

THE INFLUENCE OF JOB STRESSOR TO PERFORMANCE OF NURSES IN PIRNGADI GENERAL HOSPITAL OF MEDAN – INDONESIA

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ABSTRACT: *This study was conducted to examined the influence of job stressors to performance of nurses who work in Hospital. Participants were 150 nurses working at hospital. Nurse job stressors were measured using six indicators of job stressors, namely: intrinsic condition of employment, role in the organization, career development, labor relations, organizational structure and climate, and the interface work / home, while the performance of nurse is measured using five indicators, namely: nursing assessment, nursing diagnosis, nursing planning, implementation and evaluation of nursing. Data were analyzed by descriptive and inferential, hypothesis testing is done with path analysis, to test the suitability of the model used goodness of fit test. Our Findings showed that work stressor have significant influence to performance of nurses.*

KEYWORDS: job stressors; performance; nurse; syndrome

INTRODUCTION

Health services is currently facing a very tight competition, patient safety and quality of care is a major concern, so that health care organizations implement certain strategies to meet the expectations of patients. One such strategy is the management of the performance of nurses. The management of the nurse's performance is expected to improve organizational performance (Huber.LD, 2006). The performance of nurses is closely associated with the quality of health services provided by hospitals, because the nurse is the professional group the largest in the healthcare system and has the primary responsibility for the care and direct contact with patients, so it is important for professional nursing to ensure effective performance (Hayajneh , 2000)

The performance of nurses can be seen from the results achieved in providing nursing care, (Huber.LD, 2006). nursing care is a statement of desired performance level. The provision of nursing care to clients / patients can be judged by the standards of nursing care. Optimal nursing care is one indicator of the performance of the nurse (Christensen, 2009). The performance of nurses is influenced by various factors, according to Ahmadi (2008), factors that are positively correlated with the performance of nurses among others: organizational commitment, job

satisfaction, individual variables and professionalism, nurse performance is positively associated with several personal factors, namely work experience, nationality, gender, marital status. Research conducted by DeTienne et al, (2012) showed that moral stress increases fatigue, lower job satisfaction, increase the intensity of turnover. In the study conducted by Gandhi et al, (2011) found that the role of the nurse's workload and contribute to burnout. Research Sharma et.al. (2010), suggests that chronic fatigue syndrome contributes to the low punctuality, poor adherence, low efficiency, lack of knowledge of nursing, lack of interpersonal communication. According to Abu Al Rub (2004), social support improves performance, and lower job stress.

MATERIAL AND METHODS

This study was conducted using quantitative methods. Quantitative research in the form of a survey using an explanatory research. This study aimed to analyze the influence of job stressor to performance of nurses. This study was conducted at Pirngadi General Hospital Medan of North Sumatra Province, Indonesia. samples in this study were 150 nurses who work in the ward room. Institutional approval is given by the Health Research Ethics Committee of the Faculty of Medicine, University of North Sumatra. All participants individually signed an informed consent for participation.

RESULTS

Performance variables consists of 5 indicators, namely: nursing assessment, nursing diagnoses, the planning of nursing, implementation of nursing, and evaluation of nursing. Nurse answer to each indicators can be seen in the Table 1 below.

Table 1 The Distribution of Nurses Answer to Performance Indicators

Answer scale	Performance Indicators									
	Y ₁		Y ₂		Y ₃		Y ₄		Y ₅	
	N	%	n	%	N	%	n	%	n	%
Very often	10	7	19	13	15	10	15	10	19	13
Often	51	34	61	41	50	34	59	39	52	35
Rarely	45	30	41	27	53	35	46	31	48	32
Never	44	29	29	19	32	21	30	20	31	20
Total	150	100	150	100	150	100	150	100	150	100

Source: Processed Primary Data, 2015.

