

# Strategic Human Resource Management: An Analysis of Career Abandonment for Healthcare Technicians in the Provision of Care at Nampula Central Hospital (HCN)

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## ABSTRACT

This study aimed to understand the factors that contributed to the abandonment of the health technician career at the Nampula Central Hospital. The research adopted a quantitative, descriptive approach, using bibliographic and case study procedures. The universe consisted of 188 employees who abandoned their health technician career, from which a sample of 30 participants was extracted, selected through non-probabilistic convenience sampling. The results show that abandonment occurred mainly in areas considered strategic by the Ministry of Health, namely Pharmacy Technician, General Medicine Technician, Maternal and Child Health Nursing Technician, General Nursing Technician, and Anesthesia Technician, representing 96.70% of the cases analyzed. Occupational stress was found to be one of the main factors associated with abandonment, and 26.6% of participants reported being under pressure due to excessive tasks and shift work. It was also observed that 50% of respondents stated that the decision to abandon their career was not related to financial factors, but to a loss of professional interest and a desire to face new challenges. On the other hand, 46.67% indicated the search for better salary conditions as the main motivation, while 3.33% stated that they no longer identified with the technical training they had obtained.

Abandoning a career as a health technician stems from a combination of organizational, motivational, and economic factors, requiring institutional strategies aimed at professional development, improving working conditions, and strengthening motivation in the hospital context.

**Keywords:** Strategic management, Human resources, technical areas, career abandonment.

## SUMMARY

This study aimed to understand the factors that contributed to the abandonment of the health technician career at the Nampula Central Hospital. The research adopted a quantitative, descriptive approach, using bibliographic procedures and a case study. The universe consisted of 188 employees who abandoned their health technician career, from which a sample of 30 participants was extracted, selected through non-probabilistic convenience sampling.

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The results show that career abandonment occurred primarily in areas considered strategic by the Ministry of Health, namely Pharmacy Technician, General Medicine Technician, Maternal and Child Health Nursing Technician, General Nursing Technician, and Anesthesia Technician, representing 96.70% of the cases analyzed. Occupational stress was found to be one of the main factors associated with career abandonment, with 26.6% of participants reporting having been under pressure due to excessive tasks and shift work. It was also observed that 50% of respondents stated that the decision to leave their career was not related to financial factors, but rather to a loss of professional interest and a desire to face new challenges. On the other hand, 46.67% indicated the search for better salary conditions as the main motivation, while 3.33% stated that they no longer identified with the technical training they had received.

Leaving a career as a healthcare technician results from a combination of organizational, motivational, and economic factors, requiring institutional strategies aimed at professional development, improved working conditions, and increased motivation within the hospital setting.

## INTRODUCTION

Strategic human resource management, especially in the health sector, is a topic that has attracted increasing interest among researchers in recent years. The work of health professionals in areas essential to universal healthcare is fundamental to a country's well-being, as it contributes to health equity and meeting the population's needs (World Health Organization, 2013). This international organization recommends that access to quality health services is crucial to ensuring equitable health.

By way of illustration, Girones, Belves, Júlia, and Benach (2018), in a study on health inequalities in Mozambique, highlight that the national system presents characteristics similar to those of other sub-Saharan African countries: precarious infrastructure at the primary level, a shortage of qualified professionals, and inadequate conditions of water, energy, medicines, oxygen, transport, and therapeutic equipment. The study also points to weaknesses at the specialized level, a marked presence of private providers, a lack of consistent policies for the management and retention of strategic personnel, as well as institutional fragmentation—factors that generate significant inefficiencies.

In this context, Bilhim (2009) observes that successful organizations recognize that they can only grow and prosper if they are able to optimize the return on investment for all partners, especially through the adoption of strategic human resource management policies. In agreement, Chiavenato (2014) argues that each organizational strategy must be accompanied by a strategic human resource management plan, integrated into the institution's overall planning. The author emphasizes that the strategic management process begins with the definition of the organizational mission.

