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THE MEDIATING ROLE OF PSYCHOLOGICAL RESILIENCE ON THE CORRELATION BETWEEN WORKLOAD PERCEPTION AND PSYCHOLOGICAL WELL-BEING OF MEDICAL SECRETARIES

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ABSTRACT

Workload has significant effects on psychological resilience and well-being of healthcare professionals. The purpose of this study is to analyze the correlations between workload perception, psychological well-being, and psychological resilience of medical secretaries in Turkiye. The findings of the study revealed that psychological resilience mediates the relationship between workload perception and psychological well-being. The results also indicated a negative association between perceived workload, psychological resilience, and psychological well-being, whereas psychological resilience was positively associated with psychological well-being. The results further showed that the hypothesized relationships, except for the direct effect of workload on psychological well-being, were statistically significant. The results of the present study underline the importance of workload perception and highlight the mediating role of psychological resilience in the relationship between workload and psychological well-being.

Keywords: *Workload perception, Resilience, Psychological well-being, Medical secretary*

JEL Codes*: J28, I31, M12*

1. INTRODUCTION

As people grow older, their medical needs grow along too requiring more healthcare workers / personnel in number (Holland et al., 2019) to work. Turkiye's average on the number of doctors per patient, is one and a half point lower than the average of OECD (Organization for Economic Co-operation and Development) (Istanbul Planning Agency, 2023). Especially for the City of Istanbul, the number of doctors per patient is significantly less than the number in the other cities (Ekinci and Yılmaztürk, 2025). Lesser the number of doctors means insufficiency in satisfying the patients' needs. This creates an increase in workloads of doctors and other healthcare employees working in the medical sector. For example, medical secretaries handle all patients assigned to all the doctors in their department. Medical secretaries can also be described as frontline medical assistants; they handle

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patients who demand medical attention as soon as they come into the hospital, they keep all patients' records throughout the course of the medical treatments they receive while at the hospital and until the official times of their discharge from hospital (Official Gazette of the Republic of Türkiye, 2014). In this context, the overall workload of medical secretaries (based on the number of patients) is way more than those of the doctors.

According to Chen et al. (2015:343), "load is all the acts, operations and procedures performed for the patient," and the word "work" is "the performances / efforts made in meeting these medical needs of patients within a certain time interval." Workload is closely correlated with quality of medical services provided (Alzoubi et al., 2024:2). Hegney et al. (2019) emphasize that workload in the healthcare / medical sector, whether it be of public or private, leads to inabilities in practicing satisfactory caregiving works, medical procedures / treatments and other medical services for patients. At this point, being aware of the present situation and knowledgeable about the harsh consequences of workload, will help in taking measures for eliminating the issues taking a toll on the personal resources of medical personnel. Research in literature focusing on the workload of medical secretaries revealed that the subject of medical secretaries' workload is neglected.

Pluta and Rudawska (2021) point out that constant duty changes at work creates difficulty in making a daily work plan and works of overtime or long working hours enlarges the workload perception. It is also reported that advanced technology causes add more duties to the workload (Rasool et al., 2022). Kaya and Deniz (2021:90) state that additions to workload depletes psychological resources and leads to burnouts in healthcare workers. Pelenk and Acaray (2020:491) emphasize that workload lowers the chances of healthcare workers providing satisfactory work. On the other hand, workload can also affect healthcare workers' productivity, performance, and well-being (Pace et al., 2021). In the (hospitality/hotel management) business, the workload is determined to bring the well-being down (El-Sherbeeny et al., 2024). Munn et al. (2021:24) associates "great well-being" with strong psychological functioning, satisfaction and happiness in being a part of the job".

In the healthcare sector, work overload is identified as the guide to resignation (Holland et al., 2019); it guides workers to resign by disrupting the life's work-play balance (Lee et al., 2017). Hegney et al. (2019) draw attention to workload and it being a spoiler and taken all the joy and satisfaction out from working. Additionally, Atalay and Çakırel (2022) report that one of the negative psychological outcome of workload is burn-out. On the other hand, Çalışkan and Bekmezci (2019) analyzed the correlation between workload and intent for resignation and Korkmazer (2021) informed that perception of work overload has ill effects on performance and job satisfaction and Korkmazer and Aksoy (2020) reported that workload causes decline in the healthcare workers' quality of living. Based on the information above it seems that the effect of workload perception on well-being are being neglected.

The Job Demands-Resources (JD-R) theory offers a framework for understanding the effects of workload perception (Bakker and Demerouti, 2017). From this aspect, when job demands increase the sufficiency of personal resources will become questionable and probably the workload will pull well-being down. With this perspective, the well-being is affected by the correlations between job demands and resources. The more resilient the healthcare workers are the easier it is for them to cope with the complexities at work and ill effects on their well-beings lessens. (Munn et al., 2021). Resilience is the capacity of an individual to recover in the face of challenges (Huang et al., 2019). Psychological resilience may build a dynamic process that helps in reducing the adverse effects of workload on well-being. However, what is known about this process is limited as well (Good et al., 2025).

The general purpose of the research is to analyze the correlations between medical secretaries' perceptions of workload, psychological well-being, and resilience in Turkiye. This research serves multiple purposes. The purposes of this research are respectively as follow: (1) to analyze the effects of medical secretaries' perceptions of workload on well-being and (2) psychological resilience; (3) to explore the correlation between psychological resilience and well-being; (4) to analyze whether psychological resilience plays the role of a mediator in the correlation between workload perception and psychological well-being. This study also contributes in understanding the workload consequences and influential factors affecting well-being, and the role that the psychological resilience as a resource plays in coping with the adverse effects of workload. With these theoretical and practical implications, the study shows the path to researchers and directors through suggestions and stands out as one of the first empirical studies focusing specifically on medical secretaries in Turkey.

2. LITERATURE ANALYSIS AND HYPOTHESES

2.1. Job Demands-Resources Theory

The JD-R theory is a framework that helps interpreting conducts of medical workers by gathering information on the work stressors and motivators (Bakker and Demerouti, 2017). Job demands (physical, emotional, and cognitive) may be described as physiological or psychological dues created on workers by psycho-social or physical aspects of the work requiring to be performed (Bakker et al., 2023). Job resources on the other hand are the motivating psycho-social or physical aspects of the work that help workers /medical personnel reach their working goals (Bakker and Demerouti, 2017).

While job demands and resources, such as workload and social support, affect workers in all the sectors, emotional - physical demands may be discovered in some others (e.g., healthcare sector) (Bakker et al., 2023). From this point of view, the JD-R theory has power to explain comprehensively the workers' well-being and performance.

