

# Nurse Resilience in The Covid-19 Pandemic at *Palang Merah Indonesia*, Bogor Hospital

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## Abstract

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**Introduction:** The nurse's performance was successful in carrying out the task and achieving the stated goals. The performance can be declared excellent and successful if the desired goals can be appropriately performed. **Method:** The design of this study was a correlational quantitative analytic study with a cross-sectional study design. The analysis technique used structural equation modeling. The sampling technique used probability sampling, namely disproportionate stratified. Measurements in this study used a questionnaire distributed to 210 respondents and a questionnaire that returned several 210 sets of questionnaires. **Results:** The results showed that quality of work-life, role conflict and work stress were influence to nurse performance; quality of work-life was an influence to work stress; role conflict was an influence to job stress; job stress was an influence to nurse performance; quality of work-life was an influence to nurse performance, and role conflict was an influence to nurse performance. **Recommendation:** The research implication for management has to improve the nurses' performance by increasing the quality of work-life and controlling role conflict and work stress so that performance results become better and support achievement.

**Keywords:** quality of work-life, role conflict, work stress, nurse performance.

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## INTRODUCTION

The impact of the Covid-19 pandemic on hospitals has been a decrease in the number of outpatient and inpatient visits. As many as 71.8 percent chose not to visit health facilities and use digital health services to conduct consultations. Based on the key performance indicators, the hospital's performance is not optimal; this can be caused by not fulfilling the desired performance. Work stress during the Covid-19 pandemic conditions was experienced by all hospital employees, including doctors and nurses. Especially those who served in a particular isolation room. Health workers caring for Covid-19 patients have a very high risk of exposure. Research has presented a 3.8% chance of medical personnel being infected with Covid-19, mainly due to unprotected initial contact with an infected patient (1).

Nurses who experience work stress because they bear an overload of work are at high risk of infection and prolonged fatigue. It leads to an increased risk of disease. Therefore, health workers and policymakers need to pay attention to protective factors and the adaptation process in the conditions of the Covid-19 pandemic. Primary data conducted on nurses in hospitalized shows that the perception of work stress tends to be less good with a result of 85% compared to 15%, the perception of quality of work-life towards nurses has a value of 51%, which tends to be less good than tends to be good of 49%. Perceptions of role conflict have a value of 57%, which tends to be less good than that of 43% (2).

The motivation for this research was carried out because, first, the hospital's performance is influenced by the performance of individual employees, so it is essential to observe the performance of employees, especially nurses, because, during the Covid-19 pandemic, there were many work pressures and excessive workloads. Second is the novelty of this study (3). The situation and conditions during the Covid-19 pandemic gave

immediate attention to work stress so that there was a change in positioning the work stress variable that in this study acted as a mediating/intervening variable. Third, the perception of quality of work-life for hospital nurses tends to be less because they experience high work pressure due to the influence of the Covid-19 pandemic, so increased knowledge and skills must be needed in this particular situation. Fourth, the conditions of the Covid-19 pandemic have greatly affected many things, both individuals, institutions, and the industrial environment globally.

## OBJECTIVE

The study aimed to examine the effect of quality of work-life, role conflict, work stress on nurse performance.

## METHOD

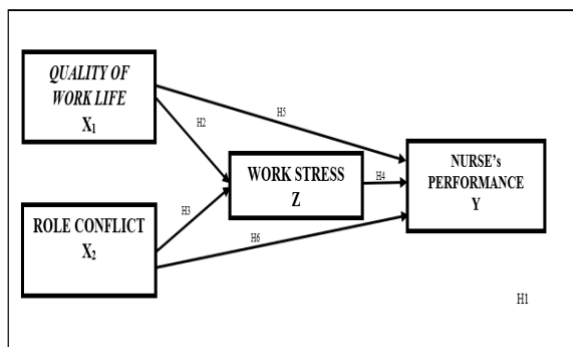
### Design

A quantitative study with the cross-sectional design approach was applied in this. Explain the briefly of a cross-sectional study

### Sample and sampling technique

The sample in this study were all nurses with the sampling technique used was the probability sampling technique, namely disproportionate stratified. It was based on the sample size calculation in the nurse population in 2020 (n=210). Using a 95% confidence level and a 5% absolute error for one sample test as a proportion. We recruited the total population from hospital staff, which was more significant than the total number of the estimated subjects as our target sample to examine the path analysis.

