

The Analysis of Factors Affecting Burnout Rate in Nurses Working in Adult Nursing Rooms at Hospital

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ABSTRACT

Burnout syndrome is a response to physical and mental fatigue caused by increased workloads and emotionally demanding work situations that can be triggered by prolonged exposure to workplace stress. Nurses who work in nursing rooms and street nurses are potentially stressed by overloaded job demands related to service to others. Burnout syndrome, if not addressed promptly, can have a hazardous impact on health professionals, including reduced performance, such as low responsibility, high risk of medical errors, reduced commitment to work, and high self-stress. One of the efforts that can be made is to measure the level of work stress and the factors associated with it. Therefore, researchers are interested in conducting research that analyzes factors that influence burnout rates among nursing nurses in private hospitals in Surakarta. This type of research is quantitative research with a cross-sectional research design. The sampling technique in this study uses total sampling with a total sample of 47 respondents. The respondents to this study were all the nurses who worked in the adult nursing establishment of the hospital where the research was carried out. The Oldenburg Burnout Inventory questionnaire, which has been adapted into Indonesian, is used to measure the burnout rate of nurses working in adult nursing rooms. The results of the study showed that of the eight factors tested, only two factors influenced the burnout rate of nurses in adult nursing facilities: the working time factor and the length of shift per week (in hours). The p-value of both factors was 0.001. Of the two factors, the time factor was the most influential factor on burnout rates in nurses in adult hospital facilities, with an unstandardized B value of 0.317. While the study examines several demographic and work-related factors potentially associated with burnout, it may overlook other critical determinants. For instance, organizational factors (e.g., leadership support, workload distribution, organizational culture) and individual coping mechanisms could significantly influence nurses' burnout experiences. Future research should consider a more comprehensive range of factors to provide a holistic understanding of burnout in nursing.

Keywords: Burnout, Nurse, Inpatient room

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INTRODUCTION

Burnout is a psychological syndrome that consists of emotional fatigue, depersonalization, and reduced personal achievement^{1,2}. Burnout syndrome is a response to physical and mental fatigue caused

by increased workload and mentally demanding working conditions, as well as a persistent susceptibility to stress at work³. Burnout syndrome can also be interpreted as a professional phenomenon resulting from challenges in managing chronic emotional stress. It's an increasing problem in the field of

medicine, especially nursing. This syndrome is characterized by a combination of three aspects: emotional fatigue, depersonalization, and decreased work performance⁴.

A survey conducted by the National Nursing Association of Indonesia (PPNI) in 2018 found that nurses in Indonesia accounted for 50.9% of work stress. There are many reasons for this, including professional, interpersonal, and supportive factors. Employment factors include physical environments, interpersonal conflicts, workloads, work shifts, and so on. Age, gender, marital status, working time, etc. are individual factors, and supporting factors are social support⁵. Furthermore, in the Fatimah & Yugistyowati (2022) study, showing that 67.1% of nurses in the nursing home experience moderate burnout, this is also shown by Rangkuti et al., (2022), which show that 52.4% of nurses have moderate burnout. On the other hand, Tinambunan, et al., (2018), found that 39% of nurses have high burnout rates.

Nurses who work in nursing rooms and street nurses may be stressed by the excessive workload of caring for others. If this situation continues, nurses will experience physical, emotional, and mental exhaustion, a condition known as burnout⁶. Inpatient care is a primary medical service, making a significant contribution to the recovery of inpatients and providing a very complex service. The duties and responsibilities of nurses in carrying out their work can make nursing faced with various incidents that can cause work stress. One of the work barriers for a health care nurse is work stress⁷.

If not addressed immediately, burnout syndrome can have a dangerous impact on health workers, including decreased performance due to a lack of responsibility, a higher risk of medical error, reduced work involvement, and high levels of self-stress⁹. These problems are often related to occupational and health aspects and are seen as new challenges to occupational health. Nursing professions are very vulnerable to burnout¹⁰. Nurses are the most numerous people in the medical industry and have very complex jobs. Therefore, improving the mental health of nurses is essential to ensuring the quality of care and the success of treatment¹¹.

Based on a preliminary study of five nurses in a private hospital in Surakarta who work at adult ward, it was found that three of

them were on high burnout levels, while the other two were on moderate burnout. It indicates that there is a burnout problem felt by nurses.