The institutional mission of Nampula Central Hospital (HCN) has faced significant challenges. The 2024 annual report revealed a deficit of over 200 employees, a phenomenon attributed, in part, to the emergence of new fields of knowledge and the accelerated expansion of higher education. This scenario fostered a migration of healthcare professionals to areas aligned with objectives distinct from direct hospital care. The results of this study corroborate this trend of professional dispersion: 36.67% of technicians opted for a Bachelor's degree in Organizational Psychology, followed by 13.33% in Administration and Human Resources Management and 10% in Environmental Management. Other areas, such as Law, Community Development Studies, Public Administration, and Social Work, each represented 6.67%, while Statistics and Accounting each registered 3.33%. Although the Ministry of Health (2016) advocates for the retention and motivation of priority human resources to ensure the functionality of the sector, the data demonstrate a persistent exodus to occupations that are far removed from the core activity of the hospital.

Therefore, the study aimed to understand the factors associated with leaving the healthcare technician career, in order to allow for in-depth analysis.

## Motivation/Justification

The choice of this topic stems, on the one hand, from the fact that the phenomenon of healthcare technicians leaving their careers in strategic areas is a growing concern for the health authorities of the Ministry of Health, as it exacerbates the shortage of professionals in the most affected areas. On the other hand, there is a scarcity of published information on this issue in Mozambique, which reinforces the relevance of this research. Furthermore, the researcher's involvement in the area of human resource management in health, with over 10 years of experience, provides additional motivation to better understand this phenomenon, with the aim of contributing to its elucidation and to the debate on strategies for attracting and retaining healthcare technicians in essential roles.

## Objectives

The study was guided by a general objective, defined as understanding the abandonment of the health technician career, in order to allow an in-depth analysis of the factors associated with this process.

## Specifics

To operationalize the overall objective of the study, the following specific objectives were formulated:

- To identify the workload of the HCN health technicians;
- Identify the areas with the most deviations in the HCN;
- Describe the factors associated with change or deviation in the training process.

## Problem

In line with the priorities defined in the Strategic Plan for the Health Sector (PESS), the Ministry of Health (MISAU, 2013) has invested in the training and provision of health technicians in various areas, with the aim of ensuring a timely and quality response in the provision of care to the community. However, it has been observed that health technicians in priority areas, covered by the special health regime and considered fundamental for the stability and improvement of services, have abandoned their careers, opting to enroll in general higher education courses, which are not considered strategic to meet the care needs of patients treated at the Nampula Central Hospital.

The dropouts are concentrated in strategic technical areas for the health sector, such as: among the courses in which the participants were trained prior to dropping out, the Maternal and Child Health Nursing course was the most representative with 12 participants, corresponding to 40%, followed by the General Nursing course with 10 participants, equivalent to 33.3%, Pharmacy and General Medicine Technicians (Curative Medicine) had 3 participants, with 10%, similarly, the Anesthesia Technician and Physiotherapy courses had 1 participant, with 3.3% respectively. This departure of professionals further exacerbated the staff shortage and compromised the quality of services provided, especially given the high demand from patients seeking care at the health unit under analysis. Given this scenario, the following research question arises: What factors have led employees of the Nampula Central Hospital to abandon their careers as health technicians, seeking higher education in areas that are not strategic for the health sector?

## THEORETICAL FRAMEWORK

Concern about the strategic management of Human Resources in the health sector is not recent, and it is possible to identify a record of both national and international experiences aimed at addressing the need to provide, attract, and retain health professionals in order to promote quality access to health care for the entire population.

### The theory of planned behavior and exit intention.

Career transition can be understood from the perspective of planned behavior theory, which establishes that the intention to act is the main predictor of human behavior in specific organizational contexts (Ajzen, 1991, cited

in Candaten, 2016). In this sense, the manifestation of the desire to change occupations signals a progressive loss of interest in a technical career, which corroborates Cortese's thesis (2012). The author identifies that the subjective intention to leave the profession is a real predictor of actual departure, configuring a challenge of labor shortage at a global level.

### **Hygiene, salary factors and talent retention in healthcare**

The analysis of employee retention in hospital institutions is frequently based on Herzberg's two-factor theory (1923, cited in Chiavenato, 2003). From this perspective, salary is classified as a hygiene (extrinsic) factor, whose absence or precariousness can generate dissatisfaction, although its presence, in isolation, does not guarantee long-term motivation.

