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The Influence of Training, Teamwork, and The Role of Health Workers on The Performance of Posyandu Cadres in Tarokan Village

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Abstract

Research aim: *This study aims to analyze and determine the influence of training, teamwork, and the role of health workers on the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency, both partially and simultaneously..*

Design/Method/Approach: *This research employs a quantitative associative approach with a non-experimental design. The study was conducted from October to December 2025, involving a population of 83 active Posyandu cadres. Saturated sampling was used, meaning all members of the population served as respondents. Data analysis was performed using multiple linear regression analysis via SPSS*

Research Finding: *The results indicate that training, teamwork, and the role of health workers simultaneously have a significant effect on cadre performance ($F = 19.760$, $p < 0.001$). Partially, training has a significant positive effect ($\beta = 0.285$, $t = 3.327$, $p = 0.001$). However, teamwork ($\beta = -0.255$, $t = -2.839$, $p = 0.006$) and the role of health workers ($\beta = -0.412$, $t = -4.612$, $p < 0.001$) unexpectedly show significant negative effects on performance. The model explains 42.6% of the variance in cadre performance ($R^2 = 0.426$).*

Theoretical contribution/Originality: *This study contributes to community health management literature by revealing a paradoxical pattern: while training enhances capabilities, excessive teamwork and health worker involvement in this specific rural context may lead to over-dependency and reduced autonomy, challenging conventional human resource assumptions.*

Practitioner/Policy implication: *The findings suggest that policymakers should focus not just on the presence of support, but on the quality and structure of interventions. There is a need to balance supervision with cadre empowerment to avoid undermining self-efficacy and independent decision-making*

Research limitation: *The study is limited to a specific geographic scope (Tarokan Village), which may limit generalizability. Additionally, the cross-sectional design does not capture how these relationships evolve over time, and 57.4% of the variance is influenced by unmeasured factors like motivation and financial incentives..*

Keywords : *Training, Teamwork, Role of Health Workers, Posyandu Cadre Performance.*

1. Introduction

Health is a fundamental element in sustainable human development, defined by the World Health Organization not merely as the absence of disease, but as a comprehensive state of physical, mental, and social well-being that enables individuals to participate productively in society [1]. In Indonesia, this holistic approach is operationalized through Posyandu (Integrated Health Service Posts), which function as the frontline of community-based health services. Posyandu plays a crucial role in improving maternal and child health, nutrition, immunization, and disease prevention by encouraging direct community participation [2]. Within this program, Posyandu cadres serve as key actors performing essential tasks ranging from conducting basic health examinations and collecting population data to disseminating health education. The success of Posyandu activities depends not only on the number of cadres involved but also on their ability to collaborate, communicate, and manage activities efficiently. However, despite the existence of supporting factors such as training programs, teamwork structures, and health worker support from community health centers (Puskesmas), cadre performance in many regions remains suboptimal, as evidenced by irregular activity schedules, declining community participation, and challenges in implementing training outcomes [3].

Previous research has established that training significantly enhances cadres' technical capabilities, knowledge, and confidence in delivering health services [4]. Well-designed and sustained training programs enable cadres to become more professional, accurate in data recording, and active in health education activities. Similarly, effective teamwork has been identified as crucial in creating comfortable work environments, facilitating good communication, and fostering shared responsibility in carrying out Posyandu duties [5]. Furthermore, the role of health workers from Puskesmas, including supervision, technical guidance, and provision of supporting facilities, has been proven to have a strong relationship with improving cadre performance across various regions [6], [7]. However, most existing studies have focused primarily on examining two variables and have not comprehensively addressed the interrelationship among these three factors simultaneously. Additionally, there remains a contextual gap as cadre performance effectiveness is heavily influenced by local variations in human resource capacity, Puskesmas support, and governance structures [8]. Current evidence shows that many Posyandu cadres in Indonesia are not fully prepared to carry out integrated primary services due to lack of knowledge, continuous training, and minimal support from health workers [9].

This study addresses the identified research gap by simultaneously examining the influence of training, teamwork, and the role of health workers on Posyandu cadre performance in Tarokan Village, Tarokan District, Kediri Regency. The novelty of this research lies in its comprehensive approach to analyzing three critical variables concurrently within a specific local context where, despite the implementation of training programs, teamwork initiatives, and health worker support from Tarokan Community Health Center, cadre performance remains below optimal levels. While previous research has established the individual importance of these factors, few studies have investigated their collective impact within a single analytical framework, particularly in rural settings where resource constraints and institutional support vary considerably. By examining these variables within a specific local setting characterized by unique socio-cultural dynamics and resource availability, this research contributes to bridging the gap between theoretical understanding and practical application in community health management.

