Research Article

Nurses' Personal Career Tactics, Planning, And Organizational Career Management To Career Stagnation: The Mediating Role Of Career Commitment

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Abstract

Introduction: Clinical nurses working in critical care units operate in highly demanding environments that require advanced clinical competencies, rapid decision-making, and continuous professional development. Effective career management plays a crucial role in supporting nurses' professional growth, and career stagnation is a precursor to undesirable workplace attitudes, including decreased job motivation, decreased self-belief, and reduced organizational engagement.
Objective: To examine the relationship between personal career tactics, planning, and organizational career management to career stagnation among Critical Care Units Nurses: The mediating role of career commitment.
Study design: descriptive correlational study methodology.
Setting: The study was done in all the Critical Care units at Main Assiut University Hospital.
Subject: All bedside nurses No.= (262).
Results: Over 50% of the surveyed nurses experienced a high level of career stagnation. Moreover, a statistically significant negative association was seen among career management, career commitment, and career stagnation.
Conclusions: Statistical analysis revealed that career management was inversely related to career stagnation, while conversely demonstrating a direct, positive correlation with career commitment Also, Organizational career management and personal career tactics exerting the strongest indirect influence inverse career planning.
Recommendations: It is advisable to conduct regular evaluations of nurses' career-related requirements and perceptions to guarantee congruence between personal career aspirations and organizational goals.

Keywords: Career management, Career stagnation, career commitment, Intensive care nurses

Introduction

Nurses in intensive care environments have significant psychological and professional stressors stemming from the necessity for prompt decision-making, ongoing engagement with critically sick patients, and challenges occurring against a backdrop of persistent workforce shortages, increasing service pressures, and growing concerns regarding job insecurity, all of which place considerable strain on the nursing workforce and threaten long-term professional well-being (Ni et al., 2025).

Healthcare organizations are increasingly dependent on the competencies and capabilities of their nursing personnel to maintain a competitive edge, which requires them to have a high level of energy and commitment, which is a significant determinant that affects the credentials and performance of healthcare providers (GMehralian et al.,2024), and immersion in their roles. Engaged nursing personnel possess a plethora of "resources" that they can allocate towards their professional endeavors. They exhibit a fervent passion for their work, are deeply engrossed in their tasks, and demonstrate resilience when confronted with obstacles and adversities. (Zhu et al., 2021).

Within this context a career management has emerged as a critical component of nursing workforce development. that include nursing work and impacts employee outcomes, organizations view it as a crucial issue (Canaj et al., 2021). Nurses join a hospital with their own professional goals and the conviction that the hospital's practices align with their career aspirations (Onyishi et al., 2019).

Career management is a shared responsibility between healthcare organizations and nurses, requiring organizational support for career development alongside individual career planning efforts (Wang, 2022).

Career management, also known as talent management, is composed of essential elements. individual career management involves the proactive steps individuals take to advance toward their career aspirations, which includes personal planning. This process requires individuals to identify their abilities, assess their interests, establish career objectives, and map out the necessary steps to reach these self-determined goals. Personal career tactics refer to the intentional actions and plan that nurses use to progress within a hospital to achieve

personal goals. Conversely, organizational career management includes the various policies and practices that companies deliberately implement to boost their employees' career success. Both personal and organizational career management not only complement but also reinforce each other (Orpen, 1994; Canaj et al., 2021).
Despite its importance, Lack or inadequate career planning, development, and support practices are associated with higher perceptions of career stagnation, a phenomenon characterized by the frustration and psychological damage that nurses endure when their careers are either temporarily or permanently blocked (Wang, 2022). Stagnation often arises from shifting organizational frameworks, financial uncertainty, and personnel downsizing initiatives. Remaining in the same role negatively affects nurses' psychological well-being, job satisfaction, retention, and professional performance, thereby potentially influencing the quality of patient care delivered in critical care settings (Abd-Elwareth et al., 2022; Mareza, 2026).
Therefore, fostering an employee's professional allegiance and contentment with their vocational path, career commitment ensures organizational continuity. Because nursing inherently requires extensive dedication, fostering a highly committed workforce is crucial for securing the future of nursing care. (GMehralian et al., 2024). Research has indicated that more dedicated nurses exhibit greater accountability, follow professional norms, and care for patients, all of which can improve safety and quality in critical care units (Ahmadzadeh et al., 2024).
Considering the above information on career management, career commitment, and career stagnation, the interrelationships among these variables in critical care nursing. remains insufficiently explored in contemporary nursing literature. More specifically, the mediating role of career commitment in the relationship. Addressing this gap is essential for developing evidence-based nursing management strategies that support professional development, strengthen workforce sustainability, and enhance retention among critical care nurses.
Therefore, the present study aims to investigate the link between career management dimensions and career stagnation exhibited by critical care unit nurses and to examine the mediating role of career commitment in this relationship.

