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The Mediating Role of Work Motivation in the Relationship between Competence, Internal Communication, and Health Promotion Officers' Performance

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ABSTRACT:

Introduction: Health promotion officers have an essential role in delivering preventive health programs and improving community health outcomes. However, differences in performance among officers remain a concern in primary healthcare settings. This study investigated whether work motivation mediates the relationship between competence, internal communication, and performance.

Methods: A cross-sectional quantitative study was conducted among 185 health promotion officers in four districts of Southeast Sulawesi, Indonesia. Data were collected using a structured questionnaire assessing competence, internal communication, work motivation, and performance. The proposed relationships were examined using Partial Least Squares Structural Equation Modeling (PLS-SEM).

Results: Competence was positively associated with work motivation ($\beta = 0.165$, $p = 0.006$) and performance ($\beta = 0.638$, $p < 0.001$). Internal communication significantly influenced work motivation ($\beta = 0.672$, $p < 0.001$), but showed no significant direct association with performance ($\beta = -0.011$, $p = 0.837$). Work motivation had a significant positive relationship with performance ($\beta = 0.416$, $p < 0.001$) and mediated the associations of competence ($\beta = 0.037$, $p < 0.001$) and internal communication ($\beta = 0.141$, $p < 0.001$) with performance.

Conclusion: Work motivation plays an important mediating role in explaining how competence and internal communication are related to health promotion officers' performance.

performance. Improving staff competence, organizational communication, and motivational support may contribute to better primary healthcare performance.

1. INTRODUCTION

Background

Health promotion plays a central role in public health systems by encouraging individuals and communities to actively participate in improving their health status and addressing factors that influence health outcomes. The effectiveness of health promotion initiatives depends on a comprehensive approach that includes community involvement, supportive social and organizational environments, and the development of health workers' capacity to deliver appropriate interventions at the primary healthcare level.(1) In this context, health promotion officers act as frontline providers who are responsible for implementing health education, preventive programs, and community empowerment activities. The extent to which these programs achieve their objectives is closely associated with the competence, motivation, and performance of health workers in translating health policies into effective actions within communities.(2,3)

Nevertheless, maintaining high performance among health promotion officers continues to be a challenge, particularly in areas affected by geographical difficulties, limited healthcare infrastructure, and unequal distribution of health personnel.(4) Previous research has demonstrated that the performance of community-based health workers is not determined solely by individual capabilities but is also shaped by organizational factors, including supervision, institutional support, communication mechanisms, and work motivation.(5) Moreover, insufficient motivation and inadequate organizational support may limit the ability of health workers to maximize their competencies and deliver effective health promotion services.(6) Therefore, investigating the factors that contribute to health promotion officers' performance is important for improving primary healthcare delivery and achieving sustainable public health outcomes.

Competence represents a critical factor influencing the performance of health workers because it encompasses the knowledge, skills, professional attitudes, and capabilities required to carry out their responsibilities effectively. In the context of health promotion, competence extends beyond technical expertise and includes the ability to communicate effectively, engage with communities, identify health problems, and develop appropriate interventions based on community needs.(7) Health promotion officers who possess strong competencies are more capable of delivering health education, encouraging healthy behavior changes, and increasing community involvement in health programs.(8)

Previous empirical studies have shown that competency levels are closely associated with the performance of health promotion personnel. Evidence from Indonesia indicates that health promoters with better competency demonstrate improved work performance, suggesting that variations in knowledge, practical skills, and professional abilities contribute to differences in achieving health program objectives.(9) Furthermore, strengthening the competencies of public health workers is essential, particularly in primary healthcare settings where health promotion officers are required to implement programs independently, collaborate with other health professionals, and respond to complex community health issues.(10) Therefore, enhancing the competence of health promotion officers can be considered an important approach to improving individual performance and increasing the effectiveness of community-based health promotion activities.

