

Burnout due to Workload: Qualitative Study of Finance Unit Employees at XYZ Hospital Semarang

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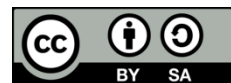
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ABSTRACT

Hospitals, as critical and high-intensity work environments, often place significant pressure on employees. High workloads, such as long working hours, huge responsibilities, and tight time demands, can be the main factors that cause burnout. The purpose of this study is to determine the level of burnout in the financial unit at XYZ Hospital, determine the determinant factors, and find effective strategies to cope with and prevent the negative impact of burnout. This study uses a qualitative approach as a research model. The research subjects/informants in the research were groups that focused on employees in the financial unit. There were four subjects with female staff. The technique used in data collection is interviews. Data analysis uses several stages, including data reduction and conclusion. The study results show that most employees experience high levels of burnout. A high level of emotional exhaustion indicates that employees feel drained of energy and cannot deal effectively with work pressure. High depersonalization indicates a cold attitude towards colleagues and clients. In addition, low self-esteem suggests a lack of satisfaction and a sense of accomplishment at work.

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1. INTRODUCTION

Burnout is a condition characterized by prolonged and intense suffering, leading to emotional, physical, and mental exhaustion, accompanied by diminished self-esteem [1]. Burnout is an enduring reaction connected to persistent workplace stressors, culminating in the interaction between the individual and the job demands. Occupational burnout is a psychological condition comprising three dimensions, namely: 1) Emotional exhaustion is at the heart of burnout syndrome, marked by the depletion of one's emotional reservoirs, including love, empathy, and attention. This depletion, in turn, gives rise to feelings of inadequacy. 2) Depersonalization involves adopting a dismissive or hostile attitude towards others, diminishing their value or importance. 3) Low self-esteem or low personal activation manifests through a propensity to evaluate oneself, particularly in work-related aspects, negatively. [2].

Burnout is a developmental process where an employee will experience frustration and emotional changes, which indirectly result in interpersonal conflict when facing work stress and then protect himself with emotional decline [3]. Burnout is additionally described as physical, emotional, and psychological exhaustion, manifested through prolonged physical fatigue, helplessness and ineffectiveness, and negative perceptions and attitudes towards work, life, or others [4].

Research on employee burnout in hospitals has a background that is important to understand. As critical and high-intensity work environments, hospitals often place significant pressure on employees [5]. High workload, such as long working hours, enormous responsibilities, and tight time demands, can be an essential factor causing burnout [6].

Workload essentially refers to an excessive amount of work stemming from demands that surpass human limits. This involves individuals managing a substantial volume of tasks within a specific timeframe or working for extended periods, leading to a mental or physical condition that hampers their ability to handle the load [7]. The workload is characterized by the burden of tasks in the work environment surpassing individual capabilities, leading to the emergence of threats and eliciting responses such as nervousness, anxiety, frustration, pressure, or annoyance [8]. This response can alter an individual's physical and mental state, influencing their well-being and behavior.

Workload emanates from role overload, especially in a dynamic and competitive environment. Personal responsibilities extend beyond

singular tasks to encompass multiple duties. The risk of excessive workload contributes to diminished employee morale, work delays, a less conducive team atmosphere, and non-compliance with regulations, thereby adversely impacting the organization [9]. National performance and triple power employee cents. The impact of workload on the correlation between input and output in work highlights its qualitative nature. Employees perceive their abilities as insufficient to accomplish the tasks, categorizing it as a qualitative workload. Additionally, quantitative workload is recognized when there is an excessive volume of tasks, further emphasizing the dual aspects of workload influencing work dynamics [10]. Various subjective workload assessment techniques were frequently employed in this research.