Significance of the study

High stress and emotional exhaustion among critical care nurses directly compromise patient safety and lead to lower-quality care. The evidence highlights that commitment directly elevates overall healthcare performance (Royal College of Nursing, 2026). One method used in human resources management is career management (Cicek et al., 2016). Hospital organizations must provide nurses with additional opportunities to acquire new skills by implementing the clinical career ladder system, job reeducation, and job rotation for nurses (Kim& Jeong, 2019).
Research shows that career stagnation can have detrimental effects, such as lower job satisfaction, less enjoyment at work, and a higher intention to leave (Arzani et al.,2025). On the other hand, Empirical evidence suggests that workers who feel more compatible with their jobs are less likely to experience career stagnation. their vulnerability to career stagnation declines substantially, highlighting a direct correlation between job fit and professional continuity (Soltani Poorsheikh,2017).
Unlike previous career management models that conceptualize organizational support and personal career behaviors as independent determinants of career outcomes, the present study proposes that career sustainability among critical care nurses emerges from the dynamic interaction between organizational career management and individual career self-management. Within this framework, career commitment functions as the central psychological mechanism translating both organizational resources and personal career initiatives into lower career stagnation. This integrative perspective extends Career Construction Theory, the Job Demands–Resources model, and Social Exchange Theory by demonstrating that career commitment bridges structural career resources and proactive career behaviors in one of the most demanding healthcare environments.

The study's objective

The current study aims to examine the relationship between career management and its dimensions (personal career tactics, career planning, organizational career management), career stagnation, and career commitment among critical care unit nurses, and also investigates the mediating role of career commitment in this relationship.

The study's specific goals will be established at Assiut University Hospitals, including

- Assess career management and its dimensions among nurses.
- Assess career stagnation among nurses.

- Explore the mediating role of career commitment in this relationship.

Research hypotheses

To address the study's central aims, the following hypotheses are proposed:
H1: Nurses' career management will be associated positively with career commitment.
H2. Nurses' career stagnation will be associated negatively with career commitment
H3: Personal career tactics, career planning, and organizational career management are positively related to career commitment among critical care unit nurses.
H4: Career commitment mediates the relationship between career management and career stagnation.
H5: Career commitment mediates the relationships between personal career tactics, career planning, organizational career management, and career stagnation among critical care unit nurses.

