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Relationship between Incentive and Posyandu Cadre Performance in Increasing Visits to Children to Posyandu in the Work Area of the Public Health Center in North Buton Regency

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ABSTRACT

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Keywords Incentives, Performance. **Introduction:** Incentives really need to be given to Integrated Healthcare Center cadres, providing incentives for Integrated Healthcare Center cadres in the working areas of the Waode Buri and Kulisusu Health Centers based on the North Buton Regent's Regulation on Procedures for Providing Incentives and Strengthening the Capacity of Integrated Healthcare Center Cadres. Thus, researchers need to research the relationship between incentives and the performance of Integrated Healthcare Center cadres to increase the visits of children under five to the Integrated Healthcare Center.

Method: This type of research is quantitative with a cross-sectional study approach. The population of all Integrated Healthcare Center cadres is 110 people with a sample of 87 respondents, the sample is drawn using simple random sampling.

Result: The chi square statistical test at the 95% confidence level ($\alpha = 0.05$) shows that the p value = 0.000 because Ho is rejected or Ha is accepted which means there is a relationship between incentives and the performance of Integrated Healthcare Center cadres, with a value of φ =0.513 indicates a strong relationship.

Conclusion: There is a significant relationship between incentives and the performance of Integrated Healthcare Center cadres in increasing visits for toddlers to the Integrated Healthcare Center in the working area of the Waode Buri Health Center and the Kulisusu Health Center, North Buton Regency.

Introduction

The development and improvement of the quality of Integrated Healthcare Center services is strongly influenced by the participation of the community, including cadres.^[11] The function of cadres for Integrated Healthcare Center is very large, starting from the stage of forming Integrated Healthcare Center, coordinating with institutions that support the implementation of Integrated Healthcare Center, as implementing planners and as coaches as well as extension workers to motivate residents who play an active role in Integrated Healthcare Center Center activities in the area.^[2]

The performance of Integrated Healthcare Center cadres is a standard of work that compares specific actions with a set of beliefs, policies, rules, habits and other intangible things, which can be referred to as the work of a person or an institution.^[3] The performance of cadres is manifested in carrying out their duties in running the Integrated Healthcare Center. So, the performance of cadres is a manifestation of their function as a mobilizer and facilitator of integrated health services in the community. Several factors affect the performance of Integrated Healthcare Center cadres, for example the incentives given to cadres.^[4]

Based on data from the Southeast Sulawesi Provincial Health Office that in 2020 the number of Integrated Healthcare Center was recorded at 2,941 units with the Integrated Healthcare Center Pratama strata category 654 (22.23%), Madya Integrated Healthcare Center 1162 (39.51%), Integrated Healthcare Center Purnama 906 (30.80%) and Integrated Healthcare Center Independent 219 (7.44%). Each Integrated Healthcare Center is handled by an average of 5 cadres, so the number of Integrated Healthcare Center cadres in Southeast Sulawesi Province is 14,705 people, with the number of Integrated Healthcare Center cadres listed as 8,108 active cadres (57.7%) and 6,597 inactive cadres (42.3%). The data still shows the low performance of Integrated Healthcare Center cadres.^[5]

Based on preliminary observations of data on the implementation of Integrated Healthcare Center activities in the working area of the Waode Buri Health Center (15 ward) and Kulisusu Health Center (7 ward) in 2021 the total number of registered Integrated Healthcare Center cadres is 110 people with the number of active cadres only 65 people (59.1%) and less active as many as 45 people (40.9%). This means that some of the registered cadres are less active, this affects the level of Integrated Healthcare Center cadres' roles in carrying out their roles as cadres to increase efforts to use Integrated Healthcare Center right on target.

