



Original Article

A Study of Experience and Performance of Midwife Independence Practice in Providing Antenatal Care Services in Batam City, Riau, Indonesia

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Abstract: Good performance of health workers impacts the quality of examination services for pregnant women, including maternal and neonatal health. This study determines the correlation between midwives' experience and the performance of midwife independence practice in providing antenatal care services in Batam Kota district. The population was collected using an accidental approach to midwife independence practice in Batam City District. Based on bivariate results, among 30 respondents who had a new experience, all respondents (100%) had a good performance, and 0 respondents (0.0%) had poor performance on ANC services. Meanwhile, among 21 respondents in the category of service length, 8 respondents (56.7%) had a good performance, and 13 respondents (43.3%) had poor performance. The chi-square test had a p-value of 0.02. The bivariate result showed a correlation between experience and the performance of midwife independence practice in providing antenatal care services with a chi-square p-value analysis of $0.002 < 0.05$. In conclusion, this study indicated that experience significantly correlated with the midwife's performance in providing antenatal care services at Botania and Baloi Indah Public Health Center in Batam City, Indonesia.

Keywords: experience; midwife independence practice; performance; antenatal care services.



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1. Introduction

In order to achieve the Millennium Development Goal (MDG) to reduce maternal mortality (AKI), we need to make more intensive efforts to accelerate the rate of decline. AKI is one indicator that responds to the quality and accessibility of healthcare facilities (Pangalila et al., 2017). WHO reported maternal deaths of 500,000 and new born deaths of 10,000,000 per year. Maternal and infant deaths occur in 99% of developing countries, including Indonesia. The direct causes of maternal death with the largest percentage were bleeding (42%), then other causes such as eclampsia (25%),

infection (3%), old partus (3%), abortus (5%), and others (22%) (Pangalila et al., 2017). The causes of fetal and infant mortality with pregnancy and childbirth were BBLR (31%), Asphyxia (19%), hypothermia (6%), diarrhea (4%), infection (4%), measles (1%), and others (36%). The high death of mother and baby is likely to occur in pregnant women at risk of not being detected early (Cholifah & Purwanti, 2017).

Good health workers' performance will impact the quality of examination services in pregnant women, including maternal and neonatal health (Mangkunegara, 2007). With good antenatal care (ANC) quality, the mother and family are ready to become parents and can undergo labour. If the pregnancy, childbirth, and postpartum process can be passed by the mother safely and comfortably, then the Maternal Mortality Rate (AKI) can be suppressed. Quality services with established service standards and maternal-neonatal service providers perform well, so it can be predicted that BPM has less performance in pregnancy examination services. Suppose BPM provides integrated antenatal services to every pregnant woman. In that case, BPM can detect and prevent the dominant cause through anamnesis, complete examination and proper follow-up by integrated antenatal standards (Manulang, 2004).

According to McCloy's theory, performance is behaviour or activities related to the organization, where the organization is the decision of the leader. It means that performance is not the outcome, consequence or result of behaviour or deed. Still, performance is an act or action. In addition, the performance is multi-dimensional, so some specific work has some form of performance component made within the limits of the relationship of variation with other variables (Rauzatul, 2016). McCormick and Tiffin's theory of individual performance relates to individual and situational variables. Individual differences will result in different performances. Individual variables, such as certain abilities, interests, and needs, come from within the individual concerned. While situational variables are variables derived from the broader work situation (organizational environment), such as the implementation of supervision, job characteristics, relationships with workers and rewards (Suryadilaga, Rendra Maulana, Al Musadieq & Eko, 2016)

According to performance theory from Mangkunegara states that human resource performance is a term of the word Job performance or Actual performance (work performance) is the result of work in quality and quantity achieved by an employer/ employee in carrying out his duties following the responsibilities given to him (Mulyono, 2014). The judge defines performance as the result of work achieved by an individual adapted to the role or task of that individual in a company over time, which is associated with a specific measure of value or standard of the company in which the individual works (Djunawan, 2015). According to Handoko, performance (performance appraisal) is the process through which the organization evaluates or assesses the work performance of employees can improve personnel decisions and provide feedback to employees about the implementation of their work (Megawati, 2016). Handoko termed performance (performance) with work performance as the process through which the organization evaluates or assesses employee work performance. Employee performance is important in human resource management (Awaliyah et al., 2020).

