

Differences in The Proportion of Factors Related to Occupational Stress on Inspired Nurses During The Covid-19 Draw at Islamic Hospital in Jakarta Pondok Kopi in 2021

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ABSTRAK

The American National Association for Occupational Health (ANAOH) places the incidence of work stress in nurses at the top of the forty-first on job stress. Work stress experienced by nurses is very detrimental to themselves and the hospital because it can make nurses suffer from fatigue, be rude, anxious, increase blood pressure, decrease self-confidence, increase feelings of dissatisfaction, and can reduce work productivity for nurses. This study was conducted to determine the difference in proportion factors associated with work stress on inpatient nurses during the Covid-19 pandemic at the Pondok Kopi Jakarta Islamic Hospital. Cross-sectional study design with primary data distributed through a questionnaire. The sample is 73 people the sampling is done by incidental sampling. Data analysis used chi-square test ($\alpha = 0.05$). In this study in the proportion of stress, namely the age of 40 years as many as 28 people (70.0%), female sex as many as 44 (68.8%), married marital status as many as 34 (66.7%), and working years > 6 years as many as 31 (66.0%), heavy workload as much as 50 (70.4%), shift work in the morning shift as much as 37 (63.8%), poor interpersonal relations as much as 44 (86.3%) and who have a UMR salary of 40 (67.8%). The risk factors studied were not related to the incidence of stress in inpatient nurses during the Covid-19 pandemic at the Pondok Kopi Jakarta Islamic Hospital in 2021. It is expected to be input in taking action in anticipating work stress among nurses so that it can improve the performance of nurses in applying quality nursing care.

Keywords: Work Stress, Work Mass, Workload, Salary

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INTRODUCTION

Today's increasing human needs are the needs in the health sector that are so complex. This is very influential on the increasing work demands of health professionals in providing services for individuals and society. Hospitals must be able to provide quality health services holistically to the community. The goal is to be able to realize this so that medical personnel is needed who can provide health services according to the medical needs of patients. One of the health care workers at the hospital is nurse is a medical worker who has the most contact time with patients and provides health services according to nursing care standards to support patient recovery.

The National Institute of Occupational Safety and Health (NIOSH) says that jobs related to hospitals have a high tendency to experience work stress or depression (Runtu, Pondaag, and Hamel, 2018). The American National Association for Occupational Health (ANAOH) places the incidence of work stress in nurses at the top of the forty-first on job stress (Sari, Yusran, and Ardiansyah, 2017). Data from the American National Institutes of Health (NIH) shows that among 130 types of jobs that are full of stress, nurses are ranked 27th (Rhamdani and Wartono, 2019). According to data from the Indonesian Ministry of Health in 2014 the number of nurses in Indonesia reached 237,181 people, thus the incidence of work stress in nurses in Indonesia is quite high (Ramadini and Syafitri, 2018). The survey results from the Indonesian National Nurses Association (PPNI) (2011) say that there are 50.9% of Indonesian nurses who work experience work stress, often feel dizzy, tired, unfriendly, lack rest due to too high workload and inadequate income. If this is allowed to happen of course it will have a worse impact on nurses (Febriani, 2019).

The Indonesian statistical agency has not released specific data on the number of employees experiencing work stress. The DKI Jakarta Health Office revealed that 11.6 percent or 17.4 million people experience mental-emotional disorders or mental health disorders in the form of anxiety and depression disorders (Ahsan, 2014). Work stress is still one of the problems that are often complained about by workers in various work sectors. Work stress in addition to harming the health of workers will also hamper production activities in a company. In general, the causes of work stress are closely related to work factors and individual factors of workers (Habibi and Jefri, 2018). Work stress on nurses should be given special attention in the management of human resources in hospitals. Factors that cause stress on nurses themselves are internal factors, namely individual characteristics, and external factors, namely organizational factors and environmental factors (Ardian, 2019). Work stress experienced by nurses is very detrimental to themselves and the hospital because it can make nurses suffer from fatigue, be rude, anxious, increase blood pressure, decrease self-confidence, increase dissatisfaction with their work, and can reduce work productivity for nurses (Rhamdani and Wartono), 2019). In addition, nurses have a very high duty and responsibility for the safety of human life. So that the nursing profession has a risk of experiencing stress at work. The impact caused by work stress

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if not handled can be in the form of physiological, psychological, and behavioral symptoms. can cause job dissatisfaction which can lead to job-related dissatisfaction, therefore the psychological impact is easy to conclude but stress appears in other psychological states, such as tension, anxiety, irritability, boredom, and procrastination. If employees are placed in a job that has multiple and conflicting demands or where there is no clarity about the duties, authorities, and responsibilities of the job bearer, stress and dissatisfaction will increase. While behavioral symptoms include changes in productivity, absenteeism, and employee turnover rates, as well as changes in eating habits, increased smoking, fast speech, restlessness, and sleep disturbances (Frichilia and Mandey, 2016).