The job demands - resources theory proposes several propositions. One of them is that the physical, emotional, and cognitive resources of medical personnel may deplete according to the

frequency of their job demands occurring closer to one another. From this point of view, frequency leads to development of health issues (e.g. fatigue, burnout, depression, and energy loss) on medical secretaries / workers etc. However, job resources from another point of view, initiate the motivational process and/or procedures assisting in satisfaction of psychological needs of medical employees. Therefore, they help medical personnel to become much more creative, participate more and perform better. Other than that, when job resources exceed job demands, the adverse effects of job demands may be removed (Bakker et al., 2023).

According to the JD-R theory, the increase in job demands causes rise in workload perception, yet has a detrimental effect on well-being. Mazzetti et al. (2023), drew attention to the fact that personal resources (such as resilience, self-efficacy, proactivity) are much more powerful resources than job those of job resources. This research stipulates that if the job resources fail to meet job demands, the use of personal resources (psychological endurance), will moderate the correlation between workload perception and well-being.

2.2. Workload Perception and Psychological Well-Being

Workload refers to the amount of quantitative work that must be completed within a specific time interval (Broetje et al., 2020). Work overload may have impact on productivity, performance, and personal well-being (Pace et al., 2021). It is known that a boost in workload perception causes inequalities to occur on work & play equation (Pluta and Rudawska, 2021), and these then by lowering job satisfaction (Ahuja et al., 2007) effect medical personnel's personal welfare adversely (Hegney et al., 2019), (Pace et al., 2021).

Well-being is an indicator of happiness (Kumar et al., 2021). According to Oderinde et al. (2024: 246), developed workload perception of faculty members /academicians frazzles their well-being. In addition, El-Sherbeeny et al. (2024) reported that work overloads in the hospitality / hotel management business also cause employees' well-being to decline. In the medical sector/industry, work overload has been shown as one of the precedencies of quality life (Korkmazer and Aksoy, 2020), and it is stated that a rise in workload gives rise to intent of resignation (Çalışkan and Bekmezci, 2019). Meese et al. (2021) revealed that extreme job demands, work overloads, and working long hours lead to psychological distress or loneliness in healthcare workers.

According to the JD-R theory, with the rise of job demands (workload), the medical personnel spends more effort on performance and this may lead to deteriorations in healthcare workers well-being (health). In case the job resources are not enough to meet the job demands, the all efforts made to meet them will result in decrease of available resources (Bakker et al., 2023). As result, any rise in workload will bring the possibility of experiencing lesser well-being. As result, the following is hypothesized (H1): Workload has adverse effects on psychological well-being.

2.3. Workload Perception and Resilience

While a rise in job demands causes stress, medical employees' failings in self-control may lead to debilitations of work ethics, behaviors and attitudes. Spending more (physical, emotional, and cognitive) effort to meet job's demands will have or lead to psychological and physiological costs on the healthcare workers (Bakker et al., 2023). Psychological resilience as the capacity of coping with exertions in question, allows medical personnel to produce solutions when faced with challenges and adapt to such situations (Russo et al., 2012).

If a healthcare worker fails to cope with increased work demands (workload), she/he may experience burnout (Atalay and Çakırel, 2022), and this may give rise to an intention of resignation (Holland et al., 2019). On the other hand, it has been revealed that heavy workload stress may result in lowering the resilience levels (Russo et al., 2012). Additionally, Fatima et al. (2024) highlight that healthcare workers' feelings of being overwhelmed by work overload declines job resilience. Resilience is nurtured by positive emotions and supports exerting sustainable work efforts with proper conduct (Han et al., 2021). As employees are psychologically unable to cope with the stress of work overload, their resilience levels start to decline (Bakker et al., 2023). In the light of this information it is hypothesized (H2) as follows: Workload perception has adverse effects on resilience.

2.4. Resilience and Psychological Well-Being

Resilience is defined as employee's conduct/ attitude, physical health and psychological well-being (Good et al., 2025: 2). Resilience correlates with happiness (Kumar et al., 2021). Therefore, resilience may help healthcare personnel to recover from adverse consequences of stress created by work demands and overloads (Huang et al., 2019). The positive correlation between resilience and psychological well-being indicates that resilience is a valuable psychological resource used for coping with psychological problems such as burnout, anxiety, and depression (Russo et al., 2012). When Foster et al. (2020) pointed out the positive correlation between resilience and well-being among nurses, they also reported that there is a linear correlation between resilience and satisfaction; the more resilient the bank employees / tellers, exposed to high levels of stress at work, are the more powerful the satisfaction that they take out from work. (Özkan et al., 2024). Healthcare workers whose resilience levels are extremely high report to have a better well-being (Huang et al., 2019).

Resilience of healthcare employees, by preventing burnout by over workload demands on healthcare employees' well-being, minimizes the adverse effects of burnouts, which the healthcare workers may have over their well-being due to extreme work overloads (Munn et al., 2021). Resilience serves as a resource for employees, who are working at high-demand jobs and under very stressful working conditions (Huang et al., 2019). Niitsu et al. (2017) suggest that psychological, social, and physical resources contribute to building and developing personal resources, which strengthen resilience. According to Bakker and Demerouti (2017), job resources may help in development of

personal resources, and employees with developed personal resources may have better resilience and psychological well-being (Bakker et al., 2023). Based on this, the following hypothesis (H3) is proposed: Resilience positively affects the psychological well-being.

2.5. Role of Resilience as Mediator

The JD-R theory proposes that personal resources may mediate the adverse effects of job demands on healthcare workers, improving well-being in the process. Also reducing the adverse effects of job demands enables workers to continue performing their responsibilities effectively and efficiently at work (Bakker and Demerouti, 2017).

Workers with higher resilience, who can plan their responsibilities independently (job autonomy), show increased levels of resilience that has positive effects on well-being (Kaplan and Öztürk, 2022). Additionally, Indudewi et al. (2024) revealed that resilience mediates the correlation between workload and burnout. Resilience partly mediates the correlation between burnout and psychological well-being, by mediating the correlation between burnout and well-being (Russo et al., 2012).

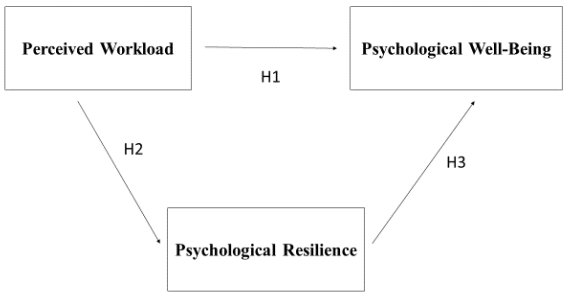
On the other hand, the workers with work overload or heavy workload perception in the medical sector, are less committed or loyal to their work and have more emotional burnouts (Moreno-Martínez and Sánchez-Martínez, 2025). It is proposed that resilience may possibly mediate the stress correlation (emotional exhaustion) on employees having demanding jobs (workloads), and it may be used as personal resource. Improper working conditions is reported to cause low resilience and energy levels, sleep disorders or insomnia problems, and decline of mental health, and combined with low resilience, they may lead to energy depletion, sleep problems, and mental health issues (Hartmann et al., 2020). On the other hand, employees with higher resilience are able to cope better with the adverse effects of poor working conditions (Huang et al., 2019).

