

# The Influence of Work load, Self-Efficacy and Work Ethic on Burnout and Work-Life Balance And Performance of Hospital Nurses In Surabaya

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## Abstract

Hospital management highlights the importance of studying the performance of medical personnel, including doctors, nurses, and other healthcare workers, as well as non-medical staff such as administrative personnel and operational human resource employees. This research aims to analyze the effects of workload, self-efficacy, and work ethic on burnout and work-life balance, and how these factors impact nurses' performance. The study was conducted at an hospital located in Surabaya. It employed a quantitative approach by distributing questionnaires using a saturated sampling technique to 135 respondents, consisting of both medical and non-medical employees working at the hospital. The data analysis technique used to test the hypotheses was structural equation modeling (SEM) with the AMOS program. The results revealed that workload and self-efficacy each have a significant negative impact on burnout. Workload significantly negatively affects work-life balance, while self-efficacy significantly positively affects work-life balance. Both self-efficacy and work-life balance significantly positively impact nurses' performance, whereas workload significantly negatively impacts nurses' performance. Work ethic negatively but insignificantly influences burnout and does not significantly positively affect work-life balance or nurses' performance. Additionally, burnout negatively but insignificantly impacts work-life balance.

**Keywords:** Work Ethic, Workload, Self-Efficacy, Work-Life Balance, Burnout, Nurses' Performance.

## Introduction

A hospital is a place where services are provided regarding the treatment and healing of diseases experienced by some people. Services provided by hospitals include outpatient, inpatient, emergency and medical services. Quality services are required and absolutely given so that later the quality of service and satisfaction to patients is obtained so that the creation of public health benefits. Health services organized by health facilities are shown individually must be good and plenary, the meaning of plenary is an accreditation from the minister of health given to hospitals based on an assessment of the quality of services namely Promotive, Preventive, Quantitative and Rehabilitative). Plenary health services must be supported and supported by human resources, facilities and infrastructure. Without it, it is impossible to implement.

Typical hospital management makes research into medical management consisting of doctors, nurses and other health workers. . Organizations such as hospitals are unique and different from other organizations in general. Hospitals have specificities that are born from the relationship between medical and non-medical groups. Therefore, it makes hospitals have high complexity. The demand for activities with high interaction makes hospital management not easy. Medical personnel are one part that cannot be separated from the organization, especially nurses as the main guard of health services. In order for companies such as hospitals to continue to progress and achieve their goals, it is necessary to develop nurse performance such as creating a conducive work environment, providing training and motivation. Improving the quality of services, health, a hospital must have employees who are productive, innovative, creative and always excited and loyal. One that meets such criteria will only be owned through the application of appropriate human resource management concepts and techniques with a supportive work environment in human resource management. Many factors affect employee performance including individual variables, psychological variables and organizational variables. The variables that need to be highlighted are individual variables which include abilities and skills, both physical and mental

### **III. Theoretical Foundation**

#### **A. Human Resource Management (HRM)**

Human resource management deals with all aspects of how people work and are managed in organizations, including human resource planning, performance management, learning and human resource development. according to Armstrong (2021). besides that, human resource management, abbreviated as HRM, is a science or a way of how to regulate the relationship and role of resources (labor) owned by individuals efficiently and effectively and can be used optimally so as to achieve goals (goals) with the company, employees and society to the maximum.

#### **B. Work Load**

Workload is a set or number of activities that must be completed by an organizational unit or position holder or responsibility within a certain period of time (Sunarso, 2010). Workload is one of the aspects that must be considered by every company, in Permendagri no.12/2008 regarding workload is the amount of work that must be carried by an organizational position/unit and is the product of the volume of work and time norms. If the worker's ability is higher than the demands of the job, there will be a feeling of boredom. On the other hand, if the worker's ability is lower than the demands of the job, there will be more fatigue.

#### **C. Self Efficacy**

Bandura (2001) argues that self-efficacy is a person's belief in their ability to organize and carry out a series of actions needed to complete a particular task. Self-efficacy is the result of the interaction between the external environment, self-adjustment mechanisms and personal abilities, experience and education. Self-efficacy plays a major role in the regulatory process through individual motivation and achievement of set work. Considerations in self-efficacy also determine how effort people make in carrying out their tasks and how long it takes to complete the task. Furthermore, it is stated that people with strong self-efficacy considerations are able to use their best efforts to overcome obstacles, while people with weak self-efficacy tend to reduce their efforts or run away from existing obstacles.

#### **D. Work Ethic**

Work ethic is a word that etymologically means disposition or character and belief in something. This attitude is not only owned by individuals, but also by groups and even communities. Ethos is shaped by various habits, cultural influences and the value system it believes in. According to Tasmara (2002), work ethic is the foundation of true and authentic success. Work ethic is influenced by the research he has done on sociological studies since the time of Max Weber in the early 20th century as well as the writing he has done on management in the last twenty years (Sinamo, 2011). All of these studies reached the main conclusion that human behavior, especially their behavior at work, determines success in various areas of life. Some people refer to these work behaviors as motivation, habits, and work culture.

#### **E. Burnout**

Burnout is a syndrome of emotional exhaustion, depersonalization, and decreased personal achievement that can occur in people who do some "people-work".

According to Maslach et al. (2001) it is a highly compromising state that occurs in the workplace and can affect a person's life. It is a response to prolonged emotional strain dealing with other people, especially when they face problems or difficulties. As a result, burnout can be considered a type of occupational stress. Although it has the same negative effects as other stress responses, burnout stems from the social interaction between the giver and receiver. Burnout has a prolonged effect on a person's life. One's physical and mental health will be severely compromised, and it can even lead to illness or depression

#### **F. Work-life Balance**

Balance in work time with time outside of work is important to do so that workers do not feel bored with the daily routine and help employees stay healthy and productive. according to M. R. Frone et al (1992) states that the few conflicts that arise as a result of carrying out various roles and benefiting from these roles indicate work-life balance fulfillment of satisfaction in every aspect of life.

## G. Performance

Every employee in the organization is required to make a positive contribution through good performance, considering that the performance of the organization depends on the performance of its employees (Gibson et al., 2012). Robbins & Judge (2008) define performance as a result achieved by employees in their work according to certain criteria that apply to a job. Therefore, it can be concluded that performance is the result of work both in quality and quantity that employees have achieved, in carrying out their duties in accordance with the responsibilities given by the organization, and the results of their work are adjusted to the work expected by the organization, through criteria or employee performance standards that apply in the organization

## IV. Conceptual Framework

Based on the problem formulation from the literature that has been described, a conceptual framework is prepared that describes the influence between variables in this study as follows