Apart from workload, intense interactions with other employees who are facing severe health conditions or even death can also increase the risk of burnout in hospital employees [11]. Constant emotional challenges and difficulty dealing with difficult situations can hurt employees' mental and physical well-being. Additionally, organizational factors such as lack of resources, including insufficient staff, inadequate equipment, and irregular work schedules, may also contribute to high levels of burnout among hospital employees [12]. By understanding this background, research on employee burnout in hospitals can provide valuable insights for identifying factors that influence burnout and developing effective strategies for preventing and managing burnout in the workplace. Likewise, the financial unit at the hospital.

The finance unit has complex and crucial demands in supporting the financial health of an organization. The safety and continuity of an organization's operations depend on the financial unit's ability to maintain accuracy and compliance with applicable accounting standards and financial regulations [13] [14]. The finance unit is responsible for budget management, ensuring efficient allocation of funds, and providing in-depth understanding through financial analysis. The finance unit is also vital in identifying and managing financial risks and developing strategies to overcome potential risks [15]. Openness and transparency in financial reporting are essential aspects. At the same time, human resource development in the finance unit is needed to ensure the continuity of skills and knowledge in facing changes in the financial environment [16]. Hence, the success and sustainability of an organization heavily rely on the financial unit's capacity to fulfill diverse and existing demands.

Based on this, it has its challenges, obstacles, and difficulties. This is often a factor that causes employees to feel very tired, so that work

cannot be done quickly and takes a lot of time. As a result, employees can experience stress. Currently, the term stress is no longer foreign to the general public. Job stress can be defined as a situation in which work-related factors interact with an individual's internal factors, changing physiological and psychological conditions to force a person to break from their normal functioning [17].

Based on recent research, job stress can be very unhealthy for employees and organizations because of its consequences. Work stress and burnout are examples of the consequences of work environmental factors [18]. Stress that triggers accelerated disease and work fatigue reflects the accumulation of stress caused by working conditions. Indeed, there exists a direct correlation between a hostile workplace environment and mental or psychological health, ultimately culminating in burnout [19].

Burnout has three dimensions: increasing feelings of tiredness, cynicism, disengagement from work, and inefficiency. A key aspect of burnout is increasing feelings of exhaustion [20]. This feeling of tiredness refers to feelings of overload and appears when a person's physical and emotional resources are depleted. What commonly happens is that employees who experience burnout disengage on an emotional and cognitive level to deal with excessive workload [21] [2]. This is by this research, where employees feel a high workload, and distancing themselves from work by developing a cynical attitude is the first reaction to burnout [2].

Apart from the symptoms experienced by employees, burnout also has consequences at work, because it negatively impacts job quality and satisfaction and disrupts social and family relationships. Coworkers are also affected, as the quality of relationships tends to decline and productivity may be lower, resulting in more workload [22].

Burnout is also perceived as a reaction to emotional and interpersonal stress within one's job. Put simply, it is a response to an overwhelming workload [2]. Workload can be defined as a phenomenon arising when numerous demands deplete an individual's energy to a degree where recovering from fatigue appears unachievable. It may stem from a mismatch between the employee and the job requirements and a deficiency in skills or attitudes needed for a specific type of work. The workload can also manifest when the volume of work is deemed reasonable [2]. Workload is one of the most critical risk factors for organizational burnout [23].

This research aims to determine burnout in dealing with workload among financial unit employees at XYZ Hospital Semarang so that they

can find out what factors are behind it and find effective strategies to overcome this problem.

2. METHOD

This research uses a qualitative approach as a research model. Qualitative research methods seek a thorough understanding of a subject by exploring the perspectives of the individuals under study. This approach delves into the ideas, perceptions, opinions, or beliefs of the research subjects, which are aspects that cannot be quantified numerically [24]. The objective is to construct a comprehensive depiction using words, detailing the informant's perspectives and organizing them within a natural context [25].

The research subjects/informants were a group that focused on employees in the finance unit. There were four subjects, female. The technique used in data collection is interviews. A structured interview is a form of interview that employs a predetermined list of questions [26]. Structured interviews are designed to enable researchers to pose identical questions in a predetermined order to all respondents. This approach aims to elicit consistent responses, facilitating easier data processing by minimizing variations in interpretation. Structured interviews are akin to questionnaires in design, although the questions are not written but are verbally posed by an interviewer who records the respondent's answers. Researchers conduct structured interviews when they have clear and detailed information and a predetermined list of questions to ask respondents [27].

