

# WORK RELATED STRESS MANAGEMENT AND THE PERFORMANCE OF WORKERS IN PUBLIC HEALTH FACILITIES IN KWARA STATE, NIGERIA

Dr. Rahman Mustapha<sup>1</sup>, Oladimeji Issa Sa'ad Aluko<sup>2</sup>, Dr. Zekeri Abu<sup>3</sup>  
[rahman.mustapha@kwasu.edu.ng](mailto:rahman.mustapha@kwasu.edu.ng)<sup>1</sup>, [dimejialuko123@gmail.com](mailto:dimejialuko123@gmail.com)<sup>2</sup>,  
[zekeri.abu@kwasu.edu.ng](mailto:zekeri.abu@kwasu.edu.ng)<sup>3</sup>  
Kwara State University, Malete<sup>1, 2&3</sup>

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## Abstract

*This study aimed to address the perceived high levels of stress among healthcare workers in public health facilities in Kwara State, Nigeria, and the impact this has on their performance. The study sought to evaluate the relationship between role congruence and organizational culture. The study was conducted on 2,139 healthcare workers from 46 hospitals managed by the Kwara State Hospital Management Board in Nigeria. A multistage sampling technique was used to select participants, and a sample size of 326 was calculated. Closed-ended questionnaires were used for data collection, and descriptive and inferential statistical procedures were used to analyze the data, including SEM and multiple regression analysis. SPSS version 25 and SmartPLS version 3 were used for data analysis. According to the study, 326 questionnaires were distributed to respondents and a 98% response rate was achieved. The results showed that role congruence and employee recognition had a positive effect on the performance of healthcare workers. The study recommends that healthcare managers should ensure that the roles and responsibilities of healthcare workers are clearly defined, and that employee recognition should be a regular practice in healthcare organizations. Managers should also ensure that the organizational culture is conducive for effective performance. This study adds to the existing knowledge of the relationship between work-related stress, employee attitude, and organizational culture on the performance of healthcare workers. The findings of this study provide valuable insights for healthcare managers, policymakers, and researchers on the importance of role congruence and employee recognition in enhancing the performance of healthcare workers in public health facilities in Kwara State, Nigeria.*

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## Introduction

Healthcare institutions in Nigeria, particularly public health facilities, are characterized by massive expansion and high rate of patients' patronage. The likely effects of this include; increased workload for healthcare workers, increased pressure, a sense of powerlessness conflicting demands, organizational change, and a high degree of uncertainty. Within the internal environment of the workplace, physical conditions can also trigger stress (Rashid and Zimring, 2008). For instance, excessive noise within the workplace can cause physical and behavioral problems as many public health facilities are located in highly congested and unsafe environment. Excessive noise in the workplace, for example, can lead to

physical and behavioral issues. Severe vibration at high levels can have similar effects. Stress can also be triggered by hot, humid conditions and the constant presence of hazardous substances or other hazards.

Work related stress is defined as employees' reaction to job demands and pressures that are incompatible with their knowledge, interests, skills, and abilities (Aghamohammadi et al., 2022) and has an impact on their ability to cope. Stress can arise in a variety of work situations, but it is exacerbated when employees believe they have little or no control over work processes. It refers to pressure or tension that people experience whilst discharging their daily responsibilities at work. It is regarded as important intricate, influencing

employees' wellbeing and quality of life. It has a significant impact on behavior of employees both within the organization and their personal lives, stemming from motivation and job satisfaction (Belwalkar et al., 2018). Equally it causes a variety of psychological issues such as rage, depression, anxiety, irritability, and tension (Bhujade, 2017). However, with the growing demand for services and higher expectations from consumers, workplace related stress becomes a huge factor to be reckoned with, in the context of healthcare workers' motivation and commitment.

