



The Relationship Between Social Support and Work Stress with Burnout in Emergency Installation and Intensive Care Unit

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Article Info

Article history:

Received 20 January 2025

Received in revised form 17

January 2025

Accepted 7 March 2025

Keywords:

Burnout

Work Stress

Social Support

Abstract

The purpose of this study is to investigate the connection between burnout from work stress and social support. The nurses at the ICU and emergency room at Dr. Hasri Ainun Habibie. This study takes a quantitative approach and employs a correlational study design. Total sampling was used to collect the samples. There were 40 responders, 24 of whom were ER nurses and 16 of whom were ICU nurses. This study used the multiple correlation approach. According to the study's findings, there is a significant negative relationship between social support and burnout (correlation coefficient value = -73.1%), a positive and significant relationship between job stress and burnout (correlation coefficient value = 41.4%), and a relationship between social support and job stress with burnout (correlation coefficient value = 46.4%). The ER and ICU nurses at Dr. Hasri Ainun Habibie report a jointly significant association between social support and job stress burnout, as indicated by the coefficient of determination value (R square) of 53.5%.

Introduction

Article 28 H paragraph (1) of the 1945 Constitution states that, "Everyone has the right to live in prosperity physically and mentally, to have a place to live and have a good and healthy living environment and has the right to receive health services". Health is very important for all humans because without it... good health everyone will have difficulty doing daily activities. According to Health Law No. 23 of 1992, health is a state of well-being for the body, soul and social that allows everyone to live productively socially and economically. According to Law No. 23/1992, health consists of four components, namely physical, mental, social and economic (Jainuri, 2015).

One of the health institutions where treatment efforts are carried out is a hospital. Hospitals employ various divisions. with knowledgeable staff who are skilled in managing medical problems to accelerate healing and maintain overall health (Kubde et al., 2023; Alonazi, 2021). Hospitals are social institutions tasked with providing public health services, and they have an obligation to consistently provide high-quality services to all communities. Nurses are one of the things that hospitals need to focus on in order to provide extraordinary services (Pane et al., 2023). Decree of the Republic of Indonesia Number 304/MENKES/PER/III/2010 issued by the Minister of Health states that a hospital is a type of health facility that provides complete inpatient, outpatient and emergency services to individuals. The Emergency Room (IGD) functions as the entrance for all 24-hour services, so it is a crucial component in hospital operations. Emergency unit nurses are susceptible to stress due to the heavy demands of the

environment, which can ultimately lead to *burnout* (Harmen, 2023; Dewanti et al., 2022; Nggosual et al., 2024; Sari & Mustamu, 2023; Ross et al., 2023).

High workload and stress levels do not only occur in the ER, but also in the ICU. According to the Decree of the Minister of Health Number: 1778/MenKes/SK/XII/2010, the ICU is a hospital unit equipped with special personnel and equipment. ICU nurses are expected to have unique skills compared to nurses in other units because their role is to monitor and care for patients who are unhealthy, injured, or in danger of death (Risa Mariana et al., 2020; Olorunfemi et al., 2024; Rhéaume et al., 2022).

ICU and ED nurses face particular difficulties in their work, which often affect their physical and emotional health (Eldin et al., 2021; Al-Ghabeesh et al., 2023). High levels of *burnout* are one of the problems that occur in the work environment for nurses. *Burnout* is characterized by emotional exhaustion, depersonalization (feelings of alienation from oneself) and decreased personal accomplishment. It has become a major issue in health services and human resource management (Permatasari et al., 2023). Psychological disorders called *burnout* often occur in those who work in a vocational field, such as nurses at the Regional General Hospital (RSUD). According to Freudenberg (1991), *burnout* is the result of working too hard without paying attention to one's own needs (Alam, 2022). *Burnout* is defined by Kim & Sekol (2014) as physical, emotional and mental exhaustion caused by long-term involvement in situations that are full of emotional demands (Firdaus et al., 2021; Drăghici & Cazan, 2022).