Table 1 shows that: 34% of nurses often do nursing assessment, while 29.33% of nurses do not ever do the nursing assessment, 40.67% nurses often make nursing diagnoses, while 19.33% of nurses do not ever make nursing diagnoses. Table 1 also shows that 35.33% of nurses rarely make nursing plan while 10% of nurses very often makes the planning of nursing. 39.33% of nurses often make implementation of nursing, while 30.67% of nurses rarely implementation of nursing, 34.67% nurses often perform evaluation of nursing, while 20.67% of nurses do not ever do an evaluation of nursing. Description of nurse response to performance indicators can be seen in Table 2 below.

Table 2. Description of Nurse Response to Performance Indicators

Description	Y5	Y6	Y7	Y8	Y9	Total
N Respondent	150	150	150	150	150	150
Average	2,971	2,971	3,062	2,984	2,934	2,986
Deviation Std	0,327	0,365	0,452	0,478	0,473	
Minimum	1,000	1,000	1,000	1,000	1,000	
Maximum	4,000	4,000	4,000	4,000	4,000	

Source: Processed Primary Data, 2015

Table. 2 shows that : average performance of nurses is equal to 2,986 with medium category. Job stressors variables consists of 6 indicators, namely: job intrinsic conditions, role in the organization, career development, working relationship, organization structure and climate, work/home interface. Nurse Answer to each indicators can be seen in the following Table 3 below.

Table 3 The Distribution of Nurses Answer to Job Stressor Indicators

Answer scale	Job Stressor Indicators											
	X ₁		X ₂		X ₃		X ₄		X ₅		X ₆	
	N	%	n	%	n	%	n	%	n	%	n	%
Very often	22	15	31	21	31	21	17	11	40	27	45	30
Often	49	33	44	29	44	29	52	35	43	28	44	29
Rarely	46	31	45	30	43	28	49	32	48	32	47	31
Never	33	21	30	20	32	22	32	21	19	13	14	9
Total	150	100	150	100	150	100	150	100	150	100	150	100

Source: Processed Primary Data, 2015.

Table 3 showed that : 33 % of nurses answer often feel that the intrinsic condition of employment as job stressors, 35% of nurses answer often feel that the employment relationship as job stressors, 30% of nurses answer very often feel that the interface work / home as job stressors. Description of nurses responses to job stressors indicators can be seen in Table 4 below:

Table 4 Description of Nurses Responses to Job Stressor Indicators

Description	X1	X2	X3	X4	X5	X6	Total
N respondent	150	150	150	150	150	150	150
Average	2,967	2,900	2,947	2,760	2,740	2,827	2,857
Std Deviation	0,624	0,576	0,612	0,682	0,699	0,683	
Minimum	1,000	1,000	1,000	1,000	1,000	1,000	
Maximum	4,000	4,000	4,000	4,000	4,000	4,000	
	150	150	150	150	150	150	150

Source: Processed Primary Data, 2015.

Table 4 shows that : average nurses responses to job stressor indicators is equal to 2,857 with medium category. The influence of job stressors to performance of nurses in this study is known based SEM analysis, can be explained in Table 5 as follows.

Table.5 Results of Tests Influence job stressors to Nurses Performance

Variable	Model	Estimate	CR	Prob (p)	Description
Work Stressors (X) → Performance (Y)	Regression	0,558	6,382	< 0.001	Significant
Standardized Regression		-0,211			

Source: Processed Primary Data, 2015.

The path coefficients job stressors influence on the performance of -0.211, this shows that the direct effect of job stressors to Performance is -0.211 or 21.1%. As for the meaning is there is an increase of 10 units each job stressors will degrade performance at 2.11 units.

DISCUSSION

Nurses in carrying out its work providing nursing care to patients facing a variety of pressures both from within the organization or outside the organization. To understand a variety of phenomena experienced by nurses in carrying out his job, the experts have conducted various studies. Research in the field of occupational health and safety are very important, among others, research on job stressors and their effects on job stress among others investigated by Mason et al, (2002), Hofboll (1988) concluded that the stressor is a stimulus that can trigger stress research and Webster (2009); Lambert and Lambert (2011); Ivancevich and Matteson (1980); Rout and Rout (2002) concluded that there are various job stressor.

