# MODEL OF RELATIONSHIP BETWEEN EDUCATION AND EXERCISE, INFORMATION ACCESS, NORM SUBJECTIVE WITH THE EMPOWERMENT OF FAMILY PLANNING CADRE (FPC) IN KLATEN DISTRICT

Juda Julia Kristiarini<sup>1\*</sup>, Syamsul Hadi<sup>2</sup>, Kusnandar<sup>3</sup>, Endang Sutisna S<sup>4</sup>

Student of Doctoral Study Program of Community Development / Empowerment Counseling, Postgraduate Program, Sebelas Maret University Surakarta
\*corresponding author: yudayulia02@gmail.com

#### Abstract

This study aims to examine the relationship of education and exercise (training), access to information, subjective norms with the empowerment of family planning cadres. The study design was a correlational observational type, with a survey approach. The total sample of the study was 220 people, which were taken based on proportional cluster random sampling. Data analysis techniques use path analysis. The results of the study concluded: (1) Training does not directly influence the Empowerment of FPC; (2) Information Access has a direct effect on the Empowerment of FPC; (3) Subjective Norms directly influence the Empowerment of FPC; (4) Training directly influences Subjective Norms; (5) Information Access has a direct effect on Subjective Norms; (6) Subjective Norms are able to mediate the influence of Training on the Empowerment of FPC; (7) Subjective Norms are able to mediate the influence of Information Access on FPC Empowerment.

Keywords: education and training, access to information, subjective norms, and empowerment of FPC

# 1. INTRODUCTION

The problems faced by Indonesia are large population growth and low quality of life. The total population of Indonesia in 2015 was 255.18 million people with an area of 1,910,931.32 km2, a population density of 134 people/km2. During the last five years (2010-2015) Indonesia's population growth rate was 1.43 percent. Indonesia's population continues to increase. In a period of fifteen years (2000 to 2015), the population of Indonesia experienced an increase of around 50.06 million people or an average of 3.33 million annually (BPS, 2015). The high rate of population growth has an impact on the provision of food, non-food consumption materials, agricultural land, housing land, employment, education, public health level, and quality of life of the community (BPS, 2015).

Indonesia is included in the category of sluggish countries in achieving the Millennium Development Goals, which are now being continued by the Sustainable Development Goals (SDGs). This delay in achievement is due to the high maternal mortality rate (MMR). MMR in 2012 reached 359/100,000 live births, and in 2015 amounted to 305/100,000 live births (BPS, 2015).

Especially in Klaten Regency, the participation of family planning acceptors spread in 34 sub-districts as follows: Fertile Couples (FC) unmet need 10.13%, FC is not a FPC participant 21.29% of the total FC 201,950. Active family planning participants successfully trained as many as 158,943 (78.70%) acceptors. Early year active family planning participants were 142,048 (70.39%) acceptors, additional active FPC participants were 16,895 (8.37%) acceptors. New participants were 26,481 (13.11%) acceptors and drop out participants as many as 9,586 (4.75% acceptors. This means the number of FPC acceptors) active still low, requires an awareness raising to take part in a family planning program to increase the level of family welfare manifested in the Norms of the Happy Prosperous Family (now: quality family) (Profile of BKKBN Klaten, 2016).

The role of FPC spread in each village greatly determines the success of the family planning program. FPC are very effective motivators and recruiters of family planning acceptors. FPC are members of the community who work voluntarily in the success of family planning programs. The role of family planning cadres includes socializing family planning programs, inviting, motivating, recruiting couples of childbearing age into active family planning participants. In this regard, it is necessary to empower family planning cadres in increasing their role in family planning programs.

In each region, empowerment of the FPC needs to be encouraged because at this time the region has been given autonomy to regulate its own area. The implementation of regional autonomy is oriented towards improving people's welfare by always paying attention to the interests and aspirations that grow in the community. In addition, the implementation of regional autonomy can ensure the harmony of relations between regions one with the other regions, which means that it is able to build cooperation between regions to improve joint welfare and prevent inequality between regions.

Several factors influence the empowerment of family planning cadres, namely: (1) external factors include: training, leadership, type of work, work design, reward system, resources (facilities), organizational climate (environment); (2) internal factors include: level of education, knowledge, personality, attitude, perception, background, experience (years of service), age, motivation, job satisfaction, organizational commitment (Kadir et al, 2018).

Given the various factors that can influence the empowerment of family planning cadres, this study only focuses on education and training factors, access to information and subjective norms. Based on the above can be formulated by an issue of research, namely how relationship model between education and training, access to information and subjective norms with the empowerment of family planning cadres?