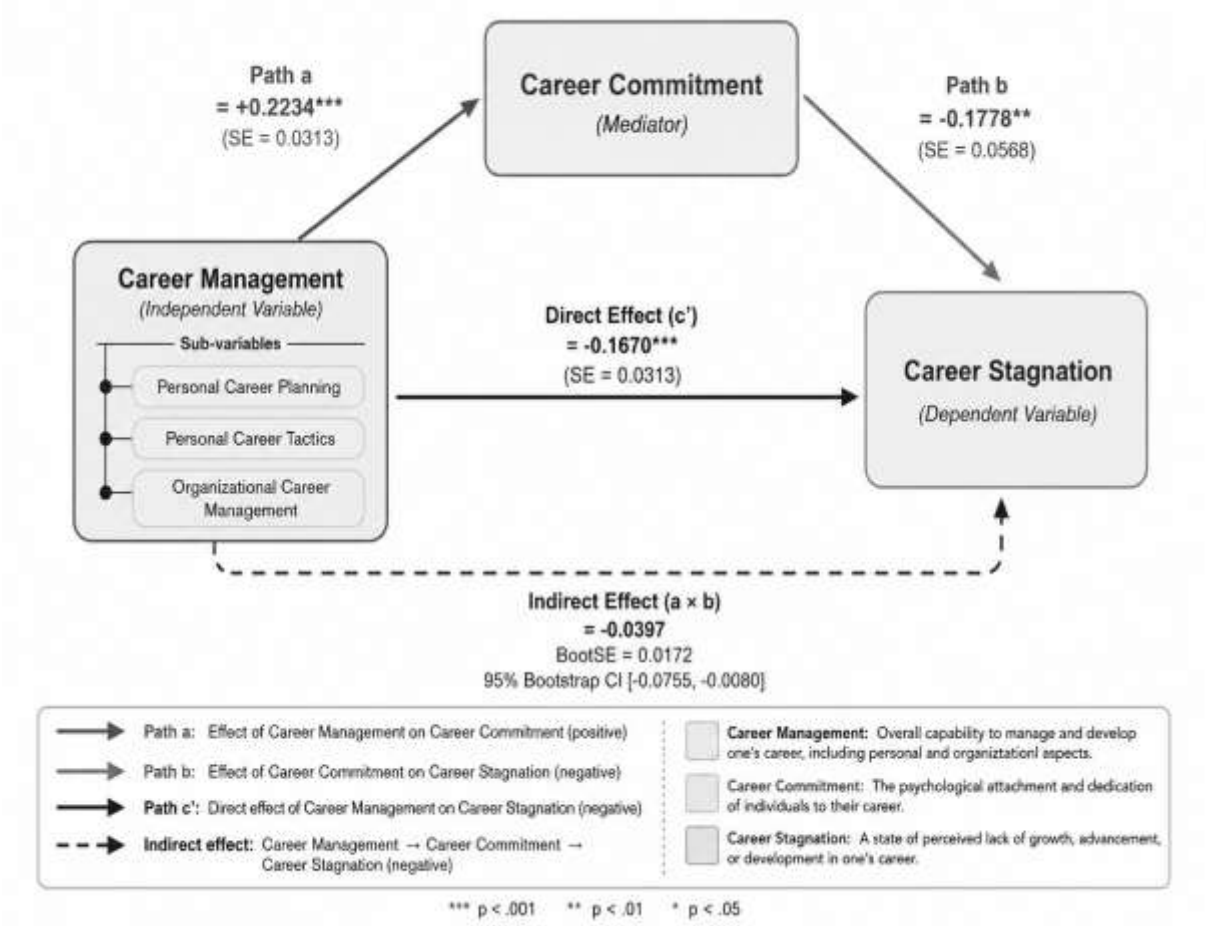

Figure 1. Conceptual framework illustrating the relationship between career management and career stagnation among critical care unit nurses, with career commitment as a mediating variable.

Subject and Method

I. Technical design

The research design, setting, subject, and data collection tools are all included in this design.

Research design

The study employed a descriptive correlational strategy.

Study setting.

The study was done in all the Critical Care rooms at Main Assiut University Hospital (bed No =1318).

Study subject.

All bedside nurses employed by C.C.Us, A total number (No = 262).

Data collection tools.

Self-administered questionnaires, which included two tools, provided the data required for the study：

Tool I: A structured self-administered questionnaire consists of two parts: -

Part (1): The researchers created the personal characteristics data form to gather information about nurses' gender, age, marital status, and years of experience.
Part (2): Career management, which was developed by Orpen (1994). This tool consists of 19 questions, including 5 questions about personal career planning, 6 questions about personal career tactics, and 8 questions about organizational career management. Items are rated via a 5-point Likert scale anchored by 1 (strongly disagree) and 5 (strongly agree)." The score also varies from 19 to 95. Score interpretation will vary according to the 19 items, with a total score of 95. Score < 60% (58-95) represent good career management; scores ≤ 60% (19-57) represent poor career management.
Tool II: Career stagnation, which was developed by Milliman (1992). The researcher used six questions related to career stagnation. The reversed questions were translated as it is and then converted back during statistical processing. Items are rated via a 5-point Likert scale anchored by 1 (strongly disagree) and 5 (strongly agree)." The score also varies from 6 to 30. Score interpretation will vary according to the 6 items, with a total score of 30. Score < 60% (19 –30) represents a high degree of career stagnation, Score ≤ 60% (6-18) represents a low degree of career stagnation
Tool (III): Career commitment, which was developed by Blau (1985). It consists of 8 questions. The reverse questions were directly translated and then converted back during statistical processing. Items are rated via a 5-point Likert scale anchored by 1 (strongly disagree) and 5 (strongly agree)." The score also varies from 8 to 40. Score interpretation will vary according to the 8 items; the total score equals (40). Score> 60% (25-40) represents a high level of Career commitment. Score ≤ 60% (8-24) represents a low level of Career commitment.

II. Design of administration

The study obtained official clearance for data collection from the nursing faculty dean, the hospital director, and the head nurses of the various critical care units at Assiut University Hospital.

III Operational design

The pilot study, the fieldwork, and the preparation phase are all part of this design
1)Preparatory phase
The researchers translated the tools into Arabic before giving them to a panel of five nursing specialists to evaluate the items' coverage, applicability, and clarity. A panel of five experts from Assiut University's Faculty of Nursing, Administration Department evaluated the study instruments' validity. The researchers were prepared for use since no changes were made to the study instruments
Ethical considerations
The Assiut University Faculty of Nursing's Ethical Committee authorized the research proposal. There is no danger to study participants on August 26, 2024, with permission number 1120240850. The Helsinki Declaration's standard ethical guidelines for clinical research were adhered to in this investigation. The participants in this study signed a written consent form. Participants in the study are free to decline and/or discontinue participation at any time and for any reason. Anonymity and confidentiality were guaranteed. Data collection was done with study participants' privacy in mind.
3) Pilot study

- To evaluate the tool's applicability and clarity, a pilot study was conducted. Additionally, to pinpoint issues that could arise during the actual data gathering process. 27 staff nurses, or 10% of the sample as a whole, were affected. SPSS version 22 (Statistical Package for the Social Sciences) was used to analyze the data gathered from the pilot project. The nursing personnel that participated in the pilot research were included in the whole study sample since no modifications were made afterward.

