



ISSN 2809-8501 (Online)

**UTSAHA: Journal of Entrepreneurship**

<https://journal.jfpublisher.com/index.php/joe>

Vol. 5, Issue 2, April 2026

[doi.org/10.56943/joe.v5i2.984](https://doi.org/10.56943/joe.v5i2.984)

## **Organizational and Social Support in Employee Post-Recovery Adaptation: Evidence from Indonesian Mining**

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### **ABSTRACT**

*Employees returning to work following serious illness or workplace injury face complex physical and psychological challenges that extend well beyond the clinical recovery process. Despite growing scholarly interest in organizational support and workplace social support, limited research has examined how these two constructs operate during the post-recovery phase within high-risk industrial settings, particularly in the mining sector. This study investigates the forms of organizational support provided by PT Kaltim Prima Coal and the influence of workplace social support on employee adaptation following recovery. A qualitative phenomenological approach was adopted, and data were collected through semi-structured interviews with six purposively selected employees who participated in the company's Work Rehabilitation Program. Thematic analysis following the six-phase framework of Braun and Clarke was employed, with manual coding conducted through Microsoft Excel. The findings reveal that organizational support operates across three interconnected dimensions: psychosocial recognition, which encompasses employee appreciation and workload adjustment; medical-functional assistance, including clinical consultation and specialist referral; and structural-administrative oversight through continuous HR monitoring. Workplace social support, delivered through supervisory guidance, emotional validation, and peer collaboration, further reduces occupational stress, restores self-confidence, and strengthens work motivation during reintegration. Structured reintegration through the WRP was also perceived as substantially more restorative than conventional sick leave arrangements. Collectively, these findings extend Perceived Organizational Support theory to a previously underexamined population and offer evidence-based implications for occupational rehabilitation policy design in high-risk industrial environments.*

**Keywords:** *Employee Adaptation, Mining Industry, Organizational Support, Post-Recovery, Workplace Social Support*

## **INTRODUCTION**

Employee health recovery constitutes a critical phase that extends beyond the purely medical domain, encompassing the complex process of re-adapting to the work environment. Upon entering the post-recovery phase, employees who elect to return to their occupational roles are typically driven by a combination of intrinsic and extrinsic motivational factors. Oktafia and Kurniawidjaja (2025) characterize such motivation as a set of attitudes and internalized values that direct individual behavior toward the attainment of specific occupational goals. Within this context, both organizational support and workplace social support represent two pivotal determinants of successful re-adaptation, particularly for employees whose return to work follows a period of serious illness or injury. The challenges encountered in this transition are frequently physical and psychological in nature, requiring deliberate and structured attention from the employing organization. As Simbolon et al. (2024) assert, organizations that genuinely prioritize employee well-being are better positioned to facilitate meaningful recovery outcomes.

Employees returning to work after a period of health-related absence commonly report a range of difficulties, including diminished physical energy, altered functional capacity, impaired concentration, and heightened anxiety regarding their occupational performance. Among the factors that precipitate or exacerbate these difficulties, workplace pressure and stress occupy a prominent position. Usnawati et al. (2020) note that excessive occupational demands frequently generate compounded sources of psychological stress, which can impede the recovery trajectory. In response to this reality, organizations are expected to design and implement targeted support strategies that demonstrate genuine concern for employee welfare. Organizational support, as defined by Bodroastuti et al. (2020), refers to the quality of the relationship between employees and the organization, specifically the extent to which employees perceive that the organization values their contributions and cares for their well-being. This conceptualization is firmly grounded in the theory of Perceived Organizational Support (POS) proposed by Eisenberger et al. (1986), which posits that employees' perceptions of organizational care strengthen their psychological readiness to confront work demands, particularly following a health-related absence.

The significance of post-recovery support is further compounded in high-risk industries, where the physical and psychological demands of work are substantially greater than in other sectors. Priyohadi and Achmadiansyah (2025) identify the manner in which an organization responds to employee health incidents as a crucial determinant of both individual well-being and broader organizational functioning. Workplace accidents represent one of the most prevalent triggers for post-recovery needs, particularly in the mining sector (Marselinus, 2025). In this regard, PT Kaltim Prima Coal, one of Indonesia's largest coal mining companies, presents a contextually significant case. The inherently hazardous nature of mining operations

subject's employees to elevated physical and psychological risks, rendering the provision of structured post-recovery organizational support not merely a welfare consideration but an operational necessity.

