

Related Determinant Factors with Performance of Field in Connection with Coverage K4 Mamberamo Raya Regency Papua Province

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Abstract -

Background. The aspect of health development is the implementation of quality health services, fair and equitable for every human being. The midwife as a health officer in the forefront is expected to increase the coverage of Mother and Child Health (KIA) services.

Goal of research. To determine the determinant factors related to the performance of midwives in relation to K4 coverage.

Method research. Descriptive with quantitative approach that is analytic observation with cross sectional study design, with total of 43 respondents,

Result of research. The result of P. value value $0,009 < \alpha 0,05$ shows that there is a significant correlation between knowledge with midwife performance in relation to K4 coverage P value $0,024 < \alpha 0,05$ indicates that there is a significant correlation between work motivation and midwife performance in relation to K4 coverage. The value of P.value $0,000, < \alpha 0.05$ indicates that there is a significant relationship between incentives and midwife performance in relation to K4 coverage. Value P.value $0.379, > \alpha 0.05$ indicates that there is no significant relationship between the interaction of co-workers with midwife performance in relation to K4 coverage.

The result of chi-square test P. value $0,005 < \alpha 0,05$ indicates that there is a significant correlation between head of Puskesmas leadership style with midwife performance in relation to K4 coverage. Based on the most dominant logistic regression test result according to the order level are: leadership style with value ($p = 0,065.$), Work motivation with value ($p = 0.049$), knowledge with value ($p = 0,033$), and lastly incentive with value ($p = 0.013$) to the four factors have significant relation to midwife performance in relation to K4 coverage in Mamberamo Rayaregency

Keywords: Midwife performance, determinant factor, K4 coverage.

I. INTRODUCTION

The direction of health development is the implementation of quality health services, fair and equitable for every human being. The existence of the Ministry of Health Program of the Republic of Indonesia focusing on improving maternal health and well-being, not only as a reaction to the still high Mortality Rate (MMR) but also

the level of access, integrity and effectiveness of the health sector. Therefore, AKI is used as an indicator of the welfare of a country (MOH RI, 2008). Maternal Mortality Rate (MMR), Neonatal Mortality Rate (AKN), Infant Mortality Rate (IMR), and Underfive Mortality Rate (AKABA) are some indicators of public health status. Today's MMR and IMR in Indonesia are still high compared to other ASEAN countries. According to Indonesia Demographic Health Survey 2007, Maternal Mortality Rate (AKI), 228 per 100,000 live births, Infant Mortality Rate (AKB), 34 per 1,000 births life, Neonatal Mortality Rate (AKN), 19 per 1,000 live births, and Underfive Mortality Rate (AKABA), 44 per 1,000 live births.

According to data from the Indonesian Demographic Health Survey (2012), National Maternal Mortality Rate (AKI), which relates to pregnancy, childbirth and postpartum is 359 per 100,000 live births. AKI in the province of Papua in 2007, 364/100 thousand live births however, 3 years later increased to 573/100 thousand live births. (revealed by Sekertaris Dinas Kesehatan Provinsi Papua, Silwanus Sumule to tabloidjubi.com at Sasana Krida Office of Governor of Papua), Tuesday (8/4). When compared to the National AKI, the AKI in Papua is much higher than the national AKI. Target maternity in Mamberamo Raya District 450, with number of deliveries assisted by health workers (number of live births 118), and number of maternal deaths 6. When compared to the number of live births 118, the AKI in Mamberamo Raya Regency 5 / 100,000 live births. The causes of maternal death are postpartum hemorrhage (HPP), and infection. (routine KIA lap / Puskesmas, working area of DinKes Kab Mamberamo Raya, 2015).

