

The Effect of Workload, Work Environment, Individual Factors and Work Motivation on Work Stress of Health Workers at Pratama Nurjaya Clinic

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ABSTRACT

The purpose of this study is to determine the influence of workload, work environment, individual factors and work motivation on work stress of health workers. The research population was 33 health workers. The sampling technique used is to include all health workers at the Pratama Nurjaya Clinic, namely by census. This type of research is quantitative research. The statistical instrument used was multiple regression analysis using validity, reliability and classical assumption tests. Based on the results of the study, it was found that there was an influence between workload ($p = 0.022$), work environment ($p = 0.007$) and work motivation ($p = 0.030$) on the work stress of health workers partially and it was found that there was no influence of individual factors ($p = 0.343$) on work stress. The most dominant factor affecting work stress is the work environment.

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1. INTRODUCTION

Work stress in health workers is a significant global issue. *The American Nurse Association* reports that 82% of nurses in hospitals in America experience work stress. Research from *the National Institute of Occupational Safety and Health (NIOSH)* also shows that jobs in the health sector are prone to stress and depression. *The American National Association for Occupational Health (ANAHO)* even placed the problem of nurses' work stress in the top position of 40 cases among workers. In Indonesia, as many as 83% of health workers experienced *burnout syndrome* during the Covid-19 pandemic (FK UI, 2020). CDC data (2022) shows that 46% of health workers often feel burned out, up from 32% in 2018, and 44% plan to look for a new job, up from 33% in 2018. Triggering factors include violence from patients or families, lack of rest, and high patient spikes.

The increase in the use of BPJS Kesehatan services also has an impact on the workload of health workers. BPJS Kesehatan data shows that the number of health service utilization in 2022 was 502.8 million visits, increasing to 606.7 million visits in 2023. A similar condition was experienced at the

Pratama Nurjaya Clinic, Badung Regency, which experienced a significant increase in the number of patients. This clinic was established in 1983 as a maternity home, then developed into an inpatient primary clinic, until it changed its status to Nurjaya Primary Clinic. The increase in the number of patient visits at these facilities creates an imbalance between the number of health workers and patients, which is suspected to trigger work stress.

The number of patient visits at the Pratama Nurjaya Clinic continues to increase every year, but the increase has not been offset by the availability of adequate health workers. This condition indicates the potential for work stress due to disproportionate loads. The WHO sets a standard that each doctor ideally serves 1,000 residents, which is a benchmark for the limited number of medical personnel in health facilities.

Factors that cause work stress can be seen from indicators of workload, leader attitude, work time, conflict, and communication (Hasibuan). Research by Solon et al. (2021) and Badri (2020) shows that high workload has a significant effect on nurses' work stress. Jundillah et al. (2024) added that stress is triggered by a high workload and a lack of support for the work environment. However, Carima (2022) found differences in outcomes, where workload does not always have a significant effect on stress due to nurses who continue to enjoy their work despite the high workload. This shows the role of other factors, including motivation and working environment conditions.

Work environment, individual factors, and motivation also affect work stress. Rahayu & Hasanah (2023) said that the work environment includes physical and social conditions that affect the comfort and well-being of health workers. Azzafira & Masthura (2022) emphasize that age, gender, working time, and education are related to the onset of stress. Meanwhile, Yahya (2022) shows that high work motivation can reduce stress levels. At Pratama Nurjaya Clinic, the use of electronic medical records, technological demands, and a surge in patient visits affect individual factors and the motivation of health workers. This phenomenon is interesting to further research on the influence of workload, work environment, individual factors, and motivation on work stress in the clinic.

2. METHODS

This study aims to determine the influence of workload, work environment, individual factors, and work motivation on the work stress of health workers, so it includes *explanatory research* that focuses on the causal relationship between variables. The research population is all health workers of the Pratama Nurjaya Clinic which totals 33 people, and because the number is below 100, the census method is used, namely all members of the population are made respondents.

The data collection technique consists of primary data and secondary data. Primary data according to Darwin (2021) is data obtained directly from the research subject, while secondary data comes from relevant documents or records. Primary data were collected through interviews and questionnaires. Interviews were conducted openly and unstructured at the initial stage, as well as in a structured and closed manner using questionnaires at the data collection stage. According to Sugiyono (2022), an interview is a meeting of two people to exchange information, while a questionnaire is an instrument in the form of written questions measured on the Likert scale.

