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Analysis of Factors that Influenced Burnout Occurence during the Enforcement of Area Restriction Policy among Employees in BNN Rehabilitation Center

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ABSTRACT

This study aimed to analyze the factors influenced burnout occurence among the National Narcotics Board's (Badan Narkotika Nasional or BNN in Bahasa Indonesia) employees due to the enforcement of area restriction policies in BNN Rehabilitation center. This was a quantitative study with a factor analysis method. The study participants were 106 employees of the National Narcotics Board (BNN). MBI (Maslach Burnout Syndrome Inventory) questionnaire was enrolled to collect the study data. Results revealed four factors that affected burnout among the participants: workplace environment, support from co-workers, occupational safety, and self-concept. The type of burnout identified among the participants was: poor work performance, mental exhaustion, and teamwork disharmony. According to these findings, psychological health is vital for employee's mental health. Hence, it demanded to acknowledge this issue by designing a pleasant work atmosphere that subsequently contributed to employee's immunity.

Keywords: organization, workplace, burnout, area restriction policy

INTRODUCTION

Covid-19 Pandemic has impacted every aspect of life. Many regulations have been changing dynamically in response to preventing virus transmission. The high number of positive cases and death due to the Covid-19 virus delivers harmful effects to the sector of economic, social, cultural, political, defense, and wellbeing all over the world. On March, 31st 2020, President of the Republic of Indonesia, Joko Widodo, enforced the Presidential Decree Number II of 2020 of Declaration of Public Health Emergency of Corona Virus Disease 2019 (Covid-19). This decree announced Corona Virus Disease 2019 as the cause of public health emergency and encouraged the public to take adequate actions in preventing the disease infection according to the national regulations.

In response to the Presidential Decree, No. II of 2020, The Director of BNN issued a Circular Letter Number SE/20/III/KA/KP.10/2020/BNN that explained Adjustment of State Civil Apparatus Work System to Prevent Covid-19 Transmission in BNN Area on March 30th (BNN, 2020). A circular letter then issued by the Deputy of Rehabilitation as a response to this circular letter. BNN Rehabilitation Center also responded by publishing a circular letter signed by the Director of BNN Rehabilitation Center, SE/015/V/BB/KP/2020/BNN, on May 26th, 2020. This circular letter consisted of several rules of area restriction in BNN Rehabilitation Center: 1) the enforcement of BNN Rehabilitation Center as restricted area, 2) during the enforcement of area restriction policies, visitors from outside of BNN Rehabilitation Center's area prohibited from entering the area of rehabilitation, 3) employee in charged for works inside the area of BNN Rehabilitation Center required to do three weeks WFH and three weeks of WFO alternately, 4) the mobilization is strictly restricted,

mobilization to outside of rehabilitation center area only permitted for urgent need (workpurpose or sick family member), 5). BNN did not cover employees' daily needs during their stay for the WFO shift, and 6). the gate of 00 would be closed during the enforcement of area restriction policy and thorough screening would be conducted (Babes BNN, 2020).

BNN Rehabilitation Center is a non-ministerial government department that concentrates on drug rehabilitation programs among drug users in Indonesia. This institution is a national referral center for drug users that provides professional services, integrated medical and social-based rehabilitation. BNN is also participated in assessing and developing drug rehabilitation programs, promoting drug abuser report programs, disseminating information related to prevention, eradication, drug abuse, and drug-trafficking.

Mini-interview sessions conducted with the employee in BNN Rehabilitation Center discovered several signs of burnout syndrome during the area restriction policies enforcement. The circular letter of SE/015/V/BB/KP/2020/BNN declared dilemmas of the need for the area restriction policies enforcement in BNN Rehabilitation Center. The enforcement of the area restriction policies aimed to minimize the risk of Covid-19 transmission. Despite its beneficial effect, it would induce work-related stress among the employee. An alternate shift policy that directed alternate shift of work from office (WFO) and work from home (WFH) caused stress among employees in BNN Rehabilitation Center.