AKI Kabupaten Mamberamo Raya only 5 / 100.000 live birth and MMR got data from 2 puskesmas (4 kampung) from 10 health centers and 59 villages in Mamberamo Raya district, (KIA report Health Department of Mamberamo Raya 2015). It should be aware that there are still many cases of maternal deaths related to pregnancy, childbirth and childbirth in 8 puskesmas and 55

unreported villages, due to the limited number of health workers assigned to the villages. According to the Ministry of Health of the Republic of Indonesia to reduce MMR to 125 per 100,000 live births must be supported by various resources, one of which is human resources, especially midwives in the village (MOH RI, 2008). Acceleration of MMR decrease is done by indicator of achievement of service coverage result through examination pregnancy: first visit (K1) in the 1st trimester of pregnancy, and the fourth visit (K4) in the 3rd trimester of pregnancy prior to childbirth and all deliveries should be assisted by skilled health personnel (MOH RI, 2001).

Indicator Minimum Service Standards Health Sector (SPM-BK) KIA program based on Permenkes Number 741 / MENKES / PER / VII / 2008) Coverage of Pregnant Women Visit (K4): 95%. Coverage of pregnant women visit (K4 coverage) National level 86,52% (Target Renstra KepMenkes 93% year 2013, but not one province reaches the target). Coverage of K4 Papua Province in 2012, 15.5% and 2013, 22.30%, Coverage K4 Kabupaten Mamberamo Raya 0.29% (Profile Dinkes Prov Papua 2012, DG of Dental Nutrition and KIA, Performance Report B12 Year 2013). The coverage of K4 Kabupaten Mamberamo Raya in 2012, 2013, 2014 and 2015 are: 25%, 24%, 23% and 24% (Record of routine KIA report / Puskesmas). The achievement of K4 coverage is very low with a fairly high gap (70%, 71%, 72% and 71%). In Kabupaten Mamberamo Raya the population of 2011/2012 is 21,888, with 46 midwives consisting of Midwife C as many as 5 people, Midwife Diploma 3 (D3) midwifery as many as 39 people and S1, 2 persons. Of the 46 midwives assigned to the district health offices of Mamberamo Raya District are 2 and the duties at the Puskesmas are 41, and the tasks of study are 3 with employment status, 12 midwives are civil servants, and 34 midwives are non civil servants.

From Empirical Experience, midwife performance in Kabupaten Mamberamo Raya is dependent on knowledge, work motivation, incentives, co-workers, leadership style of puskesmas head that causes low K4 coverage. (coverage of KIA program report, Mamberamo Raya District Health Office, 2015). Departing from the background of low achievement of K4 coverage in Kabupaten Mamberamo Raya with a gap that is high enough then the authors are interested to examine the performance of midwives in the District of Mamberamo Raya

II. MATERIALS AND METHODS

A. Research Design

This research is analytical research with quantitative approach that is analytic observation with cross sectional study design. In this type of observational analytic research, researchers try to find the relationship between

variables that is by doing data analysis collected through kusioner. The analysis can be a chi square test to obtain a Prevalence Ratio. It is the latter that is more often calculated in the cross sectional study to identify risk factors.

B. Time and Location Research

1. Place & time of research;

The research was conducted in 10 health centers in the work area of Health Department of Mamberamo Raya Regency; The study was conducted on October 19 s / d 19 november 2015 (approximately 1 month).

C. Materials and Tools

1. Kusioner

D. Population and Sample

1. Population

The population is the entire subject of the study by examining all elements in the research area (Arikunto, 2002). The population in this study were all midwives in the work area of Mamberamo Raya Regency. Number of midwives as many as 43 people.

2. Sample

The sample in this study is the total population with the number of respondents all midwives in Mamberamo Raya Regency amounted to 43 people.

E. Data Collection Technique

Methods of data collection in this study through the kusioner conducted by the researchers themselves. The stages in the data collection procedure are as follows. The researchers gave questionnaires to 43 midwives who served in 10 Puskesmas to be samples. The researcher gives advance explanation about the contents of the questionnaire and research intent before filling the questionnaire.

