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### RESEARCH ARTICLE

#### WORK VALUES, JOB INVOLVEMENT AND ORGANIZATIONAL COMMITMENT AMONG NURSES IN PRIVATE AND GOVERNMENT HOSPITAL: IT'S IMPLICATION TO HOSPITAL ADMINISTRATION

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#### Abstract

**Introduction:** This study sought to determine the work value, job involvement and organizational commitment of nurses working in the government hospital and private hospital. A total of 60 registered nurses, 30 from the government hospital and 30 from the private hospital were the participants of this study which utilized the descriptive survey approach. A questionnaire designed by the researcher was the main data gathering tool used. This was divided into two parts, first part is the demographic characteristics of the respondents and the second part are the main variables being studied, the work values, job involvement and organizational commitment. Furthermore the findings of this research uncovered that work values, job involvement and organizational commitment had a stronger impact in every organization. Finally the practical implication of this research to hospital administration

Results of the study disclosed the following:

**Socio-demographic profile** The respondents of the study (n=60) were generally female (66.7%) with a mean age of 27 years, single, BSN degree holder (90%) with an employment contractual status of 63% and monthly income of below 12k (66%). Subjects of the study were currently connected with their present employer below one year (66.7%).

##### Work value, job involvement and organizational commitment.

The study variables revealed work value obtained an average weighted mean value of  $\bar{x}=4.21$  with a description of Important and  $\bar{x}=4.38$  interpreted as Important from government and private hospital nurses respectively. For job involvement obtained an average weighted mean value of  $\bar{x}=3.38$  described as Neutral and  $\bar{x}=3.52$  interpreted as Agree both from government and private hospital respectively. And organizational commitment obtained an average weighted mean value of  $\bar{x}=3.54$  as Agree and  $\bar{x}=3.37$  described as Neutral from government and private hospital respectively. Significant findings showed that there was no significant difference on the job involvement and organizational commitment between the government and private hospital nurses using 0.05 level of significance and 2 as the degree of freedom obtained, the researcher determined the  $X^2_{critical\ value}$  @ 5.99. And there is significant difference on work value between the nurses in government and private hospital It is mainly recommended that the

administration should pay more attention to knowing the work values, job involvement and organizational commitment of the nurses to promote loyalty, committed nurses and work satisfaction of the nurses and provision of positive environment.

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### **Introduction:-**

It is important for managers of healthcare organizations to assess the impact of these various influences on the way their employees view their jobs, and address these challenges to the thinking, recruitment, motivation, and retention of their productive staff. Lack of any of these elements of work commitment may account for employee absenteeism, turnover, reduced effort, and job dissatisfaction. In order to compete successfully in the healthcare environment, and attract and retain the most qualified and experienced nurses, it is important for organizations to implement strategies that increase job involvement and organizational commitment. Within the literature, the role of job involvement in particular has not been adequately addressed. More specifically, job involvement as a mediator on the influence of work values on organizational commitment remains unclear, as most studies focused on western cultural context. In addition, the degree of organizational commitment has yet to be shown to be related to the actual amount of nursing work or labor intensity required in any nursing care environment. Work values are a particularly important work commitment construct, as they play a key role in influencing an employee's affective responses in the workplace. Work values have been commonly viewed as a personality variable, a strong antecedent of all three work attitudes (e.g. job involvement, organizational commitment, and career salience), and a relatively unchanged feature over an individual's life course. Morrow and McElroy point out that work values are the key to job involvement and other emotional reactions, and uncovered direct evidence that work values are positively related to job involvement in the work force. Randall and Cote also found that individuals holding strong work values were more involved in their jobs. Organizational commitment is a different work attitude from job involvement, however a number of studies have highlighted the connection between organizational commitment and job involvement. Job involvement, as a function of early socialization experiences, is more stable than organizational commitment. Moreover, both variables are thought to influence some work-related behavior independently, and result in a significant interactive relationship.

This study focused on three specific determinants of work commitment: work values, job involvement and organizational commitment. This research study examined the relationships between work values, job involvement and organizational commitment as evidenced by a population of nurses in private and government hospital in Quezon City. It describes also the background and the importance of the present study. It identifies the importance of understanding more about the relationships between the variables. This section then presents the justification for this research, the research questions, the benefits of the study, and the research framework.

A better understanding of the complex interrelationships between the theory and practice in the health care workforce in the hospital will results in practical benefits for health care organizations, with a particular emphasis on creating a positive environment at work. Documenting the relationships between work values, job involvement, and organizational commitment can thus play a role in enhancing the performance and quality of the overall health care system, by providing parameters within which areas of need can be targeted and identifying opportunities for building a positive work environment and the reason why and the main purpose of this study

This study aimed to determine the work values, job involvement and organizational commitment among nurses working in a private and government hospital in Quezon City, Philippines

Specifically, it sought answers to the following questions:

1. What are the socio demographic profiles of respondents in terms of?
  - 1.1 age;
  - 1.2 gender;
  - 1.3 marital status;
  - 1.4 employment status;
  - 1.5 educational attainment;
  - 1.6 personal income;
  - 1.7 occupational position;

- 1.8 years in current position; and
- 1.9 years in current employer
2. What are the work values among nurses in a private and government hospital?
  - 2.1 terminal values
    - 2.1.1 self – growth;
    - 2.1.2 self – realization; and
    - 2.1.3 self - esteem
  - 2.2 instrumental values
    - 2.2.1 social interaction considerations;
    - 2.2.2 security and economic considerations;
    - 2.2.3 stability and freedom from anxiety considerations; and
    - 2.2.4 recreation, health and transport considerations
3. What are the job involvement among nurses in a private and government hospital?
  - 3.1 complete involvement
4. What are the organizational commitment among nurses in a private and government hospital?
  - 4.1 values commitment;
  - 4.2 effort commitment; and
  - 4.3 retention commitment
5. How significant is the difference between work values, job involvement and organizational commitment of nurses employed in private and government hospital?

### **Scope And Delimitation Of The Study**

This study focused on the work values, job involvement and organizational commitment among nurses in private and government hospital in Quezon City, Philippines

The data needed for the study was obtained through the use of survey questionnaire which answered the specific problems identified. The respondents are the nurses regardless of their position working in a private and government hospital in Quezon City. The survey was conducted for a period of one month. The findings would give an implication to hospital administration.

