



The Role of Motivation to Strengthen Posyandu Cadres Performance

Muh. Sirojuddin Amin

Islamic University of Malang, Mayjen Haryono Street 193 Malang 65144, East Java, Indonesia
aminsirojuddin@unisma.ac.id

Abstract. This study aims to analyze the effects of motivation factors on posyandu cadres' performance. The performance indicator of this study is service implementation to the citizens in the Pagelaran district. The data that is used in this study was collected by questionnaire to all members of posyandu in Pagelaran district, 125 cadres. Census method used in this study (all of the population used to sample). Findings in this study, although the cadres that categorized as volunteerism, show that motivation factor has significant effects on posyandu cadres' performance in Pagelaran district.

Keywords: Performance, Motivation, Posyandu Cadres, Volunteerism

1 Introduction

Health in mothers and children is a problem that often has a domino effect. Mothers have an important role in child development. On the other hand, married couples sometimes still lack information about the health of mothers and children. Whether it's health before pregnancy, during pregnancy, and after childbirth and breastfeeding. The size of Indonesia's territory and a large number of people are obstacles to the equitable distribution of information. The government has formed service centers that serve the needs of mothers and children, especially in quite remote access to healthcare areas. The service center is known as the Integrated Service Post (POSYANDU). The presence of posyandu cadres is very helpful for healthcare personnel in maximizing the programs that have been prepared by the government.

Posyandu cadres are community members who are willing, able and have the time to organize Posyandu activities voluntarily [4]. Posyandu Cadres can be categorized as volunteerism because volunteerism is. The characteristics of volunteerism are: (a) always look for opportunities to help, (b) the commitment is given over a relatively long time, (c) it takes time, effort, money, and so on, (d) they don't know the person they are helping, and (e) their behavior what volunteers do is not mandatory. Based on this, cadres are usually not given a salary like employees. The cadres will only be given money for posyandu operations. This is one of the reasons the cadre's performance is less than optimal. On the other hand, the program must run well. Performance measurement for cadres will be based on the achievement of the programs being implemented. According to [7], performance is a measure of the quality and quantity

© The Author(s) 2023

J. Mistar et al. (eds.), *Proceedings of the 2nd International Conference on Multidisciplinary Sciences for Humanity in Society 5.0 Era (ICOMSH 2022)*, Advances in Social Science, Education and Humanities Research 811, https://doi.org/10.2991/978-2-38476-204-0_18

of human resources in carrying out their duties in accordance with the responsibilities assigned per unit time period [6].

Achieving a good level of performance requires support from all parties. Cadres have an important role in achieving the programs that have been prepared. On the other hand, the performance of cadres sometimes fluctuates. It requires encouragement to create a good performance. The driving factors are ability factors and motivational factors [7]. Motivation is encouragement from within and outside oneself to do something that can be seen from the dimensions of internal and external motivation [11].

Based on this description, the research problem in this study is to analyze the influence of factor motivation on posyandu cadres' performance using the SEM with PLS method. This study aims to examine the effect of motivation on posyandu cadres' performance. The results of this study provide an overview of the situation that occurs in the posyandu and can be a reference to improve performance in certain sections. In addition, this research is expected to find out the low motivation factor, so it needs to be repaired and improved.

2 Body of paper

2.1 Introduction

Motivation is defined as the desire to do something and the ability to act to satisfy individual needs [9]. Generally, motivation can appear from the intrinsic and extrinsic of the individual. Intrinsic motivation comes from the desire/encouragement within the individual to take an action. While extrinsic motivation comes from the encouragement of factors outside the individual that influence the actions taken [8]. The motivation of cadres in this study was assessed using the Level of Performance Motivation Among the Community Health Workers. The conceptual framework for this assessment consists of two main elements, namely individual and community assessment. At the individual level, the assessment includes social responsibility, self-worth, self-satisfaction, motivational drive, autonomy, and respect. Meanwhile, at the community level, it consists of the community environment and the health service system. Assessment of the health service system includes responsibilities, workload, incentives, infrastructure support, work skills, training, supervision, and teamwork [3].