### **The economic dimension and professional status**

Compensation acts as a pillar of stability; when insufficient, it weakens the worker's bond with the organization, driving them towards areas that offer greater social prestige and income (Candaten, 2015; Peiró, 1992, cited in Lautert, 1995). In the healthcare context, this vulnerability is accentuated by specific working conditions, such as unhealthy environments, shift work, and the emotional burden inherent in continuous contact with patients (Rios, 2008).

### **Stress, burnout and avoidance intent**

Leaving a profession is often the outcome of a process of lack of professional fulfillment, which can evolve into burnout (Duffield et al., 2011). Occupational stress and chronic dissatisfaction manifest primarily as an "intention to leave the profession," functioning as a predictive indicator of the technician's actual departure (Griep et al., 2013).

### **Strategic management and retention policies**

Within the framework of achieving the Sustainable Development Goals (SDGs), the Ministry of Health of Mozambique identifies a set of strategic areas in which human resources should be prioritized. According to MISAU (2021), these areas include Pharmacy, Curative Medicine, Laboratory, Public Health/Preventive Medicine, Nursing, Obstetrics/Maternal and Child Health Nursing, Instrumentation, Anesthesia, Surgery, and Hospital Management.

In this context, the Mozambican scenario presents structural barriers, although the Ministry of Health (MISAU, 2016) recognizes the imperative need to expand the number of health technicians at the expense of professionals in support areas. The agency itself admits that salary disparities between academic levels undermine this objective. The reality that higher-level professionals earn significantly higher incomes than mid-level technicians acts as a direct disincentive to retention at these operational levels, clashing with the talent retention goals proposed by Peres and Kuregant (1997). From a strategic management perspective, the employee should be understood as an asset whose value needs to be enhanced (Bilhim, 2009). The pursuit of "new horizons" by technicians to achieve financial objectives therefore reveals a failure in organizational strategies to align individual goals with institutional missions, compromising the effectiveness of the previously listed priority areas.

### **Work pressure, stress and turnover dynamics**

Workload and pressure to meet targets are critical determinants of occupational health. Robbins (2009) and Mcvicar (2003) warn that the constant need to avoid errors, coupled with task overload, constitutes one of the primary sources of stress. When work demands exceed the time available for their execution, professional engagement is progressively replaced by a desire to quit (Robbins, 2009).

## The impact of stress and burnout on exit intention

Work-related stress is globally recognized as one of the most frequent causes of work-related health disorders (European Agency for Safety and Health at Work, 2009). Elements such as lack of emotional commitment, low job satisfaction, conflicts between work and family life, and a scarcity of development opportunities are intrinsically linked to the intention to leave the profession (Leineweber et al., 2016).

In this context, burnout syndrome emerges as a critical outcome of a stressful work environment. As described by Maslach and Jackson (1981) and Buffon et al. (2023), this condition results in emotional exhaustion and a decrease in personal accomplishment. Rudman, Gustavsson, and Hultell (2014) found that burnout levels tend to intensify in the first years of activity, increasing the prevalence of early career abandonment.

### Types of turnover

Exhaustion and lack of recognition drive the phenomenon of employee turnover, which can be distinguished into two main categories (Santos, 2016, cited in Aires, 2020):

1. Internal Turnover: Characterized by the movement of technicians between different services or units within the same organization (International Council of Nurses, 2002).
2. External Turnover: Represents the process of permanently leaving the organization or, in more severe cases, abandoning the profession itself (Hayes et al., 2012, cited in Poeira, Mamede & Martins, 2019).

### Organizational determinants in the hospital environment

Professionals working in hospital settings are continuously exposed to stressors such as staff shortages, identified by Wheeler (1998) as the main stress factor, role ambiguity, low participation in decision-making processes, and the absence of job and salary plans (Oliveira, 2014).

According to North and Hughes (2006), these high turnover rates have severe implications for human resource management, negatively influencing productivity and quality of care. Modifiable factors, such as workload management and psychosocial support, are therefore essential predictors for retaining professionals (Costa & Martins, 2011; Oliveira, 2023).

