

The Factors Affecting to the Performance of Midwifery in Antenatal Care Services of Mother and Children's Health Program in Ransiki Health Primary Manokwari Selatan District and Bintuni Borderline

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ABSTRACT

Background: The performance of midwives in antenatal care services is carried out in accordance with the service standards in the MCH program set and various factors that influence the performance of midwives are age, employee status, years of service, knowledge, attitudes, motivation, manager skills (coordinating midwives) and facilities.

Objective: To find out the factors related to the performance of midwives in the KIA antenatal care program at Ransiki Health Center, South Manokwari Regency, West Papua Province.

Research Method: Analytical with cross sectional study design. The population was all midwives in Ransiki Health Center and a sample of 46 people (total poulia). Data were obtained using questionnaires and analyzed using chi square test and logistic binary regression.

Results: Factors related to the performance of midwives in ANC services for MCH programs at Ransiki Public Health Center were age (p-value 0.002; RP = 2.697; CI95% = 1.262 - 5.763), employee status (p-value 0.001; RP = 7.333; CI95% = 2,821; CI95% 1,416 - 5,619), working period (p-value 0,000; RP = 3,864; CI95% (1,782 - 8,377), attitudes (p-value 0,016; RP = 1,895; CI95% (1,191 - 3,015), motivation (p-value 0,000; RP = 2,750; CI95% (1,464 - 5,164), facilities (p-value 0,015; RP = 1,833; CI95% 1,258 - 2,673) and reward (p-value 0,008; RP = 2,009; CI95% (1,237 - 3,264). While factors not related to the performance of midwives in KIA ANC program services in Ransiki Public Health Center is knowledge (p-value 0.717; RP = 1,200; CI95% (0,735 - 1,960) and manager skills (p-value 1,000; Rp = 1,083; CI95% (0,667 - 1,757). Dominant factors related to performance midwives in ANC services in

the mother and child program is motivation (p value= 0,001; OR = 16,713; CI= 95%= 3,254-85,846) and facility (p value= 0,034; OR = 13,153; CI= 95%= 1,217-142,213).

Keywords: Performance, Midwifery, ANC services, Health Mother and child program

1. INTRODUCTION

Health Centre (Puskesmas) is a functional organization that organizes health efforts that are comprehensive, integrated, equitable, acceptable and affordable for the community, with funding from the government and the community. In implementing Puskesmas management, it includes planning, organizing, monitoring and evaluating (Azwar, 2013). The performance of health workers is a very important element in efforts to maintain and improve national health development. The study of performance provides clarity that internal and external factors are very supportive for individuals in achieving work performance (Mardiyah, et al. 2013). Technical assistance for midwives for village midwives has not been carried out accordingly with the needs and difficulties of communication (Ministry of Health in Jannah, 2016). Midwives are one of the health workers who have important and strategic positions, especially in reducing maternal mortality, figures infant pain and death. Midwives also provide continuous midwifery services and paripuma, which focus on prevention aspects, promotion based on partnerships and community

empowerment together with other health workers to always ready to serve anyone who needs it whenever and wherever he is located (RI Ministry of Health, 2012).

Minimum service standard data in the South Manokwari District Health Office in 2017 for the achievement of K1 pregnancy visits was 71.45% and K4 were 29.62% obstetric complications treated 69.9%. Pregnant women who received TT immunization was 19.5%, 50.93% Fe tables and obstetric complications that were treated had increased by 20.15% (Manokwari District Health Office, 2017).

Based on the Local Area Monitoring Report (PWS) Ransiki Health Center was ranked as the fifth lowest in ANC visits in 2016 K1 visits reached 72% and ANC visits 57.3% and in 2017 K1 visits reached 88.9% and visits ANC K4 11.1% (Ransiki Health Center, 2017). This data shows that K4 visits are lower than K1. The performance of a good midwife can maintain a K1 visit so that pregnant women can have a visit until the fourth visit (K4), so that it can improve maternal health and prevent complications in labor. Based on the description of the above problems, the researcher was interested in conducting a study of "Factors related to the performance of midwives in the MCH antenatal care service at Ransiki Health Center in South Manokwari Regency".

2. MATERIALS AND METHODS

2.1 Types of Research

This study was an observational analytic study with a cross sectional study design. The cross sectional study is a study design that studies variables including risk factors and variables including effects observed at the same time (Sugiyono, 2013).