As social beings, humans need togetherness with other humans to interact. Social support in the workplace is very helpful in creating a positive work environment. According to Sarafino & Smith (2014) social support can be interpreted as comfort, concern, appreciation, and assistance available from one person to another person or group. Social support comes from many sources, namely partners, family, friends, and community organizations (Susilaningrum & Wijono, 2023). From this interaction, individuals become aware that other people care about, appreciate, and love them (Pasaribu, 2019;). Social support also plays a role in reducing stress levels. Any form of social support is beneficial and significant. The informational and emotional aspects of social support can often have a positive impact on nurses who are experiencing stress. This can increase feelings of friendship and understanding between people while reducing feelings of hopelessness and low self-esteem. Social support from the environment will enable nurses to survive difficult times and be able to deal with existing pressures (Jembarwati, 2020; Baharum et al., 2023; Yan et al., 2022; Abdulmohdi, 2024).

In this context, one of the main risk factors *for burnout* in nurses is work stress. According to Ariyanti (2022) Work stress is a dynamic condition in which individuals face opportunities, constraints, or demands, which are related to what they really want and the results are perceived as uncertain but important. Nurses may experience physical and emotional exhaustion as a result of persistent and chronic work stress, which can prolong their exhaustion and reduce their motivation to do their jobs well (Putri, 2019; Kohonen et al., 2023; Dobešová et al., 2024). Excessive work stress can worsen emotional exhaustion, increase job dissatisfaction and reduce satisfaction in completing tasks given. This will cause nurses to treat patients less humanely and less empathetically, which can reduce their personality and eventually lead to *burnout* (Sulastri & Onsardi, 2020).

One way that can create more effective intervention techniques in reducing *burnout levels* and improving the mental and physical well-being of nurses in RSUD is by understanding the complex relationship between social support, work stress and *burnout*. Effective steps to overcome *burnout problems* include improving organizational factors that impact work stress, offering training on stress management techniques and expanding social support in the workplace (Asih et al., 2018). Based on information obtained from interviews conducted by researchers on IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital, it is possible for IGD

and ICU nurses at Dr. Hasri Ainun Habibie Hospital to experience *burnout*. The routines they carry out during patient care do not always run smoothly. There are several problems that occur when providing services to patients, such as patients who do not want to tell when asked about their complaints about the illness they are suffering, nurses experiencing fatigue due to overflowing patients and the highest risk is failing to save the patient's life. Several of the above can trigger stress for nurses.

The Emergency Room and ICU nurses at Dr. Hasri Ainun Habibie Hospital realize the importance of the role of social support from their environment to minimize *burnout* among nurses. This is indicated by the provision of *support* among nurses, strengthening each other, providing motivation that raises the spirit when nurses are experiencing stress. Based on the data collected, it was found that there were several nurses who *resigned* or moved because they were less able to adjust to the pressures in the hospital, so this is an important concern for us to implement stress management and strengthen social support from the environment so that nurses can minimize burnout that occurs in providing services in the hospital. Based on the description above, the researcher is interested in conducting a study entitled "The Relationship between Social Support and Work Stress with *Burnout* in Emergency Room and ICU Nurses at Dr. Hasri Ainun Habibie Hospital".

Methods

Researchers applied a quantitative method using correlations to examine links between nurse social support and their work stress and burnout levels in areas with intense hospital care. The study conducted its experiments at Dr. Hasri Ainun Habibie Regional Hospital with its focus on Emergency Room (ER) and Intensive Care Unit (ICU) nursing staff since these units represent high-demand clinical areas due to rapid medical responses and critical patient treatments. The demanding conditions encountered in medical emergency departments were excellent for examining burnout symptoms and their possible origins.

The research examined every single nurse working between both the ER and ICU departments at the time of data collection. The research used total sampling to invite all nurses whose qualifications matched the set criteria from the specified population domain. The study methodology selected all members of the research population thus minimizing sampling biases and improving its internal validity. The research used a total of 40 nurses who divided into 24 ER staff members and 16 ICU staff members. The decision to include every participant from this small specialized population minimized any potential weaknesses to finding representativeness.

