



The Impact of Organizational Support on Nurse Work Performance Mediated by Mental Health During the Covid-19 Pandemic

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Abstract

During the Covid-19 pandemic, a previous study has shown that organizational support increases mental health, mental health increase work performance, and organizational support increases work performance. However, there was still no study that identified the degree of mediation role of mental health in the relationship between organizational support and work performance; hence this study mainly aimed to investigate whether it was partial or full mediation. We conducted a cross-sectional, quantitative analytical study on nurses of the Covid-19 referral hospital in Jakarta. We used an adapted questionnaire on 127 nurses, validated and analyzed with path analysis. This study found that there was a significant effect of organizational support on work performance both directly and indirectly via mental health. It was proven that mental health mediates the relation of organizational support with work performance. The mediation that occurred was partial mediation. From this result, besides giving the best possible support, the hospital also needs to focus on nurses' and other health workers' mental health, as organizational support will affect work performance better when mental health is in a good state.

Keywords: Covid-19; Mental Health; Organizational Support; Work Performance; Nurses; Human Resource Management

INTRODUCTION

Coronavirus Disease 2019 (Covid-19) is a disease caused by the SARS-CoV-19 virus, first detected in Wuhan, China, at the end of 2019 and then spread rapidly to all corners of the world, including Indonesia (Kumar et al., 2021). The first case of Covid-19 in Indonesia was detected in early March 2020 in Depok, West Java. Since then, the number of confirmed Covid-19 people in Indonesia has continued to increase (Gorbiano, 2020). In a pandemic situation like this, the need for health services is certainly increasing (Gupta et al., 2021). The work demand for medical personnel was increasing because they had to quickly adapt to this new disease and treat patients as best as they could in situations where disease information was still limited and evolving (Gupta et al., 2021). In addition to the increasing work demands, the pandemic also puts other burdens on medical personnel, namely the availability of personal protective equipment, the risk of exposure to Covid-19, and the possibility that they can spread the infection to their families at home, meeting their increasing personal needs and family needs during this pandemics period, etc. (Shanafelt et al., 2020). Tran et al. (2022) summed up three layers of factors that affect healthcare workers in the pandemic era, which factors in layers are reinforcing between and within. The first one is individual predisposing factors such as health status and family attachments; the second layer is individual psychosocial outcomes of healthcare jobs and required tasks during the pandemic, such as stress, burnout, and reduced quality of life, and the last one is substantial changes in working environment and performance, such as increase workload and poor coordination. These burdens and demands can certainly affect the mental health of medical personnel. Research data in Iran shows that during this pandemic, 20.1% of medical personnel experienced distress, 28% anxiety, and 20.6% experienced depression. (S. X. Zhang et al., 2020) Nurses, as human resources in hospitals who have the most direct contact in providing health services to patients (Keliat, 2005), have a high risk of experiencing mental health disorders related to the pandemic.

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The pandemic situation that increases work demands and various other burdens on medical personnel can also affect their work performance. An employee's work performance shows his ability to fulfill his job obligations (Keshavarz & Mohammadi, 2011). Work performance is important in achieving the goals of an organization (Kotteeswari & Sharief, 2014). Work performance is influenced by, among other things, job satisfaction (Ali et al., 2014) and pressure at work (Ismail & Teck-Hong, 2011). Welford stated the theory that at a certain level, namely the level of eustress, pressure at work can spur workers to work better and achieve their targets, but higher levels of pressure can cause work performance to decline and cause symptoms of stress. (Welford, 1973) Research conducted by Hennekam et al. (2020) found that a person's mental state can interfere with their work performance, such as in terms of decreasing the quality of work results, being slower at work, and causing many wrong actions. Some studies found that the Covid-19 era caused psychological changes, which then increased withdrawal behavior, as many aspects of life changed, such as economic, work-family conflict, work-life balance, and lack of group cohesion, as many things shifted to the virtual platform (Giauque et al., 2022; Mishra, 2022).

The relationship between mental health and employee work performance shows the need for a solution so that the mental health of medical personnel is maintained during the pandemic so that their work performance remains good and can provide excellent service to patients. Labrague et al. (2020) conducted a study in the Philippines on nurses caring for COVID-19 patients and found that organizational support could reduce the level of anxiety associated with the COVID-19 pandemic in nurses. Several studies have also shown that employee work performance increases if the manager who leads work together with his employee (Biswas & Varma, 2011).