Internal communication represents a significant organizational element that affects the effectiveness and performance of health workers, especially in primary healthcare organizations where collaboration and coordination among team members are required. Effective communication within an organization enables accurate information exchange, improves role clarity, strengthens cooperation, and supports the successful implementation of healthcare programs. (11) In the context of health promotion services, communication between supervisors, healthcare personnel, and health promotion officers is essential to ensure that program

objectives, responsibilities, and operational activities are understood and implemented consistently according to community health needs.(11,12)

Conversely, ineffective internal communication can disrupt information sharing, weaken coordination processes, and negatively influence the achievement of healthcare service objectives. Previous studies have demonstrated that internal communication contributes to employee engagement, job satisfaction, and work performance by improving employees' understanding of organizational expectations and strengthening their commitment to assigned responsibilities.(13) Within primary healthcare settings, effective communication also enables health workers to obtain managerial support, address workplace challenges, and respond effectively to changing service requirements.(14,15) Therefore, internal communication can be viewed as an important organizational determinant that contributes to the improvement of health promotion officers' performance.

In addition, internal communication may affect employee performance through motivational mechanisms. A workplace environment characterized by open communication, feedback, and organizational support can enhance employees' motivation, psychological attachment, and willingness to achieve work goals.(16,17) Consequently, investigating the role of internal communication together with motivation as a mediating factor may provide a deeper explanation of the process through which health promotion officers improve their performance in primary healthcare settings.

Work motivation serves as an important behavioral mechanism that explains the process through which individual competencies and organizational conditions influence healthcare workers' performance. Motivation reflects the level of willingness, commitment, and effort that encourages health workers to apply their knowledge and skills in achieving work targets. Although competence provides health workers with the ability to perform their duties, optimal performance depends on the extent to which individuals are motivated to utilize these abilities consistently in their professional activities. Therefore, motivation acts as a bridge that connects employees' potential capabilities with actual performance outcomes.(18)

Within primary healthcare services, motivation becomes particularly relevant for health promotion officers because their responsibilities involve continuous community interaction, health education delivery, preventive activities, and efforts to encourage behavioral change. Health workers who possess strong work motivation are more likely to demonstrate greater initiative, persistence, and accountability in carrying out health programs.(19) In addition, organizational factors, including effective communication, supportive leadership, and recognition from the workplace, may strengthen motivation by creating an environment that encourages employees to perform better.(15)

Recent studies suggest that motivation can operate as an intervening mechanism that clarifies the relationship between workplace factors and employee performance. Through this pathway, competence and organizational support may enhance performance indirectly by increasing employees' enthusiasm, commitment, and willingness to achieve organizational objectives.(20) However, empirical studies exploring the mediating function of motivation among health promotion officers remain limited, particularly in primary healthcare settings characterized by geographical constraints and varying resource availability. Consequently, this study seeks to examine the mediating role of motivation in explaining the relationship between competence, internal communication, and the performance of health promotion officers.

Although healthcare worker performance has received considerable attention in previous research, the factors and mechanisms underlying the performance of health promotion officers in primary healthcare settings are still not fully understood. Existing studies have identified that healthcare worker performance is influenced by various individual and organizational determinants, including professional competence, workplace conditions, organizational support, and work motivation.(15) However, most previous investigations have emphasized the direct relationships between these determinants and performance outcomes, while the role of motivation as an explanatory pathway that links individual and organizational factors to performance remains insufficiently explored, particularly among community-based health workers.(5)

Moreover, available evidence has predominantly examined healthcare professionals in clinical environments, especially hospital-based workers, whereas studies focusing specifically on health promotion officers at the primary healthcare level are still limited.(2) This limitation is significant because health promotion officers perform distinctive roles involving health education, community empowerment, disease prevention activities, and behavioral change interventions. These responsibilities require not only adequate competence but also effective communication processes and sustained motivation to achieve optimal program outcomes.

To overcome these limitations, this study proposes a model that examines work motivation as a mediating variable in the relationship between competence, internal communication, and the performance of health promotion officers. This study is designed to investigate how competence and internal communication contribute to the performance of health promotion officers, while also assessing their associations with work motivation. Furthermore, this research seeks to determine the extent to which motivation functions as an intervening mechanism that explains the relationship between individual and organizational factors and performance outcomes within primary healthcare settings.

