EVALUATION OF IMPLEMENTATION OF VILLAGE MIDDLE EDUCATION AND TRAINING PROGRAMS IN BATAM HEALTH TRAINING CENTERS (BAPELKES) IN BATAM CITY PROVINCE OF RIAU ISLANDS

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Abstract
The purpose of this study was to describe the components evaluated based on the context, inputs, processes and outcomes of the village midwife education and training program. The research was conducted at the Health Training Center (BAPELKES) in March until 2016. The approach used was evaluative approach, qualitative method, using Context, Input, Process and Product (CIPP model) model. Data collection techniques are interview, observation and documentation study. From the four components of the evaluation of context, input, process and product (CIPP), there are problems and implementation of education and training program of village midwife conducted by Bapelkes Batam in Batam City. Therefore, bapelkes and health offices to jointly plan the socialization of education and training programs must be implemented in accredited institutions of good quality, infrastructure and places.

Introduction:-
One of the goals of health development is to increase the awareness, willingness and ability to live a healthy life for everyone concerning physical, mental, social and cultural and economic. To achieve an optimal degree of public health a variety of efforts are made to provide comprehensive, targeted and sustainable health services. In order to support the efforts of health services, it is necessary to have health workers in the right amount, type and quality, one of which is a midwife.

From the preliminary results carried out by researchers that the midwife's Education and training program carried out in Bapelkes (Bapelkes) of Batam City is based on a legal basis and planning is carried out according to the plan needs and the results achieved based on education and training are in accordance with competence both in skills and practice in the field. However, in the field implementation application, it is still found the low skills and skills of village midwives in giving birth to mothers giving birth so that there are still maternal and infant mortality rates, there are still many deliveries assisted by childbirth support and the low role and participation of midwives in moving the community to behave cleanly and healthy.

The role and responsibilities of the village midwife's duties are polyclinic and posyandu in providing midwifery services to pregnant and giving birth that are continuous and complete. The results of the coverage of Posyandu
implementation indicators are inseparable from the role of village midwives, one of the main tasks is the development of posyandu cadres (Tengku Nih Farisni, Martha Trene Kartasurya, 2014).

Midwives are important health workers in helping efforts to accelerate the decline in MMR. Therefore the government and the community need competent and professional midwives to run health programs (Winarni et al., 2014).

Focusing on aspects of prevention, promotion based on partnerships and community empowerment together with other health workers for that is always ready to serve anyone who needs, when and where he is. The role of midwives in villages as health service providers in the community in their area is expected to be carried out actively in accordance with their competence and authority (Suhrawardi & Dewi, 2016)

In order to improve the quality and competence of village midwives, education and training are needed that require good planning. Good planning is a plan that can answer existing health problems, effective, realistic and flexible to the situation and conditions that exist. In creating quality IEC, a midwife must meet the standards and have sufficient knowledge (Lumbanraja & Aryanti, 2016).

To know that planning has been achieved to achieve the objectives, it is necessary to conduct periodic evaluations during the program is implemented. Evaluation starts at the planning stage by assessing various alternative actions, which then extend through the process of mobilization or implementation. During the process of implementation activities must continue to be monitored through formative evaluations and improvements made in accordance with the planned objectives. As is the case with the education and training of village midwives.

**Research Questions and problem formulation, The formulation of the problem developed by researchers based on sub focus is as follows:**

1. What is the legal basis and objectives of the village midwife's education and training program at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
2. How is the resource person and facilitator planning, curriculum, infrastructure, methods, tools and media, participants, organizing, budgeting and evaluating the education program and training of village midwives at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
3. How is the implementation of the village midwife's education and training program at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
4. How are the results of the implementation of the education and training program for village midwives at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.

**Research Objectives, The research was arranged based on the sub focus of the study and was able to answer the research problem or question The research objectives include:**

1. To provide legal basis for decisions, objectives and education and training programs for village midwives at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
2. To improve the planning of resource persons and facilitators, participants, curriculum, infrastructure, methods, tools and media, budgeting and evaluation of the education program and training of village midwives at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
3. To improve the implementation of the village midwife's education and training program at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.
4. To improve the results of the implementation of the education and training program for village midwives at the Batam Health Training Center (Bapelkes) in Batam City, Riau Islands Province.