Among the respondents are the thirty (30) nurses who are currently employed in private and government hospital in Quezon City Philippines A total of 60 respondents using the convenience sampling technique

### **Review Of Related Literature And Studies**

The purpose of this chapter is to review the current literature on work values, job involvement and organizational commitment. It explores the definition of these variables, the different categorization systems that have been proposed, and their use in various environment in a private and government hospital in Quezon City Philippines. This provides a comprehensive overview from which to identify the most relevant areas for study.

### **Related Literature:-**

Nurses around the world adhere to a common set of professional values; terminology may vary, but basic beliefs and underlying meanings are similar. These professional values include respect for human dignity, protection of patient privacy, protection from harm, and personal and professional responsibility and accountability. Nurses, it has been shown, have an ethical obligation to advocate. Through the processes of education and socialization, professional nurses also have a strong sense of right and wrong. Professional and healthcare organizations have promulgated codes of ethics to guide values development and ethical decision making in education, practice, and research. Across these codes of ethics, three major thematic categories are recognized: nursing values related to the profession, to patients, and to society. For example, the American Nurses Association (ANA) Code of Ethics for Nurses has undergone several revisions, but the thematic categories have remained constant over time. Therefore, when nurses find their professional values are in conflict with the values of the employing organization, dissonance occurs and nurses become disenchanted and disenfranchised.

### **Work values**

There are major differences when it comes to culture such that people are described as being situation- centered, valuing family and tradition, harmony, emotional restraint, conformity, and obedience to authority ( Ha, 2006);

Yang, 2000), whereas others value individualism, autonomy, and original thinking (Feather, 2006; Gardner, 2009; Hsu, 2002). However modernization has had an effect on traditional work values (Hu & Tan, 2006).

A value is a principle or standard held in high esteem by an individual, and is related to all aspects of one's personal and work life. Values develop so that individuals can meet their needs in socially acceptable ways (Rokeach, 2003). The more individuals know about their own values, the better they will be at determining which work environment best fits their personal and professional needs, and the skills they want to use and develop there.

Work values are the values that an individual holds a "desired end state" of their participation at work. Thus these work values assist in defining career paths and goals (Brown & Associates, 2002). An individual entering an organization will be affected by their work values and will use these values to guide how they "should" function. Locke and Henne (2006) suggested that the work value of individuals affect their work desire or goal, as well as their effort and work performance.

In theory, job involvement is necessary for nurses' professional growth. It is assumed that the higher level of involvement, the higher the degree of professional growth (Elloy, Everett, & Flynn, 2005). Job-involved individuals who perceive opportunities for growth in their job have less intention to leave or suffer burnout (Elloy, et al., 2005). However, given that the current nursing workforce experiences a relatively unstable health field, it is possible that these disturbances may have a negative effect on how involved nurses are in their jobs (Morrow, 2003). Therefore, continuing job involvement under such circumstances requires close study, both to determine the salience of the concept of job involvement, and the factors that affect it.

Bass (2005) points out that job involvement is representative of the employee's ego-involvement in his/her job and is thus related to performance. Lawler and Hall (2000) argue there was no difference between the two (self esteem and self image) definitions proposed by Lodahl and Kejner (2005). These researchers believe that the first definition means the real essence of job involvement, whereas the second definition was inconsistent with expectancy theory, namely the concepts of internal motivation.

Both Lawler and Hall (2000), and Blau (2005) propose that job involvement involves only a single aspect, namely, the degree to which a person perceives the total work situation to be an important part of life, and to be central to their identity, because of the opportunity to satisfy important needs. Blau (2005) proposes that an individual engaged in his / her job would care about the tasks to be undertaken.

According to Kanungo (2002), involvement either in the context of a particular job, or with work in general, can be viewed as a cognitive state of psychological identification. An individual's psychological identification with a particular job in turn depends on the salience of her / his needs (both extrinsic and intrinsic) and the perceptions he or she has about the need satisfying potentialities of the job. When job involvement is decreased to a certain extent, it will trigger job alienation. However, whenever job alienation is reduced a certain extent, it creates a sense of job involvement (Kanungo, 2002)

Job involvement is also a personal characteristic, and thus it is never changed easily within an organization (Rabinowitz & Hall, 2007). In a situation determined approach, job involvement can be viewed as the personal attitude towards the particular job. In this conceptualization, job involvement will be affected by leadership style, the opportunities the individual has to be involved in decision-making, social factors, job features and other conditional influences. Values are thus internalized with job attitude.

Research on organizational commitment was first initiated by Becker (2000). Thereafter, Grusky (2006) and Brown (2009) soon undertook studies exploring organizational commitment. In the early 1980's Morrow (2003) reviewed literature on organizational commitment and found at least 25 different concepts and relevant measurements. Commitment as a whole is considered a multidimensional construct (Allen & Meyer, 2003; Etzioni, 2001; Kanter, 2008; Morrow, 2003; Morrow & McElroy, 2004) commitment to the organization a one aspect of commitment is frequently studied, and is referred to as organizational commitment.

Saleh and Hosek (2006) reviewed a range of literature related to job involvement and from this formulated four definitions for job involvement. These were, "the job is of critical importance in personal life", "the individual will be actively involved in his / her own job", "the individual will cognize the influence of personal performance on

self-esteem”, and “the congruence between work performance and self-concept”. Whenever these four definitions are satisfied, the individual will be involved in his / her own job.

Expectancy theory suggests that administrators should make good use of personal expectancy to inspire employees. This is based on the rudimentary concept that inclination for an individual’s action is determined by his / her expectancy level, which results in incentives for action. If expectations are lower than the inducement provided by the organization, job involvement will increase. On the other hand, when expectations are higher than the inducement provided by the organization then job involvement will decrease.

According to Etzioni (2001), here are three distinct approaches to categorizing organizational commitment, moral involvement, calculative involvement and alienative involvement. Moral involvement is based on the trend of internalizing organizational goals and values, and makes individuals more likely to identify with authority. Calculative involvement is based on the reasonable exchange between interest and reward, namely a relationship of lower intensity. Alienative involvement often comes within exploitation, which results in negative orientation

MANILA, Philippines (2011) — by Elaine Salansan “We work to live not live to work” has been a popular phrase for employees who try to balance priorities in life. This means juggling work demands and non work priorities as well as considering work-life balance when choosing a career and company to work for.