Figure 1. Study Model



### An instrument for data collection

Data collection used to use a printed questionnaire or google form. The questionnaire consists of 5 parts. The first part was the respondent's agreement sheet. The second part was the respondent's identity, age, gender, occupation, and educational background. The third part was a question about the quality of work-life, which consists of 9 topics, each of 5 questions on each topic, nurse participation, conflict resolution, communication, occupational health, job safety, job security, proper compensation, pride, and career development. The fourth part was a question about role conflict which consisted of 5 topics, each between 2 to five questions for each topic. The topics were working pressure, some task demands, lack of family togetherness, work and commitment conflicts, and responsibility towards family. The last part was the question of work stress consists of five topics each. There were five questions on any topic. The topics were task demands, role demands, interpersonal demands, organizational structure, and leadership.

### Validity and reliability test

The validity test was done using Pearson Product Moment Correlation, where the data is declared valid if  $r_{count} > r_{table}$ . Data from 30 respondents were taken for validity testing. Invalid questionnaire items were not included in further analysis in this study. The reliability test was carried out using the Cronbach Alpha ( $\alpha$ ) > 0.6 test, which indicated that all the variables of this study were reliable. All variables tested for reliability were found to be eligible such as quality of work-life questionnaire (Cronbach

Alpha was 0.972), Role conflict questionnaire (Cronbach Alpha was 0.886), Work stress questionnaire (Cronbach Alpha was 0.975).

### Statically Analysis

The research method used in this research is quantitative correlational research with a cross-sectional research design approach. The sampling technique is probability sampling using disproportionately stratified to see the effect of quality of work-life and role conflict on nurse performance mediated by job stress. Hypothesis testing is intended to see the influence between variables. The data analysis technique used is the Structural Equation Modeling (SEM) technique, whose statistical processing will be assisted by the Analysis of Moment Structure (AMOS) program.

### Model Fit

The AMOS Program was used to estimate the path analysis using maximum likelihood estimations of each parameter in the hypothetical model. Each significant parameter in the path analysis was determined using a standardized regression weight estimate (b) of the adjusted model fit with the hypothetical model. Test for the goodness of fit of the pathways on influencing factors toward intention to practice healthy eating behaviors and physical activity are summarized in Table 5:

### Ethics Consideration

The committee of the Ethics Review Board was approved for this research before collecting data. Informed consent was obtained from each participant willing to participate in this study.

## RESULTS

### Demographic Data

From a total of 210 respondents examined at PMI Bogor Hospital, the number of females the number of female respondents is more than male respondents with the percentage of female respondents numbering 139 people (66.2%) and male respondents numbering 71 people (33.8%), married

Variable	Standard Estimate	S.E.	C.R.	P
Quality of work life	1.851	.151	5.643	.000
role conflict to stress	1.268	.076	1.849	.000
work stress to performance	3.815	.701	2.782	.005
Probability of nurses	1.858		0.057	
Cmin/DF			1.845	
Quality of work life to The performance of nurses	1.366	.690	0.995	.048
RMSEA			0.032	
role conflict to performance of nurses	1.990	.261	2.201	.022
CFI			1.000	

respondents are 200 people (95.2%) ). Unmarried is 10 people (4.8%), the number of respondents the percentage of respondents aged 20-30 years is 72 people (34.3%), ages 41-50 years are 54 people (25.7%), ages 31-40 years are 53 people (25.2%) and 31 people aged 51-60 years (14.8%). more respondents with a Diploma III level of nursing education, 198 people with a diploma III education level of nursing (94.3%), 8 undergraduate education levels. (3.8%), and the level of undergraduate education of 4 people (1.9%). The number of respondents at the level of PK II clinical nurses was 104 people (48.5%), those at the PK III clinical nurse level were 64 people (30.5%), the level of PK I clinical nurses was 31 people (14.8%) and those at the PK clinical nurse level IV some 11 people (5.2%).

### The goodness of fit test result

Table 5 shows that the value of X2 - Chi-Square has amounted to 1.849, and the probability was p = 0,057. The probability value of 0.05 indicated that Ho, which stated no difference between the sample covariance matrix and the estimated population covariance matrix, was acceptable. This suggested that the sample covariance matrix with the estimated population covariance matrix was the same, so the model was declared a good (fit) model.

