

INDICATIONS OF EMPLOYEE WORK STRESS AFFECT THE PERFORMANCE OF EMPLOYEES OF HEALTH FACILITIES

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ABSTRACT

Employee performance is a result achieved by the employee in his work according to certain criteria that apply to a particular job. Commitment is needed by the organization so that competent human resources in the organization can be maintained and maintained properly. However, if the commitment of employees who have begun to experience work stress in the work environment will cause a decrease in the level of performance of these employees. The purpose of this study is to determine the indication of employee stress that affects the performance of employees of health facilities. This study is a descriptive qualitative research. Informants in this study amounted to 6 people who work in health facilities X in Yogyakarta. Data collection using field observation, in-depth interviews, and documentation. Data analysis using data reduction, then described in narrative form. Based on the results of this study shows that there are many indications of employee stress that reduces employee performance in health facilities, one of which is work conflict, work culture and workload. Two of the six informants who conducted interviews stated that workload was a major factor in increasing work stress, resulting in boredom in carrying out work routines and decreasing the employee's performance in the assessment every month. Three other people stated that work conflict is a major factor in increasing stress at work, usually occurs between employees in one division who do not agree in carrying out the work. The conclusion that can be drawn is a strong indication of the trigger for increasing work stress and reducing employee performance in health facilities X is excessive and uneven workload, as well as work conflicts between divisions that often occur.

Keywords: health facilities; employee performance; work stress

INTRODUCTION

Human Resources (HR) is an integrated ability of thinking and physical power owned by the individual, behavior and nature determined by heredity and environment, while the performance of work motivated by the desire to meet the satisfaction. Human resources is an asset in all aspects of management, especially regarding the existence of organizations. The success of an organization, both large and small, is not solely determined by the natural resources available, but much is determined by the quality of Human Resources (HR) whose role is to plan, implement and control the organization concerned (Bukit, et al., 2017).

Work stress is a serious health problem, both in terms of high incidence and impact. The World Health Organization (WHO) in 1996 declared stress to be the world epidemic of the 21st century (Maxon, R, 1999). The National Institute of Occupational Safety and Health (NIOSH) reports about 40% of workers say their jobs are stressful at extreme levels. Another report from Attitude in American Workplace VII states 80% of workers feel stress at their jobs and half need help to cope (Levy, et.al, 2011). Occupational stress is a condition when the work stessor alone or together with other factors interacts with individual characteristics, resulting in impaired physiological and psychological balance. If it lasts a long time, the disorder can interfere with the cardiovascular system, mental disorders, musculoskeletal

disorders, and other health problems. Additionally work stress can be related to accidents and workplace violence. Work stress can also cause organizational strain in the form of absenteeism, decreased work performance, increased injury rates and employee turn-over (Smedley J, Dick F, Sadhra S., 2013). Losses due to work stress in the form of absenteeism, low productivity, high employee turn-over, Workers ' Compensation, medical and accident insurance in the United States reach 200 billion dollars per year.

Nursing is a profession with exposure to various potentially stressful situations in the workplace. Sources of stress in the nursing profession relate to interactions with patients and other health professions. Nurses have more tasks to do than other professions (French ES, Lenton R, Walters V, Eyles J. , 2017). Research results of the Indonesian National Nurses Association in 2006 showed 50.9% of Indonesian nurses have experienced work stress, with symptoms of frequent dizziness, less friendly, feel tired, lack of rest due to heavy workload and inadequate income (Sukmaretnawati, C., 2014). According to data from the Indonesian Ministry of Health in 2014, the number of nurses in Indonesia reached 237,181 people, thus the incidence of work stress in nurses is quite large. (Indonesian Health Profile, 2014)

