

Job Stress and Turnover Intention through Employees' Job Attitude: Finding Out at District Hospital, Ho Chi Minh City

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Abstract- This study was conducted in a hospital environment for medical staff, to explore the relationship between job stress (JS) and turnover intention (TI) through the mediating role of job attitude, includes two factors: job satisfaction (SF) and organizational commitment (OC). At the same time, measured the impact of job stress and job attitude on employees' turnover intention. Thereby, we have proposed solutions to reduce stress, increase job satisfaction, employee commitment to the organization and reduce turnover intention. The research was conducted at District Hospital with qualitative research methods including in-depth interviews with 10 people, group discussions with 5 people and quantitative research methods with a sample of $n=220$. The authors used SPSS and AMOS software version 22.0 to process data. The results obtained in terms of reliability of the scales all satisfy Cronbach's Alpha coefficient >0.6 . EFA factor analysis obtained results $KMO=0.879>0.5$; $Sig=0.000<0.05$. The total variance extracted is $57.551\%>50\%$ and Eigen values $=1.605>1$. During EFA processing, the variables all achieved convergent and discriminate values. The CFA analysis process results in a critical (normalized) measurement model that had been suitable for the collected data and has statistical significance. Linear structural model (SEM) analysis showed that the hypothesized relationships in the theoretical model had a P-value significance level of less than 5%, reaching the necessary level of significance (at the 95% confidence level).

Keywords- Job stress, job satisfaction, organizational commitment, turnover intention.

I. INTRODUCTION

The activities of large or small businesses in general always need human resources. Human resources play a very important role in business operations (Nhan, 2021) and human resources are considered the most valuable asset of the organization because of business functions, carrying out transactions, communication and dealing with customers, would not be complete without human resources (Haslinda, 2009).

However, for health sector activities, human resources are employees operating in different clinical and non-clinical areas, responsible for public and individual health interventions (WHO, 2003) and

factors of culture, geography, working environment, stress, and work pressure greatly affect the ability to provide medical services, affecting the supply and demand of medical human resources (Zurn et al., 2004). Each profession is different, in general in business operations, human resources are facing pressure and stress at work. Stress has existed for a long time in society and by the beginning of the 21st Century, it has become more serious (Sharmin et al., 2017), and as the warning of Aqeel and Sher (2016) stated, job stress is an urgent warning situation in today's ever-evolving life.

Health care work is an industry that is often under heavy pressure and stress, always facing the boundary of life and death to save patients' lives.

Each operation, behavior, and technique of medical staff directly affects the patient's health directly and indirectly to human health and life, therefore, it is a long-term concern of the health sector of countries, even in normal times, when there is no crisis or pandemic. (Karabulak et al., 2021).

According to data on medical staff quitting their jobs on the Ministry of Health's website (2022), in the 18 months from January 1st, 2021 to June 30, 2022, the whole country had 9,680 medical staff quitting their jobs (Table 1).

Table 1. Number of medical staff resigning.

No.	Content	Quantity	Percentage
1	Doctor	3,094	32%
2	Nursing	2,874	30%
3	Medical engineering	551	6%
4	Midwives	276	3%
5	Pharmacy	593	6%
6	Other staff	2,292	24%
Nationwide		9,680	100%

Source: Compiled by the authors

Also on the Ministry of Health's Electronic Information Portal (2022) accessed on April 22, 2023, there were a large number of medical staff quitting their jobs from January 1st, 2021 to June 30, 2022 in provinces and cities nationwide. This is as follows (Table 2)

Table 2. Number of medical staff leaving work in provinces and cities

No.	Province/City	Quantity	%
1	Ho Chi Minh City	2,035	39%
2	Hanoi City	1,032	20%
3	Dong Nai	496	10%
4	Binh Duong	368	7%
5	An Giang	297	6%
6	Long An	266	5%
7	Da Nang City	248	5%
8	Can Tho City	238	5%
9	Dong Thap	204	4%

Source: Compiled by the authors

The above data is only calculated in some provinces and cities (Ministry of Health, 2022), showing that the fluctuation in medical staff resources is very large. At District Hospital, the medical staff, after a long and stressful time participating in the fight against the epidemic, they haven't had time to rest

yet and immediately continued the burden on his shoulders with the task of restoring medical examination and treatment functions to serve patients with post-covid-19 symptoms.