Finding harmony between the professional (work-related concerns) and personal (nonwork related concerns) life is at the core of an employee’s work-life dilemma. It is common to find employees struggling to successfully achieve work goals while maintaining job satisfaction and good health plus a happy family or social life.

The need to work longer hours, get an extra job to compensate for financial needs, having inadequate or incompatible organization benefits package, lack of reliable child care support, tons of other household responsibilities are but a few examples of how and why employees experience work-life dilemma.

As the search for work-life balance (or harmony) continues, employees tend to look at opportunities that organizations can and will provide. Policies and interventions that aim to respond to employees’ work-life dilemma are called work-life initiatives. Organizations are encouraged to provide interventions that will increase work nature awareness and encourage better interpersonal relationships (Pavia and Tabio, 2000).

The management book of Tomas Andres gives an insight on working with and through Filipino values. He discusses the direct link between productivity and values, and relates how Filipino values interplay with various management activities. He also stresses the fact that one can control the negative effects of values and redirect them for productivity.

Andres believes that it is imperative for western management system taught to Filipino managers to be adapted or modified to suit the Philippine condition and the Filipino behavior and values. He speaks of four ways of contextualizing management in the Philippine setting

The book of F. Landa Jocano is about management by culture. It is intended for the use of managers. It is the contention of F. Landa Jocano that understanding culture can achieve better communication, good relationships and increased productivity. The author stresses that management is not all business, but also a social and cultural encounter. Thus a work plan that manager should strive to make should be not only task-technology efficient, but also, people focused and culture- oriented. Management by culture is therefore the best alternative to management by objectives.

Suggestions were made by the author to make the traditional culture work for the company. Team building, communication, motivating and leading that incorporation the basic elements of Filipino culture tradition into the corporate organization re ways to make Filipino culture work for the achievement of corporate goals

May Solveig study (2003) says that the main research question addressed in the descriptive study was "What are the values underlying nurses' professional identity as expressed through what is meaningful in nurses' work?" This question was addressed in a two-phase study: The first phase was a survey of 767 randomly selected nurses with one, five, and ten years of experience in nursing responding to selected background questions and an open-ended

question about meaning in nurses' work; and in the second phase, data on work-meaning were obtained from a convenience sample of six nurses from written descriptions of exemplary meaningful patient-situations and in-depth focused interviews eliciting nurses' stories about providing care to patients and professional development. Content analysis of survey-data revealed that the nurses held both other-oriented and self-oriented values, i.e., moral and work values. Human dignity and altruism were the most prominent moral values, whereas the most significant work-values were intellectual and personal stimulation. New graduates mentioned significantly more often moral process values (Chi-square 6.171,  $p < .05$ ) and less often extrinsic work values (Chi-square 7.713,  $p < .05$ ) compared to older nurses. In the oldest cohort, male nurses expressed extrinsic work values more often than female nurses (Chi-square 11.802,  $p < .05$ ). In the total sample, male nurses mentioned less often moral process-values compared to female nurses (Chi-square 18.964,  $p < .01$ ). The interview-data, analyzed by means of hermeneutic and narrative analysis, revealed a greater diversity in value-expressions compared to the survey-data. Altruism, the moral orientation of care was the overall philosophy and human dignity appeared as a core value. The additional values, security, integrity, personhood, being a fellow human, autonomy, privacy, reciprocal trust, hope, and general humanity, all appeared to be linked to human dignity either by arising from it and/or being aimed at preserving this basic value. The interactive relationship with patients/relatives and colleagues provided the main sources of work-meaning and affected professional development. The nurses experienced meaninglessness when they could not give the care patients needed. The description of values comprising nurses' professional identity provided in this study has implications for the understanding of nurses' job satisfaction and nursing ethics.

Tong, A.C. (2001) study Issues on commitment have captured the great interest of organizations and research scholars. The health-service organizations in Singapore are anxious to develop appropriate organizational strategies to enhance their nursing personnel's levels of commitment to the organization and profession, and hope that this may, in one way or other, help to ease the turnover among the nurses currently taking place in the organizations. The current study has, therefore, been carried out to investigate the commitment levels of nurses in the health-service organizations in the Asian Context of Singapore with an attempt to (a) establish the differences between the nurses' level of organizational commitment and professional commitment; (b) determine the effects of the nurses' personal variables on their organizational commitment; and (c) ascertain the relationships between the nurses' overall job satisfaction and their organizational commitment and professional commitment. A total of 2,424 usable questionnaires were collected from nurses in six government hospitals and four private hospitals. The results of the data analysis have indicated that (a) the nurses, irrespective of their organizational affiliation to the public or private sector, tended to show a higher level of commitment to the profession than to the organization; (b) the nurses in the private hospitals did not tend to show more commitment to the organization than their counterparts in the government hospitals; (c) the personal variables of age, tenure and salary level of the nurses in both the government and private hospitals seemed to have created an impact on their organizational commitment, and that of these variables, salary level seemed to have the greatest impact on the organizational commitment, and have an intervening effect on the relationships between age and tenure and the organizational commitment; and (d) the overall job satisfaction of the nurses in the government hospitals seemed to have been related more to their professional commitment than to their organizational commitment, but the overall job satisfaction of the nurses in the private hospitals did not appear to have significant relationships either with their organizational commitment or professional commitment. The possible contributing factors to these findings were analyzed; the implications for the health-service and other organizations concerned, and the implications for future studies were discussed.

According to the study of Rabi Shiaka (2015) the result was in line with Ibrahim et al. Study entitled Workplace empowerment and organizational commitment of nurses at the Egypt University Hospital which showed a significant direct intermediate correlation between nurses' perceptions of overall structural empowerment and their overall organizational commitment.[26] In this study, overall structural empowerment with the working department ( $P=0.031$ ), and overall organizational commitment with nursing experience ( $P =0.025$ ) was significant. "

Fr. Charlo Maglungsod results of his study revealed that employees with high job satisfaction were more likely not to frequently absent themselves from their job, that employees welcomed the freedom given them in their job; that position, length of service and age of employees were significantly related to the level of satisfaction of an individual and with the social and psychological aspects of the job; that positive relationship between age and job satisfaction attested the largely held fact that as workers become older, they tend to become more satisfied with their job. He also revealed that employees who have stayed with the office for a relatively longer period of time seemingly have a lower level of satisfaction derived from their social or human relationship in the organization.