The results showed that average nurses responses to job stressor indicators in a medium category with an average (mean) of 2,857. The dimensions of the highest perceived job stressor nurse is job intrinsic condition with the average value (mean) of 2.967 and lowest job stressors perceived by nurses is the structure and organizational climate with an average (mean) of 2,740. According the value of the average (mean) of perceived job stressor nurses working in the hospital, the nurse job stressors sequence composition is as follows: 1). Job intrinsic conditions, 2). Labor relations, 3). Career development, 4). Interface of work and home, 5). Role in the organization and 6). Organizational structure and climate. Based on expert opinion (Cavanaugh et al, 2000; Boswell et al, 2004; Lepine et al, 2005), it can be concluded that a person will respond differently to stressors existing jobs, job stressors potentially benefit to someone who is able to control and would be detrimental to people who are not able to control it. Thus the same stressors will be taken differently by different people.

Stressors of work, namely: the job intrinsic condition at a moderate level, it indicates that nurses sometimes feel that the job intrinsic conditions causes stress, this can be explained by reasons answer the nurse namely: the profession as a nurse working in a hospital environment can affect health, among others contracting disease patients, needlestick injuries, which can lead to nurse the sick, therefore, nurses should carry out its work in accordance with standard operating

procedures and the use of personal protective equipment, in addition to the nurses have confidence that when nurses work with sincerity it will avoid the occurrence of diseases caused by work. The results are consistent with Jehangir et al (2011) who found that nurses work stressors include: excessive workload, unhealthy work environment. This study supports research Gandi, et al, (2011) which concluded that the role of the nurse's workload and contribute to burnout. The workload of nurses perceived that many also cause fatigue because of many actions to be carried out and should make a record of the nursing care of patients. The results showed that the average value (mean) variable performance of nurses is 2.985 which shows that the nurses' performance was in line with the results Mrayyan (2008) that the performance of nurses who work in government hospitals and teaching hospitals is lower, due to the decision-making is centralized and rigid procedures and rules. Excessive workload or less as a potential source of stress. Excessive workload or less felt by employees quantitatively and qualitatively. Excessive workload qualitatively and quantitatively predict the level of employee anxiety and cause depression perceived high employee (Cooper and Roden 1985), workload and time pressure is a major stressor for physician practices (Rout and Rout 2002). In this study, excessive workloads faced by nurses as job stressors so that nurses can not provide the best possible service, causing poor performance of nurses.

CONCLUSION

Job stressors perceived nurses based on the sequence is as follows: job intrinsic condition, labor relations, career development, interface work/home, work relationships, structure and organizational climate. Intrinsic conditions of employment as the top stressor likely caused by the nurses think that working in a hospital as a risk factor for the onset of disease transmission from patient to nurse. To reduce the risk of contracting the disease from the patient to the nurse can be done with the use of personal protective equipment. Shift work also led to nurses having symptoms difficult to sleep because of the difficulty to adapt to changes in circadian rhythms of the body. The average value of the performance of nurses is 2,985, which means that the performance of nurses are at a moderate level. The performance indicators of the order from the highest are: Planning Nursing, and the lowest number is the evaluation of nursing. Planning Nursing became the highest order caused by several things, namely : nurse considers necessary priority problems, need the involvement of patients and families in planning, plans were made according to the conditions of the patient. This causes the nurses consider that nursing plan is crucial performance of nurses.

Results of this study prove that the concept of job stressors integrated with Job Stress and Performance. If the concept is implemented properly, it will affect a real and positive impact on job stress and performance of nurses in Pirngadi General Hospital of Medan. This is in line with the opinion of Kennedy (2003), which conducts research on the effects of work stressors and burnout in nurses, showed that stress was significantly related to burnout. When various job stressors can be managed properly it is expected that it will trigger eustress and will improve the performance of nurses, thereby increasing nursing services to clients.

