

From Caregiver to Innovator: Investigating the Push and Pull Factors Affecting Nurses' Decisions to Move Away from Bedside

Kisha May Climaco Buhia¹, Mary Ann Lopez²

<https://orcid.org/0009-0003-5828-6590>¹, <https://orcid.org/0000-0001-7566-5152>²

St. Bernadette of Lourdes College, Inc.¹, St. Bernadette of Lourdes College, Inc.²

bkisha@sbcl.edu.ph¹ malopez@sbcl.edu.ph²

ABSTRACT

The growing trend of Registered Nurses leaving bedside nursing for non-bedside roles is an important issue in the nursing workforce that may affect healthcare provision, nurse retention, and the sustainability of the nursing profession. While there is substantial literature on nurse turnover and burnout, few qualitative studies examine the actual experiences of Filipino nurses who have left bedside nursing behind. This study aimed to examine the factors pushing or pulling nurses to leave bedside work for non-bedside employment, how nurses make sense of their transitions, the impacts of those transitions on their satisfaction and well-being, and to formulate suggestions to improve nurse retention. The study adopted a qualitative phenomenological approach and used semi-structured, in-depth interviews with twelve purposively sampled registered nurses who had worked in bedside nursing for at least one year prior to their transition to non-bedside employment. Data were analyzed based on Braun and Clarke's six-stage thematic analysis process. The research found that the nurses' career changes were influenced by push factors at work, including excessive workloads, insufficient staffing, burnout, work-life imbalance, and inadequate organizational support, as well as pull factors such as flexible work, a healthier work environment, professional development, and work-life balance. In the words of the participants, the transition was a matter of reconstructing nurses' professional identities rather than leaving the nursing field altogether. In this way, not only did the participants feel happier about themselves, but they also felt satisfied with their jobs and had greater career options. According to the study's conclusion, the transition to non-bedside jobs is a way for nurses to maintain their professional commitment and achieve greater career satisfaction and quality of life.

Keywords: *Bedside nursing, career transition, nurse retention, push and pull factors, qualitative phenomenology*

INTRODUCTION

Nurses play a crucial part in providing quality healthcare. Many nurses have started moving from bedside to non-bedside nursing roles, especially after the COVID-19 pandemic. Instead of quitting their professions, nurses have chosen different careers in telemedicine, teaching, research, and healthcare management, all while contributing to the healthcare field. As stated by Akomeng Aryeequaye et al. (2025), this is a case of professional transition and adaptation. Therefore, the present study was designed to examine the experiences of registered nurses regarding the push and pull factors associated with their transition from bedside to non-bedside nursing roles. The study is meant to determine the factors that influenced nurses to abandon bedside nursing, those that attracted them to alternative nursing professions, and how they understood their career transition experience.

Statement of the Problem

This study aimed to explore the push and pull factors influencing nurses' decisions to transition from bedside to non-bedside roles.

Specifically, this study sought to answer the following questions:

1. What workplace and personal experiences influence nurses' decisions to leave bedside nursing practice?
2. What factors attract nurses to transition into non-bedside nursing roles?
3. How do nurses describe and make sense of their career transition experiences from bedside to non-bedside roles?
4. How do nurses perceive the impact of their career transition on their professional satisfaction, well-being, and career growth?
5. What recommendations can be drawn from the experiences of nurses to support nurse retention and improve workplace conditions within the healthcare system?

Scope and Delimitations

The purpose of this phenomenological study was to examine the lived experiences of 12 registered nurses working in one hospital in Quezon City, Philippines, with respect to the push and pull factors affecting their transition from bedside to non-bedside roles in nursing. The findings from this study are based only on the personal experiences of the participants.

Review of Related Literature

Earlier research has identified various workplace and individual factors that influence nurses' decisions to move away from bedside nursing. Common push factors, including excessive workload, staff shortages, burnout, underpayment, lack of organizational support, and limited career development opportunities, make nurses dissatisfied with their jobs and increase their turnover intentions. The reasons for nurses' desire to pursue a non-bedside career include flexibility, higher pay and benefits, career advancement opportunities, balance between work and life, and autonomy, among others (Lasater et al., 2021; Aiken et al., 2022; Rettinger et al., 2024; Akomeng Aryeequaye et al., 2025). According to the most recent literature review, apart from being a reaction to difficult working conditions, career transition can be regarded as both a professional identity transformation process and the creation of new meanings related to choosing a particular career. Modern-day nurses tend to regard their career changes to non-bedside positions as an attempt to continue their nursing practice while becoming more satisfied and happy about it (Shah et al., 2021; Covell et al., 2022; Fabian et al., 2024).