F. Data Processing, Analysis and Presentation of data

1. Data Processing

Data processing is done through the following stages:

a. Data Editing

b. Coding Data

c. Data entry

Entry data is enter data in variable sheet by using computer program SPSS 16.0

d. Cleaning Data

e. Tabulation

G. Data Analysis Technique

Techniques Data analysis includes:

a. Univariate Analysis

b. Bivariate Analysis

c. Multivariate Analysis

III. RESEARCH RESULT AND DISCUSSION

Based on the results of research that has been done to determine the determinant factors associated with the performance of midwives in relation to K4 coverage in the District of Mamberamo Raya Papua Province. in get the respondents as much as 43 respondents.

1. Respondent's characteristic

Data collection of respondent's characteristic include age, education, years of service, type of kepegawain non PNS and PNS which can be seen in at the following tables:

Table 1. Distribution of frequency of respondents by age in Puskesmas Kabupaten Mamberamo Raya

Age	Number	%
25-32 year	18	41.9%
33-40 year	14	32.6%
41-47 year	11	25.6%
Total	43	100%

Table 1 above shows that the age of respondents is 25-32 years old as much as 18 (41.9%) of respondents, while the age of 33-40 years is 14 (32.6%) respondents and the lowest age is 41-47 years as many as 11, (25.6%) respondents .

Table 2. Distribution of frequency of respondents by education at Puskesmas Kabupaten Mamberamo Raya

Education	Number	%
Midwifery C	5	11.6%
Diploma three (D- III)	38	88.4%
Total	43	100%

Table 2 above shows the highest level of education on graduates D III midwifery as much as 38 (88.4%) of respondents, while education of Bidan C graduates as much as 5 (11.6%). respondents.

Table .3. Distribution of frequency of respondents by working period in Puskesmas Kabupaten Mamberamo Raya

Working period	Number	%
<5 year	30	69, 8%
>5 year	13	30, 2%
Total	43	100 %

Table 3 above shows that the biggest working period is <5 years 30 (69,8%) respondent, and service period is lowest> 5 years counted 13, (30,2%) responder.

Tabel 4. Distribution responden base on PNS status in Puskesmas Kabupaten Mamberamo Raya...

PNS Status	Number	%
PNS	12	27.9%
NoN PNS	31	72.1%
Total	43	100 %

Table 4 above shows that employment status of civil servant respondents as much as 12 (27.9%) and Non PNS 31 (72.1%) respondents.

1. Distribution of Knowledge, Work Motivation, Incentives, Interaction Coworkers and Leadership Style Head of Puskesmas, At Puskesmas Kabupaten Mamberamo Raya

1) Knowledge

Show most of respondents have good knowledge that is equal to 33 (76,7%), and knowledge less good equal to 10 (23,3%).

2) Motivation

Show most of respondents have good motivation that is equal to 34 (79.1%), and motivation less good equal to 9 (20,9%)

3) Incentives

Most of the respondents have good incentives of 28 (865.1%), and incentives are less good at 15 (34.9%)

4) Interaction of Colleagues

Show most of the respondents have good working interaction that is equal to 20 (46,5%) and less good interaction equal to 23 (53,5%).

5) Leadership style Head of Puskesmas

Most of the respondents have good leadership that is equal to 24 (55.8), and poor leadership is 19 (44,2%).

6) Performance

Show most of respondent have good performance that is equal to 26 (60,5%) and performance less equal to 17 (60,5%)

2. Bivariate Analysis

Bivariate analysis is done to find out the picture roughly the relationship between independent variables with dependent variable. This bivariate analysis is also one of the steps to select which variables are included in multivariate analysis. The presence or absence of correlation between midwife performance factor based on independent variable is shown with p value <0,05.