## METHODOLOGY

This research has a quantitative approach. “The quantitative method uses data collection based on numerical measurement and statistical analysis” (Sampieri, Collado & Lucio, 2013). Regarding its objectives, this is descriptive. According to Gil (2008), descriptive research has the primary objective of describing the characteristics of a given population or phenomenon or establishing relationships between variables. In the specific case of this research, the factors that, in a way, explain the abandonment of priority careers by HCN employees to opt for other non-strategic ones were described.

The research is bibliographic; this type of research is developed based on already existing material, consisting mainly of books and scientific articles (Gil, 2008, p. 44).

It is a case study, which, according to Gil (2008), is characterized by the in-depth and exhaustive analysis of one or a few objects, in order to allow for a broad and detailed understanding of them.

The data were collected through the completion of a questionnaire with a Likert-type scale. The processing of the collected data was done using the statistical package called Statistical Package for the Social Sciences (SPSS) version 20.

The scarcity of national studies on the subject was a limiting factor, which made it necessary to resort to international research, specifically studies from South America and Europe.

Regarding the inclusion criteria, the study covered health professionals who cumulatively met the following requirements: possessing basic or intermediate level technical training, having completed a higher education course, and having left their healthcare career to migrate to higher-level areas considered non-priority or support areas, according to the categorization of the Ministry of Health (MISAU). Additionally, the sample group was restricted to professionals who provide healthcare or work at the Nampula Central Hospital.

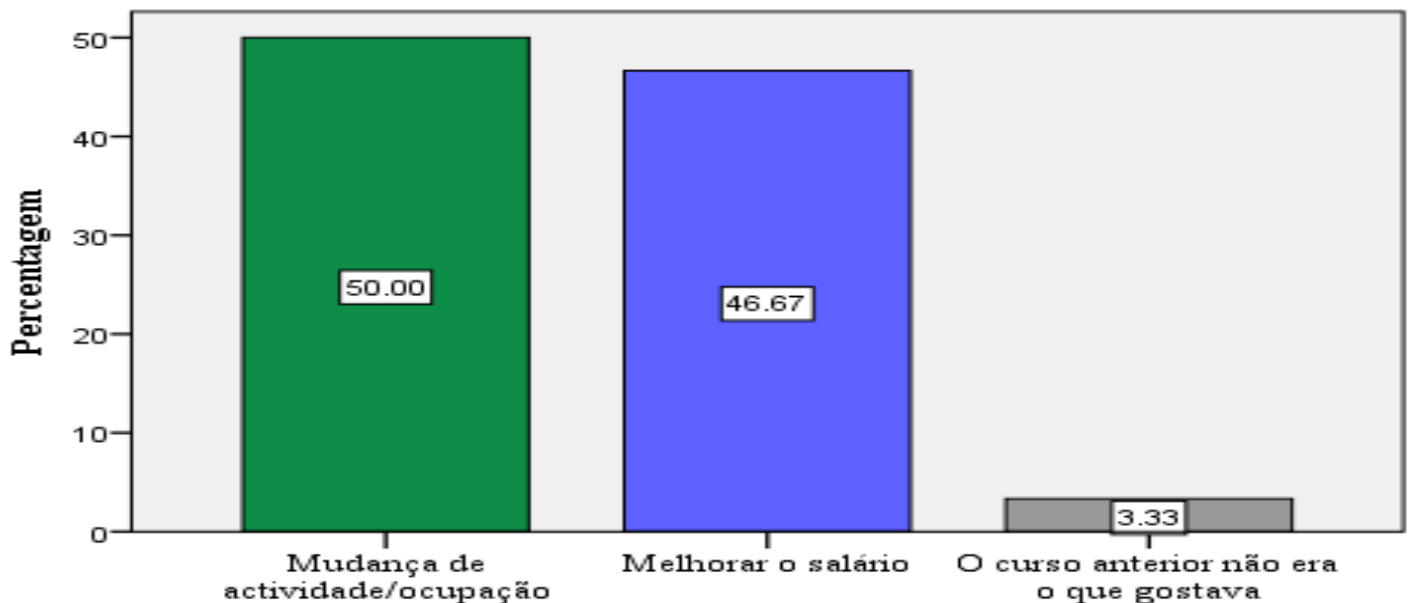
Conversely, all professionals who do not meet the aforementioned career deviation criteria were adopted as exclusion criteria. Specifically, technicians who, although having completed higher education, chose to remain linked to health careers at the level corresponding to their new training, maintaining continuity of professional practice in the clinical or hospital area of the National Health Service, were excluded.

