

Analysis of Job Stress and Burnout to *Organizational Citizenship Behavior of Officers with Intervening Variables Commitment Organization at dr. Nur's Clinic, Cimahi City*

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Abstract

As a healthcare institution with a high workload, it is important to understand the factors that influence staff extra-role behavior in order to improve overall service performance. This study aims to analyze the influence of job stress and burnout on Organizational Citizenship Behavior (OCB) with organizational commitment as an intervening variable at Dr. Nur Clinic, Cimahi City. This study uses a quantitative approach with a cross-sectional design, involving 139 respondents who have worked for more than six months. Data were collected through a questionnaire measuring work stress levels (based on Osipow's dimensions), burnout (based on Maslach's three components), organizational commitment (affective, normative, continuance), and OCB (altruism, responsibility, courtesy, sportsmanship, and civic virtue). Data analysis was conducted using multiple regression tests, path analysis, and mediation tests using SPSS version 29. The results of the study indicate that work stress and burnout each have a significant negative effect on organizational commitment and OCB. Organizational commitment was found to mediate the relationship between stress and burnout on OCB, with a greater mediating effect for stress than for burnout. Additionally, there is a serial effect of stress and burnout on OCB through reduced organizational commitment, highlighting the importance of a holistic approach in managing employee well-being. These findings indicate that enhancing organizational commitment as a form of employees' psychological attachment plays a crucial role in promoting OCB and mitigating the negative impacts of work-related stress.

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1. INTRODUCTION

Human resources are a vital component in determining the success of an organization, particularly in the healthcare sector, which is fraught with complexity, pressure, and performance demands. In healthcare institutions, employees are not only required to carry out their duties according to their job descriptions, but also to behave beyond formal obligations to ensure smooth service delivery. This voluntary behavior is known as *Organizational Citizenship Behavior* (OCB), namely employee contributions that go beyond formal expectations but are very important for the effectiveness and sustainability of the organization (Organ, 1988).

In organizational behavior literature, OCB is viewed as a factor capable of enhancing team synergy, productivity, and patient satisfaction in the healthcare context (Al-Ruzzieh et al., 2022). Employees who demonstrate altruistic behavior, courtesy, responsibility, sportsmanship, and *civic virtue* will strengthen a collaborative organizational culture, minimize interpersonal conflict, and encourage active involvement in achieving institutional goals (Fan et al., 2023; Wibowo et al., 2024). Furthermore, OCB contributes to an organization's external reputation, as institutions with a positive work culture are better able to attract qualified workers and maintain patient and partner loyalty (Grego-Planer, 2019). Thus, OCB is a strategic element in maintaining the sustainability of healthcare organizations.

However, the emergence of OCB is not without challenges, particularly related to work pressure. Occupational stress is a psychological condition that arises when job demands are disproportionate to an individual's ability to cope (Pulagam & Satyanarayana, 2021). Occupational stress is particularly prominent in the healthcare sector, as employees face excessive workloads, limited resources, interpersonal conflict, and emotional distress resulting from interactions with sick patients, trauma, and even death (Yang et al., 2015). Empirical studies show that chronic stress can decrease motivation, reduce employee engagement, increase absenteeism, and reduce service quality (Bayram Deger, 2023; Tao et al., 2023). In other words, unmanaged work stress has the potential to undermine OCB, as employees tend to focus on personal survival rather than making additional contributions to the organization (Manoppo, 2020).

In addition to work stress, burnout is becoming an increasingly relevant issue, particularly among healthcare workers. Burnout is defined as a psychological syndrome characterized by emotional exhaustion, depersonalization, and decreased personal accomplishment due to prolonged work stress (Maslach & Leiter, 2016). Symptoms of burnout in healthcare workers often include feelings of hopelessness, loss of empathy for patients, decreased job satisfaction, and reduced professional effectiveness (Ovchinnikov et al., 2015). Research shows that burnout is correlated with increased medical errors, patient dissatisfaction, and decreased quality of care (Dall'Ora et al., 2020). In the context of OCB, burnout has negative implications because emotionally exhausted employees tend to be reluctant to engage in extra-curricular behaviors that are not formally mandated (Gilbert et al., 2010).

On the other hand, there is evidence that organizational commitment can act as a balancing factor that reduces the negative impacts of work stress and burnout. Organizational commitment refers to an employee's psychological attachment and loyalty to their organization, which is typically categorized into three dimensions: affective, normative, and continuance (Meyer & Allen, 1991). Employees with high affective commitment feel proud and emotionally attached to the organization, employees with normative commitment are driven by a moral obligation to stay, while employees with continuance commitment tend to stay due to considerations of the costs of leaving (Suharto et al., 2019; Paparisabet et al., 2024). Previous research has shown that organizational commitment has a strong positive relationship with OCB (Hossain & Hossain, 2020; Sumardjo & Supriadi, 2023). This can be explained by the fact that highly committed employees are more likely to internalize organizational goals and express them through extra-role behaviors.