### Table 1. goodness of fit test result

### Table 2. Hypothesis Test

The relationship between direct and indirect variables was evaluated using the AMOS program. The results can be seen in the figure below:

### Discussion

#### The effect of quality of work-life and role conflict on nurse performance with work stress as an intervening variable

Measurement model test is to test the relationship between indicators and latent variables. Combined with structural model testing and measurement, the researcher allows the researcher to test measurement error as an inseparable part of AMOS-SEM and perform factor analysis and hypothesis testing. It shows an influence between the quality of work-life, role conflict, and work stress on nurse performance. This also proves that the results of the first indirect effect test show that the quality of work-life affects the performance of nurses with work stress as an intervening variable which is proven to be significant.

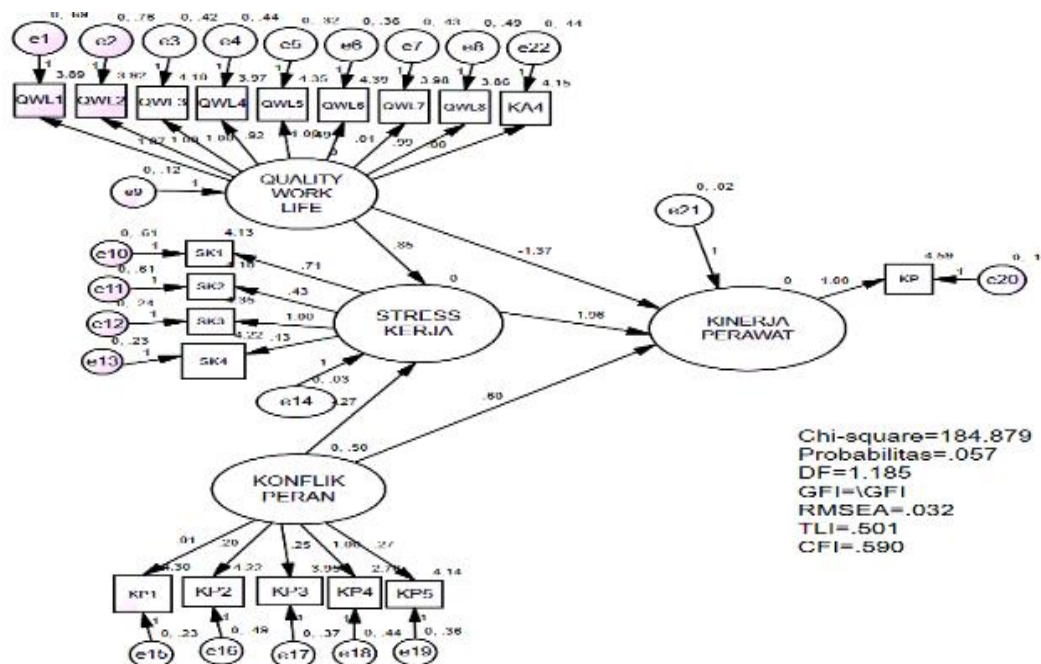
The second indirect effect test shows that role conflict affects the performance of nurses with work stress as an intervening variable which is proven to be significant. The respondents' responses can be analyzed through the three-box method that the behavior shown by respondents in carrying out tasks is that nurses have high dignity in their lives because they provide benefits to others. Gibson Ivancevich and Donnely argued that performance is the appearance of the work, both the quality of each task and how many tasks an employee can accomplish.

Thus the quality of work-life is one part of the factors that cause employee performance to increase. Apart from the quality of work-life, role conflict also affects employee performance improvement. This is following the opinion of Frone, Russell. Cooper defines family work conflicts as role conflicts that occur in employees who have to do work in the office. On the other hand, they have to pay attention to the family, so it isn't easy to distinguish between work that

disturbs the family. and family interferes with work (3,6)

Job stress mediates a partial mediating relationship between quality of work-life, role conflict, and staff performance. Based on the discussion above and the results of this study are following the opinion about staff performance, their researchers conclude that high quality of work-life, low role conflict and Low work stress will positively impact employee performance (11)

**Figure 2: Construction Model of Stud**



**The effect of quality of work-life on work stress**

The previous research showed the effect of quality of work-life on work stress. It is known that the estimated value of the impact of quality work of life on work stress is 0.851, the CR value is 5,643, and the p-value is 0.000 <0.05, this value shows that the results meet the requirement, namely <0.05. it can be concluded that H0 is rejected and H2 is accepted. This means that the high dignity of quality work of life can make nurses deal with work pressure with resilience. This increases hospital performance as well, but hospitals provide reasonable incentives

according to the work that has been done. The value is low, which means that the hospital has not fulfilled the expected incentives because the Covid-19 pandemic conditions impact hospitals.