## RESULTS

The data were processed using the SPSS statistical package version 20, allowing for cross-referencing between the empirical findings and the theoretical framework that supports this research.

The analysis of the motivations that led participants to abandon their health careers and seek training in other areas reveals a multifaceted scenario. As shown in Figure 1, 50% of participants indicated that the main motivation was a change of activity/occupation, while 46.67% pointed to the search for better pay. Only 3.33% stated that they did not like their previous technical course.

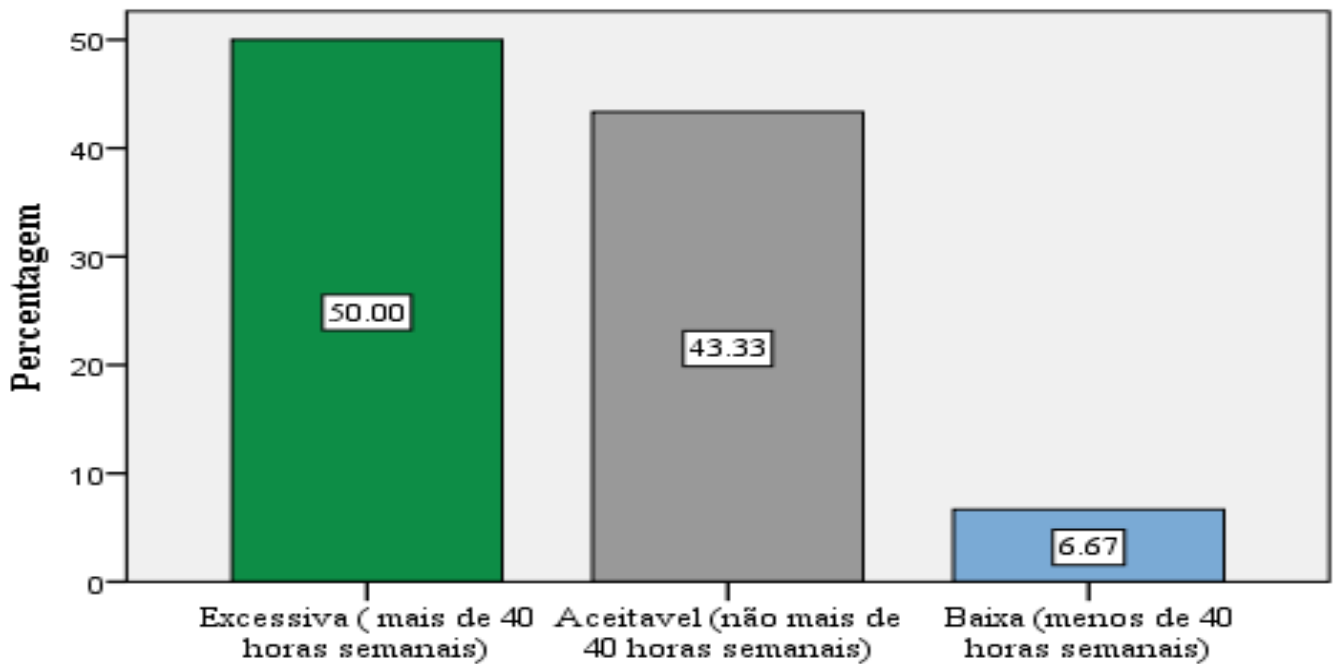
**Figure 1** Individual reasons that led to abandoning a career in healthcare.



Source: Author (2025)

Regarding workload or shifts, the majority of participants, 50%, reported that it was excessive, with more than 40 hours, 43.33% had an acceptable workload, and 6.67% reported having worked less than 40 hours, according to the data in Figure 2.