Although the existing literature provides limited empirical support on the mediating effect of resilience in the correlation between workload and well-being (Good et al., 2025); it is already known that increased job demands (workload) magnifies the perception of work pressure and drains employees' feelings of well-being (Bakker et al., 2023). Resilience helps reduce the adverse effects of job demands on well-being (Munn et al., 2021). In the case where job resources are insufficient to meet job demands, well-being takes a plunge downward, but personal resources (resilience) can mediate the adverse effect of workload on psychological well-being (Pluta and Rudawska, 2021). Based on this, the following hypothesis (H4) is proposed: Resilience mediates the correlation between workload perception and psychological well-being.

3. METHOD

A quantitative approach was employed to determine the mediating role of psychological endurance on the correlation between the workload and psychological well-being. Included into this section are information regarding to the analysis of the data collected during the research phase of the study and the type of sampling method and data collection tools used during research. Figure 1 illustrates the research model.

Figure 1. Research Model



3.1. Research Design

In this study, the correlation between workload perception, psychological resilience, and psychological well-being was analyzed through medical secretaries. The population of the study consists of medical secretaries in Turkey. In this study a convenience sampling method was used, and participants were obtained via social media platforms (LinkedIn, Facebook, Instagram). This study received the Social and Humanistic Discipline Research Ethics' approval of The Committee of Hacettepe University, on 07.05.2024, number 2024/9. The participants were made aware of the study, and they involved in voluntary.

The survey form used in the study had two parts. The first part included descriptive questions aimed at gathering demographic data, such as age, gender, relative status, and educational attainments of the participants. The second part included items aimed at measuring the variables of the study. The data collection process was conducted between the months of May and December of 2024. The survey was then sent to participants through the internet and 480 responses were received. In studies such as the present one, where advanced multivariate analyses are employed, sample sizes exceeding 200 are considered sufficient to obtain reliable parameter estimates (Bagozzi, 2010; Kline, 2023). Therefore, the sample size of 480 can be considered methodologically robust and clearly adequate.

When analyzing the findings related to the sample of the study, it was observed that the average age of the participants was 28.73. 75% of the participants were female, and 25% were male; 31% were married, and 69% were single. In regards to their education levels, 5.8% of the participants had a high school diploma, 69.4% of them had associate's degree, 19.8% had bachelor's degree, and 5% had graduate degree.

3.2. Research Tools

In this study, scales developed in previous research and whose reliability and validity have been supported in many studies were used. The scales were applied with different Likert response formats (5-point and 7-point) in accordance with their original versions. The use of different response formats within the same survey has been suggested as a procedural approach that may help reduce common method variance when data are collected from the same respondents (Podsakoff et al., 2003).

Quantitative Workload Inventory: This single-dimensional scale, consisted of 5 items, that were developed by Spector and Jex (1998) and later adapted into Turkish by Keser et al. (2017). In this scale the participants are asked to indicate how often each item occurs, using five-coded response options ranging from "1 – meaning, less than once a month or never" to "5 – meaning, several times a day." Higher scores reflect a higher level of workload.

Psychological Resilience Scale: This scale was developed by Smith et al. (2008). It consists of 6 items and is a single-dimensional 5-point Likert scale (1 = strongly disagree, 5 = strongly agree). The Turkish validity and reliability study has been conducted by Doğan (2015). High scores indicate that the employee / worker has higher resilience in the face of adverse or challenging jobs.

Psychological Well-Being Scale: This scale, developed by Diener et al. (2010), is a unidimensional measurement tool with the purpose of determining a healthcare worker's scale of psychological well-being. The scale consists of 8 items and uses a 7-point Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree). The Turkish adaptation of the scale was carried out by Telef (2011; 2013). All items were positively phrased. Scores ranged from 8 (if all items are answered with "strongly disagree") to 56 (if all items are answered with "strongly agree"). A high score signifies that healthcare worker /personnel has substantial amount of psychological resources and resilience.

3.3. Data Analysis

The statistical analyses of this study were performed with SPSS (Statistical Package for the Social Sciences) 25.0 and AMOS (Structural Equation Modeling) 24.0 programs. SPSS was used for descriptive statistics and correlation analyses, while AMOS was employed for reliability and validity analyses of the structures and hypothesis testing.

4. RESULTS

4.1. Descriptive Statistics and Finding regarding to Correlation Analysis

Table 1 displays the variables' mean values, standard deviations, and correlation coefficients. According to the results of the correlation analysis, a negative and significant correlation was found between perceived workload and psychological well-being ($r=-0.11$; $p<0.05$). Similarly, a negative and significant correlation was identified between perceived workload and psychological resilience ($r=-0.12$;

p<0.01). A significant positive correlation was observed between psychological resilience and psychological well-being (r=0.66; p<0.01).

Table 1. Mean, Standard Deviation and Correlation Values

Variables	Mean	Standard Deviation	1	2	3
1. Quantitative Workload Inventory	3.03	1.18	1		
2. Resilience	3.45	1.04	-0.12**	1	
3. Well-Being	4.66	1.33	-0.11*	0.66**	1
Notes: n=480; *p<0.05; **p<0.01					

4.2. Findings Related to the Measurement Model

The model used in this study was tested using confirmatory factor analysis (CFA) with the AMOS program. The maximum likelihood estimation method was used to assess whether the proposed structures of the measurement scales were supported by the data collected (Jöreskog and Sörbom, 2006). The fit of the measurement structure with the data was assessed using the recommended fit indices (Hu and Bentler, 1999). The model included chi-square (χ^2), degrees of freedom (df), root mean square error of approximation (RMSEA), standardized root mean square residual (SRMR) (Structural Equation Modeling), goodness of fit index (GFI), and comparative fit index (CFI). A χ^2/df value of less than 3, RMSEA and SRMR values lower than 0.05, and GFI and CFI values higher than 0.95 indicate a good model fit (Byrne, 2016; Kline, 2023). As a result of the CFA, the model fit indices were determined as χ^2/df = 4.46, RMSEA = 0.08, SRMR = 0.05, GFI = 0.89, and CFI = 0.92. These values suggest that the measurement model demonstrates an acceptable level of fit with the data according to the thresholds suggested in the literature.