METHODS

A quantitative research framework was applied using an explanatory cross-sectional design. The design enabled the researchers to analyze the relationships between competence, internal communication, work motivation, and performance outcomes among health promotion officers based on measurements obtained at one defined period of observation.

The study population included all health promotion officers employed across four selected districts in Southeast Sulawesi Province, comprising 185 individuals in total. Given the accessible and relatively limited population size, a total population sampling approach was adopted, whereby all eligible health promotion officers were recruited as participants in the study. Total population sampling was selected because the accessible population consisted of only 185 health promotion officers, allowing all eligible participants to be included.

This study was implemented across four purposively selected districts in Southeast Sulawesi Province, Indonesia: Muna, Central Buton, Kolaka, and Konawe. The selection of these locations was based on their representation of diverse geographic contexts, including coastal island territories and mainland areas. Data were collected over a five-month period from December 2025 through April 2026.

Data were obtained through a structured questionnaire developed from established theoretical frameworks and previous empirical research concerning healthcare worker competence, internal communication, work motivation, and job performance. The instrument was designed to assess four primary study variables: competence, internal communication, work motivation, and performance among health promotion officers.

The competence variable was operationalized through three dimensions, namely knowledge, skills, and work attitudes, which represent the essential individual capacities required to effectively implement health promotion programs. The indicators were adapted from the competency model introduced by Spencer and Spencer (1993). Internal communication was measured using three dimensions: organizational information flow, communication between units, and communication among coworkers. These dimensions reflect the effectiveness of information dissemination, coordination processes, and interpersonal interactions within healthcare organizations, based on the internal communication framework of Robbins and Judge (2017).

Work motivation was assessed through several motivational dimensions, including physiological and safety needs, achievement and recognition, self-actualization, affiliation, and responsibility. These dimensions were developed based on motivational theory, particularly Maslow's hierarchy of needs (1943), and supported by findings from previous studies on employee motivation. Meanwhile, performance was measured using indicators related to work quality, work quantity and achievement of standards, timeliness, and work discipline, following the performance evaluation framework proposed by Robbins and Judge (2017).

All questionnaire statements were rated using a five-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Prior to the primary survey, the instrument underwent validity and reliability assessments. Construct validity was examined using corrected item-total correlation analysis, with all items demonstrating correlation coefficients exceeding 0.30, indicating satisfactory validity. Reliability analysis showed Cronbach's alpha values of 0.891 for competence, 0.845 for internal communication, 0.912 for work motivation, and 0.879 for performance, confirming strong internal consistency across all measurement scales.

The data were analyzed using a path analysis approach within the Partial Least Squares Structural Equation Modeling (PLS-SEM) framework. The analysis focused on assessing the direct effects of competence and internal communication on performance, as well as their indirect effects mediated by work motivation. The statistical analysis and model estimation were performed using SmartPLS.

Prior to data collection, ethical approval was secured from the Health Research Ethics Committee of Politeknik Bina Husada Kendari (Approval No. 075/POLTEKBINHUS.5/KEPK/XII/2025), ensuring that the study procedures complied with applicable ethical research standards.

RESULTS

The characteristics of the respondents in this study are presented in the following table.

Table 2. Distribution of Respondents' Characteristics

Characteristics	Category	Frequency	%
District	Muna	45	24.3
	Central Buton	28	15.1
	Kolaka	52	28.1
	Konawe	60	32.4
Gender	Male	52	28.11
	Female	133	71.89
Age (years)	<30	41	22.16
	31-40	59	31.89
	41-50	38	20.54
	>50	47	25.41
Educational Level	Diploma III (DIII)	67	36.22
	Bachelor's Degree (D4/S1)	102	55.14
	Master's Degree (S2)	16	8.65

Table 2 summarizes the demographic characteristics of health promotion officers involved in this study. The analysis included 185 respondents recruited from four regencies in Southeast Sulawesi Province. Based on the distribution of participants across study locations, Konawe Regency contributed the highest number of respondents (32.4%), followed by Kolaka Regency (28.1%), Muna Regency (24.3%), and Central Buton Regency (15.1%).

