The Factors Affect Performance of Public Health Personnel Affiliated with Network Institute of Public Health and Medical Technology College toward ASEAN Communities

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Abstract
As network institute of public health and medical technology college(NIoPH&MTC) is going to take part in ASEAN community, it is important for the public health personnel to improve their potential so that they can fit into life within ASEAN. The research was aimed at studying the factors that affect the performance of public health personnel toward Asean communities. Means of simple random sampling technique was used to collect 272 samples from public health personnel. The reliability of the overall questionnaire was 0.77. Data analysis was carried out in term of percentage, mean and multiple regression analysis. The results were found as follows: self-efficacy and expectancy on operating were identified for predicting ability on operating of public health personnel significantly ($p < .01$) by 46.60 percent of accuracy. Thus, it is necessary to empower public health personnel in upgrade self-efficacy with management and public health networking and higher expectancy on operating with knowledge and essential skills required to perform medical and public health may be training or making a study trip to other agencies that are leading in the country or in ASEAN. This should contribute to health personnel for developing competency.

Keywords: factor affect, public health personnel, performance, network Institute of public health and medical technology college

Introduction

As Thailand is going to take part in ASEAN community, it is important for the public health personnel to improve their potential so that they can fit into life within ASEAN and play a vital role in the provision of health care globally link closely to the productivity and quality of care provision within health care organization. The Ministry of public health needs to prepare the workforce for the development of high potential and adapt quickly to the changes that will occur in the ASEAN community. Health problems such as inadequate number of personnel to support the increasing number of public health issues more. The lack of fairness in the distribution of personnel. Potential employees are also limited in dealing with more sophisticated health problems. The need to accelerate the development of human resources, quality and service models to prepare as well. Although health personnel, have a responsibility to use their knowledge and skills in professional practice to their full potential. So you can see that the development of human resources is a critical mission component of management requires both art and science of planning, manpower recruitment, selection process, place the right man on the right job and to make the most potential of the workforce, to keep them working to ultimate outcome.

Following concept that Albert Bandura 's theory of Self- Efficacy Theory that it is the process of human thought to be considered as promoting motivation in human offensive behavior to the operational aspects. The belief that we can change the behavior of the three factors is the personal factor, behavioral condition term and conditions, the environment, and found that if a person has high self- efficacy, and is expecting results from higher performance. People tend to do the exact behavior.

In accordance with Jitaram p.(2013) was found that the self-efficacy and expectancy the results of operations were positively correlated with the health practitioners in the community of healthy families were statistically significant, the level of .05. In accordance with Hanan Al-Ahmadi (2009) was found that job performance is positively correlated with organizational commitment, job satisfaction and personal and professional variables. Both job satisfaction and organizational commitment are strong predictors of nurses' performance. Job performance is positively related to some personal factors, including years of experience, nationality, gender, and marital status. Level of education is negatively related to performance. In accordance with Magdalene Hilda\Awases(2006) It was found that factors affecting the performance of nurses negatively were identified such as: lack of recognition of employees who are performing well, quality performance outcomes and an absence of a formal performance appraisal system and poor working conditions. Various factors contribute to both the positive and negative performance of professional nurses in Namibia. This study emphasis the importance of developing strategies to promote the performance of nurses; build knowledge and expertise; develop mechanisms for improving the performance of nurses; expand leadership and management capacity; and generate information and knowledge through research. However, factors affecting the performance of public health personnel affiliated with NIoPH&MTC toward ASEAN communities have not yet been examined. There is a need to seek evidence about their performance and to develop strategies to monitor and improve their performance.

Objective

The objective of this study was to determine the factors which positively and negatively affect performance of public health personnel affiliated with NIoPH&MTC**.**