Following the structural validity analysis, reliability as well as convergent and discriminant validity were examined. For internal consistency reliability, the values of Cronbach's alpha (α) and composite reliability (CR) should exceed 0.70. Convergent validity requires standardized factor loadings greater than 0.50, composite reliability (CR) above 0.70, average variance extracted (AVE) exceeding 0.50, and CR values higher than AVE. For discriminant validity, AVE have to be > maximum shared variance (MSV) and AVE > average squared variance (ASV) (Hair et al., 2014). According to Nunnally (1978), α and CR values should exceed 0.70, and the results presented in Table 2 meet this criterion. Standardized factor loadings > 0.70, CR > 0.70, AVE > 0.50, and CR values greater than AVE were observed along with AVE values being greater than MSV and ASV (Hair et al., 2014; Malhotra and Dash, 2011). The results indicate that the model shows an acceptable level of fit with the data. Furthermore, the findings obtained from the internal consistency reliability, convergent, and discriminant validity analyses, support that the measurement model is reliable and valid.

Table 2. Measurement Model

Variables	Items	Factor Loadings	α	CR	AVE	MSV	ASV
Quantitative Workload Inventory	QWI1	0.74	0.88	0.88	0.60	0.01	0.01
	QWI2	0.83***					
	QWI3	0.82***					
	QWI4	0.76***					
	QWI5	0.73***					
Resilience	R1	0.88	0.92	0.92	0.66	0.52	0.27
	R2	0.82***					
	R3	0.79***					
	R4	0.80***					
	R5	0.76***					
	R6	0.80***					
Well-Being	WB1	0.77	0.92	0.92	0.60	0.52	0.27
	WB2	0.77***					
	WB3	0.77***					
	WB4	0.71***					
	WB5	0.79***					
	WB6	0.79***					
	WB7	0.80***					
	WB8	0.77***					

Notes: ***p<0.001; α=Cronbach's Alpha; CR=Composite Reliability; AVE=Average Variance Extracted; MSV=Maximum Squared Variance; ASV=Average Shared Square Variance

4.3. Findings Related to the Structural Model

In this study, a 5,000-bootstrap structural model analysis was used, and a 95% CI was calculated to estimate the lower and upper bounds, which helps in understanding the level of statistical significance. Table 3 presents the findings related to the hypotheses. Workload perception explains 2% and 53% of the variance in psychological resilience and psychological well-being, respectively.

Upon examining the findings, it was observed that the perception of workload had a negative but statistically insignificant effect on psychological well-being (β=-0.03; p>0.05). Therefore, Hypothesis 1 was not supported. The perception of workload was found to have a negative and statistically significant effect on psychological resilience (β=-0.14; p<0.01); thus, Hypothesis 2 was accepted. Furthermore, psychological resilience was found to have a positive and statistically significant effect on psychological well-being (β=0.74; p<0.001). In this regard, Hypothesis 3 was supported. Upon examining the bootstrap results, it was found that the indirect effect of workload perception on psychological well-being through psychological resilience was significant (β=-0.11; 95% CI=[-0.189 to -0.022]; p<0.05). The fact that the CI does not include zero indicates that the mediation effect is statistically significant. Accordingly, Hypothesis 4 was accepted (MacKinnon et al., 2004).

Table 3. Hypothesis Test Results

Hypotheses	Paths	β	S.E.	*p*	Result
H1	QWI → WB	-0.03	0.04	0.43	Rejected
H2	QWI → R	-0.14	0.05	0.004**	Supported
H3	R → WB	0.74	0.05	0.000***	Supported
H4	QWI → R → WB	-0.11	CI LL/UL [-0.189/-0.022]	0.05*	Supported

Notes: *p<0.05; **p<0.01; ***p<0.001; Coefficients are standardized (β); S.E.=Standard Error; QWI=Quantitative Workload Inventory; R=Resilience; WB=Well-Being; CI=Confidence Interval; LL=Lower Limit; UL=Upper Limit

5. DISCUSSION AND CONCLUSION

This study primarily analyzed the effect of workload perception on psychological well-being and psychological resilience among medical secretaries within the framework of the JD-R theory. Subsequently, the mediating effect of psychological resilience on the correlation between workload perception and psychological well-being was examined. The data was analyzed by examining the responses of medical secretaries to questions concerning their workload, psychological well-being, and psychological resilience. Due to the reason that these variables in the research model, especially those in the context of medical secretaries, have not been previously studied together, therefore this study has the potential to make a significant contribution to the already available literature.

As a result of the analyses, it was first determined that medical secretaries' perceptions of their workload were at a moderate level. This finding indicates that medical secretaries are able to cope with their workloads. Especially in low- or middle-income countries, excessive workloads can be seen in delivering healthcare due to staff shortages (Kovacs and Lagarde, 2022). Although Turkey is considered a middle-income country (Baykara, 2024), medical secretary appointments are regularly made based on needs in both the public and private sectors, with more than 16,000 appointments made in 2023 (Samancı, 2023). The findings of the study are consistent with this, suggesting that the appointments made in the field of medical secretarial work have contributed to balancing the workload perception of employees, maintaining it at a moderate level. Additionally, the fact that a large proportion of the participants had associate degrees may be related to this result. The main purpose of associate degree programs in medical secretary training is to equip students with the ability to effectively manage their workload. In this context, the theoretical and practical education provided helps future medical secretaries gain professional skills and prepare them for their careers in the future.

Secondly, it was found that medical secretaries have a level of psychological resilience slightly above the average. This result is consistent with the literature. Similarly, Baskin and Bartlett (2021) found that healthcare workers had moderate resilience during the COVID-19 pandemic. Smallwood et al. (2021) also demonstrated that healthcare workers had very high levels of resilience in their studies. In the study by Yorgancıoğlu Tarcan and Samancı (2023) analyzing the psychological resilience of

vocational school students, it was found that the students' psychological resilience levels were low. In this context, it can be stated that professional experience plays a significant role in increasing psychological resilience, and that applied lessons such as practical classes or internships in associate degree programs in medical secretarial training make a great contribution to the process. Therefore, it can be considered that the medical secretaries who graduate from these programs have gained fundamental skills to cope with workplace stress and enhance their resilience, resulting in above-average levels of psychological resilience. Additionally, considering that a large majority of the participants were associate degree graduates, the result is consistent with expectations.

Thirdly, it was determined that medical secretaries have a level of psychological well-being slightly above the average. Compared to other sectors, the greater employment opportunities in the healthcare sector may have reinforced employees' sense of financial and professional security, contributing to their psychological well-being being above the average. In the study by Esmer and Arıbaş (2023) with students of medical documentation and secretarial programs, it was observed that the main reason for choosing the program was the employment opportunities it provided. Furthermore, healthcare workers are generally expected to meet the high emotional demands created by healthcare environments (Taylor et al., 2024). However, the fact that medical secretaries mostly take part in administrative procedures, and not intervene directly in patients' severe health issues like doctors or nurses, and have clearly defined job descriptions (Official Gazette of the Republic of Türkiye, 2014) may have contributed to their high psychological well-being.