The purpose of this study is to analyze the influence of training, teamwork, and the role of health workers on the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency. Specifically, this research aims to: (1) determine the partial effect of training on cadre performance; (2) assess the partial effect of teamwork on cadre performance; (3) evaluate the partial effect of health worker role on cadre performance; and (4) examine the simultaneous effect of these three variables on cadre performance. This study employs a quantitative associative approach with multiple regression analysis to provide empirical evidence of how these factors interact and influence cadre performance. The findings are expected to provide evidence-based recommendations for strengthening human resource management practices in community health services and improving the quality of Posyandu operations at the village level. This article is structured as follows: the literature review section presents relevant theories and previous research; the methodology section describes the study design, population, instruments, and analytical techniques; the results section presents findings from statistical analyses; the discussion section interprets findings in relation to existing literature; and the conclusion summarizes key findings and provides practical implications.

1.1.Statement of Problem

Given the background and preliminary findings discussed above, the problem formulation in this study is: "Do training, teamwork, and the role of health workers affect the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency either partially or simultaneously?" Despite the implementation of various supporting mechanisms including training programs, teamwork initiatives, and health worker support from Tarokan Community Health Center, cadre performance remains below optimal levels, as evidenced by irregular activity schedules, declining community participation rates, and persistent challenges in implementing training outcomes. This raises critical questions about the extent to which these three factors training, teamwork, and the role of health workers individually and collectively influence cadre performance in delivering community-based health services at the village level

1.2. Research Objectives

The goal of this study is to determine and examine whether the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency is impacted, partially or simultaneously, by training, teamwork, and the role of health workers. Specifically, the objectives of this research are: (1) to determine the partial effect of training on the performance of Posyandu cadres; (2) to assess the partial effect of teamwork on the performance of Posyandu cadres; (3) to evaluate the partial effect of the role of health workers on the performance of Posyandu cadres; and (4) to examine the simultaneous effect of training, teamwork, and the role of health workers on the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency.

2. Method

This study employed a quantitative approach with a cross-sectional design. The research was conducted among Posyandu cadres as the study population. The variables in this study consisted of independent and dependent variables. The independent variables included training, teamwork, and the role of health workers, while the dependent variable was the performance of Posyandu cadres. The training variable refers to structured activities designed to improve the knowledge and skills of cadres [4]. Teamwork is defined as collaboration among cadres in carrying out their responsibilities [5]. The role of health workers refers to guidance,

supervision, and support provided to cadres [6]. Meanwhile, performance refers to the ability of cadres to effectively carry out their roles in delivering health services [8], [9], [10]. Data were collected using structured questionnaires that had been tested for validity and reliability. Data analysis was performed using multiple linear regression to examine the effect of independent variables on the dependent variable, both partially and simultaneously.

2.1 Validity and Reliability Test

The validity and reliability tests were conducted to ensure that the research instrument used in this study is appropriate and consistent in measuring the variables. The validity test was carried out using Pearson Product Moment correlation, where each item is considered valid if the value of r-count is greater than the r-table at a significance level of 5%.

Furthermore, the reliability test was conducted using Cronbach's Alpha. A variable is considered reliable if the Cronbach's Alpha value is greater than 0.70, indicating that the instrument has good internal consistency and can be used for further analysis.

3. Results

3.1 Validity Test

Table 1. Validity Test Result

Variable	Item	R-Calculate	R-Table 5%	Criteria
Pelatihan (X1)	X1.1.1	0,417	0.213	**Valid**
	X1.1.2	0.422	0.213	
	X.1.2.1	0.522	0.213	
	X1.2.2	0.468	0.213	
	X1.3.1	0.522	0.213	
	X1.3.2	0.454	0.213	
	X1.4.1	0.514	0.213	
	X1.4.2	0.437	0.213	
	X1.5.1	0.562	0.213	
	X1.5.2	0.461	0.213	
	X1.6.1	0.452	0.213	
	X1.6.2	0.456	0.213	
	X1.7.1	0.541	0.213	
	X1.7.2	0.364	0.213	
Kerja Sama Tim(X2)	X2.1.1	0.630	0.213	**Valid**
	X2.1.2	0.479	0.213	
	X2.2.1	0.570	0.213	
	X2.2.2	0.521	0.213	
	X2.3.1	0.538	0.213	
	X2.3.2	0.525	0.213	
	X2.4.1	0.459	0.213	
	X2.4.2	0.446	0.213	

