

***THE RELATIONSHIP BETWEEN JOB DEMANDS, JOB RESOURCES,
AND RESILIENCE WITH WORK STRESS AMONG HEALTH WORKERS
AT THE MEKAR COMMUNITY HEALTH CENTER, KENDARI CITY, IN
2025***

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Article Received: 12 January 2026, Article Revised: 01 February 2026, Published on: 20 February 2026

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DOI: <https://doi-doi.org/101555/ijarp.2999>

ABSTRACT

Background: Job stress in healthcare workers is a significant issue that can impact the performance and quality of healthcare services, particularly in primary healthcare facilities such as community health centers. High job demands, limited job resources, and individual resilience are thought to contribute to the emergence of job stress. This study aims to determine the relationship between job demands, job resources, and resilience with job stress in healthcare workers at the Mekar Community Health Center in Kendari City in 2025.

Method: This study is a quantitative study using an analytical survey with a cross-sectional study design. 84 respondents were selected as samples using a total sampling technique.

Data were collected through interviews using questionnaires and then univariate and bivariate analyses were performed. **Result:** statistical test at significant value $\alpha = 0.05$ obtained the result that there is no relationship between job demands and work stress (p value = 1.000), there is no relationship between job resources and work stress (p value = 1.000), there is a relationship between resilience and work stress (p value = 0.024).

Conclusion: from the results of this study it was found that there is a relationship between resilience and work stress at the Mekar Health Center, Kendari City in 2025. **Suggestion:** The Health Center is advised to maintain workload management and maintain work support that has been running well, even though job demands and job resources are not related to work stress. In addition, the Health Center needs to pay attention to strengthening the resilience of health workers through coaching and training, because resilience has been proven to be related to work stress.

KEYWORDS: *job demands, job resources, resilience, work stress, health workers, primary healthcare*

INTRODUCTION

Healthcare workers are a key pillar of the healthcare system. The quality of healthcare services is significantly influenced by their working conditions and well-being. In carrying out their duties, healthcare workers often face heavy workloads, high emotional demands, and significant health risks. These conditions can impact the quality of work life and lead to work-related stress (Anindita, 2024).

Occupational stress among healthcare workers is a global issue that is receiving increasing attention. The World Health Organization reports that healthcare workers are among the groups with high levels of work-related stress due to excessive workloads, time pressures, administrative demands, and limited resources in healthcare facilities. Poorly managed work-related stress can lead to emotional exhaustion, decreased productivity, increased work-related errors, and physical and mental health disorders (WHO, 2020).

Several studies in Asia have shown a relatively high prevalence of work-related stress among healthcare workers, reaching 44.56% in China (Ching *et al.*, 2021) and 15.47% in Thailand (Chupanich *et al.*, 2023). These data indicate that occupational stress is a serious problem across various countries and healthcare systems.

In Indonesia, occupational stress among healthcare workers remains a significant issue, particularly in primary healthcare settings such as community health centers (Puskesmas). The unequal ratio of healthcare workers and the high service burden at Puskesmas contribute to increased work pressure. This situation is exacerbated by the demands of achieving national health program targets and high administrative burdens, potentially increasing occupational stress among healthcare workers (Junaidah *et al.*, 2023).

At the regional level, the Southeast Sulawesi Provincial Health Office (2023) noted an imbalance in the distribution of healthcare workers across regions. The total healthcare workforce in Southeast Sulawesi Province reached 25,871, consisting of 8,982 nurses, 7,093 midwives, 2,653 community health workers, 1,041 nutritionists, and 927 laboratory technicians (Alam *et al.*, 2021). This unequal distribution has the potential to increase the workload in certain facilities, including community health centers (Puskesmas) with high coverage areas and high patient volumes.

High work demands, such as service targets, time pressure, and high workloads, contribute to increased work stress among healthcare workers in primary care facilities. The concept of job

demands explains that physical, psychological, and organizational aspects that require sustained effort can increase the risk of work stress, especially when healthcare workers are required to maintain service quality amidst limited resources (Maulana & Astuti, 2022).

Conversely, job resources such as organizational support, supervisor support, teamwork, and work feedback play a significant role in influencing work stress levels. Good support can help healthcare workers manage work pressure, while a lack of it can increase feelings of stress and burnout (Hapsari & Nugraheni, 2021). The Job Demands–Resources (JD-R) model explains that work stress arises from an imbalance between job demands and job resources. This imbalance can increase the risk of work stress and burnout in healthcare workers (Setyowati *et al.*, 2022).

In addition to job demands and resources, an individual's ability to cope with work pressure is also crucial. In this regard, the concept of resilience plays a central role. Resilience is an individual's ability to bounce back, adapt, and continue functioning effectively even under stressful situations (Setyowati *et al.*, 2022). Healthcare workers with high levels of resilience tend to have better adaptability to work pressure, resulting in lower levels of work stress (Dewi & Handayani, 2022).