Table 5 Knowledge relationship with midwife performance in relation to K4 coverage in Mamberamo Raya 2015

Variabel	Performance				Total		P.Value
	Less good		Good		N	%	
	N	%	N	%			
Knowledge							
Less	8	18.6%	2	4.7%	10	23.3%	0.009
Good	9	20.9%	24	55.8%	33	76.7%	
Jumlah	17	39.5%	36	60.5%	43	100 %	
<i>P value = 0,009, RP : 2,933 (1,551 - 5,549)</i>							

Table 5 shows that midwives' knowledge is less and their performance is less than 8 people (18.6%), while midwives who have good knowledge and performance are also less 9 (20,9%). However, good midwife knowledge and good performance as many as 24 people (55.8%), while knowledge of midwives is less good and good performance as much as 2 people (4.7%). The value of P.value 0,009 < α 0.05 indicates that there is a significant relationship between knowledge with midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained by the value of RP 2.933 showed that a person whose knowledge has less tendency 2.933 times less performance in comparison with someone who has good knowledge.

Table 6 Relationship of work motivation with midwife performance in relation to K4 coverage in Kabupaten Mamberamo Raya, 2015.

Variabel	Performance				Total		P.Value
	Less		Good		N	%	
	N	%	N	%			
Motivation							
Less	7	16.3%	2	4.7%	9	20,9%	0.024
Good	10	23.3%	24	55.8%	34	34,0%	
Number	17	39.5%	26	60.5%	43	100 %	
<i>P value = 0,024 RP : 2,644 (1,413 – 4,950)</i>							

Table 6 shows that midwives' motivation is less and their performance is less than 7 (16,3%), while midwives are well motivated and their performance is less than 10 people (23,3%). However, good work motivation and good performance as many as 24 people (55.8%), while the work motivation is less and good performance as much as 2 people (4.7%). P. value of 0,024 < α 0,05 shows that there is a significant correlation between work motivation and midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained RP 2.644 indicates that a person whose work motivation has less tendency 2,644 times less performance in comparison with someone who has good working motivation.

Table 7 Incentive relationship with midwife performance in relation to K4 coverage in Kabupaten Mamberamo Raya, 2015.

Variabel	Performance				Total		P.Value
	Less		Good		N	%	
	N	%	N	%			
Incentive							
Less	12	27.9%	3	7.0%	15	34.9%	0.000
Good	5	11.6%	23	53.5%	28	65.1%	
Number	17	39.5%	26	60.5%	43	100 %	
<i>P value ; 0,000 RP : 4,480 (1,946 – 10,313)</i>							

Table 7 shows that midwife incentives are poor and their performance is not good as many as 12 people (27.9%), while midwives with good incentives and poor performance there are 5 people (11.6%). However, good midwife incentives and good performance as many as 23 people (60.5%), while midwife incentives less good and good performance as much as 3 people (7.0%). The value of P.value 0,000, $<\alpha$ 0.05 indicates that there is a significant relationship between incentives and midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained RP value of 4.480 indicates that a person gets a less incentive has a tendency 4.480 times less performance, in comparison with someone who get a good incentive (enough).

Table 8 Relationship relationship of co-workers with midwife performance in relation to K4 coverage in Mamberamo Raya District, 2015.

Variabel	Performance				Total		P.Value
	Less		Good		N	%	
	N	%	N	%			
Interaction							
Less	11	25,6%	12	27,9%	23	53,5%	0,379
Good	6	14,0%	14	32,6%	20	46,5%	
Number	17	39,5%	26	60,5%	43	100 %	
P value ; 0,379 RP : 0,745 (0,459 – 1,211)							

Table 8 shows that the interaction of midwife colleagues is not good and the performance is also not good as many as 11 people (25.6%), while midwives who have good colleagues interaction and performance is also not good there are 6 people (14.0%). However, the interaction of the co-worker of the midwife was good and the performance was good as many as 14 people (32.6%), while the interaction of the co-worker of the midwife was not good and the performance was good as 12 people (27,9%). Value P.value 0.379, $>\alpha$ 0.05 indicates that there is no significant relationship between the interaction of co-workers with midwife performance in relation to K4 coverage. The results of the prevalence ratio test in obtaining the value of RP 0.745 indicates that a person with good co-worker interaction tendency 0.745 times good performance, in comparison with somebody with nteraksi co-worker is less

Table 9 Relationship The leadership style of Puskesmas with midwife performance in relation to K4 coverage in Kabupaten Mamberamo Raya, 2015.