In the context of healthcare workers, organizational commitment not only impacts individual retention and performance but also directly impacts the quality of care received by patients. Studies show that healthcare workers with high commitment are more engaged in care, demonstrate greater empathy, and demonstrate initiatives that improve patient

satisfaction (Halawani et al., 2021). Therefore, strengthening organizational commitment is an important strategy to encourage OCB while minimizing the negative impacts of work stress and burnout.

Dr. Nur Clinic in Cimahi City, as a healthcare institution with a high patient volume, faces significant challenges in maintaining employee performance amidst a high workload. Employees at this clinic are required to work professionally, meet patient needs with excellent service standards, while maintaining harmonious working relationships. However, so far there has been no research that specifically analyzes how work stress and burnout affect employee OCB by considering the role of organizational commitment as an intervening variable in the clinic. Thus, this study not only fills the literature gap but also provides a practical contribution to clinic management in formulating strategies to improve employee performance and well-being.

Based on the description, this study has several main objectives, namely: (1) analyzing the influence of work stress on organizational commitment and employee OCB, (2) analyzing the influence of burnout on organizational commitment and employee OCB, and (3) testing the role of organizational commitment as a mediating variable in the relationship between work stress, burnout, and OCB.

Theoretically, this research is expected to enrich the literature on the dynamics of the relationship between work stress, burnout, organizational commitment, and OCB, particularly in the healthcare sector, which has received relatively little attention in empirical studies in Indonesia. Practically, the results of this study can serve as a basis for policymakers in the healthcare sector to formulate strategic interventions, such as stress management programs, training to strengthen organizational commitment, and developing a work culture that encourages active employee engagement.

Thus, this research not only has academic significance, but also provides real implications for human resource management in the health sector, especially in the context of clinics facing high pressure and complex service demands.

2. METHOD

This study uses a quantitative approach with a cross-sectional design (*cross-sectional study*) to test the causal relationship between job stress, burnout, organizational commitment, and *Organizational Citizenship Behavior* (OCB) among employees of Dr. Nur Clinic in Cimahi City. This design was chosen because it provides a comprehensive overview of conditions over a specific period and allows for empirical testing of causal models (Creswell & Creswell, 2018). The study was conducted from March to May 2025 at Dr. Nur Clinic, a healthcare institution with a high patient volume and complex workload, making it a relevant research location.

The research population included all clinic employees, both medical and non-medical personnel. Using the technique of *purposive sampling*, the respondent criteria were determined, namely employees who had worked for at least six months and were willing to participate in the research. Based on these criteria, 139 respondents were collected who met the requirements. This number was deemed sufficient for path analysis (*path analysis*), because according to Hair et al. (2019), a sample size of over 100 respondents is considered sufficient in testing causal models involving several variables at once.

The research instrument was a structured questionnaire compiled using a five-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). The work stress variable was measured using an instrument developed by Osipow and Spokane (1987) with five dimensions: workload, role, responsibility, work environment, and interpersonal

relationships. The burnout variable was measured using *Maslach Burnout Inventory* (Maslach & Leiter, 2016), which includes emotional exhaustion, depersonalization, and decreased personal accomplishment. Meanwhile, organizational commitment refers to the Meyer and Allen (1991) model, which includes affective, normative, and continuance commitment. Finally, OCB is measured through five dimensions proposed by Organ (1988), namely altruism, conscientiousness, courtesy, sportsmanship, and civic *virtue*.

Before the questionnaire was distributed, content validity testing was carried out through expert *judgment* by human resource management experts to ensure the indicators align with theoretical constructs. Furthermore, construct validity and instrument reliability were tested using confirmatory factor analysis and Cronbach's alpha. The test results showed that all items had a significant value of *loading factor* greater than 0.5 and construct reliability above 0.7, so the instrument is declared valid and reliable (Hair et al., 2019).

Data collection was conducted by distributing questionnaires directly to respondents. This technique was chosen to minimize non-response and provide an opportunity for respondents to ask for clarification on any statements they did not understand. In addition to primary data collected through questionnaires, the study also utilized secondary data in the form of internal clinic reports and relevant academic literature.

The collected data were analyzed using SPSS version 29 software. The analysis was conducted in several stages, starting with descriptive analysis to describe the characteristics of respondents and the distribution of answers. Next, classical assumption tests were conducted, including normality, multicollinearity, and heteroscedasticity tests. Hypothesis testing was conducted using multiple regression analysis to examine the direct effects of job stress and burnout on organizational commitment and OCB. To test the indirect effects, path analysis was used (*path analysis*), while the role of organizational commitment as a mediating variable was tested through *Sobel test* analysis method allows researchers to test the relationship between variables simultaneously in one model, resulting in more comprehensive research results (Kline, 2016).

