

The Influence of Experience, Education, And Training, and Work Environment on The Performance of Village Midwives in Bulukumba Regency

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Abstract

This study aims so that everyone can find out how experience, education, and training and the work environment influence the performance of village midwives in Bulukumba Regency. The subject matter is further elaborated into several sub-problems: 1) Does experience significantly affect village midwives' performance in Bulukumba Regency? 2) Do the education and training have a substantial impact on village midwives' performance in Bulukumba Regency? 3) Does the work environment significantly affect the performance of village midwives in the Bulukumba Regency? And 4) Which variable has the most dominant influence on village midwives' performance in Bulukumba Regency? This research was conducted in all health centers in Bulukumba Regency from June to August 2019. The type of analysis used was descriptive quantitative, and analytic by taking a sample of 78 village midwives in the Bulukumba Regency as respondents determined based on the Minimum Sample Size and used surveys, questionnaires, and data tracing as a data collection tool. Finding out whether experience, training, and work environment influenced the village midwife's performance, the data were analyzed through scoring, validity, and reliability tests and testing classical assumptions. The results showed that experience, training, and work environment had a significant influence on village midwives' performance.

Keywords: Experience, Training, Work Environment, Performance, Village Midwives.

1. Introduction

In theory, wellness is a resource for HR coaching and development (Human Resources). It can be used as capital to introduce a national development program, which can then be viewed as the development of the entire Indonesian population. Globalization and information technologies will undoubtedly overtake society in human life, according to John Naisbith's book *Seven Waves of Life*, which contains it. In Indonesia, health concerns emerge due to a lack of capacity, education, and preparation among health workers and a lack of experience among midwives. One of their

roles and obligations is to raise the number of family planning acceptors to decrease mothers and children who die. As a result, delivering health care to mothers and children is the most significant action in Indonesia's attempts to enhance national health. As a result, skilled and high-quality health-care providers are constantly sought after as a must-have for all. The provision of primary health programs in the national health system may include primary person health efforts (UKP) or the use of primary health science and technologies that will be presented to individuals later. The adoption of UKP is a government, society, and even non-government action that can be carried out at home, in workplaces, and primary health facilities, such as community health centers (CHC) and networks or facilities. Government and society-owned health-care facilities and private-sector health-care services Specialist physicians, small sub-specialist doctors, nurses, midwives, and public health professionals manage health care.

The health sector's growth aim is to achieve a stable Indonesia by growing awareness, use, and realization of a healthy lifestyle to complete a health standard for all and provide an optimum health degree in the unitary state's coverage. With the above emphasis and locus of thought, the government is striving to realize a lifestyle model that can describe national health growth's key objectives. hence the birth and creation of Law no. 23 the Year 1992 regarding health, with the formation of the law, then it is used as the basis for the realization of a healthy life which of course can create the completion of an optimal and adequate degree of health and by existing health standards.

Midwives are competent healthcare providers who are accountable, responsible, and allies with women in delivering assistance, care, and guidance during pregnancy, childbirth, and the postpartum period. A midwife has a significant role in counseling or health education, not just for women but also for their families and the broader population. Midwives may work in various settings, including clinics, significant hospitals, mother, and child hospitals (RSIA), maternity hospitals, and at home, where they are known as private practice midwives (BPM).

On the other hand, a midwife may have work experience, which may be translated as something immediate or significant in terms of a person's capacity to perform a task. A midwife's work experience is critical in determining a person's ability to manage an area of work and provide community service. On the other hand, a midwife's standard of education is very inclusive of the standard of service to the community and midwives' involvement in training provided by different groups to further their expertise and abilities. Both local, state, and national training sessions were held.

To reaffirm the allegations and problems regarding midwives' lack of field experience, insufficient capacity, and low participation of midwives, especially village midwives, follow the training. Then, in April 2019, a pre-research was performed in the form of interviews with village midwives in the five sub-Regency s with the lowest coverage, followed by problems related to village midwives' lack of expertise, ability, and skills, among other things: 1) Competence or Village midwives' training is deemed insufficient. 2) The gap in knowledge and skills among midwives can be seen in the quality of health services, especially family planning midwives. 3) Respect for village midwives' ability to work with passion and pleasure. 4) The inability to access medical supplies will make it impossible for midwives to provide care. 5) Midwives' conduct in delivering medical services is viewed as unfriendly and foreign, arrogant at times, less polite, cold, indifferent, undisciplined, and not pleasant. 6) Workload that is contrary to the core role and intent of becoming a midwife can induce boredom. In fact, in rural areas, public confidence in midwives is feeble, so midwife health workers need a great deal of expertise, high skills, and outstanding and excellent services. Besides, many influences in the work environment have a significant impact on how they perform their roles, duties, functions, and several other deficiencies. It is like managerial performance, institutional pride, motivation, security, life assurance, services, workplace safety, participation leaders in dealing with workplace problems, etc.