The data analysis process encompasses various stages, including data reduction. This stage focuses on selecting, simplifying, abstracting, and transforming the raw data derived from field notes. This process extends throughout the research, even preceding the actual data collection, as evident in the conceptual framework of the research, the study problem, and the chosen data collection approach. Data reduction comprises several steps, including: (1) summarizing the data, (2) coding, (3) exploring themes, and (4) creating clusters. The way to do this is by strictly selecting the data, making a summary or brief description, and grouping it into more general patterns.

Data presentation is the act of structuring information in a way that facilitates drawing conclusions and making informed decisions. In qualitative research, data presentation may be narrative text, such as field notes, matrices, graphs, networks, and charts. These formats amalgamate information in a structured and easily understandable manner,

facilitating a clearer understanding of events, assessment of the accuracy of conclusions, and the possibility of re-analysis.

Qualitative researchers strive to conclude while in the field. From the onset of data collection, researchers actively seek to discern the meaning behind observed objects or phenomena. This involves noting regular patterns (informed by theoretical notes), exploring explanations, identifying potential configurations, discerning cause-effect relationships, and formulating propositions. These conclusions are explained in a flexible, open-ended, and skeptical manner, but they are given. At first, they are unclear, but then become more detailed and powerfully proven. These conclusions were also re-examined throughout the research, through: (1) reflection while writing, (2) review of field notes, (3) discussion and consultation with fellow researchers to reach mutual agreement, and (4) extensive efforts to relate findings with other data.

3. RESULTS AND DISCUSSION

The study's findings revealed a noteworthy degree of burnout among employees in the finance department of hospitals. Burnout, characterized as a state of stress resulting from heightened work pressure, was the focal point of this research, aimed at assessing the extent of burnout experienced by the employees.

In this research, the participants included four employees from the financial department of XYZ Hospital. Data was collected using the interview data collection method. The research results show that most employees experience high levels of burnout. High levels of emotional exhaustion indicate that employees feel drained of energy and unable to deal with work pressure effectively. High depersonalization indicates a cold attitude towards coworkers and clients. In addition, low self-esteem suggests a lack of satisfaction and a sense of accomplishment in work.

This aligns with the outcomes of interviews regarding physical fatigue, precisely:

"Physically, it's not that great, but it's very mental; if it's physical, it might be more of a headache, especially if the units are asking for goods quickly and the work is piling up" - informant 1.

"If it's physical, there's the problem, because if you think about it, it's also channeled to the physical, like aches and pains, headaches are also frequent, sis, but yes, it's more mental that's more frequent." - informant 2.

"Have you ever had something like that? How come the work hasn't been finished yet, and it's just piling up?" - informant 4.

The impact of high burnout on employees can include reduced productivity, increased absenteeism, and decreased work quality. This can also adversely affect the overall well-being of employees, encompassing both physical and mental aspects.

"There are times when we are tired, sis, because the burden is too heavy at our workplace, but we still have to think about our progress tomorrow. But it's still like waking up, and you already have a plan for what you will do today, because if we don't, who will do it?" -informant 1.

From this statement, it can be seen that the informant felt tired because of the heavy burden. One of the employee's motivations for overcoming fatigue was the sense of responsibility he carried and had to do. This corresponds with the findings from a study conducted by Liana (2020), which indicated that nurses reported experiencing mild levels of burnout. The study suggested that nurses, being more responsible and resilient in their work, tended to derive satisfaction and happiness from their close interactions with patients [28]. Even so, some nurses feel tired after work. This is normal, so most nurses only experience mild burnout. This was followed by Informant 1's statement about his hard work.

"That's almost every day, but at the moment it's rare, Sis "How come people still say that, especially women who are still in their period like us?" -informant 1.

