

Midwives Performance in Early Detection of Growth and Development Irregularities of Children Based on Task Commitment

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ABSTRACT

The purpose of this study was to analyze the performance of midwives based on the task commitment. This was an observational analytic with cross sectional approach. Multistage random sampling was used to determine the public health center, proportional random sampling to selected participants. The samples were 222 midwives in the public health center of Surabaya City. Data were collected by questionnaires on exogenous variables and sheet of data collectors for the performance of midwives. Data was analyzed by Partial Least Square (PLS). This study found the results of the self leadership directly affects the performance with the value of T-statistic of 3.852 > T-table (1.96) with the value of the path coefficient of 0.257, while the value of the indirect influence on the strategy of self leadership performance through mediator task commitment with path coefficient value of 0.053. These models can be used as a reference in improving the performance of midwives in other activities related to maternal and child health services.

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1. INTRODUCTION

The growth and development of children is a key indicator of health. Early detection of child development is a very important effort to do starting from the family level, the community and the level of basic services, it aims to identify as early as possible the occurrence of impaired growth and development of children [1],[2]. Targeted Growth Early Detection (DDTK) of toddlers and pre-school children has been set at 90%. Health care coverage of children under five that includes vitamin A and Stimulation Detection and Early Intervention Growth Services (SDIDTK), in Indonesia in 2012 there were only 6 provinces (18.2%) who meet the target of the Strategic Plan is 81%, while the 27 Provinces (81.8%) do not meet these targets, including East Java. From the 38 districts / cities in East Java, only 6 (six) districts / cities that reach the target of 83% and there are 32 districts / cities which do not meet the targets, including the city of Surabaya with the achievements of 60.89%. Likewise with the achievements figures coverage of East Java Province (70.34%) is still below the predetermined targets [3].

Not all public health centers in Surabaya achieve the implementation of the detection of child development target. In 2011 from 60 public health centers, there are 46 (77%) public health centers DDTK outcomes in infants, and 38 (63%) public health centers at the pre-school children still below target too. In 2012 from 62 health centers, there are 47 (76%) public health centers DDTK outcomes in infants and 36 (58%) health centers at the pre-school children who are still below target. In 2013 from 62 health centers,

there are 31 (50%) health centers DDTK outcomes in infants and 25 (40%) health centers at the pre-school children who are still below the target (Section Basic health services, health office, Surabaya).

Many factors affect the achievement DDTK not optimal. Both of the factors people who do not understand the importance of factors DDTK and program implementation early detection of child development. One of the personnel involved in the activities of early detection of child development is a midwife. One effort to improve the performance of midwives can be implemented through self-leadership approach. Self-leadership is an important factor in optimizing the ability of self-midwife, because with the ability of self-leadership will improve the various aspects that can affect the performance of midwives.

Yuthana (2010) found that self leadership influence on psychological empowerment, self efficacy, jobs satisfaction [4]. Wirawan (2013) stated that all the variables that can affect the performance has been written all in the model, but the influence of the individual still need to be proven through research [5]. Implementation of early detection of irregularities growth and optimal development of children, in addition to requiring the ability of self-leadership is also considered important the existence of task commitment. With this background, need for the development of a performance model of midwives in the early detection of irregularities of growth and development of children.

2. RESEARCH METHOD

The research was analytic research observational with cross sectional approach. Sample in this study was partly midwife program managers early detection of child development at the public health center, Health Department of Surabaya, the inclusion criteria as follows: Minimum Diploma III Midwifery, implementing the activities early detection of child development, willing to become respondents. The samples were 222 midwives were taken by using multi-stage random sampling.

Public Health Center optionally 43 health centers, to determine empirically participants used proportional random sampling. Instruments used a questionnaire to collect data on exogenous variables and sheet of data collectors to collect data about the performance. The instrument used was a questionnaire has been tested for validity and reliability. Inferential analysis using Structural Equation Modeling (SEM) based variance is often called the Partial Least Square (PLS). The study was conducted for 6 months starting in January to June, 2016. Based on Table 1, independent variables in this study were self-leadership strategies and task commitment. Dependent variable was performance midwife in the early detection of irregularities child growth.