2.2 Time and Location of Research

This research was conducted at Ransiki Health Center in October 2018 by collecting secondary and primary data.

2.3 Population and Samples

1. Population

Population is the whole object of research or object studied by Sugiyono (2013). The

population in this study were 46 midwives at Ransiki Health Center.

2. Samples

The sample is a portion of the population that is considered representative of the population, but if the population is less than 100, then the population is taken as a whole into a sample (Arikunto, 2010). The sampling technique used a saturated sampling technique, so the sample size in this study was a total population of 46 people.

3. RESULTS

a. Age relationships with midwives' performance in ANC services

Table 1. Age Relationship with Midwife Performance in ANC services at Ransiki Health Center

No	Age	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	< 30 year	23	79,3	6	20,7	29	100
2	≥ 30 year	5	29,4	12	70,6	17	100
Total		28	60,9	18	39,1	46	100
<i>p-value = 0,002; RP = 2,697; CI95% (1,262 – 5,763)</i>							

Table 1 shows that of 29 people aged <30 years as many as 23 people (79.3%) performance was lacking in ANC services and good as many as 6 people (20.7%). Whereas from 17 people aged >30 years as many as 5 people (29.4) performed less in ANC and good services as many as 12 people (70.6%). The results of the chi square statistical test on the significance value of 95% ($\alpha = 0.05$) obtained p-value 0.002 or $p < \alpha$ (0.05). This means that there is a relationship between age and midwife performance in ANC services in South Manokwari District. When viewed from the value of $RP = 2,697$; $CI95\%$ (1,262 - 5,763) interpreted that midwives aged <30 years tended to have less performance in ANC services 2,697 times more than midwives aged >30 years.

b. Relationship between Employee Status and Performance of midwives in ANC services

Table 2. Relationship between Employee Status and Performance of midwives in ANC services at Ransiki Health Center

No	Staff status	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	Non Permanent	22	84,6	4	15,4	26	100
2	Permanent	6	30	14	70	20	100
Total		28	60,9	18	39,1	46	100

p-value = 0,001; RP = 2,821; CI95% (1,416 – 5,619)

Table 2 shows that of the 26 people with irregular employee status (PTT) as many as 22 people (84.6%) performance was lacking in ANC services and good as many as 4 people (15.4%). Whereas from 20 permanent employees 6 people (30%) performed less in ANC and good services as many as 14 people (70%). The results of the chi square statistical test on the significance value of 95% ($\alpha = 0.05$) obtained p-value 0.001 or $p < \alpha$ (0.05). This means that there is a relationship between employee status and the performance of midwives in ANC services in South Manokwari District. When viewed from the value of RP = 2,821; CI95% (1,416 - 5,619) interpreted that midwives with the status of temporary employees tended to have less performance in ANC services 2,821 times higher than midwives with permanent employee status.

c. Relationship between Work Period and Performance of midwives in ANC services

Table 3. Relationship between Work Period and Performance of midwives in ANC services at Ransiki Health Center

No	Work period	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	< 5 year	23	92	2	8	25	100
2	> 5 year	5	23,8	16	76,2	21	100
Total		28	60,9	18	39,1	46	100

p-value = 0,000; RP = 3,864; CI95% (1,782 – 8,377)

Table 3 shows that out of 25 people with a working period of <5 years as many as 23 people (92%) performance is lacking in ANC services and good as many as 2 people (8%). While from 21 people working period >5 years as many as 5 people (23.8%) performance is lacking in ANC and good services as many as 16 people (76.2%). The results of the chi square statistical test on the significance value of

95% ($\alpha = 0.05$) obtained p-value 0,000 or $p < \alpha$ (0.05). This means that there is a relationship between tenure and the performance of midwives in ANC services in South Manokwari District. Value of RP = 3.864; CI95% (1,782 - 8,377) was interpreted that the work period of <5 years midwives tended to have less performance in ANC services 3,864 times compared to midwives whose working period was > 5 years.

d Relationship between Knowledge and Performance of midwives in ANC services

Table 4. Relationship between Knowledge and Performance of midwives in ANC services at Ransiki Health Center

No	Knowledge	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	Less	7	70	3	30	10	100
2	Good	21	58,3	15	41,7	36	100
Total		28	60,9	18	39,1	46	100

p-value = 0,717; RP = 1,200; CI95% (0,735 – 1,960)