The study of Raulyn Fuentes is to determine the relationship of demographic indicators, organizational commitment, and burnout in relation to turnover intention among the selected secondary school teachers in Davao City. The correlation and stepwise regression analysis were employed in this study to model the turnover intention using the indicator variables. The results revealed that number of years; organizational commitment and burnout slightly correlate with turnover intention. The indicators to influence turnover intention in this study are affective commitment and client burnout, thus, administrators should consider these indicators in order to retain the best and experienced employees in the organization. It is recommended that school managers should institutionalize programs for employees who stayed long to serve the organization; strengthen the organizational commitment, and develop programs to lessen the burnout of the employees.

### **Research Methodology:-**

The researcher made use of the descriptive survey type of research design. This design is considered most appropriate as it explore and describe the work values, job involvement and organizational commitment among nurses working in the private and government hospital in Quezon City, it involves obtaining information concerning the current status of the phenomena to describe “what exists” with respect to variables or conditions in a situation.

This methods involved range from the survey which describes the status quo, the correlation study which investigates the relationship between variables (Natividad as cited in Burns and Groove, 2007).

Descriptive research can be either quantitative or qualitative. It can involve collections of quantitative information that can be tabulated along a continuum in numerical form, such as scores on a test or the number of times a person chooses to use a-certain feature of a multimedia program, or it can describe categories of information such as gender or patterns of interaction when using technology in a group situation. Descriptive research involves gathering data that describe events and then organizes, tabulates, depicts, and describes the data collection (Glass & Hopkins, 1984).

### **Locale And Population**

The study was conducted among nurses in a selected private (1) and government (1) hospital in Quezon City with a total of sixty (60) respondents. A minimum sample size of thirty nurses (30) per hospital is considered sufficient for the study, a total of sixty (60) respondents.

The samples were recruited via convenience sampling. The target population for this study is consisted of registered nurses employed in a private and government hospital in Quezon City

Participants were selected to take part in this study based on the following inclusion criteria

1. Must be a registered nurse
2. Be employed regular or contractual nurse
3. Have completed at least six months of service on the present employer (to ensure that participants have at least some familiarity with the job and organization.
4. Be willing to participate

Subjects who met the inclusion criteria were invited to be part of the study and asked to fill in the questionnaire.

### **Research Instrument Used**

To obtain pertinent data and information needed the researcher used a given questionnaire which is the principal instrument to be used in gathering the needed data in the study

Parts of the question are highly validated. Each question was using the standard validation method reliability and usability. Through adviser assistance and guidance the researcher develop a mechanics and be able to come up with the different format of answering the questions have been criticized and analyzed in terms of contents, mechanics and format style of presentation. Pre – tested using small group in the study.

The purpose of pre- testing is to discover ambiguous use term and overlapping ideas as well as the over – all language perception. The given questionnaire was revised on the basis of the findings in the administration of the questionnaire. On the recommendation of the adviser, the survey questionnaire was put into its final form and ready

for survey. Through proper studies and validation process the set of questionnaire was reproduced and given personally to the groups of respondent.

The instrument is composed of the following measures:

1. A socio demographic profile developed by the researcher to collect personal data.
2. The work value inventory (WVI) is designed to measure the work values of participants (Wu et.al, 2006)
3. The job involvement questionnaire (JIQ) (Kanungo, 2002) was included to measure the job involvement of nurses in the sample.
4. The organizational commitment questionnaire (OCQ) (Mowday, et. Al 2009) was designed to measure participant's commitment towards their employer.

### Ethical Consideration

1. The study and its purpose were explained to the respondents
2. Correct explanation regarding the study was given and respondents were given the opportunity to decide whether or not to participate in the research, thus obtaining their informed consent.
3. All information gathered from respondents was treated with confidentiality and used only for the purpose of the study, which was guaranteed by asking respondents not to indicate their names on the questionnaire

Permission to conduct the study and approved letter for survey was first sought from the medical director and chief nurse before any part of research was started. The researcher personally distributed the questionnaires to the thirty (30) respondents in each hospital, at a certain period and time around June of 2016 in their free time and set schedule to get them back for them to have ample time to responds to the question.

The researcher personally distributed them in order for him to check on the accuracy and consistency of the given data. The respondents were given the right to not give their names on the questionnaire. In this they would feel free and be comfortable in given their answer in a democratic matter and express their insights on the given survey question. Accuracy and honest answer is a must. Distributed questionnaires were retrieved a week later and give them ample time to review and answer the questions.

**Table 1:-** Frequency distribution and percentage of respondents according to Age

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
22-25 y/o	6	20.0%	14	46.7%
26-30 y/o	11	36.6%	15	50.0%
31-35 y/o	3	10.0%	0	0%
36-40 y/o	2	6.7%	0	0%
41-45 y/o	6	20.0%	1	3.3%
46-50 y/o	2	6.7%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 1 shows the frequency distribution and percentage of the respondents from government and private hospital within Quezon City Philippines

The ages of 60 respondents were obtained with a higher percentage of registered nurses being 26 – 30 years of age with a 50.0% (n=15) and 36.6% (n=11) working in private and government hospital respectively. It shows here in Table 1, staff nurses either in government and private hospital belonging to age 26-30 are more work-oriented due in part to the personal socialization process in which a worker's experience affects individual work value (Cherrington (2007)). (Chin 2010) found that younger employees pay more attention to social relation consideration than older employee. Nursing staff did not vary significantly as they age. Values of nurses from different generation differed little. The range of ages and percentages found were 22 - 25 years of age 46.7% for private hospital nurses (n=14) and 20.0 % (n=6) for government hospital nurses; 41 – 45 years old 20.0% (n=6) for government hospital nurses and 3.3% (n=1) for private hospital nurses

**Table 2:-** Frequency distribution and percentage of respondents according to Gender.

	Government	Private
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	Frequency	Percentage	Frequency	Percentage
Male	11	36.7%	10	33.3%
Female	19	63.3%	20	66.7%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 2 illustrates the frequency distribution and percentage according to gender. Majority of the respondents are female both private and government hospitals with 66.7% (n=20) and 63.3% (n=19) respectively. Male nurses working in government hospital obtained 36.7% (n=11) and male nurses in private hospital earned a percentage of 33.3% (n=10).

