriers to nurses' professional growth, including limited support for further education and financial constraints (Hallaran *et al.*, 2022).

Sub-theme 4: Communication Breakdown

Communication breakdowns between nurses and management were identified as significant factors contributing to job dissatisfaction and quiet quitting. Participants reported feeling unheard and misunderstood, leading to disillusionment and loss of motivation. Additionally, a perceived gap between nurses and supervisors hindered effective communication and problem-solving. These findings are consistent with previous research indicating that ineffective communication negatively impacts job satisfaction and collaboration in healthcare settings. (Fowler, Robbins, & Lucero, 2021; Kalaldehy *et al.*, 2020; Vitale *et al.*, 2021).

Nurse Amy's experience of feeling unheard and unacknowledged in her request for a transfer to a different area resonated with several other participants in the study. Many felt frustrated by the lack of transparent communication and decision-making processes within the organization, leading to a sense of disillusionment and loss of motivation.

“It started when I requested to be transferred to a different area because I wanted to have new learnings but it was not granted. I was told to stay because I'm doing good at where I am right now. I was even recommended by my supervisor for the item but at the end of the day, the top management still decides who gets

to be granted the plantilla item. Maybe because the head doesn't know us, that's why. At some point, it's one of the reasons why I'm losing my drive. Recently, I even posted on my social media account if I should stay or leave. Some of my friends would ask me why when I was doing great and that I was an asset to my workplace. I don't want to get to a point where I just force myself to do what I do. It's not enough that you're good at something, you have to love it too because when you do, it becomes bearable” – Nurse Amy

Sub-Theme 5: Lack of Strategies and Initiatives to Enhance Management Support and Foster Nurse Engagement and Resilience

Participants reported a lack of strategies and initiatives to support nurse well-being and foster engagement and resilience. Absence of support systems and programs, coupled with fears of retribution for taking time off, contributed to nurse burnout and dissatisfaction. Suggestions for counseling services and regular meetings with supervisors underscored the need for ongoing support and open communication in healthcare settings. Addressing these issues through evidence-based strategies can promote a positive work environment and enhance nurse well-being and job satisfaction.

Nurse Mai expressed a desire for counseling services, as she sometimes felt afraid of herself and struggled with managing stress. Similarly, Nurse Jani reported that there were no support systems in their workplace and emphasized the importance of regular meetings with superiors for effective communication and problem-solving. Both nurses highlighted the need for ongoing support and guidance from supervisors to address individual needs and concerns.

“...I haven't experienced anything. Nothing. So far I don't.. I don't know...At least every week there should be a meeting with your superior because communication is really the key. You can say your problem with this, the one in your area, and everything at least. Usually when they're at home they won't understand... but if it's in the hospital every after every.. like during your duty hours then what will they talk to you about. Actually, when he was the supervisor of our area before, he was like that. Every time the nurses leave, they will talk to him one-by-one, what have you learned, if you have any problems. I think that's it.. that's okay. - Nurse Jani

The findings of this study provide valuable insights into the lack of strategies and initiatives aimed at enhancing management support and fostering nurse engagement and resilience. The absence of support systems and programs, as reported by the participants, poses challenges to nurses' well-being and job satisfaction. The participants' suggestions for counseling services and regular meetings with supervisors reflect the need for ongoing support and open communication in healthcare settings. Addressing these issues by implementing evidence-based strategies and initiatives can contribute to a positive work environment and improved nurse well-being and job satisfaction.

Theme 2: Workplace Environment and Pressure Response

The second main theme of this study explores the relationship between workplace environment and the response of young millennial and Gen Z nurses to the phenomenon of quiet quitting within their healthcare organization. Under this theme, three sub-themes were generated: Independence vs. Teamwork Orientation, Managing Uncooperative Colleagues, Dealing with Difficult Patients and Challenging Situations.

Sub-theme 1: Independence vs. Teamwork Orientation

Participants predominantly express a preference for working independently, citing efficiency and avoidance of distractions. Nurse Mai exemplifies this preference, emphasizing her ability to work swiftly alone, occasionally seeking help when overwhelmed. Previous studies support this tendency for nurses to favor autonomy and self-direction, aligning with participants' inclinations.

