

Factors Affecting the Performance of Management Officers of Maternal and Child Health Programs at the Jayawijaya Community Health Center

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ABSTRACT

The achievement of the Minimum Service Standard target in the Maternal and Child Health (MCH) program at the Jayawijaya District Health Center is still low. The purpose of this study was to analyze the factors that influence the performance of the officers managing the Maternal and Child Health Program at the Jayawijaya District Health Center. This research method is qualitative research with a case study approach, with 12 informants. The study was conducted in October 2020. The results showed that the provision of training related to MCH was still lacking so that the ability and skills of MCH program officers were mostly still low, the allocation of funds by the government was right on target, the supervision of the MCH program had been carried out regularly and periodically and program planning in the form of an annual Work Plan for Regional Apparatus Units (SKPD) has not been prepared. It is recommended to the head of the Jayawijaya district health office to hold training to increase the capacity and skills of health workers, make budget planning in accordance with existing technical guidelines, provide advocacy to the regional government budget team, form an integrated supervision team, form a MCH program planning team, as well as planning the MCH program budget.

Keywords: Performance, maternal and child health programs, health offices.

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INTRODUCTION

Indonesia is one of the countries in the Association of South East Asian Nation (ASEAN) which has a high maternal mortality rate (MMR). According to the 2017 Indonesian Demographic and Health Survey (IDHS) data, the MMR in Indonesia reached 305 / 100,000 live births. Not only is the MMR high, but the Neonatal Mortality Rate (IMR) in Indonesia is still very high, namely as much as 185 / day with the IMR of 15/1000 live births). Three-quarters of neonatal deaths occur in the first week, and 40% die within the first 24 hours (Pusdatin, 2019).

The Indonesian Government's efforts in this case the Ministry of Health in order to reduce the maternal mortality rate (MMR) and infant mortality rate (IMR) as well as improving the quality of maternal and child health services are seen in programs, one of which is through the Safe Motherhood Movement program, the Planning Program. Delivery and Prevention of Complications (P4K). Initially, this program focused its activities on increasing the capacity of midwives. However, the program target then shifted to improving and improving the performance of midwives, strengthening the quality of health services, especially for maternal and child health. The quality of health services provided by midwives in the basic health service unit is inseparable from the factors of salary, job security, working conditions, quality of technical supervision, quality of interpersonal relationships which can affect the performance of the midwife outside of the midwife and factors of recognition, responsibility, progress, the job. itself, the possibilities for career development can affect the performance of the midwife. These two factors are sufficient to contribute to determining the level of quality of maternal and child health services (Kemenkes, 2012).

The low coverage of the Maternal and Child Health (MCH) program is influenced by the results of each of the 29 Regencies / Cities in Papua Province, including Jayawijaya District. For the achievement of the MCH program in Jayawijaya Regency based on the SPM indicator, it shows that all the coverage of the MCH program is still below the standard for achieving the SPM target set at 100%, where the achievement of the percentage of K4 (28.5%), delivery is assisted by health workers (36.8 %), newborns (42.2%), under-five care (38%), children of primary education who received health screening (18.78%). Meanwhile, the handling of malnourished toddlers (0.14%) has reached the target of 0.04%. The low level of achievement in the MCH program in Jayawijaya Regency is inseparable from the role of the officers or the performance of the employees. Performance in an organization is carried out by all existing human resources, both leaders and subordinates. One important issue in the implementation of the health system in the regions is health financing. The function of health financing is one of the determinants of health system performance (Carrin et al., 2005; Sun et al., 2017). The health financing function is not only related to the process of mobilizing funds but also by distributing or allocating them in the operation of the health system (Franco et al., 2002; Kirigia et al., 2006; Hanson et al., 2019). The function of financing is an important control tool for policy makers in implementing the health system in the regions (Riyarto & Dodo, 2012).

The aspect of health services is one of the causes of the high maternal mortality rate because antenatal care and delivery assistance services by professionals are not able to be reached by all levels of society. This situation causes many mothers not to have pregnancy checks and many pregnant women do not receive standard antenatal care

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services. In addition, geographic conditions, so that the placement of midwives in health centers and villages is expected to be able to contribute to reducing maternal and infant mortality and play a role in increasing the perception of the role of the community in a healthy and clean lifestyle. The activities of midwives in villages generally include activities related to MCH services including family planning, management of the MCH program and fostering community participation in the field of maternal and child health (Ministry of Health, 2014). This study aims to analyze the factors that influence the performance of the officers managing the Maternal and Child Health (MCH) program at the Jayawijaya district health centers.

METHODS

This type of research is qualitative research with a case study approach. The number of informants in this study were 12 people who were taken based on the criteria of the researcher using purposive sampling. This research was conducted in 10 Pusesmas in the work area of the Jayawijaya District Health Office which was held in October 2020.