Table 1. Variables and Indicators in This Study

Variables		Indicator	
X1	Self-leadership Strategies	X.1.1	Behavior Focused Strategies
		X.1.2	Natural Reward Strategies
		X.1.3	Constructive Thought Pattern Strategies
		X.2.1	Setting goals
		X.2.2	Independently
X2	Task commitment	X.2.3	Tough
		X.2.4	Willingness or desire to improve themselves (working improvement)
		X.2.5	Willingness or desire to succeed (working the best they can)
		Y.1	Activities (effort)
		Y.1.1	Growth deviation detection
Y	Performance midwife in the early detection of irregularities child growth	Y.1.2	Developments deviation detection
		Y.1.3	Power of hearing and vision test
		Y.1.4	MME, Autism, GPPH detection
		Y.2	Results (achievement)
		Y.2.1	Early detection of growth irregularities
		Y.2.2	Early detection of developmental disorders
		Y.2.3	Vision and hearing power test
		Y.2.4	Detection of emotional mental problems, autism

2.1. Research Ethics

Before entering the study, respondents were given an explanation of purpose of the study, how to fill out the questionnaire, the benefits of research, as well as on the confidentiality of the results of the charging. After which respondents were asked to complete a form for the approval of the respondents, which the midwife is entitled to vote are willing or not willing to become respondents. Ethical clearance was obtained from the ethics committee, the Faculty of Public Health, Airlangga University, Surabaya, Indonesia. Official permission is obtained from National Unity and Community Protection, Surabaya and Chief Medical Officer of Surabaya.

3. RESULTS AND ANALYSIS

From the 222 midwives who were respondents in this study, the results are presented in Table 2. Based on Table 2, the majority of respondents aged 18-40 years were a number of 191 (86%) and D3 education were 198 respondents (89.2%). Moreover, the average length of work was 6-10 years (47%). For further analysis of the inner workings of a model that aims to test the effect between latent variables, more results in Table 4. Table 4 and Figure 2 show that result of path coefficient in construct latent variables between direct and indirect effect in all indicators in this study were significant.

Unlike the CBSEM, for GoF value in PLS-SEM must be searched manually. The formula is:

$$GoF = \sqrt{AVE \times R^2} \dots\dots Tenenhaus (2004)$$

The result of calculation of average AVE value is 0.808998, while the average R2 is 0.479978, so that the GOF value is 0.623. According Tenenhaus (2004), the value of GoF small=0.1, GoF medium=0.25 and GoF great = 0.38. Based on the above results indicate GoF amounted to 0.623, where the value > 0.38, GoF of this model in the large category, meaning that models the performance of midwives in the early detection of irregularities of child development is suitable or appropriate to the condition of data empirical field. The results of this study indicate directly or indirectly influence the strategy of self leadership to the performance or indirect effect on the performance of the self leadership strategies to task commitment. Self-leadership is the ability of people to lead themselves.

In line with the results of the study by Yutthana (2010) who found there were direct and indirect influence on the self leadership strategies to performance [4]. Leadership is a process of influence, while the self-leadership directed to affect themselves. Self leadership is a process where people reach the landing yourself through three strategic, namely behavior focused strategies, natural reward strategies, and constructive thought pattern strategies [6]. Behavior Focused Strategies is conducted to raise the self-awareness to facilitate behavior management, especially management behaviors associated with tasks that are needed but not unpleasant. This strategy involves the observation of self, self-determination goal, reward yourself, punish yourself and give yourself instructions. The result of this study are supported by Politis (2006) that found a direct correlation between the dimensions of the self-leadership behavior focused strategies and job satisfaction were positive and statically significant [7].

Natural reward strategies aimed at creating a situation in which a person is motivated or balanced with a pleasant aspect of the task or activity. Constructive thought pattern strategies designed to facilitate the establishment of a constructive mindset and way of thinking habits can positively [6]. In addition, this strategy can change false beliefs or dysfunctional thinking into the process more rational cognition [8]. Constructive thought pattern strategies consist of: a) self observation, b) self goal setting, c) self reward, d) self punishment, e) self cueing [9],[10].

Besides self-leadership strategy also affect the performance through the mediation task commitment. This is in accordance with the results of the study by (Jessie & Nesbit, 2014), they said that self-leadership affect the performance [11]. Guangping (2009) in his research explained that self-leadership influence performance through psychological empowerment and also affect job satisfaction [12]. Midwife with the ability of self-leadership, they have a high commitment to high duties anyway. Commitment is the output of self-leadership, people who have self-leadership strategies in often developing a sense of belonging to their duties and work processes. The result can be said that the individuals who are able to lead themselves, they have a commitment to tasks, goals, both in the level of the individual, team and organization, compared with individuals who did not have the ability to apply self-leadership [5].

Leadership is a process of influence, self-leadership directed to affect themselves (Neck & Manz, 2010) Self leadership is a process where people reach the landing yourself through three strategic, namely Behavior Focused Strategies, natural reward strategies, and Constructive Thought Pattern Strategies [13]. Remuneration strategy from natural or unnatural reward is a strategy created to motivate someone or take a pleasant aspect of tasks and activities. Two of natural reward strategy are to build a state more fun and exciting activities that task by itself be rewarded. A second strategy is to form perceptions by focusing attention away from aspects that are not pleasant of tasks and focus on those aspects of remuneration. These strategies can lead to individual intrinsic motivation to accomplish these tasks [5].