Referring to the above, organizational or company support, in this case, hospital management is very much needed in this pandemic situation. Many have suggested a variety of organizational support that can be given in the pandemic era. It could be in the form of providing adequate facilities and infrastructure, strengthening individuals, encouraging enthusiasm and good communication with workers, et cetera. (Daniels et al., 2022; Greenberg, 2020; Miotto et al., 2020) With the support from the organization, workers can work well and effectively, so they can play a role in achieving organizational goals, which in this pandemic time is good and complete handling of Covid-19 patients. (Eisenberger et al., 1986; Rhoades & Eisenberger, 2002). A literature review also concluded that in this pandemic situation, additional training is needed for nurses regarding the handling of Covid-19 patients, management of nursing personnel and facilities, such as staff capacity with a balanced number of shifts, and adequacy of personal protective equipment. The psychological aspects of nurses also need to be considered, such as in the form of psychological support from families and the health team (Astuti & Suyanto, 2020).

In this pandemic situation, the Indonesia Ministry of Health has issued a Checklist for the Evaluation of Hospital Readiness during the Covid-19 Pandemic Period in order to provide quality, planned, and standardized health services during a pandemic. (Kementerian Kesehatan Republik Indonesia, 2020) In point 10 it is stated that hospitals must pay attention to occupational health, mental health, and psychosocial support. Hospitals are recommended to provide mental health and psychosocial services and have standard procedures for mental health screening for both patients and hospital staff. Hospital staff should also be trained in the basics of psychological first aid and know when to seek support services when needed. (Kementerian Kesehatan Republik Indonesia, 2020)

As this paper was written, Jakarta is still one of the areas that have the highest positive cases in Indonesia (Sari, 2022). Previous findings have shown that good organizational support will affect work performance positively (Umrani et al., 2019), and good organizational support should increase mental health (Labrague & De Los Santos, 2020) and if there were any mental health disorders, it would decrease work performance (Hennekam et al., 2020). But until this paper was

written, there was still no research that states the degree of mediation role of mental health between organizational support and work performance, whether it was partial or full mediation. Therefore, we were interested in conducting research to see the relationship between organizational support, mental health, and work performance of nurses in Indonesia during the Covid-19 pandemic and to what degree mental health mediates the relationship between organizational support and work performance.

LITERATURE REVIEW

Organizational Support and Mental Health

In a work environment, employees are expected to assist the company in achieving its goals. To achieve this, the organization must also be able to provide something to employees so that employees can give their best performance. Employees who will give their best for the company are those who feel valued and supported by their organization. With this reciprocal relationship, both parties will benefit equally (Eisenberger et al., 2001; Kurtessis et al., 2017). Perceived organizational support is the view of workers regarding how the organization appreciates, recognizes, and cares about their performance. Perceptions felt by workers regarding support from the organization can meet the socio-emotional needs of workers, which can then increase employee commitment to the company, increase the desire to achieve organizational goals, and achieve the psychological well-being of workers (Kurtessis et al., 2017).

During the Covid-19 pandemic, nurses have various sources of causes that can cause disturbances to their mental health. Research data in Iran shows that during this pandemic, 20.1% of medical personnel experienced distress, 28% anxiety, and 20.6% experienced depression (S. X. Zhang et al., 2020). Research in Italy found that medical personnel working in Covid-19 patient rooms had higher levels of depression and post-traumatic stress syndrome than medical personnel working in healthcare facilities that did not treat Covid-19 patients (Di Tella et al., 2020). A study conducted on inpatient department nurses also found that workload affects work stress (Ridhayanti et al., 2022). A literature review reviewed five articles discussing the impact of the COVID-19 pandemic on the mental health of medical personnel and found that nurses experienced more mental health problems than doctors, and nurses felt more anxious than doctors. Medical personnel who are on the front lines and have direct contact with Covid-19 patients have a higher risk of experiencing depression, anxiety disorders, insomnia, and distress (Shaukat et al., 2020).