According to Sedarmayanti, performance is a system used to assess and know whether an employee has carried out their work as a whole or is a combination of the results of work (what one must achieve) and competence (how one achieves it) (Dharma, 2005). Based on the performance theory of Mangkuprawira, the performance consists of intrinsic factors in the form of education, experience, motivation, health, age, emotional skills, spiritual and Extrinsic factors in the form of physical and non-physical work environments, leadership, vertical and horizontal communication, compensation, control in the form of supervisory, facilities, training, workload, work processes, reward systems, and punishments (Hariyati et al., 2018). Performance, according to Colquitt & Wesson (2009) has three dimensions: (1) task performance, and (2) volunteer behaviour (citizenship behaviour) as a contribution of positive behaviour and (3) counterproductive behaviour as a contribution of negative behaviour. Another definition of performance is formal performance (work performance) is a unity of values of labor behaviour that contributes to the achievement of organizational goals, both positively and negatively (Colquitt & Wesson, 2009).

As also stated by Moenir that one of the basic abilities that must be possessed by a person in improving his performance is technical ability, namely knowledge and mastery of activities obtained through education and work experience. Factors that affect performance include intelligence, emotional stability, work motivation, family situation, physical characteristics, work groups, as well as external influences which include labor regulations, consumer pressure, social values, economic power, changes in location and labor unions. Factors that affect performance according to Mangkunegara are the ability factor and the motivation factor (Handoko, 2009).

According to Gibson, there are three groups of variables that affect performance and behaviour, namely: (1) individual variables, which include abilities and skills, physical and mental, background, experience and demographics, age and gender, origin and so on. Ability and skills are the main factors that affect individual performance, while demographics have an indirect relationship to behaviour and performance, (2) organizational variables, namely resources, leadership, rewards, job structure and design, (3) psychological variables, namely perceptions, attitude, personality, learning, job satisfaction and motivation (Newstrom & Davis, 2002). Perception, attitude, personality and learning are complex and difficult to measure and the opportunity to understand it is difficult to achieve, because an individual enters and joins a work organization at different ages, ethnicities, backgrounds, cultures and skills (Steers).

According to Lohman, performance indicator is a variable that is used to express quantitatively the effectiveness and efficiency of operating processes guided by organizational targets and goals (Abdullah, 2016)

According to Robbins, there are six indicators to measure the performance of individual officers, namely: quality, quantity, timeliness, effectiveness and independence (Wardhana, 2014). According to Siagian, the older a person is, the more rational a person's ability to think, the ability to make decisions, control emotions and be tolerant of other people's views, so that it affects the increase in motivation (Nisa et al., 2019) based on research conducted by Nessi in 2016 regarding the relationship between job descriptions, performance reviews, knowledge and training with the performance of independent practice midwives (BPM) in the implementation of integrated antenatal care, it was found that there were BPMs who did not always perform a 1 -minute DJJ examination for 10.3% which should be done to assess Fetal welfare, giving Fe tablets without being based on the physical needs of pregnant women is 16.7% so there is a possibility that many anaemic patients are not handled properly (Nelson & CampellQuick, 2006). BPM also did not provide counselling for pregnant women as much as 37.2% and 24.4% BPM did not prepare the mother properly for emergency pregnancy, childbirth and postpartum so that pregnant women and their families would not be ready in the event of an emergency as evidenced by 25.6% of pathological pregnant women outside the authority of the Midwife is not referred by the BPM. As many as 7.7% of BPM had new patients with gestational age more than 12 weeks, which means that the pregnant women did not have their pregnancy checked in the first trimester and missed the initial screening that should have been done at <12 weeks of gestation. (Anggiasari, 2017)

Research conducted by Dedes in 2016 on the relationship between midwives' performance and antenatal care visits by independent practice midwives in Bogor district found that the dominant internal factor was related to the high number of independent practice midwife visits in Bogor Regency (Fitria, 2017). Based on the results of the coverage of antenatal care activities (K1 96.54% K4 88.37%) in 2014 and 2015 at the North Minahasa District Health Center there was a gap from the target set. And in some public health center it is quite low (North Minahasa District Health Office, 2015). The coverage of maternal health services in Central Halmahera in 2013 for K1 coverage was 92% and K4 coverage was 84%, in 2014 K1 coverage was 93% and K4 coverage was 84%, while in 2015 K1 coverage was 89% and K4 coverage was 78 %. So, in conclusion, the gap from 2013 was 8%, the gap in 2014 was 9% and the gap in 2015 was 11%. should be at 95% and 85% respectively (Kementerian Kesehatan Republik Indonesia, 2015)