The gender composition showed that female respondents represented the majority of participants, accounting for 71.89%, whereas male respondents comprised 28.11% of the total sample. In terms of age distribution, respondents aged 31–40 years constituted the largest group (31.89%), followed by those aged above 50 years (25.41%), below 30 years (22.16%), and 41–50 years (20.54%).

With respect to educational attainment, most respondents held a D4/Bachelor's degree (55.14%), while 36.22% had a Diploma III qualification and 8.65% possessed a Master's degree. This distribution suggests that the majority of health promotion officers had attained undergraduate-level education, indicating a relatively adequate educational foundation among personnel engaged in primary healthcare promotion services.

Table 3. Measurement Model Assessment

Construct	Indicator	Factor Loading	Cronbach's Alpha	Composite Reliability	AVE
Competence (X1)	Knowledge	0.968	0.973	0.977	0.948
	Skills	0.973			
	Work attitude	0.980			
Internal Communication (X2)	Organizational information	0.971	0.966	0.966	0.937
	Inter-unit communication	0.970			
	Coworker communication	0.963			
Work Motivation (M)	Physiological and safety needs	0.971	0.976	0.976	0.933
	Achievement and recognition needs	0.970			
	Self-actualization needs	0.967			
	Affiliative needs and responsibility	0.955			
Performance (Y)	Individual quality	0.971	0.976	0.977	0.934
	Work quantity and standards	0.967			
	Timeliness	0.967			
	Work discipline	0.961			

The assessment of the measurement model was conducted by examining factor loadings, Cronbach's alpha (CA), composite reliability (CR), and average variance extracted (AVE). The results presented in Table 3 indicate that each measurement item achieved a factor loading value greater than 0.70, reflecting acceptable indicator reliability. In addition, the CA and CR coefficients for all latent constructs surpassed the recommended minimum value of 0.70, suggesting strong internal consistency among the indicators. The AVE values also exceeded the required threshold of 0.50, providing evidence of satisfactory convergent validity for all constructs.

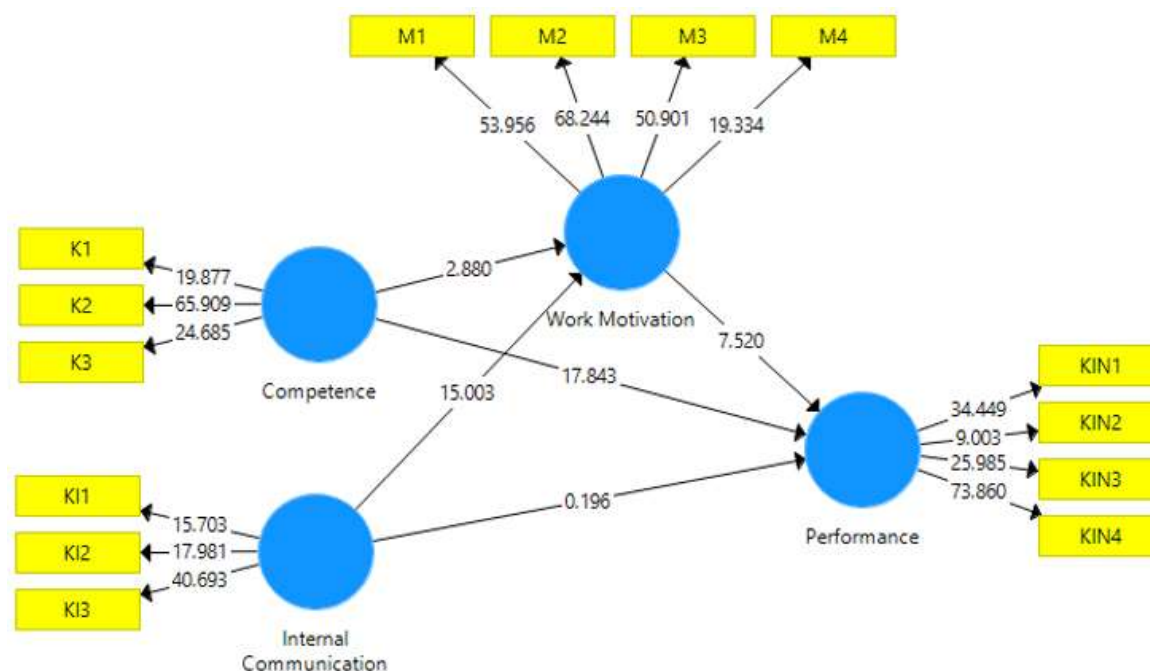


Figure 1. Structural Model Results of the Relationship between Competence, Internal Communication, Motivation, and Performance