Preventive and work-related stress management efforts should be made to protect nurses from the various impacts that may occur. One of the efforts that can be made is to measure the level of work stress and the factors associated with it. Recognizing and understanding these issues is crucial to making the necessary changes in the working environment and implementing measures to prevent and mitigate them. Therefore, researchers are interested in conducting research that analyzes factors that influence burnout rates among nursing nurses in private hospitals in Surakarta.

METHOD

This type of research is a quantitative study with a cross-sectional research design, where data collection is carried out at the same time to analyze factors that affect burnout rates in adult nurses in hospitals. The dependent variable in this study is the burnout rate of nurses, whereas the independent variable is patient demographic data, including, among others, gender, age, sex, ages, marital status, length of work, last education, level of nurse post, clinical nurse level, number of patients treated in a single shift, and length of shift per week.

The study was conducted at one of Surakarta's private hospitals in February–April 2024. The sampling technique in this study uses nonprobability sampling with total sampling. The total sample in this research is 47 respondents. The respondents to this study are all nurses who work in the adult nursing establishment of the research hospital and are willing to be respondents. The study uses the Oldenburg Burnout Inventory questionnaire, which has been adapted into Indonesian to measure burnout rates in nurses working in adult nursing rooms. The validity and reliability test results on this questionnaire have been performed and obtained Cronbach's alpha values of 0.73, 0.87, 0.83, and 0.79 (3 exhaustion items and 5 disengagement items). This research is also in line with Ethics No. 5211/B.1/KEPK-FKUMS/III/2024.

The analyses used in this study include univariate, bivariate, and multivariate tests.

Univariate analysis is used to find out the characteristics of the respondents to the study. Before performing the double linear regression test, perform normality, linearity, and multicollinearity tests on the research data. Then we performed a linear analysis of double regression to determine the factors that most influence the burnout rate of nurses working in adult ward. The discussion of p-values should clarify the significance level used (e.g., $p < 0.05$) and avoid ambiguous statements like "values less than alpha (5%)." Additionally, the discussion of effect sizes and practical significance of findings would enrich the analysis by providing insights into the magnitude of associations between variables.

RESULTS

Table 1. Description of Demographic Characteristics of Nurse Working In Adult Rooms

Respondent Characteristics	Frequency (n=47)	Presentation (%)
Gender		
Female	41	87.2
Male	6	12.8
Age (Years)		
26 – 35	28	59.6
36 – 45	13	27.7
46 – 55	6	12.8
Marital Status		
Married	38	80.9
Single	8	17.0
Divorce	1	2.1
Working Period		
<5 years	1	2.1
>5 years	46	97.9
Level of Education		
Diploma	42	89.4
Bachelor	1	2.1
Ners	4	8.5
Position of Nurses		
Head of Nursing	3	6.4
Team Leader	10	21.3
Registered Nurse	34	72.3
Level of Nurses		
PK I	1	2.1
PK II	19	40.4
PK III	12	25.5
PK IV	15	31.9
Shift Per Week		
<48 hours	17	36.2
>48 hours	30	63.8

Based on Table 1., the distribution of the characteristics of the respondents by gender was obtained. 87.2% of respondents were female, while the other 12.8% were male. Based on age, the majority of respondents were in the age range of 26–35 years, which is 59.6%, while the minority was in the age range of 46–55 years, which is 12.8%. Based on marital status, 80.9% of the respondents had been married. At work, 97.9% had been working in the hospital for more than 5 years. In terms of final education, the majority of respondents with D3 education were 89.4%. At the level of nurses, 6.4% of the respondents were the head of the room, 21.3% were the chiefs of the team, and the other 72.3% were executive nurses. In terms of clinical nurse level, 2.1% of the respondents were in PK I, 40.4% were in PK II, and 25.5% were in PK III, whereas the other 31.9% were in PK IV. In addition, in the number of shifts per week, 63.8% of the respondents worked more than 46 hours per week, compared to 36.2% of the others.

Table 2. Level of Burnout of Nurses in Adult Rooms

Burnout Level	Frequency (n=47)	Presentation (%)
Low	0	0
Medium	21	44.7
High	26	55.3

Based on table 2. and the results of burnout rates in nurses working in adult nursing rooms, in table 2., it is explained that the majority of respondents had a high burnout rate of 55.3%, while the other 44.7% were at moderate burnout levels.

