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Lampiran 1 *Informed Consent* dan Kuesioner



PERMOHONAN MENJADI RESPONDEN PENELITIAN

Kepada Yth.

Ibu selaku responden
di
Tempat.

Dengan Hormat,

Saya yang bertanda tangan dibawah ini adalah mahasiswa pascasarjana departemen keselamatan dan kesehatan kerja program studi S2 ilmu kesehatan masyarakat fakultas kesehatan masyarakat universitas hasanuddin.

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Akan mengadakan penelitian tentang —FAKTOR YANG BERPENGARUH TERHADAP KINERJA PERAWAT PEREMPUAN DI RUMAH SAKIT IBNU SINA MAKASSAR. Untuk itu saya mohon kesediaan Ibu untuk berpartisipasi menjadi responden dalam penelitian ini. Segala hal yang bersifat rahasia akan saya rahasiakan dan saya gunakan hanya untuk kepentingan penelitian ini.

Apabila Ibu bersedia menjadi responden, maka saya bermohon untuk menandatangani lembar persetujuan yang tersedia. Atas perhatian dan kesediaan serta kerjasama yang baik dari Ibu, saya ucapkan terima kasih.

Peneliti



Rijalul Fikri
(K012192003)

Lampiran 2

PERNYATAAN KESEDIAN MENJADI RESPONDEN

Yang bertanda tangan dibawah ini:

Nama Resonden :

Umur :

Dengan ini menyatakan bahwa saya telah mendapatkan penjelasan mengenai maksud dari pengumpulan data untuk penelitian tentang FAKTOR YANG BERPENGARUH TERHADAP KINERJA PERAWAT PEREMPUAN DI RUMAH SAKIT IBNU SINA MAKASSAR Untuk itu, secara sukarela saya menyatakan bersedia menjadi responden penelitian tersebut. Adapun bentuk kesediaan saya adalah:

1. Bersedia ditemui dan memberi keterangan yang di perlukan untuk keperluan penelitian
2. Bersedia mengisi kuesioner

Demikianlah pernyataan ini saya buat dengan sebenarnya dan dengan penuh kesadaran tanpa paksaan.

Makassar, November 2023

Responden

(.....)

Lampiran 3

KUESIONER FAKTOR YANG BERPENGARUH TERHADAP KINERJA PERAWAT DI RUMAH SAKIT IBNU SINA MAKASSAR

Bapak/Ibu, Saudara/I responden yang terhormat, dalam rangka pengumpulan data untuk sebuah penelitian dan kepentingan ilmiah, saya mohon kesediaannya menjawab dan mengisi beberapa pertanyaan dari kuesioner yang diberikan di bawah ini.

DATA RESPONDEN

1. Nama :
2. Umur :
3. Jenis kelamin : a. Laki-laki b. Perempuan
4. Pendidikan :
 1. DIII
 2. S1
 3. Ners
5. Masa kerja :
6. Stastus Kepegawaian :

Kuisisioner Beban Kerja Perawat

(Nursalam, 2017)

Berilah tanda (v) pada kolom angka yang ada pada masing-masing pertanyaan dengan pilihan sesuai yang anda alami :

Kode : 4 = Tidak Menjadi Beban Kerja 3 = Beban Kerja Ringan

2 = Beban Kerja Sedang 1 = Beban Kerja Berat

No	Pertanyaan	1	2	3	4
1	Melakukan observasi pasien selama jam kerja				
2	Banyak jenis pekerjaan yang harus dilakukan demi keselamatan pasien				
3	Beragamnya jenis pekerjaan yang harus dilakukandemi keselamatan pasien				
4	Kontak langsung perawat dengan pasien di ruangan secara terus menerus selama jam kerja				
5	Kurangnya tenaga perawat di ruangan dibandingkan dengan klien				
6	Pengetahuan dan kemampuan yang dimiliki tidak mampu mengimbangi tuntutan pekerjaan				
7	Harapan pimpinan rumah sakit terhadap pelayanan yang berkualitas				
8	Tuntutan keluarga untuk keselamatan pasien				
9	Setiap saat dihadapkan pada keputusan yang tepat				
10	Tanggung jawab dalam melaksanakan perawatan klien				
11	Setiap saat menghadapi klien dengan karakteristik				
12	Tugas pemberian obat-obatan yang diberikan secara Intensif				
13	Tindakan penyelamatan pasien				

Kuisisioner *Burnout*

Jawablah pertanyaan dibawah ini dengan memberi tanda *checklist* pada angka yang sudah disediakan dengan keterangan sebagai berikut :

1= Tidak Pernah 2 =Kadang 3=Sering 4=Selalu

No	Pertanyaan	1	2	3	4
Kelelahan Emosional					
1	Saya merasakan emosi saya terkuras karena Pekerjaan				
2	Saya merasa sangat lelah di akhir jam kerja (dinas)				
3	Saya merasa lelah saat bangun pagi karena membayangkan beratnya menjalani pekerjaan (banyaknya tugas yang harus dikerjakan sesuai dengan kompetensi)				
4	Saya merasa orang-orang yang bekerja di rumah sakit menyusahkan saya				
5	Saya merasa frustrasi dengan pekerjaan sebagai Perawat				
6	Saya merasa lelah dengan pekerjaan saya				
7	Saya merasa sudah bekerja terlalu keras sebagai Perawat				
8	Saya merasa orang-orang yang bekerja rumah sakit menyusahkan dengan terlalu banyak tekanan pada saya				
9	Saya merasa sudah di ujung tanduk saat tugas yang saya rasakan sudah sangat berat				
Depersonalisasi					
No	Pertanyaan	1	2	3	4
1	Saya merasa saya memperlakukan pasien sebagai objek yang tidak perlu dipahami secara personal (yang penting saya bisa mendapatkan kompetensi)				
2	Sejak saya menjadi perawat, saya tidak banyak melibatkan perasaan				

