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Personal and Institutional Factors Affecting Physiotherapist Performance in Nusa Tenggara Barat, Indonesia

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ABSTRACT

Background: Physiotherapist performance is an important indicator in determining the quality of medical rehabilitation services, influenced by the interaction of personal and institutional factors. This study aims to analyze the influence of personal factors (motivation, formal and non-formal education) and institutional factors (leadership and work environment) on physiotherapist performance.
Subjects and Method: This study used a quantitative approach with a cross-sectional design. The subjects consisted of 183 physiotherapists in West Nusa Tenggara (NTB) Province. Data collection was conducted using a questionnaire that had been tested for validity and reliability. Independent variables included motivation, formal education, non-formal education, leadership, and work environment. The dependent variable was physiotherapist performance. Data analysis included bivariate analysis using *Spearman's rho* and multivariate analysis using path analysis with STATA.
Results: Motivation (b = 0.44; 95% CI = 0.34 to 0.54; p < 0.001), work environment (b = 0.40; 95% CI = 0.29 to 0.51; p < 0.001), and formal education (b = 0.22; 95% CI = 0.13 to 0.32; p < 0.001) had a direct and significant influence on physiotherapist performance. Work environment (b = 0.40; 95% CI = 0.28 to 0.53; p < 0.001), leadership (b = 0.15; 95% CI = 0.03 to 0.28; p = 0.016), and non-formal education (b = 0.31; 95% CI = 0.19 to 0.44; p < 0.001) had an indirect effect on performance through motivation. Leadership also had an indirect effect on performance through work environment (b = 0.45; 95% CI = 0.34 to 0.56; p < 0.001). The model showed good fit (Chi-square = 9.92; p = 0.105; RMSEA = 0.066; CFI = 0.99; TLI = 0.97; SRMR = 0.024).
Conclusion: Motivation, work environment, and formal education have a direct influence on physiotherapist performance, while leadership and non-formal education have an indirect influence through motivation and work environment as mediators.

Keywords: Physiotherapist, work performance, motivation, leadership, path analysis.

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BACKGROUND

Healthcare services in Indonesia continue to evolve in line with the growing public demand for quality services, necessitating improved performance of healthcare workers as a key component of the service

system. Within the context of healthcare organizations, human resources (HR) play a strategic role in determining service success, and therefore, effective management is essential to address increasingly complex dynamics and competition (Maratis, 2022).

The performance of healthcare workers is influenced by personal and institutional factors. Personal factors include individual characteristics such as motivation, education level, abilities, and work experience, which influence behavior and work performance (Fajriah et al., 2021). Institutional factors are elements originating from within an organization or institution that can influence the behavior, attitudes, and performance of individuals within it. In the context of human resource management, institutional factors can be defined as conditions or characteristics of an organization that directly or indirectly impact employee work effectiveness. Two important components included in institutional factors are leadership. And work environment (Robbins & Judge, 2022). Optimal performance is an indicator of an individual's success in achieving work standards and contributing to the quality of healthcare services (Aditya et al., 2024).

Increasing life expectancy and the global prevalence of chronic diseases have increased the need for rehabilitation services, including physiotherapy. It is estimated that more than one billion people worldwide will experience disabilities and require rehabilitation services (Shakya, 2024). In Indonesia, the number of registered physiotherapists is expected to reach 20,221 by 2024, reflecting an increase in the capacity of healthcare workers while increasing professional competition (IFI, 2024). Efforts to improve the quality of healthcare workers are also supported by digital transformation through the *SATUSEHAT SDMK* platform and the policy of fulfilling Professional Credit Units (SKP) as a requirement for extending practice permits. This policy emphasizes the importance of continuous competency development to ensure service quality (Ministry of Health, 2024). Research on physiotherapy services in various healthcare facilities indicates that there are still a number of issues related to service quality related to physiotherapist performance. This is in line with research at Dr. Sardjito Hospital which found that the interpersonal competence of physiotherapists is not fully optimal, indicated by patient complaints regarding communication, accuracy of exercise instructions, and the attention and patience of staff in providing therapy (Yustinus, 2010). This condition not only indicates a problem in service efficiency, but also indicates that the performance of physiotherapists is not fully in accordance with the established operational standards.