- **Reliability of the study tool items.**

Study tools	Cronbach's Alpha
Career management	α =0.798
Career stagnation	α =0.775
Career commitment	α =0.783

3-Field work
Each nurse included in the study met with the researcher to discuss the study's objectives and solicit their involvement. Instruments were given to the participating nurses to complete a self-administered questionnaire once formal consent was obtained. Each participant completed the surveys using the program in around fifteen minutes. The information gathering process lasted approximately three months, from April to June of 2025.

IV- statistical design:

Statistical analysis:
Data entry and statistical analysis were conducted using SPSS 22.0. Descriptive statistics, including the mean and standard deviation, were used to present the data, while multiple regression and correlation analyses were used to evaluate relationships among quantitative variables. A P-value of 0.05 or less was deemed statistically significant.

Results

Table (1): Mean score of Career management dimensions as perceived by the nurses studied in intensive care units at Main Assiut University Hospital (n=262).

Career management dimensions	Mean ± SD	Range
Personal Career Planning	18.93 ± 2.481	10.0 - 25.0
Personal career tactics	20.66 ± 3.315	5.0 - 25.0
Organizational career management	**22.24 ± 8.075**	8.0 - 40.0
Total career management dimensions	**61.83 ± 9.304**	36.0 - 86.0

Table (2): Mean score of Career stagnation as perceived by the nurses studied in intensive care units at Main Assiut University Hospital (n=262).

Career stagnation	Mean ± SD
"My opportunities for upward movement are limited in my present organization."	**3.68 ± 1.082**
"I expect to be promoted frequently in the future in my organization".	3.43 ± 1.269
"I have reached a point where I do not expect to move much higher in my organization."	3.11 ± 1.108
"The likelihood that I will get ahead in my organization is limited."	3.43 ± 1.087
"I am unlikely to obtain a much higher job title in my organization."	3.24 ± 1.235
"I expect to advance to a higher level in the near future in my organization."	**3.47 ± 1.163**
Total of Career stagnation	20.36 ± 4.77

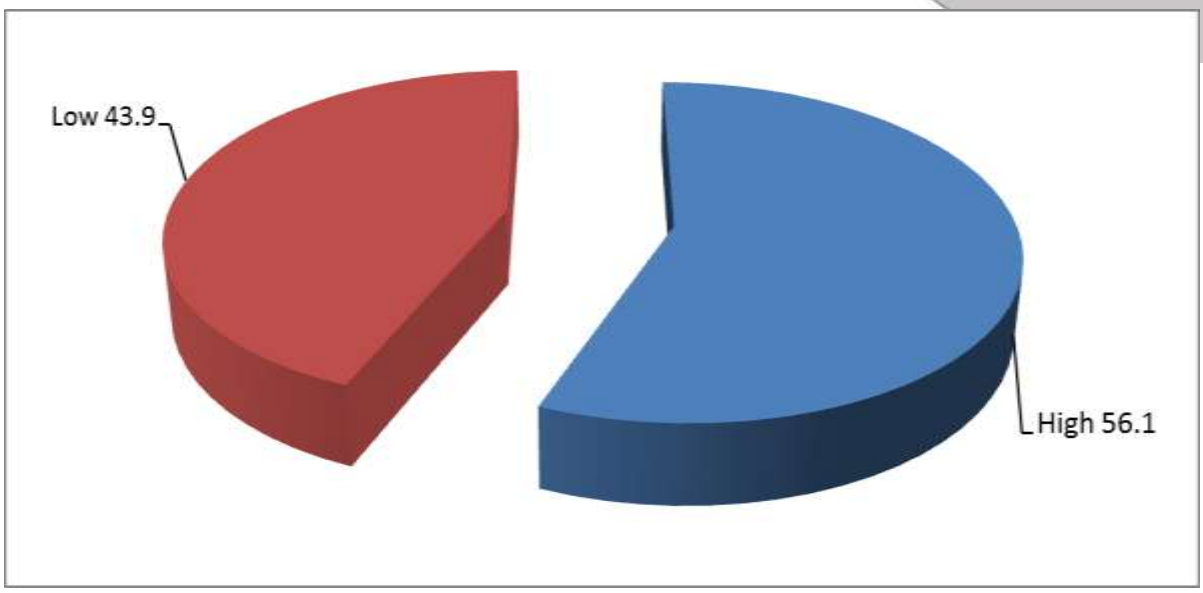

Figure (2): Career management levels as perceived by the nurses studied in intensive care units at Main Assiut University Hospital (n=262).

