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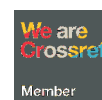
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Factors influencing perception of psychosocial risk among health workers at roemani muhammadiyah hospital

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ABSTRACT

Psychosocial risks in hospitals affect health workers mental and emotional well-being. These risks include violence, conflict, harassment, bullying from staff, patients, or visitors, and stress caused by shift work, excessive workload, monotony, and high job demands. Such risks can negatively impact health, productivity, and work efficiency. This study aims to analyze the most influential variables between interpersonal communication, working time and workload on the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital, Semarang City. This research method is quantitative with a cross sectional design. The sampling technique used proportional stratified random sampling with a total sample of 82 health workers. The data collection technique uses a questionnaire that has been tested for validity and reliability. The variables studied in this study include level of education, age, length of service, interpersonal communication, personal experience, working time, and workload. The data was processed and analyzed descriptively, as well as hypothesis testing using the chi-square test to see what variables were related to health workers psychosocial risk perceptions and logistic regression analysis to see which variables had the most influence on health workers psychosocial risk perceptions. The research results showed that the majority of respondents had a DIII education, most were adults, namely 22-44 years and most of the respondents had worked for more than 10 years. Variables that are related ($p\text{-value} < 0.05$) to the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital, Semarang City are interpersonal communication, personal experience, workload and working time. The variable that has the greatest influence on the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital, Semarang City is the interpersonal communication variable which has an odds ratio (OR) of 17.883, which means that health workers who have good interpersonal communication are 17.883 times more likely to perceive positive psychosocial risk than respondents who have poor interpersonal communication.

Keywords:

Health Workers
Interpersonal communication
Perception
Psychosocial risk
Working time
Workload

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Introduction

Occupational health focuses on the maintenance and prevention as well as the risk of physical, mental and social health problems in all workers caused by workplace conditions and environment (Sihombing, 2020). The workplace is considered a source of various diseases and as a determinant of

individual welfare, workplaces where there are risks of health hazards need to implement K3 thoroughly in all aspects of the business, this is stated in Law number 36 of 2009 article 166 concerning occupational health (Wicaksana et al., 2022). Like hospitals, which are workplaces that become places of disease transmission and allow environmental pollution and health problems (Artana, 2020). Hospital workers have a greater potential for occupational accidents than workers in general (Rubiyanto et al., 2023).

One of the workers in the hospital is health workers, health workers face various occupational risks such as chemical, physical, biological, ergonomic and psychological hazard risk factors (WHO, 2022). Therefore, it is not uncommon for various occupational accidents or occupational diseases to be felt by health workers.

According to data from the International Labor Organization, every year around the world there are 270 million workers who experience work accidents and 160 million workers experience occupational diseases (ILO, 2022). According to data from the Occupational Safety Health Administration OSHA of the United States, work accidents occur due to workers experiencing stress, lack of supervision, lack of training in the application of *occupational* safety and health (OSHA, 2021).

Of the many health risks, in recent years, psychosocial risks have been of particular interest. Psychosocial risks in the workplace have become a top priority in public health (Ridlo, 2020). Psychosocial risk, which is one of the hazards in the workplace, is often not realized by workers and management.

Healthcare workers experience psychosocial risks due to violence, conflict, harassment and bullying among staff as well as from patients and hospital visitors. According to WHO, 63% of health workers reported experiencing any form of workplace violence (WHO, 2022). Health workers work as a team in achieving patient health goals. of course, interpersonal communication is also not only between health workers, but to the community served. There are often differences of opinion and relationships to other health workers (Priambudi & Erwandi, 2022).

Another psychosocial risk is stress. Causes of stress in health workers include boredom, working in shifts, excessive workload, monotonous work and high and unbalanced work demands and feeling pressured (Carenina et al., 2024). According to WHO, 23% of health workers suffer from depression and anxiety, and 39% suffer from insomnia (WHO, 2022).