The coverage of antenatal care services through K1 to K4 visits and standardized pregnant women services at least 4 times, based on data obtained from the Batam City Health Office 2019 is the coverage of the first visit (K1) of 98.7% and coverage of repeat visits (K4) 93.2%. And the data for 2020 on the first visit (K1) of 93.32% decreased by 5.38% and the coverage of repeat visits (K4) of 89.722% decreased by 3.48%. These data illustrate that the compliance of antenatal care visits has not yet reached the target. So that it can lead to unknown maternal complications that can affect pregnancy (Batam City Health Office 2020). Based on data from the Batam City Health Office, there are 30 independent practice midwives spread over the working area of the public health centre while the highest number of public health centres is in the Bulang and Baloi Permai health centres, but due to limited research and time efficiency. In this study, the authors took the area of the Baloi Permai health centre, and Botania, where the health centre is located in Batam City District (Rusdiana & Heryati, 2015)

2. Literature Review

2.1. Experience

Experience according to Mapp (in Saparwati, 2012) is something that has been lived, experienced or felt both long ago and recently. Experience can also be defined as episodic memory, namely, memory that receives and stores events that occur or are experienced by individuals at a certain time and place, which serves as an autobiographical reference (Baptista, Merighi, and Freitas in Saparwati, 2012). According to Ranupandojo (in Bili, Resmawan and Kondorura, 2018) said work experience is a measure of the length of time or period of work that has been taken by a person to understand the tasks of a job and have carried it out well. Experience is an observation which is a combination of sight, smell, hearing and experience (Notoatmojo in Saparwati, 2012). Therefore, experience is an event that is caught by the five senses and stored in memory. Experience can be obtained or felt when the event has just happened or has been going on for a long time (Abalos et al., 2016). Experience is something that cannot be separated from everyday human life. Experience is also very valuable for every human being, and experience can also be given to anyone to use and be a guide and human learning (Handoko, 2009). Some people can have different experiences in seeing the same object, this is influenced by: the level of knowledge and education of a person, actors or factors on those who have experience, perceived object or target factors and situation factors where the experience is carried out. Meanwhile, the perpetrators who have experience are influenced by personal characteristics such as attitudes, motivations, interests or interests, and expectations (Saparwati, 2012)

Experience will form knowledge and skills and attitudes that are more unified in a person if the field of work handled while still working is a similar field which will eventually form a specialization of work experience obtained as long as a person works in a company from starting to enter until now (Neneng et al., 2022). Armstrong & Baron stated that work

experience is one of the personal factors that affect employee performance in the company (Afrianingsih et al., 2018). Work experience is a measure of the length of time or period of work that a person has taken in understanding the tasks of a job and has carried it out well. Foster (2015). Another opinion states that work experience is the length of time a person carries out the frequency and type of tasks according to his abilities. (Syukur, 2015). From the description, it can be concluded that work experience is the level of mastery of a person's knowledge and skills in his work which can be measured from the period of service and from the level of knowledge and skills he has (Dewi, V. N., & Sunarsih, 2011).

2.2. Performance

Midwife performance is health services performed by midwives to improve maternally and child health. Providers are health service actors, to fulfil the expected competencies under the requirements, a midwife is expected to have mastery of the stages of knowledge, skills and actors. Midwives as health workers who have independent authority in carrying out care for pregnant women, need to have standardized professional abilities. The ability of midwives in carrying out maternity care is not only limited to providing physical care, but includes psycho, social, and spiritual care. Psycho, social, spiritual care can be developed and supported (Abdul, 2009). Performance is a health service carried out by midwives to improve maternally and child health (Sarasati, 2016). Performance is the level of achievement of results on one's appearance in carrying out tasks (Mangkunegara, 2016). Given that performance contains components of competence and productivity results, the performance results are highly dependent on the individual's ability level in achieving results (Depkes, 2015). The performance of health workers is a very important element to be studied to maintain and improve health development. A survey on the performance of midwives (IBI & AIPKIND Team, 2010) through a qualitative approach shows that in essence the community expects midwives who are friendly, skilled and responsive in their fields, but so far there are still problems due to the performance of midwives, especially in Antenatal Care services for pregnant women (Departemen Kesehatan RI, 2016)