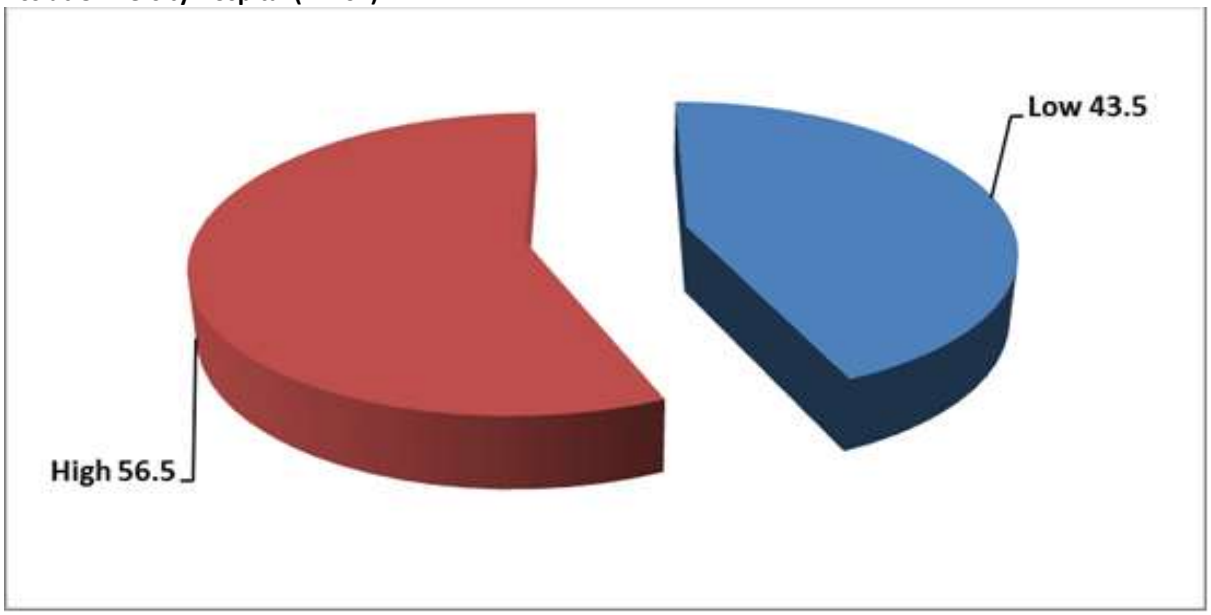

Figure (3): Career stagnation levels as perceived by the nurses studied in critical care units at Main Assiut University Hospital (n=262).

Table (3): Relationship between career management, stagnation and career commitment scores with personal data for studied nurses in critical care units of Main Assiut University Hospital (n=262).

Personal data items	Career management	Career stagnation	Career commitment
	Mean ± SD	Mean ± SD	Mean ± SD
Department:			
General Intensive Care Unit	65.87 ± 7.82	18.02 ± 3.22	3.88 ± 23.37
Medium ICU (Surgical)	64.71 ± 12.12	16.00 ± 5.71	5.34 ± 23.28
Chest ICU	**68.34 ± 8.52**	19.48 ± 4.39	5.67 ± 25.17
Medical ICU	63.90 ± 9.37	18.86 ± 4.74	5.02 ± 23.25
Blood disease ICU	51.60 ± 2.75	**23.50 ± .527**	99. ± 21.90

trauma ICU	54.92 ± .60	24.92 ± .60	1.60 ± 21.90
Intensive anesthesia care unit	56.39 ± 7.47	21.80 ± 5.30	3.01 ± 15.56
P-value	**0.001***	**0.001***	**0.001***
Age: (years)			
< 25 years	**65.73 ± 9.08**	18.68 ± 4.60	5.69± 23.49
25 years to <30years	59.51 ± 8.80	**21.22 ± 4.62**	
30 years and above	63.75 ± 8.83	20.35 ± 4.96	21.07 ± 4.54
			5.27 ± 23.89
P-value	**0.000***	**0.002***	**0.001***
Gender:			
Male	60.23 ± 7.92	**22.41 ± 4.04**	**23.02 ± 4.20**
Female	**62.50 ± 9.76**	19.51 ± 4.80	21.71 ± 5.43
P-value	0.051	**0.001***	**0.007***
Marital status:			
Single	18.89 ± 4.73	18.06 ± 3.53	21.60 ± 5.90
Married	**22.15 ± 4.25**	18.96 ± 2.52	4.04 22.76 ±
Divorced	21.83 ± 2.85	22.50 ± 1.22	21.50 ± 1.22
P-value	**0.002***	**0.001***	0.195
Years of experience:			
less than 10	61.70 ± 9.19		
from 10 to less than 15	60.54 ± 10.23	20.48 ± 4.84	22.01 ± 5.24
from 15 to more	69.62 ± 6.61	20.00 ± 4.64	
P-value	**0.046***	18.00 ± 2.00	22.45 ± 4.61
		0.325	
			23.50 ± 3.25
			0.681
			5.24 ± 22.01
			4.61 ± 22.45
			3.25 ± 23.50
			0.681

Table (4): Correlation of career management, stagnation, and career commitment as perceived by nurses studied in critical care units of Main Assiut University Hospital (n=262).