The Nigeria's universal health coverage drive has been befuddled by various challenges ranging from poor infrastructure, low population coverage, supply-side inadequacies, limited fiscal provision, and bureaucratic bottlenecks to a lack of required political will. As a result, many families are financing their healthcare needs through regressive out-of-pocket payment systems. The National Health Accounts in Nigeria which is officially saddled with the responsibility of tracking expenditure in healthcare revealed that over 70% of households' expense on medi-care is done through this inequitable system called out of pocket expenditure. The above figure is far above the 20-30 per cent acceptable threshold set by World Health Organization (WHO). The implication of this is that households are the one shouldering the burden of healthcare spending in Nigeria contrary to the universal health coverage guiding principle that places much emphasis on public spending which includes but not limited to social health insurance, drug revolving scheme, health tax and so on. Also, the timely disbursement of allocated funds from the consolidated revenue fund account which is being referred to as healthcare provision fund to the sub-national governments would also help in this direction. The introduction of the State health

insurance scheme by the Kwara State government on the 12th of July 2018 has also contributed to the work load of healthcare workers as a result of increasing patients' demands due to higher awareness and affordable costs of treatment and medication.

### **Statement of the Problem**

Work related stress in healthcare service business environment arises in wide ranging work situations but become worsen when employees sense they have little or no control over the processes. It can be triggered by poor work design, lack of recognition, rigid bureaucratic structure that is highly pervasive in the public service sector in Nigeria etc. Problems usually arise when employee's personal attributes or characteristics are not in synchronization with the demands of the job. Employees, especially healthcare workers feel dissatisfied on their jobs when their professional role conflicts with their tasks.

Absence of connection between employees' traits, skills and behavior on job contents and requirements brings lack of satisfaction and this is largely due to inadequate personnel in specialized medical areas which have created many gaps that needed to be filled by other specialists within the hospital environment. Medical tourism due to poor welfare package in terms of wage and benefits have caused a lot of brain drain for medical and health professionals to seek greener pastures abroad. These set of health professionals are frustrated and dissatisfied by the work environment that is hostile and unrewarding to say the least. Consequently, health seeking behavior of Kwarans due to increased confidence in public hospitals has particularly grown exponentially in the last 5 years, leading to increased work load on public hospital employees. On the other hand, Level of awareness amongst patients through endless information on social media, resulting to more difficult and

un-cooperating patients attending our services account for over 30 % increase; this further exacerbates demand on health workers, both in terms of work load and knowledge base. As it will be appreciated, information on social media (rightly or wrongly), usually give most of the attending patients source of information that usually lead to more questioning and curiosity, that further increase time spent between patients, leading to mounting pressure from the backlog of patients waiting to be seen. Government's provision and indeed implementation for training and retraining of staff to help meet the increasing demand of patients is simply not available or grossly inadequate, leading to increase in level or role congruence amongst these group of staff.

### **Research Question**

- i. What is the relationships that exist between role congruence, organizational culture and the performance of healthcare workers in public health facilities in Kwara State, Nigeria?

### **Research Objective**

- i. Evaluate the relationship between role congruence and organizational culture on the performance of healthcare workers in public health facilities in Kwara State, Nigeria.

### **Research Hypothesis**

Ho: There is no significant relationship between role congruence, organizational culture and performance of healthcare workers in public health facilities in Kwara State, Nigeria.

### **Literature Review**

#### **Concept of Stress Management**

Stress management in the healthcare sector refers to the strategies and techniques used to help healthcare workers cope with the high levels of stress and burnout that are peculiar to healthcare industry.

Literature reviews on stress management in healthcare sectors are usually focused on the prevalence of stress and burnout among healthcare workers, and the impact of stress on their physical and mental health. It may also focus on the most effective stress management interventions, such as mindfulness-based stress reduction, cognitive-behavioral therapy, and support groups, as well as those factors that contribute to the effectiveness of these interventions, such as timing and frequency of the interventions and the specific stressors being targeted (Lukan et al., 2022).

Stress management in health management sectors also include the impact of stress management on quality of patient care, as well as the overall functioning of the healthcare organization. Research may show that when healthcare workers are able to manage their stress effectively, they are more likely to provide high-quality care, resulting in better patient outcomes and also the healthcare organizations are more likely to be effective and efficient (Odigies, 2016).

Impact on Performance of Workers in Public Health Facilities Stress can have a significant impact on the performance of workers in public health facilities. Excessive or prolonged stress can lead to decreased job satisfaction, reduced motivation, and increased absenteeism, which can negatively impact the quality of care provided to patients (Seo et al., 2018). In a study by Poursadeghiyan et al., (2016), the authors found that workers in public health facilities in Iran who engaged in stress management strategies had higher levels of job satisfaction and lower levels of stress compared to those who did not engage in stress management.