Measures issued during the pandemic era were parallel with a study conducted by Riani & Handayani (2020). Transitions during pandemics had stimulated anxiety and fear. These negative emotions would impact their psychological health and induce stress (Riani & Handayani, 2020).

According to a survey conducted by *CareerBuilder.com*, 68% of workers reported work-related burnout syndrome (Amelia & Zulkarnain, 2005). The term of burnout frequently used to refer to work-related stress (Rosyid, 2016). Bernadin 1990 in Rosyid (2016) was described burnout as a situation that triggered an aggressive emotional response among the workers, especially those who work in the field of humanity and community services. BNN Rehabilitation Center is an institution that concentrates on humanity services. Consequently, burnout is a common phenomenon among their employees. High demanded jobs, large number of clients, and other stress sources, had contributed to burnout syndrome occurrence among the employees.

Herbert Freudenberger was the first person who utilized the term of burnout in an article entitled "*staff burnout*". This article was published by the Journal of Social Issues in 1974 (Eliyana, 2016). The term burnout was applied to assess stress and exhaustion among volunteers in a Drug Rehabilitation Clinic in New York City.

Furthermore, Pinse and Aronson in Amelia & Zulkarnain (2005) declared that workers in the service field tended to experience burnout syndrome. Later, it would significantly affect their work performance. The client's high demand contributed to stressful situations that stimulated a lower chance of successful works and poor appreciation to the workers.

Burnout usually appears after a long period of unsolved chronic stress due to overwhelming situations and progresses slowly. Burnout syndrome would be emerged after there was no resolution of the stressful situation in six months (Nurmayanti, 2017). Exhaustion and feeling of desperation is common during this period. They have been trying to give their best shot, but no appreciation adequately addressed to their works.

	iuicator in Divi	N Kenadintation Center		
CSI Indicator	CSI Level 1	CSI Level 2		
Service Hours	3.4	3.353		
Service Staff Behavior	3.647	3.553		
Source: BNN Rehabilitation Center, 2020				

Table 1.	CSI Indicator	in BNN	Rehabilitation	Center
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INN Rehabilitation Center, 2020

According to the community satisfaction index (CSI) of BNN Rehabilitation Center in 2020, there was a slight decrease in the indicator of service hours and service staff behavior. Service hour is time spent serving the organizations (Indonesia Government, 2014). Service staff behavior defined as staff attitude in providing certain services to their client. These values of the CSI indicator could signify exhaustion and lack of motivation among the employees that may lead to burnout syndrome.

Month	Number of Absence
August	35
September	56
October	70
November	82

According to Table 2, there was a significant increase in employee's absenteeism rate each month. This data showed the employees' absence due to medical, annual, unpaid, and bereavement absence. This absenteeism rate also signified employee exhaustion that potentially leads to burnout syndrome (Garland, 2004). A study conducted in the United States of America found that the national government spends more than millions of dollars per year to cover employees' medical leaves costs (Cheek & Miller in Garland, 2004). The high rate of absenteeism in BNN Rehabilitation Centers could affect the quality of rehabilitation service delivered to the client.

This situation was in line with a study conducted by Andarini about the analysis of factors that affected burnout occurrence and job satisfaction among nurses in Petrokimia Gresik Hospital. Findings suggested that individual factors did not significantly associate with burnout. Instead, result signified a significant correlation between the organizational factor and workplace burnout occurrence among nurses in Petrokimia Gresik Hospital (Andarini, 2018).

Romadhoni et al. (2015), in their study entitled "the effect of workload, workplace, and social support on burnout syndrome occurrence among librarians in Matraman City", found that workload had a positive correlation with burnout occurrence. However, no significant correlation found between the workplace and community support and burnout occurrence. A higher workload was identified among workers in community services sectors during the pandemic. This situation could produce a higher burnout syndrome occurrence among the workers.

