

ROLE CONFLICT, WORKLOAD, ORGANIZATIONAL ENVIRONMENT, AND WORK PERFORMANCE AMONG ADMINISTRATIVE EMPLOYEES IN HOSPITAL KUALA KRAI

Azwan Shah Aminuddin^{1*}
Nur Aimi Nadzirah Aminuddin²
Nor Fatihah Mohd Noor³
Nur Khalida Aisyah Khalid⁴
Nur Hanis Hassan⁵

¹Faculty of Business and Management, Universiti Teknologi MARA Cawangan Kelantan, Kampus Machang, Kelantan, Malaysia, (E-mail: azwanamin@uitm.edu.my)

²Hospital Sultan Ismail Petra, Kuala Krai, Kelantan, Malaysia, (Email: mieynadzirah5780@gmail.com)

³Hospital Sultan Ismail Petra, Kuala Krai, Kelantan, Malaysia, (Email: norfatihah.mn@moh.gov.my)

⁴Faculty of Business and Management, Universiti Teknologi MARA Cawangan Kelantan, Kampus Kota Bharu, Malaysia, (Email: 2021425552@student.uitm.edu.my)

⁵Pejabat Pos Pasir Mas, Pekan Pasir Mas, Kelantan, Malaysia, (Email: hanishassan95@gmail.com)

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Abstract: *Employees in the healthcare sector face increasing occupational demands due to the evolving nature of work, contributing to high levels of workplace stress and affecting performance outcomes. This study investigates the relationship between role conflict, workload, and organizational environment on employee performance among administrative staff at Hospital Kuala Krai. Using a cross-sectional design and stratified sampling, data were collected from 127 respondents through a validated 20-item questionnaire. The study employed Pearson Correlation and Multiple Regression analyses using SPSS to examine the relationships among the variables. Findings revealed a significant and positive relationship between organizational environment and employee performance ($r = .582, p < .05$), highlighting the critical role of a supportive and structured work environment in enhancing job outcomes. Conversely, role conflict and workload exhibited weak and non-significant correlations with performance ($r = .033$ and $r = .135$, respectively), suggesting these factors may be mitigated through effective role clarity and workload distribution practices within the organization. Regression analysis confirmed that only organizational environment significantly predicted performance ($\beta = .489, p < .05$), explaining 37.1% of the variance ($R^2 = .371$) in employee performance. These findings underscore the importance of cultivating a conducive organizational environment to optimize staff productivity in healthcare settings. The absence of significant relationships between role conflict and workload may reflect effective internal*

management strategies, such as clear role delineation and balanced task allocation. This study contributes to the understanding of psychosocial work factors in healthcare administration and offers practical implications for workforce planning and organizational development. Future studies are encouraged to explore other psychosocial or contextual factors and compare results across multiple institutions for broader generalizability.

Keywords: *Role Conflict, Workload, Organizational Environment, Job Performance, Administrative Employees*

Introduction

Employees spend approximately one-third of their lives in the workplace, frequently exposed to varying degrees of occupational stress. In recent years, the landscape of work has undergone a profound and continuous transformation, significantly altering the demands placed on employees across all professional levels—from executive management to frontline personnel. This evolution has led to increasing levels of workplace stress, which in turn poses serious implications for both physical and psychological health (Daniel, 2019). The World Health Organization (WHO) has identified workplace stress as a critical contributor to global mental health challenges, affecting an estimated 450 million workers worldwide (Kalaivani, 2021). Key stressors such as excessive workloads, limited job autonomy, and organizational politics have been widely acknowledged as detrimental to employee well-being and performance (Karim, 2022). Moreover, factors such as role conflict, high job demands, and unsupportive work environments have been consistently linked to heightened job stress, reduced job satisfaction, and impaired employee performance (Yousefi and Abdullah, 2019).

In Malaysia, workplace stress and its impact on employee well-being have emerged as significant and growing concerns. The 2025 Malaysia Well-being@Work Index Report, which surveyed over 3,400 respondents, indicates a 3% decline in overall workplace well-being since 2023. Notably, psychosocial risk a key indicator of stress has increased by 6%, reaching 40%. Furthermore, psychological safety, which reflects how safe employees feel to voice their opinions, has decreased to 66%. This decline underscores existing challenges in the work environment that contribute to stress.

As of April 2024, 67% of Malaysian employees reported experiencing burnout, one of the highest rates globally. This increase is attributed to long working hours averaging over 45 hours per week combined with pressure from management and limited opportunities for career development. The resulting chronic stress has led to a doubling of depression rates in Malaysia since 2019, with approximately one million Malaysians aged 15 and above currently suffering from depression. Many of these individuals report thoughts of self-harm or suicide.