Performance is a degree of accomplishment of the tasks that make up an employee's job [2]. The performance is the result of work in quality and quantity achieved by an employee in carrying out his duties in accordance with the responsibilities given to him [6]. The accomplishment of the posyandu cadres can be approached by using performance indicators. Performance appraisal criteria consist of quality of work, the quantity of work, time used, mandated position, attendance, and safety while carrying out work [1]. Based on [6], there are two factors that influence performance, both the ability factor and the motivation factor.

Based on this description, the hypothesis of this study:

H1: Two Levels of Motivation such as the Health System Level and Individual Level have a positive effect on posyandu cadres' performance, which is the quality of work.

H2: Two Levels of Motivation such as the Health System Level and Individual Level have a positive effect on posyandu cadres' performance, which is the quantity of work.

H3: Two Levels of Motivation such as the Health System Level and Individual Level have a positive effect on posyandu cadres' performance, which is time utilization.

H4: Two Levels of Motivation such as the Health System Level and Individual Level have a positive effect on posyandu cadres' performance, which is cooperation.

H5: Two Levels of Motivation such as the Health System Level and Individual Level have a positive effect on posyandu cadres' performance, which is attendance rate.

3 Methods

The method used in this study is quantitative. This research was conducted on the Posyandu cadres of the Pagelaran district. The data collection method used primary data, using a questionnaire that was distributed to all Poyandu cadres of the Pagelaran district. The Likert scale was used in the questionnaire with an assessment of 1-5. Furthermore, the data obtained were processed and analyzed descriptively and inferentially.

4 Result

The results of this study consisted of 125 respondents. All respondents are posyandu cadres of Pagelaran district. Characteristics of respondents consisting of age, education, and kind of work of poyandu cadres are shown in table 1.

Table 1. Sample Characteristics and Percentage

Characteristics	N	Percentage (%)
Age		
22-27 years old	14	11,2%
28-33 years old	23	18,4%
34-39 years old	23	18,4%
40-45 years old	23	18,4%
46-51 years old	25	20%
52-57 years old	11	8,8%
58-63 years old	4	3,2%
> 64 years old	2	1,6%
Education		
Elementary School	25	20%
Junior High School	48	38,4%
Senior High School	44	35,2%
Bachelor Degree	8	6,4%
Kind of Work Housewife		
Private	88	70,4%
Farmer	24	19,2%
Teacher	6	4,8%
Nurse	6	4,8%
		0,8

(source: primary data)