Health workers in Indonesia experienced moderate to high emotional exhaustion (48.2%), 51.8% experienced moderate to high depersonalization. The prevalence of burnout in health workers was highest in Java (38.4%) and health workers working in hospitals (38.6%). Health workers experienced mild to moderate depression (27.1%), while levels of anxiety (19.1%) and stress (7.4%). Health workers also experienced moderate to high somatization symptoms (27.9%) (Lamuri et al., 2023). Health workers in Central Java experienced moderate levels of depression and stress (67.3%), 17.9% experienced high levels of depression and stress, and 17.8% experienced low levels of depression and stress (Pratitis et al., 2021). These findings confirm that psychosocial risks are not only a local issue but also a worldwide problem, making this study highly relevant.

Risk perception is the process by which individuals interpret the information about risk that they obtain. If a person's perception of risk is poor, the resulting behavior tends to ignore the risk exposure (Mustofa et al., 2021), understanding risk perception can help develop more effective prevention strategies to reduce risk and increase health workers' awareness of psychosocial hazards and how to deal with them (Mustofa et al., 2021).

The perception of health workers about occupational health risks, especially psychosocial risks, is very important because it has an impact on the health, productivity and efficiency of workers and can minimize workers from risk factors for accidents and occupational diseases (Sabrina, 2020). Based on the theory developed by Van der Linden, risk perception is influenced by cognitive factors such as knowledge, experiential factors such as emotions / influences, personal experience, socio-demographic factors such as age, gender, education and socio-cultural influences such as norms,

values (Linden, 2015). According to Chaswa, risk perception is influenced by qualitative risk characteristics, individual characteristics, safety climate and responses to risk (Chaswa et al., 2020). The results of Syifa et al's research state that the factors that influence risk perception are knowledge, attitudes, experience and environmental conditions (Apriliani Setyaningrum et al., 2021) while according to Herly et al's research risk perception is influenced by age, education level, tenure, and motivation (Mustofa et al., 2021).

With the positive perception of psychosocial risks in the Health workers at Roemani Muhammadiyah Hospital, Semarang City, they can provide opinions and views that the Health workers accept and will try to prevent existing psychosocial dangers, whereas the presence of negative perceptions shows that the Health workers underestimate, ignore and do not consider the existence of psychosocial risks in the workplace. Risk perception plays a critical role in determining both the performance and well-being of healthcare workers. When healthcare workers fail to recognize psychosocial risks, they are more likely to experience stress, burnout, and decreased productivity. Conversely, when they have a high awareness of these risks, they can take proactive steps to manage their work environment more effectively.

Based on the results of a preliminary study, there were 6 out of 8 health workers at Roemani Muhammadiyah Hospital, Semarang City, experiencing symptoms of work stress, because they were in direct contact with various types of patients with different disease diagnoses, with different responses, being irritable and bent, not enthusiastic about working, procrastinating on work, often making mistakes and not focusing. Health workers at Roemani Muhammadiyah Hospital, Semarang City also work more than 8 hours per day, they have 3 working hours, namely at 07.00, 14.00 and 21.00. Apart from that, the K3 experts at Roemani Muhammadiyah Hospital, Semarang City, are also not running optimally, due to the new management so there is minimal data available. Therefore, research will be conducted on the factors that influence the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital.

Methods

The type of research used in this study is quantitative method, while the design used in this study is cross sectional. A cross-sectional design was used in this study because it allows researchers to analyze data from a specific point in time, providing a snapshot of the relationships between variables. This design is effective for identifying associations between factors such as interpersonal communication, workload, and working hours with psychosocial risk perceptions among health workers. Additionally, it is time-efficient, cost-effective, and suitable for studies where the goal is to explore correlations. The population in this study were all health workers at Roemani Muhammadiyah Hospital, Semarang City, totaling 459 consisting of nurses, analysts, pharmacists, radiologists, physiotherapists, dental nurses, midwives and nutritionists. The sample of this research amounted to 82 people. The sampling technique was Proportionate Stratified Random Sampling. Stratification was carried out by dividing the population into professional groups, ensuring that each category of health workers was proportionally represented in the sample.