#### **Concept of Role Congruence**

Role congruence in the health sector refers to the alignment of an individual's personal values and beliefs with the role

and responsibilities of their job within the health sector. When role congruence is present, an individual is more likely to be satisfied with their job and to perform it effectively.

A literature review on role congruence in the health sector focused on the relationship between role congruence and job satisfaction, turnover, and performance among healthcare professionals, such as doctors, nurses, and other practitioners. Studies may also investigate factors that contribute to role congruence among healthcare professionals, such as the alignment of personal values with organizational values, the degree of autonomy in the job, and the level of support from supervisors and colleagues (Thatcher et al., 2018; Sain & Meena, 2016; Osibanjo et al., 2016).

Role congruent is equally having a strong relationship with level of knowledge. Confidence at what they do stems from training and years of experience. The more knowledgeable a healthcare employee is, a more congruent and comfortable they are around patients, thereby increasing performance and patient outcome. In Nigerian and indeed in Kwara, there are limited numbers of in-service training slots available for healthcare workers, due to acute shortage of staff and high attrition rate. According to a study by Khamisa et al., (2015), the lack of training can lead to a feeling of incompetence, which can result in stress and decrease in performance.

Hospitals are generally expected to render quality and prompt service delivery to their patients but this is highly dependent on the caliber of healthcare workers who, to a large extent, determine the quality of services the patients receive. Notably, resident doctors and other healthcare workers play important roles in achieving the institutions' goals and objectives. But healthcare workers in hospitals may

sometimes be burdened with the heavy workloads of providing quality service delivery to the community (Yakasai et al., 2013). In most public health facilities in Kwara State, like any other health institutions in Nigeria, much premium are placed on the doctors' performance, particularly in areas relating to proper clinical diagnosis, maintaining the confidentiality of patients, ensuring a good relationship between colleagues and patients and accountability for any course of action in the organization. To sustain the expected high level of effectiveness in job performance, resident doctors would need a conducive environment such as call rooms and well-lighted environment aside from other motivating factors like good pay, job security, and the chances of promotion (Ogunnubi et al., 2018). Sometimes, when the working environment and other factors mentioned above are lacking or inadequate they may affect job performance or even lead to industrial action, strikes and the lives of the patients in the community that they render services to will be in danger.

### **Concept of Employees' Performance**

Employee performance is the ability to achieve the set objectives within the required timelines and parameters (Yusuf et al., 2014). Having regards to employee performance, Raza (2023) proposed five primary criteria that could be used to measure performance, example: work quality, individual relationship, timeliness and work independence.

A lot of researchers focused on the relationship linking job performance and satisfaction in the area of organizational psychology and found out that the employee's performance depended on employee's satisfaction. This indicated that great employee performance can be achieved by a high level of job satisfaction. Yahaya et al., (2010) concluded that for the employees to

remain motivated as well as to boost their jobs satisfaction, the employers should provide a good environment.

Employee performance refers to how their workers behave in the workplace and how well they perform their job/duties you have obligated to them. Companies typically set, performance targets for individual employees and the company as a whole, relative to their KPI, in hopes that the business offers good value to customers whilst minimizing waste and promoting efficient service operations (Bakker, 2011). According to Yakasai (2013), stress puts a negative pressure on employee, as employees in stress cannot meet the expectation of their organization. This is as a result of having to confront physical, psychological and organizational burnouts. Ishmael and Hong (2011) describe employees in a service driven organization like hospitals to be subjected to a high degree of work-related stress, which is the major reasons for health workers' poor performance on their job in most cases, especially in the developing countries where there is so much infrastructural deficit. Job stress mostly affects female employee's wellbeing negatively which creates dissatisfaction and negative emotions towards work and ultimately a decrease in performance level.

### **Empirical Review**

Challinor et al (2020) in their work titled Stress in nursing graduates and healthcare assistants in surgical areas of hospital in Ghana. To analyse the stress level amongst Nursing Graduates and Healthcare Assistants in surgical areas of the Public Hospitals in Gran Canaria quantitative descriptive/ observational statistics was used for the study. Result of findings reveals that workers and Nursing Graduates from the aforementioned units show a moderate level of stress, but institutions should intervene to minimize it as much as possible

Jabar, and Jasim (2021) in their work titled job stress among Nurses at Critical Care Units in Medical City Complex Hospitals in Baghdad City, Iraq. The objective of the study was conducted among nurses of the critical care units in the medical complex city to evaluate job stress. Analysis and data collection was done using descriptive study. The result of findings reveals that, all staff nurses working in critical care unit suffer from stress; that nurses working in critical care units are experiencing severe level of job stress (71%).