3	Saya khawatir pekerjaan ini akan membuat saya sulit secara emosional.				
4	Saya tidak terlalu peduli dengan klien, (yang penting menjalankan tugas saja)				
5	Saya merasa pasien menyalahkan saya seperti pasien berbohong atas keluhannya (pasien yang suka cari perhatian)				
Rendahnya Prestasi Pribadi					
1	Saya dengan mudah memahami perasaan pasien				
2	Saya dapat menyelesaikan masalah pasien secara Efektif				
3	Saya merasa dapat membawa mempengaruhi positif pada kehidupan orang lain melalui profesi sebagai perawat				
4	Saya merasa sangat energik saat melaksanakan praktik profesi				
5	Saya dapat dengan mudah menciptakan suasana Santai				
6	Saya merasa senang bekerja sebagai perawat				
7	Saya merasa telah menyelesaikan tugas sesuai tujuan (SOP)				
8	Saya merasa sangat tenang dalam menangani masalah emosional (sebagai perawat)				
	Total				

Kuisisioner Kinerja Perawat

Petunjuk pengisian :

1. Isikan jawaban yang menurut anda benar.
2. Berilah tanda (v) pada kolom angka yang ada pada masing-masing pertanyaan dengan pilihan sesuai yang anda alami.

Kode :

Pernyataan Positif

1. SS = Sangat Setuju

2. KS = Kurang Setuju

3. S = Setuju

4. TS = Tidak Setuju

Pernyataan Negatif

4. SS = Sangat Setuju

3. KS = Kurang Setuju

2. S = Setuju

1. TS = Tidak Setuju

No	Standar Kinerja	SS	S	KS	TS
1	Saya siap tanggap bila pasien membutuhkan dan saya mudah di hubungi				
2	Sebagai perawat tidak memperhatikan keluhan pasien				
3	Saya tidak bekerja sama dengan pasien dan keluarganya dalam menyelesaikan masalah				
4	Saya bekerja sama dengan tim sejawat perawat dan tim medis dalam menyelesaikan masalah pasien				
5	Saya dalam memberikan pelayanan kepada pasien penuh perhatian sesuai dengan kebutuhan/harapan Pasien				
6	Saya tidak mendengarkan keluhan pasien dan saya acuh tak acuh				
7	Dalam memberikan pelayanan saya selalu cepat dan tepat				
8	Kecepatan saya dalam memberikan pelayanan memerlukan waktu tunggu yang pendek				
9	Saya sopan terhadap pasien, keluarga pasien, tim sejawat perawat dan tim kesehatan lain				
10	Saya tidak menghargai pasien, keluarga pasien, tim sejawat perawat dan tim kesehatan lain				
11	Saya jujur antara pikiran dan tindakan				
12	Saya bertanggung jawab atas tindakan dan menjaga kerahasiaan pasien				

Lampiran 4
Lampiran. Hasil Output SPSS

Uji Validitas
BEBAN KERJA

Correlations

		BK1	BK2	BK3	BK4	BK5	BK6	BK7	BK8	BK9	BK10	BK11	BK12	BK13	TOTAL BEBAN KERJA
BK1	Pearson Correlation	1	.341**	.372**	.786**	.365**	.575**	.341**	-.507**	-.246**	-.690**	-.372**	-.098	-.372**	.607**
	Sig. (2-tailed)		.000	.000	.000	.000	.000	.000	.000	.005	.000	.000	.270	.000	.000
	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129
BK2	Pearson Correlation	.341**	1	.842**	.265**	.453**	.373**	1.000**	.387**	-.606**	-.393**	.200*	.313**	.317**	.723**
	Sig. (2-tailed)	.000		.000	.002	.000	.000	.000	.000	.000	.000	.023	.000	.000	.000
	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129
BK3	Pearson Correlation	.372**	.842**	1	.493**	.532**	.476**	.842**	.283**	-.553**	-.553**	.278**	.626**	.245**	.830**

BK11	Pearson Correlation	-.372**	.200*	.278**	.001	-.263**	.096	.200*	.592**	-.030	.064	1	.705**	.306**	.227**
	Sig. (2-tailed)	.000	.023	.001	.994	.003	.280	.023	.000	.732	.470	.000	.000	.010	
	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129
BK12	Pearson Correlation	-.098	.313**	.626**	.384**	.223*	.257**	.313**	.488**	-.139	-.213*	.705**	1	.345**	.565**
	Sig. (2-tailed)	.270	.000	.000	.000	.011	.003	.000	.000	.116	.015	.000	.000	.000	
	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129
BK13	Pearson Correlation	-.372**	.317**	.245**	-.121	.221*	.094	.317**	.737**	-.021	.198*	.306**	.345**	1	.270**
	Sig. (2-tailed)	.000	.000	.005	.173	.012	.291	.000	.000	.816	.024	.000	.000	.002	
	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129
TOTAL	Pearson Correlation	.607**	.723**	.830**	.773**	.602**	.786**	.723**	.239**	-.489**	-.680**	.227**	.565**	.270**	1
BEBAN	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.006	.000	.000	.010	.000	.002	
KERJA	N	129	129	129	129	129	129	129	129	129	129	129	129	129	129

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

KE5	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.446**	.440**	.573**	.446**	1	.667**	.393**	.572**	.597**	.653**
	Sig. (2-tailed)	.000	.000	.000	.000		.000	.000	.000	.000	.000
KE6	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.567**	.722**	.864**	.567**	.667**	1	.897**	.938**	.904**	.957**
	Sig. (2-tailed)	.000	.000	.000	.000	.000		.000	.000	.000	.000
KE7	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.412**	.674**	.835**	.412**	.393**	.897**	1	.875**	.872**	.879**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000		.000	.000	.000
KE8	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.716**	.769**	.906**	.716**	.572**	.938**	.875**	1	.949**	.981**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000		.000	.000
KE9	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.641**	.730**	.961**	.641**	.597**	.904**	.872**	.949**	1	.963**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000		.000
TOTAL KELELAHAN EMOSIONAL	N	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.724**	.821**	.932**	.724**	.653**	.957**	.879**	.981**	.963**	1

Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
N	129	129	129	129	129	129	129	129	129	129