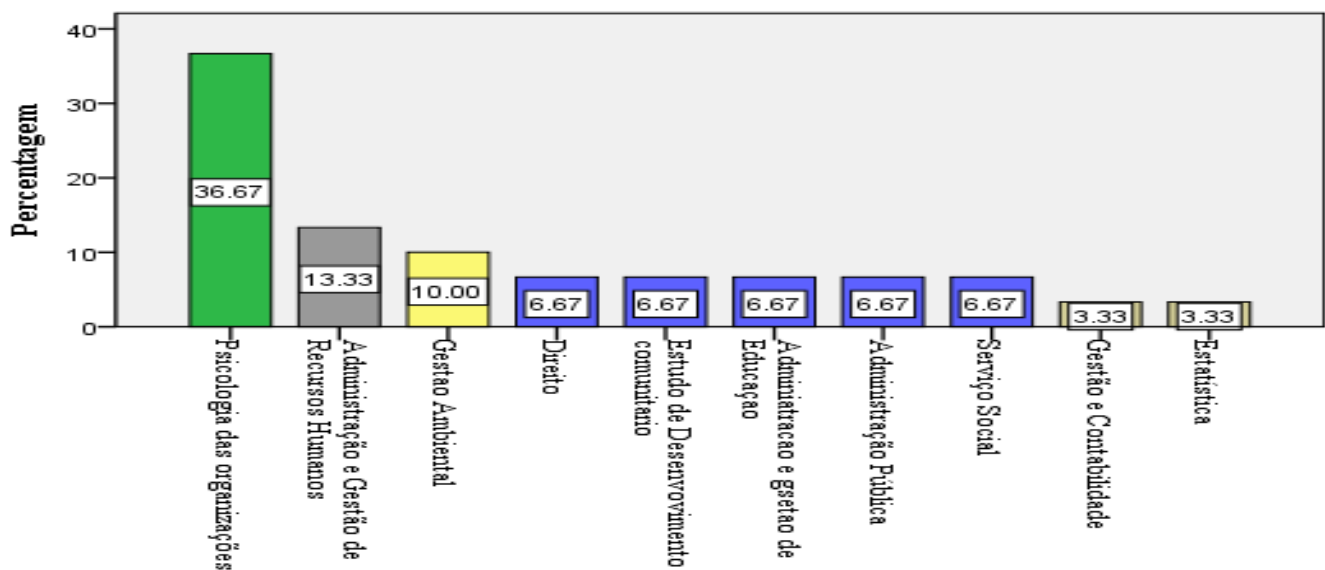
**Figure 2** Evaluation related to workload/shifts



Source: Author (2025)

Figure 3 illustrates that the majority of research participants who abandoned their careers as health technicians, at 36.67%, graduated with a Bachelor's degree in Organizational Psychology, 13.33% opted for a Bachelor's degree in Administration and Human Resources Management, 10% in Environmental Management, while courses in Law, Community Development Studies, Administration and Education Management, Public Administration, and Social Work represented 6.67% respectively, and courses in Statistics and Management and Accounting were at 3.33% similarly.

**Figure 3** Courses obtained after leaving a career as a healthcare technician.



Source: Author (2023)