The variables studied in this study include level of education, age, length of service, interpersonal communication, personal experience, working time, and workload. These variables were measured using a questionnaire, which underwent validity and reliability testing to ensure accuracy and consistency in data collection. Data processing techniques include editing, coding, entry and tabulating. This study consists of three stages of data analysis, namely univariate, bivariate and multivariate. Univariate analysis used to describe the characteristics of each variable through frequency distribution and percentage. Bivariate analysis performed using the Chi-Square test to test the relationship between the independent and dependent variables. Multivariate analysis performed using logistic regression to identify the most influential factors. To minimize bias, the study addressed potential response bias by ensuring anonymity in the questionnaire, and selection bias was mitigated through a stratified random sampling approach.

This research considers the principles of research ethics, including social values, scientific values, equal distribution of burdens and benefits, risks, inducement/exploitation, confidentiality and privacy, consent after explanation. This research follows the ethical principles approved by the Health Research Ethics Committee of the Faculty of Public Health, Diponegoro University (No: 285/EA/KEPK-FKM/2024).

Results and Discussion

Table 1. Frequency Distribution of Respondent Characteristics of Health Workers at Roemani Muhammadiyah Hospital Semarang City

Respondent Characteristics	F	%	p-value
Education Level:			
DIII	52	63.4	0.839
DIV	2	2.4	
S1	10	12.2	
Profession	18	22.0	
Age:			
Adult	63	76.8	0.263
Pre-elderly	19	23.2	
Length of Service:			
<5 years	19	23.2	0.873
5-10 years	22	26.8	
>10 years	41	50.0	

The characteristics of health workers at Roemani Muhammadiyah Hospital in Semarang City based on education level are divided into four categories, with the largest category being health workers with Diploma III (DIII) education. With a shorter duration of study and a more practical orientation, DIII graduates have a great opportunity to be quickly absorbed by the labor market, especially in basic health services, which contributes significantly to the provision of more equitable and efficient health services in various regions (Nurlinawati et al., 2020). The results of the analysis using Chi Square obtained a p-value >0.05 that there was no relationship between education level, age and tenure with the perception of psychosocial risk in health workers. Although respondents with higher education may have a better understanding of risk, their understanding of risk is not always significantly different compared to employees with lower education (Susanto et al., 2023). Higher education has access to broader knowledge and understanding regarding stress management, emotional control, and the importance of balance between work and personal life (Rahmawati, 2021).

It is known that the largest age group is less than 45 years old as many as 63 people (76.8%). Health professionals typically exhibit more mature thought and conduct, which enables them to respond to situations in the workplace with better and more intelligent ideas that can create more positive views (Wulandari et al., 2021). Every age group thinks differently, and the older a person becomes, the more weight they assign to certain things. Adults have an ideal way of thinking and making decisions, which influences how a topic is evaluated. Everybody has different opinions about what they get, and these opinions might be influenced by a variety of circumstances in addition to age (Yunus, Alfarisi, Hermawan, et al., 2021).

Most of the respondents, namely 41 people (50%), have worked as health workers at Roemani Muhammadiyah Hospital in Semarang City for more than 10 years. The amount of time a person spends understanding and completing a job is often used as one measure of work experience. Longer tenure generally reflects the accumulation of more experience, which in turn can affect the accuracy of one's perception of workplace situations. Extensive work experience allows individuals to be more thorough in identifying potential hazards or risks that may occur during the work process (Wulandari et al., 2021). While respondents with longer tenure are accustomed to working conditions and experience various psychosocial challenges, this is not always directly proportional to their perceptions of psychosocial risks (Pariangan & Djunaidi, 2022).

Table 2. Frequency Distribution of the Relationship between Free Variables and Psychosocial Risk Perception of Health Workers at Roemani Muhammadiyah Hospital Semarang City

Variable	Perception of Psychosocial Risk				P-value
	Positive		Negative		
	N	%	N	%	
Interpersonal Communication:					
Good	53	44.6	7	15.4	0.000
Poor	8	16.4	14	5.6	
Personal Experience:					
Good	55	49.8	12	17.2	0.001
Poor	6	11.2	9	3.8	
Working Time:					
Risk	58	55.8	17	19.2	0.000
No Risk	3	5.2	4	1.8	
Workload:					
Weight	31	37.2	19	12.8	0.001
Lightweight	30	23.8	2	8.2	