Based on a previous research journal conducted by Indri Ramadini with the title Description of the work stress level of nurses in the inpatient installation of internal medicine RSUP M Djamil Padang That most of the respondents experienced work stress, namely 11 respondents (55%) and 9 respondents who did not experience work stress. 45%) (Ramadini and Syafitri, 2018). Based on the previous research journal conducted by Muhammad Amin in the title Work stress and work conflict affect the performance of nurses in the inpatient room at the Kepahiang Regional General Hospital (RSUD) that of 80 respondents, as many as 39 respondents (48.8%) had low work stress., and 41 (52.1%) respondents who have high work stress (Amin, Ekwinaldo, and Novrianti, 2020).

METHODS

This study is a quantitative observational study, using primary data conducted with an online questionnaire on inpatient nurses at the Jakarta Islamic Hospital Pondok Kopi in 2021 with a cross-sectional study design. The sample of this study was 73 people using incidental sampling using a questionnaire. The analysis carried out in this study was univariate analysis to see prevalence and bivariate chi-square analysis ($\alpha = 0.05$), Odds Ratio (OR) calculation, and Risk Attribute (AR) calculation.

RESULT AND DISCUSSION

In this study, based on the data below, it can be seen that the education distribution of respondents from a total of 73 respondents, the majority of respondents aged 40 were 40 (54.1%), while respondents aged >40 years were 33 (40.6%). Based on the data, it can be seen that the sex distribution of a total of 73 respondents, the majority of respondents have a female gender as many as 64 (86.5%) while respondents who have a male gender are 9 (12.2%). Based on the data, it can be seen the distribution of marital status from a total of 73 respondents, the majority of respondents who are married are 51 (68.9%) while respondents who are not married are 22 (29.7%).



Table 1. Univariate Analysis

Variable	n	%
Age		
>40 tahun	33	40,6
≤40 tahun	40	54,1
Gender		
Woman	64	86,5
Man	9	12,2
Marital Status		
Marry	51	68,9
Single	22	29,7
Working Mass		
>6 tahun	47	63,5
≤6 tahun	26	35,1
Workload		
Heavy	71	95,9
Light	2	2,7
Work Shift		
Morning	58	49,2
Night	15	12,7
Interpersonal Relations		
Bad	19	26,0
Not Bad	54	74,0
Salary		
UMR	37	50,0
Not UMR	20	27,0

Based on the data, it can be seen that the distribution of working period of a total of 73 respondents, the majority of respondents who worked >6 years were 47 (63.5%) while respondents who worked 6 years were 76 (49.4%). Based on the data, it can be seen that the distribution of workload from a total of 73 respondents, the majority of respondents who work with heavy loads are 71 (95.9%) while respondents who work with light loads are 2 (2.7%). Based on the data, it can be seen that the distribution of work shifts from a total of 73 respondents, the majority of respondents who worked on the morning shift were 37 (49.2%), while the respondents who worked on the night shift were 15 (12.7%). Based on the data, it can be seen that the distribution of Interpersonal Relations from a total of 73 respondents, the majority of respondents had a not bad relationship, namely 54 (74.0%) while respondents who had a bad relationship were 19 (26.0%). Based on the data, it can be seen that the distribution of salaries from a total of 73 respondents, the majority of respondents who received the UMR Salary were 37 (50.0%) while the respondents who did not get the UMR Salary were 20 (27.0%).

The results of the analysis of the proportion between the age of the respondent and the stress obtained by the majority of respondents aged 40 years there are 28 people (70.0%) who have stress. While among respondents aged >40 years there were 23 people (69.7%) who had stress, it can be concluded that there is no difference in the proportion of stress on nurses who are >40 years old and 40 years old or it can be concluded that there is no significant relationship between age and stress. The



results of the analysis of the proportion between the sexes of respondents with stress obtained the majority of respondents with male sex there are as many as 7 (77.8%) who have stress. While among respondents who are female there are 44 (68.8%) who have stress, it can be concluded that there is no difference in the proportion of stress between the female sex and male gender or it can also be concluded that there is no significant relationship between the sexes. sex with stress.