They must face the risks of disease progression, face with the workload and pressure from personal family and relatives, the pressure of professional responsibilities is too great for medical staff to endure at this time, some medical staff has asked for help, quitting their jobs at District Hospital. The number of quitting jobs is specifically is listed as follows:

From the period 2019-2022, the number of employees quitting is: 14 people in 2019, 16 people in 2020, 22 people in 2021, 26 people in 2022. The average turnover from 2019 to 2022 will be 19.5, corresponding to a percentage of 25%.

Based on the data published by the Ministry of Health in the provinces in Table 2, the unemployment rate of District Hospital from 2021 to 2022 compared to the data of the provinces, posted on the website of the Ministry of Health 2022, access April 22, 2023, The percentage of medical staff quitting at District Hospital compared to other provinces is accounting for 2% compared to Ho Chi Minh City, accounting for 5% compared to Hanoi City, 10% Dong Nai, 13% Binh Duong, 16% An Giang, 18% Long An, 19% Da Nang City, 20% Can Tho City and 24% Dong Thap.

With the data is compared by the authors above, it can be seen that the absenteeism rate of District Hospital is not too worrying. However, risk management in operations is also something that needs to be paid attention to by most people, all agencies and enterprises in business and production activities, especially those operating in the health sector. Because, good risk management will bring success (Kishk and Ukaga, 2008). In the healthcare industry, risk management is essential to minimize operational losses (Pretagostini et al., 2010). And in health sector operations, risk management for health sector human resources is something that must be paid attention to because it has a great impact on the overall operations of the unit (Noorian et al., 2022).

With the above presentations, there has been changing situation of human resources in the health

sector in general throughout the country. To manage risks and manage risks well in the operations of units in the health sector in general, this study aims to explore the relationship between job stress and employees' turnover intention through the behaviors of medical staff, the survey was conducted at District Hospital to obtain data, from that data, the authors analyzed using SPSS and AMOS software version 22.0, the authors proposed solutions in human resource management for medical staff, and at the same time, offer solutions for risk management in human resource activities for medical staff.

Thereby, helping the Board of Directors in the health sector in general, and District Hospital in particular, have more data and solutions for reference, in order to optimize operations, in order to bring higher efficiency in operations, and at the same time, avoid arising risks such as turnover of medical staff.

II. THEORETICAL FOUNDATIONS AND RESEARCH HYPOTHESES

1. Foundation theory

The article's authors used the following 4 theories for this research including (1) Need satisfaction theory (2) Social information processing theory, (3) Emotional event theory, (4) Theory of planned behavior.

2.1 Need satisfaction theory: In Need Satisfaction Theory (Salancik and Pfeffer, 1977), job attitudes are considered to be the mediator of the relationship between personal factors and behavior.

2.2 Environmental theory: Environmental theory includes the Social Information Processing Theory developed by Salancik and Pfeffer (1978) and the Emotional Event Theory developed by Weiss and Cropanzano (1996), which states that attitudes mediate the relationship between factors environmental and behavioral factors.

2.3 Theory of planned behavior: Theory of planned behavior, Ajzen (1985, 1991) presents the relationship between behavioral intention and behavior that can be understood and predicted by behavioral intention; behavioral intention shows its dependence depends on three factors: The individual's attitude toward a specific behavior; Subjective norms relate to behavioral performance and perceived level of behavioral control. Therefore,

behavior only changes when behavioral intentions change. The desire to change behavior can shape or change attitudes, subjective norms, and perceived behavioral control.

2. Job stress and turnover intention:

Turnover is a consequence of industries with high levels of work stress (Dagget et al., 2016a). High job stress can easily cause employees to burn out and quit their jobs (Salvarani et al., 2019). Tabur and colleagues (2022) suggest that in hospitals with the COVID-19 pandemic, workload is high, employees are more stressed at work, and this positively impacts their intention to leave. Similarly, George Ochieng (2021); Said and colleagues (2021) also find that in the context of a hospital during the COVID-19 pandemic, nurses' stress, exhaustion, and fear of the epidemic increased their turnover intention.

