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The Relationship of burnout to nurse job satisfaction at Semen Gresik hospital

ABSTRACT

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	ADJINACI
Article history Received April 01, 2023 Revised May 08, 2023 Accepted July 12, 2023	Introduction: The nursing profession is a professional and technical profession that is distinguished by the combination of mental and physical labour and the high risk of work. A nurse can feel work exhaustion or usually called burnout and affects the job satisfaction. Objectives: The purpose of this study was to
Keywords Burnout, job satisfaction, Nurse,	analyze the relationship between burnout and job satisfaction among nurses. Methods: The research design used was descriptive statistical and correlational analysis with a cross-sectional approach. A total sample of 115 nurses who met the inclusion criteria was selected using the simple random sampling technique. Data were analyzed using Spearman's rank with $\alpha = 0.05$.
Hospital	Results: The results showed that the majority of participants were at a moderate level of burnout ($n = 93, 89\%$). The study also found that the majority of participants have an ambivalence level toward job satisfaction ($n = 54, 47.0\%$), and burnout has a negative correlation with job satisfaction ($p = 0.000$ with a correlation value of -0.483). Conclusions : The level of burnout was
	correlated with job satisfaction. therefore it is necessary to reduce burnout levels so that nurse job satisfaction increases and can improve nurse performance.

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1. Introduction

Healthcare professionals bear a heavy emotional burden as a result of their patients' and families' suffering and pain. This is also linked to high work demands and responsibilities. Long-term exposure to these situations may have an impact on an individual's fulfillment as well as their psychological aspects (De Oliveira, 2018). The nursing profession is a professional and technical profession that is distinguished by the combination of mental and physical labor, the high risk of work, and so on. This, combined with the current tension between healthcare providers and patients, may result in the threat of workplace violence. Nursing is a stressful profession because nurses are responsible for managing and monitoring patients and are naturally and constantly exposed to a variety of stressors. There is no doubt that these factors can have a negative impact on his or her career in the long run (Luan, 2017). Because nursing is a professional group at the forefront, closest to patients, and with the most significant number in a hospital, communication, and service continuity will increase hospital accountability to patients and the community through performance development, evaluation, and patient safety culture programs (Kristianingsih et al., 2022).

When the pandemic lasted more than a year, Indonesia, as one of the countries with the largest number of COVID-19 infections, suffered the most casualties in the world. COVID-19 has contributed to previously unprecedented levels of tension among mental health service structures and practitioners (Miller, 2021). The COVID-19 pandemic has put a strain on the work of health officers who have experienced psychological distress (Bender et al., 2020). Laborers are comparable to social workers. Health professionals are particularly vulnerable to the pressures of the COVID-19 pandemic because they provide services to patients who are frequently in crisis or difficulty (Holmes, 2021). During the pandemic, health workers had a heavy or excessive

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workload because patient visits to health facilities increased, resulting in an accumulation of patients in health facilities (Heidari et al., 2022). Furthermore, the number of health workers who have contracted the COVID-19 virus has increased the workload because many health workers are self-isolating due to being confirmed positive for COVID-19, resulting in a decrease in health workers and an increase in patients, causing an imbalance in the number of patients and health workers (Rizki, 2022).

Health workers who provide direct care to COVID-19 patients or are required to perform quarantine or isolation may experience psychological stress. Mitigation strategies for psychological treatment are critical to maintaining the psychological health of health care workers (Fauziyah et al., 2023). It is necessary to consider health professionals', including nurses', readiness to perform the task of caring for COVID-19 patients. In critical situations such as the COVID-19 pandemic, nurses can respond optimally. Nurses' readiness includes gathering accurate information, increasing immunity, wearing appropriate PPE, and applying professional nursing values to COVID-19 patients (Khairina, 2023).

One of the most serious causes of power health experiencing pressure and stress during this pandemic is a feeling of work exhaustion or usually called burnout. Several recent studies show that up to 90% of social workers experience work burnout (Schilling & Randolph, 2021). "Burnout" is a psychological state that occurs after prolonged exposure to psychosocial risk factors in the life of a health worker. Burnout has three dimensions: emotional exhaustion (EE), depersonalization (DP), and decreased personal accomplishment (PA), all of which result in a negative self-image, negative thoughts about the profession, and a sense of poor communication with the client while providing care (Guseva Canu, 2021).

