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**THE RELATIONSHIP BETWEEN LEADERSHIP STYLE AND THE  
PERFORMANCE OF HEALTH WORKERS AT POASIA PRIMARY  
HEALTH CARE CENTERS IN 2025**

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**ABSTRACT**

Performance is the result achieved by an individual in carrying out tasks in accordance with assigned responsibilities, both in terms of quality and quantity. One of the factors influencing performance is leadership in directing and motivating health workers to achieve organizational goals. The performance achievement at Poasia Primary Health Care Center is still considered suboptimal, as indicated by several health programs that have not yet reached their targets (<100%). This study aimed to determine the relationship between transformational, transactional, and servant leadership styles and the performance of health workers at Poasia Primary Health Care Center.

This research employed a quantitative design. The sample consisted of 83 respondents selected using purposive sampling. Data were collected using a questionnaire and analyzed using the Chi-square test.

The results showed that there were statistically significant relationships between transformational leadership (p-value = 0.002), transactional leadership (p-value = 0.020), and servant leadership (p-value = 0.015) and the performance of health workers.

Therefore, primary health care leaders are expected to implement effective leadership styles to improve motivation, discipline, and the quality of health services provided to the community.

**KEYWORDS:** Leadership, Transformational, Transactional, Servant, Performance, Health Workers.

**INTRODUCTION**

Health professionals constitute a fundamental component of healthcare systems, as their contributions are crucial in ensuring effective service delivery and advancing global health

development objectives. According to the World Health Organization, as outlined in the *Global Strategy on Human Resources for Health: Workforce 2030*, the world is projected to face a shortage exceeding 18 million health workers. This challenge has prompted the development of international policy frameworks aimed at improving both the availability and efficient utilization of the health workforce. These initiatives are consistent with global efforts to achieve Universal Health Coverage and the Sustainable Development Goals, especially target 3.c, which underscores the importance of increasing health system financing while improving the recruitment, capacity development, and retention of health professionals. (1).

In Indonesia, the number of health workers in Primary health care centers in 2024 reached 530,338 personnel distributed across 10,180 centers, with midwives and nurses representing the largest professional groups (2). Although the number of health workers has increased, their distribution remains uneven. Some Primary health care centers continue to experience workforce shortages, leading to increased workloads and potentially reduced performance, which may ultimately affect the quality of primary health care services (3).

A similar situation is observed at the Poasia primary health care center in Kendari City. In 2025, the center employed 105 health workers serving approximately 44,214 residents within its service area, while patient visits have continued to increase annually. However, several health program indicators, such as maternal immunization coverage and hypertension services, have not yet achieved their expected targets. This condition suggests that the increase in the number of health workers has not been fully accompanied by improvements in service performance (4).

One factor that may influence the performance of health workers is the leadership style of the head of the Primary health care centers. Effective leadership can enhance motivation, discipline, and productivity among health workers. Various modern leadership approaches, such as transformational leadership, transactional leadership, and servant leadership, are considered capable of creating a supportive work environment and improving the quality of health services. Transformational leadership has been shown to foster work motivation through the provision of inspiration, individualized consideration, and intellectual stimulation, which ultimately contributes to the development of an innovative work culture oriented toward service quality (5). Meanwhile, transactional leadership plays a strategic role in strengthening supervision, enforcing discipline, and enhancing the accountability of health workers through the implementation of proportional reward and punishment systems (6).

In addition, servant leadership, which emphasizes empathy, empowerment, and a service-oriented approach, has been proven effective in increasing intrinsic motivation, loyalty, and

the productivity of health workers (7).

Despite the growing body of research on leadership and workforce performance, empirical evidence focusing on primary health care settings in Southeast Sulawesi, especially in Kendari, remains scarce. Accordingly, this study seeks to investigate the association between leadership styles and the performance of health personnel at the Poasia Primary health care center in 2025, with the broader objective of contributing to the enhancement of service quality in primary health care.

## **LITERATURE REVIEW**

### **Primary health care centers**

Primary health care centers represent the initial point of contact within the healthcare system, delivering both community-based and individual health services. Their activities predominantly emphasize promotive and preventive interventions tailored to the needs of the populations within their designated service areas. According to the Ministry of Health Regulation No. 43 of 2019, Primary health care centers play a strategic role as the frontline of healthcare development in Indonesia. The effectiveness of healthcare services at this level is highly influenced by the availability of human resources for health and the quality of leadership within the organization (8).

### **Leadership Style in Healthcare Organizations**

Leadership style refers to the patterns of behavior adopted by leaders to influence, direct, and motivate subordinates in achieving organizational goals. In healthcare settings, leadership plays a crucial role in improving the performance of health workers and enhancing the quality of healthcare services (9).