Research by Bautista and colleagues (2019) has shown that, for medical and nursing staff, the main cause of work stress is workload, which positively impacts intention give up work (Bautista et al., 2019; Lo et al., 2018). Thus, there is a relationship between job stress and turnover intention. Reviewing research in the medical field, there is a positive relationship between job stress and turnover intention among medical staff with aspects of job stress related to workload, conflict, and job stress. Conflict and stress at work. Conflict and strife. Role conflict, family factors and the work environment have a certain influence on medical staff's turnover intention their job. Quit their job. Chao et al (2015), Thuy Van et al (2023) Inheriting previous research results, work stress has a positive impact on turnover intention, the author proposes:

H1: Stress at work has a proportional effect on turnover intention.

3. Job Stress, turnover intention comes from dissatisfaction with job:

Said et al.'s (2021) research and statement on nurses working on the front lines during the COVID-19 pandemic, he discovered the relationship between work stress and turnover intention through Job satisfaction is when employees' job stress is high, their job satisfaction is low and their turnover intention (Said et al., 2021). With the findings of Bautista and colleagues (2019) for medical staff and nurses in normal conditions and contexts without a pandemic, the results also share the same main

cause of work stress: Workload and workload itself impact and reduce job satisfaction, increasing turnover intention (Bautista et al., 2019). And stressful work relationships affect the intention to leave work through employees' job satisfaction or depressed mood (Lo et al., 2018). With Chao and colleagues (2015), there is an inverse relationship between work stress and job satisfaction of dental health workers. High job satisfaction leads to higher job performance. Work also improved and the turnover rate was reduced (Chao et al., 2015). To address medical staff turnover, Chao et al (2015) also proposed improving job satisfaction through factors related to a reasonable promotion system and annual salary for employees. Employees, adjusting working hours for employees.

Employee job satisfaction, managers can promptly grasp the employee's turnover intention through the employee's expression and attitude. Job stress impacts and reduces job satisfaction, increasing employees' turnover intention (Bautista et al., 2019) and the higher job satisfaction, the better job performance. Improve and reduce the turnover rate among medical staff (Chao et al., 2015).

In the context of the post-epidemic prevention period at a district public hospital in Ho Chi Minh City, the author of the thesis proposes to test the relationship between work stress and turnover intention through satisfaction. Satisfaction at work with hypotheses H2 and H3 as follows:

- H2: Job Stress has an inverse effect on job satisfaction.
- H3: Job satisfaction has an inverse effect on turnover intention.

4. Job stress, turnover intention through organizational commitment:

Organizational commitment and job satisfaction are two main contents of the concept of job attitude (Judge et al., 2017; Wohlers et al., 2019; Thuy Van et al., 2023). Besides showing satisfaction with their current job, they will show signs of commitment to the organization. There have been a number of studies on the relationship between job stress and turnover intention through organizational commitment. In the study of Christy and colleagues (2019), Dwiputra and colleagues (2019) highlighted the relationship that job stress has a positive impact on turnover intention; organizational commitment has an opposite effect. At the same time, Wahyono

and colleagues (2020) measured the relationship between organizational commitment and turnover intention in a detailed and comprehensive way on all three aspects of emotional commitment, continuance commitment and commitment. Ethics based on the scale of Allen and Mayer (1990), the result is that organizational commitment has a positive and significant impact on employees' turnover intention.

To clarify how specifically this impact is in the context of District Hospital, the author proposes hypotheses H4 and H5 as follows:

- H4: Job stress has an inversely proportional effect on organizational commitment.
- H5: Organization commitment has an inverse effect on turnover intention.

With the above presentations, the authors summarize the hypotheses of the variables in the specific research model in Table 3.

Table 3. Summary table of hypotheses of variables in the research model.

H1	Job Stress has a proportional effect on turnover intention.
H2	Job Stress has an inverse effect on job satisfaction
H3	Job satisfaction has an inverse effect on turnover intention.
H4	Job stress has an inversely proportional effect on organizational commitment.
H5	Organization commitment has an inverse effect on turnover intention.

III. RESEARCH METHODS

Thuy Van and colleagues combined qualitative and quantitative research methods in this study.