Burnout can affect job satisfaction for employees. Workload has an effect on saturation, which is a condition in which a person loses the meaning and purpose of their work (Atmaja & Suana, 2019). Burnout has a negative impact on job satisfaction. Job satisfaction refers to an individual's overall emotional reaction to his or her job as a result of their own appraisal or job experience, and it encompasses a wide range of dimensions and factors. Job satisfaction can also be defined as a person's proclivity toward or positive feelings toward their job (Poursadeghiyan et al., 2017).

Job satisfaction is undeniably a positive emotional state or sensation caused by one's job or profession. As a result, it has an impact on how people perceive their jobs (Nurjanah et al., 2020). Job dissatisfaction has always been a major concern for organizational leaders, particularly nurse managers, because it leads to absenteeism, decreased efficacy, staff turnover, physical and mental illness, and burnout (Khairunnisa & Nadjib, 2019). As a result, the purpose of this study is to investigate the relationship between burnout and job satisfaction among nurses at Semen Gresik Hospital.

2. Methods

This study uses analytical, observational, and quantitative research. Data were collected via questionnaire in January–March 2021.

2.1 Study Participant and Procedure

This study was conducted in Semen Gresik Hospital, Gresik, Indonesia. Semen Gresik Hospital was type B private hospital. There was 70% bed occupancy rate because of COVID-19 in 2021 at Semen Gresik Hospital.

The population consists 162 nurses. Using the Lemeshow Formula with confidence level of 95%, we randomly sampled 115 nurses with this following calculation:

 $n = \frac{Z_{1-}^{2} \neq_{2} p (1-p) N}{d^{2}(N-1) + Z_{1-}^{2} \neq_{2} p (1-p)}$

$$\frac{(1,96)(1,96) \ x \ 0,5 \ (1-0,5) \ x \ 162}{(0,05)(0,05). \ (162 \ -1) \ + \ (1,96)(1,96) \ x \ 0,5 \ (1-0,5)}$$

$$= \frac{(3,84) \ x \ 0,5 \ (1-0,5) \ x \ 162}{(0,0025)(161) \ + \ (3,84) \ x \ 0,5 \ (0,5)}$$

$$= \frac{155,925}{1,3629}$$

$$= \frac{155,925}{1,3629}$$

$$= 114,406 = 115$$

Following the selection, we used two inclusion criteria: the nurses' ability to communicate in Bahasa Indonesia and their willingness to participate in this study. Finally, this study had a 100% response rate, with 115 out of 115 nurses completing the questionnaires.

Primary data were gathered by completing a questionnaire containing a draft statement written by the respondent in response to the conditions that the respondent felt. Before completing the questionnaire, the researcher explained the purpose of the study, which was then approved by the respondent, as evidenced by a signed or "informed consent" approval. The respondent completed the questionnaire independently. In this study, data on the dependent and independent variables were collected using questionnaires distributed to respondents.

2.2 Instrument

The participants' burnout levels were assessed using twenty-two question items from the Maslach Burnout Inventory—Human Services Survey. These questions were supplemented with Likert-scale responses (very disagree = 1, disagree = 2, neutral = 3, agree = 4, very agree = 5). The questionnaire's validity was tested by comparing the Pearson product-moment value (r) on 30 participants (r = 0.361) with the r-count value on each question item. The instrument's validity and Cronbach alpha values were 0.511 to 0.750 and 0.939, indicating that it was a valid and reliable questionnaire (Sulistiowati, 2021). Thirty-three question items from the Job Satisfaction Scale were used to assess the participants' job satisfaction levels. These questions were supplemented with Likert-scale responses (very disagree = 1, disagree = 2, agree = 3, very agree = 4). The questionnaire's validity was tested by comparing the Pearson product-moment value (r) on 30 participants (r = 0.361) with the r-count value on each question item. The validity and Cronbach alpha values for the instrument were 0.390 to 0.741 and 0.933, respectively, indicating a valid and reliable questionnaire.

