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# The Impact Of Presenteeism On Hospital Management And The Factors Influence Indonesia Case

## Redy<sup>1</sup>, Hasyim, Hasyim<sup>2</sup>, Rokiah Kusumapradja<sup>3</sup>

<sup>1,2,3</sup>Esa Unggul University; Jakarta, Indonesia

#### ABSTRACT

**Background:** Hospitals play a vital role in delivering healthcare services to the community, yet they encounter challenges affecting employee productivity, notably presenteeism—when employees are physically present at work despite health issues.

**Objectives:** The research aims to look at the factors that influence the formation of presenteeism in hospital medical personnel **Methods:** The use of the structural equation model method was applied in this research using all nursing staff as the analysis unit at the National Brain Hospital. Prof. Dr. Mahar Mardjono, Jakarta Indonesia. Data collection used a survey compiled from indicators of the variables studied

**Results:** From the results of data processing, it was found that presenteeism is influenced by employee job satisfaction, affective commitment, and organizational support both directly and indirectly. Even organizational support mediates the relationship between job satisfaction and presenteeism. These results indicate that presenteeism can be formed from three research variables, namely employee satisfaction, affective commitment and organizational support

**Implications:** Research findings can be used by hospital management as an instrument for formulating strategies to develop presenteeism that has a positive impact and reduce the negative impact of the presence of presenteeism among hospital medical personnel.

KEYWORDS: Affective Commitment, hospital medical personnel, Organizational Support, Presenteeism

#### I. INTRODUCTION

The healthcare sector plays a vital role in delivering essential services to communities, with hospitals serving as key institutions within this industry. Nevertheless, hospitals encounter various challenges in their operations that can impact employee productivity and performance, one of which is presenteeism. Presenteeism entails employees physically being present at work despite experiencing health issues (Cooper & Lu, 2018). It can manifest in forms related to physical or mental illnesses, as well as non-pain-related factors (psychosocial). Physical and mental illnesses associated with presenteeism encompass conditions such as flu, migraines, ulcers, hypertension, depression, also bipolar disorder. Conversely, non-pain-related presenteeism can stem from life conflicts, work conflicts, stress, or inadequate workplace support (Koopman et al., 2002).

The presence of ill or unhealthy employees in the workplace, known as presenteeism, can significantly diminish a company's productivity over the long term. Employees who work under suboptimal conditions often struggle to perform effectively, exhibiting reduced focus, fatigue, or an inability to contribute efficiently. Consequently, work quality may suffer, leading to customer dissatisfaction, tarnished company reputation, also missed business opportunities.

However, within service-oriented industries like hospitals, presenteeism may yield positive effects on patient health services. Absences among nurses due to health issues could result in some patients receiving suboptimal care, thereby increasing the workload for their colleagues. Given the intricate also comprehensive nature of hospital services, nurses are expected to maintain professionalism also deliver optimal care to meet patient needs, ultimately enhancing the quality of healthcare services. Such circumstances are likely to influence a nurse's decision to engage in presenteeism (Şahin & Aydın, 2020).

Aronsson et al. (2000) study demonstrates that nursing exhibits a high prevalence of presenteeism at 44%, second only to the education sector at 46%. Moreover, recent research by Webster et al. (2020) indicates that over 60% of employees report to work when unwell, a figure that rises to 90% in studies specifically involving nursing staff.

A survey conducted at the National Brain Center Hospital Prof. Dr. dr. Mahar Mardjono Jakarta revealed a decline in productivity between 2015 also 2019 (National Brain Center Hospital Strategic Plan, 2019). This decrease is attributed to a high level of presenteeism among nurses. Despite having 450 nurses on staff as of August 31, 2023, only 57 took sick leave during the same



period, resulting in a sickness absence rate of just 12.7% with an average duration of 0.63%. These figures indicate a low rate of illness-related absences, suggesting that nursing staff continue to report to work despite their health issues, which range from musculoskeletal pain to psychological and psychosocial problems.

A preliminary survey involving 10 randomly selected nursing staff at government hospitals found that 70% exhibited a high level of presenteeism. Numerous studies attribute health-related factors as antecedents to presenteeism. Lohaus & Habermann (2019) categorize determinants of presenteeism into individual attitude-related, work-related, and organizational-related contexts, encompassing factors such as emotional exhaustion, workload, organizational support, also absence policies.