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REFERENCES

- AbuAl rub RF. 2004. Job stress, job performance, and social support among hospital nurses. *Journal of Nursing Scholarship*; first quarter 2004, 36(1), 73-78.
- Ahmadi. H., 2008. Factors affecting performance of hospital nurses in Riyadh Region, *Saudi Arabia Nursing*. 22(1) ; 40-53.
- Boswell, W.R., Olson, B.J.B., and LePine, 2004. Relation between stress and work outcomes; the role of felt challenge, job control, and psychological strain. *Journal of Vocational Behaviour*, 64, 165-181.
- Cavanaugh, M.A., Boswell, W.R., Roehling, M.V., and Boudreau, J.W., 2000. An empirical examination of self-reported work stress among US managers. *Journal of Applied Psychology*, 85, 65-74.
- Christnsen, J.P., Kenney, J.W., 2009. *Nursing Process; Application of Conceptual Models*. Mosby year Book, Inc. Rockford. Illinois.
- DeTienne. 2012. The Impact of Moral stress compared to Other Stressors on Employee Fatigue, Job Satisfaction, and Turnover ; an empirical investigation, *Springer Science + Business Media*, 110; 377-391.
- Gandi, C.J., Beben, W.W., Gyarazama, Y., 2011. Nurse's Roles and the Mediating Effects of Stress on Job Performance in Low and Developing Economies. *Scientific Reseach*. 2(4) 323-330.
- Hofboll, S.E., 1988. *The Ecology of Stress*. New York, NY. Hemisphere.
- Hayajneh, A.Y. 2000. *Identification of the influence of organizational variables on hospital staff nurses job performance : a dissertation submitted in partial fulfilment of the requirements for the Doctor of philosophy degree in Nursing*, the graduate college of the University of Iowa.
- Huber, L.D., 2006 *Leadership and nursing care management*. Philadelphia Saunders.
- Ivancevich, J.M., & Matteson, M.T., 1980. *Stress at Work*, Foresman Scott, USA.
- Jehangir, M., et al, 2011. Effects of Job Stress on Job performance and Job satisfaction. interdisciplinary journal of contemporary research in business; *Interdisciplinary Journal of Contemporary Research in Business*, 3(7): 494-505.
- Kennedy, B., Patterson, L and White, S., 2003. Well being in the rural and remote health workforce ; whats happening out there? In Opie, T., Lenthal, S., Wakerman, J., Dollard, MacLeod, M., 2012. Occupational stress in the Australian nursing workforce: a comparison between hospital-based nurses and nurses working in very remote communities, *Australian Journal of advanced nursing* 28 (4) : 18-23
- Lambert, V.A., & Lambert, C.E., 2001. Literature review of role stress/ strain on nurses; An international perspective. *Nursing and health Science*, 41(1) : 671-684.

- LePine, J.A., Podsakoff, N.P., LePine, M.A., 2005. A meta analysis test of challenge stressor-hidrance stressor framework; an explanation for inconsistent relationships among stressors and performance. *Academy of Management Journal*, 48(5) : 764-775.
- Mason, J.W. 1975. A historical view of the stress field, journal of human stress in Greenberg. *Comprehensive stress management*, 2(8). 245-255.
- Rout, & Rout, 2002. *Stress Management For Primary Health Care Professionals*. Kluwer Academyc Publisher.
- Sharma, A., Verma, A., Malhotra, D., 2010. Job Performance and Chronic Fatigue Syndroma in Nurses, *Asian Social Science*, 6 (12): 167-171.
- Webster, J.R., 2009. *Dissertation ; Redefining the Challenge-hidrance Stressor Framework ; the role of primary appraisal.*