2.3 Data Analysis

This descriptive study using descriptive statistical and correlational analysis on the SPSS software program. The level of burnout explored by grouping the responses perceived by the participants into three categories: mild, moderate, and severe burnout. The level of job satisfaction explored by grouping the responses perceived by the participants into three categories: dissatisfafied, ambivalent, and satisfied.

2.4 Ethics Approval and Consent to Participate

The Health Research Ethics Committee, Faculty of Public Health, Airlangga University granted this study an ethics certificate with the number 13/EA/KEPK/2021. Participation in this study was entirely voluntary, and all participants agreed by signing an informed consent form. The information gathered from participants was kept private and was only used for this study.

3. Results and Discussion

3.1 Charasteristics Respondent

The predominant characteristics were the following: early adult (n=50; 43.5%), female (n=78; 67.8%), married (n=110; 95.7%), and graduated from Diploma III (n=96; 83.5%), (Table 1).

Variable	Frequency (n)	Prosentase (%)
Age		
Late teenagers (17–25 years old)	8	7
Early adult (26–35 years old)	34	29.6
Late adult (36–45 years old)	50	43.5
Early elderly (46–55 years old)	23	20
Total	115	100
Gender		
Man	37	32.2
Woman	78	67.8
Total	115	100
Marital Status		
Single	4	3.5
Married	110	95.7
Divorce	1	0.9
Total	115	100
Education		
Diploma III	96	83.5
Diploma IV	2	1.7
Bachelor	17	14.8
Total	115	100

Table 1 Characteristic Respondents

3.2 Burnout Level

Table 2 reveals that the majority of participants were experiencing a moderate level of burnout (n=93; 80.9%). Findings also showed that 12 of the participants (10.4%) suffered from a severe burnout respectively. Further, only 10 participants (8.7%) reported mild burnout.

	Table 2 Burnout Level	
Variable	Frequency (n)	Prosentase (%)
Burnout Level		
Mild	10	8.7
Moderate	93	80.9
High	12	10.4
Total	115	100

3.3 Job Satisfaction

Table 3 presents those 54 participants (47.0%) in ambivalesi, 40 participants (34,8%) are satisfied, and 21 partisipans (18.3%) are dissatisfied.

Table 5 Job Satisfaction Level					
Variable	Frequency (n)	Prosentase (%)			
Job Satisfaction					
Dissatisfied	21	18.3			
Ambivalent	54	47			
Satisfied	40	34.8			
Total	115	100			

Table 3 Job Satisfaction Level

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3.4 Relationship Charasteristics Respondent and Burnout

The findings revealed that the characteristics of the respondents had no significant relationship with burnout. Age and education have no relationship with burnout, but younger nurses are more likely to experience burnout. According to putri's (2019) research, respondents under 30 years of age are more likely to experience burnout. Nurses usually have higher ideals, so their expectations are less realistic (Putri et al., 2019). Young nurses also lack problem-solving skills because they lack experience and are still adjusting to a work environment, they have never experienced (Alimah & Swasti, 2018).

There were no significant relationships between gender, marital status, or education. Maslach's research discovered that individuals with a lower level of education are more likely to experience burnout (Rita et al., 2022). Nurses who graduate from vocational education tend to get heavier jobs and are directly faced with high pressure, making them more prone to fatigue and stress (Amrullah et al., 2015).

	•	•				
Variable		Burnout		Total	r(p)	р
	Mild	Moderate	High			-
Age						
Late teenagers (17–25 years old)	0	5	3	8		
Early adult (26–35 years old)	5	27	2	34		
Late adult (36–45 years old)	4	40	6	50	-0.029	0.756
Early elderly (46–55 years old)	1	21	1	23		
Total	10	93	12	115		
Gender						
Man	3	32	2	37		
Woman	7	61	10	78	0.071	0.452
Total	10	93	12	115		
Marital Status						
Single	0	4	0	4		
Married	10	88	12	110	0.006	0.952
Divorce	0	1	0	1	0.006	0.952
Total	10	93	12	115		
Education						
Diploma III	8	78	10	96		
Diploma IV	0	2	0	2	0 1 7	0.052
Bachelor	2	13	2	17	-0.17	0.853
Total	10	93	12	115		

Table 4 Relationship Charasteristics Respondent and Burnout Level

3.5 Relationship Charasteristics Respondent and Job Satisfaction

According to the findings of this study, there was no significant relationship between respondent characteristics and nurse job satisfaction. This is consistent with Egyptian research, which discovered that age, marital status, and educational attainment have no effect on job satisfaction (Behilak & Abdelraof, 2019).