#### THEORETICAL BASIS

#### **Natural Volunteer Model**

Pancoast et al. (1982 in Sulaeman, 2018) explained that the Natural Helper Model is based on the premise that in each community there is an informal (informal) network of volunteers. People who have problems naturally look for other people they trust, and spontaneous interactions occur. Tessaro et al (2000) the Model Volunteer Experience is a model and a theory designed to enhance an individual's ability to help others in theirown social network.

# **Planned Behavior Theory**

Theories that study behavioral science include the Theory of Planned Behavior. The theory of Planned Behavior begins with the Theory of Resoned Action (TRA) is a theory that focuses on individual intentions as the main determinant of certain behaviors. Intention is a plan or possibility that individuals will behave in certain situations, Good behavior is true - true or not. Theory of reasoned action explains that individuals do something behavior for a number of the most basic reasons is that the behavior manifested by an individual is preceded by a motivation called intention to behave. TRA says strong intentions will lead to strong efforts to carry out a behavior which will further increase the likelihood of such behavior (Murti, 2017).

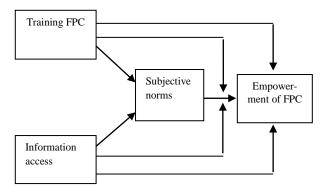
#### **Social Cognitive Theory**

Behaviors is a product of interaction with the environment and cognitive processes. Social and behavioral influence imitas i according Mille and Dolard in declared that when people observe a model who is doing a behavior along with the consequences of that behavior, then people will remember the sequence of events and use the information to guide behavior to be performed. Bandura's social learning theory proposed in 1963 expanded into Social Cognitive Theory in 1986. Bandura said social system that fosters competence / ability to provide a variety of useful resources that allow individuals to steer itself thus increasing the opportunities to realize his wish (Murti, 2017).

# THINKING FRAMEWORK

The provision of education and training to the FPC directed to change the attitudes and behavior of cadres, so that volunteers have a positive subjective norms to family planning. In addition, in the globalization era, FPC can also obtain knowledge easily through access to information available on the internet. Disclosure of this information, it can improve the subjective norm to memb a ntu cadres FPC to carry out the functions and duties properly. Furthermore, this subjective norm can increase the empowerment of family planning cadres in the success of the National Family Planning program in their region. The empowerment of family planning cadres will ultimately increase the coverage of family planning programs, namely the EFAs in their area actively participate in family

planning programs in order to improve their quality of life. Based on the explanation above, the framework of thinking about relationships between research variables can be described as follows.



Picture 1

Model of the Relationship between Training, Information Access, Subjective Norms and Empowerment of FPC

#### 2. METHODS

The study design was a correlational analytic type with a survey approach. This research was conducted in the Klaten Regency area in 2019. The study population was a cadre of family planning in the area of Kecamatan Prambanan, Manisrenggo, Karanganongko. South Klaten, North Klaten, Jatinom, Kebonarum, Kemalang, Tulung, Karanganom, Bayat, Delanggu, Juwiring and Ceper. The total population is 401 cadres. The number of research samples is 220 FPC. The sampling technique uses proportional cluster random sampling. Data analysis techniques use path analysis.

Instruments pen e sioner elitian my form which is based constructs, variables and indicators that have been set. Based on the results of the questionnaire validity test with 30 respondents, it is known that all items (12 items) education questionnaires and cadre exercises are valid, with the value of corrected item-total correlation ranging from 0.403 to 0.796. As many as 10 items (out of 12 items) the information access questionnaire wasdeclared valid, with the value of the corrected item-total correlation ranging from 0.399 to 0.876. All items (8 items) subjective norm questionnaires are declared valid, with the value of corrected item-total correlation ranging from 0.502 to 0.764. A total of 14 items (out of 16 items) for FPC empowerment questionnaires were declared valid, with the value of corrected item-total correlation ranging from 0.416 to 0.907. Furthermore, the four questionnaires were declared reliable, because they had the value of Cronbach's Alpha 0.923 (education and training); 0.876 (access to information); 0.893 (subjective norms); and 0.921 (empowerment of FPC).

# 3. RESULT AND DISCUSSION

Relationship between Training, Subjective Norms, and Empowerment of FPC

Based on the analysis, it is known that the relationship model between training, subjective norms, FPC empowerment and residual empowerment (other variables) can be described as follows.