Educational factors and work motivation are important determinants in improving performance. Educational level is one indicator that reflects an individual's ability to complete a job, as well as being the basis for determining a person's suitability for a particular position (Matondang & Sugiarto, 2025). Furthermore, institutional factors such as leadership and the work environment also significantly influence the creation of productive working conditions and support the performance of healthcare workers. Leadership that encourages teamwork and interdisciplinary collaboration is essential in providing holistic and coordinated care for patients. Leaders who have a deep understanding of technological changes, patient needs, and the dynamics of healthcare organizations will play a crucial role in formulating successful strategies to address the continuous changes in this challenging digital era (Purwanto & Adiati, 2021). The work environment can be used as

a tool to evaluate the impact of a positive work environment on employee performance. A good work environment is reflected in harmonious relationships between colleagues, superiors, and subordinates, as well as the availability of adequate facilities and infrastructure (Dolonseda & Watung, 2020).

There are still limitations and limited understanding of the personal and institutional factors that influence physiotherapist performance, particularly in West Nusa Tenggara (NTB), which has a growing need for physiotherapy services. This situation is a fundamental reason for conducting research to identify the role of these various factors in supporting optimal physiotherapist performance. This research is expected to provide empirical evidence that will not only be useful for developing strategies to improve the performance of healthcare workers in NTB but also serve as a reference in efforts to strengthen other healthcare services with similar characteristics.

SUBJECTS AND METHOD

1. Study Design

This was a cross-sectional study conducted in healthcare services in West Nusa Tenggara, Indonesia, from December 2025 to January 2026.

2. Population and Sample

The population in this study consisted of all 256 physiotherapists working in West Nusa Tenggara (NTB). The sampling technique used was total population sampling. Based on the data collection process and the completeness of the questionnaires, a final sample of 183 respondents met the eligibility criteria and were included in the analysis. The inclusion criteria in this study included: (1) physiotherapists who actively work in hospitals, clinics, or physiotherapy service units in West Nusa Tenggara; (2) willing to be respondents; and (3) able to provide information and complete the questionnaire properly. The exclusion criteria included: (1) physiotherapists who were on long leave or inactive during the study period; and (2) respondents who did not complete the questionnaire completely.

3. Research Variables

The dependent variable was work performance. The independent variables were personal factors, including motivation and formal and non-formal education levels, while institutional factors include leadership and the work environment.

4. Operational Definition of Variables

Motivation is an internal or external drive that influences the enthusiasm, sincerity and commitment of physiotherapists in working.

Formal education is the final level of formal education undertaken by physiotherapists as a form of developing professional competence and knowledge that supports performance in physiotherapy services.

Non-formal education is the involvement of physiotherapists in learning activities outside of formal education to improve professional competence, including training, seminars and workshops.

Leadership is the ability of a leader to influence, guide and direct physiotherapists in carrying out their duties.

The work environment is the physical and non-physical conditions of the workplace that affect the comfort and effectiveness of the physiotherapist's work.

Physiotherapist performance is the result of the physiotherapist's work in providing physiotherapy services according to service standards and professional competence.

5. Research Instruments

The research instrument used was a questionnaire consisting of 28 questions using a

Likert scale , which provided alternative answers with three levels of assessment, ranging from "yes", "uncertain", or "no". It included 5 questions on motivation, 1 question on formal education, 4 questions on non-formal education, 6 questions on leadership perceptions, 6 questions on the work environment, and 6 questions on physiotherapist performance.

6. Data analysis

Univariate analysis was used to describe the results of each variable studied. Bivariate analysis using Spearman's rho was used to determine the relationship between the dependent and independent variables. Multivariate analysis using path analysis was used to determine the extent of influence of one variable on another, both directly and indirectly. This analysis used STATA 13 software.

7. Research Ethics

Research ethics issues, including informed consent, anonymity, and confidentiality, were carefully addressed throughout the research process. A research ethics approval letter was obtained from the Health Research Ethics Committee of Kusuma Husada University, Surakarta, Number 316/UKH.L.02/EC/XII/2025, on December 31, 2025.

RESULTS

1. Univariate Analysis

Univariate analysis was used to determine the frequency distribution based on the characteristics of the research subjects. Formal education was classified as an ordinal variable representing increasing levels of educational attainment (D3, D4/S1, Profession, and S2). Motivation, non-formal education, leadership, work environment, and physiotherapist performance were measured using multiple Likert-scale items. Composite scores were calculated by summing the responses to each item. Although individual Likert-scale responses are ordinal, the composite scores were treated as continuous variables and considered appropriate for descriptive statistics and path analysis.

Table 1 shows the formal education variables of D3 as many as 46 people (25.1%), D4/S1 as many as 53 people (29.0%), Professional as many as 83 people (45.4%), and S2 as many as 1 person (0.5%). Female participants 127 people (69.4%) were more prevalent than male participants 56 people (30.6%). In terms of employment status, the majority were civil servants, comprising 121 people (66.1%).