“Yes. Actually, ma'am, I prefer to work alone because it's easy for me.. I can easily finish my work if I'm alone but sometimes if I'm toxic, I also ask for help. I need manpower ma'am. Yes, because actually ma'am, I want to finish quickly so that I can also help my companions. Regardless, ma'am maybe it's easier for me to finish if I'm alone” – Nurse Mai

The findings of this study align with previous research that suggests individuals in healthcare, like nurses,

often prefer working independently (Li, Howell, & Cimiotti, 2023; Seda & Özdemir, 2023). Li, Howell and Cimiotti (2023) found that nurses perceive independence in their work as a way to exhibit professionalism and expertise, while Seda and Özdemir (2023) reported that nurses favored autonomy and self-direction. These findings corroborate the participants' preference for working alone.

Sub-theme 2: Interpersonal Dynamics: Managing Uncooperative Colleagues

The findings from the interviews with the young millennial and Gen Z nurses indicate that managing uncooperative colleagues is a significant sub-theme within the broader context of interpersonal dynamics in their healthcare organization. Nurse Ash discussed her approach of ignoring an uncooperative colleague and taking on extra responsibilities to compensate for their lack of initiative. She emphasized the importance of not wanting her colleague to feel the same hurt she feels when faced with uncooperative behavior. Nurse Ash's response reflects a willingness to endure the negative impact of her colleague's behavior in order to maintain a harmonious working relationship.

“Actually, ma'am that always happens to us. I just ignore her because I tell myself that I can still do it. Sometimes ma'am I'm toxic and then she's not.. she has no initiative to help me but when I'm toxic, I have the initiative to help her. But being helped... All I do is double time if I am the one to help her. But when she is the one who gets toxic ma'am, I really help her. Yes, even if she doesn't help me when I need something. Because I don't want to make her feel what I feel, which of course is already hurt. I don't want that. I don't want her to feel that about me, what I feel about her” – Nurse Ash

The sub-theme of managing uncooperative colleagues in the healthcare organization context appears to be a complex issue for the young millennial and Gen Z nurses in this study. Their responses suggest a range of strategies and approaches, with some nurses preferring to endure the negative impact of uncooperative behavior for the sake of maintaining harmony, while others advocate for addressing the issue through dialogue or seeking support from supervisors.

The findings of this study align with previous research on workplace dynamics and the challenges of managing uncooperative colleagues. One study by McKinley, McCain, and Convie (2020) explored the role of emotional labor in healthcare settings and found that nurses often employ a variety of coping strategies to manage difficult colleagues, including avoidance, seeking support from others, and engaging in additional personal effort to compensate for uncooperative behavior.

Sub-theme 3: Dealing with Difficult Patients and Challenging Situations

This sub-theme investigates how young millennial and Gen Z nurses handle difficult patients and challenging situations. It explores their approaches to maintaining professionalism, managing stress, and ensuring quality care in the face of adversity.

Several nurses expressed a dedication to their profession and a commitment to staying despite feeling exhausted. Nurse Amy, for example, indicated that even when feeling burnt out, she still chose to stay at her job because of the importance of the work she does. However, many nurses also acknowledged that their attitude and behavior towards patients and their companions can change when they are feeling overwhelmed or stressed. Nurse Amy mentioned that she has noticed herself becoming more irritable, raising her voice, and not displaying the same level of calmness and composure that she used to.

The findings of this study highlight the complex emotions and experiences that young millennial and Gen Z nurses face when dealing with difficult patients and challenging situations in their healthcare organization. While many nurses expressed a dedication to their profession and a willingness to persevere despite feeling exhausted, there is also a recognition that the emotional toll of the job can lead to changes in behavior and attitude.

Theme 3: Poor Work-Life Balance

The third theme of this study focuses on the phenomenon of poor work-life balance among young millennial and Gen Z nurses within a particular healthcare organization. Work-life balance refers to the

equilibrium between work-related responsibilities and personal life, encompassing the ability to effectively manage workloads while having ample time and energy to engage in hobbies, activities, and maintain a clear separation between work and after-work hours.

Sub-theme 1: Workload Management Challenges

This sub-theme examines the young millennial and Gen Z nurses' perspectives on their ability to manage their workload. It focuses on their opinions, strategies, and challenges in handling their job responsibilities effectively.

