



PSYCHOSOSIAL FACTORS ON THE PERFORMANCE OF HEALTH OFFICERS

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ABSTRACT

Background: Psychosocial factors have become a major concern in occupational health. Changes that occur in the labor market, namely increased globalization, competition, flexibility, and new forms of work organization.

Objective: The purpose of this study was to describe the psychosocial factors on the performance of health workers in Puskesmas X Makassar City.

Method: This research method is a descriptive quantitative research with a population of all health workers at Puskesmas X Makassar City as many as 55 people using total sampling. The collected data were then analyzed by univariate and bivariate.

Result: The results of data analysis showed that the majority of health workers at Puskesmas X Makassar City experienced severe stress as much as 50.9%, heavy loads as much as 65.5%, and mild fatigue as much as 67.3% with optimal good quality performance. This illustrates that health workers experience psychosocial factors that have a positive impact on performance, and to produce good performance.

Conclusion: It is necessary to create a psychosocial environment so that individuals feel comfortable in groups and organizations, showing high productivity and improving the quality of work.

INTRODUCTION

Working conditions have changed, the impact on psychosocial risk factors has increased (Niedhammer et al., 2013), then employee performance will be lower. Psychological job demands are one of the major psychosocial risks in employment and refers to aspects of the job that will require mental or emotional effort. According to Mollart et al. (2013), there was a response rate of 36.8% with 56 (56/152) from the results of a survey of midwives at two General Maternity Hospital Units in New South Wales Australia. Nearly two thirds (60.7%) of midwives experienced moderate to high levels of emotional exhaustion and one third (30.3%) experienced depersonalization related to work fatigue. Significant differences were found between the midwife groups in the form of excessive work shifts, and several psychosocial problems including excessive workloads.

According to Mosadeghrad (2013), one third of hospital nurses in Iran experience high job stress due to inadequate wages, lack of staff, lack of promotion, inconvenience at work and lack of management support. More than 35% of nurses stated that they are considering leaving the hospital, if they can find new job opportunities. According to Houdmont et al. (2012) of 27,037 civil servants, work stress increased between 2005 and 2010 as well as job exposure to psychosocial factors such as high workload,

low job control, low peer support, poor relationships, unclear roles and conflicts, and lack of consultation and information about change (Malard et al., 2015). Employees of the Banyumanik Hospital Semarang stated that the influence of workload and emotional intelligence on performance was 65.8%. (Casmiasi & Haryono, 2015).

Patient satisfaction is influenced by the nurse's caring behavior when providing adequate information, and the prompt response to the needs of patients with technical and professional expertise. Caring can reduce the patient's emotional tension, increase the patient's self confidence and emotional, increase job satisfaction and nurse involvement. Improving patient satisfaction is important in health care organizations. (Adnan, 2020)

Puskesmas is a work place that is specific and certainly cannot be separated from the potential risks that can have a negative impact on the officers working in it. If there is an imbalance between employee complaints about the workload that is too heavy, the incentives received are not appropriate or having to work on holidays will be a separate problem for employee job satisfaction, this is often called a psychosocial problem. The profession in the health sector is a job that is unique and has occupational risks, the size of the job is determined by quantitative, qualitative, time and cost, therefore it is very important for related

parties to carry out proper management of work welfare. Efforts to realize occupational health are efforts to harmonize work capacity, workload, work environment so that every worker can work healthily without endangering himself or the community around him, in order to obtain optimal productivity.

Psychosocial factors have their own urgency to get special attention because they are closely related to the productivity and performance of health workers on duty at the puskesmas. When there is imbalance at work, it will pose a risk to the psychosocial dimension. Officers who work in puskesmas are generally always required to be able to adapt to the dynamics of changes that occur, this is related to the health worker profession which is a service to the community (*human service*) which requires responsibility and *skills* adequate, so that if they are unable to adapt, the individual will feel difficulties in releasing themselves from the pressures they face which can potentially pose psychosocial risks for health workers.

So it can be concluded, if the psychosocial aspects of health workers at the puskesmas are disrupted, they will be more susceptible to work risks, so that the performance of health workers will decrease, this will have an impact on the failure to achieve the main goal of the puskesmas as a satisfactory health service provider for health service users. So it is very important for the

puskesmas to be able to carry out proper management in an effort to maintain and improve the welfare of health workers in order to achieve community welfare. Based on the description of the problem above, the author is also interested in examining more deeply the "Description of Psychosocial Factors on Performance of Health Workers at Puskesmas X Makassar City".

METHODS

Type of research is quantitative research, which is descriptive in nature, which is to collect data that can be scientifically justified and aims to describe the psychosocial factors in Puskesmas X Makassar City. The research location was conducted at Puskesmas X. This research was conducted using a descriptive survey method.

The population in this study were all health workers (PNS and non PNS) who worked at Puskesmas X as many as 55 people. The sampling technique in this study was *total sampling*, where the population was sampled as many as 55 health workers. Data collection was obtained in two ways, namely primary data, namely the results of the distribution of work stress questionnaires measured using a standard *Stress Diagnostic Survey* (SDS) questionnaire, workload questionnaires were measured using the NASA-TLX standard questionnaire developed by Sandra G. obtained by calculating the WWL average. (*Weighted*

Workload). The data that has been collected is then processed and analyzed with a computerized system of the SPSS (*Statistical Package for Social Science*) program and presented in tabular and narrative form.

