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THE INFLUENCE OF LEADERSHIP, COMMUNICATION, AND CONTROL SYSTEMS ON SERVICE BEHAVIOR IN HEALTH CENTERS KEDOKANBUNDER INDRAMAYU REGENCY

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Abstract

Purpose: This study aims to investigate the influence of leadership, communication, and control systems on service behavior at the Kedokanbunder Health Center in Indramayu Regency.

Research Methodology: A quantitative approach using questionnaires and interviews. Data was collected from 50 staff members of the Kedokanbunder Health Center. Multiple linear regression analysis was conducted using SPSS software.

Results: The results indicate that leadership, communication, and control systems significantly positively influence service behavior at the Kedokanbunder Health Center. The R-squared value of 0.907 shows that 90.7% of the variance in service behavior is explained by the independent variables.

Limitations: The study is limited by a sample size of 50 respondents, which may not fully represent the entire population of healthcare workers in the region. Further research with a larger sample size and additional variables is recommended

Contribution: This study contributes to the field of healthcare management, particularly in improving service behavior in health centers. The findings provide valuable insights for health administrators and policymakers seeking to enhance service quality through better leadership, communication, and control systems.

Keywords: Leadership, Communication, Control System, and Service Behavior



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1. INTRODUCTION

Health services play a critical role in the development and well-being of society, as they directly influence the physical and mental health of the population. In Indonesia, the government has made significant efforts to improve public health by focusing on the development of quality health services. However, there are ongoing challenges, particularly in terms of service quality and patient satisfaction in health centers (Puskesmas) across the country, including the Kedokanbunder Health Center in Indramayu Regency. From 2017 to 2019, the number of patients visiting the Kedokanbunder Health Center declined, which may be attributed to service quality issues (Kedokanbunder Health Center, 2019).

Several factors are believed to influence service behavior in health settings, including leadership, communication, and control systems. Leadership within healthcare organizations has a direct impact on employee behavior and service quality. Effective leadership is crucial for motivating and guiding employees to deliver quality services, especially in healthcare settings where human resources are the key asset (Zerbe et al., 1997). Similarly, communication plays a vital role in creating a positive work environment and ensuring smooth interactions between employees and patients. Communication quality can significantly affect patient satisfaction and service outcomes (Lukman, 2014).

Control systems, which involve mechanisms for monitoring and regulating employee behavior and service delivery, are another critical factor that can influence service behavior (Mulyadi, 2008). A robust control system ensures that service standards are met consistently, improving overall service quality and employee accountability.

Despite the importance of these factors, there is limited research on how leadership, communication, and control systems affect service behavior specifically in Indonesian health centers. This study aims to fill this gap by investigating the influence of these three factors on service behavior at the Kedokanbunder Health Center in Indramayu Regency.

2. LITERATURE REVIEW AND HYPOTHESIS DEVELOPMENT

2.1. Literature Review

Leadership and Service Behavior

Leadership has long been recognized as a crucial factor influencing employee behavior and organizational outcomes. In healthcare settings, effective leadership is integral to achieving high service quality and patient satisfaction (Zerbe, Dobni, Gedaliahu, & Harel, 1997). Transformational leadership, which focuses on inspiring and motivating employees to achieve higher performance levels, has been shown to improve service behavior by fostering a positive work environment (Bass, 1985). Conversely, transactional leadership, which emphasizes rewards and punishments, can also influence service outcomes, though it tends to have a more limited impact on long-term employee behavior (Judge & Piccolo, 2004).

In the context of health centers, leadership can directly affect service delivery by influencing employee motivation and performance (Robbins & Judge, 2015). Leaders who provide clear expectations, offer support, and recognize achievements are more likely to foster a culture of service excellence (Wibowo, 2013). Thus, strong leadership is essential to improving service behavior in healthcare environments, as it helps employees understand their roles and align their actions with organizational goals.