Table 1. Characteristic Respondent (Categorical Data)

Variables	Category	Frequency (n)	Percentage (%)
Formal education	D3	46	25.1
	D4/S1	53	29.0
	Profession	83	45.4
	S2	1	0.5
Gender	Male	56	30.6
	Female	127	69.4
Employment Status	Civil servant	121	66.1
	non-civil servant	4	2.2
	Contract	35	19.1
	Freelance	23	12.6

Table 2 shows that 183 physiotherapists were included in the study. The mean age of the participants was 32.19 years (SD= 6.21), and the mean duration of employment was 9.39 years (SD = 6.61).

Table 2. Characteristic Respondent (Continuous Data)

Variables	N	Mean	SD	Min.	Max.
Age	183	32.19	6.21	25	58
Years of Service	183	9.39	6.61	1	34

Table 3 shows that the measurement of the motivation variable has mean 14.08 (SD= 1.00). The non-formal education variable has mean 11.44 (SD= 0.71). The leadership variable has mean 16.47 (SD = 1.55). The work environment variable has mean 16.80 (SD = 1.24). The performance variable has mean 17.38 (SD = 0.84).

Tabel 3. Descriptive Statistics of Study Variables

Variables	N	Mean	SD	Min.	Max.
Motivation	183	14.08	1.00	12	15
Non-formal education	183	11.44	0.71	10	12
Leadership	183	16.47	1.55	11	18
Work environment	183	16.80	1.24	14	18
Performance	183	17.38	0.84	15	18

2. Bivariate Analysis

Table 4 shows that a positive and strong relationship was found between motivation and physiotherapist performance with a correlation coefficient (r) of 0.76 and a significance of p = 0.001 (p < 0.05), a positive and strong relationship was found between formal education and physiotherapist performance with a correlation coefficient (r= 0.55) and a significance of p= 0.001, a positive and strong relationship was found between non-formal education and physiotherapist performance with a correlation coefficient (r) of 0.60 and a significance of p = 0.001, a positive and sufficient relationship was found between leadership perception and physiotherapist performance with a correlation coefficient (r) of 0.40 and a significance of p = 0.001, a positive and strong relationship was found between work environment and physiotherapist performance with a correlation coefficient (r) of 0.70 and a significance of p= 0.001.

Table 4. Spearman's rho Correlation Test Results Table between Independent and Dependent Variables (Performance)

Independent Variables	r	p
Motivation	0.76	0.001
Formal education	0.55	0.001
Non-formal education	0.60	0.001
Leadership	0.40	0.001
Work environment	0.70	0.001

3. Multivariate Analysis

a. Model specifications

Figure 1 presents the final path model, showing the relationship between personal factors, namely motivation, formal education and non-formal education with institutional factors, namely leadership and work environment on the performance of physiotherapists in NTB.

b. Model identification

This study has six measurable variables: three exogenous variables, three endogenous variables, and seven parameters. Therefore, the degree of freedom (df) value is 8, meaning this research model can be used for path analysis.

c. Model fit

Table 4 shows the results of the multivariate analysis where the tested model shows a very good level of fit (Chi ^{2} = 9.92; p = 0.105; RMSEA = 0.066; CFI = 0.99; TLI = 0.97; SRMR = 0.024; CD = 0.88).

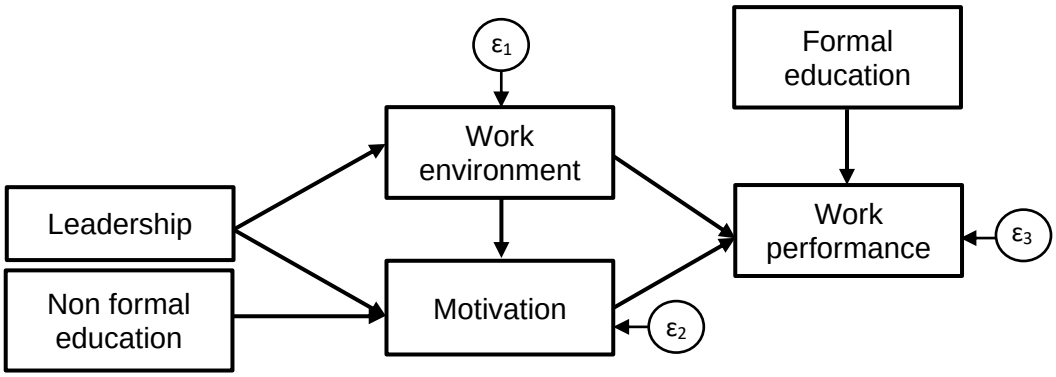

Figure 1. Path Analysis Diagram of Personal and Institutional Factors Affecting Physiotherapy Performance