	-	-	-			
Variable	J	Job Satisfaction			r(p)	р
	Dissatisfied	ambivalent	Satisfied			
Age						
Late teenagers (17–25 years old)	2	3	3	8		
Early adult (26–35 years old)	6	15	13	34		
Late adult (36–45 years old)	11	21	18	50	-0.022	0.814
Early elderly (46–55 years old)	2	15	6	23		
Total	21	54	40	115		

Table 4 Relationship Charasteristics Respondent and Job Satisfaction Level

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Gender						
Man	4	18	15	37		
Woman	17	36	25	78	-0.124	0.187
Total	21	54	40	115		
Marital Status						
Single	1	0	3	4		
Married	20	54	36	110	0.40	0.671
Divorce	0	0	1	1	0.40	
Total	10	54	40	115		
Education						
Diploma III	18	48	30	96		
Diploma IV	0	0	2	2	0 1 2 0	0 1 7 2
Bachelor	3	6	8	17	0.128	0.172
Total	21	54	40	115		

3.6 Relationship Burnout and Job Satisfaction

A cross-tabulation of nurses' burnout and job satisfaction is shown in Table 4. From ten respondents with mild burnout, nine (90%) expressed satisfaction and only one (10%) expressed ambivalence. Respondents with moderate burnout were mostly ambivalent, with 49 out of 93 (52.7%) satisfied, 31 (33.3%) satisfied, and 13 (14%) dissatisfied. Respondent with high burnout mostly at disatisfied state, 8 from 12 (66.7%) responden and ambivalen 4 (33.3%) responden. The results of statistical tests with Spearman rank yielded a p-value of 0.000 and a correlation value of -0.483.

Burnout		Job Satisfaction	-	Total	r(p)	n
Burnout	Dissatisfied	Ambivalent	Satisfaied	Total	r(p)	Р
Mild	0	1	9	10		
Moderate	13	49	31	93	0 402	0.000
High	8	4	0	12	-0.483	0.000
Total	21	54	40	115		

Table 4 Relationship Burnout and Job Satisfaction Level

Nurses, as front-line clinical staff, are one of the most important components of hospitals and the main force of the development of nursing cause. Their work enthusiasm directly affects the quality of nursing and organizational development (Wu, 2021).

One of the factors that influence nurse job satisfaction is burnout. Burnout at work is unavoidable. The nurse's job has several characteristics that can create high and stressful work demands. These characteristics include a tight work schedule and being ready to work at any time. Several service arrangements employ nurses with an overloaded workload. Sometimes, in one shift, one nurse has to serve as many as 8–10 patients (Subiyono, 2022).

The findings of this study suggest that burnout correlates with job satisfaction. The correlation is a negative effect, which means that the higher the burnout syndrome, the lower the job satisfaction, and the lower the burnout, the higher the job satisfaction of nurses. which is consistent with the research results of (Gifariani & Asruni, 2021), (Hayes et al., 2015), (Molina-Hernández, 2021), and (Muqorobin & Kartin, 2022).

Job satisfaction for employees is very important for nurses. Job satisfaction is defined as an emotional state in which employees view their work as pleasant or unpleasant. Satisfaction reflects how a person feels about his or her job. Employees who are satisfied with their jobs, for example, are never absent without good reason, arrive on time, are enthusiastic, and are highly motivated (Subiyono, 2022).

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4. Conclusion

The findings revealed that the majority of participants were at a moderate level of burnout and that the majority of participants had ambivalence about job satisfaction. This study also discovered a negative relationship between burnout and job satisfaction. We will conduct additional research to better understand the factors that contribute to burnout and fatigue. Reduce burnout in nursing practice by creating a healthy work environment and improving work organization. interventional strategy to reduce the risk of burnout among mental health nurses therapeutic programs to improve positive mental health in nurses, such as emotional maturity, locus of control, general well-being, and adjustment.

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