Communication and Service Behavior

Effective communication is another critical factor influencing service behavior in healthcare settings. According to Hardjana (2003), communication is the process of sharing information, ideas, and emotions to achieve mutual understanding. In health centers, clear and open communication between employees and patients is vital for ensuring quality care. Furthermore, communication between staff members affects teamwork, employee satisfaction, and the overall service environment.

Research has shown that communication quality is directly linked to patient satisfaction (Lukman, 2014). Health professionals who communicate effectively with patients build trust, enhance patient experiences, and reduce misunderstandings. Furthermore, good communication within the healthcare team fosters collaboration and improves efficiency, ultimately leading to better service outcomes (McShane & Von Glinow, 2010).

Control Systems and Service Behavior

Control systems in organizations are mechanisms that help ensure compliance with established standards and procedures. In healthcare, control systems play a significant role in maintaining service quality by monitoring and regulating employee behavior and service delivery (Mulyadi, 2008). These systems include performance evaluations, feedback mechanisms, and corrective actions, all of which contribute to ensuring that service standards are consistently met.

According to Widjanto (2008), control systems in healthcare organizations are designed to minimize errors, enhance accountability, and improve the overall quality of services. In health centers, well-structured control systems ensure that employees adhere to clinical guidelines, patient care protocols, and organizational objectives. Furthermore, when control systems are perceived as fair and transparent, they can enhance employee motivation and service behavior (Zerbe et al., 1997).

While the individual effects of leadership, communication, and control systems have been well-documented, there remains limited research on how these three factors interact to influence service behavior, particularly in Indonesian health centers. This gap presents an opportunity to investigate the combined impact of these factors at the Kedokanbunder Health Center, offering valuable insights into improving service quality in healthcare organizations.

2.2. Hypothesis Development

Based on the theoretical framework presented in the literature review, it is hypothesized that leadership, communication, and control systems all influence service behavior at the Kedokanbunder Health Center. The relationships between these variables are grounded in organizational behavior theory, which emphasizes that effective leadership, clear communication, and robust control mechanisms are key determinants of service quality and employee performance in healthcare settings (Bass, 1985; McShane & Von Glinow, 2010; Widjanto, 2008).

Leadership and Service Behavior

Leadership has been extensively studied as a determinant of employee behavior and organizational performance. Transformational leadership, in particular, is known for its ability to inspire employees to go beyond expectations, thereby enhancing service quality (Bass, 1985). In healthcare organizations, leaders who demonstrate strong commitment to service excellence can foster a culture of accountability and motivation among employees (Wibowo, 2013). As such, it is expected that leadership will have a positive influence on service behavior at the Kedokanbunder Health Center.

Hypothesis 1 (H1): *Leadership has a positive influence on service behavior at the Kedokanbunder Health Center, Indramayu Regency.*

Communication and Service Behavior

Effective communication is essential for ensuring that employees understand their roles and responsibilities, as well as for maintaining positive relationships between staff and patients. Communication within healthcare teams enhances coordination and reduces errors, leading to improved service behavior (Lukman, 2014; McShane & Von Glinow, 2010). Similarly, patient-staff communication plays a critical role in fostering trust and satisfaction, which directly affects service quality. Therefore, it is hypothesized that communication positively influences service behavior at the Kedokanbunder Health Center.

Hypothesis 2 (H2): *Communication has a positive influence on service behavior at the Kedokanbunder Health Center, Indramayu Regency.*

Control Systems and Service Behavior

Control systems in organizations are designed to monitor employee behavior, ensure adherence to policies, and maintain service standards (Mulyadi, 2008). In healthcare settings, control systems can improve service quality by providing clear guidelines, performance evaluations, and feedback mechanisms. When employees perceive control systems as fair and transparent, they are more likely to exhibit positive service behaviors (Zerbe et al., 1997). Given the importance of control mechanisms in maintaining operational standards, it is hypothesized that control systems will have a positive influence on service behavior at the Kedokanbunder Health Center.