Amelia & Zulkarnain (2005), in their study investigating the self-concept among employees in community service organizations, had found a negative correlation between self-concept and burnout syndrome. This result implied that a higher self-concept would be correlated to a lower possibility of burnout syndrome occurrence. Furthermore, Putri et al. (2019) examined the association between burnout with the duration of work. They found longer work duration associated with extreme exhaustion.

Factors that affected the occurrence of burnout syndrome required to be observed prior to the burnout identification. Internal and external factors had recognized as the sources of burnout. The aspect of individual effort covered several parts: positive thought, creativity, determination, and compliance. The organizational aspect of the external factor was contrived by support from co-workers, leader guidance, and the organization atmosphere. Workplace environment element covered some aspects, such as high workload, number of clients, and occupational convenience and safety (Andarini, 2018).

The level of burnout was measured by the MBI (Maslach Burnout Syndrome Inventory) Questionnaire. Maslach et al. (1996) developed an MBI to assess burnout syndrome among workers in community services. Dimension of emotional (emotional exhaustion), depersonalization (depersonalization), and accomplishment (personal accomplishment) were applied to measure the level of burnout in this study.



Figure 1. Study Framework

This study aimed to analyze factors that influenced burnout syndrome during the enforcement of the area restriction policies in BNN Rehabilitation Centers. Novel regulations would bring diverse impacts to the working culture in an organization. Study findings are expected to provide sufficient references in the implementation of these policies. Content feeling toward their workplace contributed an essential role to the employee's working performance. This situation would lead to good capability in delivering best practices of care and decent implementation of drugs abuser rehabilitation programs in BNN Rehabilitation Center.

STUDY METHOD

This was a quantitative study employing an exploratory design. The study's dependent variable was the occurence of burnout. Individual effort, organization, and workplace environment during the enforcement of the area restriction policies applied as the independent variables in this study. The study participant were employees of BNN. The participant total was calculated according to the Slovin formula. The minimal total of participants was calculated according to the formula's adequate representative of the population proportion with a margin error of 5%. From 243 employees in BNN Rehabilitation Center, the minimal participants needed was 151. Finally, 106 employees who recruited by purposive sampling technique selected to participate in this study.

Likert-scale questionnaires enrolled to collect the study data. The score ranged from one to four applied to know participants' perceptions regarding the statement written in the questionnaire. The score of four (4) and one (1) showed the participant's response of "strongly agree" and "strongly disagree" toward the statement in the questionnaire, respectively. Questionnaire measured the individual effort, organization, and workplace environment data consisted of 15 question items. Twenty-one items in Maslach Syndrome Inventory (MSI) Questionnaire applied to measure the burnout occurrence among the participants.

Study data were analyzed by the factor analysis method. Factor analysis applied to investigate and obtain factors that had influenced the employee's burnout during the enforcement of area restriction policies in the BNN Rehabilitation Center.

RESULT AND DISCUSSION

In this chapter, we elaborate factors that affected employee burnout during the enforcement of the area restriction policies in BNN Rehabilitation Center. Analysis of factors that influenced employee's burnout is elaborated as follow:

Table 3 Va	lidity, Reliabilitiy	r, and KMO Factor	r that Affected	Burnout
No	Corrected Item-	Cronbach's Alpha	Anti-image	KMO and
	Total Correlation	if Item Deleted	correlation	Barlett's Test
X_1	.358	.837	.727	
X_2	.445	.832	.834	
X3	.310	.839	.765	
X_4	.414	.835	.687	
X_5	.430	.834	.694	
X_6	.451	.832	.813	
X7	.506	.830	.782	
X_8	.627	.824	.800	.806
X9	.628	.822	.839	
X_{10}	.559	.826	.790	
X11	.625	.823	.868	
X ₁₂	.594	.824	.918	
X13	.360	.838	.818	
X14	.520	.828	.832	_
X15	.368	.837	.899	

Table 3 Validity, Reliability, and KMO Factor that Affected Burnout

Source: processed data, 2021

The column of the *Corrected item-total Correlation* in Table 3 reported that each question item in the questionnaire had a value of > 0.3. This result signified that each question item on the questionnaire was valid. The assessment of KMO and Barllet's value was also essential in factor analysis. These values indicated the influence of the independent variables on the dependent variables. The value of KMO is expected to be higher than 0.5. In this study, the value of KMO was 0.806, > 0.5. This value confirmed that the factor analysis could be conducted on the study variables and participants.