Effective leadership can create a supportive work environment, increase work motivation, and enhance the productivity of health workers. Modern leadership approaches commonly applied in healthcare organizations include transformational leadership, transactional leadership, and servant leadership (10).

### **Leadership Style in Healthcare Organizations Transformational Leadership**

Transformational leadership refers to a leadership approach in which leaders influence and encourage their followers by fostering motivation, inspiration, and meaningful organizational change. Transformational leaders seek to elevate the awareness, values, and commitment of organizational members toward achieving shared goals (11).

According to Bass and Avolio, transformational leadership consists of four main dimensions:

idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration. This leadership style has been shown to improve work motivation, innovation, and employee performance, particularly in healthcare settings (5).

### **Transactional Leadership**

Transactional leadership emphasizes the exchange relationship between leaders and subordinates through reward and punishment mechanisms. Leaders set clear goals, provide rewards for achievements, and implement corrective actions when performance does not meet established standards (6).

In healthcare organizations, transactional leadership plays an important role in maintaining work discipline, ensuring compliance with standard operating procedures, and achieving organizational performance targets (9).

### **Servant Leadership**

Servant leadership is a leadership approach that prioritizes serving others, focusing on employee empowerment, development, and well-being. Leaders act as facilitators who support and nurture their subordinates. Key characteristics of servant leadership include empathy, humility, trust, vision, and empowerment. Previous studies have shown that this leadership style effectively enhances intrinsic motivation, employee loyalty, and performance in healthcare organizations (7).

### **Health Worker Performance**

Health worker performance refers to the ability of healthcare personnel to carry out their duties effectively and efficiently in accordance with established standards. Performance is influenced by multiple factors, including motivation, workload, work environment, and leadership style. Optimal performance among health workers is essential for achieving health program targets and ensuring the quality of healthcare services. Conversely, poor performance may negatively impact service quality and patient satisfaction (3).

### **Material and Methods Study Design**

This study employed a quantitative research design. According to Sugiyono (2019), quantitative research is a method based on the philosophy of positivism and is considered scientific as it adheres to empirical, objective, measurable, rational, and systematic principles. This approach aims to test predetermined hypotheses by examining specific populations and samples, collecting data using research instruments, and analyzing the data using quantitative

or statistical methods.

The study utilized a cross-sectional design, which emphasizes the measurement or observation of data at a single point in time for both independent and dependent variables.

This design was

intended to examine the relationship between leadership styles and the performance of health workers at Poasia primary health care center.

### **Study Population and Sampling**

The population is defined as the entire group of subjects or objects with specific characteristics that serve as the basis for generalizing research findings (12). The population in this study comprised all health workers at the Poasia primary health care center in 2025, totaling 105 individuals.

A sample refers to the subset of the population selected for investigation and representing the entire population. This study employed a total sampling technique; therefore, all 105 health workers were included as the research sample.

### **Data Collection Instrument and Procedure**

A structured questionnaire was employed as the primary data collection instrument in this study. The questionnaire consisted of a series of written questions and statements designed to obtain relevant data for assessing the relationship between leadership styles and the performance of health workers in primary health care settings. Each item in the instrument was systematically developed based on predefined research variables and their respective indicators, ensuring that the instrument adequately captured the phenomena under investigation.

Data collection was conducted by distributing the questionnaire to respondents who met the established inclusion criteria. Prior to administration, respondents were provided with a clear explanation of the study objectives and instructions on how to complete the questionnaire to ensure clarity and accuracy of responses. The questionnaires were self-administered; however, the researcher remained available to provide clarification when necessary to minimize potential misunderstandings.

In addition to the questionnaire, writing instruments were utilized as supporting tools for recording and documenting data during the research process. A laptop was used as the primary device for data management, including data entry, coding, and statistical analysis, in accordance with the predefined analytical methods. Overall, the data collection and processing

procedures were carried out systematically to ensure the validity, reliability, and scientific rigor of the research findings.