Theoretical Framework

The study is based on the Adaptation Theory by Sister Callista Roy (1976) and the Stress and Coping Theory by Boyd, Lewin, and Sager (2009). According to Roy's Adaptation Theory, nurses adapt to environmental conditions to cope with stressful workplace events, including heavy workloads, burnout, understaffing, and a lack of career opportunities. Boyd et al.'s Stress and Coping Theory further explains the mechanism of coping behavior through which nurses cognitively assess workplace stress and adopt coping strategies when faced with demands that exceed their resources.

Conceptual Framework

The conceptual framework of the study describes how workplace push factors such as workload, burnout, understaffing, and poor pay motivate nurses to transition to non-bedside nursing practice, while pull factors such as work-life balance, career growth opportunities, professional autonomy, and increased compensation attract them to change nursing roles. The framework is based on Roy's Adaptation Model and Boyd et al.'s Stress and Coping

Theory, which explains how nurses adapt to workplace stressors, interpret their experience of transitioning from bedside to non-bedside practice, and derive insights that lead to recommendations.

METHODOLOGY

This qualitative phenomenological study explored the lived experiences of registered nurses regarding the push and pull factors influencing their decision to transition from bedside to non-bedside nursing roles in a selected hospital in Quezon City, Philippines.

Research Design

This study used a qualitative phenomenological methodology to analyze and understand the lived experiences of nurses who transitioned from bedside nursing to non-bedside nursing. Phenomenology was used for its focus on description and interpretation of the meaning and experiences of a phenomenon from the perspective of the people concerned (Creswell & Poth, 2018).

Research Steps

The current research was initiated by a comprehensive examination of the literature and theory, which laid the groundwork for investigating the push and pull factors associated with nurses transitioning from bedside to non-bedside nursing. Before recruiting the participants and conducting the study, ethical clearance and permission were sought from the chosen hospital.

Data Collection and Sample Selection

Data were gathered through in-depth semi-structured interviews conducted with 12 registered nurses from a selected hospital in Quezon City, Philippines, through purposive sampling. The interviewees had already gained 1 year of bedside nursing experience before transferring to non-bedside positions. Audio recordings were done with

Data Analysis Methods

A thematic analysis approach was adopted to analyze the transcribed interviews, following the six stages of analysis described by Braun & Clarke (2006): familiarization with the data, coding, theme generation, theme review, theme definition and naming, and reporting of the results.

Research Hypotheses and Validation

To achieve trustworthiness, the research ensured credibility, dependability, confirmability, and transferability. The credibility of the research was confirmed through member checking and prolonged engagement. An audit trail, reflexive journaling, and rich descriptions were used to increase trustworthiness and rigor of the results.

Study Limitations and Ethical Considerations

The results of the study are restricted to the lived experiences of 12 nurses at one hospital in Quezon City. The ethical principles were upheld by obtaining informed consent, maintaining confidentiality and anonymity, ensuring voluntary participation, and obtaining ethics approval from relevant bodies.

RESULTS AND DISCUSSION

SOP 1. What workplace and personal experiences influenced nurses' decisions to leave bedside nursing practice?

Push Factors: It was found that high workload, staff shortages, burnout, work-life conflict, and lack of organizational support were major reasons contributing to nurses' departure from the bedside. They considered these issues unsustainable and harmful to both themselves and patient care.

SOP 2. What factors attracted nurses to transition into non-bedside nursing roles?

Pull Factors: Participants were attracted to the prospects of more flexible schedules, a healthier work environment, higher salaries, opportunities for promotion, and a better work-life balance. Thus, they could continue to work as nurses while gaining greater professional satisfaction.

SOP 3. How do nurses describe and make sense of their career transition experiences?

Meaning-Making: Nurses saw their transition not as an escape from the profession but rather as a process of adaptation and professional growth. In other words, they recreated their professional selves and realized that nursing is not just about the bedside.

SOP 4. How do nurses perceive the impact of their career transition?

Transition Impact: Participants reported improved job satisfaction, psychological well-being, work-life balance, and career development following transition to non-bedside roles. The transition enhanced both their professional fulfillment and overall quality of life.