Table 3. Normality Test

Normality Test	Asymp. Sig. (2-tailed)
One-Sample Kolmogorov-Smirnov Test	0.479

Based on Table 3., it is known that the significance value of Asymp. Sig. (2-tailed) is 0.479. So according to the basis of decision-making in the Kolmogorov-Smirnov normality test above, it can be concluded that the data is distributed normally. Thus, the assumption or normality requirement in the regression model has been met.

Table 4. Linearity Test

Variable	<i>p-value</i>
Burnout Level - Gender	0.146
Burnout Level - Age	0.733
Burnout Level – Marital Status	0.122
Burnout Level – Working Period	0.270
Burnout Level – Level of Education	0.490
Burnout Level – Position of nurse	0.086
Burnout Level – Level of Nurse	0.528
Burnout Level – Shift per Week	0.810

Based on Table 4, the result of the linearity test between dependent variables and independent variables is obtained. On the basis of the above table, for all variables, the deviation value from the linearity sig. (p-value) is greater than 0.05. Then it can be concluded that there is a significant linear relationship between the dependent and the independent variables.

In Table 4, it is also explained that in the variable level of burnout by gender, a deviation from the linearity sig. (p-value) value of 0,146 is greater than 0,05. In the rate burnout variable with age, obtain the deviation of linearity sig. of 0,733 larger than 0.05. In a variable of burnout level with marital status, a deviation by linearization sig. value of 0.490 is greater than 0.05. On the burnout rate variable with working time, obtain a deviation from the linearity sig. (p-value) of 0.270 greater than 0.05.

Table 5. Multicollinearity Test

Variable	VIF	Tolerance
Burnout Level - Gender	1.152	0.868
Burnout Level - Age	3.372	0.297
Burnout Level – Marital Status	1.433	0.698
Burnout Level – Working Period	1.272	0.768
Burnout Level – Level of Education	1.725	0.580
Burnout Level – Position of nurse	2.827	0.354
Burnout Level – Level of Nurse	3.655	0.274
Burnout Level – Shift per Week	1.101	0.908

Based on table 5, results were obtained from multicollinearity tests on burnout rate variables with gender, age, marital status, working time, last education, nursing position level, clinical nurse level, number of patients

treated in one shift, and length of shift per week. If the tolerance value is greater than 0.10, then it can be understood that there are no symptoms of multicollinearity in the regression model.

In table 5, the results of the tolerance values were obtained for all variables greater than 0.10, i.e., the gender variable of 0.868, the age variable of 0.297, the marital status variable of 0,698, the working time variable of 0.0786, the last education variable of 0.580, the nurse's post-variable of 0.354, the clinical nurse level variable of 0.274, and the long shift variable per week (in hours) of 0.908. The above results showed that each variable had a tolerance value greater than 0.10. Whereas for all VIF values, the sex variable was less than 10.0. The result showed that each variable showed a VIF value <10,0. Then, referring to the basis of decision-making in the multicollinearity test, it can be concluded that there is no symptom of multicollinearity in the regression model.

Multiple Linear Regression Analysis Test

Multiple linear regression analysis is used to find out which dimensions have a significant influence on burnout rates in nurses in adult nursing rooms. The variables tested are gender, age, marital status, working time, last education, number of nursing posts, level of clinical nurses, the number of patients treated in a single shift, and length of shift per week. Here's the result of a double linear regression.

Table 6. Analysis of Factors Affecting Burnout Rate in Nurses Working in Adult Nursing Rooms at Hospital

Variable	B	<i>p-value</i>	95% CI
Burnout Level - Gender	0.052	0.461	0.191
Burnout Level - Age	0.046	0.401	0.155
Burnout Level – Marital Status	0.074	0.178	0.181
Burnout Level – Working Period	0.280	0.000	0.321
Burnout Level – Level of Education	0.023	0.646	0.121
Burnout Level – Position of nurse	-	0.481	0.077
Burnout Level – Level of Nurse	0,043	0.346	0.046
Burnout Level – Shift per Week	-	0.001	0.045

In linear regression, two parameters are tested: simultaneous parameters and partial parameters. Simultaneous parameter testing is used to see if there is an overall influence of independent variables on dependent variables. In this study, the simultaneous parameters test is used in order to see whether there is a total influence on variables (gender, age, marital status, length of work, last education, number of nurses, clinical number, and shift length per week (in hours). against the burnout rate in nursing in adult care facilities. How to take the conclusion from the simultany parameter test is that if Sig. < alpha (5%) then there is at least one of eight variables that affect the burn rate in adult health facilities, and if Sig. > alpha(5%) then none of the eight variables affects the burnout rate of nurses in adult hospital facilities.