The participants' responses provide insight into their perceptions of workload management and how it impacts their work-life balance. Nurse Mai and Nurse Sha express difficulties in completing their tasks within the given timeframe, highlighting the pressure they face in fulfilling their responsibilities. Both nurses explain instances where their workload does not align with the time available, which further contributes to their sense of struggle.

“Nope. I'm really struggling. Sometimes yes.... only at work. It's difficult. I'm really struggling. As for the duties? It depends on what there is..... but sometimes that doesn't really fit. Like uhh for carrying out the doctor's order. If they do rounds early, it can be done, but if like 1 hour before out, that's not really possible..... You can endorse that in the incoming” - Nurse Sha

The findings suggest that the workload management among young millennial and Gen Z nurses is a significant factor contributing to their perception of an imbalance between work and personal life. The participants' explanations focused on the financial responsibilities they face, such as being the breadwinner or providing for their families. Their comments indicate a sense of obligation and the need to prioritize work over personal life, which hinders their ability to achieve a healthy work-life balance.

Sub-theme 2: Conflicting Priorities and Limited Personal Time

The findings of this study reveal that young millennial and Gen Z nurses often struggle to strike a balance between their professional responsibilities and personal passions.

The findings from interviews with the participants indicate that conflicting priorities and limited personal time pose challenges for young millennials and Gen Z nurses in achieving work-life balance. These challenges can have negative implications for their overall well-being and job satisfaction.

Studies have shown that work-life balance is crucial for nurses' job satisfaction and retention (Sheshadri & Aranganathan, 2023; Rohita *et.al.*, 2022). The ability to engage in personal activities and pursue hobbies has been associated with reduced stress levels and increased overall well-being (Yaser, 2023).

Sub-theme 3: Blurred Boundaries between Work and Personal Life

This sub-theme reveals the extent to which these nurses are unable to disconnect from work-related responsibilities, which can potentially hinder their ability to recharge and engage in self-care activities. The experiences shared by the participants suggest that this blurring of boundaries can lead to burnout and decreased overall job satisfaction.

The comments provided by the participants shed light on their experiences with the lack of separation between work and personal life. Nurse Mai describes how the stress of work even infiltrates her dreams, creating a constant sense of being on duty. This indicates the difficulty she faces in mentally detaching herself from work even during her non-working hours.

These findings align with previous research on the challenges faced by millennials and Gen Z in achieving a healthy work-life balance. The blurring of boundaries between work and personal life has been attributed to the pervasive use of technology, which allows employees to be constantly connected and accessible. According to a study by Cherepanov (2020), the ability to disconnect from work-related tasks is crucial for employee well-being, as it allows individuals to recharge and engage in activities that promote their overall well-being. Failure to establish clear boundaries can lead to higher levels of burnout and decreased job satisfaction.

Theme 4: Inadequate Compensation

The main theme of inadequate compensation explores the perceptions and experiences of young millennial and Gen Z nurses regarding their salaries within their specific healthcare organization.

Sub-theme 1: Market Value Misalignment

This sub-theme focuses on the perceptions of young millennial and Gen Z nurses regarding the alignment of their salaries with the market value.

The findings from this sub-theme indicate a range of perceptions among young millennial and Gen Z nurses regarding the alignment of their salaries with the market value. Overall, the majority of participants expressed satisfaction with their current compensation.

However, Nurse Jani contradicted these positive views and commented that the salary in their hospital is low compared to other hospitals. They attributed this discrepancy to the fact that their hospital is a public institution, while private hospitals may offer lower salaries.

“...In my opinion, the salary is very low compared to other hospitals. Maybe because our hospital is a public hospital. If you think about it, private hospitals offer lower salaries, and you will realize that we are receiving more than them.” - Nurse Jani

The variation in perceptions of salary alignment with market value among the participants can be attributed to several factors. Firstly, Nurse Mai and Nurse Ash, who expressed satisfaction with their salaries, highlighted the benefit of the salary increase implemented by the government. This suggests that external factors, such as national policies or industry-wide changes, can influence how young nurses perceive the adequacy of their compensation. These findings align with previous studies that have shown the importance of external benchmarks and market rates in shaping salary perceptions among employees. (Cullen & Pérez-Truglia, 2022).