SOP 5. What recommendations can be drawn from the experiences of nurses?

Recommendations: Participants emphasized the need for safe staffing levels, supportive leadership, competitive compensation, wellness programs, and expanded career development opportunities to improve nurse retention and strengthen workplace conditions.

SUMMARY

From the results, it was clear that the transition of the nurses from bedside nursing roles to other nursing roles was a result of the interplay between the push and pull factors related to the workplace. The heavy workload, burnout, understaffing, and lack of organizational support were among the factors that motivated nurses to move away from the bedside, while the provision of a more flexible work environment, professional development, and a good work-life balance motivated them to pursue alternative nursing careers. The participants perceived the transition positively as a process of professional adaptation.

CONCLUSIONS

Findings indicate that the change in nurses' careers from bedside nursing to non-bedside nursing is a product of the interplay between push and pull forces of both the workplace and career. High workloads, stress, understaffing, and lack of organizational support pushed the nurses out of bedside nursing, whereas good work-life balance and career prospects pulled the nurses into non-bedside nursing. It was not the intention of the participants to leave the nursing profession, but rather to see the move to non-bedside nursing as a way to improve their careers.

RECOMMENDATIONS

Healthcare organizations need to invest in better staffing, workload management, organizational support, and health promotion to reduce nurse attrition. There is also a need for nursing leaders to foster a supportive environment that will help nurses achieve career growth and recognition and thus lead to job satisfaction. The nursing education sector should empower nurses in terms of career options as well as foster resiliency and professional identity. Future research could include the career changes of nurses in various sectors and regions.

ACKNOWLEDGMENTS

The author sincerely expresses gratitude to the registered nurses who willingly shared their experiences and made this study possible. Appreciation is also extended to the research adviser, panel members, faculty of St. Bernadette of Lourdes College, participating healthcare institutions, family members, and friends for their invaluable guidance, encouragement, and support throughout the completion of this research.

AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

REFERENCES

- Alibudbud R. (2023). Addressing the Burnout and Shortage of Nurses in the Philippines. *SAGE open nursing*, 9, 23779608231195737. <https://doi.org/10.1177/23779608231195737>
- Boyd, N. G., Lewin, J. E., & Sager, J. K. (2009). A model of stress and coping and their influence on individual and organizational outcomes. *Journal of Vocational Behavior*, 75(2), 197–211. <https://doi.org/10.1016/j.jvb.2009.03.010>
- Corpuz, J. C. G. (2023). Advancing Filipino healthcare: The plight of Filipino nurses in postpandemic world. *SAGE Open Nursing*, 9, 23779608231220872. <https://doi.org/10.1177/23779608231220872>
- Dall'Ora, C., Ball, J., Reinius, M., & Griffiths, P. (2020). Burnout in nursing: a theoretical review. *Human resources for health*, 18(1), 41. <https://doi.org/10.1186/s12960-020-00469-9>
- Fabian, N., De Mesa, R. Y., Tan-Lim, C., Sandigan, G., Lopez, J., Loreche, A. M., Dans, L., Benzon, Z., Zabala, H., Sanchez, J., Sundiang, N., Rey, M., & Dans, A. (2024). Perspectives on telemedicine across urban, rural and remote areas in the Philippines during the COVID-19 pandemic. *BMJ Health & Care Informatics*, 31(1), e100837. <https://doi.org/10.1136/bmjhci-2023-100837>
- Rettinger, L., Putz, P., Aichinger, L., Javorszky, S. M., Widhalm, K., Ertelt-Bach, V., Huber, A., Sargis, S., Maul, L., Radinger, O., Werner, F., & Kuhn, S. (2024). Telehealth education in allied health care and nursing: Web-based cross-sectional survey of students' perceived knowledge, skills, attitudes, and experience. *JMIR Medical Education*, 10, e51112. <https://doi.org/10.2196/51112>
- Polit, D.F. and Beck, C.T. (2017) *Nursing Research: Generating and Assessing Evidence for Nursing Practice*. 10th Edition, Wolters Kluwer Health, Philadelphia, 784 p. <https://doi.org/10.1016/j.iccn.2015.01.005>
- Sister Callista Roy (1976). *Introduction to Nursing: An Adaptation Model*. (Later expanded in Roy & Andrews, 1999; Roy, 2009 editions.)