PT Kaltim Prima Coal has implemented a range of post-recovery support measures, including workload adjustments, occupational role modifications aligned with medical recommendations, extended sick leave provisions, and continuous medical monitoring through its occupational health unit. Fadhli (2025) reports that the company has assigned recuperating employees to dust-free working environments in accordance with physician guidance, a practice regarded as conducive to physical recovery. Indik (2025) further indicates that such tailored organizational support has enhanced employee productivity by aligning task demands with individual physical capabilities. These measured accommodations serve the dual function of preventing re-injury and mitigating the psychological stress that may accompany occupational re-integration. The perceived impact of these measures on employee well-being is consistent with the conclusions of Ichwan (2025) and Marselinus (2025), who affirm that employees who experience organizational care report greater feelings of appreciation and engagement.

The relational outcomes of organizational support at PT Kaltim Prima Coal are likewise significant. Rizki et al. (2025) define organizational support as an employee's belief that the organization values their contributions and is genuinely concerned for their well-being, a perception that directly influences the quality of the employment relationship. Bai et al. (2023) further argue that sustained attention to the post-recovery phase constitutes an integral component of strategic human resource management. When employees perceive that the organization recognizes their presence as meaningful, they are more likely to reciprocate through heightened commitment, a sense of responsibility, and maximized occupational effort (Indik, 2025). This pattern of reciprocity aligns with findings from the broader literature, Putra et al. (2025) demonstrate that a supportive work environment exerts a significant positive influence on employee motivation, which in turn enhances performance outcomes. Similarly, Lubis and Rinawati (2025) establish that career development opportunities and organizational motivation are positively associated with employee performance in healthcare settings, an industry context that shares important parallels with the post-recovery phase examined in the present study.

Beyond structural organizational support, the role of workplace social support is equally consequential in facilitating successful post-recovery adaptation. Social support at work encompasses the emotional, informational, and instrumental assistance extended by colleagues and supervisors within the immediate work environment. Employees who perceive acceptance, understanding, and active support from their peers tend to demonstrate superior adaptation outcomes compared to those working in environments lacking such relational resources (Nurfadilah, 2025). Nuraini (2025) further notes that a healthy and psychologically safe work environment is itself constituted through the presence of meaningful

social support. Iswanto and Agustina (2016) underscore that this form of support not only cultivates a positive social climate but also fosters effective interpersonal communication. At PT Kaltim Prima Coal, returning employees who have encountered procedural changes, system updates, or operational adjustments during their absence may experience considerable uncertainty. When colleagues are willing to provide guidance and share knowledge, the re-integration process is rendered more efficient, thereby reducing both confusion and the sense of inadequacy that often accompanies occupational transitions.

The supportive role of direct supervisors is similarly indispensable. Supervisors who exhibit empathy, communicate constructively, and calibrate performance expectations to reflect individual recovery circumstances contribute to the development of psychological safety, enabling employees to engage more confidently with challenging tasks (Heyns et al., 2021). At PT Kaltim Prima Coal, the salience of supervisory support is evidenced by employee accounts indicating that perceptions of genuine supervisory concern are associated with greater overall satisfaction with the adaptation process (Fadhli, 2025; Tahiry & Ekmekcioglu, 2023). Conversely, the absence of such support may generate feelings of neglect and psychological distress that interfere with recovery and re-adaptation (Widiastuti et al., 2025).

Collectively, organizational support and workplace social support function as complementary pillars of a sustainable human resource management strategy. Satardien et al. (2019) contend that employees who perceive organizational appreciation tend to develop stronger affective commitment toward the organization. Hanif et al. (2022) further argue that social support enriches this commitment through forms of assistance that include mentoring, emotional validation, task facilitation, and collaborative problem-solving. The intersection of these two forms of support, as manifested in the post-recovery practices of PT Kaltim Prima Coal, warrants rigorous empirical examination.

