The Influence of Training, Workload, Motivation, Job Satisfaction and Work Environment on the Performance of Tuberculosis Officers in Efforts to Reduce Multi Drug Resistance Cases in Kendari City

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Abstract:

The Effect of Training, Workload, Motivation, Job Satisfaction, and Work Environment on the Performance of Tuberculosis Officers in Efforts to Reduce Multidrug Resistance Cases in Kendari City Usnia, Dedy Takdir, Juharsah, Sudirman The purpose of this study was to examine the effect of training, workload, motivation, job satisfaction, and work environment on the performance of tuberculosis officers in efforts to reduce multidrug resistance cases in Kendari City. The population in this study was all 46 multidrug-resistant tuberculosis officers, using a saturated sampling technique, which included the entire population as a sample. Data from the research variables were analyzed using structural equation modeling (SEM) with the Smart PLS program. The results showed that training had a positive but insignificant effect on the performance of tuberculosis officers. Workload had a positive but insignificant effect on the performance of tuberculosis officers. Furthermore, work motivation had a positive but insignificant effect on the performance of tuberculosis officers. Job satisfaction has a positive but insignificant effect on the performance of tuberculosis officers, and the work environment has a positive and significant effect on the performance of tuberculosis officers. Training, workload, work motivation, job satisfaction, and the work environment have a negative and significant effect on the performance of tuberculosis officers in efforts to reduce multidrug-resistant cases in Kendari City.

Keywords: *Training, Workload, Motivation, Satisfaction, Environment, Performance, Tuberculosis*

Introduction

Tuberculosis (TB) remains a serious global health problem with a high mortality rate. According to a 2020 WHO report, there were 5.8 million TB cases and 1.3 million deaths globally (World Health Organization, 2023). In Indonesia, TB cases are also relatively high, reaching 969,000 cases with 144,000 deaths in 2021 (Ministry of Health of the Republic of Indonesia, 2022). One of the major challenges in TB control is the emergence of drug-resistant TB or Multidrug-Resistant Tuberculosis (MDR-TB), namely TB that is resistant to two main drugs, rifampicin and isoniazid, thus complicating the treatment process (WHO, 2024; Dheda et al., 2024). Patient non-compliance with treatment and weaknesses in the health care system are the main causes of the emergence of MDR-TB cases (Miftah, Khasanah, & Alberta, 2024).

Conditions in Southeast Sulawesi, particularly Kendari City, reflect similar challenges. In 2024, there were 31 cases of drug-resistant TB, with 96.8% of patients undergoing treatment. However, by May 2025, only 57.9% of patients had started treatment out of a total of 19 cases (Southeast Sulawesi Provincial Health Office, 2025). This problem is exacerbated by the low performance of healthcare workers. A preliminary survey of TB workers showed that 80% had low performance, 50% had never received TB training, 70% experienced a high workload, 60% lacked motivation, 80% reported low job satisfaction, and 60% described an unsupportive work environment (Kendari City Health Office, 2025). These conditions highlight the importance of examining the factors influencing TB worker performance in the local context.

Training is a crucial factor in improving the performance of healthcare workers. Training not only improves technical knowledge and skills but also strengthens staff's readiness to handle TB cases and encourages them to follow standard procedures (Hasibuan, 2017; Amare et al., 2023). Lack of training can lead to low competency in detecting and treating MDR-TB cases. Furthermore, a high workload, especially when a staff member must handle more than one program simultaneously, can lead to fatigue, stress, and decreased productivity (Krisdiana et al., 2022; Herawati et al., 2023). A disproportionate workload also hinders the service delivery process and early detection of TB cases in the community.

Meanwhile, work motivation is an internal factor that significantly determines performance. Highly motivated staff tend to be more active, disciplined, and responsible in carrying out their duties (Masnah et al., 2020; Wibowo & Saputra, 2017). Motivation can arise from intrinsic factors such as achievement and responsibility, as well as extrinsic factors such as incentives and recognition. Low motivation can lead to passivity and a decline in the quality of healthcare services. Equally important is job satisfaction, which

reflects the extent to which healthcare workers feel satisfied with their work. High job satisfaction increases morale, loyalty, and productivity, as well as lowers absenteeism (Hamidah, 2021; Salet et al., 2023). Conversely, dissatisfaction can lead to burnout and job loss.

Finally, the work environment, both physical and non-physical, also significantly influences the comfort and effectiveness of TB workers. A conducive, safe, and supportive environment will create a positive work atmosphere, increase morale, and encourage the achievement of organizational targets (Rivai & Sagala, 2011; Logahan et al., 2022). Conversely, a poor work environment can be a major obstacle to the implementation of TB control programs. Therefore, the performance of TB workers at community health centers cannot be separated from the influence of these five factors.