**Table 3:-** Frequency distribution and percentage of respondents according to marital status.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Single	21	70.0%	29	96.7%
Married	9	30.0%	1	3.3%
Separated	0	0%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 3 reveals that most of the respondents are single both private and government hospitals with 96.7% (n=29) and 70.0% (n=21) respectively. The respondents who are married has a percentage of 30.0% (n=9) for government hospital nurses and 3.3% (n=1) for private hospital nurses while there is no separated status of nurses for both government and private hospitals with a percentage of 0% (n=0). This shows that most of the nurses regardless of gender are focused on being a career person, work attention and committed.

Table 4 shows that the contractual employment status of nurses in government hospital obtained the highest percentage of 63.3% (n=19) and the probationary employment status in private hospital earned a highest percentage of 53.3% (n=16). Both government and private hospitals nurses received almost same percentage on regular employment status with a percentage of 36.7% (n=11) and 46.7% (n=14) respectively. Having a contractual status whether in the government and private hospital are actually not allowed and there is already a law the hospital administration can be charged of hiring contractual workers. According to some government hospital nurses under contractual status there is a big chance for them to be hired and be on regular status. Nurses' working in a probationary status has a big chance to be employed or absorbed as regular base on the performance evaluation after a certain time.

**Table 4:-** Frequency distribution and percentage of respondents according to employment status.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Regular	11	36.7%	14	46.7%
Probationary	0	0%	16	53.3%
Contractual	19	63.3%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

**Table 5:-** Frequency distribution and percentage of respondents according to educational attainment.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
BSN	23	76.7%	27	90.0%
MAN	6	20.0%	1	3.3%
MAN with units	1	3.3%	2	6.7%
PhD with units	0	0%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 5 presents the frequency distribution and percentage according to educational attainment. It illustrates that BSN obtained the highest respondents' educational attainment for both government and private hospital with a percentage of 90.0% (n=27) for private hospital nurses and 76.7% (n=23) for government hospital nurses. Respondent with MAN is 20.0% (n=6) for government hospital nurses and 3.3% (n=1) for private hospital nurses;

3.3% (n=1) for government hospital nurses and 6.7% (n=2) for private hospital nurses with units in MAN. Both government and private hospital nurses has no yet PhD holder.

Nurses in the government are more attentive to “self-growth” than nurses in private hospital. Nurses should be encouraged to enter post graduate courses.

**Table 6:-** Frequency distribution and percentage of respondents according to Income.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Below 12k	4	13.3%	20	66.7%
12k – 15k	15	50.0%	8	26.7%
16k – 19k	0	0%	0	0%
20k – 25k	7	23.4%	2	6.6%
Above 25k	4	13.3%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 6 reflects that the 12k – 15k range of income of the respondents obtained the highest percentage of 50.0% (n=15) for government hospital nurses and below 12k range is for the private hospital nurses with a percentage of 66.7% (n=20). The range of 20k – 25k for government hospital nurses is 23.4% (n=7) and 6.6% (n=2) for private hospital nurses; above 25k range for government hospital nurses is 13.3% (n=4) and for private hospital nurses is 0.0% (n=0).

As might be expected, those respondents who indicated a relatively low income can be seen in the private hospital. Salary of nurses is significantly correlated with job satisfaction and commitment to work.

Table 7 shows that most of the respondents in government and private hospitals are nurse 1 with a percentage of 93.3% (n=28) in private hospital and 70.0% (n=21) in government hospital. Nurse Manager with a percentage of 23.3% (n=7) in government hospital and 0.0% (n=0) in private hospital. Both in government and private hospital has the same percentage of 6.7% (n=2) for Nurse Supervisor occupational position. Results revealed that the private sector had a higher number of staff nurses than nurse working in government hospital.

**Table 7:-** Frequency distribution and percentage of respondents according to Occupational position.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Staff Nurse (Nurse 1)	21	70.0%	28	93.3%
Nurse Manager (Nurse 2)	7	23.3%	0	0%
Nurse Supervisor (Nurse 3)	2	6.7%	2	6.7%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

**Table 8:-** Frequency distribution and percentage of respondents according to years in current position.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Below 1yr	1	3.3%	18	60.0%
1yr – 2yrs	8	26.7%	6	20.0%
3yrs – 4yrs	5	16.7%	3	10.0%
5yrs – 6yrs	7	23.3%	1	3.3%
Above 6 yrs	9	30.0%	2	6.7%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 8 reveals the frequency distribution and percentage of respondents according to years in current position, below 1 year got the highest for private hospital nurses with a percentage of 66.7% (n=18) and above 6 years range for government hospital nurses with a percentage of 30.0% (n=9). Both government and private hospital nurses placed second for the range of 1yr – 2yrs in current position with a percentage of 26.7% (n=8) for government hospital nurses and 20.0% (n=6) for private hospital nurses. I considered nurses in the private hospital are millennial nurses and those nurses working above 10 years or more are nurses who are loyal or committed to their job.

**Table 9:-** Frequency distribution and percentage of respondents according to years in current employer.

	Government		Private	
	Frequency	Percentage	Frequency	Percentage
Below 1yr	0	0%	20	66.7%
1yr – 2yrs	8	26.7%	10	33.3%
3yrs – 4yrs	7	23.3%	0	0%
5yrs – 6yrs	4	13.3%	0	0%
Above 6 yrs	11	36.7%	0	0%
<b>TOTAL</b>	<b>30</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

Table 9 reveals that the frequency distribution and percentage of respondents according to years in current employer government hospital nurses obtained highest which is 6 years and above with a percentage of 36.7% (n=11) and the lowest is the below 1 year range with a percentage of 0.0% (n=0). In the private hospital nurses the highest range is below 1 year with a percentage of 66.7% (n=20) and the lowest range is 3yrs – 4yrs, 5yrs – 6yrs and above 6 years range with a percentage of 0.0% (n=0) respectively.

Table 10 illustrates that indicator 2, “Offering opportunities to learn while working”, with the weighted mean of 4.46 ranked 1 in government hospital nurses while in the private hospital nurses, indicator 1, “Enabling staff to obtain new knowledge and techniques continuously while working”, with the weighted mean of 4.53 and indicator 2 with the weighted mean of 4.53 ranked 1.5 and 1.5 respectively. Indicator 4, “Providing the chance of trying new working methods while working”, got ranked 6 for both government and private hospital nurses with the weighted mean of 4.03 and 4.33 correspondingly.