** . Correlation is significant at the 0.01 level (2-tailed).

DEPERSONALISASI

Correlations

		DEP1	DEP2	DEP3	DEP4	DEP5	DEPERSONALISASI
DEP1	Pearson Correlation	1	.685**	.875**	.393**	.897**	.812**
	Sig. (2-tailed)		.000	.000	.000	.000	.000
	N	129	129	129	129	129	129
DEP2	Pearson Correlation	.685**	1	.884**	.852**	.894**	.965**
	Sig. (2-tailed)	.000		.000	.000	.000	.000
	N	129	129	129	129	129	129
DEP3	Pearson Correlation	.875**	.884**	1	.572**	.938**	.975**
	Sig. (2-tailed)	.000	.000		.000	.000	.000
	N	129	129	129	129	129	129
DEP4	Pearson Correlation	.393**	.852**	.572**	1	.667**	.722**
	Sig. (2-tailed)	.000	.000	.000		.000	.000
	N	129	129	129	129	129	129
DEP5	Pearson Correlation	.897**	.894**	.938**	.667**	1	.946**
	Sig. (2-tailed)	.000	.000	.000	.000		.000

PENCAPAIAN PRESTASI DIRI	Pearson Correlation	.820**	.832**	.893**	.564**	.766**	.925**	.593**	.515**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	
	N	129	129	129	129	129	129	129	129	129

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

KINERJA

Correlations

		K1	K2	K3	K4	K5	K6	K7	K8	K9	K10	K11	K12	KINERJA
K1	Pearson Correlation	1	.136	.305**	.526**	-.132	-.300**	1.000**	.488**	1.000**	-.300**	.526**	.526**	.778**
	Sig. (2-tailed)		.124	.000	.000	.136	.001	.000	.000	.000	.001	.000	.000	.000
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
K2	Pearson Correlation	.136	1	.906**	-.609**	.554**	.882**	.136	-.365**	.136	.882**	-.609**	-.609**	.553**
	Sig. (2-tailed)	.124		.000	.000	.000	.000	.124	.000	.124	.000	.000	.000	.000
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
K3	Pearson Correlation	.305**	.906**	1	-.427**	.683**	.735**	.305**	-.224*	.305**	.735**	-.427**	-.427**	.705**
	Sig. (2-tailed)	.000	.000		.000	.000	.000	.000	.011	.000	.000	.000	.000	.000

K4	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.526**	-.609**	-.427**	1	-.251**	-.764**	.526**	.928**	.526**	-.764**	1.000**	1.000**	.301**
	Sig. (2-tailed)	.000	.000	.000		.004	.000	.000	.000	.000	.000	.000	.000	.001
K5	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	-.132	.554**	.683**	-.251**	1	.549**	-.132	.048	-.132	.549**	-.251**	-.251**	.432**
	Sig. (2-tailed)	.136	.000	.000	.004		.000	.136	.589	.136	.000	.004	.004	.000
K6	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	-.300**	.882**	.735**	-.764**	.549**	1	-.300**	-.531**	-.300**	1.000**	-.764**	-.764**	.217
	Sig. (2-tailed)	.001	.000	.000	.000	.000		.001	.000	.001	.000	.000	.000	.014
K7	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	1.000**	.136	.305**	.526**	-.132	-.300**	1	.488**	1.000**	-.300**	.526**	.526**	.778**
	Sig. (2-tailed)	.000	.124	.000	.000	.136	.001		.000	.000	.001	.000	.000	.000
K8	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	.488**	-.365**	-.224*	.928**	.048	-.531**	.488**	1	.488**	-.531**	.928**	.928**	.479**
	Sig. (2-tailed)	.000	.000	.011	.000	.589	.000	.000		.000	.000	.000	.000	.000
K9	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson Correlation	1.000**	.136	.305**	.526**	-.132	-.300**	1.000**	.488**	1	-.300**	.526**	.526**	.778**

K10	Sig. (2-tailed)	.000	.124	.000	.000	.136	.001	.000	.000		.001	.000	.000	.000
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson	-.300**	.882**	.735**	-.764**	.549**	1.000**	-.300**	-.531**	-.300**	1	-.764**	-.764**	.217*
	Correlation													
	Sig. (2-tailed)	.001	.000	.000	.000	.000	.000	.001	.000	.001		.000	.000	.014
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
K11	Pearson	.526**	-.609**	-.427**	1.000**	-.251**	-.764**	.526**	.928**	.526**	-.764**	1	1.000**	.301**
	Correlation													
	Sig. (2-tailed)	.000	.000	.000	.000	.004	.000	.000	.000	.000	.000		.000	.001
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson	.526**	-.609**	-.427**	1.000**	-.251**	-.764**	.526**	.928**	.526**	-.764**	1.000**	1	.301**
	Correlation													
K12	Sig. (2-tailed)	.000	.000	.000	.000	.004	.000	.000	.000	.000	.000	.000		.001
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
	Pearson	.778**	.553**	.705**	.301**	.432**	.217*	.778**	.479**	.778**	.217*	.301**	.301**	1
	Correlation													
	Sig. (2-tailed)	.000	.000	.000	.001	.000	.014	.000	.000	.000	.014	.001	.001	
	N	129	129	129	129	129	129	129	129	129	129	129	129	129
KINERJA	Sig. (2-tailed)													
	N													

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Uji Normalitas

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Usia	.465	129	.000	.543	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Jenis Kelamin	.532	129	.000	.328	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	Df	Sig.	Statistic	df	Sig.
Pendidikan	.348	129	.000	.708	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	Df	Sig.	Statistic	df	Sig.
Masa_Kerja	.527	129	.000	.062	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Status Kepegawaian	.434	129	.000	.586	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Beban_Kerja	.540	129	.000	.164	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Kelelahan Emosional	.394	129	.000	.620	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Depersonalisasi	.540	129	.000	.164	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Pencapaian Prestasi Diri	.534	129	.000	.102	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Bornout	.534	129	.000	.102	129	.000

a. Lilliefors Significance Correction

Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Kinerja Perawat	.347	129	.000	.724	129	.000

a. Lilliefors Significance Correction

Uji Univariat

Usia

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 29-39 Tahun	96	74.4	74.4	74.4
> 40 Tahun	33	25.6	25.6	100.0
Total	129	100.0	100.0	