It turns out that it was found that one of the factors that influence burnout or stress and feeling tired at work is gender, especially the period when women experience menstruation and a decline in mood. This is what was stated. Maslach found that men who experienced burnout tended to experience depersonalization, while women who experienced burnout tended to experience emotional exhaustion [2]. In line with what other informants conveyed.

"But how about that? It's part of your responsibilities, sis, so keep doing it. "There are times when we are in a good mood, there are also times when we are exhausted," -informant 2.

"I've done that, sis, but it won't be finished if you don't do it. Moreover, our mood fluctuates, sis, and I still have to lift my mood first. Usually, I snack first because communication will be difficult if I'm not in a good mood" - informant 4.

The impact of high burnout on employees can include reduced productivity, increased absenteeism, and decreased work quality. This can also exert a detrimental influence on the overall well-being of employees, encompassing both physical and mental aspects.

It can be seen that the factors that cause burnout in the financial unit are:

1. Piling up tasks

The research results show that piling up tasks is one factor contributing to high levels of burnout in companies. Too many tasks or busy schedules can cause employees to feel stressed and struggle to cope with excessive workloads. This can affect the balance between work and personal life and increase the risk of burnout.

2. Mood changes

Mood changes are also an important indicator of burnout levels. Employees who experience burnout tend to experience significant mood changes, such as constantly becoming more irritable, easily frustrated, or sad. Unstable mood changes can affect interactions with coworkers, work quality, and satisfaction with work.

3. Errors in work

A high level of burnout is related to errors in work. Employees who experience burnout tend to have decreased concentration and make mistakes when carrying out work tasks. These errors can impact the quality of work and increase the risk of conflict or tension in the workplace.

Based on the results of this research, XYZ Hospital needs to take appropriate action to overcome the burnout problem. Several steps can be taken, including increasing employee emotional and social support, reducing excessive workload, and increasing recognition and appreciation for employee performance. By taking these steps, it is hoped that the burnout level in the finance unit can be reduced, so that employees can work more effectively and feel more satisfied with their work. The research implies that reducing burnout syndrome that occurs in nurses can be done by providing support to colleagues and creating a comfortable work environment with a family atmosphere [6].

4. CONCLUSION

Burnout can be explained as a psychological syndrome that includes exhaustion, cynicism, and inefficiency in the workplace [2]. This stress experience is unique to the individual, compounded by the complexity of social relationships in the work environment. The research results show a significant level of burnout in the company. Burnout is a state of stress caused by excessive work pressure. This research aimed to assess the degree of burnout experienced by employees within the company.

In this research, the participants included four employees from the finance unit at XYZ Hospital. Data was collected using the interview data collection method. The research results show that most employees

experience burnout levels that are on the way to high. High levels of emotional exhaustion indicate that employees feel drained of energy and unable to deal with work pressure effectively. High depersonalization indicates a cold attitude towards coworkers and clients. In addition, low self-esteem suggests a lack of satisfaction and a sense of accomplishment in work.

The impact of high burnout on employees can include reduced productivity, increased absenteeism, and decreased work quality. This can also adversely affect the overall well-being of employees, impacting them both physically and mentally. It turns out that it was found that one of the factors that influence burnout and feeling tired at work is gender, especially the period when women experience menstruation and a decline in mood. This is what was conveyed by Maslach, who found that men who experienced burnout tended to experience depersonalization. In contrast, women who experienced burnout tended to experience emotional exhaustion [2]. In line with what other informants conveyed.

Fatigue and stress at work or burnout are severe and should not be ignored, because they can impact work productivity and quality of life. In overcoming this burnout, hospitals need to pay attention to factors that can cause tasks to pile up, such as conducting workload analysis (which has been done) and ensuring sufficient resource allocation to complete these tasks. Furthermore, it is crucial to prioritize the overall well-being of employees, encompassing stress management, the cultivation of time management skills, and ensuring sufficient social support within the work environment. By taking these steps, it is hoped that burnout levels can be reduced, employees can work more efficiently, and work quality can improve.

