

Family Information System (SIGA) Training on Network Midwife Capability and Compliance with SIGA Recording and Reporting

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ABSTRACT

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The Family Information System Training Application (FIST) was built with the aim of providing convenience for data and information managers at all regional levels in terms of managing annual and monthly report data for the family planning service system and updating the Indonesian family database. Analyze the effect of Family Information System Training (FIST) (X) on Ability (Y1) and Compliance (Y2) of Network Midwives on SiGA Recording and Reporting. A quantitative study with an analytical description approach, the sample involved in this study were 117 midwives in the North Sangata District, East Kutai Regency, the sampling technique was simple random sampling. There is a significant probability test value of the training variable with ability (Y1) (p value < 0.000, Beta coefficient 0.793; R² 0.629). significant probability test of training variable with compliance (Y2) (p value < 0.001; Beta coefficient 0.331; R² 0.605). Significant probability test of ability variable (Y2) with compliance (Y2) (p value < 0.000; Beta coefficient 0.4891). Indirect Effect XY₁Y₂; ((XY₁) x (Y₁Y₂)) is 0.398 (0.793x0.489). There is a positive direct and indirect significant positive effect of Family Information System Training (SiGA) on the ability and compliance of the Network Midwife to (FIST) Recording and Reporting.

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INTRODUCTION

SIGA application supports SIGA management based on Information Technology. The SIGA application was built with the aim of providing convenience for data and information managers at all regional levels in terms of managing annual and monthly report data for the family planning service system, field control and updating the Indonesian family database¹. A training program is absolutely necessary, even though it is an expensive investment. The training program is a force that is expected to create new nuances in an effort to accelerate the development of human resources with their competence, ability and level of professionalism in accordance with the needs of the world of work, developing and implementing an effective training program is not an easy job.

SIGA training is training carried out to improve the human resources (HR) of SIGA managers and implementers, so that they are competent and professional at various levels from the district / city level to the field line level. In providing quality training services, the organizers provide attractively designed training so that when participating in the training, participants show extraordinary enthusiasm and are able to achieve the required training outputs for participants¹. With the series of SIGA management training, it is hoped that the provision and use of information will be better in an effort to

support the implementation of population development, family development and family planning in Sangatta Utara District, East Kutai Regency.

What is meant by training is the application of knowledge, skills, and behaviors learned in training to work situations and subsequently maintaining them for a certain period of time. Changes in behavior and increasing knowledge and skills will not mean much if the application in work situations does not have an impact on increasing achievement. However, training is not a simple thing. There are various factors that influence it. The training conducted by network midwives in Sangatta Utara District, East Kutai Regency aims to improve the ability of midwives in recording and reporting SIGA in accordance with agency expectations. However, in its application the training that should be carried out by network midwives obtained through training activities that have been designed by the agency is still not right on target, the training carried out is still a formality that is only used as an obligation for network midwives to work but has not been actually implemented in a formal manner. optimally by network midwives in the context of training. The training is expected to be able to make network midwives apply it to support performance which is carried out regularly, with training it can help network midwives do their own work or help complete the work of colleagues so that mistakes in work can be minimized. The training carried out still has the impression of a formality that is only used as an obligation for network midwives to work but has not been implemented optimally by network midwives in the context of training. The training is expected to be able to make network midwives apply it to support performance which is carried out regularly, with training it can help network midwives do their own work or help complete the work of colleagues so that mistakes in work can be minimized. The training carried out still has the impression of a formality that is only used as an obligation for network midwives to work but has not been implemented optimally by network midwives in the context of training. The training is expected to be able to make network midwives apply it to support performance which is carried out regularly, with training it can help network midwives do their own work or help complete the work of colleagues so that mistakes in work can be minimized.