RESULT

Based on table 1, the data shows that of the 28 respondents who experienced severe stress there were 25 respondents with a percentage (45.5%) who had a good performance and a poor performance of 3 respondents (5.5%), while of the 27 respondents who experienced mild stress there were 23 respondents (41.8%) have good performance and poor performance of 4 respondents (7.3%) (Primary data, 2017).

Based on table 2, the data shows that of the 36 respondents who experienced a heavy workload, there were 30 respondents (54.5%) who had good performance and 6 respondents (10.9%) had poor performance, while of the 12 respondents who experienced a very heavy workload there were 11 respondents. (20.0%) have good performance and poor performance of 1 respondent (1.8%), and only 7 respondents who experienced a rather heavy workload, 7 respondents (12.7%) had good performance (Primary data, 2017).

Based on table 3, the data shows that of the 37 respondents experiencing mild fatigue, 32 respondents (58.2%) had good performance and 5 respondents (9.1%) had

poor performance, while of the 18 respondents experienced moderate fatigue there were 16 respondents (29.1%) who had poor performance. 2 respondents (3.6%) good and bad performance (Primary data, 2017).

Table 1. Distribution of Respondents' Job Stress Based on Performance at Puskesmas X Makassar City

Work Stress	Performance				Amount	
	Not Good		Good		N	%
	n	%	n	%		
Mild Stress	4	7.3	23	41.8	27	49.1
Severe Stress	3	5.5	25	45.5	28	50.9
Amount	7	12.7	48	87.3	55	100

Source: Primary data 2017

Table 2. Distribution of Respondents' Workload Based on Performance at Puskesmas X Makassar City

Work load	Performance				Amount	
	Not Good		Good		N	%
	n	%	n	%		
Somewhat Heavy	0	0	7	12.7	7	12.7
Heavy	6	10.9	30	54.5	36	65.5
Very Heavy	1	1.8	11	20.0	12	21.8
Amount	7	12.7	48	87.3	55	100

Source: Primary data 2017

Table 3. Distribution of Respdnen Work Fatigue Based on Performance at Puskesmas X Makassar City

Work Fatigue	Performance				Amount	
	Not Good		Good		N	%
	n	%	n	%		
Mild Fatigue	5	9.1	32	58.2	37	67.3
Moderate Fatigue	2	3.6	16	29.1	18	32.7
Amount	7	12.7	48	87.3	55	100

Source: Primary data 2017

DISCUSSION

Characteristics of Respondents' Work Stress Based on Performance at Health Center Health Officers X

According to Robbins & Judge (2013) Stress is a dynamic condition in which an individual is confronted with an opportunity, constraint or demand that is associated with what is desired and the results are perceived as uncertain and important. Job stress is a stressful condition that creates a physical and psychological imbalance that affects the emotions and thought processes and feelings of pressure experienced by health workers in facing work. Too much stress can threaten an individual's ability to cope with his work environment.

The results showed that the majority of work stress on health workers at Puskesmas X was heavy stress as much as 50.9% of respondents while those who experienced mild stress were 49.1% of

respondents. The number of respondents who experience severe stress due to work conditions, namely the pressure felt by health workers if the work at hand is more than usual and must be done in their work environment within a certain time. It is assumed that apart from work conditions there are other factors that are more dominant in causing work stress such as demands of duty. Workers who do not have enough information to carry out their roles or cannot realize the expectations related to their roles will generate job stress.

This research is in line with the research conducted by Thio (2016) that nurses who experience severe stress mostly carry out cleaning tasks, do administrative tasks and do non-nursing tasks, for example determining disease diagnoses, making prescriptions and taking medication, only a small proportion of them do care. nursing according to its function. This condition is triggered by demands and in the form of pressure from the organization and their interactions with work that often cause conflicts over what they do. This is evident from the results of the study that most respondents experience increased levels of stress due to stimuli or situations that cause distress to their work environment. and create physical and psychological demands on a person, stress that makes them a burden.

The performance of Puskesmas X health workers in Makassar City shows good quality, quantitatively it reaches an average

performance of 97% of health workers according to data secondary in 2015.

Psychosocial problems have an impact on decreasing the quality of human resources in medical personnel which will be positively correlated with decreased productivity and achievement. medical officer work. Workers who play a role and experience heavy work stress because the workforce is given too many roles, such as participating in socialization or surveys conducted at puskesmas so that they can spur themselves to improve work results and good work performance. In this case, severe stress with performance experienced by health workers, namely stress in a positive form (*eustress*) is caused by reward, which is a certain form of appreciation given by superiors to employees in the form of material or greeting. Stress can be a positive force (*eustress*) that individuals need to be able to push themselves to achieve high performance and achievement, to a certain point working under the pressure of *deadlines* or deadlines can stimulate individual creative processes. Previous research by Khuzaeni & Djumahir (2013) stated that job stress has a positive effect on employee performance. This research is also supported by Ouyang (2009) which states that work stress is positively and significantly related to performance because stress experienced by employees can feel satisfaction at work so

that it can improve work performance in their work environment.