RESULTS AND DISCUSSION

Abilities and Skills

Ability and skills are two things that work together in doing all the work a person has to complete what is their job and responsibility, in this study one of the variables is the ability of a health worker to carry out the Maternal and Anal Health program which is very important depending on several factors such as the skills possessed and the form and appearance of work in a professionalism that is owned by each of these health workers. From the results of direct interviews with informants at the research site based on the abilities and skills of health workers, the results of interviews were obtained with statements from several informants, including:

"Some of the midwives here are not particularly skilled in service, yes, only one or two can be good at serving" (LS, 40 years)

"... Here (the Jayawijaya District Health Office) has carried out the APN (Normal Childbirth Care) training program twice. Indeed, not all midwives can participate in the training ... we want to plan for the future..." (44, years)

From the results of interviews conducted with several informants, researchers can see that the abilities of some of the MCH program implementing officers (midwives) in the work area of Jayawijaya Regency are still low.

Budget Availability

The policy direction for the Mid-Term Development Plan (RPJM) in the Health Sector 2020-2024 is based on improving health services towards universal health coverage, especially strengthening basic health services by encouraging promotive and preventive efforts supported by innovation and utilization of technology in the health sector. From the secondary data obtained during the research, it can be seen that the budget allocation has been divided into the budgeting of each program. This was then added to the results of interviews with several informants who stated:

"For the availability of our funds here, sir, there is already a post, usually taken from the funds that have been prepared from the Health Office and the

BOK funds, maybe the allocation to MCH is there" (YM, 34 years)

"... umm, if it's at the Community Health Center(puskesmas), sir, the problem of funding for MCH is directly from the center of the Jayawijaya District Health Office" (ST, 38 years)

From the results of in-depth interviews with informants, it can be obtained information that the availability of funds at the Jayawijaya District Health Office has been right on target for the MCH program allocation but there are several stages of late allocation due to factors and demographic conditions in the work area so that access tends to be late.

Supervision

Supervision is direct and periodic observation by superiors of the work carried out by subordinates so that if a problem is found, direct instructions or assistance are given to solve it. From the results of interviews with several informants regarding supervision, it can be seen below:

"We always go down to supervise the puskesmas because it is our job to do some kind of monitoring sir" (WW, 53 yrs)

"Yes, sir, the supervision is routine, sir, especially the head of the district always monitors via cellphone communication for the schedule of supervision, someone has to come down here, sir, every two or three months, sir" (PS, 33 yrs)

From the results of interviews with informants, some of whom are MCH program holders at the Jayawijaya Health Office and the Community Health Center(puskesmas) under study, it can be seen that supervision runs effectively and smoothly quarterly according to the goals and objectives of planning the MCH program at the Jayawijaya Health Office.

Program Planning

As we know that in a program everything will run according to its objectives if it has a good plan and is in accordance with the allocations, including the MCH program at the Health Office and Community Health Center (puskesmas) levels. In this study, another part that is studied is how a plan goes well through the MCH program, and whether it is right on the main goals and objectives of the program, and this can be seen from the results of in-depth interviews with informants selected as samples in the study these are among others:

"We do prioritize planning first in determining programs both at the agency and at the puskesmas, emmm usually there are also in Resnra Pak" (AP, 44 years old)

"... we are only guided by the preparation of annual targets that have been determined by the department ... our job is to carry out routine activities at MCH and make monthly reports to be sent to the office ... we have never been asked to plan a MCH program" (HM, 34yrs)

From the results of the interviews with two parts, namely the holder of the MCH program at the Jayawijaya Health office and the MCH program holder at the Puskesmas which is the location of the study, it can be seen that almost everything is in accordance with the MCH program planning which is compiled at the Health Office level then down to the Puskesmas area, but some are also puskesmas have not been able to implement and

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implement the planning level and only refers to the Health Office.

In the Maternal and Child Health (MCH) program in the Keshetakan and Puskesmas offices, almost all of the people in charge and program managers are midwife health workers, as in this study 10 puskesmas which became indormans were midwife health workers. Midwives are at the forefront of implementing the MCH program at the basic level of health services (puskesmas). The community has the right to get good health services, especially in the scope of maternal and child health. The abilities and skills in this study focus on the ability or ability of an individual to master a skill and are used to carry out a variety of tasks in a job where in this study, this research looks at the skills of these health workers in managing the MCH program at the Health Office level to the existing Puskesmas level. In the Jayawijaya Regency area, the ability and skills to provide direct services to pregnant women, child patients and others are things that can be seen from the officers when providing services at the puskesmas.

From the results of interviews with several informants at the health center, it is seen that not all health workers are capable and competent directly in providing services, in other informants it can be seen that their skills and expertise in terms of responsiveness to MCH patients, this of course leads to issues that must be considered regarding quality Human Resources for Health personnel, improving skills through training and other education according to the field of Health personnel. The training provided refers to the development of work skills that can be used immediately so that it will have a positive effect on the performance of the employees concerned (Notoatmodjo, 2003).

