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**ORGANIZATIONAL CLIMATE FOR INNOVATION IN  
HEALTHCARE: LEADERSHIP AND TECHNOLOGICAL  
STRESS PERSPECTIVES**

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<b>Keywords</b>	<b>Abstract</b>
<p><i>Technostress, Digital Leadership, Innovation Climate, Healthcare Innovation, Digital Transformation, Organizational Climate</i></p>	<p>Healthcare organizations are undergoing a rapid digital transformation that is restructuring clinical practices, leadership processes, and organizational dynamics. The implementation of electronic health records (EHRs), telemedicine, artificial intelligence, and integrated information systems has led to operational streamlining, increased service access, and improved operational efficiency and better patient outcomes. Nevertheless, complex job demands created by these technological advances can impact employee well-being, innovative abilities, and the organization as a whole (Vial, 2019; Shanafelt et al., 2016). Technostress, defined as the stress experienced when using information and communication technologies, has become one of the crucial issues concerning the health service (Tarafdar et al., 2007). Technostress is multidimensional; literature has identified technology overload, complexity, uncertainty, and invasion to negatively affect job satisfaction, performance, and psychological wellbeing (Ragu-Nathan et al., 2008). Within the concept of the Job Demands–Resources (JD-R) model, technostress serves as a job demand that drains cognitive and emotional resources, potentially limiting innovative work behaviour (Bakker &amp; Demerouti, 2007). Because innovation depends on creativity, taking initiative, and creating psychological safety, too much technological overload can inhibit the innovation process in healthcare settings. In this article, we investigate the dynamic relations between technostress, digital leadership, and</p>



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	<p>organizational climate for innovation in the health sector. Referring to Organizational Climate Theory (Amabile et al., 1996), it shows how a supportive environment with experimentation, collaboration, and knowledge sharing leads to better innovation outcomes.</p> <p>Digital leadership is significantly important in relieving technostress by linking technological undertakings with objectives of the organization, giving adequate resources and training, and stimulating adaptive cultures (Cortellazzo et al., 2019). According to Social Exchange Theory, leadership support generates reciprocal levels of engagement and commitment (Cropanzano &amp; Mitchell, 2005). Drawing on stress, leadership, and innovation literatures, this study develops a unified framework that explains how digital leadership and innovation climate can both buffer technostress (as seen in the case of healthcare digitization) and foster sustainable innovation during a moment of healthcare digital transformation. The paper contributes theoretically by extending JD-R to the digital healthcare setting and offers concrete implications for leadership development, climate cultivation, and the management of technostress so that resilient innovative health systems may emerge.</p>
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## 1. INTRODUCTION

With the development of information and communication technologies (ICT), healthcare systems across the globe are undergoing tremendous digital transformation. New technologies including electronic health record (EHR) systems, telemedicine platforms, artificial intelligence (AI) diagnostics, wearables, and digital tools for communication – have radically changed clinical workflows, patient engagement, and organizational coordination. They have played a role in the accessibility, operational efficiency, clinical decision-making, and patient outcomes in health care (Hanelt et al., 2021). On the other hand, there are significant organisational challenges presented by digitalization especially with technostress in the healthcare staff. Technostress is defined as stress resulting from difficulties in adapting to new technology, over-extensive digital workload, complexity of systems, rapid technological change, and demands of continuous connectivity (Ragu-Nathan et al., 2008; Tarafdar et al., 2010). Clinical responsibility and time-sensitive decision-making are among the aspects of the healthcare environment where technological pressures can result in increased psychological strain, decreased job satisfaction, and compromised performance outcomes (La Torre et al., 2019). These kinds of stressors may also impact innovative work behaviour, which is a crucial characteristic for health care reform with regard to the quality of care delivery, patient safety and the adaptability of organizations. Leadership has become a key to facilitate a successful digital transformation.

Digital leadership includes leadership's ability to drive technology adoption, encourage digital capability, drive innovation, and provide resources for employees to take advantage of technological change (Claassen et al., 2021). Successful leadership in the digital world can lower resistance to technological change; increase organizational learning, and create innovation-friendly environments. Furthermore, organisational climate for innovation is also equally critical, defined as employees' collective perceptions of organizational assistance for creativity, experimentation, collaboration, and knowledge sharing (Anderson et al., 2014). Such an innovation climate impacts



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employee motivation, psychological safety and willingness to take part in innovation activities. There is recent scholarly interest in digital transformation, yet most existing research explores technostress, leadership and innovation climate separately. Opportunities for integrated perspectives to explore the joint impact of these factors on innovation outcomes in health care remain scarce. This paper fills this void and integrates some of those theoretical perspectives to gain a comprehensive understanding of organizational climate for innovation through lenses of leadership and technological stress in healthcare contexts.