Table 4. Structural Model Assessment: Direct Effects of the Study Variables

Hypothesis	Path Coefficient (β)	p-value
Competence (X1) $\rightarrow$ Performance (Y)	0.638	0.000
Competence (X1) $\rightarrow$ Work Motivation (M)	0.165	0.006
Internal Communication (X2) $\rightarrow$ Performance (Y)	-0.011	0.837
Internal Communication (X2) $\rightarrow$ Work Motivation (M)	0.672	0.000
Work Motivation (M) $\rightarrow$ Performance (Y)	0.416	0.000

The structural model results are presented in Table 4. Competence had a significant positive association with work motivation ($\beta = 0.165$, $p = 0.006$) and performance ($\beta = 0.638$, $p < 0.001$). Internal communication significantly predicted work motivation ($\beta = 0.672$, $p < 0.001$); however, its direct association with performance was not statistically significant ($\beta = -0.011$, $p = 0.837$). Work motivation was positively associated with performance ($\beta = 0.416$, $p < 0.001$).

The findings indicate that competence and work motivation were directly related to performance, whereas internal communication appeared to influence performance indirectly through work motivation rather than through a direct effect.

Table 5. Structural Model Testing Results for Indirect Effects

Hypothesis	Path coefficient (β)	Significance (p value)
Competence (X1) $\rightarrow$ Work Motivation (M) $\rightarrow$ Performance (Y)	0.037	0.000
Internal Communication (X2) $\rightarrow$ Work Motivation (M) $\rightarrow$ Performance (Y)	0.141	0.000

The outcomes of the mediation analysis are presented in Table 5. The analysis demonstrated that work motivation significantly mediated the association between competence and performance among health promotion officers ($\beta = 0.037$, $p < 0.001$). This finding indicates that competence may influence performance indirectly by enhancing employees' work motivation.

In addition, work motivation was found to significantly mediate the relationship between internal communication and performance ($\beta = 0.141$, $p < 0.001$). The magnitude of the indirect effect of internal communication on performance through work motivation was greater than that of competence, indicating that effective communication within organizations may improve performance by strengthening motivational processes.

Overall, the mediation findings provide evidence that work motivation serves as a mediating mechanism linking competence and internal communication with the performance of health promotion officers.

DISCUSSION

The findings of this study demonstrate that competence, internal communication, and work motivation contribute to explaining variations in health promotion officers' performance. Competence showed both direct and indirect associations with performance, whereas internal communication influenced performance indirectly through work motivation. These findings highlight the role of motivation as a mechanism linking individual capability and organizational communication processes with employee performance.

Competence was found to positively influence both work motivation and performance, suggesting that health promotion officers with adequate knowledge, practical skills, and positive professional attitudes are more capable of carrying out their responsibilities effectively. Employees who perceive themselves as competent are generally more confident in performing their duties and more motivated to achieve organizational objectives. These findings support previous studies reporting that competency development enhances the quality of healthcare services by improving employees' professional abilities, motivation, and overall work performance. Likewise, strengthening communication-related competencies among primary healthcare workers has been associated with more effective health promotion practices and service delivery.(9,21,22)

Recent evidence from primary healthcare settings further indicates that healthcare workers' competencies are influenced not only by individual educational preparation but also by continuous professional development and organizational support. Competency improvement should therefore involve broader strategies that enhance technical abilities, communication capacity, and adaptability in responding to complex community health needs. In this context, strengthening competence among health promotion officers may contribute not only to improved task execution but also to greater motivation and commitment toward health promotion programs.(21–23)