Research by Rizal (2022) found that healthcare workers with high resilience have better coping skills under work pressure and are able to maintain their professional performance. Thus, resilience plays a crucial role in mitigating the negative impact of work demands and strengthening the positive influence of work resources on the psychological well-being of healthcare workers.

The Mekar Community Health Center in Kendari City is a primary healthcare facility with a relatively high coverage area and a high number of patient visits. Healthcare workers at this community health center face various work demands, both in direct patient care and in implementing public health programs. These high work demands have the potential to lead to work stress if not balanced with adequate work resources and individual abilities to cope with work pressure.

Based on the description, this study aims to determine the relationship between job demands, job resources, and resilience with work stress in health workers at the Mekar Community Health Center in Kendari City in 2025. The results of this study are expected to be a basis for managing health human resources, especially in efforts to prevent work stress and improve the welfare of health workers in first-level health care facilities.

METHOD

This research is a quantitative study using an analytical survey design and a cross-sectional approach. This design was used to determine the relationship between job demands, job resources, and resilience and work stress among healthcare workers at a single measurement point. The population in this study was all healthcare workers working at the Mekar Community Health Center in Kendari City. The sampling technique used was total sampling, so that all members of the population were included in the study sample. A total of 84 healthcare workers participated in this study who met the inclusion and exclusion criteria.

Data collection was conducted using a structured questionnaire completed through interviews. The questionnaire consisted of several sections measuring respondent characteristics, job demands, job resources, resilience, and work stress. The research instrument was developed based on the Job Demands–Resources model and resilience theory and was adapted to the context of healthcare workers at the community health center.

Before use, the questionnaire underwent validity and reliability testing to ensure its suitability. Data analysis was conducted in stages, including univariate and bivariate analysis. Univariate analysis was used to describe the frequency distribution and proportion of each research variable. Bivariate analysis was conducted to determine the relationship between the independent and dependent variables using statistical tests appropriate to the data scale. Hypothesis testing was conducted at a significance level of $\alpha = 0.05$.

RESULT

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Tabel 1. Distribution of Respondents Based on Job Demands (Workload, Role Conflict, Time Pressure) at Mekar Kendari Community Health Center in 2025.

No	Job Demand (Beban Kerja, Konflik Peran, Tekanan Waktu)	Jumlah	
		Jumlah (n)	Persentase (%)
1.	Tinggi	81	3.6
2.	Rendah	3	96.4
	Total	84	100.0

Based on table 1, it can be seen that out of a total of 84 (100%), 81 respondents (76.5%) answered in the high category with a score of ≥ 30 , while 3 respondents answered in the low category with a score of < 30 (23.5%).

Tabel 2. Distribution of Respondents Based on Job Resources (Social Support, Feedback) at the Mekar Community Health Center, Kendari City in 2025.

No	Job Resources (Dukungan sosial, Feedback)	Jumlah	
		Jumlah (n)	Persentase (%)
1.	Tinggi	83	98.8
2.	Rendah	1	1.2
	Total	84	100.0

Based on table 2, it was found that out of a total of 84 (100%), 83 respondents (98.8%) answered in the high category with a score of ≥ 20 , while 1 respondent answered in the low category with a score of < 20 (1.2%).

Tabel 3. Distribution of Respondents Based on Resilience at the Mekar Community Health Center in Kendari City in 2025.

No	Resiliensi	Jumlah	
		Jumlah (n)	Persentase (%)
1.	Tinggi	83	98.8
2.	Rendah	1	1.2
	Total	84	100.0

Based on table 3, it can be seen that out of a total of 84 (100%), 83 respondents (98.8%) answered in the high category with a score of ≥ 20 , while 1 respondent answered in the low category with a score of < 20 (1.2%).

Tabel 4. Distribution of Respondents Based on Job Stress at Mekar Community Health Center, Kendari City in 2025.

No	Stres Kerja	Jumlah	
		Jumlah (n)	Persentase (%)
1.	Tinggi	82	97.6
2.	Rendah	2	2.4
	Total	84	100.0

Based on table 4, it can be seen that out of a total of 84 (100%), 82 respondents (97.6%) answered in the high category with a score of ≥ 15 , while 2 respondents answered in the low category with a score of < 15 (2.4%).

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Tabel 5. The Relationship Between Job Demands (Workload, Role Conflict, Time Pressure) and Work Stress at the Mekar Community Health Center in Kendari City in 2025.