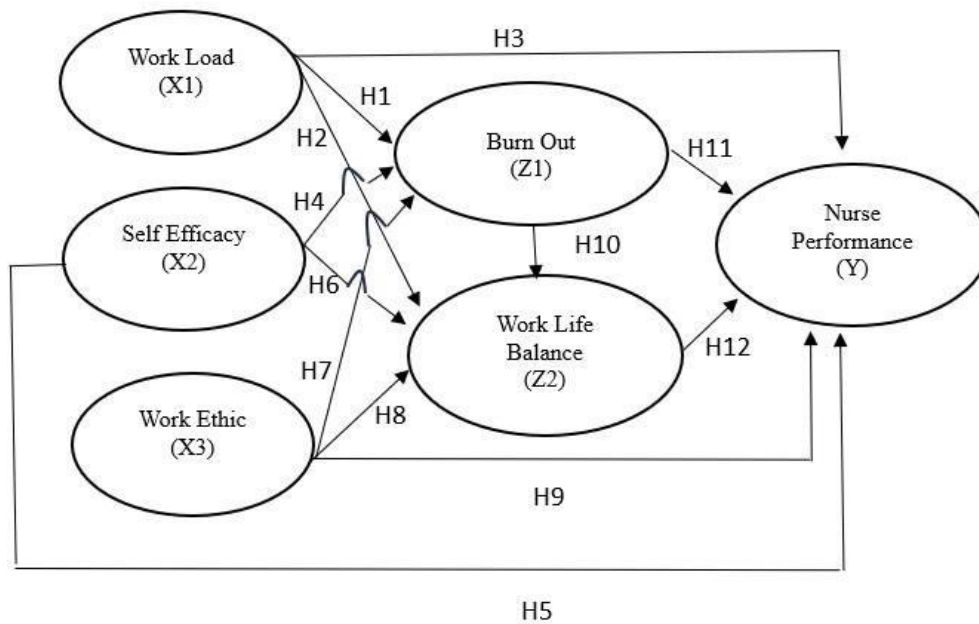


Figure 1. Conceptual Framework

Regarding the research context, problem formulation, literature review, and conceptual framework, then hypothesis that can be formed is as follows:

- H1: Workload Has A Significant Positive Effect On Burnout  
H2: Workload Has A Significant Effect On Work-Life Balance  
H3: Workload Has A Significant Effect On Nurse Performance  
H4: Self-Efficacy Has A Significant Effect On Burnout  
H5: Self-Efficacy Has A Significant Effect On Work-Life Balance  
H6: Self-Efficacy Has A Significant Effect On Performance  
H7: Work Ethic Has A Significant Effect On Burnout  
H8: Work Ethic Has A Significant Effect On Work-Life Balance  
H9: Work Ethic Has A Significant Effect On Performance  
H10: Burnout Has A Significant Effect On Work-Life Balance  
H11: Burnout Has A Significant Effect On Nurse Performance  
H12: Work-Life Balance Has A Positive Effect On Nurse Performance

## V. Research Methods

### A. Data Types and Source

In carrying out the research made by the author, the type of research made by the author is quantitative research.

Quantitative research is research that focuses on populations and samples that use research instruments for data collection and then analyzes data in statistical form to test predetermined hypotheses (Sugiyono, 2016). This study uses primary data taken in November and December 2023.

## B. Population

The population in this study were employees of the Surabaya Hospital, namely in the nursing department, totaling 135 people in hospitals in Surabaya. Employees in the nursing department who work in work rooms including the emergency room, ICU, ICCU, PICU, NICU, delivery room, outpatient department, as well as adult, pediatric and exclusive inpatient rooms.

## C. Data Collection

The data used in this study come from primary data sources which refer to information obtained directly from the original source. Information for this study was taken from a questionnaire given to employees in the nursing field of hospitals in Surabaya with a focus on the influence of workload, work ethic self-efficacy, burnout, work-life balance and nurse performance. After collecting and recording data, researchers analyzed the data. This analysis process is in the form of data presentation reduction, conclusion drawing and verification.

## D. Data Analysis Method

Hypothesis testing conducted in this study is to test each variable. The test used is the effect test, which can determine how the independent variable affects the dependent variable which is carried out by the SEM (Structural Equation Modeling) method. This test is carried out by analyzing the Regression Weight, namely the Critical Ratio (CR) and the Probability (P) value. The required limits are  $\geq 1.96$  for the CR value and  $\leq 0.05$  for the P-value. If data processing shows a value that meets these requirements, then the proposed research hypothesis is accepted. The test carried out in this study is to measure the suitability of the actual input with the predictions of the proposed model, in this study using AMOS 20.

## VI. Result

### A. Research Measurement Model

Measurements made to analyze a model in a study are carried out using confirmatory factor analysis (CFA) or confirmatory factor analysis is an analysis to confirm the elements of indicators that define a factor or a latent construct

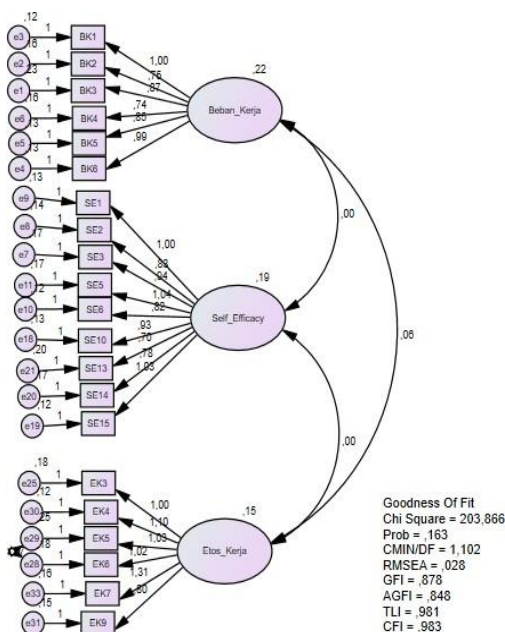


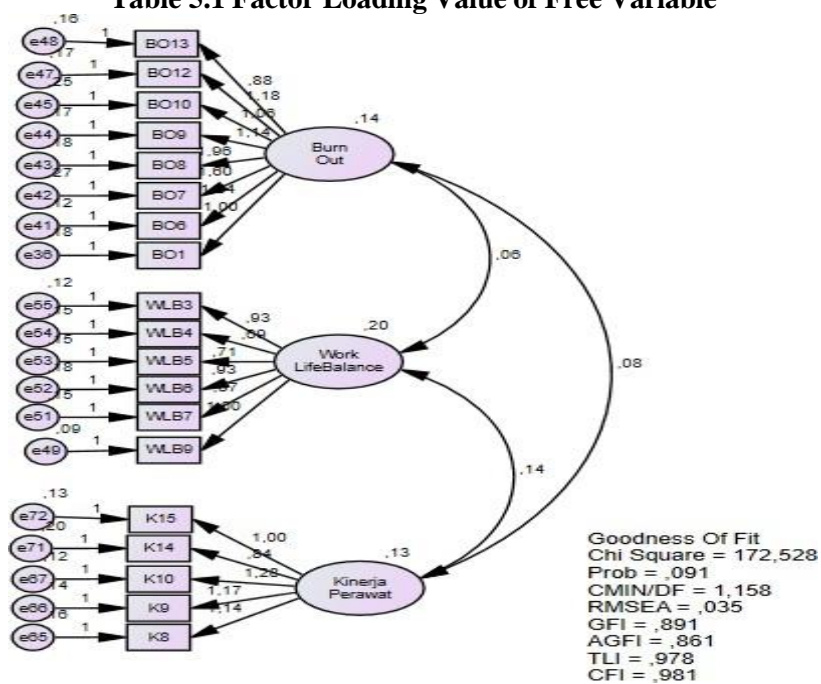
Figure 5.1 CFA Variabel Eksogen

From the figure above, it shows that the probability value is greater than 0.05, RMSEA is less than 0.08, GFI and AGFI are smaller than 0.90, Cmin / DF is less than 2.00, TLI is more than 0.90 and CFI is more than 0.90. These results

indicate that the exogenous variables of workload, self-efficacy and work ethic formed by their indicators are appropriate or (fit). The results of the calculation of factor loading for each indicator in figure 5.1 can be seen in table 5.1 below