Characteristics of Respondents' Workload Based on Performance at Health Center Health Officers X

According to Everlyn (2004), workload is a condition in which workers are faced with tasks that must be completed at a certain time. Every job that a person does is a work load for him, these loads depend on how the person works so that it is referred to as workload. The human body is designed to be able to carry out daily activities.

The results showed that the majority of workloads in health workers at Puskesmas X, namely the average health worker, stated that the workload was due to excessive work demands, high physical needs and performance, namely the high level of desire for success in work and satisfaction from the results of the work accomplished. , then all activities or activities that

require human physical energy will depend on humans who function as a source that can trigger the workload on health workers. Other health workers are also burdened with other additional tasks and often carry out activities that are not their function, such as handling administration, finance and others.

This study is in line with research conducted by Dewi (2012) that employees who experience workload include physical,

mental, or social loads according to the perpetrator's type of work. Workload is influenced by the workplace, boredom at work, job placement, and employee age.

The workload and performance of health workers from the workload analysis can be seen from aspects, such as tasks that are carried out based on their main function, as well as additional tasks that are carried out, the work time used to carry out their duties is in accordance with the work hours that take place each day, as well as complete facilities that can help complete the work properly, so as to create work performance in a good work environment. Workers are required to complete tasks that are sometimes not in accordance with the specified time so that sometimes they have to add time while working. Workers usually have normal abilities to complete the tasks assigned to them.

The results of the study are in line with Perry et al. (2008) which states that the workload / tasks assigned by the company does not affect employee conditions and does not affect performance. The level of accuracy in placing someone in a job, besides being based on the optimum load, is also influenced by experience, skills, motivation, and so on. (Notoadmojo, 2007)

People who experience excessive workload can cause decreased morale and motivation of employees in the work

environment. Excessive physical or mental workload, i.e. having to do too much work. The element that creates a quantitative overload is the working conditions, where each task is expected to be completed quickly and accurately. Furthermore, the pressure of time causes many mistakes or causes a person's health condition to decrease, so this is a reflection of a quantitative overload. Meanwhile, qualitatively excessive burden is a work done by humans, increasingly shifting its emphasis to brain work. (Nugraeni, 2014)

Characteristics of Respondents' Work Fatigue Based on Performance at Public Health Center Health Workers X

Work fatigue is part of a common problem that is often encountered in labor. The problem of work fatigue should get special attention from companies and agencies that employ workers. (Mallapiang et al., 2016) The results showed that the majority of health workers at Puskemas X who experienced work fatigue, which is one of the causes of work fatigue, can be seen from their complaints at work.

The results of the questionnaire obtained that the most prominent saturation domain in this study is about activity attenuation. Weakening The activity here is more in the direction of the respondent's perception of feeling tired and tired, both psychologically and physically. The questions that get the most response from

respondents are questions 1 and 2 which state that they often experience feelings of heaviness in the head and tiredness of the whole body which makes them feel like lying down after each work. Health workers who are able to *manage* themselves well will not experience high work burnout, but if health workers have self-control and are unable to manage themselves, these nurses will experience high work saturation and affect their performance

This study is in line with research conducted by Perwitasari & Tualeka (2014) which states that work fatigue can be influenced by many factors, including individual factors, job factors, environmental factors, and psychological factors. Individual factors include age, years of service, nutritional status, and gender. The work factor includes workload and monotony. Environmental factors include lighting, room temperature, and noise. Psychological factors include relationships with other workers.

Fatigue from work with the performance of health workers, namely achieving optimal performance at work. There is a close relationship between work fatigue experienced by workers and the performance of the puskesmas. If the level of quality of a person's work is disrupted due to physical and psychological fatigue, then the result will be felt by the health center in the form of a decrease in the quality of workers,

but the work environment at Puskesmas X has work performance that has a positive effect.

CONCLUSION

The results obtained are: (1) Work stress experienced by health workers has no impact on performance where stress is responded positively by health workers (*Eustress*). (2) The workload experienced by health workers experiencing a heavy burden does not have an impact on performance, where the health worker has a normal ability to complete the tasks assigned to him so as to achieve optimal performance. (3) The work fatigue experienced by health workers does not have an impact on performance where the fatigue level is mild and achieves optimal performance quality.

SUGGESTION

Based on this research, suggestions can be given to health centers, namely: (1) Health workers at Puskesmas X are expected to maintain work stress conditions at good and optimal performance. For this reason, the Puskesmas can make several efforts, including by making programs that can reduce stress for health workers such as training, consultation, awards for outstanding health workers (2) It is hoped that health workers at Puskesmas X can increase the programs made so that the heavy burden felt by health workers does not affect their performance and can be maintained optimally. (3) Health workers should be able to

control the level of work fatigue, create a comfortable working environment so that performance can be maximized and health workers must also pay attention to the physical and psychological conditions of health workers and pay more attention to the welfare of health workers.

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