Jenis Kelamin

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Laki-Laki	12	9.3	9.3	9.3
Perempuan	117	90.7	90.7	100.0
Total	129	100.0	100.0	

Pendidikan

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid DIII	71	55.0	55.0	55.0
S1	22	17.1	17.1	72.1
Ners	36	27.9	27.9	100.0
Total	129	100.0	100.0	

Masa_Kerja

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 3-5 Tahun	1	.8	.8	.8
> 5 Tahun	128	99.2	99.2	100.0
Total	129	100.0	100.0	

Status Kepegawaian

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Kontrak	41	31.8	31.8	31.8
Tetap	88	68.2	68.2	100.0
Total	129	100.0	100.0	

Beban_Kerja

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Beban Kerja Sedang	125	96.9	96.9	96.9
Beban Kerja Ringan	4	3.1	3.1	100.0
Total	129	100.0	100.0	

Kelelahan Emosional

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Rendah	78	60.5	60.5	60.5
Sedang	51	39.5	39.5	100.0
Total	129	100.0	100.0	

Depersonalisasi

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Rendah	129	100.0	100.0	100.0

Pencapaian Prestasi Diri

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Rendah	129	100.0	100.0	100.0

Bornout

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Tidak Mengalami Bornout	129	100.0	100.0	100.0

Kinerja Perawat

	Frequency	Percent	Valid Percent	Cumulative Percent
--	-----------	---------	---------------	--------------------

	Kurang	48	37.2	37.2	37.2
Valid	Cukup	75	58.1	58.1	95.3
	Baik	6	4.7	4.7	100.0
	Total	129	100.0	100.0	

Uji Bivariat

Usia * Bornout

Crosstab

		Bornout		Total
		Tidak Mengalami Bornout		
Usia	29-39 Tahun	Count	96	96
		% within Usia	100.0%	100.0%
		% of Total	74.4%	74.4%
	> 40 Tahun	Count	33	33
		% within Usia	100.0%	100.0%
		% of Total	25.6%	25.6%
Total	Count	129	129	
	% within Usia	100.0%	100.0%	
	% of Total	100.0%	100.0%	

Jenis Kelamin * Bornout

Crosstab

			Bornout	Total
			Tidak Mengalami Bornout	
Jenis Kelamin	Laki-Laki	Count	12	12
		% within Jenis Kelamin	100.0%	100.0%
		% of Total	9.3%	9.3%
	Perempuan	Count	117	117
		% within Jenis Kelamin	100.0%	100.0%
Total	Count	129	129	
	% within Jenis Kelamin	100.0%	100.0%	
	% of Total	100.0%	100.0%	

Pendidikan * Bornout

Crosstab

			Bornout	Total
			Tidak Mengalami Bornout	
Pendidikan	DIII	Count	71	71
		% within Pendidikan	100.0%	100.0%
		% of Total	55.0%	55.0%
	S1	Count	22	22
		% within Pendidikan	100.0%	100.0%
% of Total	17.1%	17.1%		

	Count	36	36
Ners	% within Pendidikan	100.0%	100.0%
	% of Total	27.9%	27.9%
	Count	129	129
Total	% within Pendidikan	100.0%	100.0%
	% of Total	100.0%	100.0%

Masa_Kerja * Bornout

Crosstab

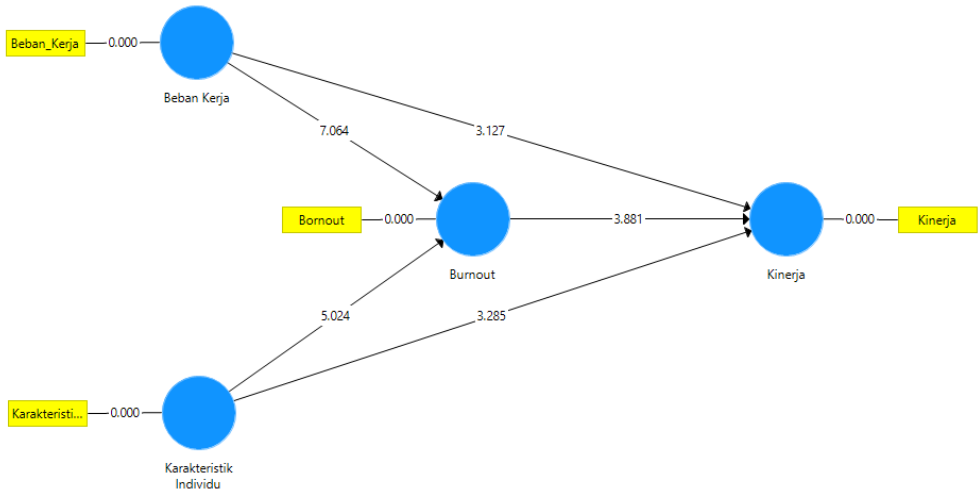
		Bornout	Total
		Tidak Mengalami Bornout	
	Count	1	1
3-5 Tahun	% within Masa_Kerja	100.0%	100.0%
	% of Total	0.8%	0.8%
	Count	128	128
> 5 Tahun	% within Masa_Kerja	100.0%	100.0%
	% of Total	99.2%	99.2%
	Count	129	129
Total	% within Masa_Kerja	100.0%	100.0%
	% of Total	100.0%	100.0%

Status Kepegawaian * Bornout

Crosstab

		Bornout	Total	
		Tidak Mengalami Bornout		
Status Kepegawaian	Kontrak	Count	41	41
		% within Status Kepegawaian	100.0%	100.0%
		% of Total	31.8%	31.8%
	Tetap	Count	88	88
		% within Status Kepegawaian	100.0%	100.0%
		% of Total	68.2%	68.2%
Total	Count	129	129	
	% within Status Kepegawaian	100.0%	100.0%	
	% of Total	100.0%	100.0%	