Olaitan et al., (2014) worked on the occupational stress coping strategies among lecturers in Ilorin metropolis, Nigeria. The study investigated occupational stress coping strategies among lecturers in Ilorin metropolis. The study adopted descriptive research design for data collection and analysis. Findings revealed that lecturers should participate in exercise activities for enjoyment and as occupational stress relief. Anyanwu et al., (2015) worked on Occupational Stress and Management Strategies of Secondary School principals in Cross River State, Nigeria. The study aimed at finding out sources and symptoms of occupational stress and management strategies of principals in secondary schools in Cross River State. It adopted descriptive Survey and Research Design. Findings of result revealed that poor working environment, pressure from teachers, etc. affect the performance of principals irrespective of gender

Asom and Terhemba (2012) similarly conducted a study on stress and its management. The population of the study was 510 which include 20 State Executive Members, 30 Members of the State Assembly, 23 Local Government Chairman, 161 Members of the Local Government Executive and 276 representative Members of the Local Government wards in Benue state. A purposive sampling technique was used,

while adopting the questionnaires and interviews as means of data collection. The findings revealed that 16.7% of the population was attributed to catastrophic stressors, which include trauma, Low pay, and promotion problem, threat of redundancy, job insecurity, emotional breakdown and marriage problems. 50% is attributed to Daily Hassles stressors which include change in working hours, feeling of lack of control, conflict at work, long hours of working, work shifts, sensory factors such as noise, factors of the job itself, long hours of meeting, poor social skills, low emotional intelligence, Bullying at work, homework intervals and poor supervisory skill. 33.3% is attributed to major life changes stressors which include lack of recognition, Autocratic leadership, sexual harassment, Ageism, New management techniques, heavy work load, career development and achievement factors, employee lack of control, lack of job satisfaction. The study concludes that prolonged effects of stress are totally debilitating and often culminate in zero productivity, or death. The study recommended that the victims of anxiety and stress are advised to adopt as much as possible to avoid any form of stress, to also identify it and deal with it so as to have a positive, responsible and

dutiful attitude towards your job, no matter what it entails.

### Methodology

The study made use of case study design approach through a descriptive analysis. The population of study comprised of 2,139 members of staff across the 46 hospitals owned by the Kwara State government including all the cadres of staff; medical doctors and all other healthcare workers under the management of the Kwara State Hospital Management Board (HMB). This study used a multistage sampling that combines different techniques. At first, the study employed stratification and select a cluster out of the strata. Subsequently, second stage clusters were identified by choosing departments. Third, the selection ended with staff randomly chosen from the departments, after phases have been observed. The study sample size for the study was determined by using Raosoft sample size calculator. A sample size of 326 was discovered at the confidence level of 95% with a margin of error of 5%. The quantitative (numeric) data collected was analysed through descriptive such as frequency counts, simple percentages and inferential statistics procedures (using SEM and Multiple Regression Analysis).

## Data Analysis and Results

### Descriptive Statistics

**Table 4.7 Role Congruence Descriptive Statistics**

|  | N   | Mean   | Std. Deviation | Skewness | Std. Error | Kurtosis | Std. Error |
|--|-----|--------|----------------|----------|------------|----------|------------|
| My behavior in different roles is consistent.            | 317 | 3.6309 | .98053         | -.847    | .137       | .233     | .273       |
| My attitudes in different roles are similar.             | 317 | 3.9937 | .93115         | -1.597   | .137       | 3.148    | .273       |
| My self-concept is consistent across my different roles. | 317 | 4.0915 | .91463         | -1.481   | .137       | 2.723    | .273       |

|  |     |        |         |        |      |       |      |
|--|-----|--------|---------|--------|------|-------|------|
| I am able to balance my different roles effectively. | 317 | 4.0852 | .82043  | -1.647 | .137 | 4.339 | .273 |
| I feel a sense of coherence in my different roles.   | 317 | 3.5868 | 1.10073 | -.659  | .137 | -.552 | .273 |
| I am given manageable workloads.                     | 317 | 3.8139 | 1.07624 | -.865  | .137 | -.056 | .273 |
| Valid N (listwise)                                   | 317 |        |         |        |      |       |      |