A person's mental health is influenced by various factors, one of which is interpersonal and environmental factors. Support from the environment, including organizational support, can affect a person's mental health (Labrague & De Los Santos, 2020). Low support from the organization is one of the factors that cause stress to workers. (Currid, 2008; Hamdan-mansour et al., 2011; Lautizi & Ravazzolo, 2009). Regarding this, during the Covid-19 pandemic, the Indonesia Ministry of Health issued a guideline to maintain and evaluate hospital readiness during the pandemic. Key component number 10 in the guideline was about forms of support that the hospital must provide to employees, namely those related to occupational health, mental health, and psychosocial support. (Kementerian Kesehatan Republik Indonesia, 2020)

H1: There is a negative and significant effect of organizational support (X) on mental health issues (Y) on nurses in the Covid-19 pandemic situation

Organizational Support and Work Performance

Work performance, according to the definition that is generally used, is behavior or action that is relevant to organizational goals (Koopmans et al., 2011). Work performance is a term related to work behavior, not the result of work. Employee performance is very important for the company

to achieve the company's goals and success.

According to Koopmans et al. (2013), there are four dimensions forming individual work performance, namely task performance, which measures one's competence to perform a given task, contextual performance, which is one's behavior that can support the formation of the organizational, social, and psychological environment needed for job continuity, adaptive performance to adapt to new conditions and demands in the organization, and counterproductive work behavior.

There are several things that can affect the work performance of an employee. According to Motowidlo, (2003), there are four things that are interconnected with each other which can then affect employee performance, which were knowledge, skills, performance, and external factors such as one's personality, abilities, and experiences. Work performance is also influenced by job satisfaction, pressure, or stress at work (Ampofo et al., 2020), support from around, and also support from the organization (Umrani et al., 2019). Training and development can also affect a person's performance, as it affects one's job satisfaction (Desta, 2021). Umrani et al. (2019) conducted a study of doctors in a hospital in Pakistan and found that organizational support can improve their work performance. Nugraha et al. (2021) found that organizational support has moderating role between professionalism and patient safety culture, which was the responsibility of all health professionals. Sungu & Weng (Sungu & Weng, 2019) found that the perception of organizational support felt by employees has a positive relationship with employee performance, mediated by the employee's affective commitment to the organization. Guan et al. (2014) conducted a study at a university in China and also found a positive relationship between perceived organizational support and performance, with a mediating effect of job satisfaction, positive affect, and employee affective commitment.

H2: There is a positive and significant effect of organizational support (X) on the work performance of nurses (Z) in the Covid-19 pandemic situation

Mental Health and Work Performance

Mental health and its effect on employee performance have been widely studied and received much attention. The World Health Organization & International Labour Organisation (2002) states that mental health disorders can have consequences in the world of work, which can be in the form of an impact on employee performance, frequency of illness, frequency of absences, work accidents, and employee turnover. The International Labour Organization made a graph showing the risk of stress and mental health disorders in each occupational group which concluded that nurses have a moderate to severe risk of stress and mental health disorders because their work requires high skills and a fast work tempo.

Ampofo et al., (2020) conducted a study at a healthcare facility in Ghana and found that factors that can cause a stressful situation for employees will have a negative effect on their performance. The effects can be direct, for example, because of feelings of not being able to help enough, or indirect, where the stressful situation has an impact on their physical health, thereby reducing productivity. Ahmadi et al. (2012) examined the relationship between various variables related to mental health and work performance and concluded that there is a positive relationship between mental health and work performance. Mental health variables studied included self-confidence, understanding related to self-control, depression, anxiety disorders, resemblance, and conflict.

H3: There is a negative and significant influence of mental health issues (Y) on the work performance (Z) of nurses in the Covid-19 pandemic situation

H4: There is a significant influence between organizational support (X) on the work performance of nurses (Z) mediated by mental health (Y) in the Covid-19 pandemic situation

The analytical framework was designed as seen in **Figure 1**.