Uji Path Analysis



Path Coefficients

Mean, STDEV, T-Values, P-Val...	Confidence Intervals	Confidence Intervals Bias Co...	Samples	Copy to Clipboard:	Excel Format	R Format
	Original Sampl...	Sample Mean (...)	Standard Devia...	T Statistics (JO/...	P Values	
Beban Kerja -> Burnout	0.523	0.525	0.074	7.064	0.000	
Beban Kerja -> Kinerja	-0.332	-0.327	0.106	3.127	0.002	
Burnout -> Kinerja	0.632	0.620	0.163	3.881	0.000	
Karakteristik Individu -> Burnout	0.411	0.409	0.082	5.024	0.000	
Karakteristik Individu -> Kinerja	0.422	0.428	0.128	3.285	0.001	

Lampiran 5

Rekomendasi Persetujuan Etik



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN
RISET, DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN
FAKULTAS KESEHATAN MASYARAKAT
Jln. Perintis Kemerdekaan Km. 10 Makassar 90245, Telp. (0411) 585658,
E-mail : fk.unhas@gmail.com, website: <https://fk.unhas.ac.id/>

REKOMENDASI PERSETUJUAN ETIK

Nomor: 001/UN4.14.1/TP.01.02/2024

Tanggal: 01 Januari 2024

Dengan ini Menyatakan bahwa Protokol dan Dokumen yang Berhubungan dengan Protokol berikut ini telah mendapatkan Persetujuan Etik:

No. Protokol	261223062303	No. Sponsor Protokol	
Peneliti Utama	Rijalul Fikri	Sponsor	Pribadi
Judul Peneliti	Faktor yang Berpengaruh Terhadap Kinerja Perawat di Rumah Sakit Ibnu Sina Makassar		
No. Versi Protokol	1	Tanggal Versi	26 Desember 2023
No. Versi PSP	1	Tanggal Versi	26 Desember 2023
Tempat Penelitian	Rumah Sakit Ibnu Sina Makassar		
Judul Review	<input type="checkbox"/> Exempted <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Fullboard	Masa Berlaku 01 Januari 2024 sampai 01 Januari 2025	Frekuensi review lanjutan
Ketua Komisi Etik Penelitian	Nama : Prof.dr. Veni Hadju, M.Sc., Ph.D	Tanda tangan 	Tanggal 01 Januari 2024
Sekretaris komisi Etik Penelitian	Nama : Dr. Wahiduddin, SKM., M.Kes	Tanda tangan 	Tanggal 01 Januari 2024

Kewajiban Peneliti Utama :

1. Menyerahkan Amandemen Protokol untuk persetujuan sebelum di implementasikan
2. Menyerahkan Laporan SAE ke Komisi Etik dalam 24 Jam dan dilengkapi dalam 7 hari dan Laporan SUSAR dalam 72 Jam setelah Peneliti Utama menerima laporan
3. Menyerahkan Laporan Kemajuan (progress report) setiap 6 bulan untuk penelitian resiko tinggi dan setiap setahun untuk penelitian resiko rendah
4. Menyerahkan laporan akhir setelah Penelitian berakhir
5. Melaporkan penyimpangan dari protocol yang disetujui (protocol deviation/violation)
6. Mematuhi semua peraturan yang ditentukan



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Research Article

Factors Affecting Nurse Performance at Ibnu Sina Hospital Makassar

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Abstract

Introduction: Nurses are one of the health workers to get responses, information and answers that are always present in every hospital and are the spearhead of hospital health services. Based on data from The National Institute Occupational Safety and Health (NIOSH) that jobs related to hospitals or health have a high tendency to be exposed to work stress or depression, as well as burnout. **Methods:** This study was conducted in November-December 2023. The type of research used is observational analytic with a *cross sectional* design that explains the relationship between variables through hypothesis testing. This research is a quantitative approach using *(path analysis)*. **Results:** Based on the results of the Path Analysis test using SmartPLS, it was found that there was an effect of workload on burnout with a value of $p = 0.000$, then there was also an effect of individual characteristics on burnout with a value of $p = 0.000$, there was an effect of workload on performance with a value of $p = 0.014$, there was also an effect of individual characteristics on performance with a value of $p = 0.019$, burnout also had an influence on performance with a value of $p = 0.000$, there was also an indirect effect of workload on performance through burnout with a value of $p = 0.003$, as well as an indirect effect of individual characteristics on performance through burnout with a value of $p = 0.000$. **Conclusion:** There is a direct effect of workload on burnout in nurses, There is a direct effect of individual characteristics on burnout in nurses, There is a direct effect of workload on performance in nurses, There is a direct effect of individual characteristics on performance in nurses, There is a direct effect of burnout on performance in nurses, There is an indirect effect of workload on performance through burnout in nurses, There is an indirect effect of individual characteristics on performance through burnout in nurses.

Keywords: Workload, Individual Characteristics, Nurse Performance, Burnout

Introduction

Hospital is an agency engaged in health services. Health services provided by hospitals include promotive, preventive, curative, and rehabilitative services, which provide inpatient, outpatient, and emergency services. Health services that are currently developing in hospitals are not only about hospital buildings (such as size, complexity, number of units), the number of

qualifications of medical and non-medical staff, financial systems and information systems, but about the quality of service quality of health workers in providing services. The implementation of health services in accordance with these objectives of various types with diverse scientific tools must integrate with each other, one of the most important in the circle of service providers is nurses.[1] Performance is the result of a specific work process in a planned time and place of the employee and the organisation concerned. Better employee performance is expected to have a positive impact on improving organisational performance. Performance or performance is a target or result that must be achieved.[2] In a professional company, performance is defined from the point of view of value creation related to the input, process, and output chain. employee performance will be greatly influenced by the way the individual responds to conditions that affect the work process. Employee performance generally includes the following elements (1) quantity and results; (2) quality and results; (3) timeliness of results; (4) attendance; (5) ability to work together.[3]

Based on data from The National Institute Occupational Safety and Health (NIOSH) that jobs related to hospitals or health have a high tendency to be exposed to occupational stress or depression, as well as burnout. while the American National Association for Occupational Health (ANAHO) places the incidence of occupational stress in nurses at the top of the first forty cases of occupational stress in workers. [4] This can be due to the demands of the task to be able to act quickly and precisely in dealing with their patients.