1. Qualitative research method:

The qualitative research process was conducted through in-depth interviews with the aim of determining the attitudinal attributes expressed by District Hospital employees when stress at work leads to turnover intention. According to Kvale (1996), in-depth interviews also known as face-to-face interviews are a method of extracting more detailed information or deeper understanding about a topic or concept. Therefore, participants in in-depth interviews are encouraged to talk in depth

about the topic under study, which is the attitudinal attributes of employees when stress leads to turnover intention.

The in-depth interview process was conducted with 9 employees ($n=9$), reaching information saturation, obtaining results with the attributes of Job Stress including (Work environment, Willingness, Focus, Responsibility, Energy); with attributes of Job Satisfaction (including attributes of Welfare, Working Environment, Salary, Dedication, Professional Pride, Work Process); Organizational commitment (including attributes of Loyalty, Happiness, Leaving the hospital, Responsibility for hospital problems, Disorganized life, Telling others about the workplace) and attributes of Turnover intention (including View recruitment information, Contact employers, Ask friends for other jobs, Leave the hospital, Leave jobs).

Next, the authors conducted interviews with a group of experts with 5 members ($n=5$), who represent typical departments and have many years of experience working in the medical industry. The result achieved was 100% consensus on the results obtained in the in-depth interview process, along with adjusted consensus on the wording used in the research scale, the authors proposed the research model as follows: Figure 1.

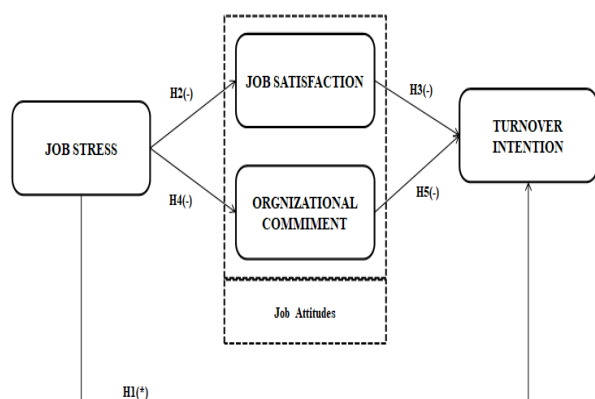


Fig 1. Proposed research model

Source: Author team

2. Quantitative research method:

In quantitative research, the authors inherited the research scale of authors Chao and Associates (2015), Allen and Meyer (1990) and Walsh et al. (1985). The process of completing the scale was based on qualitative research results using in-depth interviews and group discussions with 100% consensus of the expert group. The authors used the original scale of

Chao and colleagues (2015) to factors of Job Stress and Job Satisfaction, the original scale of Allen and Meyer (1990) to Organizational commitment; the original scale of Walsh et al. (1985) to Turnover intention.

Data were obtained through a survey questionnaire with a 5-level Likert scale and 22 observed variables, distributed to medical staff working at District Hospital. Sample size is calculated according to Hair et al. (1998), Tabanick and Fidell (1996) were $n=110$. To ensure high reliability of the research results, the authors used a sample number of $n = 110 \times 2 = 220$ for this study. Survey data was collected and the authors used SPSS and AMOS software version 22.0 to process and analyze.

IV. RESULTS AND ANALYSIS

1. Results of demographic characteristics of the study sample:

The total number of survey samples was $n=220$, of which there were 76 men, accounting for 34.5% and women were 144 people, accounting for 65.5%. The group under 30 years old accounts for 29.5%, from 30-40 years old accounts for 44.5%, from 41-50 years old accounts for 21.4%, from over 50 years old accounts for 4.5%. Thus, the male – female ratio is consistent with the observed sample and can represent the whole. Regarding age, it shows that the hospital's staff belongs to a young and dynamic age group with 29.5% under 30 years old and 44.5% under 30 – 40 years old.

2. Results of testing scale reliability using Cronbach Alpha coefficient:

Results of testing the reliability of the scale, with Cronbach's Alpha coefficient for the Job stress scale (Cronbach's Alpha=0.841), Job satisfaction scale (0.861), Organizational commitment scale (0.891), Turnover intention scale (0.883) through Cronbach's Alpha coefficient shows that the appropriate coefficients are all in the range of $0.70 \leq \alpha \leq 0.95$ and the total correlation coefficient of observed variables in each scale is larger. 0.3 (> 0.3). Therefore, the measurement scales are highly reliable.