Secondly, Nurse Jani's perception of inadequate compensation in their hospital could be attributed to the comparison they made with private hospitals. This finding aligns with the social comparison theory, which suggests that individuals evaluate their own situation by comparing it to others (Putnam-Farr & Morewedge, 2021). Nurse Jani's perception of low compensation could be influenced by their awareness of higher salaries offered in other healthcare organizations.

Sub-theme 2: Duties and Responsibilities vs. Salary

This sub-theme explores the perceptions of young millennial and Gen Z nurses regarding the commensurability of their salaries with their duties and responsibilities.

The findings revealed mixed perspectives among young millennials and Gen Z nurses regarding the impact of compensation on their motivation to continue working within their healthcare organization or engage in quiet quitting. Nurse Mai expressed dissatisfaction with her salary, stating that after taxes and loans deductions, she had to budget what little was left of her basic salary of 36,000 pesos.

“My basic salary is 36 thousand pesos but minus tax, it's only 32 thousand pesos monthly. But now, ma'am, I have an ongoing loan, so I had to really budget what I have left.” - Nurse Mai

On the other hand, Nurse Ash believed that the compensation provided in their hospital was fair, as it not only covered her needs but also included additional benefits such as hazard pay, 13th and 14th-month pay, and bonuses. She compared this to other hospitals where nurses may earn less than 10,000 pesos, which she deemed not worthwhile.

The divergence in opinions about the fairness of compensation among the nurses reflects differing perceptions of their salary's adequacy in relation to their duties and responsibilities.

These findings align with previous research on the relationship between compensation and employee motivation. A study by Sofiyanti and Najmudin (2023) found that fair compensation is a significant driver of

employee engagement and retention, emphasizing the importance of aligning compensation with employees' expectations and financial needs. Furthermore, a study by Livingston (2023) revealed that inadequate compensation considerably increased the likelihood of employees considering quitting their jobs, highlighting the potential impact of perceived unfairness in driving quiet quitting behavior.

Theme 5: Security of Tenure

This study aims to explore the phenomenon of quiet quitting among young millennial and Gen Z nurses within a specific healthcare organization, focusing on the main theme of security of tenure. This section explores how young millennial and Gen Z nurses perceive their job security and trust in management's commitment to retaining them for valid reasons, specifically addressing the following sub-themes: a) the nurses' sense of job security and b) their trust in management's decision-making regarding job retention.

Sub-theme 1: Sense of Job Security

Participants exhibit varied perceptions of job security, influenced by factors such as long-term contracts, career progression opportunities, and positive feedback from supervisors. For instance, Nurse Ash feels secure due to having an itemized position, while Nurse Jani finds reassurance in her supervisor's appreciation. However, nurses in temporary roles may experience heightened uncertainty.

Sub-theme 2: Trust in Management's Decision-Making

Trust in management's decision-making processes significantly impacts nurses' sense of security and satisfaction. Nurses like Jani and Ash express trust, citing examples of advocacy from supervisors. Conversely, Mai and Sha lack trust, fearing job insecurity and personal biases in decision-making.

Studies emphasize the positive influence of trust in management on job satisfaction and engagement among nurses (Joseph, Ravindran, & Sahoo 2023).

In conclusion, trust in management's decision-making processes is crucial for young millennials and Gen Z nurses' perceptions of job security. Nurses who trust management tend to feel more secure and satisfied, while those who lack trust experience uncertainty and dissatisfaction.

Theme 6: Motivations and Determinants of Nurse Retention in Healthcare Organizations

Sub-theme 1: Personal and Professional Identity Building

The findings reveal that young millennial and Gen Z nurses have a strong sense of personal and professional identity building in their healthcare organization. They express a commitment to sticking with the organization to establish their reputation and gain recognition from their peers and community. One nurse, Ash, highlights the importance of continuing to work in the government while studying law, as it allows for the opportunity to help others and apply their knowledge in practical situations.

Sub-theme 2: Family and Social Support

Participants perceive family and social connections as significant factors influencing their decision to remain in their current healthcare organization. They fear losing their support system and express that social support can buffer against stress and burnout.

Recognizing this, organizations should implement initiatives promoting work-life balance and foster supportive cultures to enhance nurses' sense of belonging.

