International Journal of Health Systems and Medical Sciences
ISSN: 2833-7433
Volume 05 Number 03 (2026)
Impact Factor: 10.87
SJIF (2023): 3.656

www.inter-publishing.com

Article

The Service Quality of the Village Midwife in Galagah Hulu Village, Sungai Tabukan District, Hulu Sungai Utara Regency

Ratna Sari[1], M. Ridha Anshari[2], Mahfuzah[3]

1. Public Administration Study Program, Amuntai College of Administrative Sciences, Indonesia
2. Public Administration Study Program, Amuntai College of Administrative Sciences, Indonesia
3. Public Administration Study Program, Amuntai College of Administrative Sciences, Indonesia

* Correspondence: ratnajuwitasari17@gmail.com [1], mridhaanshari7@gmail.com [2], mahfuzah@gmail.com [3]

Abstract: Good service is effective, safe and quality service to people in need. However, its implementation in Galagah Hulu Village, Sungai Tabukan District, Hulu Sungai Utara District, there are still problems such as a lack of infrastructure at the Poskesdes, services are constrained because the Poskesdes are often empty, the level of awareness of residents is still low about the importance of immunizing their children. The purpose of this study was to determine the quality of service and factors -the factor. The method used is descriptive qualitative research, collecting data using observation, interviews, and documentation using 10 informants. Data analysis techniques through the stages of data reduction, data presentation, and drawing conclusions to test the credibility of data through extending observations, increasing persistence in research, triangulation, and reference materials. From the results of the research, the quality of midwives' services is still not good and there are 5 variables consisting of tangibility, reliability, responsiveness, assurance, and empathy which can be broken down into 10 indicators where there are 3 indicators that are not appropriate, such as human resources, other resources that adequate, and information about services, while there are 4 indicators that are not appropriate, namely fast service, appropriate service, community desires, and community needs, and there are 3 appropriate indicators, namely ability, service ethics and service morale. The influencing factors are the supporting factors being a good personality and caring attitude while the inhibiting factors are the lack of facilities and infrastructure and the lack of availability of midwives in place, there is no socialization. Therefore, it is suggested to midwives to increase service time by occupying the space provided, the lack of facilities and infrastructure for midwives is expected to consult with related parties, socialization that does not yet exist should be carried out to increase public awareness.

Citation: Sari, R, Anshari, M. R & Mahfuzah. The Service Quality of the Village Midwife in Galagah Hulu Village, Sungai Tabukan District, Hulu Sungai Utara Regency. International Journal of Health Systems and Medical Sciences 2026, 5(3), 65-69.

Received: 30th May 2026
Revised: 25th Jun 2026
Accepted: 12th Jul 2026
Published: 30th Jul 2026

Keywords: Village Midwife, Service Quality, Primary Healthcare, SERVQUAL, Rural Health Services

1. Introduction

Healthcare services are a form of public service that play a strategic role in improving the quality of life of the community. Quality healthcare services are not only determined by the competence of healthcare personnel but are also influenced by the availability of facilities and infrastructure, service accessibility, staff responsiveness, and the service providers' ability to meet the community's needs. Effective, safe, and quality healthcare services are an important part of achieving sustainable health development and improving the public's health status [1], [2], [3], [4].

One of the healthcare workers who plays an important role in primary healthcare services is the village midwife. Village midwives are the frontline of maternal and child health services at the community level because they play a role in providing midwifery

services, reproductive health services, family planning services, immunization, as well as promotive and preventive efforts. Based on Law Number 36 of 2014 concerning Health Workers, midwives have the authority to provide maternal health services, child health services, as well as women's reproductive health and family planning services. The presence of village midwives also serves as an extension of community health centers in improving access to healthcare services for the community, especially in rural areas [5], [6].

The increasing demand for healthcare services in the community has led to higher expectations for the quality of village midwife services. Quality service is expected to provide a sense of safety, comfort, and satisfaction to the community. According to Parasuraman, Zeithaml, and Berry, service quality can be measured thru five main dimensions, namely tangibles (physical evidence), reliability, responsiveness, assurance, and empathy. These five dimensions are important indicators in assessing the success of the healthcare services provided to the community [7].

Nevertheless, the provision of healthcare services by village midwives still faces various obstacles, especially in rural areas. Based on the initial observations in Galagah Hulu Village, Sungai Tabukan District, Hulu Sungai Utara Regency, several issues affecting the quality of village midwife services were still found. First, the limitations of facilities and infrastructure at the Village Health Post (Poskesdes), such as an inadequate waiting room, a cramped building, an examination room that is combined with the delivery room, and a lack of patient beds. These conditions do not fully meet the standards of facilities and infrastructure for midwife practices as regulated in the Minister of Health Regulation Number 28 concerning the License and Implementation of Midwife Practices.

Second, healthcare services cannot be provided optimally because the community health posts (Poskesdes) often do not operate fully. This situation occurs because village midwives have to divide their time between duties at the community health center (puskesmas) and providing services at the Poskesdes. As a result, the community does not always receive healthcare services when needed, leading to limited access to services.