- Job stress scale with 5 observed variables from JS1 to JS5 achieving Cronbach Alpha=0,841, have accept
- Job satisfaction scale with 6 observed variables from SF1 to SF6 achieving Cronbach Alpha=0,861, have accept

- Organizational commitment scale with 6 observed variables from CM1 to CM6, achieving Cronbach Alpha=0,891, have accept.
- Turnover intention scale with 5 observed variables from TI1 to TI5 achieving Cronbach Alpha=0,883, have accept.

Results: The coefficients of Cronbach's Alpha of the scale satisfy the condition $0.7 \leq \alpha \leq 0.95$ and the correlation coefficient of the total variable is greater than 0.3. Therefore, the scales meet the reliability. (Nunnally et al., 1994; Bland, 1997; DeVellis & Thorpe, 2021); Nguyen Dinh Tho, 2013; Hoang Trong & Chu Nguyen Mong Ngoc, 2005).

3. Exploratory factor analysis (EFA):

Analyzed results of factor exploration of independent and dependent variables.

The analysis results are based on 22 observed variables of the factors in the model, the results achieved (Table 5) are KMO=0.879>0.5 and Barlett's test has Chi-Square value=2.721, 487 with significance level. Sig=0.000<0.05, this shows that factor analysis is appropriate. With a total variance extracted of 57,551%>50%, it shows that these newly extracted factors explain 57,551% of the variation of the data set and the Eigenvalues of the extracted factors are 7,441 respectively; 3,335; 1,844 and 1,605 are both greater than 1. With the above indices, factor analysis is qualified. Table 4

Table 4. Results of exploratory factor analysis.

No	Content	Value	Achieve
1	KMO coefficient	0.879	>0.5
2	Sig.	0.000	>1
3	Variance extract	57.551	>50%
4	Eigenvalue	1.605	>0.1

Source: The author's team processed SPSS

4. CFA factor analysis:

The results of the CFA factor analysis obtained the standardized CFA results shown in Appendix 1.

4.1 Check for unidirectionality and conformity with market data: The results of confirmatory factor analysis CFA show that this model has a Chi-square statistical value of 342,981 with 203 degrees of freedom ($p=0.000$ is less than 0.05), CMIN/df=1,690 is less than 3. When Consider other indexes such as CFI= 0.946, IFI=0.947, TLI=0.939, all greater than 0.9

and RMSEA=0.056<0.08. All indices satisfy Hair et al. (2010), thus the important measurement model achieves unidimensionality and is compatible with the general data examined.

4.2 Test the convergent validity of the scale:

During the data processing process, we get the results of testing the convergent validity of the scale which is a summary table of the Standardized Regression Coefficients of the CFA model (Appendix 2). With the results in the summary table in Appendix 2, we can see the standardized regression weights of the observed variables, showing the smallest value of 0.576>0.5. Therefore, it can be concluded that the measurement scales of the research concepts all have convergent validity.

5. Evaluate the reliability of the scale:

During data processing, we get the results in Table 5 about reliability and extracted variance as follows:

Table 5. Composite reliability results and extracted variance

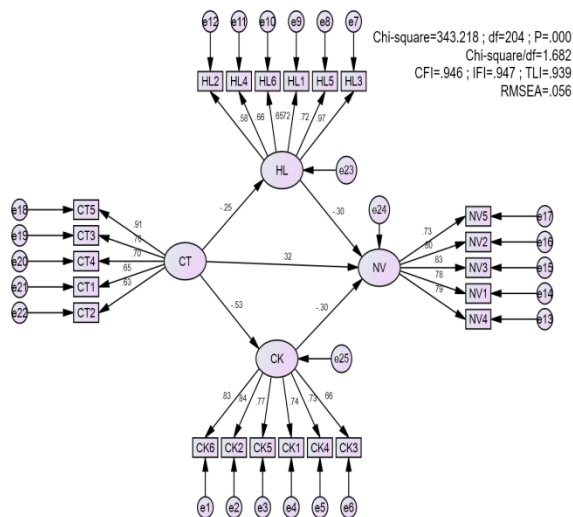
The scale	Pc	pvc
Job Stress (JS)	0.851	0.539
O.Commitment (OC)	0.865	0.563
J. Satisfaction (SF)	0.867	0.529
Turnover intention (TI)	0.890	0.617

Scale reliability through 3 indicators: Composite reliability (pc), total extracted variance (pvc) and Cronbach's Alpha coefficient (in Section 4.2). The scale is assessed to have a composite reliability of > 0.6 and the total extracted variance is greater than 0.5. The aggregate reliability values and total variance extracted for each scale satisfy the requirements $pc > 0.6$ and $pvc > 0.5$.