Workload is the ability of a worker to work differently from one another and depends on the level of skill, physical fitness, nutritional condition, gender, age and body size of the worker concerned.[5] Each individual has different characteristics to make it easier to achieve goals, of course, an agency must be able to choose nurses who have good characteristics and must also be in accordance with what the agency wants.[6] This is because the accuracy in choosing an agency also affects the results of its performance. Because the ability of nurses is reflected in good and optimal performance.[7]

Methods

Research Type and Design

The type of research used is observational analytic with a *cross sectional* design that explains the relationship between variables through hypothesis testing. This research is a quantitative approach using (*path analysis*).

Time and Location

This research was conducted from November to December 2023. The research location is Ibnu Sina Hospital Makassar.

Research Informants

The informants of this study were all nurses with permanent and contract employee status who worked at Ibnu Sina Hospital Makassar.

Data Collection Sources and Techniques

The data sources of this research are primary data and secondary data. Primary data was obtained through in-depth interviews. Secondary data Secondary data is obtained through literature study techniques, which are all efforts made by researchers to collect information that is relevant to the topic or problem under study. Literature studies are carried out by studying scientific books, research reports, research journals, and through electronic media. In addition, secondary data can be obtained from data belonging to the research location.

Data analysis

The data analysis technique in this study is the Miles and Huberman model data analysis technique. Descriptive Analysis data analysis technique is an analysis that describes the respondents' responses regarding the effect of workload, individual characteristics on nurse performance through bornout by distributing questionnaires to nurses who work in the inpatient installation section of Ibnu Sina Makassar Hospital which is the sample in this study. Path Analysis (PA) or path analysis is used to describe and test the relationship model between variables in the form of cause and effect (not a form of interactive / reciprocal relationship).

Results

Normality Test

Table 1 Normality Test Results

Data	Sig	Conclusion
Age	0.000	Data Not Normally Distributed
Gender	0.000	Data Not Normally Distributed
Education	0.000	Data Not Normally Distributed
Period of Service	0.000	Data Not Normally Distributed
Employment Status	0.000	Data Not Normally Distributed
Workload	0.000	Data Not Normally Distributed
Emotional Fatigue	0.000	Data Not Normally Distributed
Depersonalisation	0.000	Data Not Normally Distributed
Self-Achievement	0.000	Data Not Normally Distributed
Nurse Performance	0.000	Data Not Normally Distributed

Source: Primary Data, 2023

Based on table 4.6, it can be seen that in the workload variable, individual characteristics consisting of (age, gender, education, tenure and employment status), Bornout consisting of (emotional exhaustion, depersonalisation and self-achievement), and nurse performance all show a sig value of $0.000 < 0.05$, these results indicate that the data is not normally distributed because it is less than the significant level of 0.05.

Univariate Test

a. Frequency Distribution of Individual Characteristics

To see the distribution of individual characteristic variables consisting of age, gender, education, length of service and employment status can be seen as follows:

1) Age

Table 4.2
Frequency Distribution of Age Variables

Age (Years)	(n)	Percent (%)
29-39 Years	96	74,4
>40 Years	33	25,6
Total	129	100
Gender		
Male	12	9,3
Women	117	90,7
Total	129	100
Education		
DIII	71	55,0
S1	22	17,1
Ners	36	27,9
Total	129	100
Period of Service		
3-5 Years	1	0,8
>5 Years	128	99,2
Total	129	100
Employment Status		
Contract	41	31,8
Stay	88	68,2
Total	129	100
Workload		
Medium	125	96,9
Lightweight	4	3,1
Total	129	100
Bornout		
No Bornout	129	100,0
Experiencing Bornout	0	0
Total	129	100

Source: Primary Data, 2023

Based on table 4.7 above, respondents aged 29 - 39 years were 96 people (74.4%), then those aged more than 40 years were 33 people (25.6%), with 12 male respondents (9.3%), then 117 female respondents (90.7%). The category of educational background of respondents who have the latest DIII education is 71 people (55.0%), then those who have the latest S1 education are 22 people (17.1%), and those who have the latest Ners education are 36 people (27.9%), with a tenure of 3-5 years as many as 1 person (0.8%), then those who have a tenure of >5 years are 128 people (99.2%). A total of 41 people (31.8%) were contract employees, then those with permanent employment status were 88 people (68.2%), with a moderate workload of 125 people

(96.9%), then respondents with a light workload category were 4 people (3.1%). All respondents did not experience burnout, namely 129 people (100%).

The burnout variables consisting of emotional exhaustion, depersonalisation, and self-achievement, their frequency distribution can be seen as follows:

2) Emotional Fatigue

Table 4.14

Frequency Distribution of Emotional Fatigue Variables

Emotional Fatigue	(n)	Percent (%)
Low	78	60,5
Medium	51	39,5
Total	129	100
Depersonalisation		
Low	129	100,0
Medium	0	0
Total	129	100
Self-Achievement		
Low	129	100,0
Medium	0	0
Total	129	100
Performance		
Less	48	37,2
Simply	75	58,1
Good	6	4,7
Total	129	100

Source: Primary Data, 2023

Based on table 4.14 above, 78 respondents (60.5%) experienced low category emotional exhaustion, then 51 respondents (39.5%) experienced moderate category emotional exhaustion. While all respondents experienced low category depersonalisation as many as 129 people (100.0%). In the category of self-achievement, all respondents experienced low self-achievement as many as 129 people (100.0%). For the performance of respondents who had poor performance as many as 48 people (37.2%), then those who had sufficient performance were 75 people (58.1%), and those who had good performance were 6 people (4.7%).

