

Relation between Work Context and Proactive Behaviors among Nursing Staff

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Abstract

Background: Work context for the nursing staff becomes the most powerful source for nursing staff satisfaction, commitment and proactive work behaviors. Proactive work behavior contributes to positive organizational, team and nursing staff outcomes. **Aim of the study:** To assess the relation between work context and proactive behaviors among nursing staff. **Research design:** A descriptive correlation study design was applied. **Setting:** The study was conducted in Kafr El Zayat General Hospital. **Subjects:** A stratified random sample was taken from nursing staff (n= 295) out of (N=750) **Tools:** Two tools were used to collect the data, Nursing Staff Work Context, and Proactive Work Behavior Questionnaire. **Results:** About 41% of nursing staff had a low level of overall work context and 45.1% of them had a low level of overall proactive work behavior. **Conclusion:** There was a statistically significant positive correlation between work context and proactive work behaviors among nursing staff. **Recommendations:** Hospital administrations invest in the professional development of nursing staff by conduct continuous in-service training programs that boost their knowledge and skills for proactive behaviors. Enhance physical and psychological safety by applying a zero-tolerance policy for violence or harassment against nursing staff.

Key words: Nursing Staff, Proactive Work Behaviors, Work Context.

Introduction

The increasing demand for high quality healthcare services, as well as improving patient safety in the presence of scarce and limited resources, is considered as a very big challenge for healthcare organizations. In addition, continuous changes and updates of healthcare policies and standards, such as quality-of-care policies and hospital accreditation standards, force healthcare institutions to become more effective and highly productive. Requiring nursing staff to handle the increasing complexity, discarding traditional work models, accepting continuous change, respecting creativity, and acting flexibly for emerging work patterns and opportunities **(Fitzgerald, 2025)**.

Creating a favorable work context for nursing staff to become a global trend to improve working conditions in the hospitals, sustain a high standard of patient care and sufficient staff members, strengthen their sense of responsibility and attitude toward their work, enhance their work engagement and maximize their retention **(Lobes, 2025)**. Nursing staff work context has been associated with patient care outcomes and is described as the criteria of the work setting that either support or limit professional nursing practice. Furthermore, it is crucial for nursing staff's ability to deliver patient care in terms of quality and quantity, as well as workforce retention **(Mchugh, 2025)**.

Since the quality of nursing staff work context has been linked to the quality of patient care services, it is

crucial to evaluate the work context in order to gather baseline data and allow the healthcare organization to compare and analyze its current state to established quality standards. A healthy context of work benefits patients as well as healthcare providers, including nursing staff, managers, and other caregivers **(Stroup, 2025)**.

Additionally, the healthcare facilities with poor nursing staff practice contexts were more likely to have higher rates of mortality, job dissatisfaction, and turnover, whereas nursing staff in facilities with more favorable contexts of work reported lower rates of needle- stick injuries, emotional exhaustion, depersonalization, and intention to leave their current position, all of which had an impact on patient outcomes **(Aiken, 2025)**.

Work context is a composite of four major categories which are management and supervision, co-worker, development opportunities and work environment. Management and supervision context include administration, standards, policies, systems, procedures, practices, values and philosophies. Co-worker context is used to describe coworkers, people that nursing staff deal with, teams and work groups, leaders, supervisors and their interactional issues **(Al-Ghwary et al., 2024)**.

Development opportunities considered as a vital dimension for maintaining a high level of knowledge and practices **(Alcindor, 2024)**. In addition, work environment context refers to instruments, apparatus, technology infrastructure,

and all additional technical or physical components that enable nursing staff to perform their responsibilities and nursing activities. Presence of the four categories of work context in the healthcare setting affects the ability of nursing staff to be creative, innovative and develop proactive work behavior (**Al-Ghwary et al., 2024**).

Nowadays the increased competitiveness and dynamics of healthcare organizations particularly in nursing arise the need for a qualified and proactive nursing staff to become greater than ever. Those nursing staff must possess a distinct trait that enables them to adapt to different organizational contexts in healthcare, gain the ability to actively seek out novel and inventive solutions that allows for intervention in different issues (**Gharaibeh, 2025**).