3. RESULTS AND DISCUSSION

Research result

The respondents of this study were 139 people consisting of medical and non-medical personnel at the Dr. Nur Clinic in Cimahi City. Based on demographic distribution, the majority of respondents were in the age range of 26 to 35 years, which was 47 percent, followed by the 36 to 45 age group at 31 percent, while the rest were under 25 years old or over 45 years old. In terms of gender, the majority of respondents were female (64 percent), while men numbered 36 percent. When viewed from the length of service, the majority of employees had worked for two to five years (52 percent), 28 percent of them had a service period of more than five years, while the remaining 20 percent had less than two years. This condition indicates that the majority of employees are in the productive age stage with medium work experience, which on the one hand reflects a fairly mature professional potential, but on the other hand indicates the existence of continuous work pressure that can affect employee performance and well-being.

Descriptive analysis of the research variables showed that job stress was in the moderate to high category, with an average score of 3.47 on a five-point Likert scale. The most dominant dimensions triggering stress were workload and role demands, which were closely related to the high patient volume and limited workforce in the clinic. Burnout was also found to be at a moderate level, with an average score of 3.39, with emotional exhaustion being the most prominent dimension. This indicates that employees often

experience psychological exhaustion due to intense interactions with patients and the simultaneous administrative burden.

In contrast to stress and burnout, organizational commitment showed a relatively high average score of 3.82. Affective commitment was the most dominant dimension, indicating that employees have a strong emotional bond with the clinic as a workplace. This finding was further supported by information from brief interviews, which revealed that most employees felt the clinic provided opportunities for development and a supportive work environment. Meanwhile, OCB showed an average score of 3.76, with conscientiousness and courtesy occupying the highest scores. This indicates that despite significant work pressure, most employees still strive to maintain discipline, help coworkers, and demonstrate positive attitudes in interpersonal relationships.

Hypothesis testing through multiple regression showed that job stress had a significant negative effect on organizational commitment with a regression coefficient of -0.42 ($p < 0.01$), and also had a significant negative effect on OCB with a coefficient of -0.36 ($p < 0.01$). This means that the higher the level of stress experienced by employees, the lower their level of attachment to the organization, and the less likely they are to exhibit extra-role behavior. Burnout was also shown to have a significant negative effect on organizational commitment ($\beta = -0.29$, $p < 0.05$) and on OCB ($\beta = -0.27$, $p < 0.05$). Thus, employees who experience emotional exhaustion and depersonalization tend to lose motivation to remain committed to the organization and to engage in extra-role behaviors that support clinical effectiveness.

Furthermore, the path analysis results showed that organizational commitment had a significant positive effect on OCB ($\beta = 0.51$, $p < 0.01$). This indicates that the higher the psychological attachment of employees to the organization, the greater their tendency to display voluntary behavior that supports the success of the clinic. The mediation test used *Sobel test* strengthens these findings, with the result that organizational commitment mediates the effect of job stress on OCB ($z = 3.12$, $p < 0.01$) and mediates the effect of burnout on OCB ($z = 2.64$, $p < 0.01$). Interestingly, the mediation strength is greater in the job stress-OCB relationship than in burnout-OCB. This finding confirms that organizational commitment is more effective in neutralizing the impact of job stress than in reducing the effects of chronic emotional exhaustion.

Overall, the results of this study indicate that job stress and burnout both negatively impact organizational commitment and OCB, while organizational commitment has been shown to play a significant role in strengthening employees' extra-role behaviors. The mediating role of organizational commitment in this relationship indicates that organizations that are able to build emotional, normative, and continuance attachments with their employees can reduce the negative impact of job stress while strengthening employees' voluntary contributions to overall clinical performance.

Discussion

The results of this study show that job stress has a significant negative influence on organizational commitment as well as *Organizational Citizenship Behavior* (OCB). This finding aligns with the theory of occupational stress proposed by Osipow and Spokane (1987), which states that an imbalance between job demands and an individual's ability to cope can create tension, which in turn leads to reduced commitment to the organization. In the context of healthcare clinics, high workloads, complex role demands, and intense patient interactions often lead to psychological stress. This stress causes employees to focus more on maintaining their own well-being than on making additional contributions through OCB behaviors.

This finding aligns with research by Pulagam and Satyanarayana (2021) and Bayram Deger (2023), which found that uncontrolled work stress tends to decrease employee motivation and engagement. Therefore, it's understandable that employees experiencing high levels of stress will experience a decline in affective and normative commitment, ultimately weakening the drive to demonstrate voluntary behaviors such as helping coworkers, maintaining a positive attitude, or taking initiative at work.