Job Performance Theory explains that performance is the result of work behavior influenced by various internal and external factors. In this context, training, workload, work motivation, job satisfaction, and the work environment are important factors that are interrelated and contribute to the achievement of organizational goals (Wahyuni, 2017; Ghozali, 2017). Based on findings from previous studies by Setiawati et al. (2025), Bahriah et al. (2025), and Nirwestid et al. (2024), all of these variables have been shown to be significantly related to the performance of health workers, particularly TB officers. Therefore, the focus of this study is directed at examining the influence of training, workload, work motivation, job satisfaction, and the work environment on the performance of TB officers in Kendari City, in order to provide input for improving TB control strategies, particularly MDR-TB, at the primary care level.

Literature Review

Training

Training is a learning process designed to improve the performance, professionalism, and/or career development of medical personnel, health workers, and health support staff in carrying out their duties and functions (Ministry of Health of the Republic of Indonesia, 2023). Participating in training can broaden knowledge and provide preparation for dealing with TB cases, as it includes learning through simulations and field practice (Bella et al., 2024). Furthermore, several other efforts can enhance the knowledge and insight of health workers, such as direct experience handling TB cases in the field and the habit of always keeping abreast of case developments and the latest literature on TB (A'maliyah & Wahyono, 2021). According to Notoatmodjo, training has an important objective to increase knowledge and skills as criteria for the success of the overall health program. According to the Indonesian

Ministry of Health (2023), there are several learning methods in training, namely: cooperative learning, discovery, problem solving, games, simulations, discussions, drill and practice, tutorials, lectures, and demonstrations. In this study, the researcher used lecture and demonstration methods. Lectures can be interpreted as a method carried out by instructors by conveying information and knowledge to a group of training program participants or trainees. Usually, this method is carried out by resource persons or experts who master the field being trained. The use of the lecture method can be combined with the use of certain media and training materials to facilitate the learning process of participants in order to achieve the competencies being trained. The Demonstration Method is a demonstration or show to show a process of an event occurring. The demonstration method is a show about the process of an event or object occurring until the appearance of behavior that is exemplified so that it can be known and understood by participants in real and imitation.

Workload

A nurse's workload is all the activities or tasks performed by a nurse while serving in a nursing service unit. According to the Minister of Administrative and Bureaucratic Reform, a workload is a collection or number of activities that must be completed by an organizational unit or position holder within a certain time period. Workload is the difference between a worker's capacity or ability and the demands of the work they must face. Each individual's workload has varying levels of workload. A workload that is too high can lead to excessive energy consumption and overstress, while a workload that is too low can lead to boredom and understress (Safitri & Astutik, 2019). According to Sari, I. P. S. (2020), workload can be defined as the difference between a worker's capacity or ability and the demands of the work they must face. Since human work is both mental and physical, each individual has varying levels of workload. A workload that is too high can lead to excessive energy consumption and overstress, while a workload that is too low can lead to boredom and understress. Therefore, it is necessary to strive for an optimum level of load intensity that is between the two extreme limits and of course differs from one individual to another.

Work Motivation

Motivation is a way to satisfy an employee's needs. This means that when a person's needs are met by certain factors, they will strive to exert their best efforts to achieve organizational goals. According to Rivai and Sagala (2011), motivation is a set of attitudes and values that influence an individual to achieve specific goals in accordance with their goals. Meanwhile, according to

Robbins (2007), motivation is the process of willingness to exert a high level of effort toward organizational goals, conditioned by the ability of that effort to fulfill an individual's needs. Work motivation can be defined as "a psychological drive within an individual that determines the direction of behavior within an organization, the level of effort, and the level of persistence or resilience in the face of obstacles or problems (level of persistence). Nawawi (2011) states that motivation is a condition that drives or causes a person to perform an action/activity, which occurs consciously. A theory by Fredrik Herzberg, cited in Robbins (2007), states that intrinsic factors are related to work satisfaction and motivation. Believing that each person's approach to their work can determine their success or failure. This theory of motivation divides factors into two dimensions: motivators, also known as intrinsic motivation, and hygiene factors, also known as extrinsic motivation. These factors are divided into two dimensions, each of which influences a separate aspect of job satisfaction. Based on the definitions of these experts, motivation stems from the principle that humans only do things that are enjoyable. However, this does not rule out the possibility of circumstances forcing someone to do something they dislike.