Variabel	Performance				Total		P.Value
	Less		Good		N	%	
	N	%	N	%			
Leadership style							
Less	12	27,9%	7	16,3%	19	44,2%	0,005
Good	5	11,6%	19	44,2%	24	55,8%	
Number	17	39,5%	26	60,5%	43	100 %	

Table 9 shows that midwife leadership style is not good and performance is not good as many as 12 people (27,9%), while midwives have good motivation and its performance also less there are 5 people (11,6%). However, the leadership style of the Puskesmas head is good and the performance is good as many as 19 people (44,2%), while the leadership style of the midwife is not good and the performance is good as much as 7 people

(16,3%). The result of chi-square test Value P.value 0,005 $<\alpha$ 0.05 indicates that there is a significant relationship between leadership style of Puskesmas head and midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained by the value of RP 3,032, this shows that a person with a leadership style is less well tend to 3.032 times less performance, in comparison with someone who has a good leadership style.

IV. DISCUSSION

1. Knowledge relationship with midwife performance in relation to K4 coverage.

The result of this research is that the value of P.value 0,009 $< \alpha$ 0,05 indicates that there is a significant correlation between knowledge with midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained by the value of RP 2.933 indicates that a person whose knowledge has less tendency 2.933 times less performance in comparison with someone who has good knowledge.

2. Relationship Motivation work with midwife performance in relation to K4 coverage

The result showed that there was significant correlation between work motivation and midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained value Prevalence Ratio 2.644 indicates that a person whose work motivation has less tendency 2,644 times less performance in comparison with someone who has good working motivation.

3. Relationship Incentives with midwife performance in relation to coverage

The results of the study found that midwives incentives were less and their performance was less than 12 people (27.9%), while midwives had good incentives and there were also 5 people (11.6%). However, midwife incentives of 4,480 indicate that a person gets a less incentive 4.480 times less performance, compared with someone who has good incentives (enough).

4. The interaction relationship of co-workers to midwife's performance in relation to K4 coverage.

The result of this research is P.value 0,379, $> \alpha$ 0,05 indicates that there is no significant relation between Coworker interaction with midwife performance in relation to K4 coverage. The results of the prevalence ratio test in obtaining the value of RP 0.745 indicates that a person with good co-worker interaction tendency 0.745 times good performance, in comparison with somebody with nteraksi co-worker is less.

5. Relationship The leadership style of Puskesmas with midwife performance in relation to K4 coverage.

The result of chi-square test P. value 0,005 $< \alpha$ 0,05 indicates that there is a significant correlation between head of Puskesmas leadership style with midwife performance in relation to K4 coverage. The results of the prevalence ratio test obtained by the value of RP 3.032, it shows that a person with a leadership style is less well tend to 3.032 times less performance, in

comparison with someone who has a good leadership style.

V. CONCLUSIONS

1. Respondent's characteristic

Majority of midwives Puskesmas aged between 25 to 47 years, Education Midwife C and DIII Midwifery, with employment status there are non civil servants and civil servants with working period < 5 years and > 5 years.

2. Results of research:

a. There is a significant relationship between knowledge and midwife performance in relation to K4 coverage.

b. There is a significant relationship between work motivation and midwife performance in relation to K4 coverage.

c. There is a significant relationship between incentives and midwife performance in relation to K4 coverage.

d. There is no significant relationship between the interaction of co-workers and the performance of their midwives with K4 coverage.

e. There is a significant relationship between leadership and midwife performance with K4 coverage.

f. There is a significant correlation between dominant factors to midwife performance in relation to K4 coverage is knowledge, work motivation, incentive, and leadership style of Puskesmas.

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