The government and the private sector have an obligation to prepare and provide health human resources who are competent & obedient to the standards and readiness of primary and referral health facilities that meet standards. Midwives as the foremost health personnel for maternal and child health must understand the concept and implement these interventions in carrying out daily tasks and practices. Midwives are expected to have the ability and willingness to facilitate families and communities to understand, support and implement the messages contained in the MCH and reproductive health books in collaboration with health cadres, community leaders, traditional birth attendants, and related figures using the principle of partnership and community empowerment in accordance with the authority and scope of practice of the midwife and furthermore in terms of other skills Midwives are expected to have the ability and willingness to communicate effectively with women, families and communities, especially when providing health services. Midwives also ensure their understanding of maternal and child health services based on the continuum of care to improve survival and quality of life.

The results of other research by Aditya (2018) state that a performance measurement will be more visible in a person's abilities and skills so that they can be assessed and seen co-comprehensively and thoroughly from their performance. The same research conducted by Asikin (2012) suggests that the impact of the low quality of midwives at the Samata Health Center and the Bontolempangan Community Health Center has greatly resulted in the MCH program not running optimally due to the lack of training attended by midwives as MCH officers. Then research by Aryanti (2010) states that the

results of observations made when midwives performed antenatal services obtained an overall average of 65.85%, still below the standard of 75%, this is because there is no compliance with antenatal service standards, there are the sections that have not been implemented include counseling, hip measurements, and patellar reflexes.

The availability of funds and budgets in public sector organizations is an important activity because it is related to the process of determining the allocation of funds for each program or activity. Funding and the availability of funds in Jayawijaya Regency In general, it has been on target, however, some health centers are constrained in terms of access and demographic conditions which require the preparation of separate funds for other needs or other matters. The availability of funds is based on the district APBD and the allocation is right for the previously realized health care and puskesmas programs. It takes a large allocation of funds to finance health programs. The amount of the allocation of costs for health is strongly influenced by the pattern of existing political, economic and regulatory policies.

The availability of BOK funds at the puskesmas greatly assisted officers in carrying out promotional and preventive programs where previously the puskesmas' operational funds were very limited. The scope of services can be wider because of the operational funds that support the puskesmas program. Sufficient funds to finance the MCH program will be able to improve the performance of MCH officers. The results of Hani's (2012) research in Gowa Regency stated that BOK funds were proven to improve the performance of puskesmas. From the research results, it is clear that the availability of these funds will greatly help increase the coverage of the MCH program. In the budgeting process, the MCH program should be included as one of the priority programs, not as an additional / supporting program. Therefore, the budget sources in the APBD can be optimally utilized in carrying out the MCH program. Then the late disbursement process was also very disruptive to the smooth operation of the MCH program because the activities were routine and needed at any time in urgent conditions.

From the results of interviews and document review, it can be concluded that the availability of funds for Maternal and Child Health (MCH) activities in Jayawijaya Regency greatly affects the performance of health workers at lower levels in providing optimal health services to mothers and children. In addition, the process of delays in disbursing funds to puskesmas also affected the implementation of the MCH program because the program should have been running from the beginning of the year given the availability of funds. A program will run well and in accordance with established operational standards if there are reciprocal activities carried out in the process, one of which is that in the MCH program, program supervision is carried out so that program success can be seen and known based on the performance of the manager in it, namely good health workers in existing health offices and puskesmas.

From the results of interviews with informants from the Puskesmas, information was obtained that the supervision was running according to the schedule made by the Health Office, and going directly to the Puskesmas to conduct a direct review in the field, both when there were puskesmas activities or not being carried out, for example when this research was taking place, program supervision was carried out by the Health Office, but due

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to Pandemic conditions or the Covid 19 outbreak at the time of the research, it limited activities. According to Drucker (1959) planning is a continuous work process that includes decision-making that is essential and important, and which will be implemented systematically, making predictions using all existing knowledge about the future, organizing systematically all the efforts seen it is necessary to carry out all the decisions that have been determined (Tennent, 2020).

The Jayawijaya Health Office in managing the MCH program carried out stages with program planning up to the Community Health Center (Puskesmas) level by involving MCH management staff at the puskesmas, from document review as the basis for secondary data in this study, there were arsib and administration of MCH program activities with prior planning, besides also socialize in advance the conditions and conditions of budgeting in the management of the MCH program. This is of course. One of the planning systems is planning with a participatory approach implemented by involving all parties with an interest in development. Their involvement is to get aspirations and can also create a sense of belonging to the running of the program.

CONCLUSION

Based on the results of this study, the analysis of the performance of the MCH program manager at the Jayawijaya District Health Office can be concluded that some of the MCH program officers at the Jayawijaya District Health Center have low abilities and skills related to minimum service standards (SPM) and a lack of health personnel who attend training. The allocation of funds by the Jayawijaya district government through the district APBD has focused on priority programs such as the MCH program so that the use of funds is right on target allocation to puskesmas in the area of the health service. Supervision of the MCH program is carried out regularly and periodically, but there is no formation of an integrated supervision team consisting of the leadership (Head of the MCH Section), coordinating midwives, program planners and professional organizations of the Indonesian Midwives Association (IBI) only on the Monev schedule related to visits to puskesmas and program planning in the form of an annual SKPD work plan has not been prepared so that it is only guided by the preparation of annual program targets based on the minimum service standards set by the Ministry of Health.

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