Another result obtained from the research is that the perceived workload has a negative, yet statistically non-significant effect on psychological well-being, and thus, the related hypothesis (H1) was rejected. In other words, it was determined that the workload of medical secretaries did not affect their psychological well-being. Nevertheless, there is a general consensus in the literature that workload impacts psychological well-being (Afsha and Eki, 2024; Ilies et al., 2010; Suprihartini and Suryathi, 2023). The differing conclusion in this study regarding medical secretaries may be attributed to the fact that many studies analyzing the correlation between workload and psychological well-being tend to focus on healthcare professionals, such as nurses, who are involved in more intensive patient care (Afsha and Eki, 2024; Aalto et al., 2018). In other words, even if the work done by medical secretaries is intense, it has a predictable workflow, and since they are not directly involved in life-threatening decisions regarding patients, their workload perception may not have an impact on their psychological well-being.

Another result obtained from the study is that medical secretaries' workload perceptions have a negative and statistically significant effect on their psychological resilience. In this context, it is determined that the hypothesis H2 was accepted. This result is consistent with the literature and overlaps with previous research. In a study conducted by Kızılkaya and Tekin (2023) on healthcare workers was concluded with the perception of workload having a negative effect on psychological resilience. In addition to that, in another study done by Priyanggono et al. (2023) on nurses, it was determined that

workload has a negative effect on psychological resilience. Medical secretaries should effectively manage the coordination between patients/patient relatives and medical staff to make sure that healthcare services provided are not disrupted (Çakıroğlu and Tengilimoğlu, 2014), they should have strong communication skills (Güner Kibaroğlu et al., 2024), and work quickly and carefully. However, setbacks experienced during crisis management, time and multitasking management may increase the workload and cause decrease in their psychological resilience. In this context, it may be beneficial to incorporate subjects such as time management, crisis management, and stress management into the associate's degree curriculum to increase psychological resilience of medical secretaries. These subjects may also be reinforced through hands-on-training programs. In addition, possible conflicts arising between medical secretaries and patients and / or patient's relatives may weaken psychological resilience by leading to various organizational challenges (Güner Kibaroğlu et al., 2024). In this parallel, reinforcement of medical secretaries' communication skills would also be suiting. On the other hand, the monotonous and repetitive nature of this job or this profession (Qvarfordt et al., 2024) could reduce the satisfaction that the medical secretaries take out of doing this job (Hesselink et al., 2023) and this may have negative effects on their psychological resilience. In this regard a suggestion may be offered to have medical secretaries alternate among different departments on regular basis or at certain periods. This approach may provide an opportunity to increase the psychological resilience levels of medical secretaries by preventing the assignment of certain tasks to the same employee, distributing the workload more evenly, increasing employee's perception of professional competence, strengthening social support mechanism and improving their ability to adapt to changing working conditions.

Another result obtained from the analysis is that psychological resilience has a positive and statistically significant effect on psychological well-being. In this regard, hypothesis H3 was supported. This result aligns with findings from other studies in the literature. Thapa et al. (2023) likewise determined that resilience has a positive impact on the well-being of healthcare professionals. In a similar vein, Fazekas et al. (2024) highlighted that resilience enhances physicians' well-being and serves as a protective factor, particularly in the context of health crises. Correspondingly, Banerjee et al. (2021) emphasized that resilience played a crucial protective role in safeguarding the well-being of oncology professionals during the COVID-19 period. The finding is important for proving that the psychological resilience of medical secretaries helps them maintain their emotional well-being by improving their ability to cope with stress. While medical secretaries generally work under the adverse effects of factors such as heavy workloads and time pressure; therefore, they may struggle to maintain their emotional balance. In this context, it would be helpful to offer supportive or hands-on-training programs to help medical secretaries develop their stress-coping skills. Additionally, healthcare managers could adopt a more supportive management approach by considering the working conditions of their employees. Regularly scheduled surveys on employee satisfaction can be conducted to implement the necessary improvements in accordance with medical secretaries' expectations and needs.

Finally, the psychological resilience acted as a mediator in the correlation between workload perception and psychological well-being. In this context, hypothesis H4 was supported. A review of previous studies indicated that the obtained results align with the available literature. Empirical research conducted on nurses has revealed that psychological resilience serves as a partial mediator in the correlation between occupational stress and psychological well-being (Chen et al., 2022), and in the correlation between burnout and well-being (Zhang et al., 2024). In this regard, the findings in the referenced study also show that psychological resilience assumes a full mediating role, acting as a buffer and reducing the negative impact of medical secretaries' negative perceptions on their psychological well-being. Therefore, developing strategies to enhance the psychological resilience of medical secretaries could be important in minimizing the negative effects of their workload perceptions and supporting their psychological well-being.

As with many empirical studies, this research has certain limitations. Firstly, due to the cross-sectional nature of the study design, it is not possible to draw definitive conclusions regarding causal correlations among the variables. Therefore, the potential effect of institutional context on the findings could not be evaluated. Further studies are needed to explore causality in a much better way. Additionally, whether the participants worked in a public or private institution, or at a totally different regional settings were not considered. Researchers therefore may take this into consideration in their future studies. Another limitation is that 75% of the respondents were female medical secretaries, which could bias the results. Therefore, it may be suggested that a similar study be conducted on male medical secretaries in the future as well. Perceptions of medical secretaries were measured individually in this study, significant differences between the answers can be observed. Also, since the results were evaluated in Turkey, the generalizability of the findings may be limited for different cultural and institutional structures. Finally, the research model may be further enriched in future studies by incorporating additional variables such as job satisfaction, perceived organizational support, and work engagement.

REFERENCES

Aalto, A.M., Heponiemi, T., Josefsson, K., Arffman, M. and Elovainio, M. (2018) "Social Relationships in Physicians' Work Moderate Relationship Between Workload and Wellbeing—9-Year Follow-Up Study", European Journal of Public Health, 28(5): 798–804.

Ahuja, M.K., Chudoba, K.M., Kacmar, C.J., McKnight, D.H. and George, J.F. (2007) "IT Road Warriors: Balancing Work-Family Conflict, Job Autonomy, and Work Overload to Mitigate Turnover Intentions", MIS Quarterly, 31(1): 1-17.

Afsha, D. and Eki, P. (2024) "Workload on Nurses Psychological Well-Being", Journal of Social and Industrial Psychology, 13(2): 32-37.