## Analysis and discussion of the results

The data were processed using the SPSS statistical package version 20, allowing for cross-referencing between the empirical findings and the theoretical framework that supports this research. The results reveal a contradiction between health policies and operational reality. While MISAU (2021) defines areas such as Pharmacy, Curative Medicine, Laboratory, Public Health/Preventive Medicine, Nursing, Obstetrics/Maternal and Child Health Nursing, Instrumentation, Anesthesia, Surgery, and Hospital Management Regarding priorities for the SDGs, HCN data shows that 96.70% of dropouts occur precisely in these specialties. MISAU (2016) states that The country needs more health technicians than professionals in support areas, areas that have seen a greater influx of those who left the priority areas, as shown in Figure 3. The analysis of the motivations that led participants to abandon their health careers and seek training in other areas reveals a multifaceted scenario. As shown in Figure 1, 50% of participants indicated that the main motivation was a change of activity/occupation, while 46.67% pointed to the search for better pay. Only 3.33% stated that they did not like their previous technical course. These results corroborate the theory of planned behavior, where the intention to act explains human behavior in specific contexts (Ajzen, 1991, cited in Candaten, 2016). The predominance of the desire to change occupations (50%) suggests a loss of interest in the career, which is reinforced by Cortese (2012), who identifies the intention to leave nursing as a real predictor of actual departure, a phenomenon of worldwide scarcity. Although the financial factor was relevant for almost half of the sample, the findings align with Secaf and Rodrigues (1998), who demonstrate that professional attrition often goes beyond the issue of salary, involving feelings of incongruence between the expectation and the reality of the profession. As Ardila (1986, cited in Lautert, 1995) points out, people work for money, but also for the need for status and to feel efficient.

The issue of salary, cited by 46.67% of participants, finds its explanation in Herzberg's two-factor theory (1923, cited in Chiavenato, 2003). Salary is classified as a hygiene factor (extrinsic); its absence or precariousness generates dissatisfaction. Candaten (2015) and Peiró (1992, cited in Lautert, 1995) reinforce that poor remuneration weakens the worker, driving them towards areas with higher status and income. For Rios (2008), regarding work in the health field, the unhealthy environment, low salaries, shift work, and very close contact with patients can be highlighted. Duffield et al. (2011) state that leaving the profession often reveals a lack of professional fulfillment, which in turn causes dissatisfaction and even burnout. Griep, Fonseca, Melo, Portela, and Rotenberg (2013) convey the ideas that one of the negative aspects of stress and job dissatisfaction is the intention to leave the profession. Peres and Kuregant (1997) confirm this idea, showing that human resources policies with career plans and other benefits facilitate and encourage the attraction and retention of health technicians in the organization, and as a consequence, there may be a decrease in their turnover in the profession. In the local context, MISAU (2016) confirms this disparity, noting that professionals with higher education earn significantly more than mid-level technicians, which acts as a disincentive to retention. For Bilhim (2009), strategic management should view the employee as an asset whose value should be enhanced, something that seems to fail when the technician seeks "new horizons" to achieve their financial goals.

## Work pressure and stress as drivers of turnover

Working conditions were assessed through pressure to complete tasks and workload. According to Figure 2, 26.6% of technicians reported being "always" under pressure, while 36.7% were "rarely" under pressure. In addition, Figure 1 reveals that 50% of participants worked excessively more than 40 hours per week. Robbins (2009) and Mcvicar (2003) warn that pressure to avoid errors and task overload are primary sources of stress. When an employee is asked to do more than time allows, enjoyment of the work is replaced by a desire to quit (Robbins, 2009). Some studies conducted in Europe and other developed countries indicate that 50-60% of all lost workdays are attributed to stress. It has been noted that work-related stress is the second most frequent cause of work-related health disorders, affecting 22% of workers in the European Union in 2005 (European Agency for Safety and Health at Work, 2009). Leineweber et al. (2016) understand that, Burnout, Lack of personal and emotional commitment, low job satisfaction, work-family conflicts, few opportunities for development, and high work demands were all related to intentions to leave their profession.

Santos (2016, cited in Aires, 2020, p. 16) reinforces the idea that work stress, lack of recognition, and exhaustion are some of the factors that influence this decision, and this in turn leads to turnover, which is distinguished into

two types: the first is internal turnover, which involves the movement of health technicians between services within the same organization (International Council of Nurses 2002). The second is external turnover, a process by which there are departures from the organization or even the profession (Hayes et al., 2012, cited in Poeira, Mamede & Martins, 2019). Oliveira (2014) states in his findings that health technicians working in hospitals are continuously subjected to elements that generate work-related stress, such as staff shortages, which imply an accumulation of tasks and work overload, shift work, role conflict and ambiguity, low participation in decisions, and the lack of a career plan. and salaries, the feeling of injustice in labor relations, and conflicts with colleagues and/or the institution. Wheeler (1998) reinforces the idea by pointing out that the lack of staff is the main stressor in the work of the health technician.

