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Performance of Village Midwives: Task and Contextual Performance

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Abstract

Background: the performance of midwives is a vital part, which has an impact on the quality of services provided by midwives to neonates.

Aim: Describe the performance of individual village midwives in neonatal services, especially in early detection in the Work Area of the Pamekasan Health Center.

Method: this study used a cross-sectional study, which was conducted in all Pamekasan district health centers with 15 village midwives as a sample. The study used questionnaires and checklists as research instruments which were then analyzed descriptively.

Result: most of the village midwives have sufficient task performance categories. while the contextual performance of village midwives is in the high category.

Conclusion: This study shows the importance of the role of the head of the puskesmas and coordinating midwives to improve midwives' task performance, which can be done with regularly scheduled coaching and discussions.

Keywords: contextual, midwives, performance, task

INTRODUCTION

Midwives are health workers and health professionals who have an important role in health efforts, especially maternal and child health, which means that the performance of midwives is vital because, in addition to carrying out the delivery process, midwives have the task of monitoring or monitoring pregnancy, childbirth, and postpartum. health conditions of infants, especially neonates (Ministry of Health RI, 2014). Neonatal health services are provided by competent health workers, namely midwives, to neonates either at home visits or health facilities. The goal is to increase neonatal access to basic health services, and find out as early as possible if there are abnormalities and health problems in neonates. (RI Ministry of Health, 2010).

Drop-out Kn-Lengkap shows a decrease in the performance of midwives, plus the coverage of neonatal complications is lower than complete Kn indicating that the quality of Kn services does not meet the Manajemen Terpadu Bayi Muda (MTBM) standards in detecting danger signs in young infants (RI Ministry of Health, 2010). Based on this, it is necessary to evaluate the performance of midwives in infant services on an ongoing basis so that the work productivity of midwives increases as expected.

The theory of individual difference explains that individual performance has two dimensions, namely task performance, and contextual performance. The difference between task and contextual performance is a strong theoretical basis for performance measurement for health professionals, for example in nursing (Greenslade & Jimmieson, 2007). Task performance

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reflects work results in quantity and quality, while contextual performance occurs when employees exceed expectations with personality traits. Cognitive abilities have a strong relationship to task performance. While personality has a strong relationship to contextual performance. However, cognitive ability also has a relationship with contextual performance, and personality also has a relationship with task performance (Motowildo, Stephan J; Borman, Walter C; Schmit, 1997). This study aims to describe the performance dimensions of village midwives through task performance and contextual performance.

METHOD AND MATERIAL

This research is quantitative research with a cross-sectional study. The study was conducted in all health centers in the Pamekasan district, East Java province. The population in this study were all village midwives, then, proportionally, a sample of 151 village midwives was taken. The variable in this study is the performance of the village midwife. The research data was taken using a questionnaire and a checklist sheet. The midwife performance questionnaire has a total of 34 statements based on 2 dimensions of task performance and contextual performance(Greenslade & Jimmieson, 2007)adopted and modified by the researcher. This questionnaire uses a Likert scale with 5 alternative answers, namely: (1) never, (2) rarely, (3) sometimes, (4) often, and (5) always. The second instrument is a technical checklist sheet for services to young babies with the Manajemen Terpadu Bayi Muda (MTBM). The data that has been collected will then be processed and analyzed statistically. The data in this study were analyzed, both descriptively and inferentially.

RESULT AND DISCUSSION

Characteristics of Village Midwives

The characteristics of village midwives are to describe the characteristics of village midwives in general who has been part of this research including, age, education, and length of work as follows Table 1.

Table 1. Frequency Distribution of the Characteristics of the Pamekasan District Village Midwife

Characteristics	Category	Frequency (n)	Percentage (%)
Age	Millennials (18-34 Years)	49	32.5
	Gen X (35-50 Years)	85	56,3
	Boomers (51-69 Years)	17	11,2
Education	Diploma III	98	64,9
	Diploma IV/Bachelor	53	35,1
	Degree		
Length of work	15 years	41	27,2
	6 – 10 Years	34	22.5
	11 – 15 Years	45	29,8
	16 – 20 Years	15	9,9
	21 – 25 Years	14	9,3
	26 – 30 Years	2	1,3

Results Table 1. Most village midwives are Gen X (35-50 years old). Gen X is a generation level that can adapt to change and has a way of dealing with problems of their choosing and prefers a lifestyle that is free and flexible (Ting et al., 2018). Most of the midwives have a diploma III educational background, with the working period of village midwives in the Pamekasan district health center area, almost half of whom have worked 11-

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15 years. When individuals stay long in their jobs, they acquire relevant job skills and use them in solving their problems. It also makes employees willing to be enthusiastic and strongly involved in their work (Yalabik et al., 2013).

Village Midwife Performance

The performance of midwives is the ability of midwives to provide integrated services for young babies to detect emergencies. Midwives' performance is assessed based on two dimensions, namely task performance and contextual performance with each category as follows in Table 2.

Table 2. Description of the Pamekasan District Village Midwife's Performance

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Midwife Performance	Category	Frequency (n)	Percentage (%)
task performance	Low	22	14,6
	Enough	67	44,4
	Well	62	41,1
Contextual performance	Low	17	11,3
	Enough	54	35.8
	Well	80	53.0

Table 2 shows that most midwives have sufficient task performance (44.4%) and most have good contextual performance (53.0%). Performance is a key concept in work and organizational psychology. Performance is a value concept that is expected by the organization to become an individual behavior to carry out tasks according to standards (Motowidlo et al., 1997). Task performance is the competence required by individuals to carry out activities related to their job descriptions, which are part of the formal reward system, and contribute to achieving organizational performance (Sonnentag, Sabine; Volmer, Judith; Spychala, 2008). Task performance is related to individual expertise in carrying out activities that support the achievement of the organization's core. Task performance includes all activities that transform materials into goods or services that the organization produces or that enable the organization to function effectively.

In general, the behavioral components used to describe task performance include quality and quantity of work, as well as work knowledge and skills. Task performance varies greatly depending on each type of work, and is usually formulated into job descriptions so that some experts include other behaviors such as working neatly and accurately, monitoring and managing resources, and making decisions as part of task performance (Koopmans et al., 2011). Contextual performance is a behavior that supports organizational effectiveness by providing a good work environment that can support task performance (Sonnentag, Sabine; Frese, 2002). Borman & Motowidlo, (1997) explains five categories of contextual performance including volunteering (voluntarily doing something outside of work demands), enthusiasm to get the job done, altruism (happy to help others), remaining obedient to organizational rules and procedures even in uncomfortable situations, and support organizational goals. Contextual performance is relatively the same for all types of work and broadly grouped into communication and interpersonal competence, as well as efforts to discipline oneself so that one can be better at work. Part of contextual performance consists of interpersonal competence, helping colleagues, showing empathy, communication, trying to maintain personal discipline, showing initiative, being responsible, and adhering to organizational rules (Koopmans et al., 2011).

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CONCLUSION

The performance of village midwives is classified into task performance and contextual performance. The task performance of village midwives is in the sufficient category, this indicates the need for training education to improve the performance of village midwives in providing care for young babies. While the second dimension, namely the contextual performance of village midwives, is in a good category, this shows that interpersonally and the support of village midwives is very optimal, so it is necessary to maintain an active role in every discussion and professional meeting.

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