Table 4.7 above shows the question items on the role congruence indicate that the skewness values of a number of items were outside the narrow range of +1 to -1, as reported by Lewis-Becket al., (2004), and the +3 to -3 range of kurtosis, as reported by Hair (2017). The mean statistics equally revealed a high value ranging from 3.6 to 4.1 which is above the rule of thumb of 3.5. This

implies that, this does not pose a problem for the analysis as PLS-SEM does not require any normality assumptions (Hair et al., 2017; Tehseenet al., 2017), thus question items on role congruence are robust for application of PLS-SEM. This further reinforces the choice of using PLS-SEM to estimate the inner and outer model parameters in this study.

**Table 1: Organizational Culture Descriptive Statistics**

|   | N         | Mean      | Std. Deviation | Skewness  | Std. Error | Kurtosis  | Std. Error |
|---|-----------|-----------|----------------|-----------|------------|-----------|------------|
|   | Statistic | Statistic | Statistic      | Statistic | Statistic  | Statistic | Statistic  |
| I feel that the management team promotes and supports a positive organizational culture among healthcare workers. | 317       | 3.9274    | .97975         | -1.235    | .137       | 1.583     | .273       |
| I feel that the management team is transparent and open in their communication with healthcare workers.           | 317       | 3.7319    | .96818         | -1.041    | .137       | 1.080     | .273       |
| I feel that the management team encourages and facilitates collaboration among healthcare workers.                | 317       | 3.5647    | 1.05231        | -1.008    | .137       | .176      | .273       |
| I feel that the management team is responsive to the needs and concerns of healthcare workers.                    | 317       | 3.9842    | .88397         | -1.297    | .137       | 2.364     | .273       |
| I feel that the management team is effective in leading and managing the healthcare workers.                      | 317       | 3.8959    | 1.04876        | -1.132    | .137       | 1.007     | .273       |
| The physical working conditions are pleasant  | 317       | 3.3344    | 1.16455        | -.266     | .137       | -1.112    | .273       |
| Valid N (listwise)  | 317       |           |                |           |            |           |            |

Table 4.8 revealed that the question items on the organizational culture indicate that the skewness values of a number of items were outside the narrow range of +1 to -1, as reported by Lewis-Becket al., (2004), and the +3 to -3 range of kurtosis, as reported by Hair (2017). The mean statistics equally revealed a high value ranging from 3.6 to 4.0 which is above the rule of thumb

of 3.5. This implies that, this does not pose a problem for the analysis as PLS-SEM does not require any normality assumptions (Hair et al., 2017; Tehseenet al., 2017), thus question items on organizational culture are robust for application of PLS-SEM. This further reinforces the choice of using PLS-SEM to estimate the inner and outer model parameters in this study.

**Table 2: Employee Performance Descriptive Statistics**

|  | N         | Mean      | Std. Deviation | Skewness  | Std. Error | Kurtosis  | Std. Error |
|--|-----------|-----------|----------------|-----------|------------|-----------|------------|
|  | Statistic | Statistic | Statistic      | Statistic | Statistic  | Statistic | Statistic  |
| The healthcare worker demonstrates a high level of clinical competence.      | 317       | 3.7129    | 1.11503        | -.738     | .137       | -.379     | .273       |
| The healthcare worker effectively communicates with patients and colleagues. | 317       | 3.9748    | .85277         | -1.030    | .137       | 1.538     | .273       |
| The healthcare worker consistently provides high-quality care.               | 317       | 3.7918    | .85732         | -.829     | .137       | .914      | .273       |
| The healthcare worker demonstrates a strong work ethic.                      | 317       | 3.5931    | .97192         | -.941     | .137       | .138      | .273       |
| The healthcare worker is able to work well under pressure.                   | 317       | 4.0505    | .83285         | -1.385    | .137       | 3.188     | .273       |
| Valid N (listwise)   | 317       |           |                |           |            |           |            |

Table 4.9 indicated that the question items on the employee performance indicate that the skewness values of a number of items were outside the narrow range of +1 to -1, as reported by Lewis-Becket al., (2004), and the +3 to -3 range of kurtosis, as reported by Hair (2017). The mean statistics equally revealed a high value ranging from 3.6 to 4.0 which is above the rule of thumb of 3.5. This implies that, this does not pose a problem for the analysis as PLS-SEM does not require any normality assumptions (Hair et al., 2017; Tehseenet al., 2017), thus question items

on employee performance are robust for application of PLS-SEM. This further reinforces the choice of using PLS-SEM to estimate the inner and outer model parameters in this study.