Table 4. shows that out of 10 people with less knowledge 7 people (70%) perform less in ANC services and good as many as 3 people (30%). Whereas from 36 people with good knowledge as many as 21 people (58.3%) performance was lacking in ANC and good services as many as 15 people (41.7%). The results of the chi square statistical test on the significance value of 95% ($\alpha = 0.05$) obtained p-value 0.717 or $p > \alpha$ (0.05). This means that there is no relationship between knowledge and performance of midwives in ANC services in South Manokwari District. When viewed from the value of RP = 1,200; CI95% (0.735 - 1.960) which was interpreted as meaningless.

e. Relationship between Attitudes and Performance of midwives in ANC services

Table 5. Relationship between Attitudes and Performance of midwives in ANC services at Ransiki Health Center

No	Attitude	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	Less	16	84,2	3	15,8	19	100
2	Good	12	44,4	15	55,6	27	100
Total		28	60,9	18	39,1	46	100

p-value = 0,016; RP = 1,895; CI95% (1,191 – 3,015)

Table 5 shows that out of 19 people with less attitudes 16 people (84.2%) had less performance in ANC services and good as many as 3 people (15.8%). While from 27 people with good attitude as many as 12 people (44.4%) performance was less in ANC and good services as many as 15 people (55.6%). The results of the chi square statistical test on the significance value of 95% ($\alpha = 0.05$) obtained p-value 0.016 or $p < \alpha$ (0.05). This means that there is a relationship between attitude and performance of midwives in ANC services in South Manokwari District. Value of $RP = 1,895$; $CI95\%$ (1,191 - 3,015) interpreted that the attitude of midwives who were less likely to perform less in ANC services was 1,895 times compared to the attitude of a good midwife.

f. Relationship between Motivation and Performance of midwives in ANC services

Table 6. Relationship between Motivation and Performance of midwives in ANC services at Ransiki Health Center

No	Motivation	Midwife Performance in ANC services				n	%
		Less		Good			
		n	%	n	%		
1	Low	21	87,5	3	12,5	24	100
2	High	7	31,8	15	68,2	22	100
Total		28	60,9	18	39,1	46	100
<i>p-value = 0,000; RP = 2,750; CI95% (1,464 - 5,164)</i>							

Table 6 shows that of the 24 people with low motivation as many as 21 people (87.5%) performance is lacking in ANC services and good as many as 3 people (12.5%). While from 22 people with high motivation as many as 7 people (31.8%) performance was lacking in ANC and good services as many as 15 people (68.2%). The results of the chi square statistical test on the significance value of 95% ($\alpha = 0.05$) obtained p-value 0,000 or $p < \alpha$ (0.05). This means that there is a correlation between motivation and performance of midwives in ANC services in South Manokwari District. When viewed from the value of $RP = 2.750$; $CI95\%$ (1,464 - 5,164) interpreted that the motivation of low midwives tended to have less performance in ANC services of 2,750

times compared to midwives who had high work motivation.

4. DISCUSSION

a. Age Relationships with Performance of midwives in ANC services

The results showed that there was a relationship between age and midwife performance in ANC services at Ransiki Health Center (p-value 0.002). Test results of the prevalence ratio of $RP = 2,697$; $CI95\%$ (1,262 - 5,763) interpreted that midwives aged <30 years tended to have less performance in ANC services 2,697 times greater than midwives aged >30 years. The results of this study are in line with the research of Widyawati (2017) in the Deleng Pokhisen Health Center and the Southeast Aceh District Mamas Health Center revealing that age has a significant relationship with the performance of midwives.

This is in accordance with the research conducted by Dewi (2014) which shows that based on age, all respondents were included in the age of >30 years. The age of respondents who are classified as old gives an illustration that respondents have sufficient experience. Respondents' experiences shape behavior that will become a habit. The results of this study are consistent with the opinion of Azwar (2013) that age has a relationship with one's physical and psychological strength. At certain ages a person will experience changes in work performance. Young age is easier to be subjected to persuasion or it is easier to be given input on something new with an approach. This means that someone with a younger age is more approachable and more easily given input new things compared to someone with old age.

b. Relationship between Employee Status and Performance of midwives in ANC services

The results showed that there was a relationship between employee status and the performance of midwives in ANC services at Ransiki Health Center (p-value 0.001). The results of this study are in line

with the research conducted by Adiputri (2014), that there is a relationship between employee status and performance of midwives in ANC services. This is related to the compensation given. The prevalence ratio test results are interpreted that the status of non-permanent employees tends to have less performance in ANC services 2,821 times greater than midwives with permanent employees.