Based on the results of the study, good interpersonal communication is associated with positive psychosocial risk perception (p-value=0.000). Social Support Theory (Cobb, 1976) emphasizes that emotional and instrumental support from coworkers and supervisors plays a crucial role in reducing stress and improving well-being. The study by (Hartanti, 2023) supports this, showing that health workers with strong interpersonal communication and emotional support tend to have lower perceptions of psychosocial risk. (Wiffida et al., 2022) further highlight that positive interactions enhance a sense of belonging, which is a key component of social support. Effective interpersonal communication can lower workplace stress, enhance health workers' psychological health, and raise the standard of treatment (Asmawati et al., 2024). Good communication creates a strong environment of social support. Health workers who feel supported by their colleagues tend to have positive perceptions of psychosocial risks, so they are better able to face challenges in their work. Good communication skills enable health workers to convey information clearly, understand patient needs and complaints, and create harmonious working relationships. Moreover, effective interpersonal communication can be a catalyst for change, where health workers are able to positively influence the attitudes, views, and behaviors of others (Herlina et al., 2021).

In this study, good personal experience was associated with positive psychosocial risk perception (p-value=0.001). In line with the research of Yunus, et al, it is stated that health workers who have good personal experience will have a positive perception, while poor personal experience has a negative perception (Yunus, Alfarisi, Setiawati, et al., 2021). There is a chance that someone will have a bad experience. On the other hand, a positive attitude will result from a psychological impression that leaves an emotional imprint if the object is pleasurable to experience (Wulandari et al., 2021). Any event that a person has encountered while engaging with their surroundings is considered a personal experience. Perception accuracy is influenced by experience. Experience does not necessarily come from a structured educational program. Our experience also grows as a result of the experiences we have encountered (Shambodo, 2020).

Non-risky working time is associated with perceived psychosocial risk (p-value=0.000). Because they work longer hours than usual, run the danger of contracting a virus, and work two desks, health workers are more likely to experience burnout, which leads to psychological issues (Erwan Syah & Suwarno, 2022). In line with the research of Yulita, et al, which states that health workers experience burnout due to working time of 10.1 hours/day (Yulita & Ramdhan, 2023).

In this study workload has a relationship with psychosocial risk perception. Health workers who perceive heavy workloads tend to have negative perceptions of psychosocial risks, which can lead to decreased productivity and quality of care (Priambudi & Erwandi, 2022). The majority of health

workers experience severe stress due to workloads that are not balanced with the support available in the workplace (Tonapa et al., 2022). Lighter workloads can reduce stress levels, leaving more room for health workers to focus on the quality of care provided (Datak et al., 2020). Heavy workloads often involve significant physical and mental responsibilities, such as lifting heavy patients or equipment, dealing with emotional distress in dealing with patients, and completing tasks that require high levels of concentration in a limited amount of time. In addition, factors such as anxiety, lack of rest time, and a demanding work environment can further exacerbate health workers' workload (Salsabila Putri Azzahra et al., 2024). The job strain theory, developed by (Karasek, 1979), emphasizes that high job demands combined with low control over work lead to psychological strain and health issues. In the context of health workers, heavy workloads with high demands (e.g., physical labor, mental tasks, emotional stress) can lead to negative perceptions of psychosocial risks. Karasek's model suggests that when workers are under high workload stress but lack control over their work environment, it increases the risk of burnout, fatigue, and other psychological problems. The study's finding that heavy workloads lead to negative perceptions of psychosocial risks aligns with this theory, as it highlights how overwhelming job demands contribute to mental distress and decreased productivity.

Table 3. Multivariate Regression Test Result

Variable	Sig	OR	95% CI	
			Lower	Upper
Interpersonal Communication	0.004	17.883	2.507	127.560
Working Time	0.060	0.171	0.027	1.078
Workload	0.042	0.100	0.011	0.925