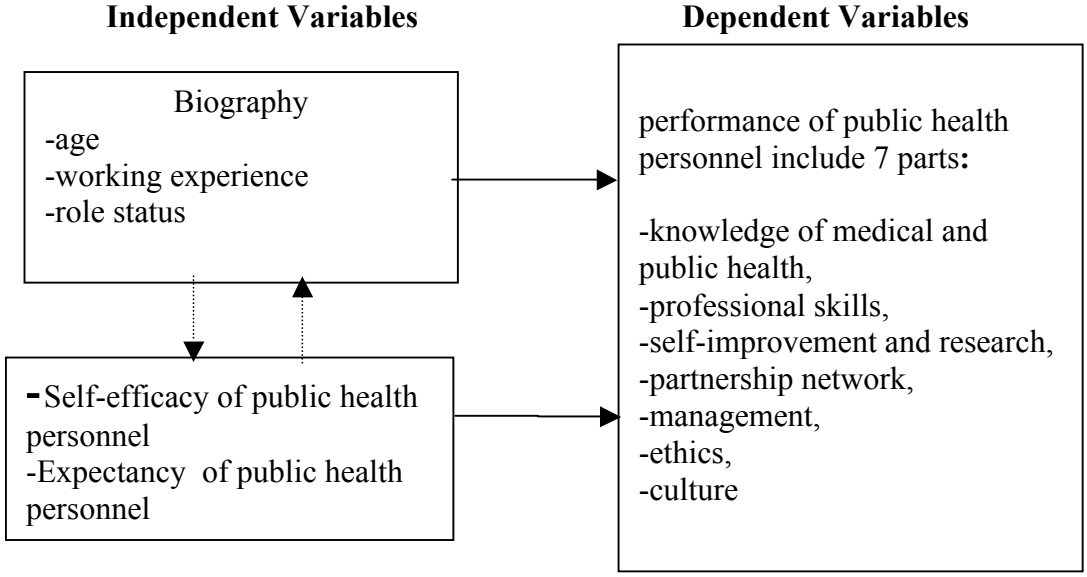
Definition of key concepts

Performance of Public Health Personnel: it is about working for increasing the overall productivity of an agency include 7 parts; 1) Knowledge of medicine and public health 2) professional skills 3)Self-improvement and research 4) Partnership network 5) Management 6) Ethics and 7) Cultural

Self-efficacy: the extent or strength of one's belief in one's own ability to complete tasks and reach the performance of Public Health Personnel.

Expectancy: the feeling that you have when you are expecting something especially ultimate outcomes of the performance of Public Health Personnel.

Conceptual Framework



Pic1. Conceptual Framework of the factors affect performance of public health personnel affiliated with NIoPH&MTC toward ASEAN communities.

Population and sample

Population is the public health personnel affiliated with NIoPH&MTC totaling 850 persons, using Taro Yamane's formula (1973), which sample size of 272 was selected as the formula

$$n = \frac{N}{1+Ne^2}$$

N = number of population = 850 persons
n = sample size
e = error value = 05 % (0.05)

calculation: $$n = \frac{850}{1+850(.05)^2} = \frac{850}{1+2.125} = \frac{850}{3.125}$$

= 272 persons

Research tools

The researcher studied and reviewed data from various theoretical concepts and related research, guideline for creating a research tool. Survey data were collected by questionaire, consisted 3 parts Part 1 personal characteristics, Part 2 Inputs 2 sections: self-efficacy and expectancy of public health personnel on performance It was a measure of 5 levels (strongly agree, agree, not sure, disagree and strongly disagree), to measure their opinions in relation to given statements. The basis of its interpretation was divided into 3 levels of good, fair and poor (score 3.661 to 5.000, 2.331 to 3.660 and 1.000 to 2.330), respectively. Part 3 performance of public health personnel 7 parts; 1)knowledge of medicine and public health 2) professional skills 3) self-improvement and research 4) partnership network 5) management 6) ethics and 7) cultural It was a measure of 5 levels (always, often, sometimes, seldom and never).

Data collection method

A questionnaire was designed in line with the objective and literature review, consisting of closed-ended questions. Respondents indicated their responses on a Likert scale for agreement levels. The questionnaires, together with a return envelope, were delivered personally by the researcher to the research manager of each college. During these visits the aim, importance of the study and questionnaire return dates, were explained. Of the 300 questionnaires that were distributed, 272 were returned.

Validity and reliability

Monitoring tool, the researcher developed a questionnaire that was validity of content by experts, reviewed the content and accuracy of language. Then updated to be trial with another group. Reliability of the instrument was determined by means of the Cronbach's Alpha, testing the internal consistency of items. The reliability of every items was adequate, recorded a reliability of 0.77, then the researcher used this tool to study a real sample.

Data analysis

Data analysis was carried out in term of percentage, mean, standard deviation, correlation and multiple regression analysis. The statistical analysis program SPSS was used to analyze the data.

Ethical considerations

This study was approved by the ethics committee of the Sirindhorn College of Public Health, Chonburi (SCPHC), Thailand. Respondents were informed about the objective of the study, their voluntary participation and their right to withdraw from the study at any time. Anonymity and confidentiality were ensured by providing self-addressed envelopes with all questionnaires, requesting respondents not to write their names on the questionnaires.