There are instruments to measure work stress, but the specific job characteristics of nurses require assessment instruments that are appropriate to their work. In 1995, the expanded nursing stress scale (ENSS) was developed as a stress assessment instrument specifically for nurses and adapted to the characteristics of nurses ' work (French ES, Lenton R, Walters V, Eyles J. , 2017). ENSS is widely used in various studies of occupational stress in nurses and has been translated in several languages of the world. In Indonesia, ENSS has been adapted to suit specific work conditions and Indonesian culture. The Indonesian version of ENSS has been validated and has very good reliability (Harsono, H., 2017.). By looking at the potential of work stress in nurses and the need for work stress assessment with specific instruments, it is necessary to assess work stress in employees, especially nurses in health facilities in Yogyakarta using the Indonesian version of ENSS instrument. If the number of work stress is known, promotional and preventive efforts can be made to health workers who work with these nurses with patient safety as the main goal of Health Services. The purpose of this study was to obtain the number of work stress on employees, especially nurses at Faskes X in Yogyakarta using the Indonesian version of ENSS instrument and the factors that influence it.

METHOD

This research is a qualitative descriptive research. Informants in this study numbered 6 people who work in health facilities X in Yogyakarta. Data collection using field observation, in-depth interviews, and also documentation. Data analysis using data reduction, then described in the form of narrative.

RESULTS

Table 1.

Nurse stress factors sourced on the job, among others	
Intrinsic	Work stress in nurses can be sourced from the job itself, such as uncomfortable working conditions, excessive workload or vice versa.
	Interview results: Informant 1: "Related to the workload will sometimes feel very heavy when there are nurses who are on leave to work either on marriage leave or maternity leave, because the workload will be transferred to the division members"

	Informant 2: “there are some people whose workload is excessive, there are also those whose workload is rather light, because it will be a gap in the receipt of work benefits”
Relationships in place	Lack of relationships with leaders, co-workers, or by default, as well as difficulty in delegating responsibilities.
	Interview Results: Informant 4: "The conflict of colleagues or sedivisi sometimes makes us work with mixed feelings, because the working atmosphere is less conducive of course". Informant 6: "The relationship is not good when we also sometimes have to be a mediator for friends who are in a work conflict during the night watch”

Table 2.
Work stress factors that originate in individual characteristics

Tolerance for ambiguity	Have the ability to tolerate uncomfortable conditions and ambiguity of roles in the work environment, in order to survive and maintain high work productivity
	Interview results : Informant 3: "sometimes there is a lack of good relationships between supervisors, doctors, co-nurses, patients and families that make the mood of nurses less controlled" Informant 5: "our overestimated expectations of ourselves as a way of maintaining our emotional balance”
Working environment	Lack of comfort due to an unfavorable work environment.
	Interview Results: Informant 1: "That's right, sometimes our environment is not conducive because of personal conflicts and divisions that follow the conflict”. Informant 6: "Sometimes conflicts in the work environment trigger feelings that the work environment is less conducive”

Stress experienced by a nurse can vary with other nurses, because stress is an individual perception process. The nursing profession is prone to stress, this is caused by the characteristics of the nurse's work that is expected to be able to quickly and precisely handle patients. Work situations that often meet with patients in critical condition and the risk of exposure to disease from patients can be one factor in the emergence of stress on nurses. Work Stress experienced by employees is a reciprocal relationship between something inside the individual and something outside the employee, meaning that often nurses experience situations that contradict the values understood by nurses. Other factors that cause stress in nurses are the division of work shifts, role ambiguity and poor working relationships between superiors, subordinates and colleagues.

Forms of less professional work behavior will appear in the form of services that will be provided to patients. The results of Wandrati (1999), states that most inpatients assess hospital nurses in Semarang 73% stated nurses less friendly, uncommunicative, less provide information. While the rest is more towards the physical facilities in the hospital. The results of research in one of the other hospitals in Central Java in 2004 showed from 177 patient

complaint letters 71.2% of patients complained of interpersonal competence of nurses in providing services, where nurses are less friendly, fierce, chatty, not responsive to patient complaints, no empathy, impatient, disrespectful. 12% of letters complained of Doctor friendliness and 16.8% were due to other causes that were more towards the facilities provided by the hospital. This indicates that the work stress experienced by nurses will have an impact on the form of services to be provided to patients.