Sub-theme 3: Comparing Job Satisfaction and Stability

The level of job satisfaction and perceived stability significantly impact nurse retention. While nurses express overall satisfaction with their work, the lack of permanent employment opportunities poses a concern. Healthcare organizations need to address job satisfaction and stability to retain young nurses effectively, as stability and permanence are preferred among nurses.

The findings of this study highlight the need for healthcare organizations to address the issue of job satisfaction and stability in order to retain young millennial and Gen Z nurses. While the nurses in this study expressed overall satisfaction with their work at the hospital, the lack of permanent employment opportunities emerged as a potential concern. This is consistent with previous research that has shown a preference among nurses for stable and permanent positions (Sapar & Oducado, 2021).

Quantitative Results

Table 1: Level of Quiet Quitting Among Gen Z and Young Millennial Nurses

Factors	Mean	Weight (%)	Weighted Scores
Poor Management Issues	3.839	20	0.7678
Disruption of Work-Life Balance	3.674	20	0.7348
Toxic Organizational Culture	3.619	15	0.5429
Risk to Physical and Mental Health	3.395	15	0.5092
Disparities in Workload and Payments	3.286	15	0.4929
Pressure to Earn/Provide	3.197	15	0.4796
Total	3.502		3.5272

Note: 1-2.5 = Low Level, 2.51-3.5 = Moderate Level, 3.51-5 = High Level

Table 2 presents the level of quiet quitting associated with various factors, including poor management issues, disruption of work-life balance, toxic organizational culture, risk to physical and mental health, disparities in workload and payments, and pressure to earn/provide. The analysis calculated the overall score for quiet quitting based on the given weights and means for each factor.

The study participants' level of quiet quitting was assessed using the following weights assigned to each category: A 20 percent weight was given to poor management issues and disruption of work-life balance, and a 15 percent weight was given to disparities in workload and payments, toxic organizational culture, risk to physical and mental health, and pressure to earn or provide. The high rate of quit quitting among nurses in this group can be attributed, in part, to factors like toxic organizational cultures and poor management issues, which had higher weighted scores.

The weight assigned to each factor was multiplied by its mean to determine the weighted score for each category. The weighted scores for each category were added up to get the overall score of 3.5272 for the level of quiet quitting. To evaluate the final score, a low level of quiet quitting among nurses is indicated by an overall score of between 1 and 2.5. A moderate level of quiet quitting among nurses is indicated by an overall score of 2.51 to 3.5. A high level of quiet quitting among nurses is indicated by an overall score of 3.51 to 5.

In this study, the overall score of 3.5272 falls in the range of 3.5 to 5. This overall score indicates a high level of quiet quitting among Gen Z and young millennial nurses. This suggests that the factors influencing the development of quiet quitting among nurses in this demographic group are significant and potentially problematic. The results indicate that the factors assessed in the study, such as poor management issues, disparities in workload and payments, disruption of work-life balance, toxic organizational culture, risk to physical and mental health, and pressure to earn/provide, significantly influence the development of quiet quitting among nurses. Addressing these factors is essential for retaining nurses in the healthcare workforce and improving their job satisfaction and well-being.

DISCUSSION

In analyzing and interpreting the quantitative data, it is evident that the factors contributing to quiet quitting among Gen Z and young millennial nurses align with the themes identified in the qualitative part of the study. The quantitative results confirm the qualitative findings related to poor management issues, disruption of work-life balance, and toxic organizational culture as major factors influencing quiet quitting among nurses in healthcare organizations. The quantitative data triangulates the qualitative findings by providing numerical evidence and ranking of the factors contributing to quiet quitting among Gen Z and young millennial nurses. This ranking helps prioritize the issues that need to be addressed in healthcare organizations to reduce quiet quitting.

This finding emphasizes the importance of addressing management issues to create a supportive work environment and reduce quiet quitting. This is in line with the study by Iqbal, Asghar, & Asghar (2022) which explored the relationship between leadership support and quiet quitting among Chinese employees. The authors found that poor leadership support was positively associated with quiet quitting, which could also apply to Gen Z and young millennial nurses experiencing poor management issues (Sadaqat, Abid, & Contreras, 2022).