Job Satisfaction

Job satisfaction is an emotional attitude that is pleasant and loves one's job. Job satisfaction reflects a person's feelings towards their job. With positive and happy feelings related to work, employees are expected to work well to achieve the expected performance and vice versa (Rahmawati & Irwana, 2020). According to (Ningsih & Chairizal, 2014), job satisfaction is an employee's attitude towards work related to the work situation, cooperation between employees, rewards received in work, and matters concerning physical and psychological factors. Job satisfaction is an emotional expression in the form of positive or negative feelings. Job satisfaction will be felt by workers after comparing what has been done with the results and rewards that workers will receive. If emotionally workers feel satisfied, it means job satisfaction has been achieved; otherwise, it means the employee is not satisfied. Job satisfaction is a general attitude of individuals who are individual about one's feelings towards one's work. In line with Robbins's view, job satisfaction is an expression of employee satisfaction about how their work can benefit the organization, which means that what is obtained in work has fulfilled what is considered important. Job satisfaction is considered the result of an employee's experience in relation to their own values, such as what they desire and expect from their work. This view can be simplified as job satisfaction being an individual's attitude and feedback on their work (Hakman et al., 2021).

Work Environment

The work environment is identified as a work atmosphere that has a significant role in encouraging employees to be more participatory in completing the tasks assigned. As the definition of the work environment is defined as a whole of work infrastructure that exists around employees who are carrying out work that can affect the implementation of the work itself (Saydam, 2000). Nitisemito (1996) has his own view in defining the work environment which is interpreted as something that exists around workers and can influence them in carrying out the tasks assigned. Meanwhile, another opinion by Sedarmayati (2001) has an opinion that explains that the work environment is the whole of the tools and materials faced, the surrounding environment where a person works, his work methods, and his work arrangements both as individuals and as a group. Based on the opinions that have been put forward above, it can be concluded that the work environment is an atmosphere where employees work in an agency that can affect the physical and psychological conditions of employees both directly and indirectly so that the work environment can be categorized as a good environment if employees will be able to work calmly, optimally and with high productivity.

Health Worker Performance

Law No. 36 of 2014 concerning health workers defines health practitioners as individuals dedicated to the health sector and possessing knowledge and skills from specific health sciences that enable them to perform legitimate health actions. Practitioners must actively improve the quality of optimal health services, so they can achieve optimal health by increasing their awareness, desire, and ability in health as an investment in the development of productive employees in social and economic terms. Health workers consist of several interrelated executives, such as doctors, dentists, nurses, midwives, etc. The performance of health workers is one of the important elements to ensure adequate health services to achieve optimal health conditions. The existence of health workers and health human resource management are two interrelated things in human resource management in the health sector. Health worker performance is the result achieved by someone in carrying out the tasks assigned to them according to predetermined criteria. To achieve good performance, the most dominant element is human resources. Even if planning has been well and neatly arranged, if the people or personnel who carry it out are not qualified and do not have high work enthusiasm, then the planning that has been prepared will be in vain. The work results achieved by an employee must be able to provide an important contribution to the company, seen from the quality and quantity aspects felt by the company and

have enormous benefits for the company's interests in the present and future (Irwanda, 2020). Employee skills need to be continuously improved to produce more useful and faster results. Therefore, this requires increased training and basic skills development. Technically, healthcare workers' skills can be measured through graduation certificates. This is supported by the Minimum Service Standards (SPM) issued by the Ministry of Health, which require emergency service providers to possess a valid emergency certificate, such as an ATLS/BTCLS.

Tuberculosis

Tuberculosis (TB) is an infectious disease that usually affects the lungs and is caused by the bacterium Mycobacterium tuberculosis, although it can affect any organ in the body. TB infection develops when the bacteria enter through airborne droplets. TB can be fatal, but in many cases, TB is preventable and treatable. TB is a leading cause of death worldwide (WHO 2021). Pulmonary tuberculosis (TB) is an infectious disease that primarily affects the lung parenchyma. Tuberculosis can also be transmitted to other parts of the body, including the meninges, kidneys, bones, and lymph nodes. The primary infectious agent, Mycobacterium tuberculosis, is a slow-growing, acid-fast aerobic rod that is sensitive to heat and ultraviolet light. Tuberculosis is a worldwide public health problem. Mortality and morbidity rates continue to rise (Smeltzer, 20201). Tuberculosis is a disease that is highly prevalent in increasing population morbidity, especially in developing countries. It is estimated that one-third of the world's population is infected with Mycobacterium tuberculosis (Somantri, 2019).