A self-administered questionnaire approach was used to collect data while nursing supervisors coordinated its distribution to healthcare providers during their work shift. Standardized psychometric tools comprised the questionnaires built on theoretical models that matched each variable studied for the research. The survey instrument used the Maslach Burnout Inventory to measure burnout because it views burnout as having three distinct dimensions: emotional exhaustion, depersonalization, and personal accomplishment reduction. Various assessment items directly measured nursing staff psychological responses to work-related fatigue and emotional resilience through identification of the established dimensions.

The questionnaire designed to measure social support followed the structure outlined by Sarafino & Smith (2014) which examines support aspects both from social sources and their quality dimensions. The nurses receive support from both their colleagues along with supervisors but also through family members and from their organizational surroundings. Workplace challenges are influenced by four critical components including emotional encouragement, practical assistance, appreciation and perceived empathy and these elements are measured by the research instruments. The scale measuring work stress integrated theories by Robbins and Judge to include four stress types: workload pressure, time constraints, role

ambiguity and organizational requirements. The survey questions assessed both work-related events inside the organization and aspects outside the organization regarding job strain so each participant's experience could be thoroughly understood.

The questionnaire scales featured four-point Likert scales that allowed respondents to indicate their agreement or disagreement through the defined response options. The specific response scale format was chosen to ensure understanding and make interpretation easier while minimizing the occurrence of unreliable neutral responses that may introduce inaccuracies in quantitative measurements. Studies conducted before the distribution phase checked that the tools possessed content validity while maintaining clear language and appropriate connection with the local hospital environment. A two-week data collection period allowed participants to respond effectively to survey questions even though their professional commitments remained high.

The research team processed the gathered responses through SPSS version 26 for Windows after completion of data collection procedures. The analysts executed assumption tests prior to inferential analysis to verify the suitability of correlational procedures for the available data. The normality test verified the distribution of main variables including burnout and social support and work stress because the significance values exceeded 0.05. The study included tests for linearity to verify the linear nature of relationships between independent variables and the dependent variable. Linear relationships were confirmed through the regression models regarding their established use. The regression analysis needed independent variable multicollinearity testing to verify no variables were too strongly correlated with others because this could harm analysis reliability. The tolerance and VIF indicators demonstrated that multicollinearity did not affect this model since values remained above 0.1 and below 10.

A multiple correlation analysis provided the main assessment of independent variable relationships with dependent variables between social support and work stress and burnout. The separate effects of each independent variable on burnout were assessed through partial correlation tests where other variables were accounted for in the analysis. A multiple regression analysis was conducted simultaneously to assess how social support and work stress aspects jointly affect burnout levels in nurses. Using both partial and multiple correlation provided better insights regarding how the studied variables affect the outcome when examined singularly or collectively with one another.

Result and Discussion

Analysis Univariate

Table 1. Categorization Support Social

| Category | Frequency | Percentage |
|--------------|-----------|-------------|
| Low | 2 | 5% |
| Currently | 36 | 90% |
| Tall | 2 | 5% |
| Total | 40 | 100% |

Source: Results SPSS 2024 Processing

Based on table on can seen that the number of respondents was 40 people so that obtained respondents who have Social support in the low category was 2 respondents (5%), in the medium category was 36 respondents (90%) and in the high category was 2 respondents (5%).

Table 2. Categorization Stres Work

| Category | Frequency | Percentage |
|----------|-----------|------------|
| Low | 3 | 7.5% |

| | | |
|--------------|-----------|-------------|
| Currently | 33 | 82.5% |
| Tall | 4 | 10% |
| Total | 40 | 100% |

Source: Results SPSS 2024 Processing

Based on the table above, it can be seen that the number of respondents was 40 people so that obtained Respondents who have low category of work stress are 3 respondents (7.5%), medium category is 33 respondents (82.5%) and high category is 4 respondents (10%).