## **2. THEORETICAL FOUNDATIONS**

### **2.1 Theory of Job Demands–Resources.**

The Job Demands-Resources model (JD-R) offers a useful tool for studying the relationship of technological stress with organizational resources. Job demands, such as complexity of technology and burdens from workloads may use up employees' cognitive or emotional resources, resulting in burnout and diminished performance (Demerouti et al., 2001). By contrast, job resources like leadership support, training opportunities, or innovation-supportive climates boost engagement, motivation, or innovation outcomes. Technology is a major job demand within healthcare digital transformation, and digital leadership and innovation climate serve as organizational resources buffering stress and spurring innovation.

### **2.2 Social Exchange Theory.**

Social Exchange Theory assumes that supportive leadership encourages both reciprocal involvement on the part of employees as well as their willingness to contribute and engage, along with discretionary behaviours like innovation (Blau, 1964). When healthcare workers feel leadership support during technological changes, it leads them to perform innovative behaviours, knowledge sharing, and adaptive learning.

### **2.3 Organizational Climate Theory.**

Organizational Climate Theory focuses on employees' common perspectives of how attitudes to organizational practices, policies, and values affect their actions (Schneider et al., 2013). In other words, as an innovation ecosystem characterized by a work environment with psychological safety, a willingness to try out new ideas, and cooperative learning, this increases the performance of innovation itself.

## **3. TECHNOSTRESS IN HEALTHCARE DIGITAL TRANSFORMATION**

As electronic health records (EHRs), telemedicine systems, AI-supported diagnostics, and digital documentation platforms spread at an accelerated pace, so too has technostress become endemic to healthcare. All this requires healthcare professionals to keep adapting to new technologies and still deliver quality care to the patients. Technostress is a serious problem in modern healthcare systems; this dual demand increases cognitive load and emotional pressure. Technostress is a term to describe the type of stress experienced by individuals due to the inability to cope with information and communication technologies (ICTs) in a healthy way (Tarafdar et al., 2007). In a



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multidimensional framework like that developed by Ragu-Nathan et al. (2008), researchers recognized specific techno-stressors that could be the causes of negative employee outcomes.

➤ **Core Dimensions of Technostress:**

**1. Technology Overload.**

Technology overload, which is when ICTs add to workload and require employees to work harder and longer (Tarafdar et al., 2007). In healthcare, automated alerts, digital charting, and performance monitoring systems lead to speed-of-work, stifling the level of reflection needed for innovation.

**2. Technology Complexity.**

They need advanced skills and continued learning with complex ones. When professionals at the healthcare professional level believe that digital systems are hard to understand, it leads to higher frustration and diminished job performance (Ragu-Nathan et al., 2008).

**3. Technology Uncertainty.**

Frequent technological changes and regular upgrades to applications create instability. Technology uncertainty creates stress, as new interfaces and techniques need to be adapted to over and over again with employees (Tarafdar et al., 2007).

**4. Technology Invasion.**

Technology invasion is the phenomenon of work–life boundaries breaking down, thanks to constant connectivity (Ragu-Nathan et al., 2008). In the context of healthcare, teleconsultations and remote access systems increase the demands of work beyond normal working hours.

**5. Continuous Connectivity Demands**

Dangers of never-ending connectivity. Continuous Connectivity Demands. Chronic digital contact leads to increased interruptions and cognitive fragmentation. Studies show that continuous connection can lead to emotional fatigue and declining concentration level (Ayyagari et al., 2011). Technostress Has Its Negative Consequences.

➤ **Numerous empirical studies suggest that technostress adversely impacts:**

- Employee wellbeing.
- Job satisfaction.
- Organizational commitment.
- Performance outcomes. (Ragu-Nathan et al., 2008; Tarafdar et al., 2010).