Table 11 reveals that both government and private hospital nurses indicator 2 as rank 1, “Promoting quality life through work” with the weighted mean of 4.20 for government hospital nurses and 4.40 for private hospital nurses. Indicator 5, “Allowing staff through work to serve or improve society” with weighted mean of 4.00 ranked 5.5 and indicator 6, “Satisfying their personal ambition” with weighted mean of 4.00 ranked 5.6 for government hospital nurses, while indicator 5 ranked 6 for private hospital nurses with the weighted mean of 4.13.

**Table 10****Work Value****The organization allows me the opportunity of self growth by:**

	Government			Private		
	WM	VD	R	WM	VD	R
1. Enabling staff to obtain new knowledge and techniques continuously while working.	4.43	MI	2	4.53	MI	1.5
2. Offering opportunities to learn while working.	4.46	MI	1	4.53	MI	1.5
3. Encouraging staff to analyze and study things in depth while working.	4.16	I	3.5	4.36	MI	2.5
4. Providing the chance of trying new working methods while working	4.03	I	6	4.33	MI	6
5. Consenting to staff devoting oneself to a prospective task	4.10	I	5	4.36	MI	2.5
6. Permitting staff to fully create one’s own work career.	4.16	I	3.5	4.30	MI	5
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.22</b>	<b>MI</b>		<b>4.40</b>	<b>MI</b>	

Table 12 describes that the rank 1 indicator for government hospital nurses is indicator 1, “Feelings of achievement while working” with the weighted mean of 4.63 and for private hospital nurses, indicator 2, “Being responsible for specific task”, rank as 1 with the weighted mean of 4.70. Indicator 5, “Having total power of control while working”, ranked 6 for both government and private hospital nurses with the weighted mean of 3.93 and 3.90 respectively.

**Table 11:-** The organization provides me with the freedom for self realization by:

	Government			Private		
	WM	VD	R	WM	VD	R
1. Permitting staff to specialize within the job	4.03	I	2.5	4.36	MI	2
2. Promoting quality of life through work.	4.20	I	1	4.40	MI	1
3. Making one's life more colorful through work	4.03	I	2.5	4.20	I	3
4. Endorsing staff to contribute meaningfully to society	4.03	I	2.5	4.16	I	4.5
5. Allowing staff through work to serve or improve society	4.00	I	5.5	4.13	I	6
6. Satisfying their personal ambition	4.00	I	5.5	4.16	I	4.5
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.04</b>	<b>I</b>		<b>4.23</b>	<b>MI</b>	

Table 13 illustrates that for government and private hospital nurses, indicator 6, "Staff that can happily work together with colleagues to finish a job", ranked 1 with the weighted mean of 4.63 and 4.76 accordingly. While indicator 4 "Staff that work honestly and sincerely with co-workers ranked 6 with the weighted mean of 3.93 in government hospital nurses and indicator 5 "A lack of aggression or selfishness among colleagues", ranked 6 for private hospital nurses with the weighted mean of 4.43.

**Table 12:-** My self esteem is improved through organizational work by:

	Government			Private		
	WM	VD	R	WM	VD	R
1. Feelings of achievement while working	4.63	MI	1	4.63	MI	2
2. Being responsible for specific task	4.56	MI	2	4.70	MI	1
3. Gaining boss's full authorization while working	4.00	I	5	3.93	MI	4.5
4. Gaining self affirmation and self confidence through work	4.53	MI	3	4.53	MI	3
5. Having total power of control while working	3.93	I	6	3.90	I	6
6. Obtaining other person's affirmation through work	4.03	I	4	3.93	I	4.5
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.28</b>	<b>MI</b>		<b>4.27</b>	<b>MI</b>	

**Table 13:-** My friendship and social interaction are satisfied through organizational work by:

	Government			Private		
	WM	VD	R	WM	VD	R
1. The boss being considerate of employees	4.53	MI	3	4.46	MI	5
2. Colleagues taking care of each other	4.50	MI	4	4.60	MI	4
3. Colleagues who can get along harmoniously.	4.60	MI	2	4.63	I	2.5
4. Staff that work honestly and sincerely with co-workers	3.93	I	6	4.63	I	2.5
5. A lack of aggression or selfishness among colleagues	4.30	MI	5	4.43	I	6
6. Staff that can happily work together with colleagues to finish a job.	4.63	MI	1	4.76	I	1
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.41</b>	<b>MI</b>		<b>4.58</b>	<b>MI</b>	

**Table 14:-** Feel security, both financially and in my work when:

	Government			Private		
	WM	VD	R	WM	VD	R
1. Staff can get appropriate care while sick	4.33	MI	2	4.26	MI	5
2. The safety of employees is the most important aspect of work	4.43	MI	1	4.46	MI	2.5
3. The organization provides good insurance	4.13	I	6	4.20	I	6
4. Salary allocation is fair and reasonable	4.20	I	4.5	4.46	MI	2.5
5. Appropriate salary promotion is obtained	4.23	MI	3	4.46	MI	2.5
6. The organization provides a good staff benefit scheme	4.20	I	4.5	4.50	MI	1
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.25</b>	<b>MI</b>		<b>4.39</b>	<b>MI</b>	

Table 14 reflects that the indicator 3, “The organization provides good insurance” ranked 6 for both government and private hospital nurses with the weighted mean of 4.13 and 4.20 consequently. The indicator ranked as 1 is the indicator 2, “The safety of employees is the most important aspect of work”, for government hospital nurses with the weighted mean of 4.43 and for the private hospital nurses is the indicator 6, “The organization provides a good staff benefit scheme”, with the weighted mean of 4.5

Table 15 presents that the indicator 2, “One feels job secure”, ranked 1 for both government and private hospital nurses with the weighted mean of 4.30 and 4.60 correspondingly. Indicator 5, “One can be engaged in a full range of work, not monotonous and untidy”, ranked 6 with the weighted mean of 4.03 for the government hospital nurses while indicator 3, “One does not often feel stressful while at work”, with the weighted mean of 4.30 and indicator 6, “The individual does not have to deal with many complicated or alternatively trivial things at work”, with the weighted mean of 4.30 ranked 5.5 and 5.6 respectively