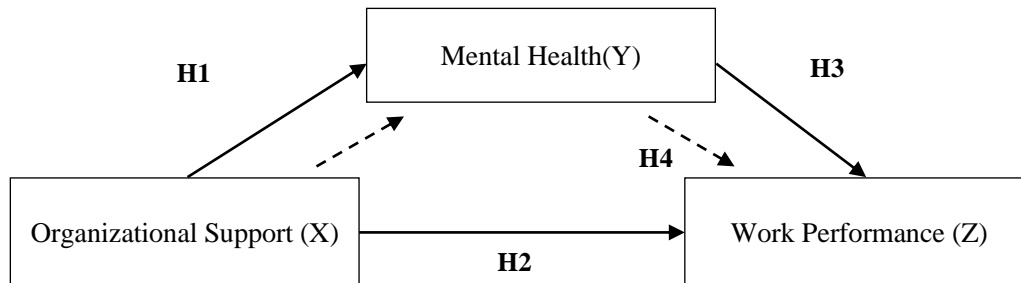


Figure 1. Analytical Framework

RESEARCH METHOD

This was a cross-sectional, quantitative analytical study. (Wright et al., 2016) The study was held in a Hospital for Infective Diseases in South Jakarta, Indonesia, which was one of the national referrals for Covid patients. The study was held from 25 November- 15 December 2021. The population in this study was nurses who work in the hospital, with inclusion criteria for the study sample being nurses that handled Covid patients and who had been working in the hospital for a minimum of 6 months before the pandemic. Those included samples would be excluded if they were not willing to fill out the questionnaire form. Samples were chosen by simple random sampling with a minimum sample of 127 based on the Slovin formula. (Tejada et al., 2012) The questionnaire was distributed to 186 samples who met inclusion criteria, and 138 questionnaires were returned anonymously. Finally, 127 samples were randomly selected. (Elfil & Negida, 2017) This study used three questionnaires to assess each variable.

Organizational Support

The questionnaire used for this variable was adapted from Perceived Organizational Support from Eisenberger et al. (1986) and also the Hospital Readiness in Covid-19 Pandemic Checklist released by the Indonesian Ministry of Health (2020). Part of the questionnaire adapted from Eisenberger's theory was using a Likert scale from 1 (strongly disagree) to 6 (strongly agree), while the part that was adapted from Hospital Readiness Checklist was using a Likert scale from 1 (strongly disagree) to 5 (strongly agree). There were 25 questions in total, the lowest score was 25 and the highest score was 140. All of the questions were valid and as one questionnaire, it has Cronbach's alpha score for the reliability of 0,927.

Mental Health

The questionnaire used for this variable was adapted from General Anxiety Disorder-7 (GAD-7) questionnaire from Spitzer et al.,(2006) to screen anxiety and Patient Health Questionnaire-9 from Kroenke et al., (2001) to screen depression. The questionnaire was measured by a Likert scale from 0 (never in two weeks intervals) to 3 (almost every day within two weeks intervals). There were 16 questions in total, with the lowest score of 0 and the highest score of 48. All questions were valid, and as one questionnaire, it has Cronbach's alpha score for the reliability of 0,936.

Work Performance

Individual Work Performance Questionnaire (IWPQ) by Koopmans et al. (2013) was used to assess work performance in this study. It consisted of three dimensions: task performance, contextual performance, and counterproductive work behavior, with 18 questions in total. This questionnaire was measured by a Likert scale from 0 (seldom) to 4 (always). The lowest total score was 0 and the highest was 72. All questions were valid and it has Cronbach's alpha score of 0.934.

Table 1. Descriptive Characteristics for Each Variable

Variable	Range
Organizational Support	
Very Low	17,86 – 34,29%
Low	34,30- 50,72%
Average	50,73- 67,15%
High	67,16- 83,58%
Very High	83,59- 100%
Mental Health	
Minimally affected	0-20%
Mildly affected	>20-40%
Moderately affected	>40-60%
Moderate-severely affected	>60-80%
Severely affected	>80-100%
Work Performance	
Very low	0-20%
Low	>20-40%
Average	>40-60%
High	>60-80%
Very high	>80-100%

The data would be presented both descriptively and analytically. Descriptive analysis from each variable would be described as shown above in **Table 1**, according to score interpretation grouping by Sugiyono (2011). The total score of the respondents would be converted to a percentage before being classified based on range. The data were tested for classical assumptions before hypothesis testing. For hypothesis analysis, the data would undergo T-Test, Path Analysis, and Mediation Test. The analysis was processed with Microsoft Excel and IBM SPSS Version 26. The study was approved by the Human Research Ethics Committee at Sulianti Saroso Infectious Disease Hospital (approval number 37/XXXVIII.10/X/2021). All subjects provided written informed consent.

FINDINGS AND DISCUSSION

Findings

The demographic characteristics of the respondents are shown in Table 2.