<i>Job Demands (Beban Kerja, Konflik Peran, Tekanan Waktu)</i>	Stres Kerja				Total		<i>P-value</i>
	Tinggi		Rendah		Total		
	n	%	n	%	N	%	
Tinggi	79	97.5	2	2.5	81	100.0	1.000
Rendah	3	100.0	0	0.0	3	100.0	
Total	82	97.5	2	2.4	84	100.0	

Table 5 shows that of the 81 respondents (100.0%) who selected high job demands (Workload, Role Conflict, Time Pressure), 79 respondents (97.5%) selected high job stress, and 2 respondents (2.5%) selected low job stress. Meanwhile, of the 3 respondents (100.0%) who selected low job demands (Workload, Role Conflict, Time Pressure), 2025 selected low job stress.

The Chi-Square statistical test results show that ρ value = 1.000 > α = 0.05. This indicates that H1 is rejected and H0 is accepted, meaning there is no relationship between job demands (Workload, Role Conflict, Time Pressure) and job stress at the Mekar Community Health Center in Kendari City in 2025.

Tabel 6. The Relationship Between Job Resources (Social Support, Feedback) and Work Stress at the Mekar Community Health Center in Kendari City in 2025.

<i>Job Resources (Dukungan sosial, Feedback)</i>	Stres Kerja				Total		<i>P-value</i>
	Tinggi		Rendah		Total		
	n	%	n	%	N	%	
Tinggi	81	97.6	2	2.4	83	100.0	1.000
Rendah	1	100.0	0	0.0	1	100.0	
Total	82	97.5	2	2.4	84	100.0	

Table 6 shows that of the 83 respondents (100.0%) who selected job resources (social support, feedback) as high, 81 respondents (97.6%) selected high job stress, and 2 respondents (2.5%) selected low job stress. Meanwhile, for job resources (social support, feedback) as low, 1 respondent (100.0%) selected low job stress.

The Chi-Square statistical test results show that the ρ value = 1.000 > α = 0.05. This indicates that H1 is rejected and H0 is accepted, meaning there is no relationship between job resources (social support, feedback) and job stress at the Mekar Community Health Center in Kendari City in 2025.

Tabel 7. The Relationship Between Resilience and Work Stress at the Mekar Community Health Center in Kendari City in 2025.

Resiliensi	Stres Kerja				Total		P-value
	Tinggi		Rendah		N	%	
	n	%	n	%			
Tinggi	82	98.8	1	100.0	83	100.0	0.024
Rendah	0	0.0	1	1.2	1	100.0	
Total	82	97.6	2	2.4	84	100.0	

Table 7 shows that of the 83 respondents (100.0%) who chose resilience as high, 82 respondents (98.8%) chose work stress as high, and 1 respondent (100.0%) chose work stress as low. Meanwhile, for resilience as low, 1 respondent (100.0%) chose work stress as low. The results of the Chi-Square statistical test showed a ρ value of $0.024 < \alpha = 0.05$. This indicates that H1 is accepted and H0 is rejected, indicating a relationship between resilience and work stress at the Mekar Community Health Center in Kendari City in 2025.

DISCUSSION

a. The Relationship Between Job Demands and Work Stress

A study conducted at the Mekar Community Health Center in Kendari City in 2025 found no relationship between Job Demands and Job Stress. This study found that 81 respondents (100.0%) chose high job demands, while 3 respondents (100.0%) chose low job demands (Workload, Role Conflict, Time Pressure). The majority of respondents rated job demands as high because work demands at the community health center are complex and experienced by almost all health workers, such as high service loads, administrative tasks, and time pressure. However, due to the relatively homogeneous perception of work demands among respondents and the existence of adaptation and work experience that make health workers able to manage these demands. Most health workers at the Mekar Community Health Center are employees who have worked for a relatively long time, so they have work experience, adaptation skills, and a good understanding of the flow of health services. This condition causes high job demands to no longer be perceived as a burden, but as part of a familiar work routine. Experienced healthcare workers tend to have more mature coping mechanisms, enabling them to better manage work pressure without incurring significant work stress.

These results align with research conducted by Rizky Nandhika, Wulan Sari, and Sri Darnoto (2025), which showed no significant relationship between length of service and work stress, as evidenced by a Chi-square test with a p-value of $0.309 (p > 0.05)$. This finding indicates that longer tenure does not automatically increase work stress levels, although theoretically,

workers with long tenure are at risk of experiencing burnout or job burnout. Empirically, the majority of respondents in this study were workers with long tenure, namely more than 12 months, with some having worked for more than 37 months. This reflects workers' considerable work experience, understanding of work processes, and mastery of their duties and responsibilities.