## RESULT

**Table 1. Characteristics of Respondents.**

<b>Variables</b>	<b>Frequency</b>	<b>Percent (%)</b>
<b>Age</b>		
21-30	32	36.6
31-40	27	32.5
>40	24	28.9
<b>Gender</b>		
Male	6	7.2
Female	77	92.8
<b>Highest level of education</b>		
D1-D3	30	36.1
Bachelor (S1)	51	61.4
Master's Degree	2	2.4
<b>Employment Status</b>		
ASN	77	92.8
NON ASN	6	7.2
<b>Years of Service (years)</b>		
<5	16	19.3
5-10	24	28.9
11-15	17	20.5
>15	26	31.3
<b>Position</b>		
General Practitioner	4	4.8
Adminkes	10	12.0
Epidemiology	7	8.4
Midwife	20	24.1
Nutritionist	3	3.6
Pharmacist	1	1.2
Sanitary	4	4.8
Medical Records	1	1.2
Officer Nurse	25	30.1
Administration	5	6.0
ATML	3	3.6

*Source: Primary Data, 2026*

A total of 83 respondents participated in this study. The majority of respondents were aged 21–30 years (36.6%), followed by those aged 31–40 years (32.5%) and >40 years (28.9%). Females predominated (92.8%), while males accounted for 7.2% of the respondents. In terms of education level, most respondents held a Bachelor’s degree (61.4%), followed by Diploma (D1–D3) at 36.1%, and Master’s degree at 2.4%. Most respondents were civil servants (92.8%), while 7.2% were non-civil servants. Regarding years of service, the largest proportion had worked for more than 15 years (31.3%), followed by 5–10 years (28.9%), 11–15 years (20.5%), and less than 5 years (19.3%). Based on job position, the majority were nurses (30.1%), followed by midwives (24.1%), health administration staff (12.0%), epidemiologists (8.4%), administrative staff (6.0%), general practitioners (4.8%), sanitarians (4.8%), nutritionists (3.6%), medical laboratory technologists (3.6%), and pharmacists as well as medical records officers (1.2%).

**Tabel 2. Univariate Analysis.**

<b>Variables</b>	<b>Frequency</b>	<b>Percent (%)</b>
<b>Transformational Leadership Style</b>		
Less Good	9	10.8
Good	74	89.2
<b>Transactional Leadership Style</b>		
Less Good	20	24.1
Good	63	75.9
<b>Servent Leadership Style</b>		
Less Good	5	6.0
Good	78	94.0
<b>Performance</b>		
Less Good	11	13.3
Good	72	86.7

*Source: Primary Data, 2026*

Univariate analysis showed that the majority of respondents assessed transformational leadership as good, with 74 respondents (89.2%), while 9 respondents (10.8%) rated it as less good. For transactional leadership, most respondents also rated it as good, with 63 respondents (75.9%), whereas 20 respondents (24.1%) assessed it as less good.

Similarly, servant leadership was predominantly perceived as good by 78 respondents (94.0%), while only 5 respondents (6.0%) rated it as less good. Regarding the performance of health workers, the majority were categorized as good, with 72 respondents (86.7%), while 11 respondents (13.3%) were categorized as less good.

**Tabel 3: Bivariate Analysis.**

Leadership Style	Performance				P-Value
	Less Good		Good		
	n	%	n	%	
<b>Transformational Leadership Style</b>					
Less Good	5	1.2	4	7.8	0.002
Good	6	9.8	68	64.2	
<b>Transactional Leadership Style</b>					
Less Good	6	2.7	14	17.3	0.020
Good	5	8.3	58	54.7	
<b>Servent Leadership Style</b>					
Less Good	3	0.7	2	4.3	0.015
Good	8	10.3	70	67.7	

Source: Primary Data, 2026

For transformational leadership, it was found that among 9 respondents (10.8%) who perceived transformational leadership as less good, 5 respondents (1.2%) had less good performance and 4 respondents (7.8%) had good performance. Furthermore, among 74 respondents (89.2%) who perceived transformational leadership as good, 6 respondents (9.8%) had less good performance and 68 respondents (64.2%) had good performance. The Fisher's Exact test yielded a p-value of 0.002 ( $p < 0.05$ ), indicating a statistically significant relationship between transformational leadership and the performance of health workers.

For transactional leadership, it was found that among 20 respondents (24.1%) who perceived transactional leadership as less good, 6 respondents (2.7%) had less good performance and 14 respondents (17.3%) had good performance. Furthermore, among 63 respondents (75.9%) who perceived transactional leadership as good, 5 respondents (8.3%) had less good performance and 58 respondents (54.7%) had good performance. The Fisher's Exact test yielded a p-value of 0.020 ( $p < 0.05$ ), indicating a significant relationship between transactional leadership style and the performance of health workers.

Furthermore, for servant leadership, it was found that among 5 respondents (6.0%) who perceived servant leadership as less good, 3 respondents (0.7%) had less good performance and 2 respondents (4.3%) had good performance. Furthermore, among 78 respondents (94.0%) who perceived servant leadership as good, 8 respondents (10.3%) had less good performance and 70 respondents (67.7%) had good performance. The Fisher's Exact test yielded a p-value of

0.015 ( $p < 0.05$ ), indicating a significant relationship between servant leadership style and the performance of health workers.