Within the health sector, technostress has been associated with burnout, reduced clinical efficiency, and increased error probability (Shanafelt et al., 2016). Cognitive overload resulting from a poorly designed digital environment could weaken the quality of clinical judgment and decision-making. Moreover, technostress is linked with emotional exhaustion which is an integral part of burnout that mediates the association between ICT demands and decreased job performance as suggested by Maier et al., 2015. Technostress and Innovative Work Behaviour (IWB). The previous literature mainly considers burnout and drop in productivity, with less investigation on the relationship between technostress and innovative work behaviour (IWB). This is a theoretically important gap.



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Job Demands–Resources (JD-R) model has indicated that job demands, including technostress, drain psychological and cognitive resources, leading to decreased discretionary behaviours such as innovation (Bakker & Demerouti, 2007).

Technostress may erode the cognitive flexibility, intrinsic motivation, and proactive engagement needed for innovation. On the contrary, moderate levels of technological stress induced by moderate technological challenges are found to lead to learning or adaptive problem solving in some cases, if the organizational resources of technology-affected companies are sufficient (Tarafdar et al., 2015). Thus, the technostress–innovation relationship may also be contextual, as digital leadership and innovation climate may impact on such dynamics. The need for the comprehension of this relationship is necessary for innovation as part of the process for enhancing the quality, operational effectiveness and sustainability of healthcare.

#### **4. DIGITAL LEADERSHIP AND HEALTHCARE INNOVATION**

Digital leadership is a strategic capability that pairs technological competence, visionary leadership, and transformational influence to navigate organizations through the changing face of business. Digital leaders can serve as leaders in mitigating uncertainty and developing innovation-enabling cultures in knowledge-intensive, contemporary healthcare settings. This is supported by empirical studies which highlight that digital leadership encompasses not only the technical aspects to be managed but is also strategic-level alignment, communication skills, and people-centered change management (Cortellazzo et al., 2019).

##### **➤ Key Contributions of Digital Leadership to Innovation**

- **Enhancing Digital Literacy.**

The digital leaders need to invest in educating employees on emerging technologies. Leaders who promote digital literacy to employees empower a staff who are skilled and confident using these technologies. It reduces resistance and increases innovative capacity.

- **Providing Training and Resources.**

The foundation of digital transformation requires infrastructure, training programs, and technical support to be successful. Digital leaders strategically assign resources, enabling employees to learn, and give them toolsets of their own, to innovate.

- **Encouraging Experimentation.**

Innovations thrive in experimental environments. Digital leaders encourage trial-and-error learning and provide employees with a reason to try new digital products without punitive repercussions.

- **Promoting Collaboration.**

Digital transformation generally requires coordination across disciplines. This collaboration of digital platforms, communication systems, and mechanisms for sharing knowledge enables leaders to set the tone for cross-functional working.



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## 5. REDUCING TECHNOLOGY-RELATED ANXIETY

Technostress can arise from changing technology at a rapid rate. Digital leaders alleviate anxiety with transparent messages, stepwise action plans, and emotional sustenance. Transparent digital vision and clear guidance decrease uncertainty and reduce cognitive load. Digital Leadership and Organizational Outcomes. Leadership support has had a positive impact on the motivation and innovation capability of employees, organizational adaptability shown to be influenced positively by empirical research (Cortellazzo et al., 2019). Supported digital leaders enhance motivation and commitment to technology initiatives, which in turn enhance innovative work behaviour.

In the JD-R framework, digital leadership can be considered as an organizational resource by

- **Adopting the Job Demands–Resources (JD-R) framework as one of which:**
  - Mitigates the detrimental effect of technostress.
  - Strengthens employees’ resilience and engagement.
  - Enables sustainable innovation performance.
  - Digital Leaders as Change Agents. Digital practitioners are also strategic change agents as they:
- **Building technological efforts into the mission and long-term goals of the organization.**
  - Linking digital strategies with operational workflows.
  - Meeting the needs and concerns of employees during the transformation.
  - Developing adaptive cultures in organizations.
  - Digital leaders balance technological advancement with human-centred leadership, allowing for climate change that enables digital transformation and long-term innovation.