2. Literature Review

2.1. Overview of Health Management

Health management is a method or behavior that is applied to control health workers or those who are not health workers to achieve public health goals manifested in several programs.

1. Management by objective (management is implemented to achieve organizational goals).

MBO stands for management by objective, an activity for managers and employees who then formulate the mission and objectives to be achieved. The mission and objectives are the guidelines in carrying out activities during that period. Sample management by the objective application can be found in the work environment of the health center. In this case, a community health center leader's main task is to control the performance of its employees,

especially those who work under their leadership. CHC leader must understand the vision and mission of the CHC under his responsibility as ahead and direct his employees so that they can apply the vision and mission of the CHC institution itself. A CHC leader must explain and provide examples of the application of the image and mission that have been previously set to CHC employees. In this case, a leader's skills and abilities are needed so that later it can be used as an example for CHC employees in carrying out their duties and obligations as a servant. the community in the health sector, especially the CHC.

2. Management is how to get work with others (management is cooperation in achieving goals that are aspired together)

This approach is intended, namely how a CHC leader and his employees can work together to achieve the goals of the CHC itself. However, another resource that can be an inhibiting factor is material. Therefore, a health center agency must be able to manage this to achieve the desired goals together.

3. Management by humanism aspect (management viewed from the part of human behavior)

Humans are an essential aspect of forming management. Of course, they must be active in shaping interactions with other humans. Management can be learned by looking at and observing certain agencies. The management of an agency is determined by the leader, how a leader can motivate his employees to work, especially in the health sector, especially the CHC, a CHC leader must motivate midwives, doctors, and other employees who work under the CHC.

4. Management as a process

This can be seen from the functions of management itself. Its functions include planning, organizing, implementing, monitoring, and evaluating. In terms of health management, the head of the CHC must operationalize this management function to implement public health programs (Darma, 2009).

5. Management as an applied science

This is intended to uphold its social functions in social life (it has benefits that can be applied in the CHC organization). For example, in the CHC organization, both the head of the CHC must have sufficient knowledge. It must continue to enrich his / her abilities regarding what his duty is as a CHC leader.

2.2. Overview of Midwives

According to Leimena, Midwives have the following definition. Midwives are who assigned to a particular area. They are required to live and provide services to the community to achieve a degree of community health in the work area of each midwife, which consists of two or one village / The sub-district, in carrying out its functions. The midwife has a responsibility to the head of the CHC and the authority of the village service post and works closely with apparatuses, village leaders, leaders, and other community leaders. In general, the aims and objectives of the midwives being assigned to various villages are as follows:

1. To improve quality services in the context of equitable coverage in providing services to pregnant women, assistance in childbirth. After childbirth (postpartum), paying attention to infants' and toddlers' condition, and improving services and assistance in using contraception and family planning in fulfilling the strategy, namely carried out in Integrated Service Post (Posyandu) and Village Maternity Hut (Polindes).
2. To capture risk cases that can attack pregnant women (pregnant), childbirth, childbirth, and newborns in providing help and providing referrals if needed.
3. To promote community participation in fostering family planning (KB) and other health services both in the village and anywhere that is the scope of its work coverage.
4. To increase the willingness to live healthily to the community, especially housewives, their families, and organizations with the will and motivation to reduce mortality rates for mothers and children under five.

2.3. Overview of Experience

Work experience is an element that becomes a field and part of the competence of an employee or employee in every agency. In carrying out its activities, every organization, both government and private (business), must be oriented towards achieving predetermined goals to achieve efficiency, effectiveness, and high productivity, both business and performance for the government. With work experience, it will produce quality human resources. Work experience can boost one's productivity in creating optimal work. In this case, the employee's performance can make the best contribution to achieving company goals. Work experience as a midwife can be an indicator of improving adult behavior at work. For midwives who have a more extended working period, they can be experienced, primarily if they

have worked on rare cases. Of course, the midwife will have a promising career, and of course, in serving her patients, the errors that are feared will be minimized.