Alzoubi, M.M., Al-Mugheed, K., Oweidat, I., Alrahbeni, T., Alnaeem, M.M., Alabdullah, A.A.S., Abdelaliem, S.M.F. and Hendy, A. (2024) "Moderating Role of Relationships Between Workloads, Job Burnout, Turnover Intention, and Healthcare Quality Among Nurses", BMC Psychology, 12(495): 1-9.

Atalay, M. and Çakırel, Y. (2022) "Sağlık Sektörü Çalışanlarında İş Yükü, İş Tatmini Ve Tükenmişlik Durumunun İncelenmesi", Journal of Management and Economics Research, 20(1): 431-463.

Aytaç, S. and Basol, O. (2019) "Mediating Role of Loneliness and Organizational Conflict Between Work Overload and Turnover Intention", Bagnara. (eds) Proceedings of the 20th Congress of the International Ergonomics Association IEA 2018, Advances in Intelligent Systems and Computing, Springer International Publishing, 291-301.

Bagozzi, R.P. (2010) "Structural Equation Models are Modelling Tools with Many Ambiguities: Comments Acknowledging the Need for Caution and Humility in Their Use", Journal of Consumer Psychology, 20(2): 208–214.

Bakker, A.B. and Demerouti, E. (2017) "Job Demands–Resources Theory: Taking Stock and Looking Forward", Journal of Occupational Health Psychology, 22(3): 273-285.

Bakker, A. B., Demerouti, E. and Sanz-Vergel, A. (2023) "Job Demands–Resources Theory: Ten Years Later", Annual Review of Organizational Psychology and Organizational Behavior, 10(1): 25-53.

Banerjee, S., Lim, K. J., Murali, K., Kamposioras, K., Punie, K., Oing, C., ... and Hardy, C. (2021) "The Impact of COVID-19 on Oncology Professionals: Results of the ESMO Resilience Task Force Survey Collaboration", ESMO Open, 6(2): 100058.

Baskin, R. G. and Bartlett, R. (2021) "Healthcare Worker Resilience During the COVID-19 Pandemic: An Integrative Review", Journal of Nursing Management, 29(8): 2329-2342.

Baykara, N. (2024) "Clinical Characteristics, Outcomes, and Risk Factors For Mortality in Pregnant/Puerperal Women with COVID-19 Admitted to ICU In Turkey: A Multicenter, Retrospective Study from A Middle-Income Country", Journal of Intensive Care Medicine, 39(6): 577-594.

Broetje, S., Jenny, G.J. and Bauer, G.F. (2020) "The Key Job Demands and Resources of Nursing Staff: An Integrative Review of Reviews", Frontiers in Psychology, 11(84): 1-17.

Byrne, B.M. (2016) "Structural Equation Modeling with AMOS", (3rd ed.), New York: Routledge.

Chen, I.H., Brown, R., Bowers, BJ. and Chang WY. (2015) "Job Demand and Job Satisfaction in Latent Groups of Turnover Intention Among Licensed Nurses in Taiwan Nursing Homes", Research in Nursing & Health. 38(5): 342–56.

Chen, S.Y., Yan, S.R., Zhao, W.W., Gao, Y., Zong, W., Bian, C., Cheng, Y. and Zhang, Y.H. (2022) "The Mediating and Moderating Role of Psychological Resilience Between Occupational Stress and Mental Health of Psychiatric Nurses: A Multicenter Cross-Sectional Study", BMC Psychiatry, 22(823): 1-11.

Çakıroğlu, E., and Tengilimoğlu, D. (2014) "Mobbing (Yıldırma) Davranışlarının Tıbbi Sekreterlerin Tükenmişliği Üzerine Etkisi", EJOVOC (Electronic Journal of Vocational Colleges), 4(3): 167-188.

Çalışkan, A. and Bekmezci, M. (2019) "Aşırı İş Yükünün İşten Ayrılma Niyetine Etkisinde İş Tatmini Ve Yaşam Tatmininin Rolü, Sağlık Kurumu Çalışanları Örneği", Adıyaman Üniversitesi Sosyal Bilimler Enstitüsü Dergisi, (31): 381-431.

Diener, E., Wirtz, D., Tov, W., Kim-Prieto, C., Choi, D. W., Oishi, S. and Biswas-Diener, R. (2010) "New Well-Being Measures: Short Scales to Assess Flourishing and Positive and Negative Feelings", Social Indicators Research, 97: 143–156.

Doğan, T. (2015) "Kısa Psikolojik Sağlamlık Ölçeği'nin Türkçe Uyarlaması: Geçerlik ve Güvenirlik Çalışması", The Journal of Happiness & Well-Being, 3(1): 93-102.

El-Sherbeeny, A. M., Alsetoohy, O., Sheikhelsouk, S., Liu, S. and Abou Kamar, M. (2024) "Enhancing Hotel Employees' Well-Being and Safe Behaviors: The İnfluences of Physical Workload, Mental Workload, and Psychological Resilience", Oeconomia Copernicana, 15(2): 765-807.

Ekinci, G. and Yılmaztürk, M.H. (2025) "Türkiye'de Sağlık Hizmetlerine Erişimin Teknik Etkinlik Değerlendirmesi", ESTÜDAM Halk Sağlığı Dergisi, 10(1): 17-31.

Esmer, Y. and Arıbaş, A.N. (2023) "Önlisans Öğrencilerinin Gelecek Kaygılarına Yönelik Nitel Bir Araştırma", Karamanoğlu Mehmetbey Üniversitesi Sosyal ve Ekonomik Araştırmalar Dergisi, 25(44): 330-347.

Fatima, T., Bilal, A.R., Waqas, M. and Imran, M.K. (2024) "Keeping Up with This Workload is Difficult: The Ramifications of Work Overload on Career Resilience", Kybernetes, 53(1): 188-215.

Fazekas, C., Zieser, M., Hanfstingl, B., Saretzki, J., Kunschitz, E., Zieser-Stelzhammer, L., ... and Matzer, F. (2024) "Physician Resilience and Perceived Quality of Care Among Medical Doctors With Training in Psychosomatic Medicine During the COVID-19 Pandemic: A Quantitative and Qualitative Analysis", BMC Health Services Research, 24(249): 1-13.

Foster, K., Roche, M., Giandinoto, J.A. and Furness, T. (2020) "Workplace Stressors, Psychological Well-Being, Resilience, and Caring Behaviours of Mental Health Nurses: A Descriptive Correlational Study", International Journal of Mental Health Nursing, 29(1): 56-68.

Good, S.C., Fisher, D.M., Toich, M.J. and Schutt, E.M. (2025) "A Meta-Analysis of Resilience in The Workplace" International Journal of Stress Management, 32(1): 1–30.

Güner Kibaroğlu, G., Samancı, S. and Basım, H.N. (2024) "Tıbbi Sekreterlerin Öfkeli Hasta ve Hasta Yakınlarıyla İletişim Becerisi: Bir Ölçek Geliştirme Çalışması", Optimum: Ekonomi ve Yönetim Bilimleri Dergisi, 11(2): 169-188.