Table 4 reveals four factors constituted in this analysis: first, second, third, and fourth factor with eigenvalues of 4.974, 2.187, 1.432, and 1.105, respectively. Table 4 also shows that the total of percentage of variance from the factors was 33.161% + 14.582% + 9.545% + 7.369% = 64.657%. Hence, 64.657% of the study variables are capable of explaining the four factors constituted by the analysis.

Factor	Initial Eigen	% of	Loading
	values	Varience	Factor
Factor 1:			
X1: Essential Working Ability			.650
X2: Decision Making Method	4.974	33.161	.645
X3: Work Guideline			.750
X4: Leader Guidance			.797
X5: Work Atmosphere			.442
Factor 2:			
X6: Support from Co-workers	2.187	14.582	.868
X7: Communication with Co-workers			.821
X8: Help from Co-workers			.806
Factor 3:			
X9: Organizational Justice			.525
X10: Occupational Safety	1.432	9.545	.754
X11: Facillity			.630
X12: Social Support			.619
Factor 4:			
X13: Innovation			.685
X14: Determination and Compliance to Authority	1.105	7.369	.685
X15: On Time for Work			.828

Source: processed data, 2021

Factor 1, namely **workplace environment**, consisted of essential working ability (X1), decision-making method (X2), work guideline (X9), leader guidance (X10), and work atmosphere (X12).

Factor 2 was composed of support from co-workers (X6), communication with coworkers (X7), and help from co-workers (X8). Therefore factor 2 was identified as **support from co-workers**.

Factor 3 was contrived of organizational justice (X11), occupational safety (X13), facility (X14), and social support (X15). Later, in the discussion, this factor was named **occupational safety**.

Factor 4 consisted of innovation (X3), determination and compliance to authority (X4), and on-time for work (X5). These factors were then identified as **self-concept**.

The column of *Corrected item-total Correlation* in Table 5 reveals that the value of each question item in the questionnaire was higher than 0.3. These findings indicated that each question item was valid. KMO and Barlett's value is essential in factor analysis. These values show the effect of the independent variable on the dependent variable. The expected value of KMO was 0.5. Statistical analysis found the value of KMO was 0.875, > 0.5. Hence, this result indicated that further analysis using factor analysis could be conducted on the study variables and participants.

	Table 5 Validity,	Reliability and K	MO Burnout	
No	Corrected Item-	Cronbach's Alpha	Anti-image	KMO and
	Total Correlation	if Item Deleted	correlation	Barlett's Test
Y_1	.573	.921	.863	_
\mathbf{Y}_2	.378	.925	.729	
Y_3	.599	.920	.834	
Y_4	.610	.920	.866	
Y_5	.496	.923	.839	
Y_6	.550	.921	.901	
Y_7	.668	.919	.855	
Y_8	.562	.922	.906	.875
Y9	.575	.921	.903	
Y ₁₀	.449	.924	.841	
Y ₁₁	.603	.921	.923	
Y ₁₂	.551	.921	.901	
Y ₁₃	.787	.916	.901	
Y ₁₄	.582	.921	.861	
Y ₁₅	.700	.918	.922	_
Y ₁₆	.608	.920	.831	_
Y ₁₇	.402	.924	.722	_
Y ₁₈	.585	.921	.852	_
Y ₁₉	.696	.919	.920	_
Y ₂₀	.647	.919	.894	_
Y ₂₁	.679	.919	.942	_