Table 4. Results of path analysis of personal and institutional factors that influence physiotherapy performance

Dependent Variables	Independent Variables	Regression coef. (b)	CI 95%		p
			Limit lower	Upper limit	
Direct Effect					
Performance	← Motivation	0.44	0.34	0.54	<0.001
	← Work environment	0.40	0.29	0.51	<0.001
	← Formal education	0.22	0.13	0.32	<0.001
Indirect Effect					
Motivation	← Work environment	0.40	0.28	0.53	<0.001
	← Leadership	0.15	0.03	0.28	<0.016
	← Non-formal education	0.31	0.19	0.44	<0.001
Work environment	← Leadership	0.45	0.34	0.56	<0.001

Number of observations= 183; p= 0.105; RMSEA= 0.066; CFI= 0.99; TLI= 0.97; SRMR= 0.024; CD= 0.88

d. Parameter estimation

The results of the path analysis in Table 4 show a significant direct relationship between performance and motivation, work environment, and formal education. Motivation (b = 0.44; 95% CI = 0.34 to 0.54; p <0.001), work environment (b = 0.40; 95% CI= 0.29 to 0.51; p <0.001), formal education (b= 0.22; 95% CI = 0.13 to 0.32; p <0.001).

Performance shows a significant indirect relationship to the work environment, leadership and non-formal education through motivation. Work environment (b= 0.40; 95% CI= 0.28 to 0.53; p<0.001), leadership (b= 0.15; 95% CI = 0.03 to 0.28;

p<0.016), non-formal education (b= 0.31; 95% CI= 0.19 to 0.44, p<0.001).

Performance showed a significant indirect relationship to leadership through the work environment. Leadership (b= 0.45; 95% CI= 0.34 to 0.56; p <0.001).

DISCUSSION

1. The Influence of Motivation on Performance

This study found that motivation had a positive and significant effect on physiotherapist performance in NTB. This finding suggests that motivated physiotherapists are more likely to demonstrate stronger commitment, greater responsibility, and higher consistency in delivering physiotherapy services. In clinical practice, motivation is important because physiotherapy outcomes often depend on therapist engagement, persistence, and active interaction with patients throughout the rehabilitation process. Therefore, higher motivation may directly contribute to better service quality and improved job performance.

Motivation may influence performance through both intrinsic and extrinsic mechanisms. Intrinsic motivation encourages physiotherapists to work with professional pride, personal achievement, and dedication to patient recovery, while extrinsic motivation may arise from organizational support, recognition, and career development opportunities. When these factors are present, physiotherapists are more likely to optimize their skills and complete their responsibilities effectively. This finding is consistent with previous studies showing that motivation is an important determinant of employee performance across healthcare and organizational settings Ryandini & Nurhadi (2020); Putra et al., (2024). It also supports the Job Demands–Resources model proposed by Bakker & Demerouti (2017), which explains that motivation enhances employee energy, engagement, and overall performance.

2. The Influence of Formal and Non-formal Education on Performance

This study found that formal education had a positive and significant effect on physiotherapist performance. Higher educational attainment may improve performance because formal education provides stronger theoretical knowledge, clinical reasoning skills, and evidence-based practice competencies. Physiotherapists with higher levels of education are more likely to have better problem-solving abilities, communication skills, and professional confidence when managing patients. These competencies are essential in physiotherapy services, where treatment decisions often require critical thinking and individualized care. Therefore, increased educational level may contribute to more effective and efficient professional performance.

This finding is consistent with previous studies showing that education level is associated with better employee performance in both healthcare and non-healthcare settings Rahmilah (2025); Tamara et al. (2024). It also supports the view of Robbins & Judge (2022), who state that education helps shape individual abilities and work competence. In the context of healthcare services, formal education may also encourage lifelong learning attitudes and adaptation to new clinical standards, which are important for maintaining service quality.

Non-formal education was also found to contribute to physiotherapist performance indirectly through motivation. Participation in training, seminars, workshops, and other professional development activities may increase motivation by enhancing competence, self-confidence, and career satisfaction. Physiotherapists who feel more capable and updated with current practices

are likely to be more engaged in their work and more committed to delivering quality care. In this way, non-formal education may strengthen performance not only through skill improvement but also through psychological factors such as enthusiasm and professional commitment.

These findings are in line with previous studies showing that training improves employee performance and that motivation can mediate this relationship Saripah & Yanuarti (2024), Bimantara et al. (2021). According to Mangkunegara (2016), training is a systematic process to improve technical skills and work ability. For physiotherapists, continuous non-formal education is particularly important because rehabilitation practices continue to develop, requiring professionals to regularly update their knowledge and clinical competencies.