Proactive work behavior is self-initiated, anticipatory action that aims to enhance internal organization by transforming and optimizing the situation of oneself or one's environment. It refers to future-focused and transformative measures that change the existing individual or environmental conditions (**Zabady, El Bialy, Awad, & Al Anwar, 2024**). Proactive work behavior of nursing staff is affected by their own curiosity and eagerness to learn, which improves the organization's standing. Lower nursing achievement and effectiveness are more likely to occur to leaders who do not encourage proactive work behavior (**Su et al., 2022**).

Proactive work behavior has four

important dimensions including individual innovation, problem prevention, taking charge and voice. As it highlights a series of activities that are not included in the daily basic duties allocated to nursing staff, through which they actively and impulsively take initiation to improve their working conditions. Furthermore, it enables them to anticipate and solve problems for organization's benefit (**Jia & Yue, 2025**).

Nursing staff innovation refers to actions through which nurses become aware of new and emerging opportunities, generate new ideas, and seek to put those ideas into action (**Li et al., 2023**). Problem prevention refers to actions by which nursing staff make efforts to explore the essence of problems and optimize procedures to prevent their future recurrence (**Rodríguez-García et al., 2023**). Taking charge refers to actions which nursing staff attempt to improve some approach work that was conducted, including work structures, practice and procedures. Finally, voice refers to actions by which nursing staff express constructive challenges to improve the standard procedures of their work surroundings (**Fay et al., 2023**).

A proactive nursing staff at healthcare settings are those who are awareing enough to catch improvement opportunities, considering it as important chances for improvement, generate new useful ideas that decreases reoccurring problems, and enhance the effectiveness of work procedures. These enable healthcare

organizations to quickly adapt to changes and challenges, and to focus on improving the context of work (**Zabady et al., 2024**).

Furthermore, healthcare organizations are being urged to improve their management practices and to reinforce proactivity among nursing staff in order to improve organizational outcomes (**Abu-Qutaish, Alost, Abu-Shosha, Oweidat, & Nashwan, 2025**). Work context predicts proactive action based on individual variations that facilitate transformation. Because proactive work behavior pushes organizations to improve its outcomes, it is essential for nursing staff to practice proactive work behavior as an active work habit within which the nursing staff plans and seeks to enhance the internal organizational environment while focusing on improving themselves or the environment (**Htet, Abhicharttibutra, & Wichaikum, 2024**).

According to rapid changes in the work environments of organizations, nursing staff must plan and prepare in advance for potential threats or dangers by being proactive in achieving long-term goals. Especially in healthcare settings, nursing staff, as health care professionals, have the responsibility to make an effort to optimize care processes and manage problems to provide high quality care by taking proactive behavior at work. Therefore, proactive work behavior is important for nursing staff (**Elshehtawy, Abdalla, & Abdelmonem, 2024**).

Significance of the study

Nursing staff performance and quality of care provided to patients influenced primarily by the work context in the health organization. Work context for the nursing staff becomes the most powerful sources for nursing staff satisfaction and commitment. It included physical, social and administrative organizational environment. Proactive work behavior contributes to positive organizational, team and nursing staff outcomes. In healthcare contexts, nursing staff with high levels of proactive work behavior are likely to implement safe, effective, timely, efficient, equitable and patient-centered nursing care (**Peng et al., 2023**). That is why there is a curiosity and interest to conduct such type of study to determine what the relation between the work context and nursing staff proactive work behaviors.

Aim of the Study

Assess the relation between work context and proactive behaviors among nursing staff.

Research questions

1. What are the levels of work context and proactive behaviors as perceived by nursing staff?
2. What is the relation between work context and proactive behaviors among nursing staff?

Research design

In this study, a descriptive correlation study design was utilized.

Setting

The present study was conducted in all in-patient departments at Kafr El-Zayat General Hospital, which affiliated to Ministry of Health and Population. Kafr El-Zayat General

Hospital was established in 1982 in the center of Kafr El-Zayat city, El-Gharbia Governorate. The hospital consists of 4 buildings: the main building (4 floors), the emergency building (3 floors), the outpatient clinics building (3 floors) and a separate building for burn intensive care. Kafr El-Zayat General Hospital provides a wide range of healthcare services with a capacity of 270 beds including: Medical (60), Surgical (60), Orthopedic (30) and Pediatric (30 bed), as well as all Intensive and Intermediate Care Units including Medical (21), Surgical (10), Pediatric (14, Cardiac (8), Burn (10) and Neonatal care (27 bed).