Thus, the results shown in Table 4 can confirm that the measurement scales meet the requirements.

6. Testing the SEM linear structural model:

With the analysis of the SEM linear structural model to test the theoretical research model, this method has many advantages over the traditional multivariate regression method because it can calculate measurement error. The SEM test results are shown in Figure 4 as follows



Source: Handled by the authors

Through the linear structural model SEM shows that the model has 204 degrees of freedom with a Chi-square statistical value of 343,218 (P-value=0.000); Chi-square/df=1,682<3; When considering other indicators such as CFI=0.946; TLI=0.939; IFI=0.947 is greater than 0.9 and RMSEA=0.056<0.08.

According to the above criteria, the research model is consistent with the actual data collected. The results of estimating the unstandardized regression coefficients presented in Table 6 are in the unstandardized numbers of the SEM model. This result shows that the relationships are statistically significant ($p < 5\%$).

Table 6. Unstandardized weights of the SEM model

Impact			Estimate	SE	CR	P
JS	□	SF	-0.277	0.080	-3.444	0,000
JS	□	CM	-0.556	0.077	-7.257	0,000
JS	□	TI	0.151	0.037	4.095	0,000
SF	□	TI	-0.129	0.026	-4.901	0,000
OC	□	TI	-0.134	0.034	-3.961	0,000

Note: r: regression coefficient; SE: standard error CR: critical value; p: level of significance

The standardized results of the SEM model show the level of relationship between variables. The factor Job stress directly and negatively affects job satisfaction and Organizational commitment, corresponding to regression coefficients -0.247 and -0.526, respectively, and bears the sign(-).

The factors Organizational Commitment and Job Satisfaction directly and negatively affect employees' Turnover intention with regression coefficients of -0.298 and -0.305, respectively, with a (-) sign.

The factor Job Stress directly and in the same direction affects employees' Turnover intention, with the regression coefficient showing this relationship being 0.317 and bearing a (+) sign.

The hypothesized relationship in the theoretical model has a P-value significance level of less than 5%, reaching the necessary level of significance (at the 95% confidence level). The results of hypothesis testing are shown in Table 7. And the results show that the tests of Job stress factors affect employees' Turnover intention through Job attitudes (including satisfaction and commitment) is accepted with high reliability. This confirms that the initial hypotheses are accepted.

Table 7: Results of testing research hypotheses

Variables		Hypothesis	Regression coefficient	Result
Independent	Dependent			
JS	TI	H1	0.317	Accept
JS	SF	H2	-0.247	Accept
SF	TI	H3	-0.305	Accept
JS	OC	H4	-0.526	Accept
OC	TI	H5	-0.298	Accept

- H1 Job Stress has a proportional effect on Turnover intention.
- H2 Job Stress has an inverse effect on Job satisfaction
- H3 Job satisfaction has an inverse effect on Turnover intention.
- H4 Job stress has an inversely proportional effect on Organizational commitment.
- H5 Organizational Commitment has an inverse effect on Turnover intention

In addition, the results of ANOVA analysis of variance also show that there are differences in turnover intention according to employee characteristics, highlighting some of the following results:

- Under 30 years old, employees with intermediate or college degrees, with high turnover intention .
- The group of contract employees has a higher turnover intention their job than the group of civil servants.

- The employee level group has a higher turnover intention than the leadership and management group.
- The group with income > 15 million and more than 10 years of seniority has the lowest turnover intention
- The Board of Directors, Laboratory and Imaging Department and Traditional Medicine Department have the lowest turnover intention.
- The groups with high turnover intention are the Nursing Department, Personnel Planning Department, Finance and Accounting Department, Emergency Department – Intensive Care, Pharmacy Department and Administrative Organization Department.