Path Analysis Test

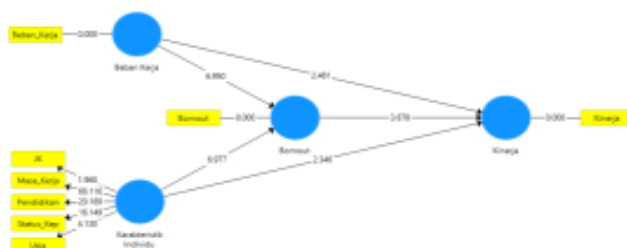


Figure 4.1 Path Analysis

Based on the conceptual framework proposed in this study, hypothesis testing is carried out through *pathway* analysis testing on structural equations. Testing using path analysis is carried out because the purpose of this study is to determine the direct and indirect effects of independent variables on the dependent variable through intervening variables.

The statistical test results obtained from the *p* value (0.000) < 0.05 which means that the *p* value is less than the significance level of 0.05 so that there is an indirect effect of individual characteristics on performance through burnout.

DISCUSSION

Based on the results of the Path Analysis test using SmartPLS, it was found that there was an effect of workload on burnout with a value of $p = 0.000$, then there was also an effect of individual characteristics on burnout with a value of $p = 0.000$, there was an effect of workload on performance with a value of $p = 0.014$, there was also an effect of individual characteristics on performance with a value of $p = 0.019$, burnout also had an influence on performance with a value of $p = 0.000$, there was also an indirect effect of workload on performance through burnout with a value of $p = 0.003$, as well as the indirect effect of individual characteristics on performance through burnout with a value of $p = 0.000$.

The Effect of Workload on Burnout

Burnout is a psychological condition in someone who does not manage to cope with work stress, causing prolonged stress caused by personal factors and work environment factors. This situation will have an impact on the quality of relationships with patients and a decrease in the quality of relationships with colleagues which will have an impact on providing low quality services and decreasing work engagement and individual relationships with the organisation.

The workload that occurs in nurses while caring for patients is due to the disproportionate number of nurses and patients they have to handle. Moreover, patient safety is a big responsibility for nurses in terms of caring and serving patients. However, if the workload is high, nurses will feel both physical and mental fatigue.

In research that has been conducted on nurses at Ibnu Sina Hospital Makassar, the results show that there is a significant influence between workload and burnout where the statistical test results obtained a *p* value (0.000) > 0.05. In addition, the magnitude of the influence of workload variables on burnout is 6.950 and the rest is influenced by other variables outside the workload indicator.

This is in line with research conducted by which shows that there is an influence between workload and burnout. The results of this study are also supported by research conducted by Henri (2017) which has results $p < 0.05$ which means that workload has an influence on burnout [8]

Perceived workload is measured based on a description of the actions performed by nurses in the room. Every job is a burden for those who do it including physical, mental, or social burdens. Work that is heavy in nature requires frequent breaks and short working hours, while if the work time is increased beyond the ability of the workforce then it will cause burnout.

The Effect of Individual Characteristics on Burnout

Individual characteristics in this case are age, gender, education, length of service, and employment status. The average age of nurses ranges from 29-39 years, then nurses who are predominantly female and on average their last education is DIII, almost all of them have

worked for more than 5 years and most of them have permanent employee status for nurses at Ibnu Sina Hospital Makassar who were sampled.

Burnout syndrome is a condition when someone feels severe stress with their work. Burnout syndrome is classified into two, namely there are internal factors where there are age, gender, and tenure and external factors where heavy workloads, conflicts with fellow colleagues in the workplace, lack of resources and monotonous work can affect burnout syndrome in nurses.

In research that has been conducted on nurses at the Ibnu Sina Hospital Makassar, the results show that there is a significant influence between individual characteristics and burnout where the statistical test results obtained a p value $(0.000) > 0.05$. In addition, the magnitude of the influence of individual characteristics variables on burnout is 6.977 and the rest is influenced by other variables outside the individual characteristics indicator.

This is in line with research conducted previously which states that there is a significant influence between individual characteristics and burnout.[9] This is also in line with other studies which say that the characteristics of nurses, namely age, gender and length of service, greatly affect the occurrence of work stress to cause burnout in nurses. [10]

The Effect of Workload on Performance

Workload is the ability of the employee's body to accept work. Workload is also something that arises from the interaction between the demands of tasks, the work environment where used as a workplace, skills, behaviour and perceptions of workers. So it can be concluded that workload is an employee's ability to accept tasks from the Company within a predetermined period of time.

Performance is the quality and quantity of work achieved by an employee in carrying out his duties in accordance with the responsibilities given to him. Performance is strongly influenced by the workload and also the work environment where we work.

In research that has been conducted on nurses at the Ibnu Sina Hospital Makassar, the results show that there is a significant influence between workload and performance. Where from the results of the statistical test obtained a p value $(0.014) > 0.05$. In addition, the magnitude of the influence of workload variables on performance is 2.461 and the rest is influenced by other variables outside the workload indicator.

The workload experienced by nurses at Ibnu Sina Hospital Makassar is classified as moderate workload. This is partly because the patients who come are not balanced with the number of nurses in the hospital. In addition, most nurses carry out work that was not originally their job, making their workload increase.

The Effect of Individual Characteristics on Performance

Age, gender, education, tenure and employment status of nurses are included in the individual characteristics examined in this study. Individual characteristics are psychological processes that affect a person and are interpersonal factors that drive a person.

Nurse performance is part of health services. Nurse performance in nursing services is a form of nurse compliance in carrying out nursing care as a whole from the assessment, diagnosis, plan, implementation, and evaluation stages. The quality of nursing care provided to patients can describe the performance of nurses.

In research that has been conducted on nurses at the Ibnu Sina Hospital Makassar, the results show that there is a significant influence between individual characteristics and performance. Where from the results of the statistical test obtained a p value $(0.019) > 0.05$. In addition, the magnitude of the influence of the individual characteristics variable on performance is 2.346 and the rest is influenced by other variables outside the individual characteristics indicator.