The foregoing discussion establishes the foundation for the present study. While prior research has examined organizational support and workplace social support in general employee performance contexts, limited attention has been given to how these two forms of support operate during the post-recovery phase within high-risk industrial settings. This gap is particularly evident in the mining sector, where the physical and psychological demands of re-integration are substantially more complex. Accordingly, this study aims to examine how PT Kaltim Prima Coal provides organizational support in the post-recovery phase and how workplace social support influences employee adaptation following recovery. By drawing on the lived experiences of employees who participated in the Work Rehabilitation Program, this study offers a contextually specific contribution to the intersection of occupational health management and human resource strategy in the Indonesian mining industry.

## RESEARCH METHODOLOGY

This study employed a qualitative research design grounded in a phenomenological approach, which was selected for its capacity to capture the lived experiences of individuals within a specific social context. Data were collected through semi-structured interviews guided by a structured interview protocol, allowing for both consistency across participants and sufficient flexibility to explore emergent themes. The study involved six employees of PT Kaltim Prima Coal who had participated in the Work Rehabilitation Program (WRP). This sample size is consistent with the conventions of phenomenological inquiry, in which Creswell and Inoue (2025) recommends engaging between three and ten participants, as the objective is not statistical generalizability but rather the attainment of depth and richness in experiential description. The six participants were purposively selected to represent diverse organizational divisions, including Supply Chain, Mining Operations, Human Resources, Business Improvement, and Graduate Mining Contract, thereby ensuring a breadth of perspectives on the post-recovery support experience. Participants ranged in age from 24 to 42 years, with organizational tenure spanning from 2.5 to 19 years and WRP participation durations ranging from 4 to 12 months. The demographic composition of the participants is presented in Table 1.

**Table 1** Participant Profiles

Name	Gender	Age (Years)	Division	Length of Service at PT KPC (Years)	Duration of Running WRP (Months)
NS 1	Male	42	Supply Chain	17	12
NS 2	Male	39	Mining Operations	19	4
NS 3	Female	24	Graduate Mining Contract	2.5	5
NS 4	Male	39	Human Resource	19	12
NS 5	Female	39	Business Improvement	19	5
NS 6	Male	42	Mining Operations	17	7

**Source:** Author's Database (2026)

Data analysis was conducted using thematic analysis following the six-phase framework established by Braun and Clarke (2022), comprising familiarization with the data, generation of initial codes, construction of preliminary themes, review and refinement of themes, definition and naming of final themes, and

systematic report compilation. The coding process was carried out manually using Microsoft Excel, through which participant responses were transcribed verbatim, first-order themes were derived directly from interview statements, and second-order themes were subsequently developed as more abstract conceptual categories drawn from the initial code groupings. To ensure the credibility and trustworthiness of the findings, peer debriefing was employed as the primary verification strategy throughout the analytical process.

## **RESULT AND DISCUSSION**

The following section presents the empirical findings derived from thematic analysis of semi-structured interviews conducted with six PT Kaltim Prima Coal employees who participated in the Work Rehabilitation Program. The findings are organized according to two primary themes that directly correspond to the research questions: the forms of organizational support provided during the post-recovery phase, and the influence of workplace social support on employee adaptation.

### **Organizational Support Provided by PT Kaltim Prima Coal in the Post-Recovery Phase**

Organizational support at PT Kaltim Prima Coal emerged as a structured institutional response to the elevated health and accident risks inherent in mining operations, which carry significant potential consequences for employee productivity, psychological well-being, absenteeism, and turnover. To address these challenges, the company implemented the Work Rehabilitation Program as a long-term post-recovery support mechanism oriented toward both sustained operational productivity and the holistic well-being of returning employees. The findings reveal that organizational support operates across three interconnected dimensions: psychosocial, medical-functional, and structural-administrative, each of which is examined in turn below.