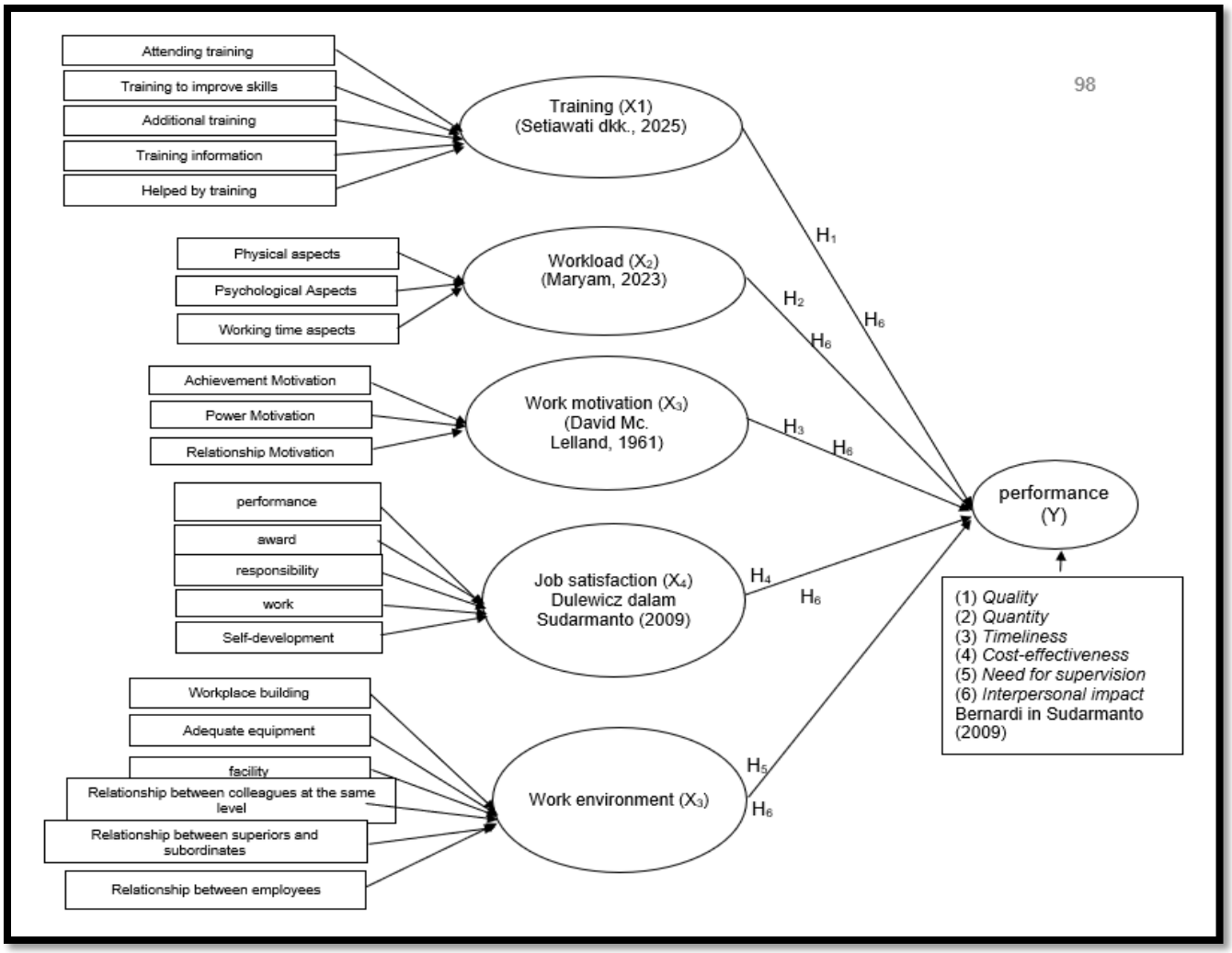

Figure 1: Conceptual Framework

Research Hypothesis

H1: Training has a significant impact on the performance of tuberculosis officers in efforts to reduce multi-drug resistance cases in Kendari City.

H2: Workload has a significant impact on the performance of tuberculosis officers in efforts to reduce multidrug resistance cases in Kendari City.

H3: Work motivation has a significant influence on the performance of tuberculosis officers in efforts to reduce multi-drug resistance cases in Kendari City.

H4: Job satisfaction influences the performance of tuberculosis officers in efforts to reduce multi-drug resistance cases in Kendari City.

H5: The work environment has a significant influence on the performance of tuberculosis officers in efforts to reduce multi-drug resistance cases in Kendari City.

H6: Training, workload, work motivation, job satisfaction and work environment have a simultaneous influence on the performance of tuberculosis officers in efforts to reduce multi-drug resistance cases in Kendari City.

Research Methods

The research will be conducted in all 15 community health centers (Puskesmas) in Kendari City. The population in this study will be healthcare workers tasked with preventing and managing tuberculosis (TB programmers) in the community health centers throughout Kendari City. According to Sugiyono (2021), a sample size is a subset of the population's size and characteristics. In this study, the researcher determined the sample size to be all healthcare workers handling TB cases, totaling 46 individuals. Meanwhile, the research approach used is Smart PLS. The Smart PLS approach is a development of PLS (Partial Least Square) analysis.