## 6. ORGANIZATIONAL CLIMATE FOR INNOVATION IN HEALTHCARE

A supportive innovation climate fosters the following mechanisms:

### 1. Psychological Safety.

Psychological safety relates to employees’ perceptions that they can disclose ideas, questions, and concerns without fear of punishment or embarrassment. Innovative solutions are more likely to be successful when healthcare professionals feel comfortable suggesting new digital solutions or criticizing old methods. Such innovation climates foster learning opportunities through mistakes, thereby minimizing fear-induced inhibition and improving idea generation (Amabile et al., 1996). Knowledge Sharing. Innovation relies on cross-functional knowledge sharing. In healthcare, efficient sharing of expertise of physicians, nurses, IT specialists, and administrators enable development and implementation of digital solutions. Favourable environments create openness in communication, inter-departmental collaboration, and open information flow that are necessary for the spread of innovation.

### 2. Creativity.

Creativity is creating new and useful ideas. In this sense, organizational climates that facilitate creativity from autonomy and resources to managerial promotion directly encourage creativity. When leaders recognize and reward creative work, employees are more encouraged to exercise



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problem-solving behaviour (Amabile et al., 1996). Collaborative Learning. If we combine technology and design approaches in collective learning, it allows teams to reflect on technological implementations, share what was learned and then improve practices as a whole. In healthcare establishments, collaborative learning facilitates evidence-based innovation and safe technology acceptance. These atmospheres set up feedback loops and interdisciplinary team learning. Risk-Taking Behaviour. Innovation is inherently uncertain. A robust innovation climate makes calculated risk and experimentation credible. By suggesting that responsible risk-taking will not entail punitive repercussions, employees prefer to try new digital means and clinical technological devices? Climate of Innovation in a Healthcare Environment.

➤ **The high innovation climates of healthcare-oriented industries are shown to exhibit:**

- More flexibility for technological change.
- Quicker integration of digital health systems.
- Enhanced care processes for patients.
- Improved quality of service outcomes

These results support the componential theory of creativity, noting that there is a positive relationship between organizational incentive, supervisory support and resource availability in fostering innovation (Amabile et al., 1996). The Innovation Climate as a Moderator between Technostress and Innovation Technostress, in the JD-R perspective, operates as a work-driven demand in that it takes away the cognitive/emotional resources of workers. But context of innovation climate may be a moderator. Buffering Effect (Supportive Climate).

➤ **In favourable innovation climates:**

- The new challenges that come from technology are reframed as opportunities for learning.
- Employees receive professional development and peer assistance.
- Leadership articulates clear digital visions. Stress is reduced by social and organisational resources.

So, the negative impact of technostress to innovative work behaviour diminishes. Amplifying Effect (Unsupportive Climate).

➤ **In weak or unsupportive innovation climates:**

- Communication of technological changes is weak.
- Errors are penalized.
- Adaptation resources are tight.
- Employees face even more uncertainty.

In this environment, technostress is enhanced and suppresses innovating behaviours even more. Thus, innovation climate moderates the technostress–innovation relationship, as it either dampens or amplifies resources-depleting effects of stress.

## 7. INTEGRATED CONCEPTUAL PERSPECTIVE

Specifically, the article presents an integrated conceptual framework connecting technostress, digital leadership, innovation climate, and innovative work behaviour in digitally transforming



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healthcare domains. Technostress is defined as job demands driven by the level of technological complexity, digital workload, and continual system adaptation pressures. Based on the Job Demands–Resources (JD-R) framework, these demands tend to strain employees' cognitive and emotional resources, making adaptation difficult and innovative behaviour restricted (Demerouti et al., 2001; Ragu-Nathan et al., 2008). Within this context, digital leadership is considered a critical organizational resource and potential mediator that enables technology adaptation, develops employees' digital competence, and endorses culturally innovative organizations (Claassen et al., 2021; Cortellazzo et al., 2019). Consistent with Social Exchange Theory, supportive leadership may enhance reciprocal employee engagement, creativity, and discretionary innovative behaviours in times of technological change (Blau, 1964).

In addition, innovation climate is introduced as a contextual moderator shaping employee responses to technological stress and leadership attitudes. Organizational Climate Theory proposes environments of psychological safety, collaboration, and openness to experiment promote creativity and innovation performance (Anderson et al., 2014; Amabile et al., 1996). Such climates may dampen the impact of technostress while increasing the impact of leadership-driven innovation. The proposed framework accordingly proposes that the impact of technostress is observed via resource depletion mechanisms; digital leadership (i.e., technology management practices and strategic direction) attenuates technostress while reinforcing innovation outcomes and the context of organizational innovation climate moderates the positive and negative relationship between technostress, leadership practices, and innovation outcomes. This integrated view advances theoretical comprehension of healthcare digital transformation through integrating the stress, leadership, organizational climate, and innovation literatures under one analytical framework.