**Table 15:-** I feel relaxed and stable in my life when:

	Government			Private		
	WM	VD	R	WM	VD	R
1. Work ours fully correlate with one’s living schedule	4.20	I	4	4.53	MI	2
2. One feels job secure	4.30	MI	1	4.60	MI	1
3. One does not often feel stressful while at work	4.23	MI	2.5	4.30	MI	5.5
4. A variety of worry and anxiety derived from work competition can be avoided	4.23	MI	2.5	4.43	MI	3.5
5. One can be engaged in a full range of work, not monotonous and untidy.	4.03	I	6	4.43	MI	3.5
6. The individual does not have to deal with many complicated or alternatively trivial things at work	4.10	I	5	4.30	MI	5.5
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.18</b>	<b>I</b>		<b>4.43</b>	<b>MI</b>	

Table 16 shows that the ranked 1 indicator in government hospital nurses is indicator 5, “The individual is being engaged in outdoor activities or physical activities after work”, with the weighted mean of 4.30 and indicator 1, “Working under a non-harmful (no damage to physical and mental health) environment”, is for private hospital nurses with a weighted mean of 4.06. Indicator 2, “Flexible hours are provided allowing for more personal freedom”, with the weighted mean of 3.96 and

Indicator 5 with the weighted mean of 3.20 ranked 6 for government and private hospital nurses accordingly.

**Table 16:-** Access to work and opportunities for recreation are improved by my organization when:

	Government			Private		
	WM	VD	R	WM	VD	R
1. Working under a non harmful (no damage to physical and mental health) environment	4.26	MI	2	4.06	I	1
2. Flexible hours are provided allowing for more personal freedom	3.96	I	6	4.00	I	2
3. Longer annual vacation is provided, enabling the individual to pursue leisure activities	4.00	I	5	3.66	I	4.5
4. One can avoid traffic congestion and road rage while travelling to or from work	4.03	I	4	3.66	I	4.5
5. The individual is being engaged in outdoor activities or physical activities after work	4.30	MI	1	3.20	N	6
6. One's work place is close to home or easily accessible.	4.20	I	3	3.90	I	3
<b>AVERAGE WEIGHTED MEAN</b>	<b>4.12</b>	<b>I</b>		<b>3.74</b>	<b>I</b>	

Legend:

Scale value	Range Limits	Verbal Interpretation
5	4.50 – 5.00	Most important
4	3.50 – 4.49	Important
3	2.50 – 3.49	Neutral
2	1.50 – 2.49	Least Important
1	1.0 – 1.49	Not Important

**Specific Problem No.3 Job Involvement among nurses in government and private hospital****Table 17:-** Job Involvement.

	Government			Private		
	WM	VD	R	WM	VD	R
1. To me, my job is only a small part of who I am.	2.93	N	7	2.63	N	7
2. I am very much involved personally in my job.	3.70	A	1	3.80	A	2
3. Most of my interests are centered around my job	3.36	N	5	3.26	N	6
4. I have very strong ties with my present job which would be very difficult to break	3.56	A	2	3.76	A	3
5. I like to be absorbed in my job most of the time	3.46	A	3	3.66	A	5
6. Most of my personal life goals are job oriented	3.43	A	4	3.86	A	1
7. The most important things that happen to me involve my present job	3.26	N	6	3.73	A	4
<b>AVERAGE WEIGHTED MEAN</b>	<b>3.38</b>	<b>N</b>		<b>3.52</b>	<b>A</b>	

Legend

Scale value	Range Limits	Verbal Interpretation
5	4.50 – 5.00	strongly agree
4	3.50 – 4.49	Agree
3	2.50 – 3.49	Neutral

2	1.50 – 2.49	Disagree
1	1.00 – 1.49	strongly disagree

Table 17 shows that the indicator number 2, “I am very much involved personally in my job” obtained the highest weighted mean of 3.70 and ranked as number 1 for the government hospital nurses while the indicator 6, “Most of my personal life goals are job oriented” got a weighted mean of 3.86 and ranked as 1. The indicator 1, “To me, my job is only a small part of who I am” got a weighted mean of 2.93 and 2.63 for government hospital nurses and private hospital nurses respectively and ranked as 7 for both.

Table 18 reveals that both the government and private hospital nurses’ indicators have almost the same rank. The indicator 4, “I am proud to tell others that I am a part of this organization” and indicator 6, “I really care about the fate of this organization” has a weighted mean of 4.00 and ranked as 1.5 for both government and private hospital nurses. While the indicator 8, “Deciding to work for this organization was definite mistake on my part” ranked 10 for both government and private hospital nurses with a weighted mean of 2.86 and 2.06 correspondingly.

Table 19 shows the results of the hypothesis of the study that there is no significant difference on work values, job involvement and organizational commitment between the government hospital nurses and private hospital nurses. To further substantiate the foregoing findings, the researcher used chi-square to compare the response of the respondents group. Using 0.05 level of significance and 2 as the degree of freedom obtained, the researcher determined the  $X^2_{critical\ value}$  @ 5.99. This is the basis on whether to accept or reject the null hypothesis; that there is no significant difference on the work value, job involvement and organizational commitment between the private hospital nurses and government hospital nurses.

**Table 18:- Organizational Commitment.**

	Government			Private		
	WM	VD	R	WM	VD	R
1. I would accept almost any type of job assignment in order to keep working for this organization	3.66	A	5	3.53	A	5
2. I feel very little loyalty to this organization	3.16	N	9	2.70	N	9
3. I find that my values and he organization’s values are very similar	3.23	N	8	3.36	N	7
4. I am proud to tell others that I am part of this organization	4.00	A	1.5	4.00	A	1.5
5. This organization really inspires the very best in me the way of job performance.	3.76	A	3	3.83	A	3
6. I really care about the fate of this organization	4.00	A	1.5	4.00	A	1.5
7. For me this is the best of all possible organizations for which to work	3.53	A	6	3.40	N	6
8. Deciding to work for this organization was definite mistake on my part	2.86	N	10	2.06	DA	10
9. I am willing to put in a great deal of effort beyond that normally expected in order to help this organization be successful	3.73	A	4	3.73	A	4
10. Often, I find it difficult to agree with this organization’s policies on important matters relating to its employees	3.50	A	7	3.16	N	8
<b>AVERAGE WEIGHTED MEAN</b>	<b>3.54</b>	<b>A</b>		<b>3.37</b>	<b>N</b>	

Legend

Scale value	Range Limits	Verbal Interpretation
5	4.50 – 5.00	Strongly agree

4	3.50 – 4.49	Agree
3	2.50 – 3.49	Neutral
2	1.50 – 2.49	Disagree
1	1.00 – 1.49	Strongly disagree

**Table 19:-** There is no significant difference on work value, job involvement and organizational commitment between private hospital nurses and government hospital nurses.