Source: processed data, 2021

Table 6 Burnout Factor's Analysis

Factor	Initial Eigen	% of	Loading
Factor 1:	values	Varience	Factor
	8.618	41.046	507
Y1: Poor Performance			.597
Y2: Exhaustion			.556
Y3: Physical and Emotional Exhaustion			.702
Y4: Workplace Frustation			.504
Y5: Lacking Initiative			.564
Y6: Avoidance Behavior			.655
Y7: Unfinished Task			.649
Y8: Lack of Drive			.617
Y9: Aggresive Emotion			.707
Y10: Negative Thought			.800
Y11: Poor/Inconducive Workplace Atmosphere			.703
Y12: Lack of Motivation			.749
Factor 2:	2.184	10.401	
Y13: Emotionally Drained			.771
Y14: High Effort in Working			.549
Y15: Physical and Emotional Exhaustion			.760
Y16: Workplace Frustration			.769
Y17: Hard Work			.777
Y18: Workplace Stress			.548
Y19: Feeling of Desperation			.567
Factor 3:	1.240	5.907	
Y20: Intense Work Atmosphere			.728
Y21: Lack of Motivation			.752

Source: processed data, 2021

Table 6 shows three factors constituted in this analysis. The first, second, and third factors had eigenvalues of 8.618, 2.184, and 1.240, respectively. The eigenvalues of the fourth factor were 0.955, <1, hence the factoring process was ended in the third factor. According to Table 6, the total of variance percentage of the four factors was 41.046% + 10.401% + 5.907% = 57.344%. Hence, 57.344% of the study variables were capable of explaining three factors constituted by the analysis.

Factor 1, namely **poor work performance**, consisted of poor performance (Y1), exhaustion (Y2), physical and emotional exhaustion (Y3), workplace frustration (Y4), lacking initiative (Y5), avoidance behavior (Y6), unfinished task (Y7), lack of drive (Y8), aggresive emotion (Y9), negative thought (Y10), poor/inconducive workplace atmosphere (Y11), and lack of motivation (Y12).

Factor 2 is composed of emotionally draining work (Y13), high effort in working (Y14), physical and emotional exhaustion (Y15), frustration (Y16), hard work (Y17), workplace stress (Y18), and feeling of desperation (Y19). The second factor was identified as **emotional exhaustion**.

The third factor consisted of the intense working atmosphere (Y20) and lack of motivation (Y21). These factors identified as **teamwork harmony**.

The Influence of Workplace Environment Factor on Burnout Occurrence

Findings revealed that workplace environment (leader guidance, workplace environment, and chance to give the best contribution to the work) contributed to burnout syndrome occurrence among employees in BNN Rehabilitation Center. Lack of support from the leader had contributed to the burnout occurrence. The majority of leaders in the rehabilitation center did not provide significant support for their employees. Only a few of them who can address adequate support to their employee. In fact, leaders could perform a major role in driving employee's will to recognize their best potencies. Sharing sessions with their employees is an alternative way to address their setbacks and opinion related to the area restriction policies in BNN Rehabilitation Center.

This finding was parallel with a study done by Adnyaswari (2017). They identified that social support given by leaders in the form of positive feedback, care, and respect could contribute to lower burnout occurrence.

Workplace environment also induced the occurrence of burnout syndrome. The implementation of area restriction policies could generate different work atmospheres. Employees perceived their workplace became more stressful due to the enforcement of the strict health measures and difficulty to reach certain places. This finding was parallel with a study conducted by Romadhoni et al. (2015) that found unsafe and inconvenient workplaces influenced the employee's work performance and could lead to burnout syndrome. A conducive, pleasant, convenient, and safe environment is the essential requirement for the employee to be able to present their best skill in their work.