Research Result

Evaluation of Measurement Model (Outer Model)

The training variable indicators consist of attending training, training to improve skills, additional training, training information, and assistance with training. The factor loading values for each training indicator can be seen in the following table:

Table 1 Evaluation of Training Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Attending training	-0,383	0,694	0,491
Training improves skills	-0,017	1,115	0,270
Additional training	-0,066	1,104	0,275
Training information	0,075	1,028	0,309
Helpful with training	0,046	0,713	0,479

Source: Smart PLS 3 Data Processing, 2025

Based on table 1 above, it appears that of the five indicators that reflect the training variable (X1), namely attending training, training to improve skills,

additional training, training information and being helped by training. These three indicators have an outer loading value greater than 0.5 and are statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the five indicators are not dominant in forming the training variable.

The workload variable indicators consist of physical, psychological, and working time aspects. The factor loading values for each workload indicator can be seen in Table 2 below:

Table 2 Evaluation of Workload Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Physical Aspects	0,366	0,697	0,489
Psychological Aspects	-0,866	1,676	0,100
Working Time Aspects	0,455	0,797	0,429

Source: Smart PLS 3 Data Processing, 2025

Based on table 2 above, it appears that of the three indicators that reflect the workload variable (X2), namely the physical aspect, the psychological aspect, and the working time aspect. Of the three indicators, there is 1 indicator that has an outer loading value greater than 0.5 and is statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the three indicators are not dominant in forming the workload variable.

The work motivation variable indicators consist of the need for circumstances, relationship motivation, and power motivation. The factor loading values for each work motivation indicator can be seen in Table 3 below:

Table 3 Evaluation of Work Motivation Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Need for status	0,385	0,783	0,438
Relationship motivation	-0,660	1,204	0,234
Power motivation	0,726	1,248	0,218

Source: Smart PLS 3 Data Processing, 2025

Based on table 3 above, it appears that there are three indicators that reflect the work motivation variable (X3), namely the need for circumstances, relationship motivation, and power motivation. Of the three indicators, there

are two indicators that have an outer loading value greater than 0.5 and are statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the three indicators are not dominant in forming the work motivation variable.

The job satisfaction variable indicators consist of achievement, recognition, responsibility, work, and self-development. The factor loading values for each job satisfaction indicator can be seen in Table 4 below:

Table 4 Evaluation of Job Satisfaction Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Achievement	-0,759	1,467	0,149
Awards	-0,627	1,352	0,183
Responsibility	0,191	0,393	0,696
Work	-0,270	0,674	0,504
Self-Development	-0,504	0,998	0,323

Source: Smart PLS 3 Data Processing, 2025

Based on table 4 above, it appears that there are five indicators that reflect the job satisfaction variable (X4), namely achievement, appreciation, responsibility, work, and self-development. Of the three indicators, there are 2 indicators that have an outer loading value greater than 0.5 and are statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the five indicators are not dominant in forming the job satisfaction variable.

The work environment variable indicators consist of the workplace building, adequate work equipment, facilities, relationships between coworkers at the same level, and relationships between superiors and subordinates. The factor loading values for each work environment indicator can be seen in Table 5 below:

Table 5 Evaluation of Work Environment Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Workplace Building	-0,421	1,032	0,307
Adequate Work Equipment	-0,105	0,310	0,758
Facilities	-0,149	0,360	0,721
Relationships between Coworkers	-0,808	1,702	0,095
Relationships between Superiors and Subordinates	-0,159	0,409	0,684
Relationships between Employees	-0,465	0,832	0,410

Source: Smart PLS 3 Data Processing, 2025

Based on table 5 above, it appears that there are five indicators that reflect the work environment variable (X5), namely the workplace building, adequate work equipment, facilities, relationships between colleagues at the same level, and relationships between superiors and subordinates. Of the five indicators, there are 5 indicators that have an outer loading value greater than 0.5 and are statistically significant because the calculated t value is greater than the t table (1.98) or the p value is smaller than 0.05. Based on the outer loading value, it is known that the five indicators are dominant in forming the work environment variable.