V. CONCLUSIONS

This study explored the relationship between job stress (JS) and Turnover intention (TI) through the mediating role of Job attitude including two factors: Job satisfaction (SF) and Organizational commitment (OC), and at the same time find the attributes of Job Stress (including attributes: Work environment, Readiness, Focus, Responsibility, Energy); Job Satisfaction (including attributes: Happiness, Benefits, Working environment, Salary, Dedication, Professional pride, Work process); Organizational Commitment (including attributes: Loyalty, Happiness, Leaving the hospital, Responsibility for hospital matters, Disorganized life, Tell others about the workplace); Turnover intention (including attributes: See recruitment information, Contact employer, Ask friends for other jobs, Leave the hospital, Quit job).

The results of testing the reliability of the scales have Cronbach's Alpha coefficients greater than 0.3 (>0.3). Demonstrates high reliability of the scale EFA analysis with extracted variance of 57,551% > 50% shows that these newly extracted factors explain 57,551% of the variation of the data set and the Eigenvalues of the extracted factors are all >1, so the qualified factor analysis.

The CFA analysis process shows that the scales of the research concepts all achieve convergent validity. ANOVA analysis of variance also shows that there are differences in turnover intention according to employee characteristics, most notably those under the age of 30 have higher turnover intention than the other age groups. Employees with intermediate and

college degrees have a higher turnover intention their job, and the income group >15 million and over 10 years of seniority have the lowest turnover intention their job.

VI. MANAGEMENT IMPLICATIONS AND RECOMMENDATIONS

1. Knowledge about human resource management:

The research results contribute in a small way to managers and leaders of units operating in the health sector to have more insight to have solutions to avoid risks. Because of the fluctuations of medical staff, increase the satisfaction of medical staff to avoid the occurrence of medical staff's turnover intention.

2. Limitations:

This study is limited to a limited sample size of N=220 and was only conducted in one unit. This means that geographical space is limited and analytical data is not large enough to cover the entire healthcare system. The survey questionnaire needs >22 questions and the number of survey samples is more than 220 tables and in many health sector units.

3. Future:

Future studies can inherit this study's scale table with the attributes in the observed variables, and at the same time, select more related studies in the same health industry to further build the table. Questions with new properties. Expand the survey to more medical units so that the results have broad coverage and can be applied to more medical units.

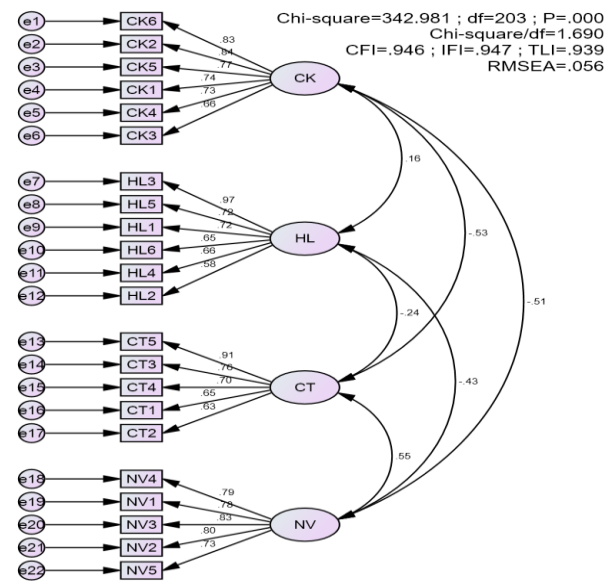
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Appendix 1: CFA results of the critical measurement model (normalized)



Appendix 2: Standardized regression coefficient of the CFA model

Relationship			Value	Relationship			Value
OC6	<---	OC	0,828	SF3	<---	SF	0,974
OC2	<---	OC	0,840	SF5	<---	SF	0,723
OC5	<---	OC	0,769	SF1	<---	SF	0,716
OC1	<---	OC	0,737	SF6	<---	SF	0,651
OC4	<---	OC	0,735	SF4	<---	SF	0,659
OC3	<---	OC	0,659	SF2	<---	SF	0,576
OC5	<---	JS	0,909	TI4	<---	TI	0,786
JS3	<---	JS	0,757	TI1	<---	TI	0,783
JS4	<---	JS	0,696	TI3	<---	TI	0,831
JS1	<---	JS	0,645	TI2	<---	TI	0,797
JS2	<---	JS	0,627	TI5	<---	TI	0,728

Source: Authors processed from Amoss