	X2.5.1	0.490	0.213	
	X2.5.2	0.585	0.213	
Peran Petugas Kesehatan (X3)	X3.1.1	0.529	0.213	**Valid**
	X3.1.2	0.529	0.213	
	X3.2.1	0.453	0.213	
	X3.2.2	0.401	0.213	
	X3.3.1	0.548	0.213	
	X3.3.2	0.586	0.213	
	X3.4.1	0.523	0.213	
	X3.4.2	0.430	0.213	
	X3.5.1	0.656	0.213	
	X3.5.2	0.425	0.213	
	X3.6.1	0.496	0.213	
	X3.6.2	0.460	0.213	
Kinerja Kader Posyandu (Y)	Y1.1	0.701	0.213	**Valid**
	Y1.2	0.333	0.213	
	Y2.1	0.630	0.213	
	Y2.2	0.575	0.213	
	Y3.1	0.533	0.213	
	Y3.2	0.224	0.213	
	Y4.1	0.641	0.213	
	Y4.2	0.648	0.213	
	Y5.1	0.566	0.213	
	Y5.2	0.552	0.213	
	Y6.1	0.563	0.213	
	Y6.2	0.563	.0213	

Source : SPSSv27 Output, Processed by Authors (2026)

The validity test results presented in the first data display indicate that all statement items from the four variables (Training, Teamwork, Role of Health Workers, and Posyandu Cadre Performance) are declared valid because all r-calculated values exceed the r-table value of 0.213 at a 5% significance level. For the Training variable (X1), r-calculated values range from 0.364 to 0.562; for Teamwork (X2), values range from 0.446 to 0.630; for Role of Health Workers (X3), values range from 0.401 to 0.656; and for Posyandu Cadre Performance (Y), values range from 0.224 to 0.701. These results confirm that all research instruments are valid and suitable for measuring the studied variables.

3.2 Reliability Test

Table 2. Reliability Test Result

Variable	Cronbach Alpha	Coefficient Crobach Alpha	Criteria
Pelatihan (X1)	0.731	0.70	Reliable
Kerja Sama Tim (X2)	0.709	0.70	Reliable
Peran Petugas Kesehatan (X3)	0.735	0.70	Reliable
Kinerja Kader Posyandu (Y)	0.792	0.70	Reliable

Source : SPSSv27 Output, Processed by Authors (2026)

The reliability test results show that all research variables have Cronbach's Alpha values exceeding the minimum threshold of 0.70, indicating good internal consistency. The training, teamwork, and role of health workers variables demonstrate strong reliability, while the Posyandu cadre performance variable is also reliable, confirming that the research instrument is appropriate for repeated measurements. Furthermore, the normality test based on the Normal P–P Plot indicates that the standardized residuals are normally distributed, as the data points closely follow the diagonal line. This result confirms that the normality assumption required for multiple linear regression analysis has been fulfilled

3.3 Descriptive Analysis

Table 3.Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Pelatihan(X1)	84	58.00	70.00	65.3690	3.08818
Kerja sama tim(X2)	84	40.00	50.00	46.5833	2.48954
Peran petugas Kesehatan(X3)	84	50.00	60.00	56.0119	2.85173
kinerja kader posyandu(Y)	84	51.00	60.00	57.3214	2.82058
Valid N (listwise)	84				

Source : SPSSv27 Output, Processed by Authors (2026)

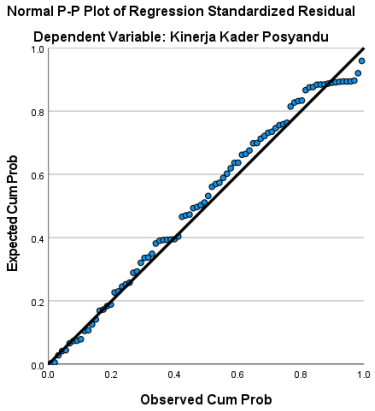
The descriptive analysis provides an overview of respondents' perceptions regarding training, teamwork, the role of health workers, and the performance of Posyandu cadres in Tarokan Village. Overall, the results indicate that respondents tend to perceive training programs as adequate in supporting cadre competencies, teamwork as generally cooperative and supportive, and the role of health workers as fairly supportive in guiding and supervising Posyandu activities. In addition, the performance of Posyandu cadres is perceived to be at a

moderate to good level, reflecting satisfactory implementation of duties and responsibilities in community health services.