Table 2. Demographic Characteristics of Respondents

Characteristics	N	%
Total	127	100
Gender		
Female	98	77,17
Male	29	22,83
Marital Status		
Married without children	13	10,24

Characteristics	N	%
Married with 1 child	19	14,96
Married with >1 children	87	68,50
Single/Divorced/Widowed	8	6,30
Ward is in charge to		
ICU	42	33,07
Non-ICU Inpatient Wards	59	46,46
Emergency Room	18	14,17
Covid Outpatient Clinic	8	6,30
Age (mean±SD)	38,43 ± 5,71	
Duration of work in Hospital (mean±SD)	12,46 ± 5,90	

Of 127 respondents, most of them were female (77,17%). The mean age was 38,43, and the average years in the hospital were 12,46 years. Most of them were married with more than 1 child. (68,50%). 33,07% of the respondents were in charge of the ICU. The descriptive characteristics of each variable are shown in **Table 3**.

Table 3. Descriptive Statistics of Each Variable

Variable	Overall Mean Score	%	Description
Organizational Support	105,34	73,24	High Support
Mental Health	8,99	18,73	Minimally Affected
Work Performance	52,50	72,92	High performance

From the result of each variable, it was known that the nurses felt high support from the hospital, their mental health was minimally affected, and they had high work performance during the pandemic. Detailed results of each variable are shown in **Table 4** until **Table 6**.

Table 4. Mean Score and Description of Organizational Support Variable (X)

Dimension	Indicators	Score (%)	Description
Perceived Organizational Support	Care for me by allowing a change in working conditions if the reason is strong	76.12	High
	Treats me the same as my other colleagues	75.46	High
	Cares about my overall job satisfaction	75.07	High
	Don't think about me when making decisions concerning me (*)	74.67	High
	Not giving rewards that match my work (*)	79.00	High
	Will provide solution assistance if I face problems at work	74.02	High
	Appreciate my contribution to achieving company goals	74.80	High
	Pay attention to my life goals and values	72.57	High
	Paying attention to my well-being	75.59	High
	Especially my boss always tries to make my work interesting	72.44	High
	Especially my boss always gives the best work according to my qualifications	74.67	High
	My boss especially cares about my opinion and suggestions	72.44	High
	Especially my boss considers that many	43.83	Low

Dimension	Indicators	Score (%)	Description
	people are able to work as well as me (*)		
	Especially my boss feels proud of my work	72.44	High
	Especially my boss will try to keep me when I submit my resignation	69.03	High
Hospital Readiness During Covid-19 Pandemic	Provide training and provide adequate and appropriate equipment to provide services to Covid-19 patients starting from primary screening, resuscitation, early stabilization, early supportive therapy, and prevention of complications	83.62%	Very High
	Provide adequate and appropriate working and rest hours	75.91	High
	Strive to prevent any acts of violence in the workplace	83.31	High
	Strive to ensure safety and security during the trip, both leaving and returning from work	78.27	High
	Monitoring the health status of hospital staff	80.31	High
	Responding to suspected cases of Covid-19 among hospital staff, families, and contacts by conducting early detection	85.35	Very High
	Giving freedom to all staff to report symptoms of Covid-19 without being blamed	84.25	Very High
	Follow up when there is unprotected exposure to a source of transmission without stigmatizing it	81.89	High
	Provide mental health and psychosocial support services	77.32	High
	Provide training on the basics of OSH and psychological first aid	77.95	High

(*) Negative statements. The score provided has been converted to positive results.

From the data, organizational support from the hospital was interpreted as high support. The highest-rated items from the questionnaire were "tracing and early detection in response to Covid-19 Case" and "appropriate reward", with a score of 85,35% and 79,00%, respectively.

Table 5. Mean Score and Description of Mental Health Variable (Y)

Dimension	Indicators	Score (%)	Description
Depression	Lack of interest or pleasure in doing anything	26.25	Mildly Affected
	Feeling down, depressed, or hopeless	18.64	Minimally Affected
	Trouble falling or staying asleep or sleeping too much	28.87	Mildly Affected
	Feeling tired or lacking energy	35.96	Mildly Affected
	Lack of appetite or overeating	27.30	Mildly Affected
	Feeling bad about yourself or feeling that you are a failure or have let yourself or your family down	13.65	Minimally Affected
	Trouble concentrating on things, such as reading the newspaper or watching television	14.44	Minimally Affected
	Moving or speaking so slowly that other	11.55	Minimally Affected