Given the increasing relevance of these issues, particularly in high-pressure service sectors like healthcare, this study seeks to examine and validate the relationship between role conflict, workload and organizational environment in relation to employee performance. Focusing on administrative staff within a healthcare-related facility, the study aims to provide empirical insights that could inform more effective workforce management strategies and promote sustainable performance outcomes.

Literature Review

Work Performance

Employee performance has been widely conceptualized as the ability to effectively carry out assigned duties using the available resources. Johari et al. (2018) define performance as an individual's capacity to complete work tasks efficiently while making optimal use of the tools and support at their disposal. Motowidlo (2003) further framed work performance as the anticipated value of an employee's behavior over a specific period. In the healthcare context, performance is inherently multidimensional, encompassing not only task efficiency but also the quality of patient care, collaboration within teams, and levels of job satisfaction.

High occupational stress levels have been identified as detrimental to performance in healthcare settings. Aiken et al. (2002) emphasized that work-related stress can contribute to burnout, increased absenteeism, and heightened risk of medical errors—all of which threaten the quality of healthcare delivery and patient outcomes. These challenges can ultimately strain healthcare systems and diminish public trust. However, the presence of adequate resources and strong social support networks—ranging from family and peers to institutional backing—has been shown to mitigate these effects and enhance job performance.

Bradley and Cartwright (2007) observed that healthcare professionals who feel supported by their supervisors and colleagues are more likely to report higher job satisfaction and better overall health. These factors, in turn, directly enhance their capacity to provide safe and effective care. Their findings underscore the importance of equipping healthcare workers with both emotional and material resources to reduce workplace stress and strengthen professional performance. By cultivating a supportive and well-resourced work environment, healthcare institutions can better prepare staff to meet the complex demands of their roles, leading to improved organizational efficiency, greater employee retention, and elevated standards of patient care.

As Gitongu et al. (2016) affirm, employee performance remains a fundamental determinant of organizational success, particularly in sectors where service quality directly impacts human lives. Investing in the well-being and performance capacity of healthcare personnel is therefore not only a strategic priority but also a moral imperative for sustainable healthcare delivery.

Role Conflict

Role conflict arises when there is a misalignment between job expectations and the roles individuals are required to fulfill, particularly when these roles contradict established norms or personal beliefs (Rosally & Jogi, 2015). This conflict becomes especially pronounced when employees are subjected to multiple, often incompatible, demands simultaneously, thereby disrupting their focus and diminishing their work performance. Nur et al. (2016) emphasized that such role conflicts significantly and negatively affect employee efficiency, as the division of attention can hinder task completion and increase workplace stress. However, contrasting perspectives exist. Harahap (2020), for example, posited that in certain contexts, role conflict may serve as a catalyst for improved performance by stimulating critical thinking and adaptability.

In high-pressure environments such as healthcare, role conflict is particularly prevalent due to the diverse and often conflicting expectations from patients, supervisors, colleagues, and institutional policies. Greenhaus and Powell (2006) noted that healthcare professionals frequently experience tension when trying to balance these demands, often leading to emotional strain and reduced job effectiveness. This issue is further compounded by the complexity and urgency inherent in healthcare roles, where decision-making and multitasking are routine. Physicians, nurses, and administrative staff are especially vulnerable, as their responsibilities frequently overlap and shift depending on organizational needs.

Jones (1993) highlighted that while role conflict can undermine employee well-being and potentially lead to burnout, it may also, in some instances, foster a sense of challenge that motivates individuals to enhance their performance. The duality of role conflict's impact suggests that its effects are not uniform but rather context-dependent—shaped by individual coping mechanisms, organizational support, and the nature of the work itself. As such, understanding the nuanced influence of role conflict is essential for developing strategies that can mitigate its negative outcomes while leveraging its potential to foster resilience and innovation in the workplace.

Workload

Workload is a multifaceted construct that encompasses a wide range of responsibilities and activities that occupy employees' time and attention. These activities may include formal job duties as well as indirect work-related tasks that contribute to the overall performance expectations within an organization. Numerous studies have explored the influence of workload on employee productivity, particularly in operational domains such as supply chain management (Zamri et al., 2024). Fundamentally, workload is recognized as a critical determinant of employee output, efficiency, and overall job performance.

