

Influence of Workload and Motivational Drivers on Nursing Care Behaviors: A Study at Pomalaa PHC

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Article Info	Abstract
<p>Article History: Received: 12 Juny 2025 Revised: 24 Juny 2025 Accepted: 04 July 2025</p> <p>Keywords: workload; motivation; caring behavior; nurse; primary healthcare</p> <p>Corresponding Author: Nelce</p> <p>Affiliation Bachelor of Nursing, STIEKS Karya Kesehatan, Kendari, Indonesia</p> <p>Email: nelcearil@gmail.com</p>	<p>Background: Caring is the essence of nursing practice. Nurses' caring behaviors underpin comprehensive patient care and influence service quality. Previous studies have identified workload and motivation as factors affecting caring behavior.</p> <p>Objective: To examine the relationship between workload, motivation, and caring behavior among nurses at Pomalaa Health Center.</p> <p>Methods: A cross-sectional quantitative study was conducted from 21–28 April 2022 among all 45 nurses at Pomalaa Health Center. Data on workload, motivation, and caring behavior were collected via validated questionnaires. Associations were analyzed using the Chi-square test, with significance set at $p < 0.05$.</p> <p>Results: Among 45 participants, 97.8% reported a low workload, and 93.3% reported moderate motivation. Caring behavior was observed in 64.4% of nurses. No statistically significant associations were found between workload and caring behavior ($p = 0.356$), nor between motivation and caring behavior ($p = 0.285$).</p> <p>Conclusion: In this sample, neither workload nor motivation was significantly related to nurses' caring behavior. Further research should explore additional individual, psychological, and organizational factors influencing caring behaviors in primary healthcare settings.</p>

Background

Caring is fundamental to nursing, transforming care delivery from a mere task to a respected profession. Effective caring behaviors improve patient outcomes, foster empathy, and uphold patient dignity. However, disparities in caring behaviors persist globally. Aiken (2012) reported poor nursing care quality in Ireland (11%) and Greece (47%). In Indonesia, the Ministry of Health's 2010 survey found that 65.4% of inpatients identified unfriendly and unsympathetic nurse attitudes as a major concern. Additionally, Jakarta hospitals reported 14% patient dissatisfaction linked to inadequate caring behaviors.

In Indonesia, caring become one of the assessments for users of health services. The results of the Survey of the Republic of Indonesia Department of Health (DEPKES RI) in several hospitals in Jakarta showed that 14% of patients were dissatisfied with the health services provided, due to the behavior of caring less good. Results of the research survey in July 2010, the Ministry of Health represented by Drg. Usman received the results Citizen Report Card Survey (CRC) which took a sample of 738 inpatients in 23 hospitals (public and private). The survey was conducted in five major cities in Indonesia and found 9 problem points, one of which was that 65.4% of patients complained about the attitude of nurses who were less friendly, less sympathetic and rarely smile.

Current nursing services are still less than satisfactory, one of the causes being the lack of good behavior caring nurses. This can be seen from studies conducted in several hospitals, including by Wahyudi et.al (2017) in his study on factors related to the caring behavior of nurses in the Internal Room of Sinjai Regional Hospital, who found that 18 (51.4%) nurses behaved caring and 17 (48.5%) nurses had less positive attitudes caring. This is a potential problem that can affect the quality of nursing services due to a lack of nurses caring has a relatively large percentage.

There are 3 influencing factors caring Nurses include individual, psychological, and organizational factors. The results of Zulkarnaen's research (2017) stated that individual factors (demographic factors), psychological factors (workload) and organizational factors (motivation) have al close relationship with behavior caring nurse, but of the several factors, Motivation and Workload have a close relationship to the caring behavior of nurses. This statement is in line with research conducted by Yoany et al said in the results his research shows that the workload and motivation of nurses have a big influence on behavior caring nurse.

At Pomalaa Health Center, a 2021 patient satisfaction survey revealed that 70% of patients were dissatisfied with nursing services, often attributing their dissatisfaction to nurses who did not smile, were unfriendly, or did not respond adequately to patient concerns. Preliminary interviews in February 2022 indicated high workloads among 70% of nurses, potentially impacting service quality.

Previous research suggests that individual (demographic), psychological (workload), and organizational (motivation) factors influence caring behavior (Zulkarnaen, 2017; Yoany et al., 2020). This study investigates the relationships between workload, motivation, and caring behavior among nurses in a primary healthcare setting.

Method

Study Design and Participants

This was a descriptive-analytic cross-sectional study conducted over one week in April 2022. A total sampling technique was used to include all 45 nurses working at the Pomalaa Health Center.