Classical assumption tests are performed to ensure that regression models are feasible to use. Multicollinearity was tested through *tolerance* values and *variance inflation factor* (VIF), heteroscedasticity was tested through scatterplot analysis, and normality was tested through normal probability plot graphs (Ghozali, 2021). The hypothesis test uses the F test to look at the simultaneous influence of independent variables on the dependents, as well as the t test to test the partial influence. The analysis was followed by multiple regression to estimate the relationship between variables, and

the determination coefficient (R^2) test was used to determine how much contribution independent variables contribute in explaining the dependent variables.

3. FINDINGS AND DISCUSSION

Result

Classic Assumption Test

Normality Test

The normality test is a method used to analyze the distribution of data in a research group. If the significance value is more than 5% (>0.05), then the data is considered to be normally distributed. Conversely, if the significance value is less than 5% (<0.05), the data is declared not to be normally distributed. If the data distribution is normal, then the research can be continued to the hypothesis test stage.

In this study, the normality test was carried out using the Kolmogorov Smirnov test through SPSS. The results shown in table IV.7 show that the variables studied, namely competence, motivation, and performance, have a value of 0.200, which is greater than 0.05. Thus, it can be concluded that the data in this study is normally distributed.

Table 1. Results of the Kolmogorov Smirnov Normality Test

One-Sample Kolmogorov-Smirnov Test		
		Unstandardized Residual
N		33
Normal Parameters ^{a,b}	Mean	,0000000
	Std. Deviation	5,49730170
Most Extreme Differences	Absolute	,102
	Positive	,102
	Negative	-,100
Test Statistic		,102
Asymp. Sig. (2-tailed)		,200 ^{c,d}
a. Test distribution is Normal.		
b. Calculated from data.		
c. Lilliefors Significance Correction.		
d. This is a lower bound of the true significance.		

Multicollinearity Test

The multicollinearity test aims to measure the extent of interaction between independent variables in this study. In addition, this test is also important to prevent errors in drawing conclusions about the influence of variables. If there is a significant correlation, this indicates the existence of a multicollinearity problem. To detect the presence of multicollinearity, we can check the tolerance and VIF values. If the tolerance value is more than 0.1 and the VIF value is less than 10, then it can be concluded that there is no problem of multicollinearity. The following are the results of the multicollinearity test which shows that the data of this study did not detect symptoms of multicollinearity.

Table 2. Multicollinearity Test Results

	Collinearity Statistics	
	Tolerance	VIF
(Constant)		
Beban Kerja	0,94	1,064
Lingkungan Kerja	0,877	1,14
Faktor Individual	0,951	1,052
Motivasi Kerja	0,798	1,254
Dependent Variabel: ABS_RES		

It was found that the tolerance value of more than 0.1 for the variables Workload, work environment, individual factors and work motivation, and the VIF value for each independent variable was below 10. Thus, it can be concluded that there is no multicollinearity in the independent variables in this study.

Heteroscedasticity Test

The heteroscedasticity test aims to identify whether there is a violation of the classical assumption of heteroscedasticity, which is characterized by differences in residual variance across observations in the regression model. This test is performed using the Glejser method, where each independent variable is regressed against the absolute residual as a dependent variable. If the significance value is less than 5% ($\text{sig} < 0.05$), then it can be concluded that there is heteroscedasticity. Conversely, if the significance value is more than 5% ($\text{sig} > 0.05$), then there is no heteroscedasticity.

Table 3. Heteroscedasticity Test Results

	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
	B	Std. Error			
(Constant)	4,424	4,819		0,918	0,366
Beban Kerja	0,005	0,103	0,010	0,052	0,959
Lingkungan Kerja	0,035	0,091	0,077	0,382	0,705
Faktor Individual	-0,097	0,289	-0,065	-0,336	0,739
Motivasi Kerja	-0,011	0,042	-0,055	-0,262	0,795
Dependent Variable: ABS_RES					

Based on the table above, it can be seen that the significance value for each independent variable (workload, work environment, individual factors and work motivation) is greater than 0.05. This shows that the data or statements submitted to the respondents in this study did not experience heteroscedasticity, so that the research could proceed to the hypothesis test stage.

