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The Relationship Between Organizational Stress and Burnout Risk Among Nurses in The Inpatient Ward of Paru Hospital, Jember

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ABSTRACT

Introduction: Burnout is a condition of physical, emotional, and mental exhaustion that occurs due to prolonged exposure to work stress, particularly in professions with intensive service demands such as nursing. Organizational stress is one of the factors that can potentially trigger burnout through high workloads, role ambiguity, interpersonal conflict, and resource limitations. This study aims to analyze the relationship between organizational stress and the risk of burnout in nurses in the inpatient ward of Paru Hospital, Jember.

Method: This research used a quantitative correlational design with a cross-sectional approach. A total sample of 42 nurses was selected using a purposive sampling technique. Data were collected through questionnaires and analyzed using the Spearman Rank test with a significance level of $\alpha = 0.05$.

Result: The findings showed that most respondents were female (59.5%), aged 36–45 years (61.9%), had a D3 diploma education (54.8%), and had a work tenure of 1–10 years (81%). The highest level of organizational stress was in the moderate category (73.8%), while burnout was also most prevalent in the moderate category (59.7%). The bivariate analysis obtained a p-value of 0.647 with a correlation coefficient of -0.073, indicating no significant relationship between organizational stress and burnout.

Conclusion: The results of this study suggest that organizational stress is not significantly associated with the risk of burnout among nurses in the inpatient ward of Paru Hospital, Jember. Other factors beyond organizational stress may contribute more substantially to the occurrence of burnout, so further research is needed to explore these aspects.

Keywords: Burnout; Nurse; Hospital; Inpatient; Organizational Stress

Introduction

Burnout is a condition of significant physical, emotional, and mental exhaustion resulting from prolonged job demands. The burnout syndrome often occurs in professions that involve a service-providing role, such as nurses and social workers. Workers in human services fields are at a high risk for burnout due to frequent direct interaction with clients. The process of providing healthcare often exposes medical staff to complex, emotionally charged situations, including dealing with uncooperative patients and witnessing patient suffering firsthand (Dita Puteri, 2023). Burnout syndrome is a condition commonly experienced by nursing staff, characterized by the emergence of maladaptive responses such as a negative attitude toward patients, task procrastination, irritability when faced with simple questions from colleagues or patients, and physical complaints like fatigue and headaches. In more severe forms, individuals may even display apathy toward their work and surroundings (Tinambunan et al., 2018). Burnout can lead to a decrease in work productivity, hindering an individual's potential. Nurses experiencing burnout syndrome tend to show decreased work engagement and intrinsic motivation, which significantly impacts the quality of care and their professional performance.

Organizational stress is a psychophysiological condition that arises from a mismatch between an individual and their work environment. Smith, in his study, explains that organizational stress is multidimensional and can stem from factors in the work environment as well as an individual's inability to complete tasks, long working hours, or complex job demands. In the context of nursing, organizational stress can trigger heightened emotional sensitivity, which manifests as irritability, aggressive behavior, and decreased cooperation. This condition is often accompanied by excessive anxiety among healthcare professionals. If this stress is not addressed promptly, it can lead to negative behaviors undesirable to the organization, which can be detrimental to individual performance, cause job saturation, lower organizational commitment, and even lead nurses to intend to leave the organization (Zahra, 2022).

Method

Research Design

The research design used is correlational with a cross-sectional approach, where data collection for the independent variable (organizational stress) and the dependent variable (burnout) was carried out simultaneously within a single observation period.

Population, Sample, Sampling

The population includes all practicing nurses on duty in the four inpatient wards (Lavender, Mawar, Melati, and Tulip) at Paru Hospital, Jember with a total of 47 respondents. The sample size of 42 respondents was distributed evenly across the four inpatient wards (Lavender, Mawar, Melati, and Tulip). This study used a non-probability sampling approach by applying a purposive sampling technique combined with proportional sampling. Purposive sampling is a method of sample selection deliberately carried out by the researcher by choosing individuals believed to have the information, experience, or characteristics that align with the research needs. Proportional Sampling is used to take samples proportionally from each ward (Subhaktiyasa, 2024).

Results

The results obtained after the research was conducted are mentioned in the table below. Based on the research results in Table 1, there were 17 male respondents and 25 female respondents, with a total of 42 respondents.

Table 1. Characteristics of Respondents by Gender among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025 (n=42)

No.	Gender	Frequency	Percentage (%)
1	Male	17	40,5
2	Female	25	59,5

Table 2. Characteristics of Respondents by Age among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025 (n=42)

No.	Age	Frequency	Percentage (%)
1	25-35 years	4	9,5
2	36-45 years	26	61,9
3	More than 45 years	12	28,6

Based on the research results in Table 2, the most frequent age range for respondents was 36 to 45 years, with 26 respondents. This was followed by the 25 to 35 years age range with 4 respondents, and the over 45 years range with 12 respondents.

Table 3. Characteristics of Respondents by Work Tenure among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025 (n=42)

No.	Work tenure	Frequency	Percentage (%)
1	1-10 years	34	81,0
2	11-20 years	5	11,9
3	More than 20 years	3	7,1

Based on the research results in Table 3, the work tenure of most respondents ranged from 1 to 10 years, with a frequency of 34, representing 81%.