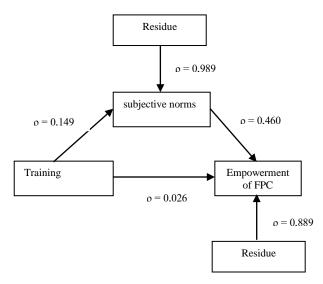


Figure 2

Model of Relationship between Training and Subjective Norms and Empowerment of FPC The picture shows that the direct effect of training on FPC empowerment is 0.026, while the effect of Training on FPC empowerment mediated by Subjective Norms is 0.149 + 0.460 = 0.230. So the magnitude of the influence of Training on FPC empowerment mediated by Subjective Norms is greater than the direct influence of training on FPC empowerment.

Testing the significance of the indirect effect of tTraining on the empowerment of FPC mediated by subjective norms can be calculated by the z-statistical formula developed by Sobel (1982) in Latan and Temalagi (2013) as follows.

$$z = \frac{a x b}{\sqrt{b^2 x s_a^2 + a^2 x s_b^2 + s_a^2 x s_b^2}}$$

#### Information:

a = path coefficient for a

b = path coefficient for b

 $S_a$  = standard error for a

 $S_b = standard error for b$ 

Based on the above formula, the z value is 0.2305 > 1.96 (at the 0.05 significance level), it can be concluded that Subjective Norms are able to mediate the influence of training on FPC Empowerment.

# Relationship between Information Access, Subjective Norms, and Empowerment of FPC

Based on the analysis it is known that the model of the relationship between access to Information, subjective norms, empowerment of FPC and residuals (other variables) can be described as follows.

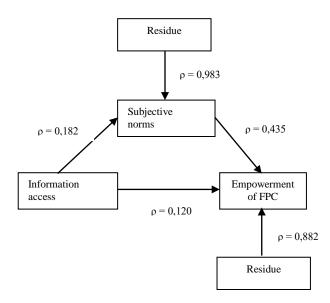


Figure 3

Model of the Relationship between Information Access, Subjective Norms and Empowerment of FPC

The picture shows that the direct effect of Information Access on FPC Empowerment is 0.120, while the effect of Information Access on FPC Empowerment mediated by Subjective Norms is 0.182 + 0.435 = 0.617. So the magnitude of the effect of Information Access on the Empowerment of Family Planning Cadres mediated by Subjective Norms is greater than the direct influence of Information Access to FPC Empowerment. Based on the calculation of z-statistics obtained z value is 2.007 > 1.96 (at the significance level of 0.05), it can be concluded that Subjective Norms are able to mediate the effect of Information Access on FPC Empowerment.

#### DISCUSSION

# Relationship between Training, Subjective Norms, and Empowerment of FPC

Direct training influence on FPC Empowerment not significant, because the results of the t test are 0.624 with a significance of 0.534 > 0.05. This happens because the implementation of training for family planning cadres is not carried out optimally, so that cadres lack sufficient knowledge and skills to carry out their functions and duties as family planning cadres. However, the direct influence of the Subjective Norms is significant, because the results of the t test are 2.219 with a significance of 0.028 < 0.05. This happens

because, through training the cadres get new insights to change beliefs, attitudes and behavior towards family planning program, so that norms subjectively believed that originally contained less care planning program can turn out to be be concerned about family planning. Furthermore, this subjective norm can increase the empowerment of FPC. This is evidenced from the results of the t test of 7.573 with a significance of 0.000 < 0.05 which states that there is the influence of Subjective Norms on the Empowerment of FPC.

Subjective norms is a social factor that influences a person to behave. A person will have a desire for an object or behavior if he is affected by people around him to do it or he believes that the environment or people in surrounding support for what he did. Perceived behavioral control relates to the resources that are owned and the opportunity to do something (Tan and Thomson, 2000). Therefore, a cadre who believes that the people around him or the environment supports what he does, the cadre will be able to demonstrate his empowerment as a FPC.

The relationship between education and training with subjective norms is closely related to increasing the empowerment of family planning cadres, because subjective norms can be influenced by education and work training that have been given to family in line with the results of research planning cadres. This is by Ratnasari and Sunuharyo (2018), Muslikh and Nugraha (2014), Khamis and Njau (2016), Asnan, et.al (2016), Trawardani, et.al (2015) who concluded that variables related to the performance of integrated service post cadres were education and training. The results of the study by Noorlena et.al. (2014) concluded that there was a significant relationship between education, knowledge, length of time as a cadre, and work with the activities of Cadres in the Implementation of the Alert Village.