The performance variable indicators for healthcare workers consist of quality, quantity, timeliness, cost-effectiveness, need for supervision, and interpersonal impact. The factor loading values for each healthcare worker performance indicator can be seen in Table 6 below:

Table 6 Evaluation of the Health Worker Performance Variable Model

Indicator	Outer Loadings	t-statistic	p-value
Quality	0,555	1,095	0,279
Quantity	-0,219	0,499	0,620
Timeliness	-0,103	0,242	0,810
Cost-Effectiveness	0,347	0,648	0,520
Need for Supervision	-0,728	1,680	0,099
interpersonal impact	-0,446	1,334	0,188

Source: Smart PLS 3 Data Processing, 2025

Based on table 6 above, it appears that there are six indicators that reflect the variables of quality, quantity, timeliness, cost-effectiveness, need for supervision, interpersonal impact. Of the six indicators, there is one indicator that has an outer loading value greater than 0.5 and is statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that one dominant indicator in forming the performance variable of health workers is quality.

R-Squared (R^2)

R-Squared is a measurement that shows how much variation in endogenous latent variables can be explained by exogenous latent variables. Changes in the R-Square value can be used to explain the influence of certain exogenous latent variables (X) on endogenous latent variables (Y) whether they have a substantive influence or not. An R-Square value of 0.70 indicates a model at a strong level, 0.50 indicates a model at a moderate level, and 0.25 indicates a model at a weak level (Ghozali, 2012). The results of the R-square analysis are shown in table 2.

Table 7 R-Square Values

Variable	R-Square
Training Workload Work Motivation Job Satisfaction Work Environment Performance	0,454

Source: Smart PLS 3 Data Processing, 2025

The direct influence model of training, workload, work motivation, job satisfaction and work environment on the performance of TB BDR officers provides an R Square value of 0.454 which can be interpreted that the performance variable of TB MDR officers can be influenced by training, workload, work motivation, job satisfaction and work environment by 45.4%, while the remaining 54.6% is explained by other variables outside the model. This contribution has a moderate level of closeness because it has a value between 0.41-0.70.

Hypothesis Testing

The results of the analysis that has been done with PLS, then the hypothesis proposed to answer the research question can be tested by comparing the p-value with alpha 5% or 0.05 which is the amount of the tolerable error rate. The results of the analysis of the magnitude of the influence coefficient between the latent variables in question, both direct and indirect influences, along with the total effect and p-value can be seen in table 5. Table 5.15. Results of the analysis of the direct path coefficient and indirect influence and P-Value.

Table 8 Hypothesis Testing

Research Variables			Path Coefficient	T-Statistik (t kritis 1,98)	p value	information
training	→	Performance of MDR TB officers	0,128	0,561	0,577	Rejected
Workload	→	Performance of MDR TB officers	0,020	0,123	0,903	Rejected
Work motivation	→	Performance of MDR TB officers	0,159	0,636	0,528	Rejected
Job satisfaction	→	Performance of MDR TB officers	0,462	1,448	0,154	Rejected
Work environment	→	Performance of MDR TB officers	-0,503	-3,349	0,041	accepted

Source: Smart PLS 3 Data Processing, 2025

Discussion

The Effect of Training on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

The results showed that training had a positive effect on TB officer performance, with a path coefficient of 0.128. This indicates that improvements in the quality or intensity of training tend to be followed by improved performance. However, this effect was not statistically significant because the p-value was 0.577 (p > 0.05), so the hypothesis stating a significant effect of training on TB officer performance cannot be accepted. This finding suggests

that although training was considered quite good by respondents (average score of 4), its implementation was not strong enough to have a real impact on performance improvement. This may be due to limited access to training (average score of the "attending training" indicator = 3), uneven information (the "training information" indicator = 3), and the weak statistical contribution of all training indicators based on the outer model test, where none of the indicators were statistically significant (t-value < 1.98; p-value > 0.05). Indicators such as "additional training" and "assisted by training" received high perceptual scores (score = 5), but their statistical contribution remained low, indicating a gap between respondents' perceptions and the empirical strength of the model constructs. This situation indicates that the existing training design is not fully relevant or contextual to practical needs in the field. The Human Capital Theory by Schultz (1961) and Becker (1993) states that training is a form of human resource investment that should increase knowledge and productivity. Previous research supports this, such as a study in Sumenep Regency (2022) which showed that simulation training methods can significantly improve the performance of TB cadres ($p < 0.05$). Research at the Bandar Lampung Community Health Center also found a relationship between training and an increase in the Case Detection Rate (CDR) for pulmonary TB. Furthermore, a meta-analysis by Rahmawati (2023) showed that TB infection control training significantly improved the performance of health workers (OR 2.35; 95% CI: 1.96–2.81). However, the results of this study align with other findings that suggest that while training has a positive impact on performance, this influence is not always statistically significant, as other factors are more dominant, such as work motivation, supervision, facility support, and service unit leadership (Setiawati et al., 2025; Miftah et al., 2024). Therefore, it is recommended that training programs for MDR-TB officers in Kendari City be further developed through a needs-based approach, interactive methods, and the involvement of all officers. Regular evaluation is also essential to ensure the impact of training on performance systematically and sustainably.