Regarding work in the health field, it can be noted that the environment is unhealthy, salaries are low, shift work is common, and there is a very close focus on patients" (Rios, 2008). Costa and Martins (2011) state that many potentially modifiable factors, such as workload, burnout, and quality of care in the workplace, have sometimes been reported as important predictors of professionals' intention to leave their jobs. Rudman, Gustavsson, and Hultell (2014) found that burnout levels were related to the intention to leave the profession, as their study revealed that these levels increased in the first years of professional activity and, consequently, increased the prevalence of leaving the profession. For North and Hughes (2006), high turnover rates in nursing have implications in fundamental areas of human resource management in an organization or service, namely: they negatively influence productivity.

Oliveira (2023) and Candaten (2015) highlight that this stressful environment, coupled with dealing with the pain of others and prolonged shifts, generates psychological suffering and burnout. Burnout syndrome, as described by Maslach and Jackson (1981) and Buffon et al. (2023), results in emotional exhaustion and decreased personal accomplishment, increasing external turnover rates (Hayes et al., 2012).

### **Workload and shifts**

The finding that 50% of participants faced excessive working hours (more than 40 hours per week) and grueling shift schedules is one of the main reasons for leaving the profession. Only a minority of 6.67% enjoyed reduced working hours.

### **The impact of work-related stress and burnout**

The literature cited in the study establishes a direct relationship between turnover indicators and the occupational health of technicians, highlighting work overload as a critical trigger for professional burnout. In this context, Robbins (2009) and McVicar (2003) warn that the constant need to avoid errors in a task-saturated environment constitutes one of the primary sources of stress. This continuous pressure results in the erosion of engagement, because when work demands systematically exceed the time available for their execution, job satisfaction is progressively replaced by the desire to leave. As an extreme consequence of this scenario, prolonged exposure to long shifts and the suffering of others culminates in the emotional exhaustion characteristic of burnout syndrome. On this aspect, Rudman et al. (2014) emphasize that these levels of exhaustion tend to be more severe in the first five years of activity, a factor that significantly increases the rates of early career abandonment.

### **Organizational factors and staff shortages**

Analysis of organizational factors reveals that excessive working hours are not an isolated cause, but rather a symptom of profound structural deficiencies, particularly staff shortages. As Wheeler (1998) points out, staff scarcity is the main stressor in technical healthcare work, triggering a vicious cycle in which the departure of professionals overburdens those who remain, resulting in further abandonments. This chronic dissatisfaction with the work regime initially manifests itself through the "intention to leave," frequently evolving into external turnover, characterized by definitive resignation from the organization or the profession itself. From the perspective of North and Hughes (2006), such high turnover rates, driven by physical and mental exhaustion, generate severe institutional consequences, directly compromising productivity and the quality of care provided to patients.

## Final Considerations

The abandonment of the health technician career in this sample reveals itself as a cumulative phenomenon. According to Robbins (2009), stress intensifies with each new persistent factor. The combination of low pay (Herzberg's hygiene factor), excessive working hours (more than 40 hours) and lack of recognition culminates in the "last straw" that leads to a career change. Cavalheiro, Júnior & Lopes (2008) state that there is a growing consensus, presented in several occupational stress studies, that addresses the negative aspects of stress with consequences not only for the worker, but also for institutions. Emotional exhaustion and the pursuit of quality of life (Londoño, Laverde & Londoño, 2019) show that the logic of leaving the healthcare system is, as Flinkman et al. (2010, cited in Candaten, 2016) state, essentially multifaceted.

The study concluded that leaving a career as a healthcare technician is intrinsically linked to a desire to change occupations due to a loss of professional interest and the pursuit of better financial conditions. The research showed that excessive workload and constant pressure were triggers for work-related stress, facilitating the decision to leave. The identified factors are multifaceted, ranging from organizational issues to personal aspirations for status and recognition. As practical implications, it is suggested that the Ministry of Health implement strategic retention actions, such as career plans and a continuous increase in professionals to alleviate the pressure of the workload. For future studies, it is recommended to expand the sample to other regions (Northern and National) to validate the scope of these findings.

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