# Relationship between Information Access, Subjective Norms, and FPC Empowerment

The direct effect of the Access to Information is a significant empowerment FPC premises t test results at 3.000 and significance 0.003 < 0.05. This happens because in the current era of globalization, FPC have the convenience of accessing information available on the internet. In general, FPC have mobile phones that can be used to obtain information needed in order to support their duties as family planning cadres.

Research result also shows that information access direct effect on subjective norms, because the results of the t test are 2.729 with a significance of 0.007 < 0.05. This shows that the relationship between access to information and subjective norms of family planning cadres has a close relationship, because access to information can improve cadre abilities and understanding and can subsequently influence the subjective norms of familyplanning cadres .

Rothman (1987, in Sulaemen et.al., 2015) explains that the role of accessing health information includes knowledge about health and health care, the ability to find, understand, interpret and communicate health information, the ability to request

appropriate health care and make critical health decisions. The results of the Sulaeman et.al (2015) study explain that the role of access to health information is to improve health knowledge and skills, make decisions, and request health services. Access to health information is obtained by the community from puskesmas officers and mass media such as television and radio. Through this source of information, the community gets knowledge about healthy ways of life, how to care for individual health, how to maintain environmental cleanliness, how to care for pregnancy, how to care for babies, and so on. The easy access to information obtained by the community will increase people's knowledge about clean and healthy behavior.

# 4. CONCLUSION

Based on the results elitian pen can e concluded: (1) Training no effect Retained Earnings directly against FPC empowerment; (2) Information Access has a direct effect on the Empowerment of FPC; (3) Subjective Norms directly influence the Empowerment of FPC; (4) Training directly influences Subjective Norms; (5) Information Access has a direct effect on Subjective Norms; (6) Subjective Norms are able to mediate the influence of Training on the Empowerment of FPC; (7) Subjective Norms are able to mediate the influence of Information Access on FPC Empowerment.

### 5. RECOMMENDATION

In connection with the above conclusion, there are some suggestions that may be filed, namely: (1) The local government, in this case health care workers health center (village midwives), in giving training for FPC do not just seem a mere formality, but must use strategy and innovative training methods, training materials are adjusted to cadre needs, and training training time must adjust cadre loose time; (2) The next researcher is expected to add other variables in the research model.

# **REFERENCES**

- [1] Ajzen, Icek. (2005). Attitude, Personality, and Behavior, second edition. USA: Open University Press.
- [2] Asnani, Mattalatta, and Gunawan, (2016). Analysis of the Effect of Education and Training, Compensation, and Work Environment on Employee Performance at the Soppeng District Regional Secretariat. *Mirai Management Journal*, Vol.1 Number 2, October 2016: 1-27.
- [3] BPS. (2015). 2015 *Intercensal Population Survey*. Jakarta: Central Bureau of Statistics.

- [4] BKKBN. (2016). Profile of the Klaten District National Family Planning Welfare Agency. Klaten: BKKBN.
- [5] DeBate, R., Plescia, M. (2005). I Could Live Other Places, But This Is Where I Want To Be: Support for Natural Helper Initiaties. *International Quarterly of Community Health Education*; 23 (4), 327-339.
- [6] Ife, JW, (2015). Community Development: Creating Community Alternatives-vision, Analysiis and Practice. Melbourne: Longman.
- [7] Kadir HA, Yusuf D., Rajindra, Marwana, Mutmainnah. (2018). Performance of Family Planning Field Officers, *Sinar Manajemen Journal*, Vol 5, Number 1, 2018.
- [8] Khamis K. and B. Njau, (2016). Health care worker's perception of quality of health care at the outpatient department in Mwananyamala Hospital in Dar es Salaam, Tanzania, *Tanzania Journal of Health Research*, Vol.18, Number 1, January 2016.
- [9] Kusmiati, D. (2010). *Behavior Basics*. Jakarta: RI Ministry of Health Health Workers Education Center.
- [10] Latan, H. and S. Temalagi. 2013. *Multivariate Analysis: Engineering and Application*. Bandung: Alfabeta.
- [11] Mardikanto T. (2010). *Models of Empowerment Community*. Surakarta: Collaboration between the Faculty of Agriculture, UNS and the Publishing UPT and Printing UNS (UNS Press).
- [12] Mikkelsen, Britha. (2015). *Participatory Method and Field Empowerment Efforts*. Jakarta: Indonesian Torch Foundation.
- [13] Murti, Bishma. (2017). *Epidemiology Principles and Research Methods*. Surakarta: Public Health Study Program, Postgraduate Program, Sebelas Maret University.
- [14] Muslikh, I. and Ch. A. Nugraha. (2014). Analysis of Factors Affecting the Performance of Assistants for Village Family Planning in Achieving the Success of Male Family Planning in Pemalang District, *Media Economics and Management*, Vol. 29 Number 2, July, 2014.
- [15] Ndraha, Taldzuhuh, (2011). Community Development, Preparing the Community to Take Off. Jakarta: Dian Aksara.
- [16] Norlena, V. K. Dewi, Suhrawardi, (2014). Factors Associated with Activity of Cadres in the Implementation of the Village Alert in Banjarmasin City in 2013, *Health Scale Journal*, Volume 5 Number. 1 of 2014.
- [17] Notoatmodjo, S. (2013). *Health Promotion and Behavioral Sciences*. Jakarta: Rineka Cipta.