In addition to work stress, this study also found that burnout has a significant negative effect on organizational commitment and OCB. Burnout, characterized by emotional exhaustion, depersonalization, and decreased personal accomplishment, causes employees to lose the psychological energy needed to actively engage in the organization. Maslach and Leiter (2016) state that burnout is a form of chronic fatigue that has a broad impact on performance and interpersonal relationships. In this study, the dominant symptom of burnout was emotional exhaustion, indicating that employees often feel mentally exhausted due to repeated work pressures. This condition aligns with research by Gilbert et al. (2010) and Dall'Ora et al. (2020), which shows that burnout in healthcare workers can reduce work effectiveness, increase errors, and reduce service quality.

This finding is important because it demonstrates that both job stress and burnout have a double whammy of negative consequences: they decrease organizational commitment and simultaneously reduce the likelihood of OCB. In other words, when healthcare workers are under psychological stress, loyalty to the organization weakens, and this has direct implications for decreasing the extra-curricular contributions that typically support effective service delivery.

On the other hand, this study also found that organizational commitment has a significant positive effect on OCB. This finding is consistent with Meyer and Allen's (1991) theoretical framework, which emphasizes that affective, normative, and continuance commitment play a crucial role in building employee engagement with the organization. Employees with high commitment are more motivated to engage in behaviors beyond formal obligations because they feel a strong emotional attachment, moral obligation, or cost considerations to continue supporting the organization. This finding also aligns with the research findings of Hossain and Hossain (2020), Suharto et al. (2019), and Sumardjo and Supriadi (2023), which consistently demonstrate a positive relationship between organizational commitment and OCB.

Furthermore, the mediating role of organizational commitment in this study showed significant results. The mediation test showed that organizational commitment was able to weaken the negative impact of work stress and burnout on OCB. This means that even though employees face work pressure or emotional exhaustion, if they have high organizational commitment, the tendency to continue showing OCB will be stronger. Interestingly, the mediation effect is greater in the relationship between work stress and OCB than between burnout and OCB. This can be interpreted as meaning that work stress can still be relatively neutralized by organizational commitment, while more chronic burnout tends to be difficult to offset, because deep emotional exhaustion weakens employees' psychological drive to engage further in the organization.

This finding aligns with the study by Paparisabet et al. (2024), which emphasized the importance of organizational commitment as a protective factor in dealing with work stress. This is also in line with social exchange theory (*social exchange theory*) which states that when organizations provide support and create emotional bonds with employees, they will tend to reciprocate with positive behaviors, including OCB (Croppanzano & Mitchell, 2005). Therefore, organizational commitment can be seen as a form of psychological capital that mediates the negative impact of the work environment on individual behavior.

The implications of these findings are significant for clinic management and other healthcare organizations. First, management needs to recognize that work stress and burnout impact not only individual health but also organizational behavior, which determines service quality. Second, strengthening organizational commitment is a key strategy for maintaining sustainable OCB, for example through improving employee well-being, recognizing contributions, and providing career development opportunities. Third, preventive interventions such as stress management training, work-life balance programs, and providing psychological support can reduce stress and burnout levels, thereby keeping employees motivated to demonstrate extra-role behaviors.

Thus, this study emphasizes the importance of a holistic approach to human resource management, particularly in the healthcare sector. Organizations need to address not only the technical aspects of service delivery but also the psychological well-being of employees and their attachment to the organization. If these aspects are managed effectively, even when employees face heavy workloads, they will still be more likely to demonstrate OCB, which will ultimately support organizational effectiveness and the quality of healthcare services.

4. CONCLUSION

This study aims to analyze the influence of job stress and burnout on *Organizational Citizenship Behavior* (OCB) with organizational commitment as a mediating variable in employees of Dr. Nur Clinic, Cimahi City. The results showed that both job stress and burnout had a significant negative influence on organizational commitment and OCB. This condition confirms that when employees experience prolonged work pressure or emotional exhaustion, psychological attachment to the organization will decrease, thereby weakening the tendency to exhibit extra-role behaviors that are important for organizational success.

In contrast, organizational commitment has been shown to have a significant positive effect on OCB. Employees who have affective, normative, or continuance ties to the organization tend to continue contributing through voluntary behaviors, such as helping coworkers, maintaining discipline, and being prosocial. Furthermore, organizational commitment has been shown to mediate the relationship between job stress and burnout with OCB. This mediation is stronger in the relationship between job stress and OCB, indicating that situational work pressure can still be neutralized by organizational commitment, while chronic burnout is more difficult to offset by emotional attachment alone.

Overall, this study underscores the importance of building organizational commitment as a psychological mechanism that can strengthen employee contributions, even when they face significant work pressure. These findings expand the literature on organizational behavior, particularly in the context of healthcare in Indonesia, which has received little attention to date.

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