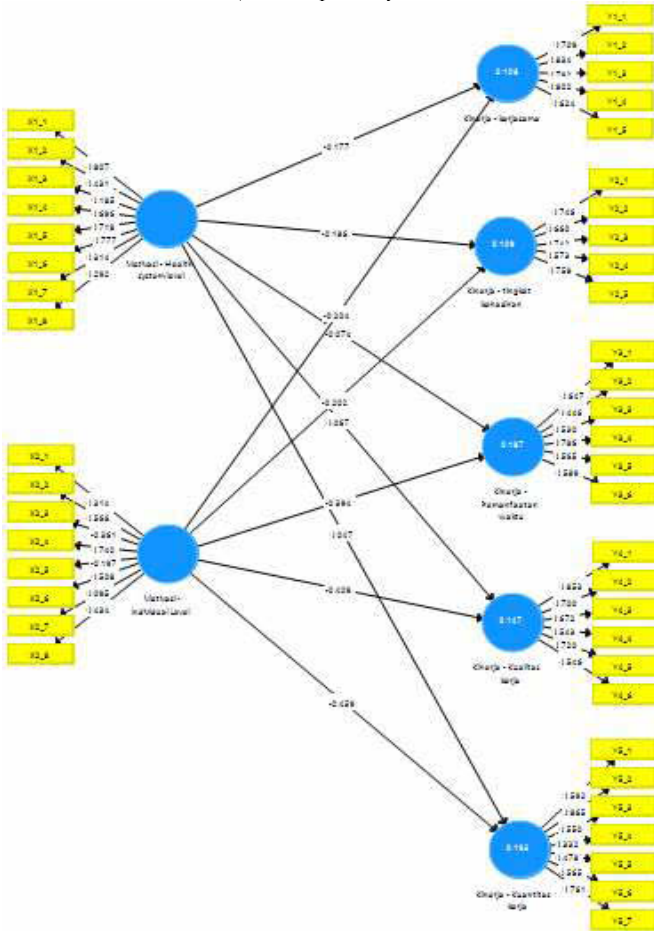


Fig. 1. Model 1 SEM PLS Posyandu Cadres Performance

Based on the loading factor, it is said to be valid if the loading factor value is more than 0.5, so some of the indicators above need to be removed, X1_2, X1_3, X1_4, X1_7, X1_8, X2_1, X2_2, X2_3, X2_5, X2_6, X2_7, X2_8, Y1_5, Y2_2, Y2_4, Y3_1, Y3_2, Y3_3, Y3_5, Y3_6, Y4_3, Y4_4, Y4_5, Y5_1, Y5_3, Y5_4, Y5_5, and Y5_6. SEM-PLS remodeling in Figure 1 becomes as follows.

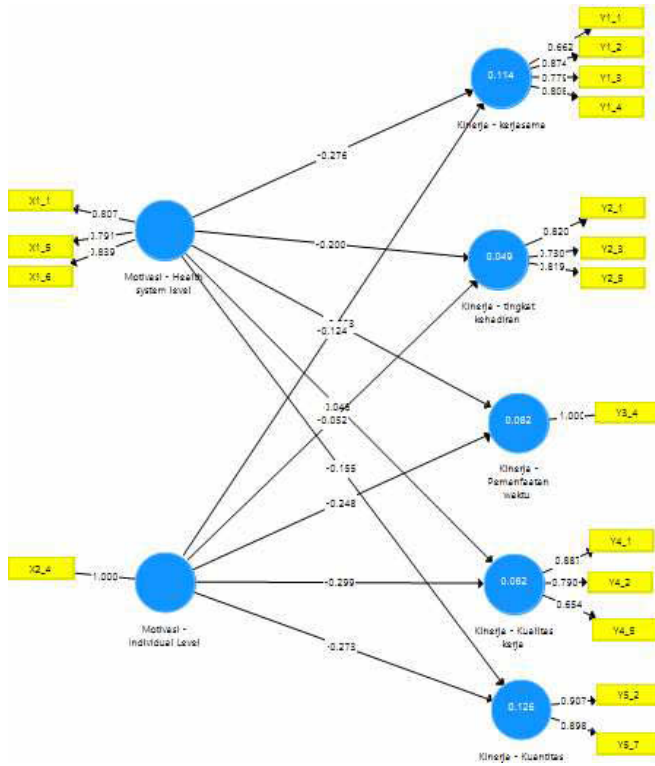


Fig. 2. Model 2 SEM PLS Posyandu Cadres Performance

Figure 2 is model 2 of SEM-PLS after several invalid indicators were removed. In the Y1_1 and Y4_5 indicators, there are values that still do not meet the criteria, so the indicator needs to be removed as well. Based on this, the following model is obtained.