There are several ways you can overcome fatigue at work or burnout, namely:

1. Adjust the tasks and workload to the initial contract and adjust the work and responsibilities stipulated in the initial work contract between the Hospital and the financial unit.
2. Set clear boundaries, determining parameters that direct the level and type of work that the finance unit can carry out. This involves identifying the extent of job duties and responsibilities, the time required, and the scope of work.
3. Create an environment full of positive energy, forming a work atmosphere dominated by a positive spirit, togetherness, and motivation in the hospital organization.

4. Organize appropriate training courses. Hospitals should note that planning, designing, and implementing such courses should be based on the results of job requirements.

REFERENCES

- [1] F. S. Dias and A. P. Angélico, "Burnout syndrome in bank employees: a literature review," *Trends in Psychology*, vol. 26, pp. 15–30, 2018.
- [2] C. Maslach and M. P. Leiter, *Burnout e organizzazione. Modificare i fattori strutturali della demotivazione al lavoro*, vol. 36. Edizioni Erickson, 2000.
- [3] S. Muhammad Ali, S. Andi Zulkifli, I. F. Nurqamar, and M. SE, *Manajemen burnout konsep dan implementasi*. Unhas Press, 2021.
- [4] L. M. I. Wardani and W. N. Amalia, *Psychological Capital, Job Insecurity, dan Burnout*. Penerbit NEM, 2021.
- [5] M. G. Saputra, N. V. Rahmawati, A. Kusdiana, and M. F. Al Mabruri, "Hubungan Peran Ganda Dan Stres Kerja Dengan Kinerja Perawat Wanita Di Pelayanan Rumah Sakit," *Journal Of Health Care*, vol. 1, no. 2, 2020.
- [6] O. C. Indriawati, H. Syaâ, D. S. Rachmawati, and A. S. Suhardiningsih, "Analisis Faktor yang Mempengaruhi Kejadian Burnout Syndrome Perawat di RS Darmo Surabaya," *Jurnal Keperawatan dan Kesehatan Masyarakat Cendekia Utama*, vol. 11, no. 1, pp. 25–41, 2022.
- [7] M. I. Morrill, D. A. Hines, S. Mahmood, and J. V. Cordova, "Pathways between marriage and parenting for wives and husbands: The role of co-parenting," *Family Process*, vol. 49, no. 1, pp. 59–73, 2010.
- [8] K. Primaturi, "PENGARUH OVERTIME DAN WORKLOAD TERHADAP TURNOVER INTENTION DENGAN JOB STRESS SEBAGAI VARIABEL MEDIASI (Studi Empiris pada Karyawan UD Perkasa Raya Temanggung)," 2022.
- [9] M. Z. O. Coluci and N. M. C. Alexandre, "Job factors related to musculoskeletal symptoms among nursing personnel—a review," *Work*, vol. 41, no. Supplement 1, pp. 2516–2520, 2012.
- [10] Y. Xiaoming, B.-J. Ma, C. L. Chang, and C.-J. Shieh, "Effects of workload on burnout and turnover intention of medical staff: A study," *Studies on ethno-medicine*, vol. 8, no. 3, pp. 229–237, 2014.
- [11] M. A. Firmansyah and S. Lazuardi, "Pengaruh Burnout dan Komitmen Afektif Terhadap Turnover Intention Karyawan Rumah Sakit YK Madira Palembang," *Jurnal EMT KITA*, vol. 7, no. 4, pp. 1400–1410, 2023.
- [12] N. H. Sugeha, "Hubungan Antara Kesejahteraan Psikologis Dengan Work Engagement Pada Karyawan Rumah Sakit Umum Daerah Bolaang Mongondow Utara," 2023.
- [13] D. R. Pessak, D. P. Saerang, and H. Gamaliel, "ANALISIS KINERJA KEUANGAN BERDASARKAN METODE DOUBLE DISTRIBUTION DAN ACTIVITY BASED COSTING DI RSUP. PROF. DR. RD KANDOU MANADO (STUDI KASUS DI INSTALASI CARDIO VASCULAR DAN BRAIN CENTER)," *JURNAL RISET AKUNTANSI DAN AUDITING "GOODWILL"*, vol. 14, no. 1, pp. 130–141, 2023.
- [14] E. SUTAMI, "DETERMINAN KINERJA KEUANGAN BADAN LAYANAN UMUM DENGAN REALISASI BELANJA MODAL SEBAGAI VARIABEL MODERATOR (Studi pada Rumah Sakit dan Balai Besar Kesehatan Badan Layanan Umum Tahun 2018–2021)," 2023.