Subjects: -

A stratified random sample was taken from nursing staff (n= 295) out of (N=750) who are working in the previously mentioned settings, available at time of data collection and were willing to participate in this study.

Tools of data collection

Two tools were utilized for the collection of data:

Tool I: Nursing Staff Work Context Questionnaire: This tool was developed by the researcher and guided by (Brooks, 2001 & Lateef et al., 2021) and related literatures (Lee., & Jang, 2023 & Souza et al., 2020). It is composed of two parts as follow:

Part I: Nursing Staff Personal Characteristics and Work-Related Data: It included age, sex, marital status, position, level of education, years of experience, department, residence, working hours and previous participation in workshops

related to work context and proactive behaviors.

Part II: Nursing Staff Work Context Questionnaire: This part is used to assess work context as perceived by nursing staff. It is composed of 40 items that are divided into four dimensions as follows: **Management and supervision:** included 14 items- **Co-workers:** included 7 items - **Development opportunities:** included 5 items- **Work environment:** included 14 items.

Scoring system:

The responses of nursing staff were measured on a five-point Likert Scale ranging from (1-5) where; (1) strongly disagree, (2) Disagree, (3) Neutral, (4) Agree & (5) Strongly agree. They were concluded into 3 points where strongly agree and agree = agree and strongly disagree and disagree = disagree. **The Total scores categorized according to statistical cut-off point (60%) into:**

- High level of work context >75%.
- Moderate level of work context 60%-75%.
- Low level of work context < 60% score.

Tool (II): Proactive Work Behavior Scale (PWBS): It was developed by the researcher guided by (Parker & Collins, 2010; Ali et al., 2018; Smithikrai, 2022). It is used to assess proactive work behavior as perceived by nursing staff. It is composed of 37 items divided into four dimensions as follows:- **Problem prevention:** included 12 items- **Individual innovation:** included 7 items- **Voice:** included 8 items- **Taking charge:** included 10

items.

Scoring System:

The responses of nursing staff were measured on a three-point Likert Scale. Ranging from (1-3) where; (1) for very infrequent, (2) for somewhat frequently, (3) for very frequently.

Total scores classified according to statistical cut-off point (60%) into:

- High level of proactive work behaviors >75%.
- Moderate level of proactive work behaviors 60%-75 %.
- Low level of proactive work behaviors < 60%.

Method

1. An official approval to conduct the study was acquired from Dean of Faculty of Nursing and submitted to the responsible authorities of Kafr El-Zayat General Hospital for permission to carry out the study.
2. **Ethical considerations:**
 - An approval from Scientific Research Ethical Nursing Committee was obtained with code No. (343-12-2023).
 - The nature of the study did not cause any harm to the entire subjects
 - Following an explanation of the study's goal, the participants provided written informed consent to participate.
 - The right to terminate participation at any time was accepted.
 - A code number was used instead of names.
3. The tools of the study were developed by the researcher after reviewing of related literatures. Since Arabic is the participant's mother tongue, Tools II and I

were translated into it.

4. The face validity value of Nursing Staff Work Context Questionnaire was **99.6%** and Proactive Work Behavior questionnaire was **99.5%**.
5. A **pilot study** was conducted on 10% of the nurses (30 nursing staff) to test clarity, sequence of items, applicability, the questions' pertinence and to calculate the amount of time required to finish the survey
6. **Reliability of tools** examined using Cronbach's Alpha coefficient factor, its value for the tool I was (**0.924**) and for tool II was (**0.860**)
7. **Data collection phase:** the data were collected by the researcher, through meeting nursing staff in small groups in their departments after explaining the aim of the study, during morning and noon shifts, according to their workload. Tool 1 and tool II distributed. The questionnaires were completed in the presence of the researcher to ascertain all questions were answered.
8. The data was gathered throughout a three-month period, beginning on July 1, 2024, and ending on September 30, 2024.
9. The estimated time needed to complete the questionnaire items from subjects for both tools was 20 up to 30 minutes.

Statistical analysis:

Data was fed to the computer and analyzed using IBM SPSS software package version (20.0). (Armonk, NY: IBM Corp) Qualitative data were described using number and

percentage. The **Kolmogorov-Smirnov** test was used to verify the normality of distribution. Quantitative data were described using range (minimum and maximum), mean and standard deviation. Significance of the obtained results was judged at the 5% level.