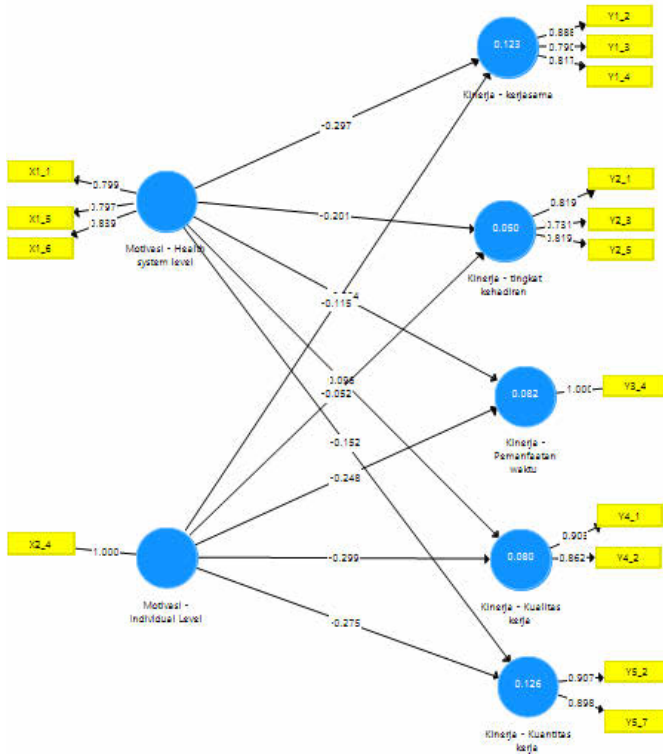


Fig. 3. Model 3 SEM PLS Posyandu Cadres Performance

Figure 3 is the 3 SEM-PLS model after the Y1_1 and Y4_5 indicator is removed. The next step is to calculate PLS Algorithm to test the reliability and validity variables. The result of the analysis is as follows.

	Cronbach's Alpha	rho_A	Composite Reliability	Average Varian Extracted (AVE)
Quality of Work	0.719	0.733	0.876	0.779
Quantity of Work	0.772	0.733	0.898	0.814
Time Utilization	1.000	1.000	1.000	1.000
Cooperation	0.788	0.855	0.871	0.693
Attendance Rate	0.706	0.728	0.833	0.625
Cont...	Cronbach's Alpha	rho_A	Composite Reliability	Average Varian Extracted (AVE)
Health System Level	0.745	0.749	0.853	0.659
Individual Level	1.000	1.000	1000	1.000

Based on the calculation results, all variables have Cronbach's alpha values above 0.7, so all variables can be declared reliable. In the AVE calculation, all variables have values above 0.5, so it can be concluded that all variables are valid. The next step is

bootstrapping. The results of bootstrapping after removing invalid indicators are as follows.

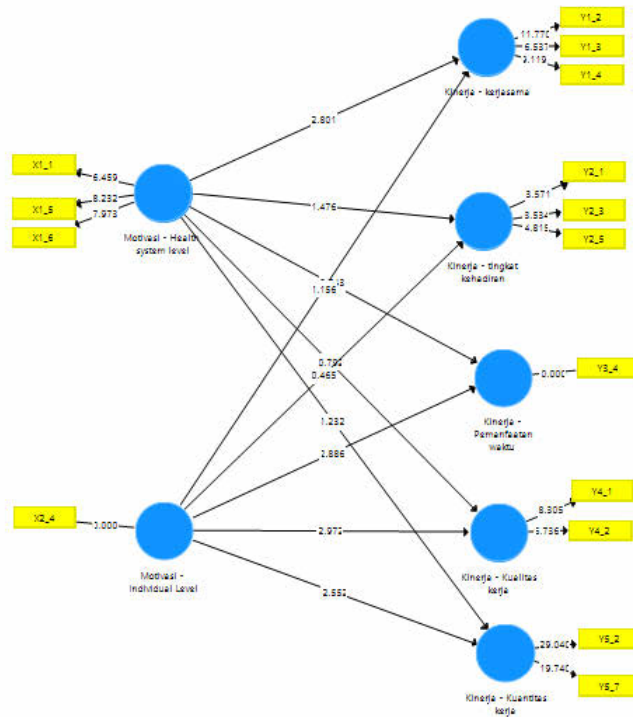


Fig. 4. Model 4 SEM PLS Posyandu Cadres Performance

Figure 4 is a model of 4 SEM-PLS after bootstrapping. Based on the result of bootstrapping there are four components of motivation that have a positive and significant influence on posyandu cadres' performance, their health system level that affects cooperation, individual level on work quality, individual level on work quantity, and individual level on time utilization.