One reason employees opt to continue working despite being unwell is bolstered by individual attitude factors, among which is job satisfaction. While satisfaction with one's job can serve as a motivational factor for consistent attendance, an individual's decision to work despite illness stems from personal volition. This perception often entails disregarding the negative aspects of this behavior and perceiving a genuine affinity for one's job due to the willingness to work even while not fully recovered from an illness (Rodríguez-Cifuentes et al., 2020). This underscores that higher levels of job satisfaction correlate with lower levels of presenteeism, and conversely. For instance, in a longitudinal study, Côté et al. (2021) found a negative relationship between presenteeism and job satisfaction.

While some studies have established a positive association between job satisfaction and presenteeism (Rodríguez-Cifuentes et al., 2020), others have reported contradictory findings (Côté et al., 2021; Keramat et al., 2020). Additionally, certain research indicates that job satisfaction is unrelated to presenteeism (Karadağ, 2022).

The disparate outcomes of previous studies underscore a research gap for constructing a research model with affective commitment as a mediating factor. Dissatisfaction among nursing staff is linked to various factors such as staffing levels, resources, remuneration, and workplace safety. Given the unique demands of the nursing profession, management must prioritize the job satisfaction of nursing personnel. This line of work is characterized by its labor-intensive nature, physical also psychological demands, emotional strain, unpredictable work environment, also often, a lack of recognition from administrators also physicians (Akinyemi et al., 2022). The persistent shortage of nurses exacerbates pressure on available nursing staff, leading to overwork, stress, errors, psychosomatic issues, and burnout, consequently diminishing emotional attachment to the hospital of employment (affective commitment). Studies indicate that when nursing staff perceive their salaries as competitive, equitable, and commensurate, job satisfaction and affective commitment are enhanced, resulting in reduced presenteeism. Furthermore, research demonstrates a positive relationship between job satisfaction and affective commitment among nursing staff (Akinyemi et al., 2022; Gider et al., 2019; Wang et al., 2022), and affective commitment has a negative impact on presenteeism (Yang et al., 2017).

Moreover, it is posited that despite being physically present, employees who attend work while ill may exhibit mental absenteeism, thereby limiting their capacity to achieve expected outcomes (Karanika-Murray & Cooper, 2018). Consequently, as employees are unable to perform at their peak physical also psychological capacity, this can impact their emotional also attitudinal responses, including job satisfaction (Karanika-Murray & Cooper, 2018). Similarly, presenteeism has been associated with diminished job satisfaction through affective-motivational states such as affective commitment (Karanika-Murray & Cooper, 2018; Yang et al., 2017, 2019).

A cross-sectional and correlational design study validates that affective commitment motivates employees to fulfill their work obligations, enhance their performance, develop their skills, also reduce presenteeism. While the study revealed a positive correlation between affective commitment and presenteeism (El-Kurdy et al., 2022), several other studies suggest the contrary, indicating a negative relationship between affective commitment and presenteeism. High levels of affective commitment can foster employee loyalty and a sense of belonging to an organization. Employees are likely to consciously regulate their behavior and enhance their work performance, consequently lowering the incidence of presenteeism (Yang et al., 2017).

One of the reasons individuals choose to persist in attending work despite being unwell is supported by organizational factors, among which is perceived organizational support (POS). Employees who perceive high levels of support tend to develop favorable perceptions (Robbins & Judge, 2017). Elevated levels of perceived organizational support are believed to generate a sense of obligation within individuals to reciprocate the organization's support (Eisenberger et al., 2001). Meta-analytic results demonstrate that perceived organizational support also fulfills socioemotional needs, leading to increased identification with also commitment to the organization, heightened willingness to contribute to the organization's success, and enhanced psychological well-being (Kurtessis et al., 2017).

It is anticipated that elevated levels of perceived organizational support will exert a positive influence on the relationship between job satisfaction and presenteeism. Strengthening this relationship, it has been observed that the greater the perceived organizational support felt by employees, the higher the likelihood that employees will experience positive feelings of affective commitment toward their organization (Alshaabani et al., 2021). The study revealed a moderating effect of perceived organizational support on presenteeism (Wu et al., 2023).