Previous research says that gender, age and length of service affect performance, but other individual characteristics such as level of education and training also affect

performance.[11] This is also in line with other studies which say that gender and tenure have an influence on nurse performance. [12]

The Effect of Burnout on Performance

Burnout syndrome consists of emotional exhaustion, depersonalisation, and decreased self-esteem. Emotional exhaustion is the side that expresses the physical and emotional fatigue experienced as the basis and start of burnout syndrome. Depersonalisation is an attitude that shows hard/rough behaviour, negative behaviour, and indifference to others, then decreased self-achievement is the achievement of employees who have decreased so that they show negative feelings, unhappy and dissatisfied with their work.

Nurse performance is a measure of success in achieving nursing service goals. Service performance in providing nursing care is the application of skills or learning that has been received during the completion of the nursing education programme.

In research that has been conducted on nurses at the Ibnu Sina Hospital Makassar, the results show that there is a significant influence between burnout and performance Where from the results of the statistical test obtained a p value $(0.000) > 0.05$. In addition, the magnitude of the influence of the burnout variable on performance is 3.878 and the rest is influenced by other variables outside the burnout indicator.

This is in line with research conducted by Andini (2016) which says that prolonged stress and resulting burnout can affect the performance of an employee.[13] Likewise with other studies that say nurses who experience burnout can cause a decrease in performance. [14]

The Effect of Workload on Performance Through Burnout

Workload is the demands of daily work and is considered a source of burden. Excessive workload and low workload can create boredom in doing work. The high workload obtained by nurses while working will cause physical and emotional fatigue, decreased concentration and boredom felt by nurses.

Workload has an influence on burnout as well as having an influence on performance. Because if nurses have a high enough workload and result in burnout, the implementation and achievement of performance will also decrease.

The performance of health workers is one of the demands of the community towards the need for excellent or quality service. The performance of health workers is expected to be able to contribute effectively in improving the quality of health services, which will have an impact on general services in the organisation where they work which will lead to the welfare and quality of life of the community.

In research that has been conducted on nurses at the Ibnu Sina Hospital Makassar, the results show that there is a significant influence between workload and performance through burnout Where from the results of the statistical test obtained a p value $(0.003) > 0.05$. In addition, the magnitude of the influence of workload variables on performance through burnout is 2.982 and the rest is influenced by other variables outside the workload indicator.

This is in line with research conducted by Meri (2023)¹⁰ which says there is a significant effect of workload on performance through burnout on inpatient nurses at Pekanbaru Hospital. This is also in line with research conducted by Kurniawan (2023)¹¹ who also said that workload has an indirect effect on nurse performance through burnout as an intervening variable at Condong Catur Hospital.

The Effect of Individual Characteristics on Performance Through Burnout

Individual characteristics are a psychological process that influences individuals in obtaining, consuming and receiving goods and services and experiences. Good individual characteristics and must also be in accordance with what the Hospital wants.

According to nurses, even though they work according to their abilities, are carried out happily, show work enthusiasm and are balanced with improvements in individual characteristics such as increasing skills and patience in their work but are not supported by a

conducive situation regarding great responsibility for health and safety and appropriate rewards such as the salary provided can reduce the level of satisfaction with the hospital which can affect the onset of burnout in the form of fatigue. The existence of high ability individual characteristics in the company's operations will affect employee performance at work.

Burnout or fatigue experienced due to physical and psychological unhealthiness experienced by nurses due to many dependents can lead to decreased work results in service to patients. Burnout is a problem for organisations that results in decreased performance, in addition to decreased productivity performance. This means that nurses who experience physical, emotional, mental fatigue and feelings of helplessness indicated by muscle stiffness, easily feel angry, are prejudiced against others and their work, and feel depressed if they cannot take good care of patients will have an impact on the service so that it reduces nurse performance.

In research that has been conducted on nurses at Ibnu Sina Hospital Makassar, the results show that there is a significant influence between individual characteristics and performance through burnout. Where from the results of statistical tests obtained a p value $(0.000) > 0.05$. In addition, the magnitude of the influence of individual characteristics variables on performance through burnout is 4.169 and the rest is influenced by other variables outside the individual characteristics indicator.

This is in line with other studies which say that there is a significant influence between individual characteristics on performance through burnout as an intervening variable at PT Nusantara Medika Utama Hospital [2,8,15]. Likewise, research also says there is a positive influence of individual characteristics on performance through burnout at Bumi Massempulu Regional General Hospital.

Conclusion

Based on the results of the research and analysis of the variables studied, the following conclusions can be drawn:

There is a direct effect of workload on burnout in nurses, There is a direct effect of individual characteristics on burnout in nurses, There is a direct effect of workload on performance in nurses, There is a direct effect of individual characteristics on performance in nurses, There is a direct effect of burnout on performance in nurses, There is an indirect effect of workload on performance through burnout in nurses, There is an indirect effect of individual characteristics on performance through burnout in nurses.

Ethics statement

Prior to the research, this study was approved by the Health Research Ethics Committee (HREC) of Hasanuddin University, with recommendation number 001/UN4.14.1/TP.01.02/2024 dated 01 January 2024. Written informed consent was obtained from all research respondents with confidentiality maintained by the researcher.

Conflict of Interest Statement

The authors declare that there is no potential conflict of interest.

Source of funding

The authors received no financial support for the research, authorship, or publication of this article.

Data Availability Statement

All data generated or analysed during this research is included in this article.

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Lampiran 8

CURRICULUM VITAE



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Riwayat Pendidikan

1. SD : SD Negeri 152 Cemmeng Kabupaten Sinjai (2001-2007)
2. SMP : SMP Negeri 2 Kabupaten Sinjai (2007-2010)
3. MAN : MAN 2 Sinjai Utara Kabupaten Sinjai (2010-2013)
4. DIII : Akademi Keperawatan Anging Mammiri (2013-2016)
5. Strata 1 : S1 Sekolah Tinggi Ilmu Kesehatan Makassar (2016-2018)
6. Strata 2 : S2 Kesehatan Masyarakat, Peminatan K3 Universitas Hasanuddin (2019-2024)