**Theoretical review:**

Evaluation is an attempt to measure the results or impact of an activity, program, or project by comparing it with the stated objectives. According to Rika Dwi K. evaluation is a project where the success achieved compared to the set of successes applied (Kurniasih, 2009). This comparison is then recommended by identifying the factors that influence failure and success.

According to Stufflebeam and Coryn said the evaluation “Evaluation is a process for giving attestation to such matters as reliability, effectiveness, cost-effectiveness, efficiency, safety, ease of use, and probity” (Coryn, 2014). Evaluation is a process of providing information that can be used as a consideration for determining prices and
services (the worth and merit) of the goals achieved, design, implementation and impact to help make decisions, help accountability and improve understanding of the phenomenon.

According to Alston and Bowles said "Evaluation is conducted in such a way that all are informed about the procedure" (Margaret Alston and Wendy Bowles, 2003). According to Beijaard at all said "Evaluation is only conclusion drawn in comparison with standards and criteria" (Beijaard, 2005).

Suharsimin Arikunto stated that evaluation is an activity to gather information about the workings of something, which then information is used to determine the right alternative in making decisions (Suharsimi, 2012).

**Program Policies:**
Program policies to be evaluated include the legal basis and objectives of the education program and training of village midwives, as follows;

**Legal Foundation:**
Based on the Law of the Republic of Indonesia Number 36 of 2014 concerning health workers. Article 30 paragraph (1) development of health workers is directed to improve the quality and career of health workers, paragraph (2) development of health personnel as referred to in paragraph (1) is carried out through education and training and continuity in carrying out practices and paragraph (3) in the framework of developing district head health workers and health facility service leaders are responsible for providing equal opportunities to health workers by considering performance appraisals.

**Program Objectives:**
According to (Glyn Rogers and Linda Badham,): "an aim is a general statement of intention that outline the ultimate goal without specifying the stages by which it could be achieved. It is important to distinguish between aims and the objectives ". Objectives are general statements of intent that describe the final goal without determining the stage at which the goal can be achieved. This, it is important to distinguish between goals in general and objectives in particular.

Goals or goals are an integral part of the strategic management process in which they contain an effort to carry out an action. For this reason, the goal must be to emphasize what specifically must be achieved and when (Akdon, 2007).

Infrastructure is one of the tools in supporting the success of education and training programs so that the use of infrastructure is the most important thing so that all learning materials can run well. Availability of incomplete facilities will have a risk of two times greater for the implementation of practices that are not according to standards. The availability of incomplete facilities will result from various factors such as knowledge and attitudes. The availability of facilities is not the responsibility of semat health workers, but is a component of the management system that must be met by an organization (Iraningsih & Azinar, 2017).

The village midwife's education and training program is carried out using adult learning principles (BOD). Facilitators focus learning on efforts to increase knowledge and skills of village midwives by using modules and slide learning materials (Minister of Health of the Republic of Indonesia, 2013).

**Achievements in program implementation results:**
**Material absorption by village midwives**
Material absorption by village midwives includes: all midwives take a pre-test before the village midwife's education and training materials begin and there is an increase in the village midwife's understanding of the material delivered by the facilitator after the post test (final test).

The evaluation model chosen in the evaluation of the pregnant mothers class management program is the CIPP evaluation model developed by Stufflebeam. This model is based on four types of evaluation information in which the decision holder-oriented approach (policyakers and administrators need to make their decisions). The CIPP model is one of the most frequently used models by evaluators consisting of four evaluation components namely CIPP. The purpose of this evaluation model is to help administrators make decisions.
The CIPP evaluation model is an evaluation model that views a program that is evaluated as a system. According to Stufflebeam and Coryn the CIPP evaluation model, are:

The CIPP evaluation model is a comprehensive framework for conducting formative and summative evaluations of programs, projects, personnel, products, organizations, policies, and evaluation systems. Basically, the model provides, direction for assessing the context (in terms of an enterprise's need for corrections or improvements); inputs (strategies, operational plans, resources, and agreements for proceedings with a needed intervention); process (the intervention's implementation and costs); and product (the effort's positive and negative outcome) (Coryn, 2014).