### Test of Hypotheses

#### Measurement Model Assessment

H<sub>01</sub>: There is no significant relationship between role congruence, employee commitment and performance of healthcare workers in public health facilities in Kwara State, Nigeria;

### Coefficient of Determination

From the result presented, the outer loadings of the Construct items are higher than the 0.708 recommended. More so, the Cronbach's Alpha (CA) and the Construct Reliability (CR) of the

performance constructs were all higher than the 0.7 minimum thresholds. However, the convergent validity measured by the Average Variance Extracted showed that all the latent constructs have values below the minimum 0.5 thresholds.

**Table 3: Average Variance Extracted**

|     | Cronbach's alpha | Composite reliability (rho_a) | Composite reliability (rho_c) | Average variance extracted (AVE) |
|-----|------------------|-------------------------------|-------------------------------|----------------------------------|
| OC  | 0.591            | 0.603                         | 0.766                         | 0.454                            |
| PEF | 0.723            | 0.788                         | 0.806                         | 0.470                            |
| RC  | 0.619            | 0.657                         | 0.729                         | 0.332                            |

### Discriminant Validity Assessment

The results of the Heterotrait and Monotrait (HTMT) analysis indicate that the values of the constructs were below the 90th percentile threshold, which meets the HTMT.90 criterion

outlined by Goldet al., (2001). This suggests that there is sufficient evidence to support the conclusion that the model demonstrates satisfactory discriminant validity. Based on this, it can be concluded that there are no issues of discriminant validity in the model.

**Table 4: Discriminant Validity (HTMT Criterion)**

|            | Heterotrait-monotrait ratio (HTMT) |
|------------|------------------------------------|
| PEF <-> OC | 0.533                              |
| RC <-> OC  | 0.976                              |
| RC <-> PEF | 0.369                              |

Source: SmartPLS Output

### Structural Model Assessments

Based on the hypotheses stated, the result showed that the relationship between role congruence and organizational culture have positively and significantly impacted on employee

performance ( $\beta = 0.340$ ,  $t = 4.361$ ,  $p < 0.000$ ), therefore hypothesis H1 is confirmed. However, role congruence alone does not significantly affect employee performance ( $\beta = 0.038$ ,  $t = 0.418$ ,  $p < 0.676$ ).