Table 4. Frequency Distribution of Organizational Stress among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025 (n=42)

Num	Organizational Stress	Frequency	Percentage (%)
1	Low	7	16.7
2	Medium	31	73.8
3	High	4	9.5

Based on the research results in Table 4, the distribution of respondents classified in the moderate organizational stress category was 31, with a percentage of 73.8%.

Table 5. Frequency Distribution of Burnout among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025 (n=42)

No	Burnout	Frequency	Percentage (%)
1	Medium	25	59.7
2	High	17	40.5

Based on the research results in Table 5, the distribution of respondents in the moderate burnout category was 25, with a percentage of 59.7%, and in the high category, there were 17 respondents with a percentage of 40.5%.

Table 6. The Relationship Between Organizational Stress and the Risk of Burnout among Nurses in the Inpatient Ward of Paru Hospital, Jember at July 2025

Variabel	p-value	R value
Organizational Stress	0.647	-0.073
Burnout	- 0,647	-0.073

The analysis results in Table 6 show a **p-value of 0.647** and a correlation coefficient (r) of **-0.073**. This finding indicates that there is no statistically significant relationship between organizational stress and the risk of burnout among nurses in the inpatient unit of Jember Lung Hospital (p > 0.05). The very weak negative correlation suggests a trend where an increase in organizational stress might be related to a minimal decrease in burnout levels, although this relationship is not statistically significant.

Discussion

Stres Organisasi

The research results involved 42 nurses who met the inclusion criteria and worked in the inpatient unit of Paru Hospital, Jember with quite diverse demographic characteristics. From the respondent composition, the majority were female (59.5%), aged 36–45 years (61.9%), married (61.9%), had a D3 diploma educational background (54.8%), and had a work tenure of 1–10 years (81%). The demographic characteristics of the respondents indicate a dominance of the productive age group with significant nursing work experience. Theoretically, nurses with mid to high seniority levels have developed more effective coping mechanisms for handling recurring work stressors.

The research findings reveal the distribution of organizational stress levels among nurses as follows: 73.8% were in the moderate category, followed by 16.7% with a mild level, and 9.5% who experienced a severe level. The organizational stress experienced by nurses can arise from various complex factors, whether from the hospital system, social interactions at work, or the characteristics of the tasks performed. These factors include heavy and disproportional workloads, ineffective communication among staff or with superiors, authoritarian or unsupportive leadership, irregular or long working hours, and D'Nursing and Health Journal (DNHJ), Vol 6, No 2 September 2025

role conflicts between the organization and individual capacity. A high rate of patient admissions and limitations in the number of available nursing staff also worsen the situation.

Burnout

The results of the data analysis indicate that the majority of nurse respondents (59.7%) in the inpatient installation of Paru Hospital, Jember experience moderate-level burnout syndrome, while another significant proportion (40.5%) falls into the severe category. No respondents were found to be experiencing low burnout. This signifies that the phenomenon of burnout has become a real and significant problem within the nurses' work environment in the inpatient ward. The moderate to high levels of burnout indicate the magnitude of the workload and psychological pressure experienced by the nurses, a condition that requires serious attention.

Burnout is a chronic, multidimensional exhaustion syndrome, encompassing physical, emotional, and mental aspects. According to Maslach and Jackson, burnout consists of three core dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment. In the emotional exhaustion dimension, nurses feel they have run out of energy to interact with patients and colleagues. This can arise from constant work pressure, long working hours, high service demands, and the emotional strain of handling patients with chronic or terminal illnesses

The Relationship Between Organizational Stress and Burnout Risk

The statistical test results yielded a p-value = 0.647 with a Pearson correlation coefficient (r) of -0.073, which indicates there is no statistically significant relationship between the variables of organizational stress and burnout in the nurse population at the inpatient installation of Paru Jember Hospital ($\alpha = 0.05$). This very weak negative correlation suggests a trend where an increase in organizational stress might be related to a minimal decrease in burnout levels, although this relationship is not significant and may be

due to random error. This result is not in line with the initial hypothesis, which predicted a relationship between organizational stress and the risk of burnout.

This condition can be explained by several possibilities. As most respondents experienced a moderate level of organizational stress (73.8%) and a moderate level of burnout (59.7%), it is possible that the nurses have developed effective coping mechanisms for dealing with daily work pressures. Nurses with medium to long work experience (81% of respondents have a work tenure of 1–10 years) may have become accustomed to the demands of the job and are able to manage stress more adaptively. These results also suggest the existence of other factors that are likely more dominant in causing burnout, such as specific workload factors, leadership styles in the work unit, conflicts among colleagues, lack of social support, or a mismatch between personal values and the organizational culture.

Conclusion

The research findings reveal that the majority of nurses in the inpatient unit of Paru Hospital, Jember experience moderate-category organizational stress, with a smaller proportion in the mild and severe categories. This condition indicates that although work pressure has not yet reached an extreme level, preventive interventions are needed to avoid escalation into chronic stress. The distribution of burnout levels among respondents shows that the majority of nurses are in the moderate category, followed by the high category, with no cases of mild burnout. The statistical analysis results revealed that there is no statistically significant relationship between organizational stress and burnout syndrome among the nursing staff in the inpatient unit of Paru Jember Hospital.

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