Multiple Linear Regression Analysis

Multiple linear regression test is a statistical analysis technique that aims to identify the influence of several independent variables (X) on one dependent variable (Y). This method is used to analyze functional relationships as well as to make predictions based on the variables that have been observed.

Table 4. Multiple Linear Regression Results

Model		Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
		B	Std. Error			
1	(Constant)	6,111	9,588		0,637	0,529
	Beban Kerja	0,498	0,206	0,358	2,419	0,022
	Lingkungan Kerja	0,523	0,181	0,443	2,894	0,007
	Faktor Individual	-0,554	0,574	-0,142	-0,964	0,343
	Motivasi Kerja	0,193	0,084	0,367	2,288	0,030
a. Dependent Variable: Stres Kerja						

Based on the results in the table, the following multiple linear regression test equations are obtained:

$$Y = 6.111 + 0.498X_1 + 0.523X_2 - 0.554X_3 + 0.193X_4$$

Information:

1. Constant Value (6.111): When all independent variables are at zero, work stress is estimated to reach 6.111.
2. Workload (0.498): Each increase in workload by 1 unit will lead to an increase in work stress of 0.498 units, which is proven to be significant with a p-value of $0.022 < 0.05$.
3. Work Environment (0.523): Any increase in work environment by 1 unit will contribute to an increase in work stress by 0.523 units, with a p-value of $0.007 < 0.05$ indicating significance.
4. Individual Factor (-0.554): Each increase in individual factor by 1 unit will reduce work stress by 0.554 units, but not significantly with a p-value of $0.343 > 0.05$.
5. Work Motivation (0.193): Every 1 unit increase in work motivation will increase work stress by 0.193 units, which is significant with a p-value of $0.030 < 0.05$.

Hypothesis Test

T test

The t-test is used to evaluate the impact of one independent variable on the dependent variable. In the decision-making process on the t-test, the main focus is on significance values. If the significance value is less than 0.05, this indicates that the X (independent) variable has an effect on the Y (dependent) variable. Conversely, if the significance value is more than 0.05, then it can be concluded that there is no significant effect.

Table 5. Test Results t

Model		Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
		B	Std. Error			
1	(Constant)	6,111	9,588		0,637	0,529
	Beban Kerja	0,498	0,206	0,358	2,419	0,022
	Lingkungan Kerja	0,523	0,181	0,443	2,894	0,007
	Faktor Individual	-0,554	0,574	-0,142	-0,964	0,343
	Motivasi Kerja	0,193	0,084	0,367	2,288	0,030
a. Dependent Variable: Stres Kerja						

Based on regression analysis conducted to evaluate the impact of competency and motivation variables on performance, the following findings were obtained:

1. Workload showed a significant influence on Work stress, with a significance value of 0.022 (<0.05) and a t-value of 2.419, which exceeded the table t-value of 2.042.
2. The work environment also had a significant effect on work stress, with a significance value of 0.007 (<0.05) and a t-value of 2.894, which is higher than the table's t-value of 2.042.
3. Individual factors in this study had no significant effect on work stress, with a significance value of 0.343 (>0.05) and a t-value of 0.964, which is lower than the table t-value of 2.042.
4. Work motivation also had a significant effect on work stress, with a significance value of 0.030 (<0.05) and a t-value of 2.288, which is higher than the table's t-value of 2.042.

Test F

The F test aims to determine whether there is an influence of two or more independent variables on the dependent variable.

Table 6. F Test Results

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	711,677	4	177,919	5,151	,003 ^b
	Residual	967,050	28	34,538		
	Total	1678,727	32			
a. Dependent Variable: Stres Kerja						
b. Predictors: (Constant), Motivasi Kerja, Faktor Individual, Beban Kerja, Lingkungan Kerja						

Based on the analysis of the F test conducted on independent variables (workload, work environment, individual factors, and motivation) against dependent variables (work stress), an F value of 5.151 was obtained. This value exceeds the value of the table F which is 3.32. From these results, it can be concluded that the four independent variables simultaneously have a significant influence on the dependent variable, namely work stress, with a significance level of 0.003.

Coefficient of Determination

The influence of independent variables on dependent variables can be measured through the correlation value (R). From the results of the analysis, we can calculate the determination coefficient (R Square), which shows the percentage of the influence of independent variables on dependent variables.