The Effect of Workload on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

The results of the study indicate that the workload of MDR-TB officers in Kendari City is moderate, with an average score of 3. This reflects tolerable working conditions, but still poses potential stress if not managed properly. Workload is measured through three main indicators: physical, psychological, and working time. However, all three are statistically insignificant in forming the workload construct. This indicates that these indicators do not fully represent the complexity of the workload of MDR-TB officers in the field. This

low significance may be due to officers having adapted to their work routines, thus not considering physical, psychological, or working time pressure as a major burden. In fact, path analysis shows that workload has a positive but very small (0.020) and insignificant (p = 0.903) effect on officer performance, indicating that workload is not a dominant factor in influencing performance (Robbins & Judge, 2017). This finding is also in line with the non-linear workload-performance theory, where moderate workload can be motivating, but excessive workload can have a negative impact (Yulita & Handayani, 2022). The implications of these findings emphasize the importance of holistic workload management, including task distribution, psychosocial support, training, and the use of technology for work efficiency. Furthermore, the development of more contextual measurement instruments is needed to more accurately reflect workload, for example by incorporating dimensions of administrative burden or reporting pressure (Mangkunegara, 2017).

The Influence of Motivation on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

Based on the recapitulation of respondents' answers, the work motivation variables of MDR TB officers in Kendari City were generally in the good category, with an average score of 4. However, a deeper analysis showed that the motivation indicators based on the ERG theory (existence, relatedness, and power) did not significantly shape the work motivation construct. The indicator for the need for circumstances and relationships only received a fair score, indicating structural challenges such as a lack of incentives and weak social ties in the workplace. Meanwhile, the indicator for the need for power received a good score, reflecting the drive to play an active role and be trusted. However, statistically, the three indicators were not significant in forming the motivation construct (outer loading <0.5 and p-value >0.05), so they cannot be used as a strong measure to explain work motivation (Alderfer in Robbins & Judge, 2015). This indicates that work motivation among MDR TB officers is more influenced by external factors such as the work environment, leadership, and rewards than by intrinsic factors alone. The results of the hypothesis test showed that work motivation has a positive effect on performance, but it is not statistically significant (p-value = 0.528). This means that while theoretically, increased motivation is expected to drive improved performance, in this context, the effect is weak. This aligns with previous findings, such as those at the Abeli and Soasio Community Health Centers, where work motivation also had no significant impact on health worker performance (Rahman, 2020; La Asri, 2022). Therefore, strategies to improve the performance of MDR-TB workers should focus on a more holistic approach, including improving the

work environment, enhancing incentive and recognition systems, and fostering supportive leadership. These findings also highlight the importance of adapting work motivation measurement tools to suit the work context of field health workers facing high risks and complex workloads. Therefore, qualitative approaches such as interviews or observations are recommended to better understand the true sources of dominant motivation (Robbins & Judge, 2015; Hasibuan, 2017).

The Influence of Job Satisfaction on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

Based on the recapitulation results, job satisfaction of MDR TB officers in Kendari City is generally in the "sufficient" category with an average score of 3. Intrinsic dimensions such as achievement, responsibility, and the work itself obtained good scores, indicating that officers feel proud of their work achievements and have a high sense of responsibility towards their duties. In contrast, extrinsic indicators such as appreciation and self-development only obtained a "sufficient" score, indicating a lack of incentives and limited opportunities for professional capacity improvement. This is in line with Herzberg's two-factor theory which distinguishes between motivator (intrinsic) and hygiene (extrinsic) factors, where deficiencies in extrinsic factors can reduce job satisfaction even though the intrinsic factors are met (Herzberg in Robbins & Judge, 2015). The results of the outer model analysis showed that although two indicators had outer loading values >0.5, both were not statistically significant ($p > 0.05$), indicating that these indicators were not statistically strong enough to form the job satisfaction construct. The results of the hypothesis test indicate a positive relationship between job satisfaction and officer performance (path coefficient 0.462), but this effect is not significant ($p = 0.154$). This means that although increased job satisfaction tends to be followed by increased performance, in the context of this study, the relationship is not statistically strong enough. This finding differs from several previous studies, such as that conducted by Rahman (2020) in Takalar Regency, which showed that job satisfaction has a significant effect on performance. Therefore, improving the performance of MDR-TB officers requires a more comprehensive approach, including improving the reward system, increasing opportunities for self-development, and maintaining intrinsic aspects of the job that are already considered good. These findings emphasize the importance of understanding job satisfaction as a multidimensional construct that requires integrated interventions to improve performance in the context of public health services (Robbins & Judge, 2015; Hasibuan, 2017).