3.4 Classical Assumption Test

3.4.1 Normality Test

Figure 1. P-Plot Graph



The normality test results demonstrate that the data points are distributed along and very close to the diagonal reference line in the Normal P-P Plot of Regression Standardized Residuals. The observed cumulative probabilities align closely with the expected cumulative probabilities across the entire range from 0.0 to 1.0, with only minimal deviations visible. This pattern indicates that the residuals follow a normal distribution. Therefore, the regression model satisfies the normality assumption, which is one of the key prerequisites for multiple linear regression analysis. This confirms that the model is appropriate and valid for drawing statistical inferences regarding the dependent variable "Posyandu Cadre Performance.

3.4.2 Multicolinearity Test

Table 4. Multicolinearity Test Result

Model		Collinearity Statistics	
		Tolerance	VIF
1	(Constant)		
	Pelatihan (X1)	.978	1.023
	Kerja Sama Tim (X2)	.891	1.122
	Peran Petugas Kesehatan(X3)	.898	1.113

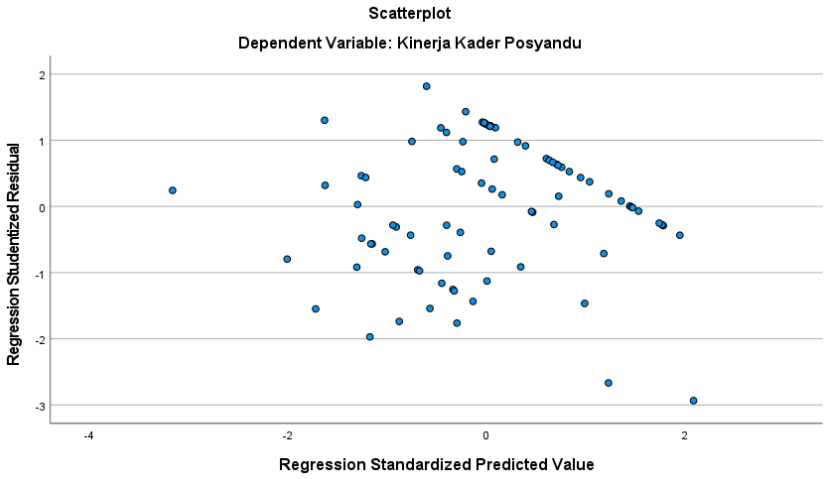
a. Dependent Variable : Kinerja Kader Posyandu
b. Source: SPSSv27 Output

The multicollinearity test results indicate that there is no multicollinearity problem among the independent variables. This is evidenced by all Tolerance values being greater than 0.10 and all Variance Inflation Factor (VIF) values being below 10. Specifically, Training (X1)

has a Tolerance of 0.978 and VIF of 1.023, Teamwork (X2) has a Tolerance of 0.891 and VIF of 1.122, and Role of Health Workers (X3) has a Tolerance of 0.898 and VIF of 1.113. These results suggest that the independent variables are not highly correlated with each other and therefore do not interfere with the interpretation of the multiple linear regression results, ensuring the stability and reliability of the regression coefficients

3.4.3 Heteroscedasticity Test

Figure 1. Results of Heteroscedasticity Test



The heteroscedasticity test results based on the scatterplot indicate that the residual data points are randomly dispersed both above and below zero on the Y-axis without forming any clear or systematic pattern such as funnel shapes, curves, or clusters. This random dispersion pattern suggests that heteroscedasticity does not occur in the regression model, indicating constant residual variance across all levels of predicted values. This confirms that the regression model satisfies the homoscedasticity assumption, which is essential for ensuring the validity of hypothesis testing and the reliability of standard errors in the regression analysis.