Variabel	Indikator	Loading factor
Workload (X1)	X1.1	0,799
	X1.2	0,662
	X1.3	0,649
	X1.4	0,655
	X1.5	0,747
	X1.6	0,79
Work Ethic (X2)	X2.3	0,678
	X2.4	0,782
	X2.5	0,625
	X2.6	0,692
	X2.7	0,789
Self-efficacy (X3)	X3.1	0,766
	X3.2	0,699
	X3.3	0,706
	X3.5	0,739
	X3.6	0,713
	X3.10	0,75
	X3.13	0,564
	X3.14	0,636
	X3.15	0,788

Table 5.1 Factor Loading Value of Free Variable



### Figure 5.2 CFA Results Dependent Variable

Figure 5.2 above shows the probability value is less than 0.05, RMSEA less than 0.08, GFI and AGFI less than 0.90, Cmin/DF less than 2.00, TLI less than 0.90 and CFI less than 0.90. These results indicate that the independent variables formed by the indicators are not yet fit with the data and need to be modified. The results of the loading factor calculation for each indicator on the independent variable can be seen in Table 5.2 below

**Table 5.2 Factor Loading Value Dependen**

Variabel	Indikator	Loading factor	Keterangan
Burnout (Y1)	Y1.1	0,667	Valid
	Y1.6	0,893	Valid
	Y1.7	0,759	Valid
	Y1.8	0,869	Valid
	Y1.9	0,726	Valid
	Y1.10	0,623	Valid
	Y1.12	0,739	Valid
Work-life balance (Y2)	Y2.3	0,772	Valid
	Y2.4	0,622	Valid
	Y2.5	0,633	Valid
	Y2.6	0,705	Valid
	Y2.7	0,709	Valid
	Y2.9	0,824	Valid
ance Nurse (Z)	Z.8	0,710	Valid
	Z.9	0,740	Valid
	Z.10	0,794	Valid
	Z.14	0,559	Valid
	Z.15	0,705	Valid

### B. Reliability Test

Reliability test is the result of measurement using the same object that will produce the same data (Sugiono 2017). The reliability test in this study uses Cronbach Alpha, with the decision making if the Cronbach Alpha value > 0.60, the variable is said to be reliable. In the reliability test, it can be concluded that variables can be said to be reliable or consistent for measuring latent variables. Reliability testing was carried out using the SPSS 22 program.

**Table 5.3 Reliability Test**

No	Variabel	Item Valid	Cranach's Alpha	Keterangan
1	Work Load	9	0,863	Reliabel
2	Work Ethic	6	0,842	Reliabel
3	Self-efficacy	6	0,899	Reliabel
4	Burnout	8	0,905	Reliabel
5	Work-life balance	5	0,859	Reliabel
6	Performance Nurse	6	0,829	Reliabel

### C. Validity Test

The validity test is carried out to determine how well the statement items can analyze each variable under study. Conducted using Pearson's product moment correlation if the correlation value between each statement item and the total variable score produces a positive r count and an r count greater than r table or a significance value smaller than 0.05 ( = 5%), then the statement is declared valid. Validity testing was carried out using the SPSS 25 program

**Table 5.4 Test Validitas Questionnaire**

Variabel	Indikator	Pearson Correlation	Signifikansi	Keterangan
Self-efficacy (X1)	X1.1	0,793	0,000	Valid
	X1.2	0,739	0,000	Valid
	X1.3	0,747	0,000	Valid
	X1.5	0,781	0,000	Valid
	X1.6	0,751	0,000	Valid
	X1.10	0,770	0,000	Valid
	X1.13	0,630	0,000	Valid
Variabel	Indikator	Pearson Correlation	Signifikansi	Keterangan
	X1.14	0,683	0,000	Valid
	X1.15	0,806	0,000	Valid
Work load (X2)	X2.1	0,829	0,000	Valid
	X2.2	0,729	0,000	Valid
	X2.3	0,744	0,000	Valid
	X2.4	0,728	0,000	Valid
	X2.5	0,778	0,000	Valid
	X2.6	0,818	0,000	Valid
Work Ethic (X3)	X3.3	0,745	0,000	Valid
	X3.4	0,688	0,000	Valid
	X3.5	0,817	0,000	Valid
	X3.6	0,689	0,000	Valid
	X3.7	0,725	0,000	Valid
	X3.9	0,830	0,000	Valid
Burnout (Y1)	Y1.1	0,713	0,000	Valid
	Y1.6	0,890	0,000	Valid
	Y1.7	0,816	0,000	Valid
	Y1.8	0,880	0,000	Valid
	Y1.9	0,759	0,000	Valid
	Y1.10	0,693	0,000	Valid
	Y1.12	0,767	0,000	Valid
	Y1.13	0,678	0,000	Valid
Advance Nurse (Y2)	Y2.8	0,811	0,000	Valid
	Y2.9	0,774	0,000	Valid
	Y2.10	0,834	0,000	Valid

	Y2.14	0,691	0,000	Valid
	Y2.15	0,741	0,000	Valid
Work-life balance (Z)	Z.3	0,802	0,000	Valid
	Z.4	0,689	0,000	Valid
Variabel	Indikator	Pearson Correlation	Signifikansi	Keterangan
	Z.5	0,710	0,000	Valid
	Z.6	0,790	0,000	Valid
	Z.7	0,767	0,000	Valid
	Z.9	0,833	0,000	Valid

From attachment 15, it is known that the value of r table for the number of respondents (n) 135 people is 0.172. Table 5.3 shows that the r count for each question item on the variables Self-efficacy, workload, work ethic, burnout, nurse performance, Work-life balance is positive and r count is greater than r table 0.172 with a significance value for all statement items less than the specified 0.05 so it is concluded that all statement items used to measure the statements used to measure the research variables are valid and can be used to analyze further.

### C. Normality Assumption Test

The normality test is carried out to see the level of normality of the data required in the study. skewness critical ratio (CR) value, provided that the critical ratio value does not exceed  $\pm 2.58$  which indicates that the required data has met the assumption of normality.