The Influence of Co-Worker Support on Burnout Occurrences

Findings revealed that support from co-workers associated with the burnout occurence among the employee in BNN Rehabilitation Center. Proper support from the co-workers deliver a significant effect to their mental health during the implementation of the area restriction policies. WFH and WFO system provided new challenges for the employee. Support from the co-workers such as motivation, care, empathy, good communication, help, and respect made the employee feel loved by their co-workers. This situation could reduce the occurrence of burnout among the employee in BNN rehabilitation Centers. In line with this finding, a study by Mustikasari & Prakoso (2018) declared that a poor support from co-workers correlated with high occurrence of burnout syndrome. This situation may happened due to their complexes task that lead to stres. Based on the buffering hypothesis (Sarafino, 2014), social support would prevent negative effects of stress during overwhelming situations. Hence, adequate co-workers supports would stimulate secure feeling during stressfull situation. Co-workers supports tend to make individuals perceiving a stresfull situation into a manageable situation due to the social support from their co-workers. Contrary with this situation, an individual with a poor level of co-worker supports tended to experience stress and burnout. They assumed that no one could help them to deal with their situation.

The Influence of Occupational Safety on Burnout Occurrence

Statistical analysis revealed that occupational safety significantly affected burnout occurrence among employees in BNN Rehabilitation Center. Pandemic has changed the way we live. All sectors are obligated to apply health protocols to prevent and control Covid-19 transmission. BNN Rehabilitation Center is a governmental-based institution that provides social and health services. Therefore, the risk of Covid-19 transmission was relatively high in comparison to other fields of works. Hence, strict health measures required to be implemented to prevent institutional-based Covid-19 infections. These safety measures were like a two-sided coin. It played a vital role in minimizing Covid-19 transmission but also restricting the daily activities. According to our findings, participants stated that these policies had made access to various locations more difficult, especially during the implementation of the WFH and WFO systems. They also stated that they felt bored and got burnout easier during the enforcement of the policies.

In addition, the implementation of the WFO system for a long period of time also posed financial issues among the employees at the BNN Rehabilitation Center. They complained about the need for higher life expenses spent every day. During the WFO, they need to pay for their own needs in the dorm. Furthermore, they also need to cover their family's daily needs who were living in separate places.

A study by Widodo (2010) also found that good occupational safety was associated with lower burnout syndrome occurrence. Occupational safety is an essential factor for the physical and mental health of the employees (Widodo, 2010). Wellness of the physical and mental health element would decrease burnout occurrence among the employees in BNN Rehabilitation Center (Widodo, 2010).

The Influence of Self-Concept on Burnout Occurrence

The analysis reported self-concept as one cause of burnout among employees in BNN Rehabilitation Center. Individuals who faced stressful situations (psychological stress) tended to contrived coping mechanisms to confront stressful situations. Pearlin and Schooler in Hall (2011) defined coping as a set of individual behaviors developed to deal with and overcome difficulties or psychological pressures rooted in various social issues.

Findings revealed that the enforcement of the area restriction policies triggered emotional exhaustion and stress among the participants. Participants were trying to cope with the stress by consistently praying, exercising, gardening, taking a staycation, and being involved in other positive activities.

These findings were parallel with a study by Mutiasari (2010). They found that a low level of burnout correlated with dysfunctional intrapersonal relationships (individual relationship with himself). Moderate to high levels of burnout produced dysfunctional 225

interpersonal relationships. Moreover, it created an imbalance between the work and personal life. A higher capacity to adjust with pressures in workplaces contributed to lower burnout occurrence. Good skill of adaptation to workplace-related stress provided calmer tendencies to deal with the work pressures and produced better focus. On another hand, poor adaptability skills could initiate workplace conflicts.

The Influence of Burnout on Poor Work Performance, Emotional Exhaustion, and Conflict

Burnout among the employees could stimulate poor work performance, emotional exhaustion, and conflict.

Table 1. Indicator of CSI in BNN Rehabilitation Center				
Indicator of CSI	CSI (Level 1)	CSI (Level 2)		
Service Hours	3.4	3.353		
Service Staff Behavior	3.647	3.553		
Source: BNN Rehabilitation Center, 2020				

Table 1. Indicator of CSI in BNN Rehabilitation Center

According to Table 1, the indicator of service hour was slightly decreasing. Service hour was described as time spent serving in an organization (Government of Indonesia, 2014). Longer service hours implied employees' poor motivation to work that consequently decreased their work performance. In line with this finding, Trisnawaty (2015) found a negative correlation between burnout occurrence and work performance. Higher risk of burnout related to worse work performance.