The lack of performance of midwives in ANC services is due to employees who are permanent employees or state civil servants who have a fixed salary with incentives given according to performance. Meanwhile, non-permanent employees giving compensation depend on the Puskesmas policy. The existence of differences in the delivery of these incentives causes dissatisfaction of midwives who relate their performance. Financial compensation is included in the enabling factors that support or relate to the appearance of performance. Midwives who are non-PTT employees who do not receive appropriate financial compensation will encourage dissatisfaction in themselves so that doing the work will be less good and vice versa. Another study was supported by Wawan (2007), from the results of the multivariate test the most related factors were reward and ability to the performance of midwives in childbirth assistance. The research by Yulianti (2014) also explained that financial compensation with the performance of the village health polyclinic had a significant relationship in service.

This will lead to village midwives not to improve their performance as village midwives, because the results received are the same and there is no difference from other village midwives. This problem needs to be addressed again, that the compensation received by midwives in this case the services received needs to be adjusted to the level of performance that has been done, so that this will spur midwives to further improve their performance in carrying out their basic tasks and functions as midwives.

c. Relationship of Work Period with midwife's performance in ANC services

The results showed that there was a relationship between tenure and the performance of midwives in ANC services at Ransiki Community Health Center, South Manokwari Regency (p-value 0,000). The prevalence ratio test results are interpreted that the working period of <5 years tends to have less performance in ANC services 3.864 times greater than midwives with > 5 years of work. The results of the study are in line with the research conducted by Mardiah (2013), that the tenure has a relationship with the performance of midwives.

Work period is the period of time a person has worked in an office, agency and so on. A person's work period (length of work) needs to be known because it can be one indicator of the tendency of workers. For example, it is associated with work productivity, the longer a person works, the higher his productivity will be, because he will be more experienced in completing the tasks entrusted to him (Siagian, 2012).

The actual working period can determine whether a midwife is right to carry out a job as a midwife. The longer the work period of a midwife, it is hoped that she will be more in control of the conditions in her working area. However, the working period is also related to the responsibilities in implementing the ANC, so that the tenure is not too related in the implementation of KIA management (Dewi, 2014).

The relationship of tenure to the performance of midwives is due to the long working period increasing the experience, so that it can improve the performance of midwives. This is in accordance with the opinion of Karawati (2011), that work periods are expressed as work experience, more than 10 years of service are considered Seniority (Karwati, 2011).

d. Knowledge Relations with the performance of midwives in ANC services

The results showed that there was no relationship between tenure and performance of midwives in ANC services

at Ransiki Health Center (p-value 0.762). The results of the study are not in line with the research conducted by Mardiah, L (2013) that there is a relationship between knowledge and midwife performance in the scope of K4 with a significance level of P. Value 0.01. That the knowledge of midwives is related to the performance of midwives in K4 visits because if midwives have good knowledge, midwives are able to provide good services to patients so that patients are satisfied with the services provided by midwives and patients willing to conduct repeat visits thus motivating midwives to improve its performance.

In general, most midwives in the Ransiki Puskemas have good knowledge (78.3%) knowing about the goals of antenatal care and the schedule of pregnancy visits, while insufficient knowledge is that the examination needed in ANC standards includes anamnesis examination to find out if a pregnant woman needs further examination or laboratory tests such as pre-eclampsia or HIV testing. This can have an impact on not thorough examination, especially laboratory tests that are needed in pregnant women in preventing or finding any complications or complications in pregnancy.

The results of the analysis showed that respondents with less knowledge as much as 70% of performance were lacking in ANC services, while respondents with good knowledge as much as 58.3% performance lacked test results in the prevalence ratio of $RP = 1,200$; $CI95\% (0.735 - 1.960)$ which is interpreted as not meaningful or is a protective factor due to the presence of variables that are more strongly related to work performance that affect knowledge in ANC services in the MCH program at Ransiki Health Center.