The emergence of internal commitment is largely determined by the ability of individuals in the leads themselves, but it is also determined by the ability of the leadership and work environment in growing ability of midwives to lead themselves. Syed (2010) stated that self-leadership can improve performance through job satisfaction [14]. As for external commitment is the responsibility established by the work

environment, this commitment arises because of the demands of the completion of tasks and responsibilities that must be completed by the employees who produce their reward and punishment.

The results of this study explained that midwives have a high task commitment they demonstrate high performance in the early detection of irregularities of growth and development of children. (Renzulli, 1997) suggests task commitment is a subtle form of motivation. If the motivation is usually defined as a common energy process that is a trigger factor in an organism, the responsibility of the energy displayed on a certain task specific. Task commitment a personal characteristic diligent and tenacious in their duties, by formulating goals, has involved a close and in the tasks and problems, is very enthusiastic about every activity, requires little external motivation when complete the task, preferring to concentrate on its responsibilities, and have a high energy [10].

Roe (1952) and Mac Kinnon (1964, 1965) in (Renzulli, 1997) states that intensive study of the characteristics of 64 leading scientists and found that all subjects had a high level of commitment to their work, these are the traits most important of people who are creative, creative scientists who are often stressed on their creativity, independence, enthusiasm, determination and results. It can be said that the creative and productive much more task-oriented and engaged in their work compared with the general population [15].

The results of this study found their influence on the performance task commitment midwife early detection of irregularities in the growth and development of children. Midwife performance can be improved in various ways. Increased commitment to the task is an effort to improve the performance of midwives, this can be explained because of the power that a desire or promise or expectation can lead a person to perform optimally. Some of the internal factors can shape the motivation or willpower among others, the achievement, assignment of responsibilities, and the opportunity to develop.

Commitment to the task has multiple dimensions; each dimension has an important role in improving performance. Dimension setting goals makes people who have the commitment tends to have a high work standards. Dimensions independently indicate that a person with a high commitment to the tasks they will be able to perform their duties independently and is able to identify problems in the field is practiced and try to find solutions to the problems faced.

Dimensions Tough, tough synonymous with powerful, sturdy, determined to stand up straight and never give up. He will be able to make a decision to change the attitudes of self-pity, complaining and being someone who relies less confident. Independent and optimal in conduct an activity or task. With his toughness someone will be motivated to carry out the great things in life. Take risks, change bad habits into a superman. Successful people usually have a toughness that exceeds the ordinary people. They have the confidence that is much higher than ordinary people.

Table 2. Distribution characteristics of Respondents

No.	Characteristics	Category	Frequency	
			Σ	%
1.	Age	Young adults (18-40 years)	191	86.0
		Older adults (41-60 years)	31	14.0
2.	Education	D3	198	89.2
		D4 / S1	23	10.4
		S2	1	0.4
3.	Length of work	3-5 years	76	34.2
		6-10 years	106	47.7
		11-15 years	23	10.4
		16-20 years	6	2.7
		> 20 years	11	5.0
4.	Long been engaged in activities DDTK	3-5 years	101	45.5
		6-10 years	107	48.2
		11-15 years	10	4.5
		16-20 years	4	1.8
5.	History of follows the training of DDTK	Never has the training	178	80.2
		Already been training	44	19.8

Table 3 and Figure 1 show that result of outer loading in all indicators in this study were valid and reliable, which means that all indicators able to explain the construction.

Table 3. Outer loading (Mean, STDEV)

Latent variables	Observed variable	Original Sample (O)	Sample Mean (M)	T Statistics ((O/STERR))	Validity
Self Leadership Strategies	Behavior Focussed strategies	0.925	0.925	81.792	Valid
	Natural reward strategies	0.911	0.913	61.219	Valid
	Constructive thought pattern strategies	0.916	0.916	76.238	Valid
Task Commitment	Setting goals	0.927	0.927	88.502	Valid
	Tough	0.894	0.894	61.160	Valid
	Independently	0.910	0.910	68.140	Valid
	Working the best they can	0.883	0.883	55.754	Valid
	Working improvement	0.899	0.899	61.493	Valid
Performance	Activities (effort)	0.886	0.887	51.989	Valid
	Result (achievement)	0.869	0.870	51.988	Valid
	Composite Reliable				
	Performance		0.871		
	Strategi Self Leadership		0.941		
	Task Commitment		0.956		