Table 7. Determination Coefficient Results

Model Summary ^b				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,651 ^a	0,424	0,342	5,877
a. Predictors: (Constant), Work Motivation, Individual Factors, Workload, Work Environment				
b. Dependent Variable: Work Stress				

The results of the determination coefficient analysis (R Square) showed that independent variables, namely workload, work environment, individual factors, and work motivation, had a

significant influence on the bound variable, namely work stress. With an R Square value of 0.424, this shows that these four factors collectively contribute 42.4 percent to the level of work stress among health workers at the Pratama Nurjaya Clinic.

Discussion

The Effect of Workload on Work Stress of Health Workers at Pratama Nurjaya Clinic

Based on the results of the regression analysis, the variable regression coefficient of workload was recorded at 0.498. Each increase in workload by 1 unit will increase work stress by 0.498 units. The significance value obtained ($p = 0.022$) was less than 0.05, so this effect was declared significant. The workload had a significant positive effect of 49.8% on the work stress of health workers at the Pratama Nurjaya Clinic. This condition shows that the heavier the workload felt by health workers, the higher the level of stress experienced. Factors that encourage stress include a busy work schedule, a high number of patients that are not proportional to the available medical personnel, and a large responsibility in maintaining the quality of health services.

These findings are consistent with the research of Sholekhah & Sabardini (2025), which also found a positive and significant influence of workload on work stress. Work stress is a major challenge for health workers in various service facilities, which arises due to high work demands, a less supportive work environment, and individual factors such as motivation and endurance. Handayani (2022) emphasized that excessive workload is often the main trigger for increased stress among medical personnel, especially in places with a high number of patients but limited health workers.

The results of this study show that high workload has a real impact on increased stress, both physically and mentally. The imbalance between job demands and individual capacities can reduce the mental health of health workers. Strategies to reduce these impacts can be carried out through more balanced work schedules or shifts (Hendrawati et al., 2025), as well as structured stress management training (Muzakky et al., 2024). These measures have the potential to improve the ability of health workers to deal with work pressure while maintaining the quality of services provided to patients.

The Influence of the Work Environment on Work Stress of Health Workers at Pratama Nurjaya Clinic

The results of the regression analysis showed that the work environment variable had a regression coefficient of 0.523. This means that every unit increase in the work environment will increase work stress by 0.523 units. The significance value ($p = 0.007$) was less than 0.05 so that the influence of the work environment on work stress was declared significant. The work environment had a significant positive effect of 52.3% on the work stress of health workers at the Pratama Nurjaya Clinic. This condition can be seen from the noise of the highway, uncomfortable physical facilities, and unharmonious working relationships between colleagues and superiors, which trigger increased work stress. These results are in line with the research of V. N. Sari et al. (2022) who found that the work environment has a significant effect on employee work stress.

The work environment has a big role in influencing the psychological well-being of health workers. Unsupportive working conditions have the potential to cause mental and physical health problems. An ideal working environment is created when a collaborative atmosphere is established, adequate work facilities are available, and safety and comfort aspects are considered comprehensively. Firjatullah et al. (2023) emphasized that social support, job security, and good physical condition can help maintain productivity while reducing stress levels among the workforce.

Inadequate facilities, limited medical equipment, and poor social interaction in the workplace are factors that exacerbate stress in health workers. This study proves that the work environment plays a significant role in influencing stress levels, especially when the conditions created actually cause

discomfort and reduce concentration. An uncondusive work environment can increase the risk of mental fatigue, which ultimately impacts the quality of health services.

The Influence of Individual Factors on the Work Stress of Health Workers at Pratama Nurjaya Clinic

The results of the regression analysis showed that individual factors had a regression coefficient of -0.554. In theory, an increase in individual factors can reduce the level of work stress, but the results of the significance test show a value of $p = 0.343$ greater than 0.05, so the effect is not significant. This indicates that individual factors do not play a direct role in influencing work stress compared to external factors such as workload and working environment conditions. This means that individual variables such as age, gender, and length of work do not have a real contribution in explaining the stress level of health workers at the Pratama Nurjaya Clinic.

Individual characteristics such as age, work experience, and gender can provide a diverse picture of the potential for stress. Young health workers often face higher stress due to lack of experience dealing with work pressure, while experienced workers tend to be better able to adjust while still facing the risk of physical fatigue (Sampouw et al., 2024). In terms of gender, female health workers often experience emotional stress due to the intensity of interaction with patients and families, while male health workers are more burdened by the physical demands of work. Length of work is also an influential factor in the adaptation process, where health workers with long working periods have better skills in managing stress, but still have the potential to experience burnout. On the other hand, those who are new to work face high stress due to the adaptation process that is not yet optimal (Sampouw et al., 2024).