Dimension	Indicators	Score (%)	Description
Anxiety	people notice. Or the opposite- being so fidgety or restless that you have been moving around a lot more than usual		
	Thoughts that you would be better off dead or of hurting yourself	4.99	Minimally Affected
	Feeling nervous, anxious, or on edge	16.27	Minimally Affected
	Unable to stop or control worrying	13.12	Minimally Affected
	Worrying too much about things	20.47	Mildly Affected
	Trouble relaxing	17.32	Minimally Affected
	So restless that it's hard to sit still	11.02	Minimally Affected
	Being easily annoyed or irritable	21.78	Mildly Affected
Feeling afraid as if something terrible might happen	18.11	Minimally Affected	

Nurses' mental health was found to be minimally affected. The most pronounced symptoms, based on the questionnaire score, were "feeling tired or having little energy" and "being easily annoyed or irritable", with a score of 35.96% and 21,78%, respectively.

Table 6. Mean Score and Description of Work Performance Variable (Z)

Dimension	Indicators	Score (%)	Interpretation
Task Performance	Able to plan work so that it can be completed on time	69.29	High
	Always remember the work that needs to be achieved	71.06	High
	Able to prioritize	72.05	High
	Able to carry out my work efficiently	75.59	High
	Able to manage work time well	73.43	High
Contextual Performance	Take the initiative to start a new task after the previous task is appropriate	70.67	High
	Willing to accept challenging assignments	69.09	High
	Striving to keep up-to-date on work-related knowledge	73.62	High
	Strive to continuously update job skills	76.57	High
	Get creative solutions to new problems	71.06	High
	Willing to accept extra responsibility	66.73	High
	Constantly looking for new challenges at work	62.99	High
	Actively involved in meetings or coordination	46.85	Average
Counterproductive work behavior	Complaining about small things related to work at work	27.36	Low
	Exaggerating problems at work	13.39	Very low
	Focus on the negative aspects of the work situation rather than the positive aspects	13.39	Very low
	Discuss negative aspects of work with colleagues	20.28	Very low
	Discuss negative work things with people outside the organization	12.01	Very low

In this pandemic era, however, the work performance of the nurses was still high. Questionnaire items with the highest score were "work efficiently", which was 75,59%, and

"keeping my job-related knowledge up-to-date", which was 76,57%. The counterproductive work behavior dimension of this variable had a very low score, with the most prominent behavior "complained about minor work-related issues at work," which was 27.36%.

Before analytical hypothesis testing, all data was tested for classical assumption, and the data was normal, had no multicollinearity, and had no heteroscedasticity. Hypothesis 1 to Hypothesis 3, underwent regression test and compared t score to measure the significance. The result is shown in **Table 7**.

Table 7. Direct Effect of Each Variable (Hypothesis 1-3)

Hypothesis	T Values	R ²	Sig	Interpretation
H1: Organizational Support → Mental Health	-3.135	0.073	0.002	Negative significant effect of Organizational Support on Mental Health H1 Accepted
H2: Organizational Support → Work Performance	7.530	0.312	0.000	Positive significant effect of Organizational Support on Work Performance H2 Accepted
H3: Mental Health → Work Performance	-3.779	0.103	0.000	Negative significant effect of Mental Health on Work Performance H3 Accepted

T table for 127 samples and alpha 0.05: 1.65723

From this result, it can be seen that in Indonesia, during the pandemic era, organizational support affected the nurses' mental health. Organizational support also had a positive effect on the nurses' work performance, while mental health symptoms negatively affected work performance. All of these results were statistically significant. Hypothesis 4 was analyzed using path analysis. The result is shown below in **Figure 2**.