## 8. PRACTICAL IMPLICATIONS

### ➤ Managing Technostress

Healthcare professional development for healthcare organizations in the midst of digital transformation should include integrated interventions, namely digital training systems, user-centered technology design, workload control and management procedures, and psychological aid provisions. Digital technology training programmes improve employees' technological competence and confidence and minimize technology-related anxiety and enhance a workers' adaptability to evolving digital systems (Tarafdar et al., 2010). The usability, accessibility, and concordance with clinical workflows in user-centred technology design adds to minimise technostress which are important for efficiency and support of efficiency and engagement with innovation (La Torre et al., 2019).

Managing workloads wisely is an equally important in reducing the cognitive and emotional effects of heightened digital documentation and system complexity. Achieving the right balance between these technological demands and managing workloads can aid in supporting mental health



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and performance as workers may find that balancing technology demands with manageable workloads may maintain employee welfare and performance (Ragu-Nathan et al., 2008). Support mechanisms of psychological help such as counselling services, peer support programmes and resilience training can promote coping with technological stress on health professionals and the ability to overcome technological stress and preserve innovative capacity in a high-stakes digital environment (Borle et al., 2021). Taken together, these interventions improve employee wellbeing, make it easier to adapt to evolving technologies, and help to develop innovation capacity in digitally transformed healthcare organizations.

➤ **Developing Digital Leadership**

Leadership development in healthcare organizations must develop their digital competencies, change management capabilities, strategic technological vision, and innovation facilitation skills. Digital competencies also contribute to leaders' abilities to address emerging technologies, guide digital implementation processes, and assist employees navigate technology-enabled environments (Claassen et al., 2021). Change management skills are also imperative as digital transformation often demands reorganizing workflows, redefining professional roles, and managing resistance to technological adoption (Cortellazzo et al., 2019).

In addition to that, leaders need to articulate a clear strategic technological vision that aligns digital initiatives with organizational objectives and patient-care priorities. This vision-driven leadership motivates employees with involvement in innovation and commitment to change (Westerman et al., 2014). Finally, effective leaders play an active role in the promotion of innovation by driving experimentation, knowledge sharing, and psychologically safe environments that promote creativity (Anderson et al., 2014). Together, such leadership development that encompasses these competencies enhances organizations' capacity for technological adaptation and supports sustainable innovation within digitally transforming healthcare systems.

➤ **Fostering Innovation Climate**

Organizations seeking digital transformation must intentionally provide a climate for psychological safety, collaboration, open communication, and trial-and-error experiences. Psychological safety allows employees to freely express creativity without fear of negative consequences, which has been shown to help drive new ideas (Edmondson, 1999). Collective learning with a spirit of innovation is positively reinforced through collaborative practices and knowledge sharing. This is particularly relevant in complex healthcare environments that require cross-disciplinary coordination (Anderson et al., 2014). There is also transparency in a culture of technology innovation resulting from communication, reducing ambiguity and allowing employees to take ownership of new ways to deliver care in an open and transparent way. It also promotes organizational adaptability and continuous improvement, which is essential during fast changing technology times (Amabile et al., 1996) for learning from failure or enabling testing through an organisation's ability to experiment and learn. Collectively understood to enhance innovation



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performance, as digitally transforming healthcare organisations do, these supportive organizational cultures reduce technostress.

## 9. LIMITATIONS

The limitations of this conceptual paper must be recognised. Due to a lack of original empirical data, the study looks only to literature for reference. Systematic conceptual synthesis can represent the development of theoretically and conceptually based theory, though it offers no meaningful evidence for relationships that may be described (Snyder, 2019). As a result, the findings in this paper warrant extensive quantitative and qualitative testing to determine the robustness of this causal finding. Secondly, the study is specifically based in healthcare settings, which may limit the application of findings for other sectors. Healthcare is indeed an important, technology-based sector, yet innovation dynamics and leadership models may vary across sectors (Hanelt et al., 2021). Moving forward, it would be beneficial to consider sectorial comparative research on this topic, in the lens of the framework, to more effectively define a definition of the boundary conditions underlying these phenomena operating.