Table 3. Categorization *Burnout*

| Category | Frequency | Percentage |
|--------------|-----------|-------------|
| Low | 2 | 5% |
| Currently | 36 | 87.5% |
| Tall | 3 | 7.5% |
| Total | 40 | 100% |

Source: Results SPSS 2024 Processing

Based on the table above, it can be seen that the number of respondents was 40 people so that It was obtained that respondents who had low category Work Stress were 3 respondents (7.5%), medium category were 33 respondents (82.5%) and high category were 4 respondents (10%).

Bivariate Analysis

Table 4. Results Normality Test

| Research Variables | Sig. Value |
|--------------------|------------|
| Social Support | 0.879 |
| Job Stress | 0.583 |
| <i>Burnout</i> | 0.266 |

Source: Results SPSS 2024 Processing

Based on the results of data analysis in the table above, the Sig. value is obtained > 0.05 on the variables of Social Support, Work Stress and *Burnout*, namely 0.876 on the Social Support variable, 0.583 on the Work Stress variable and 0.266 on the *Burnout* variable. This shows that the results of the analysis meet the normality test rules.

Table 5. Results Test Linearity

| Variables | <i>Deviation From Linearity</i> | Note |
|-----------|---------------------------------|---------------|
| X1 - Y | 0.560 | <i>Linear</i> |
| X2 - Y | 0.408 | <i>Linear</i> |

Source: Results SPSS 2024 Processing

Based on the output results of the table above, it can be concluded that there is a significant value between the relationship between social support and *burnout* of 0.560, where $0.560 > 0.05$. There is a significant value between the relationship between work stress and *burnout* of 0.408 where $0.408 > 0.05$. All of these results are said to be significant, so it can be concluded that the relationship between each *independent variable* and the *dependent variable* is *linear*.

Table 6. Results Test Multicollinearity

| Variables | Tolerance | VIF | Note |
|-----------|-----------|-------|-----------------------|
| X1 | 0, 704 | 1,420 | Non Multiko linearity |
| (X2) | 0.704 | 1,420 | Non Multiko linearity |

Source: Results SPSS 2024 Processing

Based on the output results of the table above, it can be concluded that the *tolerance value* of the social support variable and the work stress variable is $0.704 > 0.10$, while the VIF value of the social support variable and the work stress variable is $1.420 < 10$, so it can be concluded that there is no multicollinearity symptom in the regression model.

Hypothesis Testing

Table 7. Results Test Coefficient Correlation (partial)

| Variables | r Count | Sig. Value |
|-----------|---------|------------|
| X1 – Y | - 0.731 | 0,000 |
| X2 - Y | 0.414 | 0.008 |

Source: Results SPSS 2024 Processing

Based on the results of the table above, it is known that the Sig. value between Social Support (X1) and *Burnout* (Y1) is $0.000 < 0.05$, if seen from the calculated r value for the relationship between the social support and *burnout variables*, the value obtained is -0.731 or equal to -73.1% . So it can be concluded that there is a negative and significant relationship between the social support variable and the *burnout variable*.

Furthermore, from the table above, it is known that the Sig. value between Work Stress (X2) and *Burnout* (Y1) is $0.008 < 0.05$, if seen from the calculated r value for the relationship between work stress and *burnout variables*, the value obtained is 0.414 or equal to 41.4% . So it can be concluded that there is a positive and significant relationship between work stress variables and *burnout variables*.

Table 8. Results Test Correlation Multiple (Simultaneous)

| R Square Change | Sig. F. Change |
|-----------------|----------------|
| ,535 | ,000 |

Source: Results SPSS 2024 Processing

The output table above shows the Sig. Sig. F *Change value* in the multiple correlation test is 0.000 . Because the Sig. value of $0.000 < 0.05$, it can be concluded that social support and work stress simultaneously (together) correlate with *burnout* or which means significant.