Lazarus and Folkman (1984) maintain that stress results from people's beliefs that they are deficient in needed resources to confront challenging events. It stands to reason that psychological capital (PsyCap) is one needed aid to help employees encounter challenging and stressful events at the workplace, which consequently may mitigate the negative consequences of work stress on employees QWL (14)

Descriptive analysis using the three box method on work stress variables, the highest index value on "I work according to procedures set by the hospital in treating patients with a score of 160.8. Nurbaiti Surya supported the results of this study, and Yo. also Wijaya shows a significant positive effect of quality of work-life on work stress. High quality of work-life in a nurse's job is expected to have low work stress to be above independently to provide a good nurse performance output (7-9)

The quality of work-life provided by the hospital has a high value. This increases the hospital's performance as well. Still, the hospital offers reasonable incentives

according to the work that has been done. The value obtained is low. This means the hospital has not met the expected incentives due to conditions. The COVID-19 pandemic has had an impact on hospitals. The above will have implications for work stress in the hospital. Descriptive analysis using the three-box method on the work stress variable, the highest index value in SK 25 "I work according to the procedures set by the hospital in treating patients with a score of 160.8. The lowest index value is in Decree 5 "I continue to do my professional duties even though other people talk about me because my job is caring for Covid-19 patients in hospitals," with a score of 136.6. The results of this study support the theory of Quality Of Work Life as employee perceptions such as that employees feel safe, relatively satisfied and get the opportunity to grow and develop as human beings (5)

#### **The effect of role conflict on work stress**

The results of the research on the effect of role conflict on work stress through statistical test calculations show that the estimated value of the impact of role conflict on work stress is 0.268. the CR value is 0.076, and the p-value is  $0.000 < 0.05$ , this value shows that the results meet the requirements of less than 0.05 for P. It can be concluded that H0 is rejected and H3 is accepted. From the estimated effect value of 26.8%, the remaining 73.2% is influenced by other variables. These results also receive support from the descriptive analysis of the three-box method. Descriptive analysis using the three-box method on work stress variables, the highest index value on "I work according to procedures set by the hospital in treating patients with a score of 160.8. The lowest index score is" I continue to do my professional duties even though other people talk about me because my job was caring for Covid-19 patients in the hospital "score 136.6.

Low role conflict in the work of nurses is expected to have intense work stress so that it can be above independently so that it provides a good nurse performance output. According to Anicich and Hirsh (2017), role conflict is defined as having improper job

responsibilities, lower productivity, tension, and psychological withdrawal. Employees have to experience the pressure in their jobs, but job roles might rotate or increase year to year. On the other hand, job stress also depends on the demands of each employee who are in charge of single or multiple job roles. There are also many dimensions for role conflict where the employees might have family issues at home. When they come to the office, the job conflict and family issues might mix up together, which would trigger an adverse emotional reaction and inability to perform effectively on the job. Hence, the pressure and stress within employees also increase indirectly (15)

The results of this study support the theory was defined work-family conflict as a role conflict that occurs in employees, where on the one hand, he has to do work in the office. On the other hand, he must pay attention to the family as a whole, making it difficult to distinguish between work interferes with family and family interferes with work (6)

The results of this study are supported by Kalendesang (2017), Tjokro and Asthenu (2015) shows a significant positive effect of role conflict on job stress. Low role conflict in the work of nurses is expected to be low in work stress so that it can be handled independently to provide good nurse performance output (10,13)

#### **The effect of work stress on the performance of nurses**

The research results on the effect of work stress on the performance of nurses through statistical calculations using Amos. It is known that the estimated impact of work stress on nurses' performance is 1.958, the CR value is 2.792, and the p-value is  $0.05 < 0.05$ . there is a positive and significant influence between job stress on the performance of nurses. This has implications for the performance of nurses in assessing individual performance indicators with an average index value of 181.6, which lies in the high category, where the performance of nurses is good. As many as 53% of nurses, based on the assessment results of individual

performance indicators, were declared to have satisfactory or outstanding performance.