3.5 Multiple Linear Regression Analysis

Table 5. Multiple Linear Regression Results

Model		Unstandardized Coefficients		Standardized Coefficients
		B	Std. Error	Beta
1	(Constant)	64.664	2.458	
	Pelatihan (X1)	.075	.023	.285
	Kerja Sama Tim (X2)	-.076	.027	-.255
	Peran Petugas Kesehatan (X3)	-.155	.034	-.412

a. Dependent Variable : Kinerja Kader Posyandu
b. Source: SPSSv27 Output

Based on the results of the multiple linear regression analysis, the regression equation is formulated as follows: $\mathbf{Y = 64.664 + 0.075X_1 - 0.076X_2 - 0.155X_3}$

This equation provides several important interpretations. The constant value of 64.664 represents the baseline predicted value of Posyandu Cadre Performance when all independent variables (training, teamwork, and role of health workers) are equal to zero. This relatively high constant suggests that there is a substantial baseline level of performance attributed to factors not captured in the model. The regression coefficient for Training (X_1) is 0.075, indicating that each one-unit increase in training score is associated with an increase of 0.075 units in cadre performance, holding other variables constant. This positive relationship aligns with theoretical expectations that improved training enhances performance. However, the regression coefficient for Teamwork (X_2) is -0.076, suggesting that each one-unit increase in teamwork is associated with a decrease of 0.076 units in cadre performance. Similarly, the regression coefficient for Role of Health Workers (X_3) is -0.155, indicating that each one-unit increase in health worker involvement is associated with a decrease of 0.155 units in cadre performance. These unexpected negative coefficients suggest that in this specific context, increased intensity of teamwork coordination and health worker supervision may be creating dependency, reducing cadre autonomy, or reflecting suboptimal implementation approaches that inadvertently hinder rather than support cadre performance.

3.6 Hypothesis Test

3.6.1 t-Test

Table 6 t-Test

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	64.664	2.458		26.303	<.001
	Pelatihan	.075	.023	.285	3.327	.001
	Kerja Sama Tim	-.076	.027	-.255	-2.839	.006
	Peran Petugas Kesehatan	-.155	.034	-.412	-4.612	<.001

a. Dependent Variable: Kinerja Kader Posyandu

Source: SPSSv27

The t-test results for partial hypothesis testing reveal that all three independent variables have statistically significant effects on Posyandu Cadre Performance at the 5% significance level. First, the Training variable (X_1) has a t-calculated value of 3.327 with a significance level of 0.001 ($p < 0.05$) and a standardized beta coefficient of 0.285. This indicates that training has a significant positive effect on cadre performance, meaning that improvements in training

quality, content, and implementation directly enhance cadre capabilities and service delivery effectiveness. Second, the Teamwork variable (X_2) yields a t-calculated value of -2.839 with a significance of 0.006 ($p < 0.05$) and a standardized beta coefficient of -0.255. This unexpected negative effect suggests that increased teamwork intensity or poorly structured team coordination in this context may reduce individual cadre autonomy and decision-making effectiveness. Third, the Role of Health Workers variable (X_3) produces a t-calculated value of -4.612 with a significance of less than 0.001 ($p < 0.001$) and a standardized beta coefficient of -0.412, indicating the strongest effect among all predictors. This significant negative relationship suggests that excessive health worker involvement or over-supervision may create dependency, undermine cadre self-efficacy, or reflect inadequate delegation of responsibilities. The standardized coefficients reveal that the role of health workers has the largest absolute impact (-0.412), followed by teamwork (-0.255), and training (0.285). These results confirm that all three variables significantly influence cadre performance, though two operate in unexpected directions that warrant further contextual investigation.

3.6.2 F-Test

Table 7. F-Test Result

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	281.044	3	93.681	19.760	.000[b]
	Residual	379.277	80	4.741		
	Total	660.321	83			

a. Dependent Variable: Kinerja Kader Posyandu

b. Predictors: (Constant), Peran Petugas Kesehatan, Pelatihan, Kerja Sama Tim

The F-test produces an F-calculated value of **19.760** with a significance of **<0.001** (<0.05), indicating that Training, Teamwork, and the Role of Health Workers simultaneously have a significant effect on Posyandu Cadre Performance, so the regression model used is fit and suitable for predicting the dependent variable

3.7 Coefficient of Determination (R2)

Table 8. Coefficient Determination Result

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.652[a]	.426	.404	2.177

a. Predictors: (Constant), Peran Petugas Kesehatan, Pelatihan, Kerja Sama Tim

The coefficient of determination results show that the R value is 0.653, indicating a moderate to strong relationship between the independent variables and Posyandu cadre performance. The R Square value of 0.426 indicates that 42.6% of the variation in Posyandu cadre performance can be explained by training, teamwork, and the role of health workers, while the remaining 57.4% is influenced by other factors outside the research model. Furthermore, the Adjusted R Square value of 0.404 suggests that the explanatory power of the model remains substantial after adjusting for the number of independent variables included in the analysis, confirming that the three predictors collectively contribute meaningfully to understanding cadre performance.