Table 2. Bivariate Analysis

		Stress					
	Variable	Stress		No stress	stress	— Total	
		n	%	n	%	n	%
1	Age						
	>40 tahun	23	69,7	10	30,3	33	100
	≤40 tahun	28	70,0	12	30,0	40	100
2	Gender						
	Woman	44	68,8	20	31,3	64	100
	Man	7	77,8	2	22,2	9	100
3	Marital Status						
	Marry	34	66,7	17	33,3	51	100
	Single	17	77,3	5	22,7	23	100
4	Working Mass						
	>6 tahun	31	66,0	16	34,0	47	100
	≤6 tahun	20	76,9	6	23,1	26	100
5	Workload						
	Heavy	50	70,4	21	29,6	71	100
	Light	1	50,0	1	50,0	2	100
6	Work Shift						
	Morning	37	63,8	21	36,2	58	100
	Evening	14	93,3	1	6,7	15	100
7	Interpersonal Rel	ation					
	Bad	44	86,3	7	13,7	51	100
	Not Bad	16	72,7	16	27,3	22	100
8	Salary						
	UMR	40	67,8	19	32,2	59	100
	Tidak UMR	11	78,6	3	21,4	14	100

The results of the analysis of the proportion between marital status and stress obtained the majority of respondents who are not married as many as 17 (77.3%) who have stress. While 34 (66.7%) married respondents have stress, it can be concluded that there is no difference in the proportion of stress between married women and unmarried women or it can also be concluded that there is no significant relationship between marital status and stress. The results of the analysis of the proportion between working period and stress showed that the majority of respondents who had a tenure of 6 years were 20 (76.9%) who had stress. Meanwhile, among respondents who worked >6 years as many as 31 (66.0%) had stress, it can be concluded that there is no difference in the proportion of stress between years of work >6 years and 6 years. It can also be concluded that there is no significant relationship between years of service. with stress.

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The results of the analysis of the proportion between workload and stress obtained that the majority of respondents who have a heavy workload are 50 (70.4%) who have stress. Meanwhile, among respondents who have a light workload as much as 1 (50.0%) who has stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a heavy workload and a light workload or it can be concluded that there is no significant relationship, a significant relationship between workload and stress. The results of the analysis of the proportion between work shifts and stress obtained that the majority of respondents who work in night shifts are 14 (93.3%) who have stress. While among respondents who work in the morning shift as many as 37 (63.8%) have stress, it can be concluded that there is no difference in the proportion of stress between respondents who work in the morning and evening shifts or it can be concluded that there is no significant relationship between work shifts, with stress.

The results of the analysis of the proportion analysis between interpersonal relationships and stress obtained the majority of respondents who have a bad relationship as many as 44 (86.3%) who have stress. Meanwhile, among respondents whose relationship is not bad, 16 (72.7%) have stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a bad working relationship and one who does not or it can be concluded that there is no significant relationship. a significant relationship between interpersonal relationships with stress. The results of the analysis of the relationship between salary and stress showed that the majority of respondents who received salaries without minimum wage were 11 (78.6%) who had stress. Meanwhile, among respondents who have a UMR salary as many as 40 (67.8%) who have stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a UMR salary and no minimum wage or it can be concluded that there is no significant relationship between salary and stress.

The results of the analysis of the proportion between the age of the respondent and the stress obtained by the majority of respondents aged 40 years there are 28 people (70.0%) who have stress. Meanwhile, among respondents aged > 40 years, there were 23 people (69.7%) who had stress, so it can be concluded that there is no difference in the proportion of stress at the age > 40 years and the age 40 years or it can be concluded that there is no significant relationship between age and stress.

The results of this study are in line with research (Rhamdani and Wartono, 2019) there is no relationship between age and work stress, it is known that age 40years experience stress with a p-value of 0.071 > (0.05) meaning there is no significant relationship between age and stress working with nurses at the Asy-Syifa Hospital, West Sumbawa. So it can be stated that the younger a person is, the more likely they are to experience work stress. The results of this study are also supported by the results of research conducted by (Nadia Fuada et al., 2017) it is known that nurses who experience

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severe work stress are mostly in the >40year age category, which is 75% compared to those aged ≥45 years.