In contemporary work environments, the challenges associated with job stress and excessive workloads have become increasingly pronounced. High workload levels have been linked to a host of negative outcomes, including disruptions in sleep, heightened anxiety, depression, irritability, restlessness, and even risky behaviors. These effects not only compromise physical health but also impair mental well-being, cognitive processing, and emotional stability (Herawati et al., 2023). Ahmad et al. (2019) further highlighted that heavy workloads can erode emotional resilience, hinder teamwork, and contribute to workplace non-compliance, all of which can detrimentally impact organizational effectiveness.

Azmi et al. (2016) elaborated on the psychological burden of excessive work demands, noting that affected individuals often exhibit dissatisfaction, emotional fatigue, and signs of physiological, psychological, and behavioral distress. Their findings point to both quantitative (volume of tasks) and qualitative (complexity or difficulty of tasks) aspects of workload as significant contributors to adverse employee outcomes. The cumulative impact of unmanaged workloads underscores the urgent need for organizations to implement strategic interventions that promote sustainable work practices, protect employee well-being, and preserve long-term performance outcomes.

Organizational Environment

The work environment encompasses a broad spectrum of factors, including physical conditions, social dynamics, and organizational culture, all of which directly or indirectly influence employee performance and overall organizational outcomes. Awan (2015) defined the work environment as the sum of physical settings, social interactions, and contextual elements that shape how work is experienced by individuals. These elements significantly impact employee well-being, interpersonal relationships, collaboration levels, physical and mental health, and ultimately, job performance. According to Ali (2016), company culture, the nature of work settings, and physical working conditions are central indicators of the quality of an organization's work environment.

It is important to recognize that when an employee perceives themselves as a poor fit within the workplace, this does not necessarily reflect a lack of competency or capability. Rather, such feelings may stem from environmental stressors within the organization that hinder their performance and create a sense of misalignment with the job (Sturman & Walsh, 2014). For instance, if an employee is consistently tasked with responsibilities that exceed their capacity—without adequate time, support, or resources—their performance may decline despite external rewards or incentives. As Leblebici (2012) noted, even in the presence of recognition or compensation, a lack of supervisory support and unrealistic demands can lead to job dissatisfaction, heightened stress, and ultimately, diminished productivity.

In contrast, employees who operate within a structured, supportive, and positive work environment are more likely to feel competent and balanced in their roles. They are less likely to experience work encroaching upon their personal or family time and are better equipped to maintain a healthy work-life balance (Stalmasekova, 2017). These individuals often exhibit a strong emotional connection to their work, which fosters enthusiasm, psychological well-being, and sustained engagement. Such environments are characterized by feelings of appreciation, role clarity, and alignment between individual abilities and job demands. Veitch et al. (2007) further observed that employee satisfaction is closely linked to the perceived quality of the work environment, reinforcing the critical role of organizational climate in shaping workforce outcomes.

As presented in Figure 1 below, the conceptual framework for this study comprises independent variables namely role conflict, workload, and organizational environment, meanwhile, the dependent variable is work performance.