2.4. Review of Training and Education

Education and training (DIKLAT) can have the same meaning as knowledge, skills, and attitudes that enable humans to fulfill personal goals and social life today and, in the future, (Bambrough, 1998: 1). According to another opinion, Education and Training is strictly separated, namely Education and Training. According to Muchlas (2005), a midwife who has been working for a long time, the midwife will be more skilled because she becomes accustomed to doing her job. Midwives whose working period is relatively long, of course, are more capable than midwives whose active period is relatively new or can be said to be beginners. (Muchlas, 2005; Nuraini et al., 2019; Umanailo, 2020, 2019) Educational background will also affect the quality of a midwife's performance. The higher the midwife's education, the higher the knowledge and understanding of their competence in providing services (Sofyan, 2006; Mu'adi et al., 2020; Nawawi et al., 2020). A midwife who has a relatively long working period or practice can be a senior midwife. A midwife who has been in her job for a long time, the midwife is getting more skilled because she is accustomed to doing her job. Midwives who have a long working period will be more capable than novice midwives (Muchlas, 2005).

2.5. Overview of the Work Environment

The environment can be defined as all the things around us, in the form of living things, inanimate objects, tangible things, or things that cannot be seen by the eye and events that occur due to interactions between the universe's elements. Reliable, professional, and qualified human resources, a good work environment is also very influential. Quality of work environment, adequate quality of work-life (QWL) indeed fosters productive human resources, has quality, is committed, and will later give dedication to their work (Kanto et al., 2020; Lionardo et al., 2020; Rachman et al., 2019). Some things that can improve the work environment's quality include the involvement and participation of staff, career development, feeling proud of institutions, appropriate payment, handling safe at work, adequate facilities, and work safety, minimizing problems that can improve communication well as security at work.

2.6. Overview of Midwife Performance

Performance comes from the word performance. The definition of performance is namely the results of work and work performance. However, performance has a reasonably broad meaning. It does not only mean results but also includes the process of the work being carried out. While Armstrong (2004) emphasizes that performance management is a means of obtaining maximum results from other places, teams, and individuals with how to know and carry out performance within a framework of objectives, standards, or other requirements that have been agreed upon in advance.

3. Methods

3.1. Design and Research Approach

The researchers' approach is a quantitative approach using a survey method, where the results are known by testing the hypothesis. Thus, the data is obtained through observation, distribution of questionnaires/questionnaires, or other data collection methods. This is intended to obtain data that will be analyzed in detail, and then conclusions will be accepted. The research variables include experience, training, and work environment (independent variables), where each independent variable is marked with symbols X1, X2, and X3. The performance of the village midwife becomes the dependent variable and is marked with the symbol Y.

3.2. Research Location

This research was conducted in 20 CHC, where midwives were assigned to Bulukumba Regency. The analysis will be carried out from early June 2019 to the end of September 2019. This study population includes all village midwives involved in the Bulukumba Regency Health Office, totaling 346 midwives and 78 midwives to be sampled.

4. Results

4.1. Hypothesis Testing

Regression research testing was obtained by performing simultaneous testing using the F-test and partial testing and using the t-test.

Table 1. Hypothesis Testing

Variable	Item	<i>Pearson Correlation</i>	Value	Conclusion
Experience (X1)	X _{1.1}	0,638	0,30	Valid
	X _{1.2}	0,760	0,30	Valid
	X _{1.3}	0,539	0,30	Valid
	X _{1.4}	0,661	0,30	Valid
	X _{1.5}	0,566	0,30	Valid
	X _{1.6}	0,567	0,30	Valid

Source: Primary Data Processed

4.2. Multiple Linear Regression Analysis

To influence experience, training, and work environment on the performance of village midwives in Bulukumba Regency, researchers use multiple linear regression analysis, which are free variables, namely confectionery (X1), training (X2), work environment (X3), and variable tied to the performance of village midwives (Y).

From the results of multiple regression tests conducted, the equation is made:

$$Y = 0.549 + 0.216X_1 + 0.312X_2 + 0.915X_3$$

The equation obtained can then be explained as follows:

1. b_0 (constant) =, i.e., if the variable experience, training, and work environment are in a constant state, then the performance of the village midwife is 0.549
2. $b_1 = 0.216$, i.e., if the competency variable (X1) increases, then the performance of village midwives (Y) will increase by 0.216.
3. $b_2 = 0.312$, i.e., if the leadership style variable (X2) increases, then the performance of the village midwife (Y) will increase by 0.312.
4. $b_3 = 0.915$, i.e., if the training variable (X3) increases, then the performance of village midwives (Y) will increase by 0.915.