![Figure 1: Relationship between four CIPP Components (Coryn, 2014).](image)

The basic elements of the CIPP model consist of three circles and illustrate the importance of the defined value centers, as follows:
1. The inner circle shows the core values that must be defined and used to base the evaluation given.
2. The circle around values consists of four evaluation focuses related to the existence of the program, namely: objectives, plans, actions and results.
3. The outer circle shows the type of evaluation that serves each of the four evaluation focuses, namely: context, input, process, or product evaluation.
4. Each two-way arrow is a reciprocal relationship between a certain evaluative focus and the type of evaluation.

| Evaluation Round | Context | Input | Proces | Product |
|------------------|---------|-------|--------|---------|
| Prospective formative evaluation of the application of information in making decisions and providing quality assurance | Directing to identify intervention needs, choose and sort goals (based on assessment of needs, problems, assets and opportunities) | Directing to choose other programs or strategies (based on alternatives, resource allocation plans) including to test the work plan | Directing to implement work plans (based on monitoring and determining program activities) | Directing for continuation, modification, absorption or final effort (based on measurement of results and other impacts) |
| Retrospective summative evaluation uses CIPP information to infer the program's benefits, value, suitability and significance | Compares objectives and priorities for assessing needs, asset issues and opportunities | Compares the program strategy, design and budget for the needs of critical competitors and the needs of the target beneficiaries | A complete description of the actual process and costs, including a comparison between design, actual process and costs | Comparison of results with target needs, feasibility between results of the program, interpretation of results assessed against context, input and process. |
The method used in this study is qualitative, which is used to evaluate whether the implementation of the village midwife's education and training program is in accordance with the Ministry of Health's policies based on the implementation guidelines.

Evaluation research is one form of types of research that can be carried out by researchers. According to Arikunto (2007: 208) one of the things that distinguishes evaluation research from other studies is that to make a decision, research conclusions are always based on certain benchmarks and criteria, usually used as benchmarks are targets to be achieved through programs implemented starting with the measure for program components is the maximum quality desired for each component.

Data collection techniques used are observation, interviews and documentation. Observation or so-called observation is a result of active and attentive actions of the soul to realize the existence of stimuli. First the stimulation from the outside regarding the senses, and senses occur, then when the stimulation attracts attention will be followed by observation. According to Soekidjo Notoatmodjo, observation is a planned procedure, which includes; see, hear and record a number and level of certain activities or certain situations that have something to do with the problem under study (Nomotatmodjo, 2012).

Interview is a conversation with a specific purpose, the conversation is carried out by two parties, namely the interviewer who asks the question and the interviewer who provides answers to the questions raised by the interviewer. According to Lexy J. Moeloeng, it was explained that the purpose of conducting interviews included: constructing people, events, organizations, feelings, motivations, demands, concerns and others. Contracting that has ever been experienced and projecting things that will be experienced in the future, verifying, changing, and expanding information obtained from other people, both human and non-human (triangulation) and verifying, changing and expanding the construction developed by researchers as checking member (Moeloeng, 2006). Documentation is a study that studies the records of events that have already passed. Documents can be in the form of writings, drawings or monumental works of a person. Documents in the form of writing such as diaries, life history, stories, biographies, regulations, policies. Documents in the form of drawings, for example photos, live drawings, sketches and others. Documents in the form of works such as works of art, which can be in the form of
drawings, sculptures, films, and others. Documentation studies are complementary to observational studies and interviews in qualitative research.