The findings suggest that internal communication influences performance mainly through the enhancement of work motivation, rather than through a direct relationship with performance. A well-functioning communication system enables the efficient exchange of information, improves coordination among healthcare units, and promotes collaboration between colleagues. Such conditions help employees understand organizational expectations and perform their duties more effectively. Similar evidence has shown that

effective communication within healthcare organizations contributes to stronger teamwork, greater employee engagement, and higher levels of organizational performance.(11,14,17,23)

Recent studies further emphasize that supportive organizational environments characterized by effective communication, feedback mechanisms, and collaborative relationships can strengthen healthcare workers' psychological involvement and willingness to contribute to organizational objectives. Therefore, internal communication may function not only as an operational mechanism for information exchange but also as an organizational resource that supports motivation and performance improvement.(23,24)

Another important finding of this study is the mediating role of work motivation. Although competence showed a direct association with performance, the mediation analysis indicates that both competence and internal communication were indirectly related to performance through work motivation. Although competence demonstrated a significant direct relationship with performance, the findings also indicate that motivation strengthens the translation of employees' knowledge and skills into consistent workplace behavior. Thus, competent health promotion officers may achieve optimal performance when they are motivated to apply their capabilities in daily professional activities.(22,23) Furthermore, the stronger indirect effect of internal communication through work motivation indicates that internal communication influences performance through psychological processes. Effective communication may increase employees' sense of involvement, organizational attachment, and willingness to achieve work targets, thereby strengthening the pathway between workplace conditions and performance outcomes.(23,24) Among the variables examined, work motivation exhibited the strongest relationship with performance. This finding implies that motivated health promotion officers are more likely to demonstrate commitment, responsibility, and persistence in implementing health promotion programs and achieving organizational goals. Previous studies have similarly identified work motivation as a critical factor influencing the effectiveness and productivity of healthcare workers across various healthcare settings.(5,15,19) Recent research among primary healthcare workers also demonstrates that motivation serves as an important mechanism connecting organizational factors with job performance. Workers who experience supportive organizational environments and stronger internal motivation tend to show higher commitment and improved performance outcomes.(23,25,26) The present findings have practical implications for healthcare managers and policymakers. Efforts to improve the performance of health promotion officers should extend beyond competency development by also strengthening internal communication and fostering work motivation. Healthcare institutions should implement integrated workforce strategies that combine competency-based training, effective communication systems, supportive supervision, recognition mechanisms, and motivational interventions. Such approaches may help create a workplace environment where health promotion officers are not only capable of performing their duties but are also encouraged to sustain high levels of professional engagement.(23,27) This study contributes to the existing literature by examining competence, internal communication, and work motivation simultaneously within a structural model among health promotion officers in Indonesian primary healthcare settings. Unlike previous studies that have frequently focused on hospital-based healthcare professionals or examined performance determinants separately, this study provides additional evidence regarding the mechanism through which individual competence and internal communication were associated with performance through work motivation among community-based health workers. The findings reinforce the importance of considering motivational pathways when designing strategies to improve primary healthcare workforce performance.(23,26)

CONCLUSIONS

This study highlights that the performance of health promotion officers is related to their level of competence, the quality of internal communication, and work motivation. Competence was found to have both direct and mediated associations with performance, while internal communication affected performance mainly through the strengthening of work motivation. Work motivation functioned as an important explanatory mechanism linking individual capabilities and organizational communication processes with performance outcomes.

These findings emphasize the need for a comprehensive workforce development strategy in improving health promotion services. Enhancing professional competencies, developing supportive internal communication systems, and creating conditions that encourage employee motivation may contribute to improved performance among health promotion officers and support the effective implementation of primary healthcare programs.

CONFLICT OF INTEREST

The authors declare that they have no competing interests or conflicts of interest related to the conduct, analysis, or publication of this research.

AUTHORS' CONTRIBUTION

ESML: Conceptualization, Methodology, Investigation, Data curation, Formal analysis, Writing – original draft preparation, Project administration.

UR: Conceptualization, Supervision, Validation, Methodology, Writing – review and editing.

MA: Formal analysis, Statistical analysis, Validation, Interpretation of results, Writing – review and editing.

ES: Methodology, Data curation, Visualization, Validation, Writing – review and editing.

FR: Investigation, Data collection, Validation, Resources, Writing – review and editing.

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