The lack of visits by mothers of children under five to the Integrated Healthcare Center is influenced by several factors such as the level of knowledge of Integrated Healthcare Center cadres which is very important for the main guidelines for the cadres themselves in carrying out their role in improving the development of toddlers, increasing knowledge is the duty of health workers in providing information about the implementation of Integrated Healthcare Center, especially five-table services.^[6]

The problem of Integrated Healthcare Center cadres incentives is seen as one of the challenges that must be faced by an organization such as a Health Center. Incentives really need to be given to Integrated Healthcare Center cadres. In this case, the provision of incentives for posyandu cadres in the working areas of the Waode Buri and Kulisusu Health Centers is based on the North Buton Regent's Regulation on Procedures for Providing Incentives and Strengthening the Capacity of Integrated Healthcare Center Cadres.

In this study, the authors tried to measure the performance of Integrated Healthcare Center cadres on Integrated Healthcare Center services at the Health Center, and among 10 health centers in North Buton Regency the authors chose the Waode Buri Health Center and Kulisusu Health Center as the object of research due to the fact that the utilization of Integrated Healthcare Center was only 49.4%. children under five who do growth monitoring 8 times a year and 23.8% of children under five have never been weighed in the last 6 months.

Based on a preliminary survey at the Health Center to 20 samples, 10 people (50%) had a low level of cadre knowledge because they did not understand the function of the four table in Integrated Healthcare Center, as many as 5 people (25%) had less motivation so that cadres did not come during Integrated Healthcare Center activities. because they are more interested in working in other places that provide economic

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benefits as many as 3 people (15%) feel that incentives are lacking (transport costs) so that cadres are not present during Integrated Healthcare Center activities, and there are 2 (10%) cadres who choose to work to help their husbands to meet the needs of the family.

Based on the description above, the authors are interested in conducting research with the title "The Relationship of Integrated Healthcare Center Cadre Incentives in Increasing Toddler Visits to Integrated Healthcare Center in the Work Area of Waode Buri Health Center and Kulisusu Health Center, North Buton Regency".

Method

This type of quantitative research with a cross-sectional study approach to determine the relationship between incentives and the performance of Integrated Healthcare Center cadres, was carried out from 18 May to 18 July 2022. The population of all Integrated Healthcare Center cadres was 110 people with a sample of 87 respondents, the sample was drawn using simple random sampling.

Result

Table 1 shows that from 87 respondents, 37respondents (42.5%) had good cadre performanceand 50 cadres had poor performance (57.5%).

Table 2 shows that of the 87 respondents, 40respondents (46%) had incentives and 47respondents (54%).

Table 3 shows that of the 40 respondents who had incentives, 28 (70%) performed well. Meanwhile, of the 47 respondents who did not have incentives, 9 respondents (19.1%) had good performance. This shows that respondents with more incentives have better performance. The results of the chi square statistical test at the 95% confidence level $(\alpha = 0.05)$ showed that the value of p = 0.000 because Ho was rejected or Ha was accepted, which means that there is a relationship between incentives and the performance of Integrated Healthcare Center cadres in increasing visits by toddlers to Integrated Healthcare Center in the work area of the Waode Health Center. Buri and Kulisusu Health Center, North Buton Regency. Based on the analysis of the closeness of the relationship, the value of $\phi=0.513$. The figure shows a strong relationship. Thus, it can be interpreted that incentives have a strong relationship with the performance of Integrated Healthcare Center cadres in increasing visits for toddlers to Integrated Healthcare Center in the working area of Waode Buri Health Center and Kulisusu Health Center, North Buton Regency.

Table 1

Distribution of Respondents by Performance of Integrated Healthcare Center Cadres at Waode Buri Health Center and Kulisusu Health Center, North Buton Regency

No	Posyandu Cadre Performance	n	%
1	Well	37	42.5
2	Bad	50	57.5
	Total	87	100

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Table 2 Distribution of Respondents According to Incentives for Integrated Healthcare Center Cadres at Waode Buri Health Center and Kulisusu Health Center, North Buton Regency

No	Incentive	n	%
1	There is	40	46.0
2	There isn't any	47	54.0
	Total	87	100

Table 3 Distribution of Respondents by Incentive with Cadre Performance in the Work Areas of Waode Buri Health Center and Kulisusu Health Center North Buton Regency