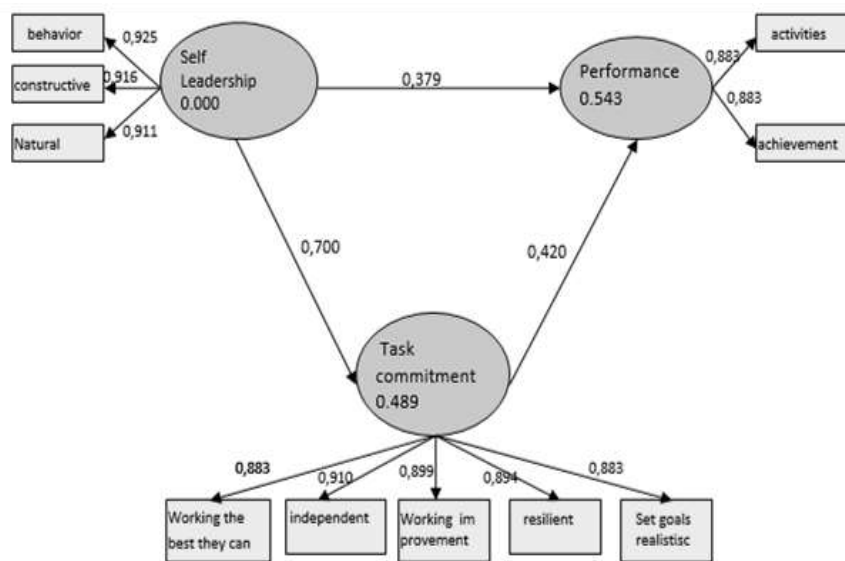


Figure 1. Visualization of analysis results outer models with loading factor value

Table 4. Path Coefficient in Construct Latent Variables between Direct and Indirect Effect

	Original Sample (O)	Sample Mean (M)	T Statistics ((O/STERR))	Effect
Self Leadership Strategy to Performance	0.379	0.377	6.337	significant
Self Leadership Strategy to Task commitment	0.700	0.704	22.787	significant
Task commitment to Performance	0.420	0.425	6.254	significant
Self leadership to task commitment to performance		0.700 x 0.420 = 0.294		
Total Effect		0.379+0.294 = 0,673		

Dimensions Having the willingness to improve themselves (working improvement), someone with a high commitment, he has a high ability to explore specific areas of the occupied, enthusiastic, high involvement, curiosity higher in the occupied areas or to tasks it is responsible, in other words, someone who has a high commitment to the tasks they would like to learn and strive to improve the knowledge and professional skills associated with increased task in hand and have a high task orientation. Have a willingness to work as well as possible/will to succeed (working the best they can) that they will continue to maintain the quality of work performed by him, optimally utilizing the working time. Midwives in the line of duty early detection of irregularities of growth and development of children are expected to have a high task commitment in order to perform their duties optimally.

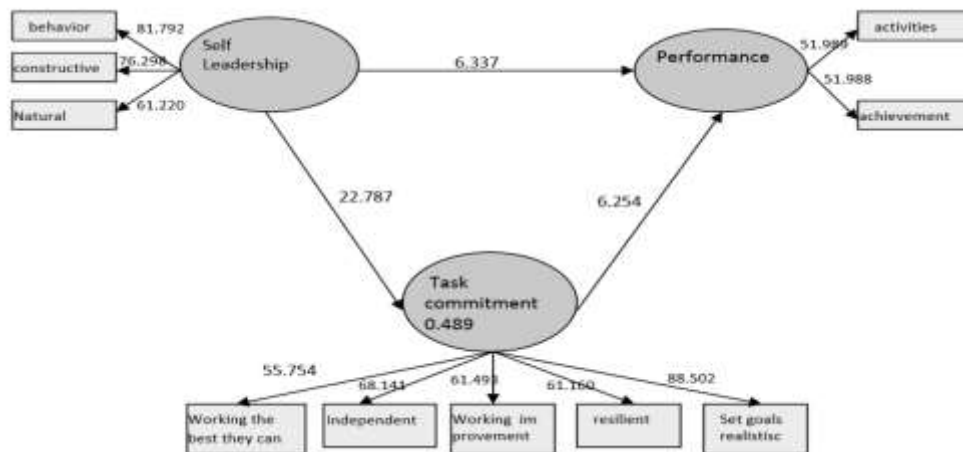


Figure 2. Visualization of the performance model analysis results inner models with T-Statistics value

4. CONCLUSION

Midwife performance model is built on the ability of self-leadership strategy and task commitment, in which the two variables has an important role in improving the performance of midwives in the early detection of irregularities of growth and development of children.

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