Results

Table (1): Shows nursing staff personal characteristics and work-related data of study subject. It was observed that more than one third (39%) of nursing staff had 30 – <40 years old with mean age score 37.54 ± 8.51 . Most of them (95.3%) were females. Majorities (87.5%) of nursing staff were married and high percentage (86.4%) of them were staff nurses. Concerning the level of nursing education, less than half (48.8% and 45.4%) of nursing staff had Associate Degree and Bachelor Degree in Nursing respectively while, minority (5.8%) of them had Postgraduate Studies in Nursing. Additionally, about one third (32.5%) of them had more than 15 years of work experience. As regard to working department 44.1%, 19.3%, 10.5%, 10.2%, 9.5% and 6.4% of nursing staff were working at intensive care units, intermediate care units, orthopedic, surgical, pediatrics and medical departments, respectively. More than half (54.9%) of them were from urban areas. Majority (86.4%) of nursing staff were working full time. None of them previously participated in any workshop related to work context & proactive behavior.

Figure (1) and Table (2): Illustrate levels of work context as perceived

by nursing staff. As noticed, less than half (41%) of nursing staff had a low level and 38.3% of them had a moderate level of overall work context. While 20.7% of them had a high level of overall work context. About 56.3% and 33.6% of nursing staff had a high level of work context related to co-worker and management and supervision dimensions, respectively. On the other side, 68.8% and 48.8% of them had a low level of work context related to work environment and development opportunities dimensions, respectively.

Table (3): Demonstrates mean scores and standard deviation of work context dimensions as perceived by nursing staff. As noticed, co-worker dimension was ranked as the highest mean scores with mean percent of 78.50 ± 18.82 , followed by management and supervision dimension with mean percent 67.38 ± 19.86 . While the lowest mean scores were related to work environment dimension with mean percent 51.69 ± 15.20 .

Figure (2) and Table (4): Reveal levels of proactive work behavior as perceived by nursing staff. As noticed about 45.1% of nursing staff had a low level, 40.7% of nursing staff had a moderate level and 14.2% of them had a high level of overall proactive work behavior. Also, it was noticed that 55.3% and 40% of nursing staff had a high level of proactive work behavior related to voice and individual innovation dimensions, respectively. While 64.7% and 53.6% of them had a low level related to problem prevention

and taking charge dimensions, respectively.

Table (5): Demonstrates mean scores and standard deviation of proactive work behavior dimensions as perceived by nursing staff. It noticed that the highest mean scores were related to voice dimension with mean percent 74.62 ± 22.23 followed by individual innovation dimension with mean percent 65.28 ± 23.66 . While,

the lowest mean scores were related to problem prevention dimension with mean percent 51.33 ± 24.47 .

Table (6): Demonstrates correlation between nursing staff work context and proactive behavior. It was noticed that a positive statistically significant correlation was found between overall work context and proactive work behavior and all dimensions.

Table (1): Nursing staff personal characteristics and work-related data (n=295)