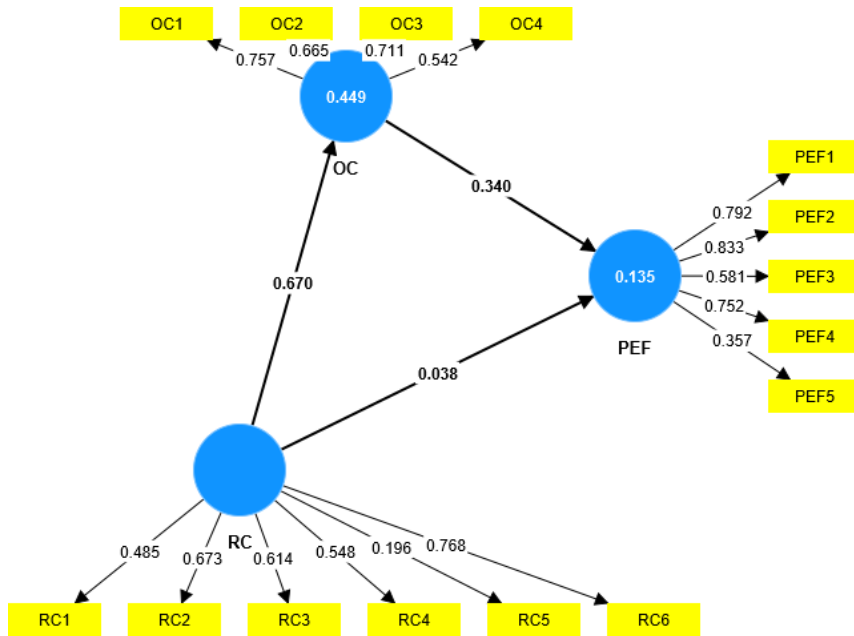


Fig. 1: Structural Model Assessment

Table 5: Hypothesis Testing

|           | Original sample (O) | Sample mean (M) | Standard deviation (STDEV) | T statistics ( O/STDEV ) | P values |
|-----------|---------------------|-----------------|----------------------------|--------------------------|----------|
| OC PEF -> | 0.340               | 0.347           | 0.078                      | 4.361                    | 0.000    |
| RC OC ->  | 0.670               | 0.676           | 0.031                      | 21.472                   | 0.000    |
| RC PEF -> | 0.038               | 0.045           | 0.092                      | 0.418                    | 0.676    |

Source: SmartPLS Bootstrapping at 5000 resamples output

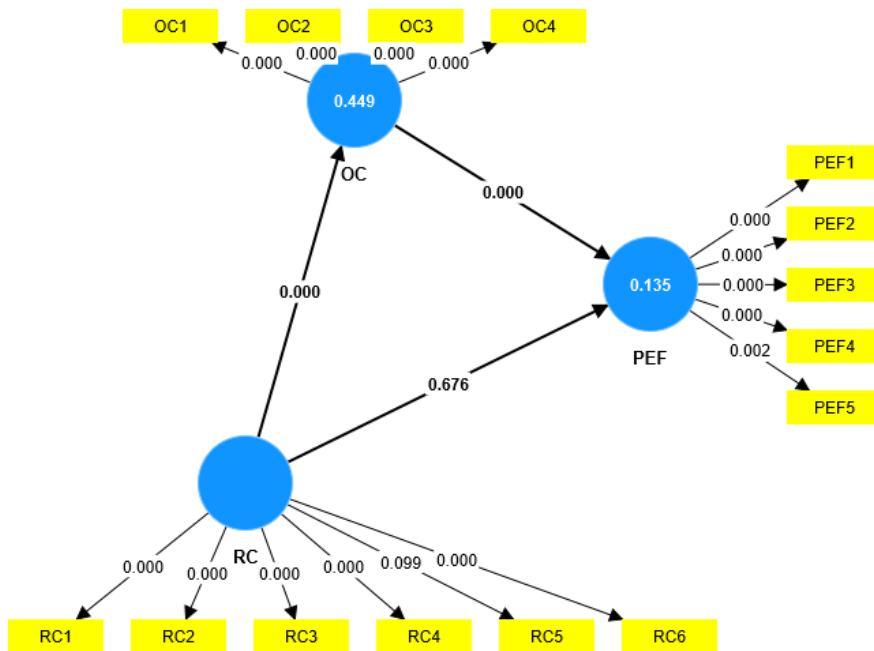


Figure 3 Structural Model Result

**Table 6: Coefficient of Determination**

|     | R-square | R-square adjusted |
|-----|----------|-------------------|
| OC  | 0.449    | 0.448             |
| PEF | 0.135    | 0.129             |

The R2 statistics of the PLS algorithm report, is a measure of the strength of the relationship between the endogenous constructs in the model. It is also known as the model's ability to predict outcomes based on the available data, with values ranging from 0 to 1. A higher R2 value indicates a more

accurate predictive model. According to research, an R2 value of 0.135 is considered to be moderate. The R2 values were obtained using the SmartPLS algorithm and the t-values were generated by the bootstrapping function.

### Effect Sizes

Table 7: The Effect Sizes ( $f^2$ )

|     | OC    | PEF   | RC |
|-----|-------|-------|----|
| OC  |       | 0.074 |    |
| PEF |       |       |    |
| RC  | 0.816 | 0.001 |    |

The  $f^2$  statistic is a measure of the impact of the exogenous constructs on the overall R2 value of the model. Cohen (1992) has suggested that effect sizes can be categorized as small, medium, or large. The results showed that there is a small effect size between the relationship of Organizational Culture and role congruence on employee performance.

### Conclusion and Recommendations

The results showed that role congruence and employee recognition had a positive effect on the performance of healthcare workers. The study recommends that healthcare managers should ensure that the roles and responsibilities of healthcare workers are clearly defined, and that employee recognition should be a regular practice in healthcare organizations. Managers should also ensure that the organizational culture is conducive for effective performance.

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