Table 9. Results Test Coefficient Determination

| <i>Model Summary</i> | | | |
|----------------------|-------------------|----------|-------------------|
| Model | R | R Square | Adjusted R Square |
| 1 | ,731 ^a | ,535 | ,509 |

Source: Results SPSS 2024 Processing

Based on the output table above, it is known that the coefficient of determination value at the R value is 0.731 which indicates that there is a strong correlation between the variables of social support and work stress with *burnout*. While the R *Square value* on the coefficient of determination to see how much influence between variables (X1-X2) to variable (Y) with a value of 0.535 or equal to 53.5% which means that the variables of social support and work stress have a simultaneous effect (together) on *burnout* with a contribution of 53.5% which is the multiplication of 0.535 by 100% . While the remaining 46.5% is influenced by other variables that are not studied.

Relationship between Support Social with *Burnout*

The hypothesis tested was whether there was a relationship between social support and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital. The correlation coefficient value was obtained as $-0.731 > 0.312$ and the Sig. value was $0.000 < 0.05$. Therefore, the hypothesis

(H0₁) namely "there is no relationship between social support and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" is rejected. While the hypothesis (Ha₁) namely "There is a relationship between social support and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" is accepted. This shows that the higher the social support, the lower the level of *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital, conversely, the lower the social support, the higher the level of *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital.

The categorization results show that most of the IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital have a moderate social support category of 36 respondents with a percentage of 90%. In the high category there are 2 respondents with a percentage of 5% and in the low category there are 2 respondents with a percentage of 5%. This shows that the level of social support for IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital is in the moderate category. This means that sometimes individuals still get social support from others, but sometimes there are also some people who do not get social support from family, coworkers and superiors, this depends on the quality of their relationships with others, personality and social skills they have, the situation they face, as well as cultural norms and availability of resources around them. Social support is also influenced by the individual's perception of the assistance received, where some people may feel sufficiently supported, while others feel otherwise even though they have received assistance.

According to Kanner (2004), social support is directly related to *burnout*, the higher the social support, the lower the level of *burnout* (Aljunianti, 2022).

This is in line with research conducted by Pasaribu (2019) on nurses at Dr. Pirngadi Hospital, Medan City, showing that there is a significant negative relationship between social support and *burnout* in nurses, which shows that the higher the social support obtained, the lower the *burnout*. Conversely, the lower the social support obtained, the higher the *burnout*. Also supported by other research conducted by Adawiyah & Bikololong (2019) which shows that there is a significant negative relationship between social support and *burnout* in hospital employees in Tangerang.

Thus, the findings obtained from previous studies can be assumed that the provision of social support to nurses can affect the level of *burnout*. So social support is one of the important factors for nurses in helping to overcome *burnout* that occurs when carrying out activities in patient care in hospitals.

The Relationship between Stress Work with *Burnout*

Furthermore, hypothesis testing was conducted to examine the relationship between work stress and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital. The correlation coefficient value was obtained at $0.414 > 0.312$ and the Sig. value was $0.008 < 0.05$. Therefore, the hypothesis (H0₂) namely "there is no relationship between work stress and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" was rejected. While the hypothesis (Ha₂) namely "There is a relationship between work stress and *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" was accepted. This shows that the higher the work stress, the higher the level of *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital, conversely, the lower the work stress, the lower the level of *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital.

The categorization results show that most of the IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital have a moderate job stress category of 33 respondents with a percentage of 82.5%. In the high category there are 4 respondents with a percentage of 10% and in the low category there are 3 respondents with a percentage of 7.5%. This shows that the level of work stress in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital is in the moderate category. This means that individuals with moderate levels of work stress often experience more physical

and mental fatigue than usual, although they can still function in daily activities. This fatigue can be seen from decreased energy which can cause decreased productivity and enthusiasm for work. However, they are still able to complete the tasks given, although it may require more effort to focus and concentrate. Work stress in this moderate category can also cause problems from a psychological and physical perspective (Aprilia et al., 2019).

According to Dyannda (2019), *burnout* is potential in nurses who experience work stress due to the feeling of pressure experienced by nurses. This work stress is one example of unmanaged human resources in a company (Fatma Priyantika, 2018).