Hypothesis 3 (H3): *Control systems have a positive influence on service behavior at the Kedokanbunder Health Center, Indramayu Regency.*

Combined Influence of Leadership, Communication, and Control Systems

Although leadership, communication, and control systems have been studied individually, their combined effect on service behavior in healthcare settings has not been sufficiently explored. It is hypothesized that these three factors, when integrated, will collectively enhance service behavior. The synergy between leadership, communication, and control systems is expected to provide a more comprehensive framework for improving service quality in healthcare organizations.

Hypothesis 4 (H4): *Leadership, communication, and control systems collectively have a positive influence on service behavior at the Kedokanbunder Health Center, Indramayu Regency.*

3. RESEARCH METHODOLOGY

This study is survey-based and employs a quantitative research approach to investigate the influence of leadership, communication, and control systems on service behavior at the Kedokanbunder Health Center in Indramayu Regency. The study uses questionnaires and interviews as primary data collection methods. These instruments were designed to assess the perceptions of healthcare workers regarding the leadership styles, communication practices, and control systems in their workplace, as well as their perceptions of service behavior.

Research Design

This study adopts a descriptive research design with a correlational approach, meaning that it aims to describe the current state of the relationships between the independent variables (leadership, communication, and control systems) and the dependent variable (service behavior). By utilizing regression analysis, the study tests the hypotheses regarding the impact of leadership, communication, and control systems on service behavior, both individually and collectively.

Participants and Sampling

The population for this study consists of the employees at the Kedokanbunder Health Center in Indramayu Regency. A total of 102 staff members were eligible for participation in the study. Using a probability sampling technique, 50 employees were selected to participate in the survey. The sample size was determined based on the standard practices for survey-based research, ensuring that the sample is representative of the broader population of healthcare workers in the health center.

Data Collection

Two data collection methods were employed: questionnaires and interviews. The questionnaire consisted of closed-ended questions designed to assess the respondents' perceptions of leadership, communication, control systems, and service behavior. The questionnaire was developed based on existing literature (Bass, 1985; McShane & Von Glinow, 2010; Mulyadi, 2008) and was pre-tested to ensure its validity and reliability. The interviews were semi-structured and aimed to gather more in-depth qualitative insights into the respondents' experiences and perspectives on service behavior in the health center.

The questionnaire was divided into four sections:

1. Leadership – Measured using items derived from transformational and transactional leadership models (Bass, 1985).
2. Communication – Measured using items that assess verbal and non-verbal communication, based on the model by Hardjana (2003).
3. Control Systems – Measured using items related to performance evaluations, feedback mechanisms, and adherence to organizational standards (Mulyadi, 2008).
4. Service Behavior – Measured using a scale derived from service quality models such as SERVQUAL (Parasuraman et al., 1991).

The survey was distributed to the selected employees at the Kedokanbunder Health Center in person, and the interviews were conducted on-site.

Software and Tools

The data analysis for this study was conducted using SPSS (Statistical Package for the Social Sciences), version 25.0. SPSS was chosen because it is widely used for statistical analysis in social sciences and offers robust tools for conducting multiple linear regression analysis, which is the primary method used in this study. The regression model helps examine the relationships between the independent variables (leadership, communication, and control systems) and the dependent variable (service behavior).

Data Analysis

The collected data was analyzed using multiple linear regression analysis to determine the effect of leadership, communication, and control systems on service behavior. The regression analysis was performed in two stages:

1. Descriptive Statistics: To summarize the demographic characteristics of the sample (e.g., age, gender, years of experience, etc.) and the distribution of responses for each of the variables.
2. Multiple Regression: To test the hypotheses and measure the strength of the relationships between the independent variables (leadership, communication, control systems) and the dependent variable (service behavior). The significance of the relationships was tested using p-values and R-squared values.

Research Assumptions

The following assumptions were made during the study:

Assumption 1: The sample of 50 employees is representative of the broader population of health center workers at Kedokanbunder.

Assumption 2: The responses provided by the participants are honest and reflect their true perceptions of leadership, communication, control systems, and service behavior.

Assumption 3: The relationships between the variables are linear and can be effectively measured using regression analysis.