The third is that the advancement of digital technologies is rapid. Over time, technological advancements, including artificial intelligence, machine learning and advanced health informatics systems (Tarafdard et al., 2010), are also expected to alter the relationship of innovation with stress. Theoretical models must evolve as technology evolves, so new empirical updates must go along with new technology advancements. Finally, the existing studies are predominantly cross-sectional and do not provide causal insight into or understanding of underlying mechanisms of long-term digital transformation (Claassen et al., 2021). While there has been a high-quality response in many areas at large, the absence of longitudinal data in this particular space has lost an opportunity to understand long-term processes of technostress; leadership adaptation; and climate for innovation. In conclusion, these limitations challenge the need for future empirical research, underpinned by longitudinal, multilevel, and healthcare-oriented research designs to inform theoretical and practical contributions to digital transformation and innovation drivers for healthcare organizations.

## 10. FUTURE RESEARCH DIRECTIONS

First, the evolution of innovative environments in digitally transformed healthcare environments will require increasingly comprehensive theoretical synthesis in future research efforts. Multilevel empirical studies will also be required, to elucidate complex interlinkages between individual, group, and organizational variables that correlate to innovation (Demerouti et al., 2001; Anderson et al., 2014), such as the interaction among technological stress, leadership practices, and organizational climate. Doing so would also contribute a further theoretical integration between the existing leadership, stress, and innovation literatures and allow for causal inference.

Second, inquiry is needed on how healthcare-specific digital innovation models may develop. The regulatory complexity, professional traditions and the focus on safety of patients in healthcare



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contexts can produce innovation systems that are unlike many industrial or corporate ones (Hanelt et al., 2021). Frameworks which are contextual may lead to findings that are better-informed about digital transformation of healthcare organisations.

Thirdly, digital transformation requires longitudinal analysis to evaluate the evolution of technostress, leadership adaptation and innovation climate towards digital deployment change over time. Longitudinal studies may reflect dynamic processes of organizational change which cross-sectional ones generally ignore (Claassen et al., 2021).

Fourth, there are future investigations that should explore the correlation between the wellbeing of employees and innovative work behaviour especially at a technologically-saturated medical environment. Technological stress might also have implications for psychological wellbeing and could help to influence creativity and innovation activity among practitioners (Borle et al., 2021).

Finally, research on cross-cultural and regional comparisons is needed to find out how healthcare systems, technological paradigms and cultural tastes influence the effectiveness of digital leadership and how technostress experiences impact innovation findings. These studies could help broaden our generalization of global trends and inform healthcare innovation strategies more globally (Anderson et al., 2014).

## 11. CONCLUSION

Digital transformation is radically transforming the landscape of healthcare organisations by integrating electronic health records (EHRs), artificial intelligence, telemedicine, data analytics, and interoperable information systems. Improving service efficiency, diagnostic accuracy, and patient-centered care through technology. However, they also bring complex job demands, which can induce technostress that increases technostress and affects employees' levels of innovation (Vial, 2019; Shanafelt et al., 2016). Digital transformation entails organizational change inspired but also shaped by digital technologies reshaping structures, processes, and professional roles (Vial, 2019). It is particularly intensive for healthcare providers to transform due to regulatory demands; patient safety concerns; and high cognitive workload. Even as digital systems can enhance coordination and clinical decision-making, excessive technological demands may undermine employee wellbeing and discretionary innovative behaviours.

Technostress – stress due to ICT use – is associated with negative effects on job satisfaction, performance, and psychological wellbeing (Ragu-Nathan et al., 2008; Tarafdar et al., 2007). Technostress underpins the Job Demands–Resources (JD-R) framework as a job demand that depletes cognitive and emotional resources (Bakker & Demerouti, 2007). Innovation requires proactive engagement, creativity, and risk-taking behaviours dependent on adequate resource availability. Thus, understanding how healthcare organisations might respond to technostress while maintaining innovation is both theoretically and practically vital.

## 12. AUTHOR(S) CONTRIBUTION

The writers affirm that they have no connections to, or engagement with, any group or body



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### **13. CONFLICTS OF INTEREST**

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### **14. PLAGIARISM POLICY**

All authors declare that any kind of violation of plagiarism, copyright and ethical matters will\ Take care by all authors. Journal and editors are not liable for aforesaid matters.

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