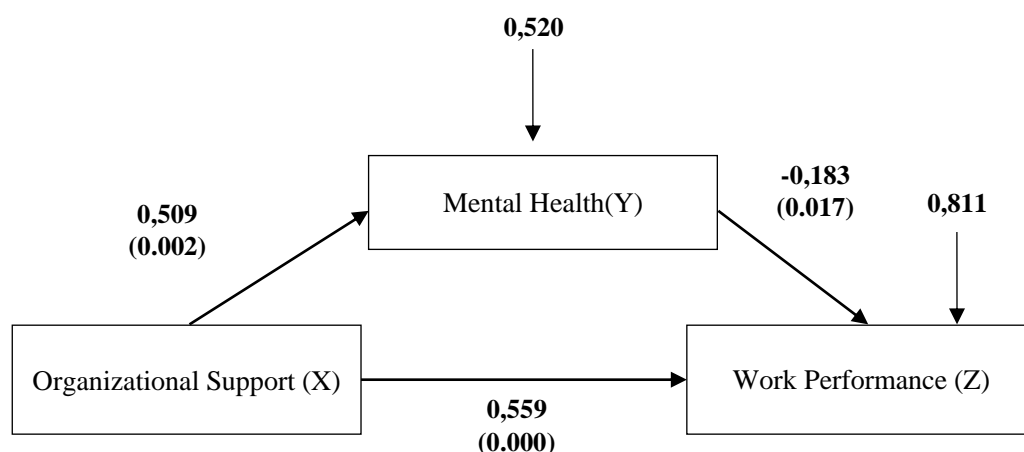


Figure 2. Mediation Path

The mediating effect was assessed by following steps: Step one was assessing whether there was a significant direct effect between organizational support and work performance. As seen in Table 4, the effect was significant, so it can proceed to step two. Step two assessed whether there was a significant effect after the inclusion of the mediator. This step was manually calculated with the Sobel test, and the result was significant, as the Z score from the Sobel test was 2.273. This

exceeded Z Score for 5% significance, which is 1.96. As the indirect effect was significant, the last step is to test the strength of mediation by calculating variance account for (VAF) (Raji & Gomez, 2017).

$$VAF = \frac{\text{Indirect Effect}}{\text{Total Effect}} = \frac{0,509 \times -0,183}{(0,509 \times -0,183) + 0,559} = 0.199 \sim 0,20 \dots \dots \dots (1)$$

VAF result of less than 0.20 means no mediation, while 0.20- 0.79 means partial mediation, and 0.80 and above means full mediation. Based on the calculation result, the mediating effect of mental health between organizational support and work performance was a partial effect.

Discussion

Our study showed that organizational support, namely in the form of appropriate rewards and good case responses and tracing, has a negative and significant effect on mental health disorders of nurses during the Covid-19 pandemic, namely feeling tired and irritable. This means increasing organizational support in the form of additional incentives with an appropriate and equitable nominal for all nurses involved in Covid care and also providing a case response service that is responsive and non-judgmental when a nurse is detected as Covid-19 positive along with a structured close contact tracing procedure, can reduce symptoms of depression in the form of feeling tired easily and symptoms of anxiety in the form of being easily annoyed or irritable. This is in accordance with research conducted by Labrague & De Los Santos (2020), which states that support from the environment, including organizational support, can affect the mental health of nurses during a pandemic, namely by reducing the number of mental health disorders. Research by Havaei et al. (2021) also stated that low organizational support was associated with increased anxiety and depression in nurses during the Covid-19 pandemic. Chatzittofis et al. (2021), in their cross-sectional study during the pandemic, also found that lower organizational support was associated with mental distress in healthcare workers, such as depression and perceived stress. The nurses included in this study also said that with support from the hospital in the form of complete PPE, good tracing procedures, and additional benefits from the hospital, they felt their worries were reduced, especially regarding transmission.

H1 accepted: There is a negative and significant effect of organizational support (X) on the mental health of nurses (Y) in the Covid-19 pandemic situation.

This study also found that organizational support in the form of appropriate rewards and good case and tracing responses has a positive and significant impact on the nurses' work performance during the Covid-19 pandemic, namely in the form of efficient work and efforts to update skills. This means increasing organizational support in the form of additional incentives with an appropriate and equitable nominal for all nurses involved in Covid care, and providing a case response service that is responsive and non-judgmental when a nurse is detected as positive, along with a structured close contact tracing procedure, can improve nurses' work performance in the form of more efficient in giving services to patients and in documenting actions and administration, also increasing the enthusiasm of nurses in updating skills related to handling Covid-19 by attending seminars and training both online and offline provided by the hospital and external parties. The nurses also stated that the support from the hospital triggered them to work better and more optimally. To the best of the researcher's knowledge, this study is the first study to assess the impact of organizational support on the work performance of nurses during the Covid-19 pandemic. There are other studies that are similar and support this hypothesis. Cunha &

Marques (2022) stated that personal factors, including organizational support, can have a positive impact on the innovation outcomes and innovative behavior of nurses during the Covid-19 pandemic. Another similar study is the study by Shabbir et al. (2021) which states that good organizational support, together with organizational justice, will result in good work performance for bank employees during the Covid-19 pandemic. Zhang et al. (2022) also found that organizational support is related to job performance, as perceived organizational support would lessen the chance of role overload and thus will increase job engagement that, will attenuate job performance.