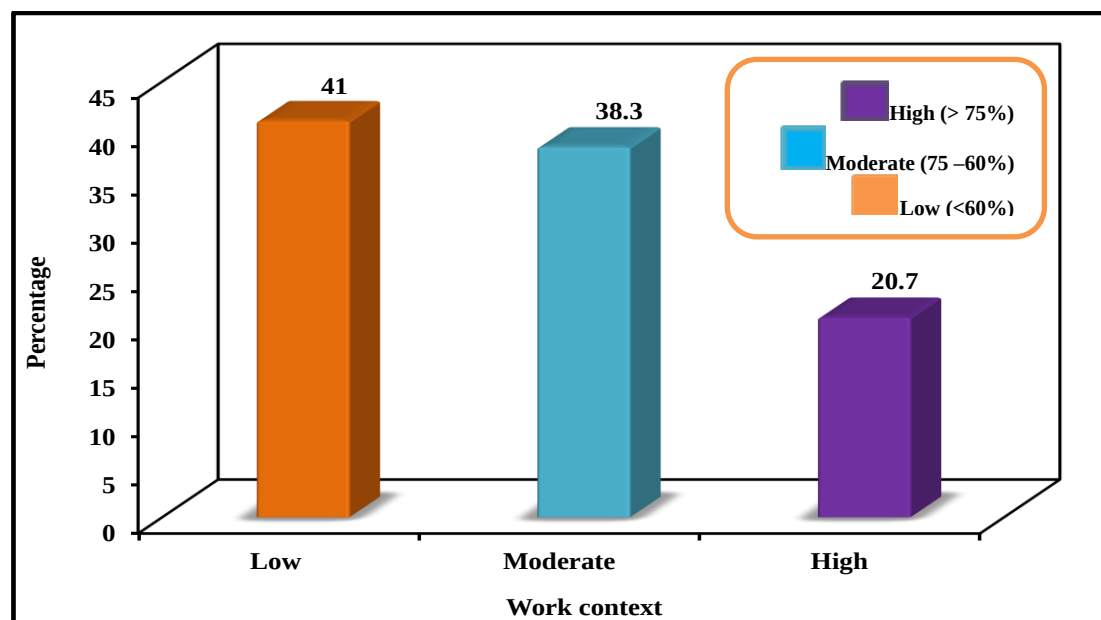
Personal characteristics & work-related data	No.	%
Age (years)		
<30	60	20.3
30 – <40	115	39.0
40 – <50	86	29.2
≥ 50	34	11.5
Min. – Max.	20.0 – 58.0	
Mean $\pm$ SD.	37.54 ± 8.51	
Sex		
Male	14	4.7
Female	281	95.3
Marital status		
Married	258	87.5
Un-married	37	12.5
Position		
Nursing director	1	0.3
Assistant director	2	0.7
Supervisor	2	0.7
Head nurse	35	11.9
Staff nurse	255	86.4
Level of nursing education		
Associate Degree in Nursing	144	48.8
Bachelor Degree of Nursing	134	45.4
Post Graduate Studies in Nursing	17	5.8
Years of experience		
<1 year	21	7.1
1year – < 5 years	37	12.5
5years – < 10 years	64	21.7
10 years – < 15 years	77	26.1
>15 years	96	32.5
Department		
Medical	19	6.4
Surgical	30	10.2
Orthopedic	31	10.5
Pediatrics	28	9.5

Intensive care	130	44.1
Intermediate care	57	19.3
Residence		
Rural	133	45.1
Urban	162	54.9
Working hours		
Full time	255	86.4
Part time	40	13.6
Previously participated in workshop related to work context & proactive behaviors		
Yes	0	0.0
No	295	100.0

SD:Standard deviation

Table (2): Levels of work context as perceived by nursing staff (n=295)

Work context Dimensions	High (> 75%)		Moderate (75 –60%)		Low (<60%)	
	No.	%	No.	%	No.	%
Management and supervision	99	33.6	96	32.5	100	33.9
Co-workers	166	56.3	80	27.1	49	16.6
Development opportunities	73	24.7	78	26.4	144	48.8
Work environment	14	4.7	78	26.4	203	68.8
Overall	61	20.7	113	38.3	121	41.0



Figures (1): Levels of work context as perceived by nursing staff

Table (3): Mean scores and standard deviation of work context dimensions as perceived by nursing staff (n=295)

Work context Dimensions	Score Range	Total scores		Average Score (1 – 5)	% Score	Rank
		Min. – Max.	Mean $\pm$ SD.	Mean $\pm$ SD.	Mean $\pm$ SD.	
Management and supervision	(14 – 70)	28.0 – 70.0	51.74 $\pm$ 11.12	3.70 $\pm$ 0.79	67.38 $\pm$ 19.86	2
Co-workers	(7 – 35)	13.0 – 35.0	28.98 $\pm$ 28.98	4.14 $\pm$ 0.75	78.50 $\pm$ 18.82	1
Development opportunities	(5 – 25)	9.0 – 25.0	17.13 $\pm$ 4.44	3.43 $\pm$ 0.89	60.63 $\pm$ 22.22	3
Work environment	(14 – 70)	24.0 – 62.0	42.95 $\pm$ 8.51	3.07 $\pm$ 0.61	51.69 $\pm$ 15.20	4
Overall	(40 – 200)	85.0 – 192.0	140.8 $\pm$ 24.58	3.52 $\pm$ 0.61	62.99 $\pm$ 15.37	

SD: Standard deviation

Table (4): Levels of proactive work behavior as perceived by nursing staff(n=295)

Proactive work behavior dimensions	High (> 75%)		Moderate (75-60%)		Low (<60%)	
	No.	%	No.	%	No.	%
Problem prevention	39	13.2	65	22.0	191	64.7
Individual innovation	118	40.0	61	20.7	116	39.3
Voice	163	55.3	57	19.3	75	25.4
Taking charge	55	18.6	82	27.8	158	53.6
Overall	42	14.2	120	40.7	133	45.1