3. The Influence of Leadership on Performance

This study found that leadership was positively associated with physiotherapist performance through motivation and work environment. This suggests that leadership may not only influence performance directly, but also shape the organizational conditions that enable employees to perform better. In healthcare settings, effective leaders can provide clear direction, encourage teamwork, and create trust among staff members. When physiotherapists perceive leadership positively, they may feel more valued, supported, and motivated to carry out their responsibilities effectively.

Leadership may improve performance through motivation by increasing employee engagement, recognition, and commitment to organizational goals. Leaders who communicate clearly, provide constructive feedback, and acknowledge employee contributions can strengthen intrinsic and extrinsic motivation. As a result, physiotherapists may become more enthusiastic, disciplined, and responsive in delivering patient care. This finding is consistent with previous studies showing that work motivation mediates the relationship between leadership and employee performance Panjaitan (2024). In addition, leadership may enhance performance by creating a supportive work environment. Leaders who promote collaboration, fair management practices, and open communication are more likely to build a positive workplace climate. In physiotherapy services, where coordination with colleagues and other health professionals is essential, a conducive work environment can improve efficiency, reduce workplace stress, and support better service delivery. Therefore, leadership can contribute to performance indirectly by improving organizational climate and employee well-being.

These findings are consistent with previous studies reporting a positive relationship between leadership and employee performance Khoiri & Oktavia (2019). They also support the perspective of Robbins & Judge (2022), who emphasize that leadership behavior influences communication patterns, interpersonal relationships, and the overall work climate within organizations.

4. The Influence of Work Environment on Performance

This study found that the work environment had a positive effect on physiotherapist performance, both directly and indirectly through motivation. This finding indicates that a supportive workplace is an important factor in helping physiotherapists perform effectively. In healthcare settings, physiotherapists often work in dynamic environments that require concentration, coordination, and regular interaction with patients and other professionals. Therefore, a

comfortable and well-organized work environment may enable staff to carry out their responsibilities more efficiently and consistently.

The direct influence of the work environment on performance may occur because adequate facilities, clear work systems, and positive interpersonal relationships help employees focus on clinical tasks and reduce unnecessary barriers. In physiotherapy practice, access to appropriate equipment, sufficient workspace, and effective communication with colleagues can improve treatment delivery and patient management. Conversely, poor working conditions may create stress, inefficiency, and lower service quality.

The work environment may also influence performance indirectly by increasing motivation. Employees who feel safe, supported, and appreciated in the workplace are more likely to develop stronger enthusiasm and commitment toward their work. As motivation increases, physiotherapists may become more engaged, productive, and responsive to patient needs. This suggests that workplace conditions affect not only physical comfort but also psychological readiness to perform well. These findings are consistent with previous studies reporting that a conducive work environment is associated with higher employee performance Catio (2020); Ridwan et al. (2023). They also support Wibowo (2014), who explains that both physical factors, such as facilities and cleanliness, and non-physical factors, such as communication and harmonious relationships, are essential in promoting employee performance.

This study has several limitations. The use of self-reported questionnaires may introduce response and social desirability bias. The sample was limited to physiotherapists affiliated with the Indonesian Physiotherapy Association (IFI) in West Nusa Tenggara, which may limit generalizability. In addition, only selected personal and institutional factors were examined, while other potential determinants such as workload, job satisfaction, organizational culture, and remuneration were not included.

This study has both theoretical and practical implications. It confirms that physiotherapist performance is influenced by both personal and institutional factors, particularly motivation, leadership, education, and work environment. Practically, the findings highlight the importance of strengthening leadership, enhancing motivation, supporting continuous professional development, and creating a conducive work environment to improve performance.

Future research is recommended to include additional variables such as job satisfaction, workload, organizational culture, and remuneration systems, as well as to expand the study scope across regions to improve generalizability. For healthcare institutions, efforts should focus on leadership development, continuous training programs, and maintaining a conducive work environment. Meanwhile, physiotherapists are encouraged to continuously improve their professional competencies and maintain high work motivation to ensure optimal service quality.

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AUTHOR CONTRIBUTIONS

Rizka Dwi Yulianti made significant contributions to the conception and design of the study, data collection, data analysis, and data interpretation, as well as drafting the original manuscript.

Anik Lestari contributed to the critical review of the manuscript and provided important intellectual input.

Eti Poncorini Pamungkasari contributed to the study design, data analysis and interpretation, and critically reviewed the manuscript for important intellectual content.

CONFLICT OF INTEREST

No conflict of interest.

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