#### **Psychosocial Support**

The psychosocial dimension represents the most immediately felt form of organizational support among returning employees. It is characterized by the company's sustained effort to recognize employee contributions, manage occupational demands realistically, and preserve employees' sense of dignity and purpose throughout the recovery period. Participants consistently reported that being acknowledged and included in meaningful work, despite their health limitations, was the most significant indicator of organizational care:

“We WRP employees still feel appreciated and needed, even though I remember I was absent once due to illness, and the workload the next day was much heavier.” (NS1)

“It's not that we feel safe, but we feel more cared for... we're still used, and still functioning even though we're in the recovery process.” (NS6)

These sentiments were further reinforced by participants who emphasized the quality of positional adjustments made by the company:

“It is very supportive, in the new place and in the old place it is the same; I am appreciated as their employee, I think that is extraordinary because I have experienced it myself.” (NS5)

“The company provides good positions for WRP employees, so they feel very appreciated; it is very good because we are given this opportunity to continue working.” (NS4)

Alongside recognition, the deliberate management of occupational pressure emerged as an equally significant component of psychosocial support. Participants described the absence of performance targets and structural pressure as a meaningful contributor to their psychological comfort during reintegration:

“Not really, there are no targets in the current job, and there is no pressure from the work structure in the new place.”(NS5)

“There are no pressures while I am carrying out this program; in fact, it eliminates the new work pressure that I experience in working.” (NS5)

These accounts collectively indicate that psychosocial support is realized through the recognition of employee contributions, the deliberate reduction of occupational stress, and the cultivation of a sustained sense of security throughout the reintegration process.

### **Medical-Functional Support**

Moving from the psychological to the functional dimension, the findings reveal that PT Kaltim Prima Coal provides systematic access to medical consultations, clinical assistance, and specialist referrals as part of its post-recovery support infrastructure. This dimension addresses the practical health management needs of returning employees and was widely perceived as evidence of the organization's genuine investment in physical recovery. Participants described the scope and accessibility of this support in the following terms:

“The company provides medical support to maintain productivity.” (NS1)

“I wasn't provided with any strategies, but only given support in the form of consultations with clinic doctors if I felt uncomfortable so as not to interfere with my good work productivity.” (NS4)

The reach of medical support extended beyond basic consultations to include specialist access and individualized therapeutic guidance, which gave participants a clearer and more structured sense of direction in managing their own recovery:

“The company really cares about this; I am still allowed to work even though my condition is not as optimal as before, and I can still be productive until now, assisted by medical assistance and medical consultations.” (NS1)

“All of that is supported by SOS doctors to meet with specialist doctors in Jakarta; basically everything is facilitated by the company.” (NS2)

“The company monitors it with a clear process, like with therapy. I know how to help my leg recover faster, what exercises I should do every day.” (NS2)

Critically, participants did not perceive medical support merely as an operational requirement. Rather, they interpreted it as a reflection of organizational concern for their welfare as individuals, a distinction that carried significant psychological meaning:

“When it comes to employee utilization, they might have taken appropriate action rather than having employees sent home or laid off; they're more concerned about their employees.” (NS6)

### **Structural-Administrative Support**

The structural-administrative dimension represents the formal governance layer through which organizational support is systematized and institutionally sustained. Unlike the psychosocial and medical-functional dimensions, which are experienced at the individual level, structural-administrative support operates at the organizational level through continuous HR monitoring, active management involvement, and formal program oversight. Participants described this institutional presence as follows:

“During recovery, all employees are automatically monitored continuously by HR and also by the authorized doctors here.” (NS2)

“Management involvement is very large there because they accepted me to work in a place that should have great responsibility.” (NS5)

These accounts confirm that support at PT Kaltim Prima Coal is not contingent upon personal relationships or managerial discretion alone but is embedded within formal organizational governance structures, lending it institutional continuity and legitimacy. The direct benefits of this integrated three-dimensional support framework were widely affirmed by participants. Several drew

a particularly meaningful contrast between the WRP and conventional sick leave arrangements, highlighting the restorative superiority of structured reintegration:

“This form of support helps because I don’t feel excessive pressure from my worries due to my health problems that could hinder my performance.” (NS1)

“Before this program was implemented, we were given long sick leave; just staying at home doing nothing made my condition worse, meaning physically we just do nothing.” (NS1)