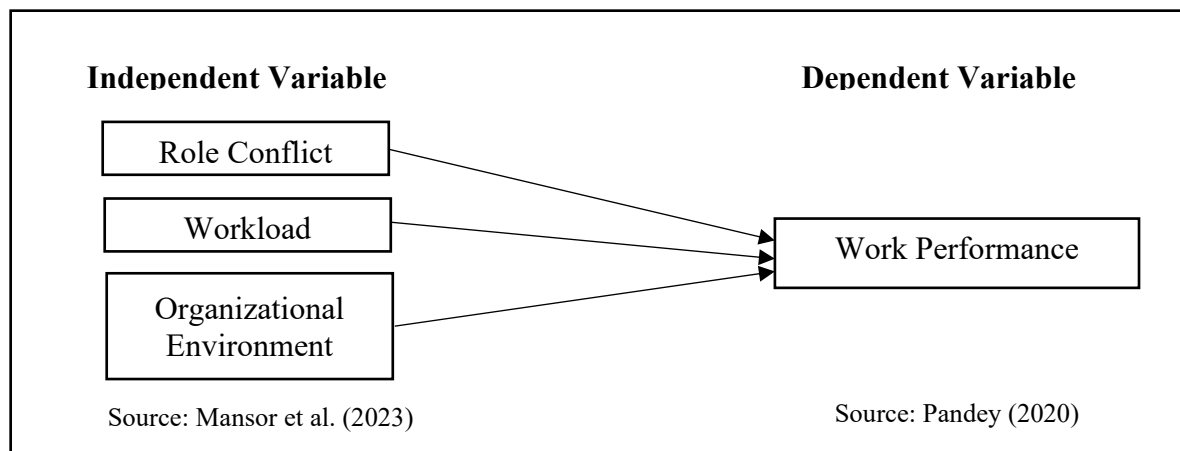


Figure 1: Conceptual Framework

Methodology

This research employed a cross-sectional design and was conducted at Hospital Kuala Krai, involving a total of 127 participants. A stratified sampling technique was utilized to ensure representative data collection from the target population. The sample size was determined using the Krejcie and Morgan table. Stratified sampling, as described by Salkind (2012), involves dividing the entire population into distinct subgroups or strata that share common characteristics, to enhance the precision of the sampling process. Stratified sampling technique used in this study and each of population member has a known and typically equal probability of being selected. The population in this study comprised 190 administrative staff members at Hospital Kuala Krai, explicitly excluding healthcare-related personnel such as nurses, doctors, and medical assistants.

For data collection, a 20-item instrument was used, divided into three sections. The items were adapted from validated instruments developed by Mansor et al. (2023) and Pandey (2020). The Likert scale is a standard measurement that is frequently used in a questionnaire, and for this study, 5-point Likert scale were used (1=strongly disagree and 5=strongly agree). Prior to distributing the questionnaire via Google Forms, a reliability analysis was conducted. The results indicated that all variables achieved reliability coefficients above .60, confirming the instrument's internal consistency. Additionally, the dataset was normally distributed, with skewness and kurtosis values falling within the acceptable range of +2 to +3. The validation process of the instrument was carried out to ensure the instrument is applicable to the respondents, and was reviewed by an expert from the field, as well as a linguist to evaluate the grammatical and language forms of the questionnaire.

A total of 150 questionnaires were distributed, resulting in a strong response rate of 84.67%, equating to 127 valid responses. Data were analyzed using SPSS. The demographic analysis revealed that the majority of respondents were female ($n = 86$, 67.7%), with male respondents accounting for 41 (32.3%). Most participants were aged between 20 and 35 years ($n = 75$, 59.1%), followed by those aged 36–45 years ($n = 38$, 29.9%), 45–55 years ($n = 12$, 9.4%), and a small proportion aged 55 and above ($n = 2$, 1.6%).

Regarding work experience, the highest proportion of respondents ($n = 54$, 42.4%) had more than seven years of service. This was followed by those with 3–6 years ($n = 27$, 21.3%), 2–3 years ($n = 25$, 19.7%), and less than one year of experience ($n = 21$, 16.5%).

Result

Analysis was conducted to investigate the relationship between role conflict, workload, organizational environment, and work performance among healthcare employees in Hospital Kuala Krai. The analysis was done by employing Pearson Correlation Analysis which to examine the relationship between independent variable and dependent variables, also, Multiple Regression Analysis to verify the relationship between independent and dependent variables (An and Wang, 2016).

Pearson Correlation Analysis

A simple bivariate correlation can be defined as a zero-order correlation that refers to the relationship between two continuous variables (Aminuddin, 2023). A correlation is best defined as the purpose of looking at the relationship between two variables in a linear fashion (Coakes et al., 2010). The correlation interpretation used in this study is based on Mukaka (2012) as shown in Table 1.

Table 1: Correlation Interpretation by Mukaka (2012)

Size of the correlation	Coefficient General Interpretation
$\pm .8$ to ± 1.0	Very strong relationship
$\pm .6$ to $\pm .8$	Strong relationship
$\pm .4$ to $\pm .6$	Moderate relationship
$\pm .2$ to $\pm .4$	Weak relationship
$\pm .0$ to $\pm .2$	Weak or no relationship

Table 2: Relationship Between Role Conflict, Workload, Organizational Environment And Work Performance

No.	Variable	1	2	3
1.	Role Conflict			
2.	Workload	.662**		
3.	Organizational Environment	.011	.202	
4.	Work Performance	.033	.135	.582**

Table 2 presents the relationship between Role Conflict, Workload, Organizational Environment, and Work Performance. Based on the results, the were significant and positive correlations between Organizational Environment with Work Performance, the correlations are moderate according to Mukaka (2012), $r = .582$. Meanwhile, Role Conflict and Workload scores were $r = .033$ and $r = .135$ indicating weak or no relationship with Work Performance.

Multiple Regression Analysis

As mentioned previously, Multiple Regression Analysis is performed to verify the relationship between independent and dependent variables (An and Wang, 2016). The result obtained from regression analysis signifies the best prediction of a dependent variable from several

independent variables (Coakes, 2013). Before performing a regression analysis, several assumptions must be fulfilled, as follows:

Ratio of Cases to Independent Variables

When performing regression analysis, the minimum number of data required is 100; however, in this study, this assumption has been met because the total responses collected were 127.