4.3. T-Test Result (Partial Test)

The test was conducted so that researchers can understand the experience, training, and work environment to the performance of midwives in Bulukumba Regency partially (individually). The t testis performed comparing the values of t count and t table. If t count > t table, then it is said that the influence is significant, and if t count < t table, then it is said that the effect is not substantial. The research result obtained t count for variable experience (X1) greater than t table, namely ($7360 \geq 1,995$) and significance value smaller than 0.05, i.e., 0.216 So, varying expertise has a positive and significant impact on the performance of village midwives in Bulukumba District (Y) partially. Thus hypothesis 1 is accepted the truth.

Table 2. Results of T-Test

Variable	Item	<i>Pearson Correlation</i>	Value	Conclusion
Training (X2)	X _{2.1}	0,655	0,30	Valid
	X _{2.2}	0,677	0,30	Valid
	X _{2.3}	0,700	0,30	Valid
	X _{2.4}	0,797	0,30	Valid

Source: Primary Data Processed

T calculate the training variable (X2) more significant than the t-table, namely ($8440 \geq 1,995$), and the value of significance is smaller than 0.05, i.e., 0.312. So, the variable Leadership Style has a positive and significant influence on village midwives' performance in Bulukumba District (Y) partially. Thus hypothesis 2 accepted the truth.

T count for the working environment variable (X3) is greater than the t-table, i.e. ($7,699 \geq 1,995$), and the significance value is less than 0.05, i.e., 0.000. Thus, the training variables have a positive and significant influence on the State Civil Apparatus's performance (Y) partially. Therefore hypotheses 3 and 4 are known for their authenticity.

5. Discussion

Experience variables are measured through four indicators: length of work, level of experience with confidence, experience with certain qualities, and workover six years. According to Table 4.3, respondents' opinion with training variables is understood that the respondents gave a near-perfect score that was averaged to 4.34. Thus, the respondents enjoyed the experience very supportive of various jobs for village midwives in Bulukumba Regency's scope. That indicator that has more influence in the variable experience is the indicator of long work (X1.1) with an average of 4.50. The respondents' characteristics found midwives with a working period of fewer than two years is 19.23% or frequency of $15 \leq 4 \leq 6$ years of 33.33% or frequency of 26, and ≥ 6 years of 47.43% or frequency of 37.

Table 3. Results of Influence of Experience

Variable	Item	<i>Pearson Correlation</i>	Value	Conclusion
Work Environment (Y1)	Y _{1.1}	0,795	0,30	Valid
	Y _{1.2}	0,820	0,30	Valid
	Y _{1.3}	0,742	0,30	Valid
	Y _{1.4}	0,780	0,30	Valid
	Y _{1.5}	0,763	0,30	Valid

Source: Primary Data Processed

To answer the formulation of problems and hypotheses can be observed through regression analysis in table 4.7. The table shows that experience has a significant influence on the performance of midwives. These findings are aligned and following what Muh has said. Sjabaruddin (2012) researched factors that affect employees' quality of work in the Regional Financial Management Office of Gowa Regency with sampling techniques, namely, purposive sampling. The results of this research found empirical evidence that experience directly impacts the quality of employee performance.

The research shows that work experience greatly affects the length of work, the level of experience with confidence, experience with certain qualities, and workover six years. One aspect of midwife assessment can be seen from the working period, mutase, creativity, and additional tasks that have. It is claimed that Experience (X1) has a significant influence on midwife performance with a greater number of t-count compared to t-table ($7360 \geq 1,995$) and $P = 0,046 \geq 0.05$ with a coefficient value of 0.216. The coefficient can show that the higher the level of experience of a person, the higher the village bid force's quality of performance.

Training variables are measured by three indicators: education and training levels, service needs, and work quality. According to Table 4.3, respondents' opinion with training variables is understood that the respondents gave a near-perfect score that was averaged to 4.45. Thus, the respondents considered training very important for improving village midwives' performance in Bulukumba district. The most dominant indicator in the training variable is the training level indicator (X2.1), with an average of 4.52.

To answer the formula of the second problem, you can observe table 4.7. in the research obtained that training has an important influence on the performance of a midwife. This study's results are in line with the research results conducted by Medan Market Head Office, which states that education and training (training) has a positive and significant influence on employee performance. The research place facts explain if education and education impact the level of education and training, service needs, and quality of work. This result is supported by Siagian (1994), that education and training, at least seven benefits obtained, namely improving the productivity of the organization's work, increasing the determination to achieve the goals that have been set and the smooth coordination so that the organization moves as a whole and rounded unity.