DISCUSSION

Nurses as health workers are expected to work professionally in providing health services to the community. The characteristics of the nurse's work have a considerable risk, because the nurse is responsible for the safety of the patient. Working hours and workload both physically and psychologically are often a factor of fatigue at work, so that nurses experience psychological imbalances or stress. Work Stress has a negative effect on the mental health and physical well-being of nurses (Mojoyinola, 1984). Nurses who experience work stress, can not menujukkan optimal performance, this is reinforced by the results of research Cheng and Kawaci (2002) that nurses who reported having low employment associated with low social support. In addition, the results of Olaleye (2002) showed that work stress and fatigue syndrome have a significant effect on the health condition and the ability of nurses to serve patients.

Factors that influence job stress in nurses include the characteristics of the work environment and workload (Hilhouse and Adler in McVicar, 2003). The source of stress for one nurse to another can vary, while this is the overall level of stress reported, the level of stress experienced by nurses varies according to the area or unit where they practice. From several studies Tyler & Ellison (1994) found that nurses who work in ICU units have higher emotional distress ratings than those who work in hematology or oncology units. From the results of another study McGowan (2001) identified the lack of rewards and shift work as a source of stress in nurses.

The influence of stress on physical health appears in the form of headaches, back or neck, muscle pain, high blood pressure, while its effect on the psychic condition is the emergence of feelings of anxiety, feeling depressed, lack of concentration and difficulty in making decisions. From this picture, it appears that physical and mental health is affected by work stress, which will indirectly affect the concentration and performance of the nurses themselves so that it affects when they help or serve patients. Stress on nurses not only affects the physical condition, but also on the ability of nurses to empathize when serving patients. This is in accordance with the results of research Tyas (2006) showed a relationship between the level of work stress with the ability of empathy in nurses. This low ability of empathy results in poor patterns of interaction and communication between nurses and patients. Nurses do not understand the patient's condition and tend to speak and behave rudely to the patient.

France (in McVicar, 2003) identified nine sub-scales of occupational stress that may impact nurses: conflict with doctors, inadequate preparation, problems with colleagues, discrimination, workload, uncertainty regarding treatment, dealing with death and dying patients. While Stordeur et al (2001) Healy & McKay (2000) see high levels of stress caused by factors: high workload, conflict with other nurses or doctors, lack of clarity of tasks, mood disorders and evaluation of the head nurse in taking corrective actions/excessive evaluation. Research results Wong et al (2001) showed that one-third of Chinese nurses have low mental health. The findings from this study showed that 55.5% of nurses experienced high levels of stress at work. This is due to work overload, lack of promotion, inadequate staff, minimal

salary, dissatisfied with his job and experience frustration.

Seeing that the workload is heavy enough on nurses that cause nurses to experience pressure and stress, it takes a form of intervention to minimize the pressure experienced by nurses. To overcome work stress in nurses according to Payne (in McVicar, 2003) the age factor and experience in work becomes the main factor, because here with increasing age the individual becomes more mature in overcoming problems, and experience in work also supports individuals to more easily adapt to the environment and work problems, the second factor is social support in the workplace. When individuals get support from colleagues or superiors then individuals can work more comfortably while according to the results of Research Jones & Johnston (in McVicar, 2003) programs that can be done to reduce work stress by reviewing the redesign of the workload by looking at the quantity of available human resources, the second is to note the shift or work schedule, the third is the leadership management model that applies to the organization and conducive conflict management. The issue of leadership and conflict management is very sensitive, here a participatory strategy is introduced, thus minimizing the emergence of conflicts with colleagues and superiors, and it is hoped that the relationship can lead to group cohesion so as to reduce conflicts with other professionals. Even if possible there will be a cultural shift so that a new work culture appears that is more conducive to nurses, thus minimizing work pressure that can cause work stress in nurses. In addition, from the results of existing studies, coping strategies are also needed for nurses to be able to cope with stress, because individual characteristics and individual coping styles have a relationship with a tendency to decrease stress or stress symptoms (Beehr & Newman, 1978; Cooper & Marshal, 1976; Kirkcaldy et al, 1999).

CONCLUSION

Based on the results of research and discussion, it can be concluded that some of the factors that trigger stress nurses work in the workplace include relationships with work relations, conflicts between others, less conducive work environment and so on.

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