Disruption of Work-Life Balance also emerged as a significant factor, which could indicate that Gen Z and young millennial nurses in this study feel overwhelmed by their job responsibilities and struggle to maintain a healthy work-life balance. One study that supports the importance of work-life balance for nurses is the study by Abhitha and Hebbar (2022) which found that nurses who reported better work-life balance also reported higher levels of job satisfaction, which in turn led to higher levels of patient satisfaction. This highlights the importance of addressing work-life balance in healthcare organizations to ensure both employee and patient satisfaction (Lorber & Dobnik, 2023). Developing policies and practices that support work-life balance can help reduce the need for workarounds and improve overall nurse well-being (Fonte *et. al*, 2022).

Toxic organizational culture ranks third, suggesting that it also plays a substantial role in quiet quitting among these nurses. Creating a positive and healthy work culture is crucial for reducing quiet quitting and improving nurses' well-being (Bae, 2023).

The lowest rank for risk to physical and mental health at fourth place, implies that this factor has a minimal influence on quiet quitting, although it should not be disregarded. Healthcare organizations should address the risk to physical and mental health as a standalone concern for nurse well-being (Havaei *et al.*, 2022). Disparities in workload and payments rank fifth, indicating that these factors contribute to quiet quitting but are not as significant as other factors. Addressing these disparities can help improve nurse satisfaction and reduce quiet quitting (Lu, Zhao, & While 2019). Pressure to earn/provide ranks last, suggesting that this factor has a minimal influence on quiet quitting among Gen Z and young millennial nurses (Francis, Ahmad, & Abdullah 2020).

The results of this study suggest that organizational factors play a crucial role in influencing nurses to quietly quit their jobs. Poor management, work-life imbalance, and toxic culture are key areas that healthcare organizations need to address in order to retain Gen Z and young Millennial nurses. By improving these aspects of the work environment, organizations can create a supportive and positive atmosphere that encourages nurses to stay in their roles (Boamah *et al.*, 2023).

Overall, the mixed-methods sequential study provides a rich and nuanced understanding of quiet quitting among Gen Z and young millennial nurses, highlighting the complex interplay of factors such as management support, work-life balance, and organizational culture in shaping nurses' experiences and decisions within the healthcare setting. By integrating both qualitative and quantitative data, researchers can develop more targeted interventions and strategies to address the underlying causes of quiet quitting and improve nurse retention in healthcare organizations.

Participants' responses are based on their personal experiences with quiet quitting at work, without considering its broader institutional effects. Continuous research and development of targeted interventions to support the nursing workforce, particularly the younger generations, is essential. Further studies can assess the effectiveness of implemented interventions and identify additional strategies to reduce quiet quitting and improve nurse retention.

Limitations

One limitation of this study is its focus on a single public hospital in Marawi City, Lanao del Sur, which could impact the broader applicability of the findings to other healthcare settings or regions. Additionally, the relatively small sample size for the qualitative interviews may not fully capture the diverse range of experiences and perspectives. Furthermore, the study's reliance on self-reported data from the survey introduces the potential for bias, as participants might not fully convey their true feelings or behaviors regarding quiet quitting. Future research can address these limitations by expanding the scope to include multiple healthcare settings, increasing sample sizes, and incorporating alternative data collection methods to enhance the robustness and generalizability of the findings.

CONCLUSION

The study's findings emphasize the significance of addressing factors contributing to quiet quitting among young millennial and Gen Z nurses. Healthcare organizations should revise their management practices, promote work-life balance, and enhance organizational culture to foster a supportive environment for the nursing workforce. Nursing professionals must be aware of the study's implications and use them to navigate challenges in their careers while advocating for change within their organizations and fostering a positive work environment.

Policymakers should consider these implications when developing strategies related to nurse retention, workforce development, and healthcare infrastructure. Integrating management practices, work-life balance, and organizational culture into their policies will effectively support the nursing workforce. Nursing education programs should incorporate the study's findings into their curricula to prepare young millennial and Gen Z nurses for the challenges they may face and equip them with necessary skills.

The study highlights the importance of recognizing and addressing the factors contributing to quiet quitting among young millennial and Gen Z nurses. This approach will create a more supportive work environment for the nursing profession, benefiting healthcare organizations, nursing professionals, and the quality of patient care.

Conflict of Interest

The authors declare that they have no competing interests.

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