Table (5): Regression Results for the Mediation Model

		Career management	Career plateau	Career commitment
Career management				
Career plateau	r-value	-.403**		
	P-value	.001		
Career commitment	r-value	.405**	-.323**	
	P-value	.001	.001	

Path	B	SE	t	p	95% CI
Career Management → Career Commitment (a)	0.223	0.031	7.141	< .001	[0.162, 0.285]
Career Commitment → Career Stagnation (b)	-0.178	0.057	-3.132	.002	[-0.290, -0.066]
Career Management → Career Stagnation (c')	-0.167	0.031	-5.333	< .001	[-0.229, -0.105]

Note. B = unstandardized coefficient; CI = confidence interval.

Table 6. Direct and Indirect Effects of Career Management on Career Stagnation

Effect	B	Boot SE	95% Bootstrap CI
Direct Effect (c')	-0.167	0.031	[-0.229, -0.105]
Indirect Effect via Career Commitment	-0.04	0.017	[-0.076, -0.008]
Total Effect (c)	-0.207		

Note. Bootstrap confidence intervals were generated using 5,000 bootstrap samples.

Table 7. Summary of Mediation Effects of Career Commitment on the Relationships Between Career Management Dimensions and Career Stagnation

Predictor	a-path β (SE)	b-path β (SE)	Direct Effect (c') β (SE)	Indirect Effect (ab) β (BootSE)	95% Bootstrap CI	Interpretation
Organizational Career Management	0.196 (0.038)***	-0.161 (0.050)**	-0.289 (0.032)***	-0.031 (0.014)	[-0.062, -0.006]	Partial mediation
Personal Career planning	-0.060 (0.128)	-0.296 (0.054)***	0.331 (0.111)**	0.018 (0.041)	[-0.069, 0.096]	No mediation
Personal Career tactics	0.632 (0.088)***	-0.385 (0.059)***	0.320 (0.091)***	-0.243 (0.061)	[-0.375, -0.140]	Competitive mediation

Table (1) illustrates that the highest mean score regarding Career management dimensions is related to Organizational career management (22.24 ± 8.07), while the total mean score of career management dimensions (61.83 ± 9.304).

Table (2) illustrates that the highest mean scores for career stagnation are related to items "My opportunities for upward movement are limited in my present organization" and "I expect to advance to a higher level in the near future in my organization" (3.68 ± 1.082, 3.47 ± 1.163), respectively.

Figure (2) reveals that more than half of the studied nurses have a high level of career management (56.1%), while (43.9%) of them have a low level of career management.

Figure (3) shows that over one-third (43.5%) of the nurses in the study had a modest degree of career stagnation, while over half (56.5%) had a high degree.

Table (3) shows that nurses working in the chest intensive care unit had the highest mean score for career management. who were married and aged from < 25 years old (65.73 ± 9.08) and have years of experience from 15 to more, with highly statistically significant differences between nurses' career management, career stagnation, and ICU units, age, and marital status (0.001*&0.000* & 0.002*). There are statistically significant differences between nurses' career management with years of experience (0.0046*).

Table (4) shows a statistically significant inverse relationship between career commitment, career management, and career stagnation. (0.000*). In addition, Career commitment and career management showed a statistically significant positive association.

Table (5) The mediation analysis revealed that career management positively predicted career commitment (B = 0.223, p < .001), while career commitment negatively predicted career stagnation (B = −0.178, p = .002). The direct effect of career management on career stagnation remained significant (B = −0.167, p < .001). Furthermore, the bootstrap analysis indicated a significant indirect effect through career commitment (B = −0.040, 95% CI [−0.076, −0.008]). Because both the direct and indirect effects were significant, the findings support a partial mediation effect of career commitment in the relationship between career management and career stagnation.

Table (7) The mediation analyses revealed different patterns across the dimensions of career management. Career commitment partially mediated the relationship between Organizational Career Management and Career Stagnation, while no significant mediation effect was found for Personal Career Planning. In contrast, Career Commitment demonstrated a significant competitive mediation effect in the relationship between Personal Career Tactics and Career Stagnation. Furthermore, Personal Career Tactics exhibited the largest indirect effect among the career management dimensions.