This is in line with research conducted by Lekahena (2015) on nurses at Dr. M. Haulussy Hospital, Ambon City, showing that there is a significant positive relationship between work stress and burnout. This means that high work stress in nurses will also be followed by high *burnout*. *Conversely, if the nurse's work stress is low, it will also be followed by low burnout.* In addition, research conducted by Parashakti & Ekhsan (2022) stated that work stress has a significant positive effect on *burnout*.

Thus, the findings obtained from previous studies can be assumed that the emergence of work stress in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital can affect the level of *burnout*. Work stress experienced by nurses is one of the factors that affect the level of *burnout*. If work stress is not handled properly, this will increase the level of *burnout for nurses*.

Relationship between Support Social and Stress Work with *Burnout*

Previously, the results of the categorization of *burnout levels* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital found that 35 respondents were in the moderate category with a percentage of 87.5%. In the high category, there were 3 respondents with a percentage of 7.5% and in the low category, there were 2 respondents with a percentage of 5%. This shows that the level of *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital is in the moderate category. In this moderate category, nurses usually begin to feel prolonged fatigue, both physically and emotionally. Although they are still able to carry out daily tasks, this feeling of constant fatigue will make it difficult for them to feel refreshed, even after resting. They may feel a lack of energy and are often lethargic which can affect their ability to carry out tasks that require physical endurance (Indiawati et al., 2022).

At this stage, hypothesis testing was conducted to test the relationship simultaneously between social support and work stress with *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital. The results of the *change statistics analysis* showed that social support (X1) and work stress (X2) simultaneously (together) correlated with *burnout* (Y) with a significance value (Sig.) of $0.000 < 0.05$ and an R value of 0.731 indicating that there was a strong correlation. Therefore, the hypothesis (H_0) "There is no significant relationship simultaneously between social support and work stress with *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" is rejected. While the hypothesis (H_a) "There is a significant relationship simultaneously between social support and work stress with *burnout* in IGD and ICU nurses at Dr. Hasri Ainun Habibie Hospital" is accepted.

R Square value (coefficient of determination) is 0.535 which indicates that 53.5% of the variation in *burnout* can be explained by social support and work stress. The remaining 46.5% is influenced by other factors not examined in this study.

With the results of the study above, the researcher assumes that the combination of high social support and good stress management will play a significant role in reducing *burnout levels*. Thus, the results of these findings provide a better understanding of how social support and work stress contribute to *burnout levels* in nurses. In combination, these two factors can create a more emotionally balanced environment, thereby reducing the risk of fatigue or *burnout* in the long term.

Conclusion

The research investigated the connection between social support and work stress and their association with burnout in Dr. Hasri Ainun Habibie Regional Hospital nurses who work in the Emergency Room and Intensive Care Unit. The results from the analysis confirm that social support and work stress independently have meaningful connections to the burnout levels of nurses in these demanding departments. Research outcomes show social support levels have a negative influence on burnout measurement while indicating that stronger networks of support from various sources help nurses experience decreased burnout symptoms. Workplace support plays an essential role by decreasing emotional exhaustion along with depersonalization and personal achievement reduction in nurses. Nurses who receive emotional backing and practical help from their surroundings will better handle their professional mental requirements enabling them to reduce burnout symptoms.

The research demonstrates positive work stress-burnout correlation which shows job-related stress levels rise directly with burnout intensity. Nurses working under conditions with ongoing pressure along with high workloads and emotional stress and role complexity experience heightened levels of mental and emotional exhaustion. The research findings confirm established studies which demonstrate the damaging effects of work stress on mental health performance among healthcare workers in critical medical departments such as emergency rooms and intensive care units. The combined analysis of social support and work stress factors through multiple correlation demonstrated their joint and meaningful impact on burnout resulting in a 53.5% explanatory power for burnout levels in study participating nurses. Each contributing factor affects burnout independently but their total influence exceeds individual effects which should not be disregarded. The study reveals burnout develops from multiple origins since it affects both personal mental states and external social circumstances.

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