**5.5 Table The Normality Test**

Variable	Min	Max	Skew	C.r.	Kurtosis	C.r.
BK1	3	5	-0,020	-0,094	-0,169	-0,393
BK2	3	5	0,022	0,104	0,512	1,191
BK3	3	5	-0,105	-0,488	-0,554	-1,289
BK4	3	5	0,073	0,339	0,494	1,149
BK5	3	5	0,068	0,315	0,401	0,932
BK6	3	5	0,001	0,007	-0,111	-0,259
SE1	3	5	0,003	0,012	0,095	0,221
Variable	Min	Max	Skew	C.r.	Kurtosis	C.r.
SE2	3	5	-0,011	-0,049	0,714	1,662
SE3	3	5	-0,003	-0,012	-0,045	-0,105
SE5	3	5	0,123	0,572	-0,486	-1,132
SE6	3	5	-0,105	-0,487	0,917	2,133
SE10	3	5	-0,083	-0,388	0,206	0,479
SE13	3	5	0,012	0,056	0,420	0,978
SE14	3	5	-0,038	-0,177	0,508	1,182



SE15	3	5	-0,010	-0,047	0,019	0,045
EK3	3	5	0,002	0,010	-0,045	-0,105
EK4	3	5	-0,043	-0,199	-0,009	-0,021
EK5	2	5	-0,323	-1,504	0,020	0,047
EK6	3	5	0,002	0,010	-0,045	-0,105
EK7	3	5	0,078	0,363	-0,660	-1,537
EK9	3	5	0,043	0,202	0,935	2,177
BO1	2	4	-0,013	-0,061	0,092	0,214
BO6	2	5	-0,258	-1,201	-0,944	-2,198
BO7	1	5	-0,012	-0,058	-0,582	-1,354
BO8	2	5	-0,078	-0,364	-1,084	-2,524
BO9	2	4	-0,009	-0,041	-0,173	-0,403
BO10	2	5	0,319	1,483	-0,034	-0,080
BO12	2	4	0,028	0,130	-0,286	-0,666
BO13	2	4	0,076	0,355	0,593	1,379
K8	3	5	-0,009	-0,041	0,094	0,218
K9	3	5	-0,007	-0,033	0,170	0,396
<b>Variable</b>	<b>Min</b>	<b>Max</b>	<b>Skew</b>	<b>C.r.</b>	<b>Kurtosis</b>	<b>C.r.</b>
K10	3	5	0,010	0,047	0,019	0,045
K14	3	5	0,022	0,104	0,512	1,191
K15	3	5	-0,073	-0,341	0,928	2,160
WLB3	3	5	0,012	0,056	0,420	0,978
WLB4	3	5	0,000	0,000	1,063	2,473
WLB5	3	5	0,135	0,630	0,781	1,817
WLB6	3	5	-0,031	-0,144	-0,225	-0,524
WLB7	3	5	-0,005	-0,022	0,333	0,775
WLB9	3	5	0,047	0,220	0,321	0,746
					<b>15,272</b>	<b>1,502</b>

#### D. Result Test Outlier

A case (subject) is considered a univariate outlier if the z-score value falls outside the range of -3 to +3.

**Table 5.6 Result Test Univariate Outlier**

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Deviation

Zscore(SE1)	130	-1,78016	1,72622	0,0000000	1,00000000
Zscore(SE2)	130	-1,90526	1,93480	0,0000000	1,00000000
Zscore(SE3)	130	-1,79695	1,63839	0,0000000	1,00000000
Zscore(SE5)	130	-1,33642	1,91096	0,0000000	1,00000000
Zscore(SE6)	130	-1,88146	2,09561	0,0000000	1,00000000
Zscore(SE10)	130	-1,61506	2,06841	0,0000000	1,00000000
Zscore(SE13)	130	-1,87158	1,81487	0,0000000	1,00000000
Zscore(SE14)	130	-1,80008	1,94409	0,0000000	1,00000000
Zscore(SE15)	130	-1,60294	1,89928	0,0000000	1,00000000
Zscore(BK1)	130	-1,85163	1,53868	0,0000000	1,00000000
Zscore(BK2)	130	-1,91209	1,82583	0,0000000	1,00000000
Zscore(BK3)	130	-1,76837	1,38079	0,0000000	1,00000000
Zscore(BK4)	130	-2,01351	1,75277	0,0000000	1,00000000
Zscore(BK5)	130	-2,00460	1,71823	0,0000000	1,00000000
Zscore(BK6)	130	-1,68024	1,70629	0,0000000	1,00000000
Zscore(EK3)	130	-1,66190	1,76741	0,0000000	1,00000000
Zscore(EK5)	130	-2,51408	2,11088	0,0000000	1,00000000
Zscore(EK6)	130	-1,66190	1,76741	0,0000000	1,00000000
Zscore(EK7)	130	-1,41072	1,64585	0,0000000	1,00000000
Zscore(EK9)	130	-2,02489	1,93355	0,0000000	1,00000000
Zscore(EK4)	130	-1,52910	2,05258	0,0000000	1,00000000
Zscore(BO1)	130	-1,65442	1,87140	0,0000000	1,00000000
Zscore(BO6)	130	-1,60132	2,25370	0,0000000	1,00000000
Zscore(BO7)	130	-2,63570	2,36635	0,0000000	1,00000000
Zscore(BO8)	130	-1,39533	2,11549	0,0000000	1,00000000
Zscore(BO9)	130	-1,72846	1,62527	0,0000000	1,00000000
Zscore(BO10)	130	-2,17232	2,50837	0,0000000	1,00000000
Zscore(BO12)	130	-1,54643	1,74924	0,0000000	1,00000000
Zscore(BO13)	130	-2,02334	1,78875	0,0000000	1,00000000
Zscore(K14)	130	-1,91209	1,82583	0,0000000	1,00000000
Zscore(K15)	130	-1,90666	2,05919	0,0000000	1,00000000

Zscore(K8)	130	-1,67720	1,83951	0,0000000	1,00000000
Zscore(K9)	130	-1,73432	1,81626	0,0000000	1,00000000
Zscore(K10)	130	-1,89928	1,60294	0,0000000	1,00000000
Zscore(WLB3)	130	-1,87158	1,81487	0,0000000	1,00000000
Zscore(WLB4)	130	-2,00780	2,00780	0,0000000	1,00000000
Zscore(WLB5)	130	-2,12182	1,81871	0,0000000	1,00000000
Zscore(WLB6)	130	-1,84812	1,51210	0,0000000	1,00000000
Zscore(WLB7)	130	-1,80489	1,83288	0,0000000	1,00000000
Zscore(WLB9)	130	-1,96034	1,70648	0,0000000	1,00000000
Valid N (listwise)	130				

From table 5.5, it is known that the Z-score generated through descriptive analysis calculations ranges between the lowest value of -2.634 and the highest of 2.508 so that there are no z-score values outside the range of -3 to +3. This result shows that the research data does not contain univariate outliers. Furthermore, the detection of multivariate outliers was carried out using the Mahalanobis Distance AMOS 26 test which shows how far a data is from the center of a particular point. A case (subject) is declared a multivariate outlier if it has a Mahalanobis d-squared exceeding the chi square table at df (number of indicators) and alpha ( $\alpha$ ) 0.001

**Table 5.7 Result Test Multivariate Outlier**

Peringkat	Observation number	Mahalanobis d-squared	p1	p2
High	10	61,540	0,021	0,932
Low	44	35,334	0,720	0,123