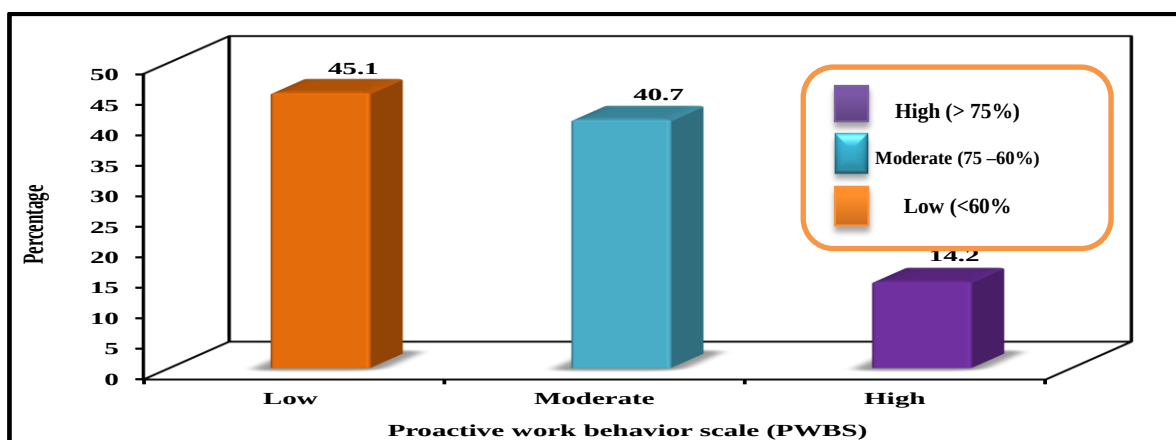
**Figures (2): Levels of proactive work behavior as perceived by nursing staff**

Table (5): Mean scores and standard deviation of proactive work behavior dimensions as perceived by nursing staff (n=295)

Proactive work behavior dimensions	Score Range	Total scores		Average Score (1 – 5)	% Score	Rank
		Min. – Max.	Mean $\pm$ SD.	Mean $\pm$ SD.	Mean $\pm$ SD.	
Problem prevention	(12 – 36)	12.0 – 36.0	24.32 $\pm$ 5.87	2.03 $\pm$ 0.49	51.33 $\pm$ 24.47	4
Individual innovation	(7 – 21)	9.0 – 21.0	16.14 $\pm$ 3.31	2.31 $\pm$ 0.47	65.28 $\pm$ 23.66	2
Voice	(8 – 24)	8.0 – 24.0	19.94 $\pm$ 3.56	2.49 $\pm$ 0.44	74.62 $\pm$ 22.23	1
Taking charge	(10 – 30)	10.0 – 29.0	21.17 $\pm$ 4.62	2.12 $\pm$ 0.46	55.85 $\pm$ 23.09	3
Overall	(37 – 111)	39.0 – 110.0	81.57 $\pm$ 13.37	2.20 $\pm$ 0.36	60.22 $\pm$ 18.06	

SD: Standard deviation

Table (6): Correlation between nursing staff work context and proactive behavior (n=295)

Work context Dimensions	Proactive Work Behavior dimensions									
	Problem prevention		Individual innovation		Voice		Taking charge		Overall	
	r	P	r	P	r	P	r	P	R	P
Management and supervision	0.695*	<0.001*	0.380*	<0.001*	0.475*	<0.001*	0.616*	<0.001*	0.695*	<0.001*
Co-workers	0.538*	<0.001*	0.402*	<0.001*	0.477*	<0.001*	0.505*	<0.001*	0.591*	<0.001*
Development opportunities	0.258*	<0.001*	0.439*	<0.001*	0.321*	<0.001*	0.217*	<0.001*	0.344*	<0.001*
Work environment	0.540*	<0.001*	0.396*	<0.001*	0.421*	<0.001*	0.483*	<0.001*	0.572*	<0.001*
Overall	0.693*	<0.001*	0.520*	<0.001*	0.558*	<0.001*	0.620*	<0.001*	0.741*	<0.001*

R: Pearson coefficient

*: Statistically significant at $p \leq 0.05$

Discussion

A positive work context substantially impacts proactive behavior among nursing staff., who view their work context as supportive, offering possibilities for growth, autonomy, and recognition, are more inclined to exhibit proactive behaviors, including pursuing new knowledge, proposing enhancements, and taking initiative to improve patient care (Li et al., 2025). Conversely, a challenging or unsupportive work context can stifle proactive behavior, potentially

leading to decreased job satisfaction, increased stress, and even intention to leave. Therefore, fostering a positive and engaging work context is crucial for promoting proactive behavior and ultimately improving patient outcomes and staff well-being (Mohi Ud Din & Zhang, 2025).

