

Organizational Citizenship Behavior In The State Civil Administration North Sumatra Provincial Health Office, Indonesia

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Abstract – The degree of public health based on indicators of Life Expectancy (UHH) in North Sumatra Province in 2020 is ranked 24 out of 34 Provinces nationally. This rating reflects the quality, productivity, performance, effectiveness, and achievement of the organizational goals of the North Sumatra Provincial Health Office. Achievement of productivity, performance; and organizational goals will be better if Organizational Citizenship Behavior (OCB) thrives. This study aims to determine the level of State Civil Administration (ASN) OCB at the North Sumatra Provincial Health Office. This study was attended by 655 civil servants (78%) from a total population of 840 people. Research analysis was carried out using descriptive statistics and One-Way ANOVA. The result of the research is that OCB is in a strong category (73.1%), this shows that individual initiatives are already strong in carrying out certain actions beyond the job description, job requirements, and formal job responsibilities. This result is not very encouraging, because there are still 26.9% whose OCB is still in the moderate/sufficient category that needs to be repaired. This percentage is still quite large and has the potential to disrupt and reduce existing OCB levels. This research can be used in making policies needed to maintain and improve OCB North Sumatra Provincial Health Office and similar health service organizations.

Keywords – Organizational Citizenship Behavior, State Civil Administration (ASN)

I. INTRODUCTION

The achievement of public health degrees in North Sumatra Province in 2020 based on the Life Expectancy (UHH) indicator is ranked 24 out of 34 provinces nationally and is ranked 10th out of 10 provinces on the island of Sumatra [1]. This achievement reflects how quality, productivity, the performance of health services, organizational effectiveness, and achievement of organizational goals, can also reflect how Organizational Citizenship Behavior (OCB) develops. Achievement of productivity, performance and social life, and the psychological environment of the organization will be better if OCB thrives in the organization, moreover, this behavior is not a formal obligation of organizational citizens [2].

Successful organizations have many employees who are willing and able to take actions that are more than the demands of job duties and responsibilities and have performance that exceeds targets and expectations. Employees will make the best contribution to the goals and sustainability of the organization, will be willing to help, volunteer for extra work, avoid unnecessary conflicts; respect the norms, and written rules, and wisely tolerate losses, difficulties, or interruptions that sometimes occur in the work [2]. OCB can be defined as "behavior that shows individual initiative in carrying out certain actions beyond the job description, job requirements, and formal job responsibilities." [3]–[5].

Health service organizations and hospitals as the hospitality industry and public services need OCB as well as the hospitality

industry. Staff should show respect, courtesy, and sincerity to every patient or hotel guest they encounter. Most often, they are asked to provide customized services and must be able to resolve complaints quickly to gain customer satisfaction. Given the unique nature of hospitality, employees must be strong emotionally, psychologically, and even spiritually [6]–[8].

II. PURPOSE AND METHODS

This study aims to determine the level of ASN OCB at the North Sumatra Provincial Health Office. The total population for the study was 840 civil servants, with 655 respondents (78%) participating in the study. OCB is measured by modifying the scale which has been developed by Podsakoff et al., (1990) based on the dimensions put forward by Organ (1988) namely: altruism, conscientiousness, courtesy, sportsmanship, and civic virtue. The OCB scale uses a Likert format which consists of five ranges of answer choices from 1 to 5; Very Unsuitable (STS), Not Suitable (TS), Neutral (N), Suitable (S), and Very Suitable (SS) [9]. The results of the scale calculation will show the level of OCB in three parts:

TABLE I. OCB SCALE BASED ON CATEGORIZATION

| Value Range | OCB category |
|-----------------------------|--------------|
| $\mu + 1SD < X$ | Strong |
| $\mu - 1SD < X < \mu + 1SD$ | Fair/Average |
| $X < \mu - 1SD$ | Weak |

The original research scale in English was then adapted into Indonesian by a bilingual translator to ensure that the translated scale has the same meaning. The tests carried out in this study included a content validity test by professional judgment, an item discriminating power test, Confirmatory Factor Analysis (CFA), and a reliability test [10], [11]. The scale was tested on 211 civil servants at the Muhammad Ildrem Mental Hospital, North Sumatra Province, excluding research respondents. The results of the scale trial were 18 items that met the requirements for item discriminating power test, CFA, and reliability of a total of 27 items tested, data analysis was performed using descriptive statistics and One-Way ANOVA.

III. RESULTS AND DISCUSSION

Based on the results of the study, the OCB levels of the North Sumatra Provincial Health Office were:

TABLE II. LEVELS OF OCB HEALTH OFFICE OF NORTH SUMATRA PROVINCE

| Value Range | OCB category | Frequency | Percentage (%) |
|-----------------------------|------------------|------------|----------------|
| $\mu + 1SD < X$ | Strong OCB | 479 | 73.1 |
| $\mu - 1SD < X < \mu + 1SD$ | Fair/Average OCB | 176 | 26.9 |
| $X < \mu - 1SD$ | Weak OCB | 0 | 0.0 |
| Amount | | 655 | 100.0 |

Based on the table above, it can be concluded that the OCB of the North Sumatra Provincial Health Office is in the Strong OCB category of 479 people (73.1%) and Sufficient OCB of as many as 176 people (26.9%). This indicates that OCB has been implemented strongly at the North Sumatra Provincial Health Office.

Even though strong OCB has reached 73.1%, this result is not very encouraging, because there are still 176 people (26.9%) whose OCB is still in the average/sufficient category. In assessing ASN behavior, the category of moderate/average OCB is still in the category of behavior that needs improvement [12]. This indicates that the 176 ASN people still need OCB repair, this

number is still quite a lot and has the potential to disrupt and reduce the existing OCB level.

IV. CONCLUSIONS

This study intends to describe the level of ASN OCB at the North Sumatra Provincial Health Office. The majority of ASN's OCB is already in the Strong OCB category of 73.1% (479 people), the rest are moderate/average OCB who still need OCB improvement of 26.9% (176 people). In general, the ASN of the North Sumatra Provincial Health Office has shown strong OCB behavior at work and has shown strong individual initiative in taking certain actions outside of their job descriptions, job requirements, and formal job responsibilities.

If seen from the large number of OCB in the sufficient/average category that requires OCB improvement (26.9%) this can explain the lack of effectiveness of the organization in achieving goals, productivity, and performance of health services. This means that out of every 10 ASN people 7 people show strong OCB and 3 people whose OCB behavior needs improvement. So that the workload and responsibility for achieving organizational goals are more strongly carried by only 7 people. This also has the same meaning, for example, out of 10 doctors or nurses, only 7 people show strong OCB in service, while 3 people provide mediocre services, just to fulfill their job descriptions and obligations.

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