The facts in place show that training (X2) has a negligible influence on midwife performance with greater t-count compared to t-table ($8,440 \geq 1,995$) and $P = 0.040 \geq 0.05$ with a coefficient value of 0,312, the coefficient indicates that the better and higher the level of midwife training, the better and higher the resulting performance.

The work environment variables are measured by seven indicators, namely lighting, work equipment, workplace, communication equipment, workspace, distance of health facilities, and cooperation. According to table 4.3, the respondent's answer to work environment variables can be understood when the respondent gives good value. This can be seen from the number of deals, and the average reaches 4.36. Thus, a good work environment can help the performance of midwives. Therefore, the dominant indicator in the working environment variable is lighting (X3.1), with an average of 4.60.

Answering the problem formulation and the first hypothesis can be observed from path analysis results in tael 4.7. the table shows the work environment has a significant influence on employees' quality of work. The findings of this study show that the work environment has a substantial effect on midwives' performance. This is due to the lack of air circulation, room arrangement, low pollution levels, and lack of lighting (lighting lights) will greatly affect the work situation. As stated by Hamsah in Nurimansah (2002:28), this finding is that a comfortable working environment has a significant impact on performance. The smooth circulation of the air, the arrangement of a well-appointed room, the beauty of pollution levels, and the presence of good lighting are the characteristics of the work environment that will improve performance. In other words, it can be highlighted that a conducive work environment provides facilities or facilities for employees to work effectively and efficiently, which will subsequently result in better performance.

The research place shows that the work environment in Bulukumba district health center can improve midwife work quality. Considering the excellent working environment at the Bulukumba District Health Center will impact the completion of the work of the relevant agencies. Working environment conditions significantly affect job satisfaction or quality of service. A work environment is a place or process where the midwife performs her duties. A comfortable work environment is undoubtedly able to make each comfortable in work and raise the spirit in working. The work environment symbolized by X3 evidence directly impacts the performance of midwives with t-count has a more significant number compared to t-table ($7699 \geq 1,995$) and $P = 0.00 \leq 0.05$ with a coefficient value of 0.915. The coefficient can show that the more adequate the work environment, the better the midwives' quality and performance results.

Based on the research results, variables that are very or have a dominant influence on midwives' performance, mainly in the Bulukumba district, are an unstable work environment. This can be proven and seen from the most significant standardized coefficient (beta) of 0.663. Thus, the performance of midwives in Bulukumba District is strongly influenced by the work environment. It shows that there are an excellent working atmosphere and conducive of course, the performance of midwives will undoubtedly increase by the quality, quantity, professionalism, and targets to be achieved. The work environment is an aspect of facilities and infrastructure that must be appropriate so that later the behavior and responsibilities of midwives will be created. This is evidenced by the work environment symbolized as X3 directly impacting midwives showing t-count must have a more significant number than t-table ($7699 \geq 1,995$) and $P = 0.00 \leq 0.05$ with a coefficient value of 0.915. The coefficient can show that the more adequate the work environment, the better the midwives' quality and performance results.

6. Conclusion

Experience on the performance of village midwives has more influence in the variable experience is the indicator of long work (X1.1) with an average of 4.50. The respondents' characteristics found midwives with a working period of fewer than two years is 19.23% or frequency of $15 \leq 4 < 6$ years of 33.33% or frequency of 26, and ≥ 6 years of 47.43% or frequency of 37. Training on the performance of village midwives has a negligible influence on midwife performance with greater t-count compared to t-table ($8,440 \geq 1,995$) and $P = 0.040 \geq 0.05$ with a coefficient value of 0,312, the coefficient indicates that the better and higher the level of midwife training, the better and higher the resulting performance. The work environment on the performance of village midwives has a more significant number compared to t-table ($7699 \geq 1,995$) and $P = 0.00 \leq 0.05$ with a coefficient value of 0.915. The coefficient can show that the more adequate the work environment, the better the midwives' quality and performance results. Dominant variables to midwife performance evidenced by the work environment symbolized as X3 directly impacting midwives showing t-count must have a more significant number than t-table ($7699 \geq 1,995$) and $P = 0.00 \leq 0.05$ with a coefficient

value of 0.915. The coefficient can show that the more adequate the work environment, the better the midwives' quality and performance results.

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