METHODS

A quantitative study with an analytical description approach. This study involved a network of midwives regarding the recording and reporting of SIGA in North Sangatta District, East Kutai Regency totaling 125 respondents. The number of samples in this study were 111 respondents. The sampling technique was simple random sampling. This amount was obtained from calculations by entering effect size 0.15, err prob 0.05, power 0.95, the total sample size was 107. Validity and reliability tests used a research questionnaire with 7 valid questions ($r = 0.530$ to 0.787 ; Cronbach alpha 0.850). Research with 5 valid questions ($r = 0.492$ to 0.758 ; Cronbach alpha 0.650) and the Kaptuha questionnaire 5 valid questions ($r = 0.791$ to 0.877 ; Cronbach alpha 0.876). The classical tests carried out were the normality test of the data, the lierity test, the heteroscedasticity test, the multicollinearity test and the analysis test using multiple linear regression.

RESULTS**Table 1. Distribution of Network Midwives' Answers**

NO	Question	Strongly Disagree	Don't agree	Doubtful	Agree	Strongly agree
A Knowledge						
1	Network Midwives in Sangatta Utara District, East Kutai Regency Have Participated in SIGA Training		1 (0.9)	21(19.6)	46 (43)	39 (36.4)
2	Network Midwives in North Sangatta Subdistrict, East Kutai Regency Have Implemented the Results of SIGA training in their respective service facilities		2(1,9)	22 (20.6)	41(38, 2)	42(49.3)
3	Network midwives have applied the results of the training in the workplace.			25 (23.2)	48 (44.9)	34 (31.8)
4	Your training can help other midwives do their jobs more effectively.			20(18,7)	45 (42.1)	42(39.3)
5	After participating in the network midwife training, I am able to get the job done quickly		2 (1.9)	20(18,7)	40 (37.4)	45 (42.1)
6	Network midwives are able to minimize the occurrence of errors in the workplace		2 (1.9)	24 (22.4)	43 (40.2)	38 (35.5)
7	After participating in the training of network midwives, they are able to deal with changes in institutions, technology and human resources	4(3,7)	5 (4,7)	29 (27.1)	43 (40.2)	26 (24.3)
B Ability						
1	Network midwives in Sangatta Utara District, East Kutai Regency are able to complete the work assigned by their superiors.			17 (15.9)	38 (35.5)	52(48,6)
2	The Network Midwife has the knowledge to operate the SIGA application			16(15)	28(26, 2)	63(58,9)
3	Network Midwives have skills in service delivery	13(12,1)	26(24, 3)	29(27,1)	28(26, 2)	11(10,3)
4	The Network Midwife is able to operate the SIGA application		1(0.9)	21(19.6)	43(40, 2)	42(39.3)
5	A long working period can improve the ability of network midwives to work			18(16,8)	39(36, 4)	50(44,7)
C Obedience						
1	Network midwives carry out services in accordance with existing SOPs			16(15,0)	43(40, 2)	48(44,9)
2	Network midwives carry out recording and reporting in accordance with the specified time			18(16,8)	38(35, 5)	51(47.7)

3	Network midwives have the necessary facilities and infrastructure for recording and reporting		10(9,3)	43(40, 2)	54(50,5)
4	The network midwife coordinates with the leadership		13(12,1)	37(34, 6)	57(53,3)
5	Network midwives coordinate with related agencies / BKKBN	1(0,9)	4(3,7)	15(14,0)	31(29, 0)

Table 2. Multiple Linear Regression Test Results Effect of SIGA Training with Network Midwives Ability and Compliance on SIGA Implementation

No	Variable	Coef	R	R2	P value
1	Ability	0.793	0.793	0.625	0.000*
2	Obedience	0.331	0.778	0.695	0.000*

Significant with F Test (Simultaneous)

So from the regression analysis can be described as follows:

- 1) The training directly has a positive and significant effect on the ability of Network Midwives in North Sangatta District, East Kutai Regency with a coefficient value of 0.793.
- 2) Training directly has a positive and significant effect on the compliance of Network Midwives in North Sangatta District, East Kutai Regency with a coefficient value of 0.331.
- 3) Ability directly has a positive and significant impact on the compliance of Network Midwives in North Sangatta District, East Kutai Regency with a coefficient value of 0.489.
- 4) Training has an indirect, positive and significant effect on compliance through the ability of Network Midwives in North Sangatta District, East Kutai Regency with a coefficient value of 0.387 (0.793 x 0.489)

So it can be seen from the above analysis that the regression analysis equation model for the two paths is for the first substructure equation: $Y1 = 0.793 X$ For the second substructure equation: $Y2 = 0.331 X + 0.489 Y1$ The description of the direct effect, direct effect and total effect can be seen in the table below:

Table 3. direct effect, indirect effect & total effect.