**E. Multivariate Outlier**

The chi square table value at  $< 157.610$  (df 130) is 931.156. From Table 5.18, it is known that the maximum Mahalanobis d-squared value generated by AMOS 20 is 61.540. This value is smaller than the chi square table value. This result concludes that there are no cases (subjects) that are declared as multivariate outliers

**F. Structural Equation Modeling**

Structural Equation Modeling (SEM) Structural model analysis is carried out to ensure that the model fits the data and to test hypotheses about the influence of each variable under study

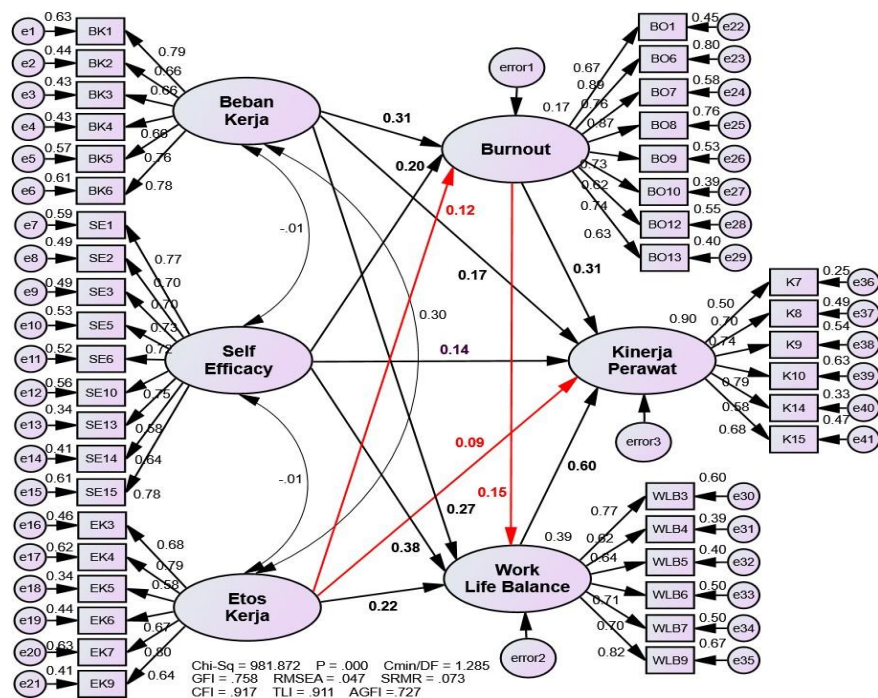


Figure 5.3 Full Structural Model

**F. Result Model Fit**

Evaluation of the structural model in this study is Goodness of Fit (GOF) testing. GOF is carried out to test the suitability of a research model with several predetermined criteria. The results of the structural model can be seen in the following table.

Table 5.7 Value Goodness of fit dan Cut of Value Structural Model

Index	Cut-off Value	Hasil	Kesimpulan
X <sup>2</sup> (chi-square)	< 157.610 (df 130)	931,156	Tidak Fit
Significance P	≥ 0,05	0,000	Tidak Fit
CMIN/df	≥ 2,00	1,284	Fit
GFI	≥ 0,90	0,763	Marginal
AGFI	≥ 0,90	0,732	Marginal
RMSEA	≤ 0,08	0,047	Fit
TLI	≥ 0,90	0,914	Fit
CFI	≥ 0,90	0,920	Fit

Based on Table 5.7, it is known that the 4 criteria for Goodness of Fit have been met even though there are still values that are not fit. However, overall the model in this study can already be said to be fit (good) because there are already 4 criteria that are fit.

**G. Hypothesis test**

The hypothesis testing process is carried out by testing the parameters as hypothesized can be interpreted. The hypothesis criterion that must be met is  $\leq \alpha = 0.05$ . The following are the estimation results of hypothesis testing

Table 5.7 hypothesis substantiation

Konstruk	Estimate	S.E.	C.R.	P	ranga n
Work Load > Burn_Out	0,249	0,085	2,917	0,004	Significant

Work Load <sub>&gt;</sub>	Work_lifebalance	-0,259	0,09 4	- 2,745	0,00 6	Significant
Work Load <sub>&gt;</sub>	Kinerja_Perawat	-0,148	0,06 3	- 2,365	0,01 8	Significant
Self_Efficacy <sub>&gt;</sub>	Burn_Out	-0,170	0,08 0	- 2,127	0,03 3	Significant
Self_Efficacy <sub>&gt;</sub>	Work_lifebalance	0,392	0,09 3	4,197	0,00 0	Significant
Self_Efficacy <sub>&gt;</sub>	Performance_Nurse	0,130	0,06 4	2,030	0,04 2	Significant
Work Ethic <sub>&gt;</sub>	Burn_Out	-0,139	0,11 7	- 1,190	0,23 4	Significant
Work Ethic <sub>&gt;</sub>	Work_lifebalance	0,313	0,13 2	2,364	0,01 8	Significant
Work Ethic <sub>&gt;</sub>	Performance_Nurse	0,065	0,08 3	0,789	0,43 0	Significant
Burn_Out <sub>&gt;</sub>	Work_lifebalance	-0,173	0,11 0	- 1,573	0,11 6	Significant
Burn_Out <sub>&gt;</sub>	Performance Nurse	-0,308	0,07 8	- 3,968	0,00 0	Significant
Work_lifebalance <sub>&gt;</sub>	Performance Nurse	0,563	0,09 2	6,134	0,00 0	Significant

## H. Hypotesis Test Result

### Hypothesis 1: Workload has a significant effect on Burnout of Surabaya Hospital Nurses

The results of data analysis calculations show that workload affects burnout of Surabaya Hospital nurses by 0.249. The test shows positive results because the CR = 2.917 value (greater than 1.96) and is reinforced by a probability value of 0.004 (less than 0.05) so that the hypothesis stating that workload has an effect on nurse burnout is 0.249. The results of this study can confirm the theory of being achieved when there are balanced physical and mental pressures. Workload, work stress, and work family conflict are factors that can contribute to increasing burnout (Nopierti et al., 2020). The results of this study are also in line with the results of previous research (Lineuwih et al., 2023; Malino et al., 2020) which found that workload affects burnout. These results are also in line with the findings of calculations in data analysis where nurses who are respondents in this study have an average workload of high and an average value of 3.43. The results of confirmatory factor analysis (CFA) of workload variables show that the mental workload indicator has the highest loading factor, while the physical workload is the lowest. The results of CFA of burnout variables show that mental fatigue has the highest loading factor, while the indicator of low self-esteem is the lowest. Too much workload causes physical or mental fatigue, as well as emotional reactions such as headaches, digestive problems, and anger. Conversely, too little workload, caused by repetition of motion, leads to boredom and monotony. Therefore, any increase in the workload of nurses will significantly increase