- [15] M. F. Mulani and D. A. Hafni, "Analisis Sistem Informasi Akuntansi Penerimaan Kas Pada Pelayanan Rawat Inap Di Rumah Sakit X," *Jurnal Akuntansi dan Ekonomika*, vol. 13, no. 1, pp. 19–28, 2023.
- [16] M. Yunus *et al.*, *Hospitality Hospital Management*. Syiah Kuala University Press, 2023.
- [17] I. Adelia, M. Mutmainnah, and S. Mulyani, "Hubungan Antara Beban Kerja dengan Tingkat Stress Kerja pada Perawat Wanita di Rumah Sakit Dr. Bratanata Kota Jambi," *Jurnal Ners*, vol. 7, no. 2, pp. 1534–1542, 2023.
- [18] R. M. B. SUNARYO, "HUBUNGAN STRES KERJA DAN KEPUASAN KERJA DENGAN KINERJA PARAMEDIS DI RUMAH SAKIT UMUM BANDUNG KOTA MEDAN TAHUN 2022," 2023.
- [19] A. Wokas, N. S. Dewi, and A. Sriatmi, "Hubungan Burnout dan Resiliensi Perawat: Scoping Review," *Jurnal Keperawatan*, vol. 16, no. 1, pp. 119–132, 2024.
- [20] A. Iswati, "PERAN WORKLACE SPIRITUALITY DALAM MENURUNKAN TINGKAT BURNOUT TERHADAP TURNOVER INTENTION," 2023.
- [21] G. Y. Asih, H. Widhiastuti, and R. Dewi, "Stres kerja," *Syria Studies*, 2018.
- [22] M. Borritz, R. Rugulies, J. B. Bjorner, E. Villadsen, O. A. Mikkelsen, and T. S. Kristensen, "Burnout among employees in human service work: design and baseline findings of the PUMA study," *Scandinavian journal of public health*, vol. 34, no. 1, pp. 49–58, 2006.
- [23] G. Astar and D. Erwandi, "FAKTOR-FAKTOR RISIKO KELELAHAN KERJA: TINJAUAN LITERATUR SISTEMATIK," *Jurnal Kesehatan Tambusai*, vol. 4, no. 4, pp. 6375–6386, 2023.
- [24] S. Sarosa, *Analisis data penelitian kualitatif*. Pt Kanisius, 2021.
- [25] M. N. Adlini, A. H. Dinda, S. Yulinda, O. Chotimah, and S. J. Merliyana, "Metode penelitian kualitatif studi pustaka," *Edumaspul: Jurnal Pendidikan*, vol. 6, no. 1, pp. 974–980, 2022.
- [26] M. A. Thalib, "Pelatihan Teknik Pengumpulan Data dalam Metode Kualitatif untuk Riset Akuntansi Budaya," *Seandanan: Jurnal Pengabdian Pada Masyarakat*, vol. 2, no. 1, pp. 44–50, 2022.
- [27] R. Agustianti *et al.*, *Metode Penelitian Kuantitatif Dan Kualitatif*. Tohar Media, 2022.
- [28] Y. Liana, "Analisis faktor yang berhubungan dengan burnout (kejenuhan kerja) pada perawat," presented at the Proceeding Seminar Nasional Keperawatan, 2020, pp. 108–115.