No	Direct Effects		Indirect Effect		Total Effect	
	Variable	Score	Variable	Score	Variable	Score
1	XY1	0.793	-	-	XY1	0.793
2	XY2	0.331	XY1Y2	0.387	(XY2) (XY1Y2)	+ 0.718
			((XY1) x (Y1Y2))			
3	Y1Y2	0.489	-	-	Y1Y2	0.489

Based on Table 4.28, it can be seen the direct effect, indirect effect and total effect. The direct effect of training on ability is 0.793, while the direct effect of training and ability on compliance are 0.331 and 0.489, respectively.

The indirect effect of training variables on compliance through the ability of 0.387. For the total effect of training variables on compliance through ability is 0.718. Based on the results of direct influence, indirect effect and total effect, there is a comparison between each influence.

DISCUSSION

Effect of Training and Ability

At the level of significant 0.05, the significance probability value for the variable is obtained training (X), of $0.000 < 0.05$, which means that statistically the training variable has a positive and significant effect on the ability variable. This means that training variables measured by indicators: network midwives have attended SIGA training, network midwives have applied the results of SIGA training in their respective service facilities, network midwives have applied the results of training in the workplace, the training you have attended can help other midwives do their jobs more effectively, after participating in network midwife training able to complete work quickly, network midwives are able to minimize the occurrence of errors in the workplace, after attending training network midwives are able to deal with changes in both institutions, technology and human resources have been able to increase the ability variable as measured by the indicator: network midwives are able to complete the work assigned by superiors, network midwives have the knowledge to operate SIGA applications, network midwives have skills in service delivery, network midwives are able to operate SIGA applications, a long working period can significantly improve the network midwife's ability to work.

Good training and work skills can also support the success of an organization in achieving its goals. Because through the existence of these two factors, it will create a high level of work productivity so that it can support the success of the organization. Conversely, if the level of work ability decreases, it will hinder the organization in achieving its goals. Ability means the capacity of an individual to perform various tasks in a job. Ability is also a behavioral dimension of expertise or excellence of someone who has the knowledge, skills and attitude abilities in solving a problem. Ability in the organization is needed especially to answer the demands of the organization, where there are very fast changes, the development of increasingly complex and dynamic problems.

New employees usually already have the skills and basic skills needed. Superior human resources are needed by companies to face increasingly high global competition. Skills are the total of all skills needed to achieve accountable results². Based on this definition, it can be explained that work ability is a deep and inherent personality in a person and predictable behavior in various situations and work tasks. Work ability is an ability based on skills and knowledge supported by work attitudes and application in carrying out their duties and responsibilities in the workplace that refers to the work requirements set. So, it can be concluded that work ability is an individual's capacity to perform tasks in a job². The employee's work ability variable has three indicators of size, namely knowledge, skills, and attitudes. The results of this study are supported by several previous studies, entitled the effect of training on work skills that have an impact on employee performance and research on nurse compliance behavior in implementing SOPs for safety incidents, and research on developing technical training models for family planning instructors to improve competence stating things that are in line with the results of the current study that training is able to affect abilities 3,4,5.

Effect of training and Compliance

At the level of significant 0.05, the significance probability value for the training variable (X) is $0.001 < 0.05$, which means that statistically the training variable has a positive and significant effect on the compliance variable. This means that training variables measured by indicators: network midwives have attended SIGA training, network midwives have applied the results of SIGA training in their respective service facilities, network midwives have applied the results of training in the workplace, the training you have attended can help other midwives do their jobs more effectively, after participating in network midwife training able to complete work quickly, network midwives are able to minimize the occurrence of errors in the workplace, after attending training network midwives are able to deal with changes both in institutions, technology and human resources have been able to improve compliance variables measured by indicators: network midwives carry out services in accordance with existing SOPs, network midwives carry out recording and reporting in accordance with the specified time, network midwives have the facilities and infrastructure needed for recording and reporting, network midwives coordinate with leaders, network midwives coordinate on related agencies / BKKBN significantly / significantly.