Based on the results of statistical tests, the results obtained with a p-value (p = 0.737) that there is no significant relationship between age and work stress. This can happen because the age factor does not significantly affect the level of work stress experienced by nurses. In this study, the responsibility factor and the workload that must be carried out by nurses were not influenced by age. There is research that is not in line with the results of research (Irkhami, 2016) which shows that based on the Spearman correlation test between age and work stress, it shows a value of -0.283, meaning that the relationship between age and work stress is low and the nature of the relationship is in the opposite direction. shows that respondents who have an age range of >40 years (57.1%), while respondents aged 40 years (42.9%) years experience more high stress when compared to respondents aged >40 years (16.7%).

The results of the analysis of the proportion between the sexes of respondents with stress obtained the majority of respondents with male sex there are as many as 7 (77.8%) who have stress. While among the female respondents there are 44 (68.8%) who have stress, it can be concluded that there is no difference in the proportion of stress between the female sex and male gender or it can also be concluded that there is no significant relationship between age with Stress. The results of this study are in line with research (Evans Jeremia Sitepu, 2018) The results of the chi-square test show that there is no significant relationship between gender with p-value = 0.561 and a > 0.05 which means there is no significant relationship between gender and work stress. Work stress experienced by male and female nurses can be different, this is because physically and mentally are different, as well as responses to different stressors. The results of this study are supported by research (Nadia Fuada 2017) obtained a p-value = 1.00 where gender is not a significant obstacle in the work of surgical nurses.

The job of operating room nurse is not a job that requires a large workforce which will be more effective if it is done by men. Both male and female nurses have the same workload and responsibilities so that gender is not a factor that can trigger work stress. Some studies are not in line with the research results (Awalia, Medyati, and Giay, 2021) from the results of the analysis showing that female respondents experience more severe work stress (50.9%) compared to male respondents (11.3%). The p-value = 0.014 and the value (Odds Ratio) = 0.514, this study shows that there is an influence between gender and the work stress of nurses in the inpatient room at Kwaingga Hospital, Keerom Regency. The results of the analysis of the proportion between marital status and stress obtained the majority of respondents who are not married as many as 17 (77.3%) who have stress. While 34 (66.7%) married respondents have stress, it can be concluded that there is no difference in

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the proportion of stress between those who are married and those who are not married or it can be concluded that there is no significant relationship between age and stress.

This study is in line with research (Nurini, et al 2017) Based on the results of research for marital status from the results of interview data and questionnaires on the marital status of unmarried employees as many as 19 (31.7%) and those who are married as many as 41 (68.3%) with p-value 0.630 > 0.05 so that Ho failed to be rejected, which means that there is no relationship between marital status and work stress on employees at PT. PLN (Persero) TJBT APP Cirebon 2017. The results of this study are also supported by the results of research conducted by (Singal, et al., 2020) that there is no significant relationship between marital status and work stress with a p-value = 0.077.

There are different things where respondents in this study do not make family or married life problems as something that causes stress to their work. Married life may cause stress to the respondent's social life but this does not interfere with the work done by the respondent. This may also be due to the age of marriage, where the longer the marriage is carried out, the greater the tolerance for problems in marriage so that problems that arise in marriage do not carry over to work. Some studies are not in line with research (Rhamdani and Wartono, 2019) The study also showed a relationship between marital status and work stress on nurses with a p-value = 0.041. In this study, unmarried nurses experienced more work stress, which was 83.7% compared to married nurses. Marital status is one of the needs of individuals, so it will be a good predictor for individuals in carrying out daily activities. Someone married will tend to have good life satisfaction and will affect the quality of life.

The results of the analysis of the proportion analysis between working period and stress obtained the majority of respondents who have a working period of 6 years there are as many as 20 (76.9%) who have stress. Meanwhile, among respondents who worked >6 years as many as 31 (66.0%) had stress, it can be concluded that there is no difference in the proportion of stress between working years >6 years and 6 years. It can also be concluded that there is no significant relationship between age and age. Stress This research is in line with research (Gobel, et al. 2013) Based on the research conducted, the results of statistical tests using the chi-square test obtained p-value = 0.247 or p-value > 0.05. These results indicate that there is no relationship between working period and work stress on nurses who work in the ER and ICU RSUD Datoe Binangkag Kotamobagu City. The results of this study are supported by research (Azteria and Hendarti, 2020) showing that nurses with a working period of 6 years have the highest proportion of 26 nurses (74.3%). This shows that there is no relationship between the work period and work stress. The period of work is the period or the length of time workers work in a place. The period of work associated with work stress is closely related to boredom or boredom at work. Workers who work over 6 years usually have a higher level of saturation than workers who have just worked, so that saturation can cause work stress.