Hair, J.F., Black, W.C., Babin, B.J. and Anderson, R.E. (2014) "Multivariate Data Analysis", London: Pearson.

Han, Y., Chaudhury, T. and Sears, G.J. (2021) "Does Career Resilience Promote Subjective Well-Being? Mediating Effects of Career Success and Work Stress", Journal of Career Development, 48(4): 338-353.

Hartmann, S., Weiss, M., Newman, A. and Hoegl, M. (2020) "Resilience in the Workplace: A Multilevel Review and Synthesis. Applied Psychology", 69(3): 913-959.

Hegney, D.G., Rees, C. S., Osseiran-Moisson, R., Breen, L., Eley, R., Windsor, C. and Harvey, C. (2019) "Perceptions of Nursing Workloads and Contributing Factors, and Their Impact on Implicit Care Rationing: A Queensland, Australia Study", Journal of Nursing Management, 27(2): 371-380.

Hesselink, G., Branje, F. and Zegers, M. (2023) "What Are the Factors that Influence Job Satisfaction of Nurses Working in the Intensive Care Unit? A Multicenter Qualitative Study", Journal of Nursing Management, 2023(1): 6674773.

Holland, P., Tham, T.L., Sheehan, C. and Cooper, B. (2019) "The Impact of Perceived Workload on Nurse Satisfaction with Work-Life Balance and Intention to Leave the Occupation", Applied Nursing Research, 49: 70-76.

Hu, L-T. and Bentler, P.M. (1999) "Cut Off Criteria for Fit Indexes in Covariance Structure Analysis: Conventional Criteria Versus New Alternatives", Structural Equation Modeling: A Multidisciplinary Journal, 6(1): 1-55.

Huang, Q., Xing, Y. and Gamble, J. (2019) "Job Demands–Resources: A Gender Perspective on Employee Well-Being and Resilience in Retail Stores in China", The International Journal of Human Resource Management, 30(8): 1323-1341.

Ilies, R., Dimotakis, N. and De Pater, I.E. (2010) "Psychological and Physiological Reactions to High Workloads: Implications for Well-Being", Personnel Psychology, 63(2): 407-436.

Indudewi, D., Prihantini, F.N., Pribadi, A.S. and Susanto, B. (2024) "The Mediating Effect of Resilience in the Relationship between Work Overload and Job Burnout among Teaching Accountants", International Journal of Economics Development Research, *5*(1): 442-457.

İstanbul Planlama Ajansı (2023) "Kent Gündemine Bakış: Bir Insan Hakkı Olarak Sağlığa Erişim", https://ipa.istanbul/wp-content/uploads/2024/03/KENT-GUNDEMI-SAGLIGA-ERISIM.pdf, (10.02.2025)

Jöreskog, K.G. and Sörbom, D. (2006) "Lisrel 8.80 for Windows [Computer Software]" Lincolnwood, IL: Scientific Software International.

Kaplan, M. and Öztürk, M. (2022) "İş Otonomisinin Psikolojik İyi Oluş Üzerine Etkisi: Psikolojik Dayanıklılığın Aracı Rolü", Nevşehir Hacı Bektaş Veli Üniversitesi SBE Dergisi, 12(3): 1566-1578.

Kaya, Ç. and Deniz, A. (2021) "Çağrı Merkezlerinde İş Yükünün İşte Tükenmişlik Duygusu Üzerindeki Etkisi", Journal of Life Economics, 8(1): 81-92.

Keser, A., Bilir, Ö.B. and Aytaç, S. (2017) "Niceliksel İş Yükü Envanterinin Geçerlik ve Güvenirlik Çalışması", "İş, Güç" Endüstri İlişkileri ve İnsan Kaynakları Dergisi, 19(2): 55-74.

Kızılkaya, S. and Tekin, P.S. (2023) "İş Yükünün Psikolojik Sağlamlık Üzerine Etkisinde İşe Bağlı Duygusal Tükenmişliğin Aracı Rolü", Hacettepe University Faculty of Health Sciences Journal, 10(3): 677-694.

Kline, R.B. (2023) "Principles and Practice of Structural Equation Modeling", (5th ed.), New York: Guilford Press.

Korkmazer, F. (2021) "İş Yükü Fazlalığı Algısının Çalışan Performansı Üzerindeki Etkisinde İş Tatmininin Aracı Rolü: Sağlık Sektöründe Bir Uygulama", OPUS International Journal of Society Researches, 17(36): 2767-2793.

Korkmazer, F. and Aksoy, A. (2020) "İş Yükü Fazlalığının Yaşam Kalitesi Üzerindeki Etkisinde İş-Aile Çatışmasının Aracı Rolü: Sağlık Sektöründe Bir Uygulama", Business & Management Studies: An International Journal, 8(2): 1628-1657.

Kovacs, R. and Lagarde, M. (2022) "Does High Workload Reduce the Quality of Healthcare? Evidence from Rural Senegal", Journal of Health Economics, 82: 102600.

Kumar Pradhan, R., Prasad Panigrahy, N. and Kesari Jena, L. (2021) "Self-Efficacy and Workplace Well-Being: Understanding the Role of Resilience in Manufacturing Organizations", Business Perspectives and Research, 9(1): 62-76.

Lee, Y.W., Dai, Y.T., Chang, M.Y., Chang, Y.C., Yao, K.G. and Liu, M.C. (2017) "Quality of Work Life, Nurses' Intention to Leave the Profession, and Nurses Leaving the Profession: A One-Year Prospective Survey", Journal of Nursing Scholarship, 49(4): 438-444.

Mazzetti, G., Robledo, E., Vignoli, M., Topa, G., Guglielmi, D. and Schaufeli, W.B. (2023) "Work Engagement: A Meta-Analysis Using the Job Demands-Resources Model", Psychological Reports, 126(3): 1069-1107.

MacKinnon, D.P., Lockwood, C.M. and Williams, J. (2004) "Confidence Limits for the Indirect Effect: Distribution of the Product and Resampling Methods", Multivariate Behavioral Research, 39(1): 99-128.

Malhotra, N. and Dash, S. (2011) "Marketing Research and Applied Orientation", Pearson Publishing: London.

Meese, K.A., Colón-López, A., Singh, J.A., Burkholder, G.A., and Rogers, D.A. (2021) "Healthcare is a Team Sport: Stress, Resilience, and Correlates of Well-Being Among Health System Employees in a Crisis", Journal of Healthcare Management 66(4): 304-322.