No	Incentive	Cadre Performance				Amount	
		Well		Bad		Amount	
		n	%	n	%	n	%
1	There is	28	70.0	12	30.0	40	46.0
2	There isn't any	9	19.1	38	80.9	47	54.0
	Total	37	42.5	50	57.5	87	100

Discussion

The Relationship between Incentives and Integrated Healthcare Center Cadre Performance

Incentives can affect the morale of the cadre concerned.^[7] Can be used as one of the factors that can provide work motivation because it comes from internal cadres (wants, hopes, and needs) that give rise to encouragement or enthusiasm to work hard.^[8]

Respondents who received incentives as many as 40 respondents (46%) because respondents were always actively attending posyandu activities so that they always received incentives when Integrated Healthcare Center activities were completed, even though the incentives received were not in line with the expectations of cadres, but cadres continued to work well in accordance with with assigned responsibilities.

The results of the univariate analysis showed that there were cadres who did not receive incentives as many as 47 respondents (54%) because the respondents worked to help their husbands to earn a living, so this affected the level of cadre attendance. This makes incentives cannot be given because they are not active when Integrated Healthcare Center activities are carried out.

Respondents with incentives, there are 28 respondents (70%) whose cadres' performance is good because they carry out Integrated Healthcare Center activities. The list of receiving incentives provided by the Health Center varies widely, ranging from Rp. 100,000 to 250,000. Based on the statement of puskesmas officers that the difference in incentives is influenced by the number of Integrated Healthcare Center and the number of cadres on duty. The problem that occurs is that incentives are given to cadres not regularly every month but only occasionally.

However, during the implementation of National Immunization Week, usually the incentives given by the Health Center to cadres are quite large. This does not affect respondents in carrying out their duties as Integrated Healthcare Center cadres who work without expecting compensation in accordance with the statement which states that Integrated Healthcare Center

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cadres are community members who are willing and able to work voluntarily.^[9]

Meanwhile, of the 87 respondents with no incentives, 38 respondents (80.9%) had poor cadre performance due to the lack of incentives received by the cadres, also influenced by the lack of attention from the relevant agencies as funders, but there were still irregularities that resulted in assistance to cadres Integrated Healthcare Center is hampered.

The results of the bivariate analysis showed that with incentives there were 12 respondents (30%) poor cadre performance due to the lack of incentives given Rp. 100.000,- person Integrated Healthcare Center for one month. The incentives are divided according to the number of cadres in the Integrated Healthcare Center. Incentives that are given regularly, namely every three months, are felt to be less when compared to the workload of cadres. If Integrated Healthcare Center activities are started, the cadres must work full time from morning to noon.

The results of the bivariate analysis showed that with no incentives there were 9 respondents (19.1%) good cadre performance because of the awareness of cadres who were guided by the belief in religious teachings which stated that work is one of worship, but that does not mean that people who work provide services. Sincere and sincere for others whose purpose is to seek profit, they should not get paid more (incentives).

As a volunteer in the field of public health, a cadre is required to provide services voluntarily and sincerely to the community without expecting anything in return or in return other.^[10]

Based on the analysis of the closeness of the relationship, the value of φ = 0.513 This figure shows a strong relationship. This is because the provision of more incentives is not the right way to improve the performance of cadres spontaneously. Conversely, if you do not provide incentives to cadres who always sacrifice their families to attend Integrated Healthcare Center activities, there will be disappointment so that performance is not productive, work quality deteriorates.

There are suggestions that incentives can be increased so that they can perform better. The funds handed down by the Health Office are sent to the Health Center account, then the Health Center officers deliver to each Integrated Healthcare Center. In addition to incentives, the cadres also get other facilities such as free medical treatment at the Health Center or Auxiliary Health Center.

Conclusion

There is a significant relationship between incentives and the performance of Integrated Healthcare Center cadres in increasing visits for toddlers to the Integrated Healthcare Center in the working area of the Waode Buri Health Center and the Kulisusu Health Center, North Buton Regency. So hopefully the head of the Health Center pays attention to providing incentives to all cadres and rewording to cadres who have achievements so that it can be one of the triggers for increasing their performance.

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