4.1 Hypothesis Test

Table 2. Results of Bootstrapping Research Data Calculations

	Original Sample Estimate (O)	Sample Mean (M)	Standard Deviation (STD)	t Statistics (IO/STDEVI)	P Value
Health System Level (X1) -> Quality of	0.096	0.090	0.121	0.792	0.429

Work					
Health System Level (X1) -> Quantity of Work	-0.152	-0.164	0.124	1.232	0.218
Health System Level (X1) -> Time Utilization	0.084	0.093	0.113	0.743	0.458
Health System Level (X1) -> Cooperation	-0.297	-0.319	0.106	2.801	0.005
Health System Level (X1) -> Attendance Rate	0.201	0.217	0.136	1.476	0.141
Individual Level (X2) -> Quantity of Work	0.299	0.304	0.101	2.972	0.003
Individual Level (X2) -> Quantity of Work	0.275	0.274	0.108	2.552	0.011
Individual Level (X2) -> Time Utilization	0.248	0.243	0.086	2.886	0.004
Individual Level (X2) -> Cooperation	0.115	0.116	0.099	1.156	0.248
Individual Level (X2) -> Attendance Rate	0.052	0.066	0.111	0.465	0.642

Source: Processed primary data output, 2022

Based on the output results in table 2 T statistics for the Health System Level (X1) on Quality of Work (Y1) of $0.792 < 1.96$. The P-Value is $0.429 > 0.05$, which means it is not significant. Thus the hypothesis is rejected, Health System Level has no significant effect on the Quality of Work.

Based on the output results in table 2 T statistics for the Health System Level (X1) on Quantity of Work (Y2) of $1.232 < 1.96$. The P-Value is $0.218 > 0.05$, which means

it is not significant. Thus the hypothesis is rejected, Health System Level has no significant effect on the Quantity of Work.

Based on the output results in table 2 T statistics for the Health System Level (X1) on Time Utilization (Y3) of $0,743 < 1.96$. The P-Value is $0.458 > 0.05$, which means it is not significant. Thus the hypothesis is rejected, Health System Level has no significant effect on Time Utilization.

Based on the output results in table 2 T statistics for the Health System Level (X1) on Cooperation (Y4) of $2.801 > 1.96$. The P-Value is $0.005 < 0.05$, which means it is significant. Thus the hypothesis is accepted, Health System Level has a significant effect on Cooperation.

Based on the output results in table 2 T statistics for the Health System Level (X1) on Attendance Rate (Y5) of $1.476 > 1.96$. The P-Value is $0.141 > 0.05$, which means it is not significant. Thus the hypothesis is rejected, Health System Level has no significant effect on Attendance Rate.

Based on the output results in table 2 T statistics for the Individual Level (X2) on Quality of Work (Y1) of $2.972 > 1.96$. The P-Value is $0.003 > 0.05$, which means it is significant. Thus the hypothesis is accepted, Individual Level has a significant effect on the Quality of Work.

Based on the output results in table 2 T statistics for the Individual Level (X2) on Quantity of Work (Y2) of $2.552 < 1.96$. The P-Value is $0.011 > 0.05$, which means it is significant. Thus the hypothesis is accepted, Individual Level has a significant effect on the Quantity of Work.

Based on the output results in table 2 T statistics for the Individual Level (X2) on Time Utilization (Y3) of $2.886 > 1.96$. The P-Value is $0.004 > 0.05$, which means it is significant. Thus the hypothesis is accepted, Individual Level has a significant effect on Time Utilization.