Emotional exhaustion due to burnout caused alteration in rehabilitation services provided by the employee in BNN Rehabilitation Center. It could be showcased by their attitude and behavior when delivering rehabilitation services to the client. According to Table 1, the indicator of service staff behavior was also slightly decreased. This finding was parallel with a study conducted by Santika that identified excessive and prolonged stress produced emotional exhaustion. This situation could lead to extreme avoidance, cynical, and frustration behavior (Santika, 2017).

Burnout was also influenced by teamwork harmonization. The team disharmony was confirmed by the intense working atmosphere and lack of motivation among employees when working in a team. This situation also may be rooted from their personal psychological issues that could interfere the teamwork harmony.

Conclution

Findings indicated four factors that had influenced burnout during the enforcement of the area restriction policy in the BNN Rehabilitation Center. Those factors were: 1). workplace environment, 2) support from co-workers, 3) occupational safety, and 4) self-concept. Later, we also found three factors developed from the burnout: 1) poor work performance, 2) emotional exhaustion, and 3) teamwork disharmony.

Area restriction policy is a novel course or principle of action set for the employee of BNN Rehabilitation Center during the pandemic. Regular evaluation is necessary to identify the impact of these policies. The majority of participants perceived that these policies could not be effectively implemented. Many visitations had violated the implementation of the policy. Hence, the main objective of this policy, reducing the Covid-19 transmission rate, would extremely hard to be accomplished. On the other hand, the enforcement of the policy also triggered burnout syndrome that had revealed by their poor work performance, emotional exhaustion, and conflicts with co-workers.

Psychological health is essential for employees' mental health. Hence, it demanded to recognize this issue during the enforcement of the policies by designing a pleasant work atmosphere that subsequently contributed to employees' immunity. Sharing sessions between the leader and their employee is an alternative way to cope with issues encountered in the workplace. Further study is required to investigate the effect of the workplace environment, support from co-workers, occupational safety, and self-concept on burnout occurrence during the enforcement of area restriction policies.

REFERENCE

- Adnyaswari, N. I. G. (2017). Pengaruh Dukungan Sosial dan Burnout Terhadap Kinerja Perawat Rawat Inap RSUP Sanglah. *E-Jurnal Manajemen*. Vol. 6 No 5, 2474-2500
- Amelia, R., & Zulkarnain, Z. (2005). Konsep Diri dan Tingkat Burnout pada Karyawan yang Bekerja di Instansi Pelayanan Masyarakat. *Psikologika : Jurnal Pemikiran Dan Penelitian Psikologi*, 10(19), 41-49. https://doi.org/10.20885/psikologika.vol10.iss19.art2
- Andarini, E. (2018). Analisis Faktor Penyebab Burnout Syndrome dan Job Satisfaction Perawat di Rumah Sakit Petrokimia Gresik. *Tesis Program Studi Magister Keperawatan Universitas Airlangga*.
- Babes BNN. (2020). SE/ 015/ V/BB/KP/2020/BNN.
- BNN. (2020). Penyesuaian Sistem Kerja Aparatur Sipil Negara (SE/20/III/KA/KP.10/2020/BNN). https://sipp.menpan.go.id/pelayananpublik/wilayah/badan-narkotika-nasional
- Eliyana. (2016). Faktor Faktor yang Berhubungan dengan Burnout Perawat Pelaksana di Ruang Rawat Inap RSJ Provinsi Kalimantan Barat Tahun 2015. *Arsi*, 2(3), 172–182.
- Garland, B. (2004). The Impact Of Administrative Support On Prison Treatment Staff Burnout: An Exploratory Study. 84(4), 452–471. https://doi.org/10.1177/0032885504269343
- Government of Indonesia. (2014). Peraturan Menteri Pendayagunaan Aparatur Negara dan Reformasi Birokrasi Republik Indonesia Nomor 15 Tahun 2014 tentang Pedoman Standar Pelayanan. 14.
- Hall, S. (2011). Hubungan Antara Konsep Diri Dengan Strategi Coping Pada Mahasiswa Angkatan 2009 Program Studi Pg Paud Fkip Universitas Tadulako Hj. Shofiyanti Nur Zuama. 41–51. https://media.neliti.com/media/publications/123594-ID-hubunganantara-konsep-diri-dengan-strat.pdf
- Maslach, C., Jackson, S. E., & Leiter, M. P. (1996). The Maslach Burnout Inventory Manual. *The Maslach Burnout Inventory*, *May* 2016, 191–217. https://www.researchgate.net/publication/277816643