According to the performance theory of Sedarmayanti, performance is a system used to assess and find out whether an officer has carried out his work as a whole, or is a combination of work results (what a person must achieve) and competence/how one achieves it (Hariyati et al., 2018). According to Dessler's (2016) theory, employee performance is the actual achievement of the employee compared to the expected performance of the employee. Expected work performance is the standard performance that is compiled as a reference so that employees can see the performance of employees according to their position compared to the standards made (Handoko, 2009). In addition, it can also be seen the performance of the employee against other employees (Fahlevi, 2017). According to McCloy et al. (1994), stated that performance is behaviour or activities related to the organization, where the organization is a decision from the leadership. It is said that performance is not an outcome, consequence or result of behaviour or action, but performance is an act or action itself, besides that performance is multi-dimensional so that for some specific jobs it has several forms of performance components that are made within the limits of the relationship between variations with variables. other variables (Nisa et al., 2019).

2.3. Relationship between Experience and Performance

According to Lawler and Porter, performance is a successful achievement ("successful role achievement") obtained by a person from his actions in carrying out his work. Mangkunegara himself defines that performance (work achievement) is the result of work in quality and quantity achieved by a person in carrying out his duties or work in accordance with the responsibilities given to him (Putri, 2018). The definition of experience according to Trijoko is knowledge or skills that have been known and mastered by a person as a result of actions or work that has been carried out for a certain period (Purwanto et al., 2017) Based on the performance theory of Mangkuprawira, the performance consists of intrinsic factors in the form of education, experience, motivation, health, age, emotional skills, spiritual and extrinsic factors in the form of physical and non-physical work environment, leadership, vertical and horizontal communication, compensation, control in the form of supervision, facilities, training, workload, work process, reward system, and punishment (Hariyati et al., 2018)

Performance according to Colquitt & Wesson (2009) has three dimensions, namely: (1) task performance, and (2) voluntary behaviour (citizenship behaviour) as a contribution to positive behaviour and (3) counterproductive behaviour. productive behaviour) as a contribution to negative behaviour. Another definition of performance is that formally performance (work achievement) is a unitary value of workforce behaviour that contributes to the achievement of organizational goals, both positively and negatively (Nisa et al., 2019). According to Siagian, the older a person is, the more rational a person's ability to think, the ability to make decisions, control emotions and be tolerant of the views of others, so that it affects the increase in motivation (Nisa et al., 2019). Experience as a whole lesson formed by a person from the events that are passed in the lesson of his life (Gibson, 2009). The result of this study is that work experience is needed to improve the performance of independent practice midwives in antenatal care services. Good performance of health workers will have an impact on the quality of examination services for pregnant women, including maternal and neonatal health (Notoatmodjo, 2010).

3. Materials and Methods

This study uses analytical methods with a cross-sectional approach. This research was conducted in 2021 at The Independent Practice Midwife (BPM) in Batam City Sub-District. The population in this study is all BPM located in Batam City Subdistrict which numbers 30 Midwives. The number of samples in this study then used total sampling. The instrument used is a questionnaire. The hypothesis test used is Chi-Square. The type of data collected in this research activity is: Primary data, which is obtained by distributing questionnaires to respondents and respondents are asked to provide answers that are in accordance with the alternative options listed in the interview format sheet and Secondary data, namely secondary data obtained from the internet, health service reports, and health centre reports. Data processing techniques in this study are Editing, Coding, Processing, Cleaning and Tabulating. Data analysis used chi square, with a sampling technique using a total sample. The population in this study were all BPMs in Batam City District, totaling 30 midwives. The instrument used is a questionnaire

4. Results

To achieve the research objectives, the researcher collected data using a research instrument in the form of a questionnaire which was then presented in the distribution of data for each variable and then analyzed using Chi-Square.

Table 1. Result of the Experience of Independent Midwives in Conducting Antenatal Services

Experience	Frequency	Percentage
New	9	30
Long	21	70
Total	30	100

Table 1 indicates some of the respondents have a long experience, namely as many as 21 respondents (70%) and 9 respondents (30%) have a long experience in performing antenatal care services. Meaning that in Batam City there are many midwives who have a long working period and persist in providing health services. As also stated by Moenir that one of the basic abilities that must be possessed by someone in improving their performance is technical ability, namely knowledge and mastery of activities obtained through education and work experience, so the researchers continued with measuring the performance of midwives.