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There is research that is not in line with the results of research from (Fitri, 2018) that there is a relationship between tenure and obtained a p-value of 0.015 (<0.05) which means Ho is rejected and Ha is accepted, so it can be concluded that there is a relationship between tenure and stress. work. work. Work tenure has an important influence in triggering stress. Workers with longer tenures tend to have better abilities and understanding of their work compared to workers with shorter tenures. The results of this study indicate that tenure has a significant relationship with work stress, and workers with shorter tenures are more likely to experience job stress. This is due to the possibility that most of the employees of Bank BMT do not have a banking education background so that in the first years of employees working, they still have to learn about banking issues as well as get directly involved in the job. This can result in the workload and pressure that workers have in the first years of work so that it can trigger work stress.

The results of the analysis of the proportion between workload and stress obtained that the majority of respondents who have a heavy workload are 50 (70.4%) who have stress. Meanwhile, among respondents who have a light workload as much as 1 (50.0%) who has stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a heavy workload and a light workload or it can be concluded that there is no significant relationship. a significant relationship between workload and stress. This study is in line with research (Habibi and Jefri, 2018) which shows that moderate workload respondents experience more moderate work stress (60%) compared to light workload respondents (13.75%). The value of p-value = 0.611 indicates that the research hypothesis is rejected, meaning that the workload does not affect work stress with a value of OR = 1.363. The results of this study are also supported by the results of research conducted by (Erdius and Dewi, 2017). This study did not find a relationship between workload and stress, indicating that respondents with moderate workload (22%) and heavy workload (6%) with a p-value of 0.691. This study did not find a relationship between mental workload and work stress, dr. H. Mohamad Rabain Muara Enim this is because most of the HR nurses at Dr. Hospital. H. Mohamad Rabain Muara Enim already has good competence. The better the competence of a nurse, the better the nurse will perceive her workload. When nurses understand and carry out their main duties and functions and responsibilities in full, the physical workload experienced will be different. The variety of workload variations can cause stress for workers when they feel unable to carry out the task. The inability of workers and completing these tasks can affect a person's self-assessment of himself.

The stress experienced by workers may be more influenced by other work factors. So that this workload variable is not significantly related to work stress. There is research that is not in line, namely research (Budiyanto and Rattu, 2019) there is a relationship between workload with p-value 0.009 and (Odds Ratio) = 0.018 which means there is a significant relationship between workload and work stress and workload is the most dominant variable related to work stress. The results of the

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analysis of the proportion between work shifts and stress obtained that the majority of respondents who work in night shifts are 14 (93.3%) who have stress. Meanwhile, among respondents who work in the morning shift as many as 37 (63.8%) have stress, it can be concluded that there is no difference in the proportion of stress between respondents who work in the morning and night shifts or it can be concluded that there is no significant relationship between work shifts. with stress.

The results of this study are in line with the results of research conducted by (Seguh, 2019) The results of the test of the relationship between work stress and the performance of nurses in the inpatient room at Bhayangkara Hospital Level III Manado by using the chi-square correlation test obtained a p-value = 0.625 (p < 0.05) which shows that there is no relationship between work stress and nurse performance. This can be caused because the work shifts applied by the Bhayangkara Hospital Level III Manado are regular and most of the nurses in the inpatient room follow the work shift schedule according to a predetermined schedule so that respondents are not at risk of experiencing a decrease in performance. Shift work which is followed according to the schedule is very helpful for nurses in carrying out their work. Stress that occurs in each individual is different depending on the problems faced and the ability to solve these problems. If a person experiences too much stress, then it will interfere with a person's ability to deal with the environment and work. Stress can be a positive thing if it can be controlled properly, but if it is not properly controlled, stress can cause health problems. Pressure at work can be a factor that causes stress. Many surveys and studies prove that work pressure is the main source of stress.

The results of this study are supported by research (Dian Dwiana, et al 2020) that there is no significant relationship between the relationship between work shifts and the work stress of operating room nurses in hospitals. Dr. M. Yunus Bengkulu in 2019 with p-value = 0.626. This study is not in line with research (Sari, et al 2017) based on the results of the chi-square test of work shifts with work stress that a p-value of 0.040 is obtained, which means that the p-value is less than 0.05 (0.040 < 0.05), so Ha: p = 0 that is, there is a relationship between work shifts and work stress on nurses in the Inpatient Room of the Southeast Sulawesi Province Mental Hospital in 2016.