H2 accepted: There is a positive and significant effect of organizational support (X) on the work performance of nurses (Z) in the Covid-19 pandemic situation.

Another finding from this study was that mental health disorders in the form of fatigue and irritability have a negative and significant effect on work performance during the Covid-19 pandemic, namely in the form of efficient work and efforts to improve skills. That is, lower symptoms of depression in the form of feeling tired easily and symptoms of anxiety in the form of an irritable attitude, easily irritated and more sensitive, will improve the work performance of nurses in the form of more efficient in giving services to patients and in documenting actions and administration, also increasing the enthusiasm of nurses in updating skills related to handling Covid-19 by attending seminars and training both online and offline provided by the hospital and external parties. The nurses included in this study reinforced the finding as they stated that in a calmer condition and with less burdensome thoughts, they were able to provide maximum work performance and were more enthusiastic and more focused. Previous research conducted by Ampofo et al. (2020) examined mental health by measuring stress and found that stress can have a negative effect on the job performance of healthcare employees in Ghana. Hosgor et al. (2020) also stated that there was a negative relationship between nurses' anxiety levels and their professional performance during the pandemic. Keshk et al. (2018) mentioned that decision-making, which is an important component of nurses' work performance, will be more easily controlled when someone has worked for more than six years. This could be one of the reasons why nurses in this study have high work performance, as they have been working for 12 years.

H3 accepted: There is a negative and significant influence on the mental health of nurses (Y) on the work performance of nurses (Z) in the Covid-19 pandemic situation.

The final hypothesis testing result, via path analysis and mediation testing, indicates that good organizational support will increase the mental health of nurses and have a positive effect on work performance of nurses. This means that with organizational support in the form of additional incentives that are sufficient and evenly distributed to all nurses involved in Covid care, and the provision of case response services that are responsive and non-judgmental when a nurse is detected as positive along with a structured close contact tracing procedure service, it will reduce symptoms of depression, namely feeling tired easily and symptoms of anxiety, namely irritable attitudes, easily irritated and more sensitive, and then will improve the work performance of nurses in the form of more efficient in giving services to patients and in documenting actions and administration, also increasing the enthusiasm of nurses in updating skills related to handling Covid-19 by attending seminars and training both online and offline provided by the hospital and external parties. The mediation that occurs is partial mediation, meaning that with good mental health, this variable will strengthen the positive relationship between organizational support and

work performance.

H4 accepted: There is a significant effect of organizational support (X) on the work performance of nurses (Z) through mental health mediation (Y) in the Covid-19 pandemic situation.

CONCLUSIONS

To conclude, this study found that there is a positive and significant influence of organizational support on work performance either directly or indirectly, mediated partially and negatively by mental health disorders. This means that with organizational support in the form of additional incentives with an appropriate and equitable nominal for all nurses involved in Covid care and the provision of a case response service that is responsive and non-judgmental when a nurse is detected as positive along with a structured close contact tracing procedure service, then will reduce symptoms of depression, namely feeling tired easily and symptoms of anxiety, namely irritable attitudes, easily irritated and more sensitive, and then will improve the work performance of nurses in the form of services to patients and recording documentation of actions and administration to be more neat and efficient and increase the enthusiasm of nurses in updating skills related to handling Covid-19 by attending seminars and training both online and offline provided by the hospital and external parties.

There are some practical implications of this study that should be considered by hospitals, mainly by human resource management. The results of this study can be an input for the manager to increase organizational support as it will increase nurses' mental health and further will improve their work performance. Increasing organizational support can be in the form of additional incentives with an appropriate and equitable nominal for all nurses involved in Covid care and the provision of a case response service that is responsive and non-judgmental when a nurse is detected as positive along with a structured close contact tracing procedure service.

LIMITATION & FURTHER RESEARCH

This study has some limitations. The subject number was not too large, and the research took place in only one hospital. The hospital discussed in this paper was also an Infectious Centre Hospital, so the nurses were already used to handling infectious patients. Therefore, future research is recommended to add more subject numbers from various hospitals, so the generalization of the results can fill the limitation of this study.

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