This study confirms that individual factors do not have a significant effect on work stress at Pratama Nurjaya Clinic. Stress is more influenced by external factors such as a heavy workload and unsupportive work environment conditions. Even so, stress management at the individual level is still necessary so that health workers are able to maintain mental and physical balance. Efforts that can be made include stress management training, coping skills improvement, as well as mental health programs that focus on individual resilience. This strategy can help healthcare workers reduce the impact of daily work stress, although individual factors have not been proven to be the main cause of work stress based on the results of statistical analysis.

The Effect of Work Motivation on Work Stress of Health Workers Knilik Pratama Nurjaya

The results of the regression analysis showed that the work motivation variable had a regression coefficient of 0.193. Each increase in work motivation by 1 unit contributes to an increase in work stress by 0.193 units. The significance value ($p = 0.030$) was less than 0.05, so the effect of work motivation on work stress was declared significant. Work motivation had a significant positive effect of 19.3% on the work stress of health workers at the Pratama Nurjaya Clinic. This condition suggests that highly motivated healthcare workers tend to be more emotionally involved in their work and work harder, which can lead to burnout and increased stress.

Work motivation is one of the elements that can affect stress levels among health workers. Highly motivated health workers usually have better mental resilience and are able to face job challenges with a positive attitude. However, high emotional engagement due to great work motivation can also increase the risk of physical and emotional burnout. Healthcare workers who work harder because of high motivation may face greater pressure, even though they have passion and commitment to their duties.

These findings show the need for a balance between motivation and stress management for healthcare workers to stay productive without experiencing excessive stress. Strategies that can be implemented include providing awards, incentives, or welfare programs that support the mental and

physical health of health workers. These measures allow healthcare workers to stay motivated, maintain morale, and reduce the risk of stress due to emotional involvement and high workloads.

The Influence of Workload, Work Environment, Individual Factors and Work Motivation on Work Stress of Health Workers at Pratama Nurjaya Clinic

In this study, it was found that there was a simultaneous meaningful influence between workload, work environment, individual factors and work motivation in the face of work stress of health workers at the Pratama Nurjaya Clinic with an F value of 5.151. This value exceeds the F value of the table which is 3.32, this means that the four independent variables simultaneously have a significant influence on the dependent variable, namely work stress, with a significance level of 0.003. Meanwhile, the results of the regression analysis obtained an R Square value of 0.424, this shows that these four factors collectively contribute 42.4 percent to the level of work stress among health workers at the Pratama Nurjaya Clinic.

Among these factors, workload and environmental conditions are the main causes of increased stress, while individual factors have a smaller impact. These results emphasize the importance of a holistic approach in managing work stress. Pratama Nurjaya Clinic needs to balance the workload of health workers, create a more comfortable working environment, and provide psychological and motivational support. With the right strategy, it is hoped that health workers can work more efficiently without experiencing excessive stress, so that the quality of service to patients is maintained well. (Maghfirah, 2023)

4. CONCLUSION

In conclusion, workload, work environment, and work motivation had a significant positive effect on the work stress of health workers at Pratama Nurjaya Clinic, while individual factors did not have a significant effect. Heavy workloads, unfavorable environmental conditions, and high emotional involvement due to excessive work motivation are the main triggers for increased work stress, while individual factors have only a small impact. Overall, the combination of these four variables contributes to stress levels, with workload and environmental conditions as dominant factors, so a comprehensive stress management strategy is needed in health facilities.

Suggestions that can be given for Klinik Pratama Nurjaya include reviewing the division of tasks and work schedules through a rotating system or hiring additional personnel, improving the quality of physical facilities and work comfort, and monitoring the motivation of health workers to remain balanced through reward policies and arrangement of rest time. Clinics also need to develop stress management programs that involve the collaboration of all staff to build a healthy work culture. In the academic field, further research is recommended to expand the objects in various health facilities, using a mixed methods approach, including moderator variables, and deepening studies on specific factors that have not yet been revealed to enrich understanding of the relationship between variables that cause work stress in health workers.

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