Based on Table 6, it is found that there are at least 1 out of 8 variables that affect burnout rates in adult care facilities. The working time variable indicates the value of the sign. (p-value) 0,000, and the long variable shift per week (in hours) indicates a sign value. (p-value) 0,001. The value is less than alpha (5%), so it is concluded that both variables affect the burnout rate of nurses in adult nursing facilities. Whereas the other variable, like the gender variable, shows the signal value. The value is higher than the alpha (5%), so it can be understood that the five variables do not affect the burnout rate of nurses in adult nursing rooms.

Table 7. Analysis of Factors Affecting Burnout Rate in Nurses Working in Adult Nursing Rooms at Hospital

Variable	B	p-value	OR
Burnout Level – Working Period	0.317	0.000	0.615
Burnout Level – Shift per Week	0.078	0.000	0.251

After the conclusion from the simultaneous parameter trial that there are two factors affecting the burnout rate of nurses in adult nursing rooms, the next advanced trial is a partial parameter test. The partial parameters test is used to find out which variables affect patient satisfaction. The conclusion from the partial parameter trial is that if Sig. < alpha (5%), then the variable being tested affects the burnout rate of nurses in adult nursing rooms, and if Sig. > alpha (5%), then the tested variable does not affect the burning rate of nurses in adult hospital rooms.

The result of the partially parameterized test is shown in Table 7., which shows that both factors have sig. values less than alpha (5%). The variable that most affects the burnout rate of nurses in adult nursing rooms is working time, because the value of the working time variable has the highest unstandardized B value of 0.317.

DISCUSSION

Length of Service Working Period Factors Affecting Burnout Levels in Nurses in Adult Inpatient Rooms

Based on the results of a multiple linear regression analysis of the working time variable, a sign value (p-value) of 0.000 was obtained, and it can be concluded that the working-time variable can affect the burnout rate of nurses in adult nursing rooms. It can be understood that the working time of a nurse can affect her burnout rate.

In a study Tay et al., (2014), it was also found that nurses who worked longer hours of work and were more experienced had a higher risk of burnout. This is in line with research by Sabarina et al., (2022) explaining that professional experience can also affect the occurrence of burnout. The longer they work, the more stress they will experience in the workplace. Nurses who work long hours are more likely to experience burnout because they have high expectations for their work. Failure to do that will lead to stress and self-insatisfaction, which will eventually cause stress for yourself¹³.

However, this study differs from the results of a study conducted by Tinambunan, et.al. (2018), which concluded that the length of nurses' work has no significant impact on the degree of nurse burnout. To reduce stress, a nurse must feel a sense of happiness and success when working and wanting to succeed. Because they are supported by experience and skill, the pressure on them is smaller than on those who have no experience⁸.

Work period is the period from the first start of work to the beginning of research. Physical stress (workload) at a certain time leads to a decrease in muscle performance, which also manifests itself as a reduction in movement. This condition is not only caused by one cause, such as excessive workload, but also by stress that accumulates every day over a long period of time. In short, work experience is the

length of time an employee works for a company. The longer a person works, the more experience he has and the more he is able to advance the company, both economically and in terms of employee performance ¹⁴.

Work period can cause burnout because the environment can cause boredom and fatigue, which can cause prolonged stress and long-term burnout ¹⁵. Although nurses have gained a lot of professional experience over a long period of time, monotonous and human-serviced nursing patterns can lead to physical, emotional, and mental exhaustion and end in burnout ¹¹. Other opinions suggest that there is a relationship between work period and the level of work stress, i.e., nurses with 1 to 3 years of work experience require longer time to develop their profession in that period, which means they are faced at a higher level because during that time they require a lot of time for career development efforts, so that sometimes their personal and mental needs are neglected. ¹⁶.

The working time period refers to the time an employee spends donating his energy to the company and producing quality work behavior and work skills. The right period of work is the same as for those who have a lot of experience, both difficulties and successes. Secondly, the working time period is the working hours of a person as an employee or employee of a company. The years of work allow the employee to acquire specialized experience, knowledge, and skills ¹⁵. The longer the work period, the more experience a person has in doing his or her job, and the greater the number of hours of work that will have a positive impact on performance. On the contrary, the negative impact occurs when working hours become longer and health problems arise; for example, employees become bored or work becomes monotonous and boring. That means seniority can be one of the triggers for burnout at work ¹⁷.