Discussion

Career management, both at the individual and organizational levels, equips nurses with many chances for professional development, skill enhancement, and advancement, fostering a sense of purpose and direction. In contrast, career stagnation, characterized by a lack of promotional prospects, can lead to frustration, reduced motivation, and eventual disengagement (ICN, 2023).

It’s clear from (Table, 1) that organizational career management has the highest mean score regarding a career management dimension compared to personal career tactics and personal career planning. This result may stem from the fact that the ICU includes an overwhelming workload, a lot of night work, non-clinical responsibilities, poor teamwork, pressure to succeed academically and professionally, and environmental and technical difficulties.

These findings were consistent with (Tingting et al.,2025), who stated that ICU work is widely recognized as being in environments that are high-pressure and fast-paced, with Nurses often encountering significant workloads, limited bed availability, and staffing limitations, all of which exacerbate both physical and mental stress. According to Runhaar et al. (2019), nurses who benefit from enhanced career management provided by their organizations are more inclined to participate in career self-management activities, thereby fostering career advancement. Yogalakshmi et al. (2020) found that both organizational and personal career management collectively impact nurses' career development, indicating that career advancement is achieved through the collaborative efforts of organizations and individuals.

Over half of the nurses under consideration showed a high level of career management, according to the study's findings. (Fig. 2). This might be attributed to assisting ICU nurses, maintaining commitment, and lessening burnout and feelings of stagnation. Nursing management may support nurses and enable them to participate in committees such as ongoing education, infection management, and quality assurance. These results were in line with those of Toson et al. (2024), who demonstrated that effective career management is crucial for nurses' professional development. It emphasizes the value of methodical career planning and how it improves work satisfaction and retention. While the study correlates with the finding that over half of nurses have high levels of career management.

The current study's findings indicate that the items with the highest mean scores for career stagnation, “My opportunities for upward movement are limited in my present organization”, “I expect to advance to a higher level in the near future in my organization” (Table, 2). This might be attributed to the fact that after completing advanced coursework, there is no defined framework for promotions; instead, prospects for advancement are determined by seniority rather than better credentials. Furthermore, due to the ICU's lack of growth, the number of supervisory positions stays the same.

These results aligned with Ray (2022), who discovered that when nurses experience limitations in hierarchical Advancement and remain in the position for extended periods, this can lead to career dissatisfaction and

potentially higher turnover rates. and Abdelaliem & El-Sayed (2022), who found that significant perceptions among nurses regarding limited upward movement and expectations for advancement contribute to their overall career satisfaction and promotability.

The investigation showed that over 50% of the nurses under investigation experienced significant career stagnation (Fig. 3). This may be explained by the fact that uncertain career options may diminish nurses' incentive to seek further promotion. There are more nurses vying for fewer prospects for advancement. There are few chances for future vertical mobility and lengthier deployments in the same role for many nurses.

The outcomes concurred with Zhu et al. (2021), who found that nurses had a deep impression of career stagnation in their qualitative study on the experiences and attributions of resigned nurses. According to Hassan et al. (2020), almost half of the nurses in the study experienced career stagnation. Furthermore, Abd-Elrhaman et al. (2020) discovered that a significant degree of career stagnation was seen by nursing personnel. According to Elsayed and Khalaaf (2021), about one-third of nursing personnel had a medium degree of experience, while over half had a high level with complete career stagnation.

While these findings were inconsistent with Elsayed et al. (2023a), who explained that although the remaining portion of the nursing staff under study had a high view of career stagnation, fewer than three-quarters had a low perception. Additionally, the current research's findings contradict those of Gaturu & Njuguna (2020), who discovered that the majority of the sample under investigation did not experience career stagnation.

Concerning the connection between career management and career stagnation scores according to personal data (table,3). The highest mean score for nurses who are employed in terms of career management at the Chest ICU who were married and aged < 25 years and had 15 or more years of experience, with statistically significant differences between nurses' career management, stagnation, ICU units, age, educational qualifications, and marital status. There are statistically significant differences between nurses' Career stagnation and gender. This might be attributed to nurses working in critical care units needing ongoing training opportunities, advanced technologies, and interdisciplinary collaboration, all of which may enhance career management abilities. But the career stagnation increases as nurses age without any promotions or compensation for the same nature of heavy labor.

These results aligned with Wu et al. (2022), who discovered that married nurses, particularly those with longer experience, demonstrate stronger career management for family and financial reasons. And Elsayed & Khalaaf (2021) found that years of experience and educational qualifications are influential: Nurses with more experience or higher qualifications tend to report higher stagnation and work engagement, as well as greater career advancement opportunities.