“It actually helps me because if someone is injured, the recovery should be in a measurable way; they have standards, whether I have been declared fit to start working with limitations or something like that.” (NS2)

“Organizational support like this really helps me to recover faster.” (NS2)

“Therapy, doctor consultations, and the medicines given are really very helpful; now I have recovered so my work performance is back to normal and my flexibility and mobility can also increase.” (NS2)

“It is very supportive because the work environment, even though I am in the office, is actually different from my previous position as an operator.” (NS5)

“This organization’s support is very supportive for me and it is clearly very comfortable because my health has become much more stable.” (NS5)

**Table 2** Forms of Organizational Support and Supporting Evidence

<b>Support Dimension</b>	<b>Type of Support Provided</b>	<b>Participant Evidence</b>
Psychosocial Support	Appreciation of Employee Contributions	NS1, NS4, NS5, NS6
Psychosocial Support	Minimal Psychological Pressure	NS5
Medical-Functional Support	Medical Services and Clinical Consultation	NS1, NS2, NS4, NS6
Structural-Administrative Support	Continuous HR Supervision and Monitoring	NS2, NS5

**Source:** Author’s Database (2026)

### **The Influence of Workplace Social Support on Employee Adaptation in the Post-Recovery Phase**

While organizational support provides the structural foundation for post-recovery reintegration, workplace social support constitutes the relational fabric through which that reintegration is experienced on a day-to-day basis. At PT Kaltim

Prima Coal, social support emerged from two primary sources, namely supervisors and colleagues, each contributing distinct but complementary forms of assistance that collectively facilitate employee adaptation. The overall tone of the relational work environment was summarized by one participant as follows:

“For me, I don't have any problems, because my superiors and coworkers are all supportive.” (NS2)

This perception of a broadly supportive relational environment established the psychological foundation upon which more specific adaptive processes were built, as elaborated in the following subsections.

### **Supervisory Support**

Supervisors emerged as the primary formal source of guidance, emotional validation, and practical direction during the post-recovery adaptation process. Their role extended beyond task instruction to encompass empathetic engagement and responsive accommodation of individual health circumstances. Participants described how supervisory accessibility and willingness to provide direction significantly reduced the uncertainty associated with occupational reintegration:

“When I was placed by my superiors at work, they always supported me; if I didn't know something, I asked and they answered appropriately, and then they taught me here so that it added to my experience for working in the future, and I felt really appreciated as an employee and their coworker.” (NS5)

“When I first started working there, if I encountered obstacles, I would consult with my direct superior, such as what to do, and I also coordinated with other friends who were more senior.” (NS1)

“Whatever problem I encounter, I always consult. They provide solutions, or sometimes they give clues that I can do myself.” (NS1)

Supervisory flexibility in accommodating treatment schedules and health-related needs further reinforced participants' sense of being genuinely supported rather than merely accommodated within their new roles:

“My superior is really concerned with my condition; for example, there was a time when I went for treatment, he immediately allowed it.” (NS5)

The cumulative psychological effect of consistent supervisory engagement on motivation and readiness to perform was articulated as follows:

“I was always given guidance every day; I asked about anything I didn't know and it was explained well; my superior really supports my work, so I don't feel burdened.” (NS5)

“My superiors really care; as an employee in a new position, especially during this recovery period, I feel ready to return to work without hesitation.” (NS1)

### **Peer Support**

While supervisors provided formal direction, colleagues served as an equally vital source of informal and context-specific knowledge that addressed the practical complexities of daily reintegration. Participants noted that peer support frequently filled the gaps left by formal supervisory guidance, particularly in navigating situational challenges that standard procedures did not fully anticipate:

“Sometimes our superiors also have their own jobs, so when we need instructions, they give standard guidance; but the reality is a little different from the problems we encounter in our work, so I consult with more senior friends about how best to deal with conditions like this.” (NS1)

The welcoming disposition of colleagues and their consistent willingness to provide ongoing guidance were identified as key facilitators of smooth and confidence-building reintegration:

“I was placed here with friends who are welcoming, willing to teach me if I don't understand; every time I ask, I always get good input, then directed, so all the work I do is running smoothly.” (NS4)

“If that is the case, maybe I ask more questions to my colleagues so I can adapt quickly because I learn a lot from my more senior friends.” (NS4)

“Yes, actually I learn more from friends.” (NS6)

Senior colleagues, in particular, functioned as informal mentors whose accumulated practical knowledge proved indispensable in helping returning employees navigate complex and unfamiliar work situations that formal guidance alone could not address.