Shift Length Per Week (in Hours) Factors Influencing Burnout Levels in Nurses in Adult Inpatient Wards

Based on the results of the multiple linear regression analysis of the long variable shift per week (in hours), a sign value was obtained. (p-value) 0,000, then it can be concluded that the long shift variable per week can affect the burnout rate of nurses in adult nursing rooms. .

This is in line with a study conducted by Rewo, et.al, (2020),), which states that there is a relationship between work shift and nurses work stress (p-value: 0.027). Rhamdani, et.al., (2019), also explained that work shifts are related to work stress in nurses (p = 0.035).

Nurses who go through this shift work have an irregular lifestyle compared to those who don't. Nurses who work in the morning shift will be better off because they have had enough rest the night before, and the number of nurses working in the early shift is greater so that the workload is evenly distributed ¹⁹. The schedule of work of the hospital nurse can trigger burnout ²⁰.

According to Rusdi (2014), the chances of occurrence of exhaustion or burnout in the nurse who works in the shift are 1,125 times as many as in the non-shift nurse. The shift of work is not the only factor causing the onset of fatigue, but it is possible that there are other risk factors that cause fatigue, such as working climate, working time, marital status, and physical workload on the accomplishment of hygiene activities and the needs of the patient's hygiene and physical comfort, as well as the mental load on the morning shift, so that nursing who works at the morning shift is more tired than the night shift and afternoon shift.

However, this study is not in line with the study conducted by Ardiyany Ilyas et al., (2020), which mentions that there is no meaningful relationship between work shift and work stress among nurses in RSJD Abepura (p-value: 0.323). Another similar study is the one carried out by Maydinar, (2020), which mentions that there is no meaningful relationship between workshift and job stress (p-value = 0.626).

The effects of that work shift can affect, among other things, the quality of sleep, health, appearance, and organizational outcomes. Work shifts affect the quality and quantity of sleep, family, and social life. When a person feels sleepy, he will easily lose concentration, which can be the cause of an accident at work. A nurse who works in the afternoon or in the evening should keep his rest time properly so as not to affect the nurse's own performance and have free time to undertake healthy activities outside of work hours, such as exercises or walks, to avoid some stress factors ¹⁸.

The causes of work stress can be categorized into three categories: organizational, individual, and environmental.

Organizational characteristics include lack of autonomy, mutation, career, workload, interaction, working hours, and also work shifts, especially night shifts, that can lead to fatigue. Work shift is an option in the organization of work to maximize the productivity of work as the fulfillment of the patient's demands¹⁹.

The impact of shift work on nurses can affect their biological, psychological, and social presence. The depersonalization conditions experienced by nurses associated with the length of working hours make the nurse feel his job is increasingly stressful and frustrating, as the impact is the emergence of negative feelings, cynicism towards work, peers, the circus, and feelings of need to overcome it. Maximum workloads must be achieved if you want high productivity, but if the workload is too low or too high, it can lead to low productivity anyway. Long hours of overworking cause burnout, while too few jobs where work occurs due to repetitive movements can also cause boredom and monotony²².

The results of this study can help nurses identify the signs and risk factors of burnout. With this awareness, nurses can take steps to prevent burnout, such as improving stress management skills, seeking social support, and maintaining a work-life balance. Burnout can hurt the quality of patient care. This research can encourage nurses to prioritize their well-being, which ultimately leads to better patient care.

These findings could also be the basis for developing new policies and procedures in hospitals. These policies could include increased staffing, more flexible schedules, and nurses' welfare programs to reduce workload and stress.

CONCLUSION

Based on the results of the study, it can be concluded that of the eight factors tested, only two factors that most influence the burnout rate of nurses in adult nursing rooms are the working time factor and the length of shift per week (in hours).

In the implementation of this study, there are some limitations, including failure to measure other factors that can affect burnout rates, such as workload, working time, saturation, and social factors such as family support, family problems, and conflicts

between coworkers. These factors are also not excluded because of the limitations of science and resources. Another limitation of this study is that it's only done at one hospital and the study design of this research.

Besides, this research could be the basis for further research on burnout in nurses. Researchers can investigate specific interventions to reduce burnout and improve nurses' well-being. This research focuses on nurses in adult care rooms. Similar research could be done on nurses in other areas of the hospital to get a more complete picture of burnout in the nursing profession.

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