Similarly, Khurshid et al. (2022) observed that married nurses showed higher career growth and loyalty, with family responsibilities potentially driving career advancement.

Conversely, these results were inconsistent with Anam et al. (2024), who found that career progression did not differ significantly based on gender or education, but did differ with marital status. This suggests that not all demographic factors consistently influence career management or satisfaction.

Additionally, (AL-Hammouri et al. 2024; Toson & Ibrahim 2024), found notable gender disparities in outcomes connected to careers, such as job engagement and stagnation, confirming the statistical associations between gender and career commitment or stagnation.

In relation to the link between career management and career stagnation as perceived by nurses in critical care units (Table 4), these findings align with Wang (2022), who posited that individual career management exerts a notable influence on career stagnation among employee cohorts .These findings support those of Elsayed and Khalaaf (2021), who found that organizational career advancement is significantly influenced by employees' career management activities, which also serve as a mediating factor in the effects of hierarchical stagnation on this development. and a statistically significant inverse relationship between the nursing staff's degree of job engagement and their impression of achieving a career standstill.

The findings suggest that career commitment partially explains the relationship between career management and career stagnation (Table ,5). Employees who engage in career management behaviors are more likely to develop a stronger commitment to their careers, which in turn is associated with lower perceptions of stagnation. This finding is consistent with career self-management and career construction perspectives, which propose that proactive career behaviors help individuals build psychological resources that support career engagement and long-term development (De Vos et al., 2020).

The significant direct effect of career management on career stagnation after accounting for career commitment indicates that additional mechanisms may also be involved, may further contribute to reducing career stagnation (Akkermans & Kubasch, 2017; Akkermans et al.,2020). Practically, the results suggest that organizations should support employees' proactive career management and strengthen their career commitment through mentoring, career planning, and continuous learning opportunities, thereby promoting sustainable career development.

Career commitment partially mediated the relationship between organizational career management and career stagnation (Table 6), This finding is consistent with Social Cognitive Career Theory (SCCT), which proposes that supportive organizational environments enhance individuals' motivational beliefs and career self-management behaviors, leading to more favorable career outcomes (Brown & Lent, 2019). Recent evidence also suggests that organizational career development initiatives increase employees' commitment by improving perceived organizational support and career growth opportunities, which subsequently reduce negative career outcomes such as withdrawal intentions and career dissatisfaction (Jia-jun and Hua-ming 2022; Wang & Abu Hasan 2024). For critical care nurses, structured career development opportunities may be particularly important because the demanding nature of intensive care practice can otherwise diminish long-term professional engagement.

In contrast, personal career planning did not demonstrate a significant indirect effect through career commitment. This is supported by recent career self-management research showing that proactive career behaviors, rather than planning alone, are the strongest predictors of career commitment and career sustainability (Özdemir et al., 2023; De Vos & Van der Heijden, 2017). Personal career tactics exhibited the largest indirect effect, demonstrating a significant competitive mediation effect on career stagnation. While actively deploying tactics strengthens career commitment and thereby buffers against stagnation.

Implications for Nursing Practice

Practically, these findings suggest that healthcare organizations should move beyond career planning alone and integrate organizational career management initiatives with interventions that foster proactive career tactics, thereby strengthening career commitment and minimizing career stagnation in highly demanding critical care environments.

- Create official clinical advancement pathways that reward expertise and specialized certification
- Standardize post-incident debriefings and peer networks to manage the psychological stress of ICU work.
- Designate specific time and resources for ICU nurses to engage in research and evidence-based practice,
- Move toward decentralized management where ICU nurses join committees to help govern unit policies, equipment choices, and staffing levels.
- Use digital tracking systems to monitor professional achievements and certifications.
- Launch formal mentorship programs focused on professional identity and long-term career goals.
- Conduct frequent, non-punitive "stay interviews" to review goals and action plans, ensuring individual trajectories align with department needs before staff considers leaving.

Conclusion

The study's findings lead to the following conclusions:

A statistically significant inverse relationship was identified between career commitment, career management, and career stagnation among the nurses under study. Moreover, a significant positive correlation was observed between career management and commitment.

Commitment related to career differentially mediates the effects of career management dimensions on career stagnation, with organizational career management and personal career tactics exerting the strongest indirect influence. These findings highlight that fostering organizational career support and proactive career behaviors may be more effective than career planning alone in reducing career stagnation among critical care nurses.

Recommendations

The current study suggested recommendations included the following:

- Integrate career counseling from the point of hire, helping nurses align their personal values and goals with organizational needs through regular action-plan reviews.
- Identify nurses at risk of career stagnation and implement strategies such as job rotation, role enrichment, leadership training, and expanded clinical responsibilities to reduce stagnation and maintain motivation.
- Conduct regular assessments to ensure alignment between individual career goals and organizational objectives

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