Hospital nurses Compared	X <sup>2</sup> test	X <sup>2</sup> = computed value	Findings on Difference	Status of Hypothesis
Work value	5.99	6.01	Significant	Rejected
Job involvement	5.99	5.34	Not significant	Accepted
Organizational commitment	5.99	5.23	Not significant	Accepted

The hypothesis of there is no significant difference on work value, job involvement and organizational commitment between private hospital nurses and government hospital nurses. In the study it reveals that work value is significant with an X<sup>2</sup> computed value of 6.01 which is more than the X<sup>2</sup> critical value of 5.99. Therefore, the null hypothesis is rejected. This indicates that there is significant difference on the work value between the private hospital nurses and government hospital nurses.

There is no significant difference on job involvement and organizational commitment between private hospital nurses and government hospital nurses. In the study it reveals that job involvement and organizational commitment is not significant with an X<sup>2</sup> computed value of 5.34 and 5.23 respectively which is less than the X<sup>2</sup> critical value of 5.99. Therefore, the null hypothesis is rejected. This indicates that there is no significant difference on the job involvement and organizational commitment between the private hospital nurses and government hospital nurses.

### Implication

This study has implication for organization or hospital attempting enhances organizational commitment through increase involvement. It is anticipated that by improving these various factors the outcome will be reduced turnover and absenteeism and more effective organization. A more effective organizational environment will be more conducive to nursing practice. This highlights also an implication to the nursing profession to provide a positive practice environment.

### Findings

#### A. Demographic Profile of the respondents

1. Most of the respondents are in the age range of 26-30 years old, 36.6 % and 50.0% for both government and private hospital nurses respectively and majority are females that are single in terms of their marital status. Contractual employment status is the majority among the respondents from government hospital nurses while probationary employment status is the majority among private hospital nurses.
2. Majority of the respondents are Bachelor of Science in nursing graduate with the salary from their work ranging 12k-15k for government hospital nurses and below 12k for private hospital nurses. Most of them are Staff Nurse 1 status in their work place. The survey shows that most of the respondents in government hospital nurses are above 6 years working in their employer and in their current position while in private hospital nurses are below 1 year working in their employer and in their current position.

#### B. Work Value among the respondents

1. The findings shows that in indicator 1 under the variable of Work Value, “Offering opportunities to learn while working” with the weighted mean of 4.46 and “Enabling staff to obtain new knowledge and techniques continuously while working” with the weighted mean of 4.53 for government and private hospital nurses respectively. While in indicator 2, “Promoting quality of life through work” is the highest for government and private hospital nurses with the weighted mean of 4.20 and 4.40 correspondingly. The indicator 3, “Feelings of



achievement while working” got highest with the weighted mean of 4.63 for government hospital nurses and “Being responsible for specific task” got highest for private hospital nurse with the weighted mean of 4.70.

2. The indicator 4, for both government and private hospital nurses, the “Staff that can happily work together with colleagues to finish a job” got the highest with the weighted mean of 4.63 and 4.76 respectively. While in the indicator 5, “The safety of employees is the most important aspect of work” with the weighted mean of 4.43 and “The organization provides a good staff benefit scheme” with the weighted mean of 4.50 got the highest for government and private hospital nurses accordingly. “One feels job secure” got the highest for indicator 6 for both government hospital nurses, with the weighted mean of 4.30, and private hospital nurses, with the weighted mean of 4.60. Lastly, “The individual is being engaged in outdoor activities of physical activities after work” and “Working under a non-harmful (no damage to physical and mental health environment) environment” got the highest for both government and private hospital nurses with the weighted mean of 4.30 and 4.06 respectively.

#### **C. Job Involvement among the respondents**

The findings of the survey show that the indicator 1, “I am very much involved personally in my job” got the highest ranking for the government hospital nurses with the weighted mean of 3.70. Indicator 6, “Most of my personal life goals are job oriented” is the highest for the private hospital nurses with the weighted mean of 3.86.

#### **D. Organizational Commitment among the respondents**

The findings reveals that the indicator 4, “I am proud to tell others that I am part of this organization” and indicator 6, “I really care about the fate of this organization”, got the highest rank with the weighted mean of 4.00 for both government and private hospital.

#### **Conclusions:-**

1. Majority of the respondents were between 26 – 30 years old, nurses in government and private hospital, female, single and bachelor’s degree holder.
2. More contractual nurses in the government hospital and probationary nurses in private hospital earning from 12k–15k range of income monthly.
3. The results on the identified work values, job involvement and organizational commitment among nurses in government and private hospital were; for work values government nurses obtained a average weighted mean value of  $x = 4.21$  and nurses from private hospital obtained a average weighted mean value of  $x = 4.38$ . Variables of job involvement for government nurses got a average weighted mean value of  $x = 3.38$  and nurses from private hospital has an average weighted mean of  $x = 3.52$ . the last variables which is organizational commitment government hospital obtained an average weighted mean value of  $x = 3.54$  and private hospital got an average weighted mean value of  $x = 3.37$ .
4. Studies revealed that there is no significant difference on the job involvement and organizational commitment among nurses from government and private hospital and there is significant difference on the work value between the nurses in government and private hospital.

#### **Recommendations:-**

Based on the data and findings gathered in this study the researcher had the following recommendations

1. Hospital administrator should be taken into account the work values of their nurses or employees so as to prevent the nurse’s absenteeism and tardiness.
2. Provide in-service continuing educational or training program to enhance professional development for the nurses.
3. Administration should also make sure that the working environment of the nurses is meaningful, harmonious and interesting for continuous job involvement of the individual.
4. Administrator should have a regular evaluation on the performance of the existing nurses and employees. Always provide feedback about the work accomplished.
5. Nurse Managers should include supportive relation with superiors and co-workers. Always acknowledge nurse’s accomplishment to increase self-confidence to make them more interested in their work environment and to maintain work value into their self.
6. Hospital administrator should find time to assess the needs of their staff to avoid occurrence of problems on personnel
7. That the study be replicated by future researchers taking into consideration the following revisions: that the number of respondents be increased.