- [18] Pranarka, AMW and V. Moeljarto. (2016). *Empowerment: Concepts and Implementation*. Jakarta: CSIS.
- [19] Ratnasari, MD and B.S. Sunuharyo. (2018). Effects of Education and Training on Performance Employees Through Mediator Variables Ability to Work Employee (Study of Gresik Petrochemical PT Employees), *Business Administration Journal (JAB)*, Vol. 58 Number 1 May 2018: 210-218.
- [20] Rehn NS, Ovretveit J, Laamanen R, Suominen S, Sundel J, Brommels M. (2016). Determinants of Health Promotion Action: Comparative Analysis of Local Voluntary Associations in Four Municipalities in Finland. Health International Promotion. New York: Palgrave MacMillan.
- [21] Sastropoetro, S. (2013). Participation, Communication, Persuasion and Discipline in Development. Bandung: Alumni.
- [22] Scott VK, L. B. Gottschalk, K. Q. Wright, C. Twose, M. A. Bohren, M. E. Schmitt, and N. Ortayli, (2015). Community Health Workers' Provision of Family Planning Services in Low and Middle Income Countries: A Systematic Review of Effectiveness, *Studies in Family Planning*, 2015; 46 [3]: 241–261.
- [23] Setyowati, E., Arsiyah, A. R. U. Balahmar. (2016). The Role of Family Planning Field Officers and Assistants for Village Family Planning in Socializing Contraception (Study in Kebonagung Village, Sukodono District, Sidoarjo Regency), *JKMP* (ISSN. 2338-445X and E-ISSN. 2527 9246), Vol. 4, Number 2, September 2016, 117-234
- [24] Soekanto, Soerjono. (2012). *An Introduction to Sociology*. Jakarta: Rajawali Press.
- [25] Sugiyono. (2010). Statistics for Research. Bandung: Alfabeta.
- [26] Suharto, Edi. (2010). *Building a Community Empowering People*. Bandung: PT Refika Aditama.
- [27] Sulaeman, Endang Sutisna. (2018). *Model Learning and Health Behavior Theory: Concepts and Applications*. Surakarta: UNS Press.
- [28] \_\_\_\_\_ (2015). Model of Community Empowerment in Health: Program Study of Alert Village. Surakarta: UNS Press.
- [29] Surjono, A. and T. Nugroho, (2013). *Para-digms, Models, Development Approaches, and Community Empowerment in the Era of Regional Autonomy*. Malang: Bayumedia Publishing.
- [30] Tessaro, IA, Taylor, S., Belton, L., Campbell, MK, Benedict, S., Kelsey, K. (2000). Adapting a Natural (Lay) Helpers Model of Change for Worksite Health Promotion for Women. *Health Educ Res*; 15 (5): 603-614.

- [31] Trawardani, IB, A. Prasetya, Y. Mayowan (2015). The Effect of Training on Job Capability Which Impacts on Employee Performance (Study on Employees of PT Bank Rakyat Indonesia (Pesero) Tbk Lumajang Branch), *Journal of Business Administration (JAB)*, Vol. 29 Number 1, December, 2015: 51-58.
- [32] Usman, Sunyoto. (2008). *Community Development and Empowerment*. Yogyakarta: Student Library.
- [33] Weidert K., A. Gessessew, S. Bell, H. Godefay, and N. Prata, (2017). Community Health Workers as Social Marketers of Injection Contraceptives: A Case Study from Ethiopia, *Global Health: Science and Practice*, 2017, Vol.5, No. 1.
- [34] Widarjono, Agus. (2015). Applied Multivariate Analysis: With SPSS, AMOS, and SmartPLS Programs. Yogyakarta: UUP STIM YKPN.
- [35] Widayanti, Sri. (2012). Community Empowerment: Theoretical Approach, *Journal of Social Welfare Sciences*, Vol. 1, Number 1, January-June 2012.