Variables and Instruments

Workload: Measured using a validated questionnaire assessing subjective workload, including task demands, physical effort, and environmental stressors.

Motivation: Evaluated using a scale grounded in McClelland's motivation theory, encompassing needs for achievement, affiliation, and power.

Caring Behavior: Assessed through the Caring Behavior Inventory, reflecting constructs from Watson's Theory of Human Caring.

All instruments demonstrated acceptable levels of reliability with Cronbach's alpha coefficients exceeding 0.70.

Data Analysis

Descriptive statistics were employed to summarize the demographic characteristics and variable distributions. Chi-square tests were conducted to examine associations between independent variables (workload and motivation) and the dependent variable (caring behavior), with p-values less than 0.05 considered statistically significant.

Results

a. Respondent Characteristics

The frequency distribution of respondents based on respondent characteristics can be seen in the following table.

Table 1 Frequency Distribution of Respondents according to General Characteristics of Respondents at Pomalaa Health Center

Variable	Category	F	%
Age	33-39 years	1	39
	40-46 years	11	24,4
	47-55 years	1	35,7
Gender	Man	6	13,3
	Woman	3	86,7
Education	Associate Degree	2	64,4
	Bachelor	1	22,2
	Nurse	6	13,3

Table 1 shows that the average age of respondents is in the age range of 42.8 years. The highest respondents are in the 33-39 age group with 18 respondents (39.9%). The majority of respondents in this study were female, namely 39 people (86.7%), while for education, the most had a D3 education level with a total of 29 respondents (64.4%)

b. Research Variables

Frequency distribution of respondents based on research variables consisting of Workload, Motivation and Behavior Caring:

Table 2 Distribution of Respondents Based on Research Variables

Variable	Category	Frequency (n)	Percentage (%)
Workload	High	1	2.2%
	Low	44	97.8%
Motivation	Low	1	2.2%
	Moderate	42	93.3%
	High	2	4.4%
Caring Behavior	Negative	16	35.6%
	Positive	29	64.4%

c. Analysis Bivariate

Statistical Test Results Chi Square to know Factors Which Related to Behavior Caring Nurses at Pomalaa Health Center.

Table 3 Relationship between Workload and Behavior Caring Nurses at the Health Center Pomala

Independent Variable	Caring Behavior	p-value
Workload	Not significant	0.356
Motivation	Not significant	0.285

The Chi-square test indicated no significant association between perceived workload and caring behavior ($p = 0.356$). Similarly, there was no significant relationship between motivation and caring behavior ($p = 0.285$).

Discussion

This study revealed no statistically significant relationship between workload or motivation and the caring behavior of nurses at the Pomalaa Health Center. The predominance of low workload and moderate motivation among participants may have contributed to a lack of variability, which can influence the ability to detect significant associations. Similar findings were reported by Sutrisno et al. (2023), who found that uniformity in workload perception among nurses limited the observable impact on caring attitudes.

Although many previous studies have identified a link between workload and caring behavior (Pratiwi et al., 2022; Novitasari & Yuliana, 2023), the results of this study suggest that a well-distributed workload may actually buffer negative outcomes. In practice settings where staffing and task allocation are effectively managed, the impact of workload on nurses' caring behavior may be mitigated (Yanti et al., 2023). This observation is important for primary health centers, where nurse-to-patient ratios are often lower than in hospitals.

Likewise, motivation, although widely considered a driver of professional performance, did not significantly influence caring behavior in this study. One plausible explanation is the dominance of moderate motivation across participants, which may reflect a stable but not exceptional level of professional drive. According to Wijayanti and Andini (2023), intrinsic motivation plays a more critical role in shaping nurses' empathy and caring behavior than generalized motivation scores.

Caring behavior is a multidimensional construct influenced by various external and internal factors beyond workload and motivation. Emotional intelligence, organizational culture, peer support, and leadership style have all been identified as crucial determinants of caring in

contemporary nursing practice (Iskandar et al., 2024; Rahayu et al., 2023). These variables may exert a more direct or synergistic effect on caring behaviors than workload or motivation alone.

Therefore, the absence of significant relationships in this study should not be interpreted as an indication that workload and motivation are irrelevant. Instead, these findings emphasize the need for a more nuanced understanding of the mechanisms through which caring behavior develops. Future research should consider longitudinal designs and include broader psychosocial and organizational variables to better understand the dynamics of caring behavior among nurses.

Conclusion

In this cross-sectional analysis of nurses at a primary healthcare facility, neither workload nor motivation exhibited a significant relationship with caring behavior. These findings suggest that additional factors, beyond workload and motivation, may play a critical role in influencing nurses' caring behaviors.

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