Triangulation is a data collection technique that is a combination of various data collection techniques and data sources that already exist. When a researcher collects data by triangulation, the researcher actually collects data which at the same time tests the credibility of the data, that is checking the credibility of the data with various collection techniques and various data sources. Triangulation techniques, means researchers use different data collection techniques to get data from the same source. The researcher uses participatory observation, in-depth interviews, and documentation for the same data source simultaneously (Sugiyono, 2017).

**Results and Discussion:**

The data obtained in each component in this study will then be analyzed its suitability between objectives and criteria with empirical data and at the end of the analysis results are used as an assessment to get a decision which is the conclusion of the evaluation results of the research that has been carried out in order to obtain the evaluation results for each component as follows:

**Context Evaluation:**

The aspects assessed in the context evaluation include: Legal basis, goals and objectives, with the following results:

**Legal Basis:**

Based on the results of the study, regarding the provisions of the education program and training of village midwives at the Batam Health Training Center (Bapelkes) in Batam City regulated in Republic of Indonesia Law Number 36 of 2014 concerning health workers. Article 30 paragraph (1) development of health workers is directed to improve the quality and career of health workers, paragraph (2) development of health personnel as referred to in paragraph (1) is carried out through education and training and continuity in carrying out practices and paragraph (3) in the framework of developing district head health workers and health facility service leaders are responsible for providing equal opportunities to health workers by considering performance appraisals.

The specific objectives of the village midwife’s education and training program are to increase competence professionally and independently. Based on the results of the study, related to the intended purpose that village midwives in addition to increasing professional and independent competence, it is hoped that village midwives are able to provide optimal services to the community and prevent maternal and neonatal mortality rates, increase community empowerment in the 4T program, improve clean and healthy living behavior (PHBS), able to explain the quality of services, can do health promotion to the community, can do basic management of oxygenation, fluid therapy, assessment of pregnancy, can be effective communication and can do maternal Basic Life Support, prevent infant and maternal mortality, increase community empowerment 4 T program, late decision, late help, late action and late to health service facilities such as polindes, posyandu, puskesmas and RSU (Informant Ka interview results).

**Input Evaluation:**

Evaluation of input components (a), including Analysis of the needs of resource persons and facilitators; (b) Curriculum; (c) Facilities and Infrastructure; (d) Method; (e) Tools and media; (f) Participants; (g) Budgeting; (h) Evaluation.

**Process Evaluation:**

The following describes the results of the evaluation of process components (P) which include: village midwife training, (b) curriculum use, (c) presentation of material, (d) use of infrastructure, (e) use of methods, (f) use of tools and media, (g) implementation of the implementation, (h) implementation of monitoring and evaluation, after carrying out data collection through interviews and supported by data collection through observation and documentation studies and subsequent focus group discussions, evaluation results are obtained for each aspect of the component.

**Product Evaluation:**

Research on product components covers several aspects that are believed to influence the process of implementing village midwives’ education and training programs in Bapelkes Batam in Batam City, namely: (a) achievement of
the material for participants, (b) achievement of the Program, and (c) Application and results of programs that can be empowered.

Discussion:
Based on data and information collected by interview, observation and documentation study, a number of findings can be discussed as follows:

Evaluate the Context:
Legal Foundation
The legal foundation evaluation aspect includes 3 (three) criteria including the existence of regulations governing the education and training program of village midwives Government Regulation Number 101 Year 2000 Concerning Education and Training of Civil Servants Article 8 explains that education and training in positions are carried out to develop knowledge, the attitude of Civil Servants so that they can carry out the tasks of government and development as well as possible.

Input Evaluation:
The input component in the evaluation of the implementation of the education and training program for the village midwives of Bapelkes Batam in Batam City can be seen as follows:
Analysis of Resource Needs and Facilitators
Human resources is one of the systems in input that must be fulfilled in the implementation of village midwives' education and training programs, according to Rogers Kaufman and Fenwick W. English defines that the determination / analysis of needs is a process of determining the distance or gap between actual outputs and impacts with the desired outputs and impacts, then place the sequence of gaps in a priority scale and choose the most important thing to solve the problem.