The results of the analysis of the proportion analysis between interpersonal relationships and stress obtained the majority of respondents who have a bad relationship as many as 44 (86.3%)) who have Stress. Meanwhile, among respondents whose relationship is not bad as many as 16 (72.7%) who have stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a bad working relationship with a working relationship that is not bad or it can be concluded that there is no relationship significant relationship between interpersonal relationships with stress. This study is in line with research (Has, 2019) the results of the chi-square test show that the significant value of the probability of interpersonal relationships is p-value = 0.152 or > -value =

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0.05. This proves that interpersonal relationships have no relationship with employee work stress in the Class II B Penitentiary Meulaboh.

The results of this study are supported by research (Sari, Yusran, and Ardiansyah, 2017). The results of the chi-square test at the 95% confidence level or = 0.05, sig (0.321) < (0.05) indicates that there is no significant relationship between interpersonal relationships and work stress on nurses in the Mental Hospital Inpatient Room. Southeast Sulawesi Province. According to the theory of Wisnuwadhani and Mashoedi, interpersonal relationships will influence one another or it can be said as a reciprocal relationship in the work environment, especially the services that both serve. Interpersonal relationships can be influenced by several factors that can cause stress levels including three factors, namely internal consisting of Need to belong and the influence of feelings, while from external factors, namely proximity and physical attractiveness, and interaction factors, namely similarities and differences, reciprocal liking Almost every interpersonal relationship between personal or not, which makes the relationship effective so that stress levels do not arise, the nursing profession who every day meets various problems with colleagues have the potential to cause stress levels if not anticipated but nurses in this work environment can anticipate before experiencing stress levels. There is research that is not in line, namely research (Beki, et al 2017) based on the results of his research that work stress in the category of bad interpersonal relationships is 7 people or 58.3%, while in the category of good interpersonal relationships there are 22 people or 91.7%.

The results of the analysis using the Chi-Square Test obtained a p-value with a significance value of 0.053, which means that there is a relationship between interpersonal relationships and work stress on teachers at SLB Negeri Semarang. The results of the analysis of the proportion analysis between salary and stress obtained that the majority of respondents who received no UMR salary were 11 (78.6%) who had stress. Meanwhile, among respondents who have a UMR salary of 40 (67.8%) who have stress, it can be concluded that there is no difference in the proportion of stress between respondents who have a UMR salary and no UMR or it can be concluded that there is no significant relationship between salary and stress. This research is in line with research (Rahmatia Sari Sartiah Yusran Ririn Teguh Ardiansyah, 2017) From the chi-square test of salary with work stress, it is found that the p-value is 0.555 which means p-value > 0.05, so Ho: p = 0 that is there is no relationship between salary with work stress on nurses in the Inpatient Room of the Southeast Sulawesi Provincial Mental Hospital in 2016.

The results of this study are in line with research (Isna, 2019) which obtained a p-value = 0.856 where there is no relationship between salary and work stress, based on the results of the study nurses in the leprosy rehabilitation unit at RSUD Kelet felt that the salary received was following work responsibilities and was following the agreement when accepted to work at RSUD Kelet. A person's perception of an appropriate salary or not is also influenced by the dependents each



individual has. Nurses who have an appropriate salary (≥UMK Jepara) but experience work stress are nurses who have many dependents to meet family needs, such as the number of children more than 2, living with parents or meeting the needs of parents, as well as installments that must be paid every month. There is research that is not in line, namely research (Rudianto, 2020) from the results of the analysis using the Chi-Square Test, a p-value with a significance value of 0.048 means that there is a relationship between stress and salary.

CONCLUSION AND SUGGESTIONS

The risk factors studied were not related to the incidence of stress in inpatient nurses during the Covid-19 pandemic at the Pondok Kopi Jakarta Islamic Hospital in 2021. The suggestions from this research are:

- 1. Reducing the workload on inpatient nurses in hospitals, such as not giving jobs that are beyond their capabilities, reducing the number of jobs nurses have, providing appropriate work shift schedules, increasing the number of nurses in hospitals, and providing direction on work operational standards that are following the work as a nurse.
- Making the work environment more comfortable, such as providing complete patient care facilities and building good communication between superiors and subordinates as well as coworkers.
- 3. Reducing busy working hours in the workplace by adding more nurses in the workplace and allowing nurses to communicate with their colleagues for telling their experiences when undergoing a role as a nurse and a role as a family caretaker so that nurses feel that their role conflict is not a source of work stress.
- 4. It is expected to be information for the management regarding the problems faced by nurses at work.

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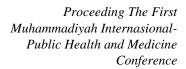


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