3.8 Discussion

3.8.1 The influence of training on the performance of Posyandu cadres

The findings reveal that training has a positive and significant influence on the performance of Posyandu cadres. This suggests that improved training programs enhance cadres' knowledge, skills, and overall effectiveness in delivering health services. This result is in line with prior studies, which emphasize that training is a crucial factor in strengthening human resource competence and performance [4], [7].

3.8.2 The influence of teamwork on the performance of Posyandu cadres

The results indicate that teamwork has a negative and significant effect on cadre performance. This finding contrasts with conventional theories that highlight teamwork as a driver of improved performance through better coordination and communication. However, previous research also suggests that poorly managed teamwork may reduce individual accountability and foster dependency among members [5]. In this context, the negative effect may be attributed to unclear task allocation and limited individual initiative within the team.

3.8.3 The influence of the role of health workers on the performance of Posyandu cadre

The analysis shows that the role of health workers has a negative and significant impact on cadre performance. This result differs from many previous studies that report a positive contribution of health worker support [6]. In this study, the negative relationship may be explained by excessive involvement or over-supervision, which can limit cadre autonomy and reduce their confidence. Consequently, cadres may become more dependent and less proactive in carrying out their responsibilities.

4. Conclusion

This study found that training, teamwork, and the role of health workers significantly influence the performance of Posyandu cadres in Tarokan Village, Tarokan District, Kediri Regency, both partially and simultaneously. The multiple linear regression analysis produced the equation $Y = 64.664 + 0.075X_1 - 0.076X_2 - 0.155X_3$. Training shows a positive and significant effect ($\beta = 0.285$, $t = 3.327$, $p = 0.001$), indicating that improved training enhances cadre knowledge, skills, and service effectiveness. In contrast, teamwork ($\beta = -0.255$, $t = -2.839$, $p = 0.006$) and the role of health workers ($\beta = -0.412$, $t = -4.612$, $p < 0.001$) show significant negative effects, suggesting that excessive coordination and supervision may reduce cadre autonomy and performance. Simultaneously, all variables significantly affect performance ($F = 19.760$, $p < 0.001$), with a coefficient of determination of $R^2 = 0.426$

(Adjusted R^2 = 0.404), indicating that 42.6% of the variation in cadre performance can be explained by these variables.

This research contributes to the development of community-based health service management by providing new empirical insights into the complex relationship between training, teamwork, and health worker support. Unlike conventional assumptions that all support mechanisms positively influence performance, this study reveals that excessive coordination and supervision may have counterproductive effects in certain contexts. The findings emphasize that while training remains a critical factor in improving competence, the implementation of teamwork and health worker involvement must be carefully managed to avoid dependency and reduced autonomy. Therefore, this study offers practical implications for policymakers and health institutions to design more adaptive, context-sensitive strategies that balance support and independence in improving cadre performance.

However, this study has several limitations. The sample was limited to 83 Posyandu cadres in a single village, which may restrict the generalizability of the findings to other regions with different socio-cultural and organizational characteristics. Although the model explains 42.6% of the variance, a substantial proportion (57.4%) is influenced by other factors not examined in this study, such as motivation, incentives, community participation, and work environment. In addition, the cross-sectional design limits the ability to capture changes over time, and the use of self-reported data may introduce response bias. Future research is recommended to involve larger and more diverse samples, apply longitudinal and mixed-method approaches, and explore additional variables to obtain a more comprehensive understanding of factors influencing Posyandu cadre performance.

AI Declaration

The authors acknowledge the use of artificial intelligence (AI) tools, including Scholar AI, in supporting the research and writing process, particularly in literature search, reference management, and language refinement. All outputs generated by AI tools have been carefully reviewed, validated, and revised by the authors to ensure accuracy, originality, and compliance with academic standards.

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