Level of overall work context of nursing staff:

The current study results revealed that less than half of nursing staff had a low level of overall work context. This finding is owing to that

high percent of nursing staff had a low level of work environment, development opportunities and management and supervision. In addition, this finding is due to that the majority of the investigated nursing staff were staff nurses and the low educational level of these nursing staff that about half of them had only nursing associate degree. Moreover, none of them previously participated in any workshop related to work context. From the perspective of the researcher, these results may be due to work context is a subjective perception and each nurse has different perceptions and responses to work context or environment. Moreover, this may be due to that nursing staff of Kafr El Zayat General Hospital still suffering from high workload, lack of resources, lack of managers' appreciation, acknowledge and support, poor communication, poor training and lack of improvement opportunities and programs which may decrease their willingness to put in an effort at work and may diminish their level of work context. This result supported with the study conducted by **White et al., (2020)** who showed that more than half of study subject had low level of work context. Also, **Ulrich et al., (2022)** who revealed that the overall work context, nursing staff had lowest level. And **Heidari et al., (2022)** who revealed that more than three quarters of the study subject had a low level of work context on the other hand, these results disagreed with the study by **Poku et al. (2022)**

who displayed that about two thirds of study subject had high perception of work context. **Also, Alenazy et al., (2023)** who declared that the majority of the study subject had a high level of work context and **Szilvassy & Šírok, (2022)** who revealed that more than two thirds of the study subject had high level work context.

Level of overall proactive work behavior:

The current study results illustrated that less than half of nursing staff had a low level of overall proactive work behavior. This result is due to that less than half of the studied nursing staff had less than 10 years of experience and the majority of the studied nursing staff were staff nurses. In addition, the low educational level of studied nursing staff that about half of them had nursing associate degree, also none of them previously participated in any workshop related to proactive behavior. From the researcher's point of view, this result may be due to a lack of the nursing staff's endeavor to think, plan, and act in advance, taking initiative for improvement in current situations. Also, limit their abilities to create new techniques, search for causes of problems, optimize work procedures, and express ideas. As well as decreased their capacity to come up with novel and innovative solutions to avoid recurring issues.

Additionally, they could not take charge in some work areas, such as quality assurance, nursing standards, guidelines, or hospital missions.

Moreover, these results may be due to resistance to change, low self-efficacy as nursing staff may doubt their ability to influence systems or lead improvements. High workload and stress as staff have no time for going beyond assigned responsibilities.

The study result is in the same line with **Sabra et al., (2021)** who reported that nearly half of the study subject had low level of proactive work behavior. In addition to, this result matched with a study carried out by **Shokry et al., (2023)** who mentioned that all studied nurses had a low level of proactive behavior. In addition, **Htet et al., (2024)** who stated that more than half of nurses had low level of overall level of proactive work behavior. Also, **Maung et al., (2025)** who showed that more than half of the studied nurses had low level of proactive work behavior.

On the other hand, this result is incongruent with the study results conducted by **Elbus et al., (2024)** who reported that nearly than half of the studied nurses had high level regarding proactive work behavior. Also, **Ali et al., (2018)** who reported that more than half of nurses had moderate level regarding proactive work behavior.

Correlation between study variables:

Concerning correlation between nursing staff work context and proactive behavior, the present study clarified that a positive statistically significant correlation was found between work context and proactive

work behavior, and this correlation indicates that enhancements in the work environment are likely to lead to increased proactive actions by nursing staff.

This correlation suggests that a supportive work context, which includes physical, social, and psychological elements, fosters behaviors where nursing staff actively seek to improve their surroundings and performance. Understanding this correlation is crucial, as proactive work behavior not only benefits nursing staff individually but also contributes to overall organizational performance by enhancing productivity and innovation. The statistical significance of this correlation reinforces the reliability of the findings, suggesting that the observed effects are not due to chance. Therefore, organizations aiming to boost proactive behaviors should focus on optimizing their work contexts to achieve better outcomes.