Result

Of the respondents 34.7% were between 30–49 years of age, their average age is 40.9 years old, and most of them 65.8% were married, 75.0% were females and 52.2% had master degree (in public health/nursing/education). A third of the respondents had worked as professional nurse 32.7%, instructor, pharmacist, dentist and public health personnel 23.5%, 18.0%, 15.1% and 10.7%, correspondingly. Besides, they also had an average of about 16.2 years working experiences and 84.9% of the respondents were working as a staff / lecturer, only 15.1% were administrator. (Table 1)

Table 1 Classified bibliography of respondents

bibliography of respondents	number	percent
Gender		
male	68	25.00
female	204	75.00
Age ($\overline{X}$ = 40.91 S.D. = 10.79)		
21 - 30 ปี	72	26.47
31 - 40 ปี	52	19.12
41 - 50 ปี	82	30.15
51 - 60 ปี	66	24.26
Education		
Bachelor degree	99	36.40
Master degree	142	52.20
PhD degree	31	11.40
Role status		
Administrator	41	15.07
Staff / lecturer	231	84.93
Position		
Nurse	89	32.72
Health lecturer	64	23.53
Pharmacist	49	18.01
Dentist	41	15.07
Other	29	10.66
Working experience($\overline{X}$= 16.2 S.D =10.9)		
10 year or less than	105	38.60
11 – 20 year	64	23.53
21 – 30 year	74	27.21
31 – 40 year	29	10.66

The level of self-efficacy of the respondents was fair (62.1%) with a mean score of 3.9 ± 0.6. The level of expectancy of the respondents was high (54.4%) with a mean score of 4.3 ± 0.4. (Table 2)

Table 2 Classified opinion factor levels of respondents in 3 groups

factor	levels of respondents in 3 groups (%)		
	high	fair	should improve
Self-efficacy	85(31.3)	169(62.1)	18(6.6)
Expectancy	148(54.4)	114(41.9)	10(3.7)

The results revealed that there was no statistically significant relationship between demographic factors and personal attributes of participants, namely age, role status and working experience. Self-efficacy of the respondents, as a whole, were found to have a moderate and positive relationship with performance public health personnel ($r = 0.623$, p-value < 0.001). Expectancy of the respondents, as a whole, were found to have a moderate and positive relationship with working performance ($r = 0.651$, p-value < 0.001).

The Stepwise multiple regression analysis showed that two of the five factors (age, role status, working experience, self-efficacy and expectancy) were statistically significant predictors of the performance of public health personnel. These significant predictors were self-efficacy and expectancy of public health personnel. The estimated regression equation was significant at $0.01(p<0.01)$, implying that these two variables (self-efficacy and expectancy) have an impact on performance evaluation thereby qualifying these to be the predictors for the latter. In conclusion, the two variables account for 46.60 percent of variation in the performance of public health personnel and $R = 0.683$. The following multivariate linear regression model shows the relationship between the predictor variables in the dependent variable. (Table 3-4)

$\hat{Y} = 1.244 + 0.282\ X_1 + 0.409\ X_2$

$\hat{Y}$ = Performance of public health personnel

X_1= self-efficacy

X_2 = expectancy

Table 3 ANOVA of multiple regression analysis of the two predictors.

Model	df	SS	MS	F	p
Regression	2	34.741	17.371	117.485	0.01*
Residual	269	39.773	.148		
Total	271	74.514			

Table 4 Results of multiple regression analysis of predictors asr the criterion.

Variable	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	b	SE b	β		
Constant	1.244	.173		7.180	.000
Expectancy (X_2)	.409	.046	.442	8.914	.000
Self-efficacy(X_1)	.282	.039	.362	7.309	.000

Discussion

On this line of reasoning, this study was conducted to examine the factors that affecting the performance of public health personnel affiliated with network Institute of public health and medical technology college toward ASEAN communities, Thailand. A Stepwise multiple regression analysis was used to investigate how personal attributes and two factors (self-efficacy and expectancy) predict the outcome of performance of public health personnel. This finding was similar to the one reported by HananAl- Ahmadi (2009) and was similar to Magdalene Hilda\Awases(2006). These findings have suggesting that if they want to improve their performance This finding is consistent with Bouphan (2009) who proposed that man, money, material, time and information technology were the key administrative resources for success in organization if they were combined appropriately. Besides that, all the four components of administrative resources had positive relationship with the performance evaluation. This finding was similar to the one reported by Nark-ok, J. & Bouphan, P., (2010) who revealed that administrative resources had positive relationship with the performance evaluation by primary care unit chiefs in commodity management. These findings imply that, to perform productively, sub-district health promoting hospital directors require good organizational supports, especially in terms of manpower, sufficient project budgets, tools and equipment, as well as training in staff's ability to provide effective.

Planning for the development of public health personnel should consider the efficacy of its results and its expectations for the performance. By focusing on training or workshops for groups such as personnel training focused on research and development. The partnerships and the skills needed to use information technology such as English Thus, it is necessary to empower public health personnel in upgrade self-efficacy with management and public health networking and higher expectancy on operating with knowledge and essential skills required to perform medical and public health may be training or making a study trip to other agencies that are leading in the country or in ASEAN. This should contribute to health personnel for developing competency.

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