Moreno-Martínez, M. and Sánchez-Martínez, I. (2025) "The Associated Factors of Work Engagement, Work Overload, Work Satisfaction, and Emotional Exhaustion and Their Effect on Healthcare Workers: A Cross-Sectional Study", Healthcare, 13(2): 162.

Munn, L.T., Liu, T.L., Swick, M., Rose, R., Broyhill, B., New, L. and Gibbs, M. (2021) "Well-Being and Resilience Among Health Care Workers During the COVID-19 Pandemic: A Cross-Sectional Study", AJN The American Journal of Nursing, 121(8): 24-34.

Niitsu, K., Houfek, J.F., Barron, C.R., Stoltenberg, S.F., Kupzyk, K.A. and Rice, M.J. (2017) "A Concept Analysis of Resilience Integrating Genetics", Issues in Mental Health Nursing, 38(11): 896-906.

Oderinde, S.L., Akintunde, O.Y. and Ajala, I.R. (2024) "A Critical Analysis of The İmpact of Work Overload on Lecturers' Well-Being: A Case of Obafemi Awolowo University, Ile-Ife, Nigeria", International Journal of Qualitative Research, 3(3): 238-249.

Official Gazette of the Republic of Türkiye, (27 Mayıs 2014) "Sağlık Meslek Mensupları ile Sağlık Hizmetlerinde Çalışan Diğer Meslek Mensuplarının İş ve Görev Tanımlarına Dair Yönetmelik (Ek-2)", 29007: https://www.resmigazete.gov.tr/eskiler/2014/05/20140522-14-1.pdf, (18.02.2025)

Özkan, O.S., Üzüm, B. and Çakan, S. (2024) "Could Unlocking Employee Resilience be Considered a Potential Path to Achieving Workplace Success?", Current Psychology, 43(13): 11772-11784.

Pace, F., D'Urso, G., Zappulla, C. and Pace, U. (2021) "The Relation Between Workload and Personal Well-Being Among University Professors", Current Psychology, 40: 3417-3424.

Pelenk, S.E. and Acaray, A. (2020) "Aşırı İş Yükünün İş Tatminine Etkisinde İşyeri Maneviyatının Düzenleyici Rolü", Süleyman Demirel Üniversitesi Vizyoner Dergisi, 11(27): 480-497.

Pluta, A. and Rudawska, A. (2021) "The Role of the Employees' Individual Resources in the Perception of the Work Overload", Journal of Organizational Change Management, 34(3): 590-612.

Podsakoff, P.M., MacKenzie, S.B., Lee, J.Y., and Podsakoff, N.P. (2003) "Common Method Biases in Behavioral Research: A Critical Review of The Literature and Recommended Remedies", Journal of Applied Psychology, 88(5): 879-903.

Priyanggono, D., Putra, K.R. and Hariyanti, T. (2023) "Nurses' Workload and Quality of Life in General Hospitals: The Mediating Role of Resilience", International Journal of Occupational Safety and Health, 13(4): 494-503.

Qvarfordt, M., Lagrosen, S. and Nilsson, L. (2024) "Medical Secretaries' Fears and Opportunities in an İncreasingly Digitalised Workplace Environment", Journal of Health Organization and Management, 38(9): 175-194.

Rasool, T., Warraich, N.F. and Sajid, M. (2022) "Examining the Impact of Technology Overload at the Workplace: A Systematic Review", Sage Open, 12(3): 1-8.

Russo, S.J., Murrough, J.W., Han, M.H., Charney, D.S. and Nestler, E.J. (2012) "Neurobiology of Resilience", Nature Neuroscience. 15(11): 1475–1484.

Samancı, S. (2023) "Sağlık Hizmeti Sunumunda Kritik Bir Meslek: Tıbbı Sekreterlerin Rolü ve Değerlendirilmesi", *Sosyal ve Beşeri Bilimlerde Uluslararası Çalışmalar-II,* Çeylan Çatalcalı, A., Batal, S., Toptaş, A., Demir Öztürker, H.C. (Ed.), Serüven Yayınevi, Ankara, 201-214.

Smallwood, N., Karimi, L., Bismark, M., Putland, M., Johnson, D., Dharmage, S.C. ... and Willis, K. (2021) "High Levels of Psychosocial Distress Among Australian Frontline Healthcare Workers During the COVID-19 Pandemic: A Cross-Sectional Survey", General Psychiatry, 34(5): e100577.

Smith, B.W., Dalen J., Wiggins K., Tooley E., Christopher P. and Bernard J. (2008) "The Brief Resilience Scale: Assessing the Ability to Bounce Back", International Journal of Behavioral Medicine, 15(3): 194–200.

Spector, P.E. and Jex, S.M. (1998) "Development of Four Self-Report Measures of Job Stressors and Strain: Interpersonal Conflict at Work Scale, Organizational Constraints Scale, Quantitative Workload Inventory, and Physical Symptoms Inventory", Journal of Occupational Health Psychology, 3: 356-367.

Suprihartini, Y. and Suryathi, W. (2023) "The Influence of Workload and Transformational Leadership Style on Employee Psychological Well-being with Job Satisfaction as a Mediator", SEIKO: Journal of Management & Business, 6(2): 326-337.

Taylor, M.J., Andreatta, R., Woltenberg, L., Cormier, M. and Hoch, J. M. (2024) "The Relationship of Emotional Intelligence to Burnout and Related Factors in Healthcare Profession Students", Nurse Education Today, 143, 106387.

Telef, B.B. (2011) "Psikolojik İyi Oluş Ölçeği (PİOO): Türkçeye Uyarlama, Geçerlik ve Güvenirlik Çalışması", 11. Psikolojik Danışma ve Rehberlik Kongresi, 3–5 Ekim, Selçuk- İzmir.

Telef, B.B. (2013) "Psikolojik İyi Oluş Ölçeği: Türkçeye Uyarlama, Geçerlik Ve Güvenirlik Çalışması", Hacettepe Üniversitesi Eğitim Fakültesi Dergisi, 28(3): 374-384.

Thapa, P.P., Amgain, K., Khanal, J. and Kamar, S.B. (2023) "The Role of Resilience in Relationship Between Burnout and Wellbeing Among Healthcare Workers During COVID-19 Pandemic", JKISTMC, 5(10): 1-7.

Yorgancıoğlu Tarcan, Y. and Samancı, S. (2023) "Sağlık Teknikerlerinin Meslek Seçimlerinde Kişisel Özelliklerin ve Psikolojik Sağlamlığın Etkisi", Hitit Sosyal Bilimler Dergisi, 16(2): 329-349.

Zhang, X., Tian, W., Tang, X., Jia, L., Meng, X., Shi, T. and Zhao, J. (2024) "Mediating Role of Resilience on Burnout to Well-Being for Hospital Nursing Staff in Northeast China: A Cross-Sectional Study", BMJ Open, 14(11): e081718.

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