Third, there is still a low level of public awareness regarding the importance of health services, particularly the provision of basic immunizations for children. Some members of the community do not yet understand the benefits of immunization and other preventive health services, resulting in the basic health service coverage not being optimally achieved. The low level of community participation has the potential to hinder efforts to improve the health status of mothers and children at the village level.

The issue indicates that the quality of village midwife services is not only influenced by the competence of healthcare workers but also by the support of facilities, service management, and community participation as service recipients. Therefore, an evaluation of the quality of village midwife services is necessary so that various existing obstacles can be identified and serve as a basis for improving healthcare services at the village level [8], [9].

This research aims to analyze the quality of service provided by the Village Midwife in Galagah Hulu, Sungai Tabukan District, Hulu Sungai Utara Regency, based on the service quality dimensions proposed by Parasuraman, Zeithaml, and Berry, namely tangibles, reliability, responsiveness, assurance, and empathy, as well as to identify the factors affecting the quality of that service. The research results are expected to contribute to the local government, community health centers, and village midwives in improving the quality of primary health services, thereby meeting the needs and expectations of the community more effectively, efficiently, and with a focus on user satisfaction.

2. Materials and Methods

This research uses a qualitative approach with a descriptive type to obtain an in-depth picture of the quality of services provided by the Village Midwife in Galagah Hulu, Sungai Tabukan District, Hulu Sungai Utara Regency. This approach was chosen because it can reveal health service phenomena based on conditions occurring in the field thru the collection of data in the form of words, actions, and various information obtained from informants. Descriptive qualitative research aims to provide a systematic, factual, and

accurate depiction of the quality of village midwife services based on the experiences and perceptions of the informants [10], [11].

The research informants were purposively selected by considering parties who have knowledge and direct involvement in the provision of health services, namely village midwives, community health center officers, village officials, and the community as service recipients. The research data consists of primary data obtained thru in-depth interviews and field observations, as well as secondary data obtained from documents, reports, and various regulations related to midwifery services [12].

Data collection was conducted thru observation, in-depth interviews, and documentation. Observation was used to directly observe the health service process and the condition of facilities at the Poskesdes. Interviews were conducted to obtain information regarding the implementation of services and various obstacles faced in providing health services to the community. Documentation is used as supporting data in the form of archives, reports, activity photos, and other documents relevant to the research [13].

Data analysis is conducted interactively thru three stages, namely data reduction, data presentation, and conclusion drawing. Data reduction is carried out by selecting, focusing, and simplifying data that is relevant to the research objectives. Next, the data is presented in the form of a narrative description, making it easier for researchers to understand patterns and relationships between phenomena. The final stage involves drawing conclusions thru the interpretation of all the analyzed data to obtain an overview of the quality of village midwives' services and the factors influencing them. The validity of the data is maintained thru the process of source triangulation, technique triangulation, and rechecking information with informants, ensuring that the research results have a high level of credibility [14].

3. Results

This study analyzes the service quality of the Village Midwife in Galagah Hulu Village, Sungai Tabukan District, Hulu Sungai Utara Regency using the five dimensions of service quality proposed by Parasuraman and Berry, namely tangibles (physical evidence), reliability, responsiveness, assurance, and empathy [7].

In the tangibles (physical evidence) dimension, the results show that service quality has not yet been optimal. In terms of human resources, health services are handled by only one midwife, while health cadres are active only during Posyandu activities. This condition causes the service workload to remain centered on the village midwife, so services have not been delivered optimally. In addition, the facilities and infrastructure at the Poskesdes still do not meet service standards. Although basic health service equipment is available, the availability of medicines remains limited. The Poskesdes building is also inadequate because the examination room and delivery room are still combined, and there is no dedicated waiting room for the community [15].

In the reliability dimension, the midwife's ability to provide services is considered quite good. The midwife has been able to provide health services in accordance with procedures, with no significant errors found in services to the community. However, weaknesses remain in the delivery of service information. Outreach regarding the importance of basic immunization for children and information on health service schedules has not been implemented optimally, so many community members still do not understand the importance of immunization and the health services available.

The responsiveness dimension shows mixed results. In terms of service appropriateness, the midwife has provided services in accordance with operational standards and applicable provisions, including pregnancy, childbirth, and postpartum care, as well as refusing practices that are not in accordance with health procedures. However, the indicator of service speed still faces constraints because the midwife is often not present at the Poskesdes due to the division of working time between the Puskesmas and the Poskesdes, so community members have to wait to receive services.

In the assurance dimension, the results show that the community has a relatively good level of trust in the midwife's competence in providing health services. The midwife is

able to provide services within her professional authority and provide a sense of security to the community through professional services that comply with health service standards.