Similarly, research conducted by Endang Silatur, Agus Purbo, and Aloysius Jondar (2025) showed that workload had no significant effect on job stress. These results also indicate that workload does not contribute to the emergence of job stress. Furthermore, these results indicate that healthcare employees have a calm esprit de corps despite having an excessive workload. These results indicate that healthcare workers can handle a workload that is appropriate to their abilities. These findings support the narrative that job stress is not solely influenced by the magnitude of job demands, but rather by how individuals interpret, manage, and adapt to these demands within the context of the work environment they face.

b. The Relationship Between Job Resources and Work Stress

A study conducted at the Mekar Health Center in Kendari City in 2025 found that there was no relationship between Job Resources (Social Support, Feedback) and Job Stress. This study found that 83 respondents (100.0%) chose job demands (Workload, Role Conflict, Time Pressure) in the high category, while 1 respondent (100.0%) chose Job Resources (Social Support, Feedback) with Job Stress in the low category. The majority of respondents rated job resources in the high category because health workers at the health center generally received good social support from colleagues and superiors and received relatively clear and even work feedback. This condition was experienced by almost all respondents, so that the variation in perception of job resources was very limited. among health workers at the Mekar Health Center because most health workers already had professional independence, work experience, and good coping mechanisms in dealing with work pressure. In addition, a relatively stable work environment and familiar social interactions made social support felt evenly, so it did not have a different effect on the level of work stress. Job stress in community health centers is more influenced by work system factors and organizational demands, such as administrative burdens and service responsibilities, than by social support from coworkers or superiors. Consequently, although job resources were high, bivariate analysis results showed no significant relationship with job stress because these resources were not a factor in differentiating stress levels between respondents.

These results also align with research conducted by Werenfridus, Agung Hartoyo, and Abd. Basith (2023), which found that social support did not show a significant direct relationship

with job stress, with a p-value of 0.382 ($p > 0.05$). Although social support statistically had a significant positive effect, the direction of the resulting relationship was inconsistent with the initial theory and hypothesis, which should have shown a negative relationship. Theoretically, social support is viewed as a protective factor capable of reducing job stress levels by providing a sense of security, emotional comfort, and instrumental assistance to individuals. However, the results of this study indicate that increased social support is actually accompanied by increased job stress. These findings indicate that social support does not play a primary role in the formation of work stress, so the relationship between the two is not direct. One factor that may explain this phenomenon is the routine and internalized work context. In the primary school teaching profession, which in many aspects shares characteristics with health workers in community health centers, the workload and job demands have become part of a long-term routine. In these conditions, work stress is more influenced by structural factors such as administrative burdens, policy changes, and work system demands, rather than by relational aspects such as social support alone.

c. The Relationship Between Resilience and Work Stress

Research conducted at the Mekar Community Health Center in Kendari City in 2025 found no relationship between resilience and work stress. This study found that 83 respondents (100%) chose resilience as high, while 1 respondent (100%) chose resilience with low work stress. This condition illustrates that health workers at the community health center generally have good adaptability and psychological resilience in facing work demands. This high level of resilience plays a significant role in explaining the results of the bivariate analysis, which showed a significant relationship between resilience and work stress. Health workers with high resilience tend to be able to manage work pressure, control emotions, and use adaptive strategies when faced with service loads and limited resources. These abilities make them better able to maintain psychological well-being and avoid increased work stress.

The results of this study are also in line with research conducted by Putri Gemilang Sari (2025), which showed a chi-square test with a p-value of 0.000, meaning $p < 0.05$. This means there is a significant relationship between resilience and work stress among health workers at Community Health Centers. This finding indicates that resilience is a personal factor that plays an important role in determining how health workers respond to the demands and pressures of daily work. Health workers with high levels of resilience tend to have better abilities in managing emotions, maintaining a positive attitude, and adapting to various changes and challenges in the work environment. This condition prevents emerging work pressure from developing into severe or prolonged work stress. Conceptually, resilience

allows individuals to view stressful work situations as challenges that can be faced, rather than as debilitating threats. In the context of Community Health Centers, health workers are often faced with high workloads, limited resources, and increasing service demands. However, individuals with good resilience are able to utilize work experience and internal support. As a result, even in demanding work conditions, work stress levels can remain manageable.

CONCLUSION

Based on the results of the study on "The Relationship between Job Demands, Job Resources, and Resilience with Work Stress among Healthcare Workers at the Mekar Community Health Center in Kendari City in 2025," the following conclusions can be drawn:

1. There is no relationship between job demands and work stress at the Mekar Community Health Center in Kendari City in 2025.
2. There is no relationship between job resources and work stress at the Mekar Community Health Center in Kendari City in 2025.
3. There is a relationship between resilience and work stress at the Mekar Community Health Center in Kendari City in 2025.

SUGGESTION

Based on the conclusions outlined, the author offers the following recommendations:

1. Community health centers are advised to maintain effective workload management and maintain existing work support systems, even if job demands and job resources are not related to work stress. Furthermore, community health centers should focus on strengthening the resilience of healthcare workers through coaching and training, as resilience has been shown to be associated with work stress.
2. Healthcare workers are expected to continue developing resilience skills and coping strategies to address work pressures to maintain psychological well-being.

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