### **Impact on Psychological Well-Being and Work Engagement**

The combined effect of supervisory and peer support extended beyond task facilitation to shape participants' broader psychological well-being and overall engagement with their work. A non-pressuring and accepting environment was identified as a key enabler of both personal growth and professional exploration during the reintegration period:

“From an honest environment, it really helps, and there is no pressure from the environment either.” (NS1)

“The environment influences me in exploring new things; in fact, that is the most influential thing for me.” (NS1)

The quality of interpersonal relationships within the work environment was also described as a source of emotional resilience:

“Because my friends are all welcoming, I have a good circle of people.” (NS4)

“I am helped by my colleagues and also my superiors who can correct mistakes.” (NS6)

The role of workplace social support in alleviating psychological pressure and fostering genuine occupational enjoyment was explicitly and directly acknowledged:

“Because everyone is supportive, it makes me more comfortable; I don't feel too stressed, so I also enjoy working.” (NS2)

The preceding findings provide a detailed empirical account of how organizational and workplace social support are operationalized within PT Kaltim Prima Coal's post-recovery framework. The discussion that follows situates these findings within the existing theoretical and empirical literature, explicitly identifying where the present results support, extend, or add nuance to prior research.

The three-dimensional structure of organizational support identified in this study is broadly consistent with the Perceived Organizational Support theory proposed by Eisenberger et al. (1986), which posits that employees who perceive organizational care demonstrate stronger psychological readiness and occupational commitment. The present study supports this proposition and extends it by demonstrating that POS is not merely an attitudinal perception but a tangible, program-based mechanism operating within a high-risk industrial context. The WRP represents an institutionalized expression of POS that addresses recovery through structured reintegration rather than passive leave arrangements, a distinction that prior theoretical formulations of POS do not explicitly account for. This finding aligns with Bai et al. (2023), who argue that sustained organizational attention to the post-recovery phase constitutes an integral component of strategic human resource management, and extends their argument by documenting the specific and layered programmatic forms this attention assumes in industrial practice. Furthermore, consistent with Karlinda et al. (2022), who suggest that organizational perceptions are formed through employees' interpretive engagement with their cumulative work experiences, the present findings indicate that the consistency and institutional visibility of support measures are as consequential as their substantive content.

The psychosocial dimension of organizational support, characterized by employee recognition and workload adjustment, directly supports the position of Rhoades and Eisenberger (2002), who identify contribution recognition as a primary antecedent of perceived organizational support. The present study corroborates this finding and extends it by demonstrating that recognition during the post-recovery phase carries heightened psychological significance relative to recognition under normal working conditions, given the vulnerability and uncertainty that characterize this transition. Workload adjustments that minimize psychological pressure further support the observations of Lestari and Aprilia (2025) Yan and Praningrum (2025), who associate low psychological distress with improved productivity and employee retention. The medical-functional dimension adds a further layer that existing POS literature does not extensively address. Participants in this study perceived clinical access and specialist referral not as productivity tools but as expressions of genuine organizational concern, a finding that reinforces Kusumawati and Herawati (2022), who characterize medical service provision as a form of protective organizational support. The structural-administrative dimension confirms that the support extended to post-recovery employees at PT Kaltim Prima Coal is institutionally sustained rather than interpersonally contingent, extending the work Darmawan et al. (2023), who identify HR supervision as a mechanism that supports employees both professionally and psychologically through structured guidance, feedback, and sustained institutional attention.