Process Evaluation:
Village Midwife Training:
The results of the evaluation of the method of education and training program for village midwives in this study, the established criteria is the suitability of the target learning material with the implementation that has been determined based on the guidelines for the implementation of the education and training program for the village midwife in Bapelkes Batam in Batam City.

Achievement of Implementation Results:
Village midwife material absorption:
The results of the evaluation of the achievement of the competence in the implementation of the village midwife's education and training program, obtained data that almost all indicators have been carried out in the implementation of the village midwife's education and training program; Number of midwives or health workers as facilitators of the village midwife's education and training program, Number of facilitators who use time according to regulations, Number of facilitators who use learning methods well, Number of facilitators who use learning aids properly, Number of facilitators who have the ability to engage participants with good, the number of facilitators who use the guidelines or modules as the main information media, the frequency of attendance of the participants (village midwives) in the implementation of village midwife training, the activeness of participants (village midwives) in asking questions and discussions, and the suitability of holding (place, facilities and time) with the provisions applicable.

Conclusion:
The conclusions of this study are as follows:
The legal basis, objectives and strategies of human resources in the education and training programs of the village midwives of Bapelkes Batam in Batam City, Riau Islands Province.

The legal foundation aspect has an appropriate evaluation criteria because there are special rules governing the program of providing education and training in the health sector which is regulated in Government Regulation Number: 101 of 2000 concerning Education and Training of Civil Servants' Position, Ministry of Health Decree of the Republic of Indonesia Number 725 of 2003 concerning efforts improving the quality of the implementation of accredited education and training starting from the process up to the output and Law of the Republic of Indonesia Number 36 of 2014 concerning health workers.
Planning the education and training program for batam bapelkes batam in batam in Riau Islands Province:
Analysis of HR needs has appropriate assessment criteria because Bapelkes and the Riau Islands Provincial Health Office have conducted an HR needs analysis covering midwives.

Describe the implementation of the village midwife's education and training program:
The trainer / instructor / facilitator has the evaluation criteria according to the standard because the instructor has experience in his education and for the facilitator has received training (TOT).

Outcomes of the implementation of the village midwife's education and training program:
Material absorption by village midwives has assessment criteria that are up to standard because village midwives have been able to explain back to the facilitator about the material presented and there has been an increase in post-test scores.

Recommendations:-
1. Bapelkes and the health service continue to improve the quality of education and training programs for village midwives at each implementation according to Law Number 36 of 2014 concerning health, government regulation Number 101 of 2000 concerning education and training of civil servant positions and Minister of Health Decree Number: 725 of 2003 concerning efforts to improve the quality of the implementation of the quality of accredited education and training from the process to the output.
2. As a facilitator, we strive to increase the competence of village midwives' participation in childbirth programs for pregnant women, and community empowerment programs by arranging schedules in accordance with mutual agreement.
3. As a facilitator using facilities and infrastructure, in accordance with the standards of the village midwife's education and training program, especially using phantoms or puppets for practical tools or demonstrations, to increase knowledge, attitudes and behavior to be more professional and independent.
4. As a facilitator formulating strategies and giving roles to midwife participants so that after completing the education and training program, village midwives are able to provide excellent service to pregnant women and empower people to behave in a Clean and Healthy Life (PHBS).
5. As a facilitator, the best possible time of at least 135 minutes with 3 meetings according to the material set out in the village midwife's education and training program guidelines.
6. The commitment of the disciplinary results of the agreement made by the participants together with MOT is upheld and it will be a successful performance of the participants of the education and training program.
7. The Health Office in preparing the budget for training programs and education can meet standards according to the quality of education and training programs and be able to run well as expected.
8. The Health Office and Bapelkes compile an advocacy schedule plan for local government policy makers so that the midwife's Education and Training Program can be budgeted annually and implemented through the Riau Islands Province Regional Budget.
9. District Health Office and Puskesmas in order to be able to utilize resources that have participated in midwives' education and training programs to be more professional and independent according to their competencies.

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