Table 2. Result of Performance of Independent Practice Midwives in Performing Antenatal Care Services

Performance	Frequency	Percentage
Well	17	56.7
Under	13	43.3
Total	30	100

Table 2 captures that most respondents have a good performance in performing antenatal care services which as many as 17 respondents (56.7%) and 13 respondents (43.3%) who have poor performance in performing antenatal care services. Meaning that every midwife who has good performance in providing health services to the community is in accordance with their competence

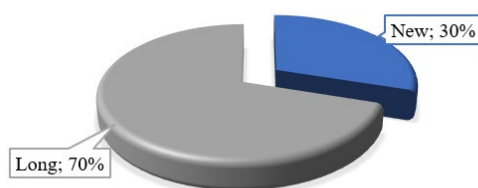


Figure 1. Result of Experience of Independent Midwives in Conducting Antenatal Services

Figure 1 shows some of the respondents have a long experience, namely as many as 21 respondents (70%) and 9 respondents (30%) have long experience in performing antenatal care services. Meaning that in Batam City there are many midwives who have a long working period and persist in providing health services.

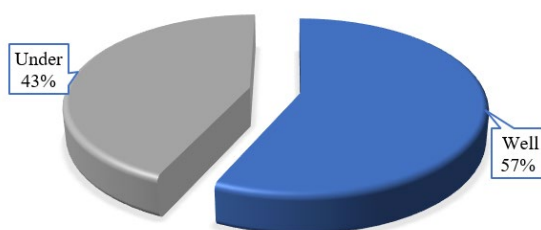


Figure 2. Result of Performance of Independent Practice Midwives in Performing Antenatal Care Services

Figure 2 captures most respondents have good performance in performing antenatal care services which as many as 17 respondents (56.7%) and 13 respondents (43.3%) who have poor performance in performing antenatal care services. Meaning that every midwife who has good performance in providing health services to the community is in accordance with their competence. The proposed improvements are the longer a person works, the more experienced the person so that his work skills are better, midwives who have long worked in hopes to have a better ability in providing services to pregnant women, with the more active one in carrying out tasks well then the better one's performance. Based on the results of research that the length of time a midwife devotes herself to midwifery practice, the midwife is more competent in carrying out her duties and responsibilities in the implementation of ANC services by standards. Working period (experience) affects a person in providing services. The experience of the midwife in doing her job is an important factor and the experience she has can also support her work in providing services so that it is more likely that midwives feel that they excel in the work done will affect the performance of the midwife.

Table 3. Results of Experience and Performance Levels and Correlation of Independent Practicing Midwives.

Experience	Performance						P-value
	Good		Sufficient		Total		
	Freq.	Percentage	Freq.	Percentage	Freq.	Percentage	
New	9	100	0	0	9	100	0.02
Long	8	38.1	13	61.9	21	100	
Overall	17	56.7	13	43.3	30	100	

Table 3 shows that 30 respondents whose working period is new, among them 30 respondents as many as 9 respondents (100%) have good performance in ANC services and 0 respondents (0.0%) have less performance in ANC services. While of the 21 respondents whose long-term category worked, as many as 8 respondents (56.7%) had a good performance and 13 respondents (43.3%) had less performance. The results of the statistical test with Chi-square obtained a value of $p\text{-value} = 0.02 < 0.05$ so that it can be concluded that H_0 rejected H_a received, meaning there is a relationship of experience related to the performance of independent practice midwives in performing antenatal care services in Batam district of the city.

5. Conclusion

In conclusion, this study has examined the relationship between experience and performance of midwives in conducting health services for pregnant women examinations with a sample of 30 respondents, midwives with new experience, 30 respondents who had a new working period, including 30 respondents, 9 respondents (100%) had good performance. in ANC services and 0 respondents (0.0%) had poor performance in ANC services. Meanwhile, of the 21 respondents in the long-term category, 8 respondents (56.7%) had good performance and 13 respondents (43.3%) had poor performance. Chi-square test $p\text{-value}$ is 0.02. It means that experience has a significant correlation with performance of midwives in conducting health services for pregnant women examinations.

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