According to Notoatmodjo (2011), that knowledge possessed by someone is the initial trigger of behavior, including behavior in work. Knowledge is very necessary in order to change mindset and behavior. A good knowledge of a job will make someone master the field of work.

e. Relationship between attitude and performance of midwives in ANC services

The results showed that there was a relationship between attitude and performance of midwives in ANC services at Ransiki Health Center (p-value 0.016). The results of the study are in line with the research conducted by Nur, F (2013) there is a relationship between attitudes and the role of midwives in achieving coverage of ANC services. Midwives who have had good attitudes will tend to play a good role in achieving ANC services 1 time compared to midwives who have less attitudes.

Attitude is the readiness of a person to act (G. Alport 1935 in Prayoto, 2014). In addition, attitude is a mental and nerve state of readiness, which is regulated through experience that provides a dynamic relationship or directed towards the individual response to all objects and situations associated with it. Attitude is a reaction or response of someone who is still closed to a stimulus or object (Prayoto, 2014).

The low performance of midwives was found in the attitudes of midwives who were less than 84.2% in ANC services, while the respondents with good attitude were 44.4%. The prevalence ratio test results obtained value of $RP = 1,895$; $CI95\% (1,191 - 3,015)$ interpreted that attitudes that are less likely to perform in ANC services are less 1,895 times greater than good attitudes.

The best attitude of midwives is an attitude that does not come out of the path of ethical codes and health disciplines. In addition, the attitude of midwives must be accompanied by an attitude of patience, firmness, fast acting, accommodating and so on. The attitude of the health personnel is of course accompanied by the color of his personality which is characterized by the personality of the health worker characterized by character / character, both the temperament which is already homeostatic. The attitude of midwives must begin

with motivation and perceptions based on profession (Walyani, 2015).

The relationship between the attitude of midwives in ANC services needs attention from Puskesmas management by paying attention to the satisfaction of midwives at work, because the attitude of midwives is less formed by dissatisfaction with the performance performed.

f. Relationship between Motivation and Performance of midwives in ANC services

The results showed that there was a relationship between motivation and midwives' performance in ANC services at Ransiki Health Center (p-value 0,000). The results of this study are in line with the research conducted by Mardiah (2013) that there is a correlation between motivation in K4 visits and the performance of midwives in examining pregnant women. The results of the analysis showed that respondents with low motivation as much as 87.5% had less performance in ANC services and on respondents who had high motivation as much as 31.8% less performance in ANC services. The results of the prevalence ratio test interpreted that the low motivation of midwives tended to perform in ANC services less than 2.750 times greater than the high motivation of midwives.

Motivation is external stimulation in the form of objects or not objects that can foster encouragement for people to possess enjoy, master, or reach objects / not object (Mubarak, 2011). Motivation is a driver for midwives in conducting performance in ANC services on examining pregnant women, here we can be seen from the willingness and high ability to adapt to the community and provide health services in accordance with their duties and functions so that the implementation of tasks is carried out optimally and patients want to do the return visit to the Puskesmas and the midwife were increasingly motivated in providing examination services for pregnant women to patients, so that the performance of midwives was getting better and more

satisfying. The high motivation of midwives (47.8%) from questionnaire answers because they are motivated in quality pregnancy services, using their own potential as midwives, feeling comfortable with the conditions of the work environment as midwives, being able to complete tasks as midwives according to the specified time, can cooperate with other colleagues in achieving work goals, able to carry out work easily and carefully as midwives in pregnancy services and feel safe in carrying out work as midwives.

5. CONCLUSION

- a. There is a relationship between age and midwife's performance in ANC services at Ransiki Health Center (p-value 0.002; RP = 2.697; CI95% = 1,262 - 5,763).
- b. There is a relationship between employee status and the performance of midwives in ANC services in Ransiki Health Center (p-value 0.001; RP = 7.333; CI95% = 2.821; CI95% 1.416 - 5.619).
- c. There is a relationship between tenure and performance of midwives in ANC services at Ransiki Health Center in South Manokwari Regency (p-value 0,000; Rp. 3,864; CI95% (1,782 - 8,377).
- d. There is no correlation between knowledge with the performance of midwives in ANC services at Ransiki Health Center (p-value 0.717; RP = 1,200; CI95% (0.735 - 1,960).
- e. There is a relationship between attitudes and performance of midwives in ANC services at Ransiki Health Center (p-value 0.016; RP = 1.895; CI95% (1,191 - 3,015).
- f. There is a correlation between motivation and midwife's performance in ANC services at Ransiki Health Center (p-value 0,000; RP = 2,750; CI95% (1,464 - 5,164).

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