- Mustikasari, C. M., & Prakoso, H. (2018). Hubungan Dukungan Sosial Rekan Kerja dengan Burnout pada Perawat ICU RSHS Bandung. *Prosiding Psikologi*, 4(1), 241–248.
- Mutiasari. (2010). Strategi Mengatasi Burnout Di Tempat Kerja. *Jurnal Pro Bisnis*. Vol 3 No 1, 40-47.
- Nurmayanti, L.(2016). Hubungan Antara Strategi Koping dengan Kejadian Burnout Pada Dokter yang Menjalani Program Pendidikan Dokter Spesialis di RSUD Dr. Sotomo Surabaya. Tesis Fakultas Kedokteran Ilmu Kedokteran Jiwa Universitas Airlangga.
- Putri, L. A. Z., Zulkaida, A., & Rosmasuri, P. A. (2019). Perbedaan Burnout Pada Karyawan Ditinjau Dari Masa Kerja. *Jurnal Psikologi*, *12*(2), 157–168. https://doi.org/10.35760/psi.2019.v12i2.2440
- Rachman, U. (2007). Mengenal Burnout Pada Guru. 10(2), 216–227.
- Riani, N., & Handayani, N. S. (2020). Dampak Stres Kerja Pustakawan Pada Masa Pandemi Covid-19 Terhadap Layanan Perpustakaan Perguruan Tinggi. *Fihris: Jurnal Ilmu Perpustakaan Dan Informasi*, 15(1), 97. https://doi.org/10.14421/fhrs.2020.151.97-114
- Romadhoni, L. C., Asmony, T., & Suryatni, M. (2015). Pengaruh Beban Kerja, Lingkungan Kerja, dan Dukungan Sosial Terhadap Burnout Pustakawan Di Kota Mataram. *Khizanah Al-Hikmah : Jurnal Ilmu Perpustakaan, Informasi, Dan Kearsipan, 3*(2), 124–145. https://doi.org/10.24252/kah.v3i2a3
- Rosyid, H. F. (2016). Burnout: Penghambat Produktivitas Yang Perlu Dicermati. *Buletin Psikologi*, 4(1), 19–25. https://doi.org/10.22146/bpsi.13462
- Santika, P. B. dan I. G. (2017). Fakultas Ekonomi dan Bisnis Universitas Udayana (Unud), Bali, Indonesia Pegawai merupakan aset perusahaan yang sangat berharga yang harus dikelola dengan baik oleh organisasi agar dapat memberikan konstribusi yang optimal. Pegawai saat ini cenderung m. 6(2), 634–662.
- Sarafino, E. T. W. S. (2014). Health Psychology. New York: John Wiley and Son
- Trisnawaty, I. R. (2015). Hubungan Antara Burnout Dengan Prestasi Kerja Insurance Agents Prudential Cabang Kantor Graha Prestasi Medan. *Skripsi Fakultas Psikologi Universitas HKBP Nommensen Medan*.
- Widodo, rohadi. (2010). Analisis Pengaruh Keamanan Kerja Dan Komitmen Organisasional Terhadap Turnover Intention Serta Dampaknya Pada Kinerja Karyawan Outsourcing. *Tesis Program Studi Magister Manajemen Universitas Diponegoro*.