Meanwhile, in the empathy dimension, service quality is still not optimal. The community's expectation that the midwife would be present more frequently at the Poskesdes has not been fulfilled because of limited service time. This condition means that the community's need for easily accessible health services has not yet been fully met. The midwife's limited presence at the Poskesdes also affects the community's perception of the quality of services provided.

In addition to analyzing service quality, this study also identifies the factors that influence village midwife services. Supporting factors include the midwife's good personality and caring attitude toward the community when providing health services. These two factors are important assets in building community trust in health services at the village level.

Conversely, several inhibiting factors still affect service quality. First, limitations in the village budget mean that the procurement and improvement of Poskesdes facilities and infrastructure cannot yet be carried out optimally. Second, limited service time, because the midwife must divide her duties between the Poskesdes and the Puskesmas, means that services cannot yet be provided fully to the community. Third, the absence of routine outreach activities regarding the importance of immunization, maternal and child health services, and other health services means that the level of community understanding and participation remains relatively low.

4. Discussion

Overall, the research results show that the service quality of the Village Midwife in Galagah Hulu has been quite good in terms of reliability, assurance, and adherence to service procedures. However, the aspects of physical evidence, responsiveness, and empathy still require improvement, especially through the provision of adequate facilities and infrastructure, increasing the availability of healthcare personnel, optimizing the presence of the midwife at the Poskesdes, and conducting continuous health outreach to the community. Thus, the quality of primary health services at the village level is expected to become more effective in meeting the needs of the community.

5. Conclusion

This study shows that the quality of service provided by the Village Midwife in Galagah Hulu, Sungai Tabukan District, Hulu Sungai Utara Regency is not yet optimal. The main weaknesses lie in the physical evidence aspect, such as the limited facilities and infrastructure, the lack of midwives available at the service location, the suboptimal delivery of health information to the community, and the low responsiveness of the service. Meanwhile, the aspects of competence, service ethics, and the midwives' attitudes in providing care have been functioning well. Supporting factors include the midwives' friendly personalities and their attention to the community. Meanwhile, inhibiting factors include limited facilities and infrastructure, low attendance of midwives at community health posts, and the absence of continuous health outreach activities.

Improvement in service quality needs to be carried out thru the provision of adequate facilities and infrastructure, enhancement of discipline and attendance of midwives at community health posts, and the regular implementation of health socialization, particularly regarding the importance of immunization and maternal and child health services. Additionally, support from the village government and community health centers is required to strengthen facilities and enhance the quality of services to the community.

REFERENCES

[1] Hardiyansyah, Kualitas Pelayanan Publik, 2nd ed. Yogyakarta, Indonesia: Gava Media, 2018.
[2] M. F. Rahmadana et al., Pelayanan Publik. Medan, Indonesia: Yayasan Kita Menulis, 2020.
[3] K. Sellang et al., Strategi Dalam Meningkatkan Kualitas Pelayanan Publik. Rappang, Indonesia: CV Penerbit Qiara Media, 2019.
[4] Gasper, Manajemen Kualitas dalam Industri Jasa. Yogyakarta, Indonesia: Gramedia, 2014.
[5] D. F. Ariyanti, "Kualitas Pelayanan Antenatal Oleh Bidan Di Puskesmas Di Kabupaten Purbalingga," Universitas Diponegoro, Semarang, Indonesia, 2017.
[6] D. Ratnasari, "Analisis Pelaksanaan Sistem Rujukan Berjenjang Bagi Peserta JKN di Puskesmas X Kota Surabaya," JAKI, vol. 5, no. 2, Jul.–Dec. 2017.
[7] A. Parasuraman, V. A. Zeithaml, and L. L. Berry, "SERVQUAL: A multiple-item scale for measuring consumer perceptions of service quality," Journal of Retailing, vol. 64, no. 1, pp. 12–40, 1988.
[8] A. C. Nur and M. Guntur, Analisis Kebijakan Publik. Makassar, Indonesia: Universitas Negeri Makassar, 2019.
[9] R. Katharina and R. N. E. Jaweng, Pelayanan Publik dan Pemerintahan Digital Indonesia. Jakarta, Indonesia: Yayasan Pustaka Obor Indonesia, 2020.
[10] L. J. Moleong, Metodologi Penelitian Kualitatif. Bandung, Indonesia: PT Remaja Rosdakarya, 2018.
[11] Hardani et al., Metode Penelitian Kualitatif & Kuantitatif. Yogyakarta, Indonesia: Pustaka Ilmu Group, 2020.
[12] S. Anggara, Metode Penelitian Administrasi. Bandung, Indonesia: CV Pustaka Setia, 2015.
[13] Arikontu, Prosedur Penelitian: Suatu Pendekatan Praktik. Jakarta, Indonesia: Renika Cipta, 2015.
[14] J. Noor, Metodologi Penelitian. Jakarta, Indonesia: Kencana, 2017.
[15] Kamsir, Manajemen Sumber Daya Manusia (Teori dan Praktik). Jakarta, Indonesia: PT Rajagrafindo Persada, 2016.