### Hypothesis 2 Workload has a significant negative effect on Work-life In Surabaya Hospital Nurse

The results of data analysis calculations show that workload affects Work-Life Balance in Surabaya Hospital nurses by -0.259. The test shows significant results with a CR = -2.745 value (smaller than -1.96) and reinforced by a probability value of 0.006 (smaller than 0.05) so that the hypothesis stating that workload has a significant effect on Work-Life Balance in this study can be accepted as true. Data analysis and hypothesis proving that has been revealed in the previous section shows that Workload has a negative and significant effect on Work-Life Balance. This means that an increase in Workload will significantly reduce Work-Life Balance in Surabaya Hospital nurses. Conversely, when there is a decrease in workload, Work-Life Balance in Surabaya Hospital nurses will increase significantly. The results of this study can confirm the theory of M.R. Frone et al (1992), Work-life balance is a person's ability to balance work and personal life, fulfill commitments, be responsible for other activities outside of work. The results of research from Siti Nurwahyuni (2019) that workload has a significant negative effect because employees with the demands of the tasks given to employees, employees there are still involved with social life outside of working hours

by utilizing free time there, for example participating in community activities, attending a training, or just hanging out with friends or family outside of working hours. Based on the reality in the company if employees spend more time at work than at home, it will cause an unbalanced work-life balance. According to Lazăr et al. (2010), the lack of Work-Life Balance can lead to an increase in absenteeism and tardiness, reduce productivity and increase employee turnover rates. This means that companies must pay attention and observe the workload borne by their employees because the higher the Workload has a negative influence on Work-Life Balance. The current research findings are also seen through the analysis of this variable showing that nurses who are respondents to this study assess that the average workload is high and the average value of nurse respondents on the workload variable is 3.43. The CFA results of the Work-life balance variable show that satisfaction balance has the highest loading factor, while the lowest engagement balance indicator. This means that the higher the level of Workload, it will negatively affect Work-Life Balance or in other words, it suppresses the emergence of Work-Life Balance.

### **Hypothesis 3 Workload Has A Significant Positive Effect On Nurse Performance At Surabaya Hospital**

The results of data analysis calculations show that workload affects Nurse Performance in Surabaya Hospital nurses by -0.148. The test shows a negative value and significant value with a value of CR = -2.365 (smaller than -1.96) and reinforced by a probability value of 0.018 (smaller than 0.05) so that the hypothesis stating that workload has a significant effect on Nurse Performance in this study can be accepted. Data analysis and hypothesis proving that has been revealed in the previous section shows that Workload has a negative and significant effect on Nurse Performance. This means that an increase in Workload will significantly reduce Nurse Performance in Surabaya Hospital nurses. Conversely, when there is a decrease in workload, Nurse Performance in Surabaya Hospital nurses will increase significantly. Data analysis and hypothesis proving that has been revealed in the previous section shows that Workload has a negative and significant effect on Nurse Performance. This means that an increase in Workload will significantly reduce Nurse Performance in Surabaya Hospital nurses. Conversely, when there is a decrease in workload, Nurse Performance in Surabaya Hospital nurses will increase significantly. The results of the current study confirm the results of previous studies (N. Rizky & Suhariadi, 2021; Soelton et al., 2021) which show that Workload has a significant effect on Nurse Performance. According to Tarwaka (2014), workload consists of external and internal loads. Tasks in the workplace, lifting methods, workpiece loads, and worker facilities, rotating work systems, wages that are too low or responsibilities from the company can add to the workload for employees. The higher the burden received by nurses, the more the performance of the nurses will decrease because according to Mangkunegara (2017), performance is the result of work both in quality and quantity achieved by an employee in performing tasks in accordance with the responsibilities given to him. The higher the workload, the lower the work of the nurses. The results of data analysis also show that the average workload is high and the average value of nurse respondents on workload variables is 3.43. The results of confirmatory factor analysis (CFA) of workload variables show that the mental workload indicator has the highest loading factor, while the physical workload is the lowest. This means that the increase in workload is inversely proportional to the level of performance of the nurses

### **Hypothesis 4 Self-Efficacy Has A Negatif Significant Effect On Burnout Of Nurses At Surabaya Hospital**

The results of data analysis calculations show that Self-Efficacy affects Burnout in Surabaya Hospital nurses by -0.170. The test shows a negative value and significant value with a CR = -2.127 (smaller than -1.96) and reinforced by a probability value of 0.033 (smaller than <0.05) so that the hypothesis stating that Self-Efficacy has a significant effect on Burnout in this study can be accepted. Data analysis and verification of the hypothesis expressed in the previous section shows that Self-Efficacy has a negative and significant effect on Burnout. This means that an increase in workload will significantly reduce burnout among nurses at the Surabaya Hospital. On the other hand, when there is a decrease in Self-Efficacy, Burnout among Surabaya Hospital nurses will increase significantly. The results of the current research confirm the findings of previous research (Pranoto et al., 2023; Ulfa & Aprianti, 2021) where the findings show that Self-Efficacy has a significant influence on Burnout. The results of this research can The results of the current research also confirm the theory put

forward by Bandura (2001), which states that self-efficacy is a belief that an individual has in their ability to organize and carry out the actions required in a particular task. Bandura (2001) added that self-efficacy has a major role in the regulatory process through individual motivation and predetermined work achievements. Considerations in self-efficacy also determine how much effort people make in carrying out their tasks and how long it takes to complete the task. It is further stated that people with strong self-efficacy considerations are able to use their best efforts to overcome obstacles, while people with weak self-efficacy tend to reduce their efforts or run away from existing obstacles. Burnout is a situation that arises due to certain pressures as stated by Maslach et al. (2001), Burnout is a syndrome of emotional exhaustion, depersonalization, and decreased personal achievement that can occur in people who do several jobs. Self-Efficacy must be increased so that it can reduce burnout experienced by nurses at the Surabaya Hospital. Individuals will not easily experience burnout if the individual feels capable and believes they can solve the problems they face. The results of the current research can also be shown based on data analysis where the average value of self-efficacy is high. The burnout variable shows that the average physical fatigue value has the highest loading factor, while the quantity indicator has the lowest. This means that Self-Efficacy has a negative and significant influence on Burnout

### **Hypothesis 5 Self-Efficacy Has A Significant Positive Effect On Work-Life Balance In Nurses At The Surabaya Hospital**

The results of data analysis calculations show that Self-Efficacy affects the Work-Life Balance of Surabaya Hospital nurses by 0.392. The test shows positive results with a CR = 4.197 value (greater than 1.96) and reinforced by a probability value of 0.000 (less than 0.05) so that the hypothesis stating that Self-Efficacy has a significant effect on Work-Life Balance in this study can be accepted as true. Data analysis and verification of the hypothesis expressed in the previous section shows that Self-Efficacy has a positive and significant effect on Work-Life Balance. This means that an increase in Self-Efficacy will also encourage a significant improvement in the Work-Life Balance condition of nurses at the Surabaya Hospital. On the other hand, when there is a decrease in Self-Efficacy, the Work-Life Balance of Surabaya Hospital nurses will also decrease significantly. The results of the current hypothesis test that the self-efficacy of nurses at the Surabaya Hospital confirms the results of research (Ahmad Shobirin et al., 2023; Fitri et al., 2023) which shows that self-efficacy has a significant positive effect on work-life balance. Better individual characteristics such as high self-efficacy can survive difficulties or work problems and uncertainty in life. Employees who are confident in their abilities will see difficult tasks as challenges to overcome rather than seeing them as dangers to be avoided. Self-efficacy is one element of individual resources that is interesting to research in relation to work-life balance. The results of this research were also confirmed through data analysis where the average self-efficacy was high and the average score of nurse respondents on the self-efficacy variable was 3.75. The results of confirmatory factor analysis (CFA) of the self-efficacy variable show that the indicator of facing responsibility has the highest loading factor, while confidence in decision making has the lowest. The CFA results of the work-life balance variable show that involvement balance has the highest loading factor, while the time balance indicator has the lowest.