Training is an important thing that must be considered by human resource management. Manpower training is carried out to improve the ability and quality of human resources. Training as part of education that involves the learning process in which people achieve certain abilities to help

achieve organizational goals to acquire and improve skills outside the applicable education system in a relatively short time with methods that prioritize practice rather than theory. Compliance is the level of someone carrying out a way or behaving someone with what is suggested or charged to him. Nurse compliance is a nurse's behavior as a professional to a recommendation, procedure or regulation that must be carried out or obeyed. The Theory of Planned Behavior conveys that the behavior displayed by individuals arises because of the intention to behave, the emergence of behavioral intentions is determined by 3 determining factors, namely attitudes towards behavior, subjective norms and perceived behavioral control. Other variables that influence intention apart from the main factors include: age, gender, years of service, knowledge, attitudes, work environment, and workload. Research on the analysis of the training needs of ASN family planning instructors and research on the role of the Bengkulu Province national family planning population agency in training family planning field officers state that this is in line with the current research results that training can affect compliance 6,7.

Effect of Ability on Compliance

At the level of significant 0.05, the significance probability value for the ability variable (Y1) is $0.000 < 0.05$, which means statistically the ability variable has a positive and significant effect on the compliance variable. This means that ability variable as measured by the indicator: network midwives are able to complete the work assigned by superiors, network midwives have the knowledge to operate SIGA applications, network midwives have skills in service delivery, network midwives are able to operate SIGA applications, a long working period can improve the ability of network midwives to work. compliance variables measured by indicators: network midwives carry out services in accordance with existing SOPs, network midwives carry out recording and reporting in accordance with the specified time, network midwives have the facilities and infrastructure needed for recording and reporting, network midwives coordinate with leaders, network midwives coordinate on related agencies / BKKBN significantly / significantly.

New employees usually already have the skills and basic skills needed. Superior human resources are needed by companies to face increasingly high global competition. Skills are the total of all skills needed to achieve accountable results². Based on this definition, it can be explained that work ability is a deep and inherent personality in a person and predictable behavior in various situations and work tasks. Work ability is an ability based on skills and knowledge that is supported by work attitudes and application in carrying out their duties and responsibilities in the workplace that refers to the specified work requirements. So, it can be concluded that work ability is an individual's capacity to perform tasks in a job. The employee's work ability variable has three indicators of size, namely knowledge, skills, and attitudes.

Compliance is the level of someone carrying out a way or behaving someone with what is suggested or charged to him. Nurse compliance is a nurse's behavior as a professional to a recommendation, procedure or regulation that must be carried out or obeyed. The Theory of Planned Behavior conveys that the behavior displayed by individuals arises because of the intention to behave, the emergence of behavioral intentions is determined by 3 determining factors, namely attitudes towards behavior, subjective norms and perceived behavioral control. Other variables that influence intention apart from the main factors include: age, gender, years of service, knowledge, attitudes, work environment, and workload. The results of this study are supported by several previous studies, Research on Analysis of Factors Related to the Compliance of Nurses in Applying the Standard of Nursing Care Inpatient and research Experimental analysis of the effect of standards on compliance and performance; Verbal capability as a variable mediator the effect between discipline techniques and mother ability to give commands to traditional games on down syndrome children's compliance states that support the current research results that ability has an effect on the compliance variable 8,9,10.

CONCLUSION

Based on the results of the analysis and discussion, it can be concluded as follows: (1) Training directly has a positive and significant effect on the ability of Network Midwives in North Sangatta District, East Kutai Regency; (2) Direct training has a positive and significant effect on the compliance of Network Midwives in North Sangatta District, East Kutai Regency; (3) Ability directly has a positive and significant effect on the compliance of Network Midwives in North Sangatta District, East Kutai Regency.

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