Based on the output results in table 2 T statistics for the Individual Level (X2) on Cooperation (Y4) of $1.156 < 1.96$. The P-Value is $0.248 < 0.05$, which means it is not significant. Thus the hypothesis is rejected, Individual Level has no significant effect on Cooperation.

Based on the output results in table 2 T statistics for the Individual Level (X1) on Attendance Rate (Y5) of $0.465 > 1.96$. The P-Value is $0.642 > 0.05$, which means it is not significant. Thus the hypothesis is rejected, Individual Level has no significant effect on Attendance Rate.

5 Discussion

The result of this study indicates that the two levels of motivation (health system level and individual level) influence cadres' posyandu performance. Referring to the statistical results, both levels of motivation have a significant effect on the four dimensions of posyandu cadres' performance. The health system level has a significant effect on cooperation. The existence of high social enthusiasm forms motivated cadres to inspire, enthusiasm, activate, stimulate, mobilize, and the community to live a healthier life [10]. The individual level has a significant effect on the quality and

quantity of work and time utilization. The existence of high motivation can increase the activity of cadres better which also affects the quality of their performance compared to cadres who have low motivation [12]. This result indicates that good relationships are needed from each line in order to create a comfortable and conducive atmosphere at work. The relationship with health workers is something that needs attention, there is support from local healthcare. The existence of good interpersonal relationships of mutual trust, communication, and interactive dialogue between cadres and local health workers also motivates cadres to carry out their duties optimally [5].

6 Conclusion

Based on the result of the study, it can be concluded that if cadres have good motivation for example feeling care for others, their performance will increase. Because cadres include volunteerism, they work not oriented by wages. They will work as a society to help others. cadres want Indonesian children to grow and develop as healthy and smart children. Motivation gives an important role to increase the posyandu cadres' performance.

Reference

1. As'ad S. U, Moh. 2002. Psikologi Industri: Seri Ilmu Sumber Daya Manusia, Edisi keempat, Liberty, Yogyakarta.
2. Byars dan Rue, 2011, Human Resources Management, gth, Irwin, Chicago.
3. Gopalan, S. S., Mohanty, S., dan Das, A., 2012. Assessing community health workers' performance motivation: a mixed-methods approach on India's Accredited Social Health Activists (ASHA) programme, *BMJ Open*, 2(5): 1-10.
4. Kemenkes, 2011. Standar Antropometri Penilaian Status Gizi Anak, Direktorat Bina Gizi dan Kesehatan Ibu Anak, Jakarta. n.p.
5. Kok, MC., Kane, SS., Tulloch, O., 2015. How Does Context Influenced Performance of Community Health Workers in Low and Middle Income Countries? Evidence from the Literature. *Health Research Policy and Systems*, 13; 1-14.
6. Mangkunegara, A. A. A. P., 2010. Evaluasi Kinerja SDM, PT.Refika Aditama, Bandung.
7. Mangkunegara, A. A. A. P., 2017. Manajemen Sumber Daya Manusia Perusahaan, Bandung : Remaja Rosdakarya.
8. Reksohadiprojo, Sdan T., Hani H., 1997. Organisasi PerusahaanPerusahaan: Teori Struktur dan Perilaku, BPFE, Yogyakarta.
9. Robbins, Stephen P., 2002. Organizational Behaviour. 9th edition, Prestice Hall International, Inc.New Jersey.
10. Susanto, F., Claramita, M., Handayani, S., 2017. Peran Kader Posyandu Dalam Pemberdayaan Masyarakat Bintan. *Berita Kedokteran Masyarakat Journal of Community Medicine and Public Health*, 33(1): 13-17.
11. Wahyudi, B., 2010. Manajemen Sumber Daya Manusia, Sulita, Jakarta.

12. Wijaya, A., S. (2013). *Keperawatan Medikal Bedah 2*. Yogyakarta: Nuha Medika.

Open Access This chapter is licensed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits any noncommercial use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this chapter are included in the chapter's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the chapter's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.