### **Hypothesis 6 Self-Efficacy Has A Significant Positive Effect On The Performance Of Surabaya Hospital Nurses**

The results of data analysis calculations show that Self-Efficacy affects the Performance of Surabaya Hospital Nurses by 0.130. The test shows positive results with a CR = 2.030 value (greater than 1.96) and is reinforced by a probability value of 0.042 (less than 0.05) so that the hypothesis stating that Self-Efficacy has a significant effect on Nurse Performance in this study can be accepted. Data analysis and verification of the hypothesis expressed in the previous section shows that Self-Efficacy has a positive and significant effect on Nurse Performance. This means that an increase in Self-Efficacy will also encourage a significant increase in the performance of nurses at the Surabaya Hospital. On the other hand, when there is a decrease in Self-Efficacy, the performance of nurses at the Surabaya Hospital will also decrease significantly. The results of the current research confirm the results of previous research (Khaerana, 2020; Rosia Diana Fauzi et al., 2023) which also show that Self-Efficacy has a significant influence on performance. This result can also be seen from the results of descriptive data analysis where the average value of self-efficacy is high and the average value of nurse respondents on the self-efficacy variable is 3.75. The results of confirmatory factor analysis (CFA) of the self-efficacy variable show that the indicator of facing responsibility has the highest loading factor, while confidence in decision making has the lowest. The CFA results of the performance variable show that efficiency has the highest loading factor, while the quantity indicator has the lowest. The results of

this research are also in line with the opinion of Bandura (2001) who explains that Self-Efficacy can be obtained through culture, gender, age and incentives. Self-efficacy is an individual's belief in his or her chances of achieving the results of a particular task (Kreitner, R., & Kinicki, 2012). When several of these factors meet good criteria in forming Self-Efficacy, the performance of nurses will increase

#### **Hypothesis 7 Work Ethic Has A Significant Negative Effect On Burnout Among Nurses At Surabaya Hospital**

The results of data analysis calculations show that Work Ethic affects Burnout of Surabaya Hospital nurses by -0.139. The test shows negative results with a CR = 1-190 value (greater than -1.96) with a probability value of 0.234 (greater than 0.05) so that the hypothesis stating that Self-Efficacy has a significant effect on Burnout in this study cannot be accepted. Data analysis and verification of the hypothesis expressed in the previous section shows that work ethic has a negative but significant effect on Burnout. This means that an increase in work ethic is not able to reduce burnout significantly in nurses at Hospital Surabaya, or it can be said that work ethic and burnout are not related to each other. The current research findings are in line with the theory expressed by (Sinamo, 2011), that work ethic is a set of positive work behaviors that are rooted in strong awareness and fundamental beliefs. Thus, with a high work ethic it is not possible that an employee will experience burnout and this is reinforced by the results of current research that a good work ethic is not able to encourage the emergence of burnout conditions in nurses at the Surabaya Hospital. The results of the current research are not in line with previous research (Choi et al., 2021; Sidabutar, 2020) which found evidence that a high work ethic can suppress the emergence of burnout. The results of the current research can also be seen in the results of descriptive data analysis where the average value of work ethic is high and the average value of nurse respondents on the work ethic variable is 3.76. The results of the confirmatory factor analysis (CFA) of the work ethic variable show that the indicator of being tough and never giving up has the highest loading factor, while wanting to be independent in completing tasks in decision making is the lowest. The CFA results of the burnout variable show that physical fatigue has the highest loading factor, while the quantity indicator has the lowest. This means that an increase or decrease in the work ethic of nurses at the Surabaya Hospital is not able to encourage or reduce the level of burnout.

#### **Hypothesis 8 Work Ethic Has A Significant Effect On Work-Life Balance Among Nurses At Surabaya Hospital**

The results of data analysis calculations show that Work Ethic affects the Work-Life Balance of Surabaya Hospital nurses by 0.313. The test shows positive results with a CR = 2.364 value (greater than 1.96) and reinforced by a probability value of 0.018 (less than 0.05) so that the hypothesis stating that Work Ethic has a significant effect on Work-Life Balance in this study can be accepted as true. Data analysis and verification of the hypothesis expressed in the previous section shows that Work Ethic has a positive and significant effect on Work-Life Balance. This means that an increase in Work Ethic will also encourage a significant improvement in the Work-Life Balance condition of Surabaya Hospital nurses. On the other hand, when there is a decline in Work Ethic, the Work-Life Balance of Surabaya Hospital nurses will also decrease significantly. The current research findings support the opinion expressed by Tasmara (2002), work ethic is the foundation of true and authentic success. The work ethic was influenced by the research he conducted on sociological studies since the time of Max Weber in the early 20th century as well as the writings he conducted on management in the last twenty years (Sinamo, 2011). Employees with a good work ethic (good roots) are able to build and increase their knowledge. Therefore, after having a good work ethic and knowledge, employees can implement the skills they have to build a good organization. The current research findings are also in line with the results of previous research conducted by Anin Dwita & Rozikan (2022). The results of this research can also be seen through the results of descriptive research where the average score for work ethic is high and the average score for nurse respondents on the work ethic variable is 3.76. The results of the confirmatory factor analysis (CFA) of the work ethic variable show that the indicator of being tough and never giving up has the highest loading factor, while wanting to be independent in completing tasks in decision making is the lowest. The CFA results of the work-life balance variable show that involvement balance has the highest loading factor, while the lowest quantity indicator is time balance.

#### **Hypothesis 9 Work Ethic Has A Significant Positive Effect On Nurse Performance In Hospitals In Surabaya.**

The results of data analysis calculations show that Work Ethic affects the Nurse Performance of Surabaya Hospital



nurses by 0.065. The test shows positive results with a CR = 0.789 value (smaller than 1.96) with a probability value of 0.116 (greater than 0.05) so that the hypothesis stating that Work Ethic has a significant effect on Nurse Performance in this study cannot be accepted as true. According to Sinamo (2011) the term “paradigm” refers to the basic concepts about work itself. These concepts include basic ideals, governing principles, values that drive, attitudes that are born, and standards that must be achieved. The results of the current study are not in line with the results of research by Nugroho & Permatasari (2022), which show that work ethic partially has a positive and significant effect on nurse performance. On the other hand, the results of the current study are in line with the results of research by Yasdianto et al. (2020) which shows that work ethic partially does not have a positive and significant effect on the performance of the Asset & Office Management Department of PT Semen Baturaja (Persero) Tbk.