Nursing is one of the riskiest professions, nurses exposed to the different stressors in their work area, those stressors related to other causes, such as work environment, co-worker relations, conflict with a supervisor, workload, painful situations, lack of knowledge, and skills among nurses, lack of support. There is a negative relationship between occupational nursing stress and job performance, job satisfaction, physical and mental health, quality of life, and a positive relationship between job stress and nurses' burnout (16)

The results of this study support the theory of Robbins (2008), which states that work stress is a condition that arises from the interaction between humans and work and is characterized by human changes that force them to deviate from regular functions. The results of this study are supported by Tjokro and Astheny (2015), showing a significant positive effect of work stress on performance. With moderate work stress, which can be managed independently or with support from hospital management, the nurse's performance will be better (4,10)

### **The effect of quality of work-life on the performance of nurses**

The results of statistical testing on the estimated value show that the impact of quality of work-life on nurses' performance is 1.366, the CR value is 0.690, and the p-value is 0.048 <0.05. These results supported descriptive analysis using the three-box method on the variable quality of work-life, the highest index value on "I feel responsible for helping improve hospital performance" with a score of 183.8. As many as 53% of nurses, based on the assessment results of individual performance indicators, are declared to have satisfactory or outstanding performance.

QWL is much broader and more diverse than organizational development, ensuring adequate and fair compensation, safe and healthy working conditions, and personal growth and development

opportunities. The satisfaction of social needs at work, protection of employee rights, compatibility between work and nonwork responsibilities, and the social relevance of work life (17)

The results of this study support the theory of quality of work-life according to quality of work-life as employee perceptions such as that employees feel safe are relatively satisfied, and get the opportunity to grow and develop as humans and Fried, Fottler. Johnson's theory states that performance results from performance appraisals that can provide an overview of how employees implement the management system. The results of this research are supported by Surya and Astitiani (2016), showing a significant positive effect on the quality of work. life to the performance (5,11,12)

### **The effect of role conflict on the performance of nurses**

the results of statistical testing on the estimated value. It is known that the impact of role conflict on nurse performance is 0.598, the CR value is 2.292, and the p-value is 0.022, meaning that there is a positive and significant influence between role conflict on nurse performance. This result also obtained support from the descriptive analysis of the three-box method on the role conflict variable. The highest score was "I still pay attention to my family even though there is work in the hospital," with a score of 155.2. the lowest index value is "I accept an assignment without the support of adequate resources such as colleagues. those who are less competent to work together "score 118.8.

Role conflict reflects a contradictory attitude between himself and the organization's demands and work that creates psychological pressure for employees. There is disagreement among members of the organization about the contents of the task carried out. Role Conflict is when employees experience difficulties facing two or more pressures and difficulties that coincide with their role as workers. Role conflict leads to a psychological conflict where employees will not be able to fulfill every role expected at the same time. Yasa

(2017) states that role conflict occurs when someone with conflicting demands performs a different role (18-21)

The results of this study support the theory of Frone, Russell, and Cooper. It defines family work conflicts as role conflicts that occur in employees. On the one hand, they have to do work in the office, and on the other hand, they have to pay attention to the family as a whole, so it isn't easy to distinguish between work that disturbs the family. Family disrupts work, and Fried, Fottler, and Johnson's theory state that performance results from performance appraisals can provide an overview of how employees implement management systems to achieve organizational goals. The results of this study were supported by Kalendesang et al., and Tjokro et al. show a significant positive effect on role conflict on performance. Based on these results, it can be concluded that the lower the role conflict, the stronger the nurse's performance (10,13)

### **Conclusion**

Based on the results of this study, it shows the most robust support for the mediation relationship pattern carried out by work stress on the influence of quality of work-life and role conflict on nurse performance. These results support the theory of quality of work-life according to Cascio states that performance is the result of performance appraisal that can provide an overview of how employees implement a management system to achieve organizational goals. With a high quality of work-life, they feel responsible for helping improve the hospital's performance. The research findings show that nurses perform resilience to deal with work stress because they have a high dignity in the quality of life even though they have ambiguity about professional roles with households due to the Covid-19 pandemic. The target and the intended orientation is for performance in performing achievements in the hospital. Quality of work-life and role conflict mediated by work stress partially have a positive and significant effect on nurse performance, and quality of work-life and

role conflict directly impact nurse performance. This study proves the hypothesis of the influence of quality of work-life, role conflict, and work stress on nurse performance. Develop a counseling system for nurses by making guidelines and standard operating procedures for psychosocial support against role conflicts and work stress of nurses in work units.

Development of a medical service system during the Covid-19 pandemic by meeting all the infrastructure and personal protective equipment for nurses, creating standard operating procedures for Covid-19 services following the regulations of the Ministry of Health of the Republic of Indonesia, as well as improving the quality system of Covid-19 services through the evaluation of the ICP team at the hospital.

### **Author contribution**

Mochamad Arfan Fachturohma conceived, designed the research, analyzed the data, wrote and edited the manuscript; MF Arrozi Adhikara and Kemala Rita Wahidi acted as supervisors.

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