As per the aforementioned background of the problem, this research aims to reevaluate the roles of job satisfaction, affective commitment, and perceived organizational support in exacerbating presenteeism in the hospital services sector. This study endeavors

to offer deeper insights into the factors influencing the prevalence of presenteeism in hospitals. Such insights can aid hospital management in identifying also addressing presenteeism issues that could potentially undermine employee performance also productivity. By comprehending the factors influencing presenteeism in hospitals and their ramifications, this research can furnish guidance and recommendations for hospital management to formulate policies and practices aimed at enhancing employee well-being, organizational performance, and patient services.

## II. METHOD

#### A. Research Design

This study employs a causal quantitative approach to ascertain the relationships between variables as per previous hypotheses posited by prior researchers, namely elucidating the direct also indirect impact of job satisfaction on presenteeism through affective commitment, and the moderating effect of perceived organizational support.

The research constellation in this model is depicted in the figure below:

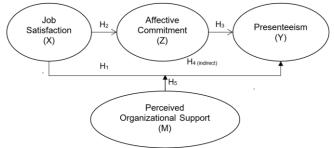


Figure 1. Research Constellation

Can be summarized as:

- H1: Job satisfaction influences presenteeism
- H2: Job satisfaction influences affective commitment
- H3: Affective commitment influences presenteeism
- H4: Affective commitment mediates the relationship between job satisfaction and presenteeism
- H5: Perceived organizational support moderates the relationship between job satisfaction and presenteeism

#### **B.** Population and Sample

The target population for this study comprised all nursing personnel employed at the National Brain Hospital Prof. Dr. dr. Mahar Mardjono Jakarta, encompassing Intermediate Expert Nurses, Junior Expert Nurses, First Expert Nurses, Expert Nurses, Skilled Nurses, also other nursing staff, totaling 535 individuals as of October 31, 2023.

The sampling method employed in this research was purposive sampling. Utilizing the Slovin formula with a 5% margin of error, the minimum required sample size for this study was determined to be 229 participants, rounded up from 228.87.

#### C. Data Collection Techniques also Research Instruments

The data collection method employed in this study involves the utilization of a questionnaire, which is disseminated either in person or electronically through a Google Form.

#### D. Data analysis technique

The analytical techniques employed in this study encompass the Three Box Method, a descriptive statistical approach, also the Structural Equation Modeling (SEM) method utilizing the Partial Least Squares (PLS) methodology.

#### **III. RESULT AND DISCUSSION**

#### A. Respondent Characteristics

As per the data obtained from 229 nurses at the National Brain Hospital, the results reveal that the majority of participants were female, accounting for 181 individuals or 79%. The largest demographic age bracket fell within the range of 31 to 40 years old, comprising 111 individuals or approximately 48.5%. Approximately 110 respondents, constituting around 48%, held a similar educational background. Moreover, a significant portion of the respondents, totaling 143 individuals or 62.4%, reported having worked for 5 to 10 years. Additionally, the majority of participants, 195 individuals or 85.2%, were civil servants.

#### B. Index analysis of respondents' answers

The respondents' responses underwent analysis using the Three-box Method, which categorized scores into three tiers: low (57.25 - 114.4), medium (114.5 - 171.74), and high (171.75 - 229). The average matrix results of the Three-box Method analysis are outlined as follows:

As per the Three-box Method matrix presented in Table 2, job satisfaction among nurses in this hospital generally falls within the medium level. This indicates that while nurses may exhibit a reasonable degree of satisfaction with their job, there are still areas that could be enhanced or modified to further improve job satisfaction. Although the level of affective commitment is noteworthy, it is not exceptionally high, suggesting potential for enhancement. Similarly, while organizational support is considerable, it is not exceptionally high either, implying opportunities for improvement in this aspect. Likewise, nurse presenteeism is notable but does not reach an exceedingly high level, suggesting room for improvement in this regard as well.

#### IV. DATA ANALYSIS

#### A. Measurement Model Test Results (Outer Model)

Test results convergent validity shows that the lowest loading factor value is 0.707 and the highest is 0.856 so that overall the data collected is valid and has good convergent validity.