Nurses would be more proactive in their work if their context of work was marked by less problematic interactions with patients, peers, supervisors, and physicians; adequate workload and preparation; more certainty about treatment; greater autonomy; feedback; more variety and significance of tasks; safe nurse staffing levels; good communication; collaboration and teamwork with physicians; competent nurse managers; support from hospital management to enable nurses to provide effective and efficient patient

care; a safe, empowering, and satisfying workplace; a culture that fosters communication and collaboration; a climate where nursing staff feel physically and emotionally safe and well-being; meaningful recognition and authentic leadership, and vice versa.

This study result is agreed with **Hu et al., (2021)** who revealed that a positive statistically significant correlation between work context and proactive behavior. The study of **Permata and Mangundjaya, (2021)** whose argued that the variables that exhibit significant correlation between proactive work behavior and work context. Also, **Hegazy et al., (2022)** who showed that there was highly significant statistical positive correlation between nurses' perception level of work environment factors and their level of proactive behaviors. In addition, the current study result is in the same line with **Tsai, (2023)** who indicated that significant correlation with working context daily activity and daily proactive behavior. This finding is congruent with **Xie et al., (2024)** who illustrated that the work context positively moderated the association between proactive personality and personal growth initiative.

The study finding is disagreed with **Cui & Li, (2021)** who stated that negative correlation between proactive behavior and work context. Also, **Su et al., (2022)** who showed a negative statistical correlation between workplace relationships and proactive behavior. Moreover, this

result is inconsistent with the study conducted by **Yuspahrudin et al., (2024)** who revealed a negative statistical correlation between level of workplace setting and their level of proactive work behavior.

Conclusion:

According to the findings of the present study it was concluded that less than half of nursing staff had a low level of overall work context. While more than two thirds of them had a low level of work context related to work environment. Less than half of nursing staff had a low level of overall proactive work behavior. While less than two thirds of them had a low level related to problem prevention. There was a statistically significant positive correlation between work context and proactive work behavior among nursing staff at Kafr El-Zayat General Hospital.

Recommendations:

The following recommendations were suggested:

For hospital administration:

- Invest in the professional development of nursing staff by conduct continuous in-service training programs and offer skill-based training (e.g., communication, conflict resolution, leadership skills, and problem solving) that boost the knowledge and skills of nursing staff for proactive behaviors.
- Regularly update the staffing plan to improve the staffing ratios that will reduce workload on nursing staff.

- Ensure a clean and comfortable facility for nursing staff as well-maintained lounges, rest areas, and nursing stations.
- Create a career advancement pathway, clear promotion tracks and support advanced certifications.
- Create a mentorship program through pair junior nurses with experienced mentors to foster growth and knowledge sharing.
- Apply open-door leadership policy and encourage open communication between nurses and management.
- Build a positive work environment and enhance physical and psychological safety by applying a zero-tolerance policy for violence or harassment against nursing staff.
- Regularly solicit nurse input through surveys or suggestion boxes and act on their recommendations.
- Follow participatory decision-making through involving nursing staff in policy changes and quality improvement initiatives.

For head nurses:

- Demonstrate initiative, flexibility, and solution-oriented thinking in daily routines.
 - Give timely, constructive feedback and invite it from staff as well.
 - Empower nurses, delegate meaningful tasks and allow staff to make appropriate decisions within their scope.
 - Acknowledge contributions and praise nurses, who suggest improvements, volunteer for tasks, or go the extra mile.
- Share learning opportunities and post info about conferences, online courses, and training programs.
 - Be flexible with schedules where possible, especially for staff facing life challenges.
 - Encourage rest breaks and ensure they are actually taken.

For nurses:

- Gain the abilities of prioritization, initiative, problem solving, idea generation, idea realization, and proactive actions through actively participating in-group problem-solving and brainstorming sessions.
- Attend educational programs about proactive work behaviors and attend self-study courses to gain experience and best practices.
- Seek to guidance and assistance from other nursing staff.

For further research:

- Investigate the impact of work environment on proactive nursing behavior in hospital.
- Study the relation between self-efficacy and proactive work behaviors among nurses.
- Study barriers and facilitators for proactive behaviors in nursing practice.
- Investigate the relation between psychological safety and proactive work behaviors among nursing staff.

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