These findings further extend the conclusions of Lubis and Rinawati (2025) and Putra et al. (2025) which demonstrate that supportive work environments and development opportunities significantly enhance employee motivation and performance in general occupational contexts. The present study complements and advances those findings by demonstrating that analogous motivational outcomes emerge specifically within the post-recovery phase, manifested as reduced psychological distress, restored occupational confidence, and improved physical recovery trajectories. Importantly, this study also introduces a dimension that earlier quantitative studies do not capture, namely the subjective and comparative evaluation by employees of structured reintegration against conventional sick leave. Participants consistently described the WRP as qualitatively more restorative than prolonged absence, suggesting that active reintegration programs may deliver superior well-being and productivity outcomes. This finding carries direct and meaningful implications for human resource policy design in high-risk industrial settings.

Regarding workplace social support, the findings confirm that supervisors and colleagues constitute distinct but mutually reinforcing channels of adaptation assistance, a finding that supports the position of Iswanto and Agustina (2016), who emphasize social support as a foundation for interpersonal communication and a healthy organizational climate. The present study extends this argument by

demonstrating that these relational processes operate with particular intensity and consequence during the post-recovery transition, a period that existing social support literature has not examined with sufficient specificity. The absence of such support carries real and demonstrable consequences. Widiastuti et al. (2025) note that inadequate support risks generating feelings of psychological neglect and distress that directly impede recovery, a risk that the present findings suggest is effectively mitigated by the interpersonal environment at PT Kaltim Prima Coal. Social support further functions as a mechanism for rebuilding employee self-confidence, corroborating Nuroh et al. (2025), while the progressive restoration of occupational competence through peer and supervisory engagement in turn sustains work motivation during adaptation. This is consistent with Pratiwi et al. (2025), who characterize motivation as reflecting an individual's direction and persistence in goal attainment, and with Aini and Linando (2024), who identify the work environment as a significant external driver of motivational states, both of which the present findings directly support.

Finally, the findings reinforce Satardien et al. (2019), who associate perceived organizational appreciation with heightened affective commitment, by demonstrating that this appreciation is experienced not only through formal organizational structures but also through the informal relational practices of supervisors and peers. Hanif et al. (2022) further argue that social support enriches organizational commitment through mentoring, emotional validation, and collaborative problem-solving, all of which were documented as characteristic features of the interpersonal environment at PT Kaltim Prima Coal, directly corroborating their position. Taken together, the organizational and social support mechanisms identified in this study reinforce the central proposition of POS theory while simultaneously extending its applicability to a previously underexamined population. In doing so, this study contributes a contextually specific and empirically grounded perspective to the broader literature on occupational health management and human resource strategy, with particular relevance for high-risk industrial environments in emerging economies.

## **CONCLUSION**

The findings of this study demonstrate that organizational support and workplace social support are two critical determinants of successful post-recovery adaptation among employees of PT Kaltim Prima Coal. In the post-recovery phase, employees confront not only residual physical limitations but also psychological pressures related to performance concerns, shifting role expectations, and uncertainty regarding their continued contribution to the organization. Organizational support, as implemented through the Work Rehabilitation Program, addresses these challenges through a coherent framework of psychosocial recognition, workload adjustment, continuous medical services, positional

accommodation, and formal HR supervision. These measures collectively cultivate a sense of security, comfort, and institutional protection that enables employees to reintegrate progressively and sustainably. Workplace social support complements this institutional foundation through the empathetic engagement of supervisors and the cooperative assistance of colleagues, which together reduce occupational stress, rebuild self-confidence, strengthen work motivation, and accelerate the overall reintegration process. The convergence of these two forms of support constitutes a strategically significant approach to sustaining both individual employee well-being and broader organizational productivity.

From a theoretical standpoint, these findings reinforce the proposition that employees who perceive genuine organizational care demonstrate stronger commitment, motivation, and adaptive capacity in the face of occupational challenges. The study further contributes to the human resource management literature by demonstrating that structured reintegration programs, when designed with attention to both psychosocial and administrative dimensions, produce outcomes that surpass those of conventional sick leave arrangements. Future research is encouraged to examine the long-term effects of post-recovery support programs on employee retention, organizational commitment, and productivity across different industrial sectors. Comparative studies involving larger and more diverse samples would also strengthen the generalizability of these findings and provide a broader empirical basis for the development of evidence-based occupational rehabilitation policies.

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