The results of the current study can also be illustrated through the results of descriptive analysis calculations where the average value of work ethic is high and the average value of nurse respondents on work ethic variables is 3.76. The results of confirmatory factor analysis (CFA) of work ethic variables show that the indicators of resilient and unyielding have the highest loading factor, while wanting to be independent in completing tasks in decision making is the lowest. The results of CFA of performance variables show that efficiency has the highest loading factor, while the lowest indicator of quantity is quantity. This means that an increase or decrease in Work Ethic is unable to influence changes in the value of Hospital Nurse Performance in Surabaya

#### **Hypothesis 10 Burnout Has A Significant Effect On Work-Life Balance In Surabaya Hospital Nurse**

The results of data analysis calculations show that Burnout affects the Work-Life Balance of Surabaya Hospital nurses by -0.173. The test shows negative results with a CR = -1.573 value (greater than -1.96) with a probability value of 0.116 (greater than 0.05) so that the hypothesis stating that Burnout has a significant effect on Work-Life Balance in this study cannot be accepted. The results of the current study are not in line with the results of Darmawan et al. (2015) which found a negative linear relationship between burnout and work-life balance. The results of this study reinforce the opinion expressed by Freudenberger (1986) explaining that symptoms usually include a cynical and negative attitude, strength in thinking which often leads to a dead-end mind that is closed to change or innovation. People who experience burnout are usually cynical and view clients as people who deserve problems because of their own mistakes, which in turn reduces the quality of services provided. The results of the current study can also be seen through the results of descriptive analysis on respondents' responses with a mean value of high burnout and a mean value of nurse respondents on the burnout variable of 2.83. The results of confirmatory factor analysis (CFA) of the burnout variable show that the physical fatigue indicator has the highest loading factor, while the low self-esteem is the lowest. The results of CFA of work-life balance variables show that involvement balance has the highest loading factor, while the lowest quantity indicator is time balance. In other words, whether the value of burnout is high or low, it is not able to affect changes in Work-Life Balance.

#### **Hypothesis 11 Burnout Has A Significant Positive Effect On Nurse Performance In Hospitals In Surabaya**

The results of data analysis calculations show that Burnout affects Nurse Performance in Surabaya Hospital nurses by -0.308. The test shows negative and significant results with a CR = -3.968 value (smaller than -1.96) and reinforced by a probability value of 0.000 (smaller than 0.05) so that the hypothesis stating that Burnout has a significant effect on Nurse Performance in this study can be accepted. The results of the current study are in line with the results of previous research by Lim et al. (2022) which shows burnout affects performance at work. Ramadhan & Sukarno's research(2022) which shows a similar thing where an increase in burnout will cause a decrease in performance. The results of the current study are also seen through descriptive analysis of this variable which shows the average value of burnout is high and the average value of nurse respondents on the burnout variable is 2.83. The results of confirmatory factor analysis (CFA) of the burnout variable show that the physical exhaustion indicator has the highest loading factor, while the low self-esteem is the lowest. The results of CFA of performance variables show that efficiency has the highest loading factor, while the lowest indicator of quantity is quantity. Therefore, high burnout will cause employees' ability to work to decrease or in other words, burnout has a negative and significant effect on Hospital Nurse Performance in Surabaya

#### **Hypothesis 12 Work-Life Balance Has A Significant Positive Effect On Nurse Performance At Hospitals In Surabaya**

The results of data analysis calculations show that Work-Life Balance affects Nurse Performance in Surabaya Hospital nurses by 0.563. The test shows positive and significant results with a CR = 6.134 value (greater than 1.96) and reinforced by a probability value of 0.000 (less than 0.05) so that the hypothesis stating that Work-Life Balance has a significant effect on Nurse Performance in this study can be accepted. The results of the current study confirm the results of research conducted by Febrianti et al. (2024) which shows that Work-Life Balance has a positive and significant effect on performance. McDonald et al. (2005) revealed that Work-Life Balance can be measured by Time balance, Involvement balance, and Satisfaction balance. When a good Work-Life Balance is created, employees will have more opportunities to create good performance. The results of the current study can also be seen based on descriptive analysis of the average value of burnout, which is high and the average value of nurse respondents on the Work-life balance variable is 3.46. The results of confirmatory factor analysis (CFA) of the Work-life balance variable show that the Involvement Balance indicator has the highest loading factor, while the time balance is the lowest. The results of the CFA of the performance variable show that efficiency has the highest loading factor, while the lowest quantity indicator, namely *quantita*

## VII. Conclusion and Suggestion

Based on the results of data analysis as described above, the following conclusions can be drawn

1. Workload has a positive and significant influence on burnout of nurses in Surabaya Hospital
2. Workload has a negative and significant effect on the work-life balance of hospital nurses in Surabaya
3. Workload has a positive and significant effect on the performance of hospital nurses in Surabaya.
4. Self-efficacy has a negative and significant effect on burnout of Surabaya Hospital nurses.
5. Self-efficacy has a positive and significant effect on the Work-Life Balance of hospital nurses in Surabaya.
6. Self-efficacy has a positive and significant effect on the performance of nurses at Surabaya Hospital.
7. Work ethic has an insignificant effect on burnout in hospital nurses in Surabaya
8. Work ethic has a positive and significant effect on Work-Life Balance in hospital nurses in Surabaya.
9. Work ethic has an insignificant effect on performance in hospital nurses in Surabaya.
10. Burnout has an insignificant effect on the Work-Life Balance of hospital nurses in Surabaya.
11. Burnout has a negative and significant effect on the performance of nurses at Surabaya Hospital.
12. Work-Life Balance has an insignificant effect on the performance of hospital nurses in Surabaya.

Based on the overall results of the research analysis and the conclusions above, the researcher conveyed the following suggestion:

1. Implement Time Management Tools: Encourage the use of time management and task prioritization tools to allow nurses to focus on critical tasks while ensuring rest periods
2. Promote Rest and Recovery: Advocate for institutional policies that promote regular breaks and time off to prevent burnout caused by excessive workload.
3. Training and Development Programs: Recommend the introduction of continuous professional development programs to enhance self-efficacy. These could include skill-building workshops and leadership training
4. Supportive Environment: Create a work environment where nurses receive constructive feedback, mentorship, and support from supervisors and peers to strengthen their self-efficacy
5. Foster a Culture of Ethical Practice: Encourage hospitals to instill a strong ethical code of conduct and promote values such as teamwork, respect, and accountability.
6. Promote Job Rotation: Propose job rotation strategies to reduce monotony and allow nurses to engage in various tasks, which can help in preventing burnout.
7. Performance Appraisal Systems: Encourage the use of clear and fair performance appraisal systems that are aligned with career progression, rewards, and recognition
8. Promote Collaborative Practices: Advocate for more teamwork-based approaches, where nurses work in collaborative teams, thereby distributing workload more evenly and enhancing individual and collective performance.

## Advice for the next Researcher

1. Conduct further research to explore other factors that may affect nurse performance such as

psychological and social factors

- Investigate the impact of additional variables, division of labor or task management job or organizational culture on Surabaya hospitals.

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