Outliers

After performing the normality test, the data should be normally distributed, and any outliers should be deleted to meet this assumption. The outliers were identified in the casewise diagnostic table and the cases with values of Cook's Distance of more than four may be problematic and, therefore, must be deleted.

Multicollinearity and Singularity

Multicollinearity and singularity are measured by VIF values, which should be less than 5 or 10 (Bhandari, 2020). A VIF value that is equal to 1 suggests no correlation between the independent and other variables. In this study, the VIF scores were more than 1 and below 5, which does not violate this assumption.

Independence of Residuals

Coakes et al., (2010) stated that the independence of residuals must entail a linear relationship with the predicted dependent variable scores. Accordingly, the Durbin-Watson values derived from Multiple Regression Analysis are shown in the residual values. The value of Durbin-Watson should be generally be within the range of 1.5 to 2.5 to meet the assumption Aminuddin, 2021).

Table 3: Multiple Regression Analysis

Independent Variable	Dependent Variable	t	Sig.	Collinearity Statistics	
	Standardized Coefficient Beta			Tolerance	VIF
Role Conflict	.012	-.120	.905	.533	1.878
Workload	-.054	-.531	.596	.501	1.997
Organizational Environment	.489	5.871	.000	.743	1.347
R-squared	.371				
F	18.008				
Sig. of F value	.000				
Durbin-Watson	1.852				

Table 3 shows the Multiple Regression Analysis results for the Role Conflict, Workload, and Organizational Environment with Work Performance. The results showed that R^2 is .371, in which all the independent variables explained 37.1% of the variance in Work Performance, with a Sig. of F value of .000. Besides, the Durbin-Watson value is 1.852, which is within the acceptable range. The results also showed the significant influence of Organizational

Environment ($\beta = .489, p < .05$). The t value in Table 3 also indicated that independent variables made a significant contribution to the dependent variable, in which, the smaller the value of sig., the larger the value of t . Therefore, Organizational Environment ($t = 5.871$) confirmed to have a significant relationship with Work Performance.

Discussion And Conclusion

This study established a significant positive relationship between the organizational environment and employee work performance among administrative staff at Hospital Kuala Krai. The findings are consistent with existing literature, which posits that a supportive and well-structured work environment is critical in enhancing employee productivity and well-being (Jena, 2016; Chandrasekar, 2011). The concept of the work environment extends beyond the physical workspace to include task structure, time management, interpersonal relationships, and the broader organizational climate. In line with Suwati et al. (2016), employees are not only motivated by remuneration but also by a sense of satisfaction and comfort derived from their daily working conditions. This intrinsic satisfaction has a substantial influence on employee engagement, motivation, and overall performance.

The current results also reinforce the assertion by Satyvendra (2019) and Shanmmout (2022) that the quality of the work environment is instrumental in promoting effective performance while simultaneously reducing job-related stress. In high-stakes service sectors such as healthcare, where employee well-being is closely linked to the quality of patient care, ensuring a conducive work environment should be a strategic priority for management. A well-managed environment fosters job satisfaction, enhances morale, and encourages employees to carry out their duties with greater enthusiasm and responsibility.

Conversely, the study did not find a statistically significant relationship between role conflict and workload with work performance. These findings diverge from earlier studies, such as those by Elloy and Smith (2003) and Nur et al. (2016), which associated high workload and role conflict with diminished job performance. One plausible explanation for this divergence may be the effectiveness of internal workload planning and distribution strategies implemented by Hospital Kuala Krai. Proactive workforce planning that considers optimal working hours and staff distribution can mitigate the negative impacts of workload, thereby maintaining employee performance levels (Nwinyokpugi, 2018).

Similarly, the non-significant influence of role conflict may reflect organizational practices that provide clarity in job descriptions, effective communication, and role alignment. As Nicklaus (2007) explained, role conflict typically arises when employees receive conflicting instructions or when their responsibilities are not clearly defined. However, in structured environments where job scopes are well-communicated, such conflicts may be minimized. It is also worth noting that some scholars, such as Harahap (2020), have argued that role conflict can have a motivational effect in certain contexts, promoting adaptability and problem-solving skills. Nevertheless, the present study suggests that within the context of Hospital Kuala Krai, role clarity is likely well-established, resulting in minimal interference with job performance.

Overall, these findings contribute to a growing body of evidence emphasizing the role of environmental factors in shaping employee outcomes. For public healthcare institutions, particularly in Malaysia, the study underscores the importance of investing in a conducive work

environment and maintaining structured operational practices to support workforce performance. Future research could explore other psychosocial variables and conduct cross-institutional comparisons to further validate these findings.

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