	•	0				
Variable	Score Low Currently High		High	Behavior		
Job Satisfaction				Nurses have a fairly satisfied perception of their work at the National Brain Hospital		
Affective Commitment		$\checkmark$		Nurses have a moderate emotional connection to their work		
Perceived Organizational Support		$\checkmark$		Hospitals make several efforts to meet needs also provide necessary resources for nurses		
Presenteeism		$\checkmark$		The nurse experiences health problems, but chooses to work		

Table 2. Three Box Method Analysis Average Matrix

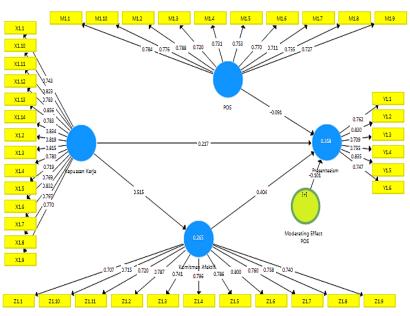
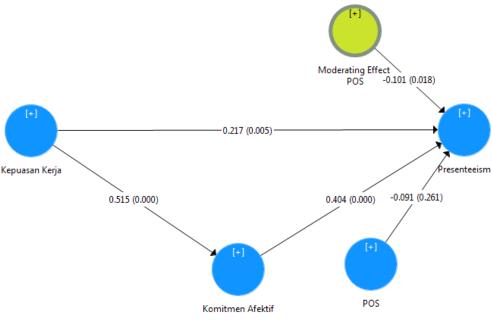


Figure 2. Measurement Model Results

The outcomes of the discriminant validity assessment reveal that each indicator exhibits a higher cross-loading value compared to other indicators, thus affirming its validity. Consequently, all latent constructs exhibit satisfactory discriminant validity, indicating their ability to predict their respective indicators more effectively than indicators from other constructs. Moreover, the Average Variance Extracted (AVE) value for each variable surpasses 0.50, fulfilling the prerequisites for subsequent testing. Additionally, the Cronbach's Coefficient Alpha value exceeds 0.6 for all variables, while the Composite reliability value surpasses 0.7, signifying the reliability of all variables considered in this study

#### **B.** Structural Model Test Results (Inner Model)

The structural model path diagram in this study is constructed with 1 independent variable, 1 mediating variable, 1 moderating variable, and 1 dependent variable, illustrating the relationship between variables as depicted in Figure 3.



**Figure 3. Structural Model Results** 

The outcomes of the inner model examination reveal that the coefficient of determination for affective commitment (Z) is 0.265 or 26.5%, indicating a weak level. This implies that 26.5% of the variance in affective commitment can be elucidated by job satisfaction, while the remaining 73.5% is attributed to other unexplored factors. Similarly, the coefficient of determination for Presenteeism (Y) stands at 0.358 or 35.8%, categorizing it as moderate. This signifies that 35.8% of the variability in presenteeism can be accounted for by job satisfaction also affective commitment, with the remaining 64.2% attributed to factors beyond the scope of this study.

As per the findings of the structural model test employing the bootstrapping method, the direct and indirect effects, along with moderation, are presented in the subsequent table.

Ha	Between Variables	Original Sample	<b>P-value</b>	Supported/ Not supported
$H_1$	Job Satisfaction $\rightarrow$ Presenteeism	0.217	0.005	Supported
$H_2$	Job Satisfaction $\rightarrow$ Affective Commitment	0.515	0,000	Supported
$H_3$	Affective Commitment $\rightarrow$ Presenteeism	0.404	0,000	Supported
$H_4$	Job Satisfaction $\rightarrow$ Affective Commitment $\rightarrow$	0.208	0,000	Supported
	Presenteeism			
$H_5$	POS Moderation	-0.101	0.018	Supported

## Table 3. Hypothesis Test Results

#### **V. DISCUSSION**

## A. The Influence of Job Satisfaction on Presenteesm

The study findings reveal a noteworthy association between job satisfaction and presenteeism among nurses at the National Brain Center Hospital. It suggests that heightened job satisfaction correlates with an increased propensity for presenteeism, wherein nurses opt to remain at work despite experiencing health challenges.