The Influence of the Work Environment on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

The recapitulation results show that the work environment variable for TB MDR officers in Kendari City is in the "good" category with an average score of 4, reflecting working conditions that generally support the implementation of tasks, both in terms of physical, facilities, and social relations. The five main indicators, namely the workplace building, work equipment, facilities, relationships between colleagues at the same level, and superior-subordinate relationships, all show valid and significant outer loading values ($p < 0.05$), indicating that the work environment construct is statistically measurable and representative. A conducive work environment has been proven to be an important determinant in supporting the comfort, productivity, and effectiveness of officers, as well as helping to shape their motivation and job satisfaction (Sedarmayanti, 2017; Robbins & Judge, 2015). However, the test results show that this variable has a negative and significant influence on performance ($\beta = -0.503$; $p = 0.041$), which indicates that the perception of a less than optimal work environment is actually correlated with decreased performance. This supports Herzberg's (1966) theory, which states that the work environment is a hygiene factor, where discomfort in this aspect will reduce job satisfaction and performance. Furthermore, the Person-Environment Fit theory also explains that a mismatch between the individual and the work environment can cause stress and reduce performance (Kristof-Brown et al., 2005). These results are reinforced by empirical studies such as those by Yuliana et al. (2021), Rahmawati & Sari (2019), and WHO (2020), which show that poor work environment quality, including a lack of facilities, PPE, and managerial support, negatively impacts the performance of TB workers in various regions. Thus, the results of this study confirm that although the work environment is generally considered good, there are still crucial elements that need to be improved to prevent performance impediments. Therefore, work environment maintenance must be carried out comprehensively, including improving physical facilities, completeness of work equipment, and strengthening interpersonal relationships and supervisory structures within the community health center environment (Herzberg, 1966; Robbins & Judge, 2015).

The Simultaneous Influence of Training, Workload, Motivation, Job Satisfaction and Work Environment on the Performance of Tuberculosis Officers in Efforts to Reduce Multi-Drug Resistance Cases in Kendari City

The results of the simultaneous test showed that the R-Square value of 0.454 indicated that 45.4% of the variation in the performance of MDR TB officers in Kendari City could be explained by five independent variables, namely training, workload, motivation, job satisfaction, and work environment, while the remaining 54.6% was influenced by other factors outside the model. In the context of social research, this value is included in the moderate category, in accordance with the guidelines put forward by Chin (1998) that the R-Square value between 0.33 and 0.67 reflects the moderate explanatory power of the model. This indicates that although the variables tested have contributed to performance, there are still external factors that have not been accommodated in this study. Therefore, further studies are needed to explore other factors such as family support, organizational policies, supervision, or socio-economic conditions that can influence the performance of MDR TB officers, as suggested by Hair et al. (2014) in the structural path analysis approach.

Conclusion

This study aims to analyze the influence of training, workload, motivation, job satisfaction and work environment on the performance of tuberculosis officers in an effort to reduce Multi Drug Resistant cases in Kendari City, then several conclusions can be put forward as follows: Training has a positive and insignificant effect on the performance of tuberculosis officers in an effort to reduce multi drug resistant cases in Kendari City, this means that there is a unidirectional relationship between training and the performance of MDR TB officers, the better the training received, the more likely their performance is to improve. Workload has a positive and insignificant effect on the performance of tuberculosis officers in an effort to reduce multi drug resistant cases in Kendari City, this shows a positive relationship direction, the higher the workload, most officers tend to have slightly better performance. Work motivation has a positive and insignificant effect on the performance of tuberculosis officers in an effort to reduce multi drug resistant cases in Kendari City, this means that work motivation does have the right direction to improve officer performance, but its practical implications have not been proven effective in this context. Job satisfaction has a positive and insignificant effect on the performance of tuberculosis officers in an effort to reduce multi drug resistant cases in Kendari City, job satisfaction does show a positive direction on the performance of MDR TB officers, but its

influence is not significant in this model. The work environment has a negative and significant effect on the performance of tuberculosis officers in efforts to reduce multidrug resistance cases in Kendari City. This means that the work environment significantly influences the performance improvement of MDR TB officers. Training, workload, work motivation, job satisfaction and work environment have a positive and significant effect on the performance of tuberculosis officers in efforts to reduce multidrug resistance cases in Kendari City. This means that improvements in each of these aspects are conceptually linked to improved performance of MDR TB officers. In order for the research results to be more representative and generalizable, it is recommended to expand the number of samples and research locations to several other areas in Southeast Sulawesi. This can help in comparing the conditions and factors that influence the performance of MDR TB officers in various regions.

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