The most influential factor on the perception of psychosocial risk in health workers at Roemani Muhammadiyah Hospital in Semarang City with an OR value of 17.883 is interpersonal communication. In the context of healthcare work, the finding indicates that interpersonal communication plays a crucial role in shaping health workers' perceptions of psychosocial risks. An OR value of 17.883 suggests that health workers with good communication skills are 17 times more likely to perceive psychosocial conditions positively compared to those with poor communication. This implies that effective communication can help reduce stress, foster collaboration, improve workplace relationships, and enhance overall job satisfaction, thereby mitigating negative psychosocial factors in a demanding healthcare environment. Health workers felt more equipped to handle the risk of disease exposure when they engaged in effective peer communication, particularly through effective coordination. With good interpersonal communication, health workers adjust more easily in crisis situations or stressful work environments (Pramana & Priastuty, 2023). On the other hand, inadequate communication raises friction, aggravates professional risk, and results in misunderstandings regarding the roles of health team members (Kusuma et al., 2021). By building mutually supportive communication, health workers can create optimal communication patterns, so that the messages conveyed are received positively and have an impact on the overall quality of health services (Datak et al., 2020).

The OR value of the working time variable is 0.171, which means that health workers who have non-risky working hours have a 0.1 times greater chance of having a positive psychosocial risk perception than respondents who have risky working hours. This highlights how irregular, long, or poorly scheduled shifts may negatively impact mental well-being, job satisfaction, and work-life balance, reinforcing the importance of managing work schedules to foster healthier psychosocial environments for health workers. Health workers who work longer hours than reasonable work standards often do not have enough time to rest, which increases physical and mental risks. they often feel trapped in an exhausting routine and unable to deal with stress effectively. Fatigue due to excessive work can reduce motivation and worsen mental health, causing health workers to feel unable to provide quality care to patients. Without time to recover, feelings of exhaustion intensify and risk worsening their psychosocial condition.

The OR value of the workload variable is 0.100, which means that health workers who have a light workload have a 0.1 times greater chance of having a positive psychosocial risk perception. This

suggests that managing and balancing workload demands is critical to fostering positive psychosocial conditions, as excessive workloads can lead to stress, burnout, and diminished mental well-being in health workers. Respondents with high workloads reported moderate stress levels, while health workers with low workloads tended to have normal stress levels, suggesting that both physical and mental workloads can affect the psychological well-being of health workers (Karminah et al., 2021). The heavy workload of health workers has an impact on mental health, including symptoms of depression, anxiety, and insomnia (Solaeman et al., 2022).

Conclusion

There is no relationship between education level, age and years of service on the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital. There is a relationship between interpersonal communication, personal experience, working time and workload on the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital. The variables that have the greatest influence on the perception of psychosocial risk among health workers at Roemani Muhammadiyah Hospital are interpersonal communication, working time and workload. Interpersonal communication shows the most significant influence with an OR value of 17.883.

The findings highlight the significant role of interpersonal communication in shaping health workers' perceptions of psychosocial risks. Positive communication fosters collaboration, emotional support, and conflict resolution, which are essential in high-stress healthcare environments. Addressing communication gaps could therefore significantly improve job satisfaction and mental well-being. The negative effects associated with poor working time and high workload underscore the importance of proper scheduling and balanced task distribution. Flexible work arrangements and effective workload management strategies can help prevent burnout and improve the psychosocial environment.

Recommendations for Roemani Muhammadiyah Hospital include interpersonal communication training by organizing workshops to improve communication skills, including conflict resolution and empathetic communication. Workload management by implementing strategies to monitor and balance workload, including task prioritization and staff rotation systems. Shift optimization by developing a fair and structured shift schedule that minimizes long or irregular working hours.

A limitation of this study is that it only took data at one point in time, making it difficult to establish causal relationships between variables. The study was conducted with 82 respondents from one hospital, which may limit the generalizability of the findings to other healthcare settings. The use of questionnaires relies on self-reported perceptions, which may introduce response bias or subjective interpretation. Other potential factors that influence psychosocial risk perception, such as leadership style, organizational culture, or emotional resilience, were not included in this study. The results of this study may be influenced by the specific working conditions and policies of Roemani Muhammadiyah Hospital, making it less applicable to other hospitals with different management systems.

Suggestions for future research include conducting longitudinal studies to explore causal relationships between variables and psychosocial risk over time, expanding the study to other hospitals to assess the generalizability of the findings, evaluating the effectiveness of specific interventions, such as communication training or workload adjustment, in reducing psychosocial risk, and using qualitative methods to explore deeper personal experiences and perceptions of psychosocial risk among healthcare workers.

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