In theory, elevated job satisfaction typically leads to diminished presenteeism, as contented employees tend to exhibit higher productivity also reduced likelihood of absence or unproductive physical presence. For instance, Côté et al. (2021) posited a negative correlation between presenteeism and job satisfaction due to insufficient opportunities for recuperation. Thus, unfavorable job satisfaction serves as a predictor for the inclination to attend work while unwell, as employees reporting presenteeism often perceive their workplace as stressful and unsatisfactory.

Contrary to anticipated outcomes, this study unearthed distinct findings, indicating that job satisfaction actually amplifies presenteeism among nurses at the National Brain Center Hospital. This discrepancy can be attributed to the distinctive operational

dynamics of hospitals, particularly their emphasis on delivering comprehensive patient care. The affirmative influence of job satisfaction may stem from factors such as patient care ethos, organizational commitment, also professional ethics.

From a patient care perspective, presenteeism can yield positive ramifications on patient welfare. Opting to attend work despite health adversities ensures continuity in patient care delivery, mitigating the risk of disrupted services due to staff absences. This uninterrupted care provision enhances patient supervision, facilitates effective implementation of planned treatments, also fosters trustful nurse-patient relationships. Additionally, the emotional support extended by present nurses contributes to patient well-being, satisfaction, and recuperative processes.

However, prolonged instances of heightened presenteeism may culminate in adverse repercussions on long-term patient care quality. Continued engagement in work while unwell heightens the likelihood of compromised nursing care quality, escalating the probability of errors also adversely impacting patient outcomes. Consequently, prioritizing nurses' well-being and health emerges as imperative to uphold optimal patient care standards.

Despite contradicting established theoretical frameworks, the study's outcomes find support in research by Rodríguez-Cifuentes et al. (2020), revealing a positive nexus between presenteeism also job satisfaction. This suggests that favorable attitudes towards presenteeism correlate with heightened job satisfaction, indicating that individuals perceive attendance as a manifestation of their commitment to work, thereby bolstering job satisfaction. Consequently, elevated job satisfaction corresponds with increased levels of presenteeism.

In conclusion, while heightened presenteeism, characterized by nurses attending work despite health challenges, may yield certain benefits for patient care continuity, prolonged instances could jeopardize long-term patient care quality. Therefore, it is imperative for the management of the National Brain Center Hospital to prioritize nurses' well-being, foster a conducive work environment, and advocate for self-care practices to mitigate unwarranted presenteeism and uphold quality patient care standards.

#### B. The Influence of Job Satisfaction on Affective Commitment

The test outcomes of the hypothesis reveal a positive correlation between job satisfaction also affective commitment among nurses at the National Brain Center Hospital. This implies that nurses who derive satisfaction from their job are more inclined to establish emotional ties with the hospital, take pride in their affiliation, also exhibit a desire to continue their tenure. These findings underscore nurses' inclination towards roles that afford them opportunities to apply their skills, engage in varied tasks, exercise autonomy, and receive performance feedback, consequently fostering employee fulfillment and contentment.

These findings align with established theories also prior research, indicating that heightened job satisfaction engenders increased affective commitment. When individuals experience job satisfaction, they tend to forge deeper emotional connections with their organization. This phenomenon may arise from the generation of positive emotions like pride, trust, also a sense of belonging stemming from job satisfaction. Furthermore, job satisfaction nurtures camaraderie among colleagues and fosters a supportive work milieu, thereby augmenting affective commitment to the organization (Akinyemi et al., 2022; Gider et al., 2019; Wang et al., 2022).

#### C. The Influence of Affective Commitment on Presenteeism

The findings from the hypothesis testing reveal that affective commitment exerts a positive influence on presenteeism among nurses at the National Brain Center Hospital. This implies that a strong emotional bond with the hospital can lead to heightened levels of presenteeism behavior among nurses. Essentially, nurses who harbor deep commitment to the hospital may be more inclined to remain physically present at work even when they are not in optimal health.

As per Meyer & Allen (1997) theory, affective commitment pertains to the extent of emotional attachment and identification an individual has with the organization they work for. It is characterized by the belief that employees' personal values and priorities align with the organization's mission, fostering a sense of belonging within the organization.

The positive influence observed suggests that nurses with high emotional attachment to the hospital may perceive a stronger obligation to fulfill their work duties, despite experiencing fatigue. They view attendance as an integral aspect of their commitment to their profession and the hospital.