## DISCUSSION

Transformational leadership focuses on inspiring change, innovation, and the development of collective values among organizational members (11). The findings of this study indicate that transformational leadership at Poasia Primary health care centers is generally perceived as good by most respondents. This leadership style was assessed through four dimensions: idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration. However, two aspects received relatively lower scores, particularly intellectual stimulation related to encouraging health workers to think creatively in solving service problems, and individualized consideration related to the leader's attention to the professional development needs of each health worker. The bivariate analysis showed a significant relationship between transformational leadership and health worker performance, indicating that respondents who perceived transformational leadership as good tended to demonstrate better performance.

These findings are consistent with previous studies. (5) reported that transformational leadership significantly improves employee performance and enhances the quality of healthcare services. Similarly, (13) found that transformational leadership positively influences both performance and psychological well-being of health workers in the post-pandemic period.

(14) also demonstrated that transformational leadership contributes to improved employee performance through the development of a positive organizational culture. These results suggest that leaders who inspire, motivate, and provide intellectual stimulation can strengthen employee commitment and productivity. Therefore, healthcare leaders should further enhance intellectual stimulation and individualized support to encourage innovation, professional development, and continuous improvement in healthcare service quality.

Transactional leadership emphasizes the clarification of roles, performance expectations, and the use of rewards and corrective actions to achieve organizational goals (15). The findings of this study show that transactional leadership at Poasia Primary health care centers is generally categorized as good. The assessment of this leadership style was based on several key dimensions, including contingent reward, active management-by-exception, and passive management-by-exception.

However, several aspects received relatively lower scores, particularly related to the provision of performance-based rewards, leaders' corrective actions when errors occur, and the enforcement of sanctions when work outcomes do not meet established targets.

The bivariate analysis revealed a significant relationship between transactional leadership and health worker performance, indicating that better implementation of transactional leadership tends to be associated with improved employee performance.

These findings support previous research demonstrating the importance of transactional leadership in enhancing employee performance. (16) identified a significant positive association between transactional leadership and employee performance, which was facilitated by the implementation of structured regulations and reward-based mechanisms.

Similarly, (17) found that transactional leadership is significantly associated with the performance of nurses in implementing nursing care in a hospital setting. These studies highlight that clear performance expectations, consistent supervision, and fair reward systems can improve work discipline and task completion. Therefore, healthcare leaders should strengthen reward mechanisms, monitoring processes, and consistent enforcement of organizational rules to maintain high levels of performance among health workers.

Servant leadership is characterized by leaders who prioritize serving others, empowering employees, and fostering a supportive organizational environment (18). The findings of this study indicate that servant leadership at Poasia Primary health care centers is generally perceived as good by most respondents. This leadership style was measured through several dimensions, including love, empowerment, vision, humility, and trust.

However, some aspects received relatively lower scores, particularly regarding leaders' personal attention to employees, opportunities for career development, and the level of trust placed in health workers' abilities. The bivariate analysis demonstrated a significant relationship between servant leadership and health worker performance, suggesting that the better the implementation of servant leadership, the higher the performance of health workers. These results are consistent with previous studies. (19) found that servant leadership is significantly associated with health worker performance in a hospital setting. Similarly, (20) reported that servant leadership has a positive and significant effect on employee performance in primary healthcare centers.

(21) also demonstrated that servant leadership significantly influences the performance of civil servants in community health centers. These findings highlight that leaders who prioritize employee well-being, empowerment, and trust can increase motivation, loyalty, and work engagement. Therefore, strengthening empowerment strategies, building trust, and providing opportunities for professional growth are essential to improve employee performance and ensure sustainable healthcare service delivery.

### **Implications for Future Research**

Future researchers are encouraged to apply research theories and methodologies more systematically in study design to enhance the robustness and generalizability of findings. This study can serve as a reference for generating more comprehensive evidence. Furthermore, research on leadership styles and health worker performance should be expanded by incorporating additional relevant variables, such as job satisfaction, workload, and organizational culture, to provide more comprehensive results and deeper analytical insights. Future studies are also recommended to employ more rigorous research designs, such as longitudinal or mixed-method approaches, to better capture causal relationships and contextual factors influencing health worker performance.

### **CONCLUSION**

This study demonstrates a statistically significant relationship between transformational, transactional, and servant leadership styles and the performance of health workers at the Poasia primary health care center. The findings suggest that more effective leadership practices are associated with higher levels of health worker performance in delivering health services. Therefore, leadership plays a critical role in enhancing service quality and strengthening workforce performance in primary health care settings. These results underscore the importance of adopting appropriate leadership strategies to improve health service outcomes.

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