Nurses demonstrating high affective commitment typically feel deeply connected to their work also harbor a strong sense of responsibility towards patients and the healthcare field. This impels them to remain at work even when they are unwell, prioritizing patient health and well-being.

Furthermore, nurses with high affective commitment often feel a moral and ethical obligation to provide the best possible care to patients, further motivating them to remain present at work despite their health condition. They may experience feelings of guilt or concern about leaving patients without adequate care if they choose to be absent. High affective commitment intensifies this sense of responsibility also encourages nurses to remain at work even when unwell.

Additionally, nurses with high affective commitment may feel compelled to offer support and care to patients irrespective of challenging circumstances. They may fear that their absence will escalate their colleagues' workload or disrupt patient care.

While these findings contradict previous theories also research suggesting that affective commitment has a negative impact on presenteeism, they align with studies indicating a positive relationship between affective commitment also presenteeism. For

instance, El-Kurdy et al. (2022) discovered a positive correlation between affective commitment and presenteeism, illustrating nurses' growing commitment and dedication to their duties (affective commitment) as a means to resist obstacles and presenteeism. Presenteeism does not entail feigning illness to evade work responsibilities but rather entails reduced productivity due to genuine health issues. This underscores a new perspective to differentiate between attendance, absenteeism, malingering, and unproductive time at work. These findings affirm that despite experiencing health challenges, nurses persist in executing their duties diligently by harnessing positive perceptions of challenges and affective commitment.

#### D. Affective Commitment Mediates the Relationship Between Job Satisfaction and Presenteeism

The results of the hypothesis testing suggest that affective commitment acts as a mediator in the relationship between job satisfaction and presenteeism among nurses at the National Brain Center Hospital. This implies that the degree of job satisfaction among nurses influences the extent of presenteeism through affective commitment.

However, the findings of the mediation analysis reveal that the effect of affective commitment is comparatively smaller than the direct impact of job satisfaction on presenteeism. This occurs because the introduction of affective commitment weakens the link between job satisfaction and presenteeism. Essentially, a portion of the influence of job satisfaction on presenteeism is accounted for by affective commitment. Hence, affective commitment, serving as a mediator, diminishes the direct effect of job satisfaction on presenteeism.

These outcomes suggest that while job satisfaction can shape affective commitment, which in turn can mitigate the direct impact of job satisfaction on presenteeism, the level of affective commitment exhibited by an individual may not always be robust enough to significantly mediate the relationship between job satisfaction and presenteeism. This scenario may arise if nurses do not harbor a high degree of affective commitment towards their work.

Furthermore, the analysis indicates that job satisfaction holds a more substantial direct influence on presenteeism than its influence mediated through affective commitment. Therefore, the management of nurses at the National Brain Center Hospital may prioritize enhancing job satisfaction as a strategy to reduce presenteeism. Management could assess various factors affecting job satisfaction, such as the workplace environment, organizational policies, and opportunities for career advancement, also endeavor to enhance them.

Although the impact of job satisfaction on presenteeism via affective commitment is relatively modest, hospital management should still acknowledge affective commitment as a pivotal factor influencing the level of nurse presenteeism. Management could explore approaches to foster and sustain nurses' affective commitment to the organization, such as organizing regular meetings, discussion forums, or workgroups with nurses to facilitate open communication, value their input, and engage them in decision-making processes.

Previous research findings support the notion that job satisfaction positively influences affective commitment in nursing staff (Akinyemi et al., 2022; Gider et al., 2019; Wang et al., 2022), while affective commitment negatively affects presenteeism (Yang et al., 2017).

#### E. Perceived Organizational Support Moderates the Relationship Between Job Satisfaction and Presenteeism

The results from the moderation analysis reveal that the path coefficient value of perceived organizational support is -0.101 with a p-value of 0.018, which is below the specified significance level of 0.05. This indicates that perceived organizational support moderates the association between job satisfaction and presenteeism among nurses at the National Brain Center Hospital.

The negative path coefficient value (-0.101) suggests that higher perceived organizational support corresponds to lower levels of presenteeism among nurses. In essence, perceived organizational support negatively influences the link between job satisfaction and presenteeism.

As per Organizational Support Theory, individuals often attribute human-like qualities to their organization, perceiving it as having benevolent or malevolent intentions toward them. Since perceived organizational support (POS) fulfills employees' basic needs in the workplace, those who feel supported by their organization are expected to exhibit better well-being indicators, particularly in terms of job satisfaction. Numerous studies acknowledge the positive impact of POS on employees' subjective wellbeing, as well as their work attitudes also behaviors, including job satisfaction.

In line with this perspective, empirical evidence provided by Côte et al. (2021) demonstrated that POS helps mitigate the adverse effects of emotional labor on job satisfaction. It is anticipated that high levels of perceived organizational support will enhance the relationship between job satisfaction and presenteeism. The greater the perceived organizational support felt by employees, the more likely they are to experience job satisfaction.

Despite the negative value of perceived organizational support (-0.101), the direct influence between job satisfaction and presenteeism is stronger (0.217). This indicates that although perceived organizational support significantly moderates the relationship between job satisfaction and presenteeism, the direct impact of job satisfaction on presenteeism remains predominant.

These findings underscore the continued relevance of the moderating variable, perceived organizational support, in comprehending the interplay of these factors within the context of nurse presenteeism at the National Brain Center Hospital.

However, the primary influence of job satisfaction on presenteeism persists, implying that a nurse's decision to attend work despite illness is more influenced by job satisfaction than perceived organizational support.

In summary, despite the negative coefficient value of perceived organizational support, it remains an essential moderating factor in the connection between job satisfaction and presenteeism. The moderating role of perceived organizational support continues to be pertinent in understanding the intricate dynamics among these variables in the context of nurse presenteeism at the National Brain Center Hospital.

#### VI. CONCLUSION

Job satisfaction exerts influence on both affective commitment and presenteeism among nurses. Affective commitment, in turn, affects presenteeism, acting as a mediator in the relationship between job satisfaction and presenteeism. Moreover, the relationship between job satisfaction and presenteeism is moderated by perceived organizational support.

Management can concentrate on enhancing nurses' job satisfaction through various strategies. These include assigning responsibilities aligned with nurses' skills and interests, ensuring fair compensation, providing supportive supervision focused on nurse development, fostering an inclusive and collaborative work culture, also addressing conflicts among nurses promptly and equitably. Additionally, offering opportunities for career advancement, conducting transparent internal promotions, and providing training for professional growth are vital.

To cultivate a positive also inclusive culture, management should tailor strategies to enhance indicators of emotional attachment, identification, and involvement. This can involve establishing two-way communication channels between management and nurses, such as regular meetings or digital platforms, to disseminate information about policies and organizational changes. Organizing social activities and involving nursing staff in committees or work groups can foster a sense of belonging and identification.

Adopting hospital strategies aligned with perceived organizational support (POS) indicators, such as fairness, supervisor support, also welfare facilities, can further nurture a positive culture. These strategies may include establishing daycare facilities, employee clinics for health counseling, effective complaint resolution mechanisms, promoting open communication, wellness programs, access to mental health support, flexible leave policies, also other initiatives aimed at supporting staff well-being.

To mitigate presenteeism among nurses, hospital management can implement strategies like conducting work-related assessments to evaluate nurses' fitness when dealing with health issues. Adjusting work assignments or transferring nurses to suitable roles, along with developing return-to-work programs, can aid nurses in recovery. Creating a healthy work environment, providing accessible psychological support, and offering counseling services can assist nurses in managing mental and emotional challenges effectively.

#### ABBREVIATIONS

AVE: Average Variance Extracted; PLS: Partial Least Square; POS: Perceived Organizational Support; SEM: Structural Equation Modeling.

#### DECLARATIONS

Research Ethical clearance was obtained from the National Brain Center Hospital Prof. Dr. dr. Mahar Mardjono, Jakarta (Number: DP.04.03/D.XXIII.9/004/2024). Respondents have been informed about the objective of the research also signed the informed consent to participate in the study. All respondents' identities have been removed from the dataset.

#### ETHICS APPROVAL ALSO CONSENT PARTICIPANT

Respondents were addressed before the survey about the survey's objectives also purposes, also verbal consent to participate in the study was taken from them.

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