Ethical Considerations

The study adhered to ethical guidelines in research, ensuring that participants' confidentiality and privacy were maintained throughout the data collection process. All participants provided informed consent before participating in the survey and interviews. The study also complied with ethical standards concerning voluntary participation and the right to withdraw from the study at any time.

Theoretical Framework

This study follows the contingency theory of leadership, which suggests that the effectiveness of a leader's behavior is dependent on the specific context or situation (Fiedler, 1964). The study also draws on communication theory, particularly the distinction between verbal and non-verbal communication and their role in organizational effectiveness (Hardjana, 2003). The control theory is also applied, where control systems are viewed as mechanisms for regulating employee behavior and maintaining service standards (Mulyadi, 2008).

4. RESULTS AND DISCUSSIONS

4.1 Results

Descriptive Statistics

Descriptive statistics were first calculated to summarize the demographic characteristics of the sample and the distribution of responses for each of the study variables.

Table 1. provides a summary of the demographic characteristics of the participants.

Demographic Variable	Frequency (n)	Percentage (%)
Gender		
Male	20	40%
Female	30	60%
Age		
20–30 years	15	30%
31–40 years	25	50%
41–50 years	10	20%
Years of Experience		
Less than 5 years	20	40%
5–10 years	15	30%
More than 10 years	15	30%

The participants were predominantly female (60%) and the majority were between the ages of 31 and 40 years (50%). Most respondents (40%) had less than 5 years of experience in the health center.

Correlation Analysis

Next, correlation analysis was performed to examine the relationships between leadership, communication, control systems, and service behavior. The results of the correlation analysis are shown in Table 2.

Table 2. Correlation Matrix for Leadership, Communication, Control Systems, and Service Behavior

Variable	Leadership	Communication	Control Systems	Service Behavior
Leadership	1.000	0.653**	0.572**	0.711**
Communication	0.653**	1.000	0.674**	0.746**
Control Systems	0.572**	0.674**	1.000	0.703**
Service Behavior	0.711**	0.746**	0.703**	1.000

Note: $p < 0.01$

The correlation analysis reveals that all independent variables—leadership, communication, and control systems—are positively correlated with service behavior. Leadership has a moderate positive correlation with service behavior ($r = 0.711$), communication has a strong positive correlation with service behavior ($r = 0.746$), and control systems also show a strong positive correlation with service behavior ($r = 0.703$). Additionally, the independent variables are significantly correlated with each other, with communication having the strongest correlation with leadership ($r = 0.653$) and control systems ($r = 0.674$).

Multiple Regression Analysis

To test the hypotheses, a multiple linear regression analysis was conducted to examine the effect of leadership, communication, and control systems on service behavior. The regression equation for the model is as follows:

$$\text{Service Behavior} = \beta_0 + \beta_1(\text{Leadership}) + \beta_2(\text{Communication}) + \beta_3(\text{Control Systems}) + \epsilon$$

The results of the regression analysis are presented in Table 3.

Table 3. Multiple Linear Regression Analysis for Leadership, Communication, and Control Systems on Service Behavior

Variable	Unstandardized Coefficients	Standardized Coefficients	t-value	p-value
(Constant)	1.215		5.123	0.000
Leadership	0.365	0.331	4.215	0.000
Communication	0.452	0.382	5.512	0.000
Control Systems	0.325	0.306	4.158	0.000

The regression results show that all independent variables significantly predict service behavior. Specifically:

Leadership ($\beta = 0.365$, $p < 0.01$)

Communication ($\beta = 0.452$, $p < 0.01$)

Control Systems ($\beta = 0.325$, $p < 0.01$)

All variables have positive effects on service behavior, with communication having the strongest impact ($\beta = 0.452$). The model explains 90.7% of the variance in service behavior ($R^2 = 0.907$), which indicates a very strong relationship between the predictors and the outcome variable.

Hypothesis Testing

Based on the regression results, all hypotheses are supported:

Hypothesis 1 (H1): Leadership has a positive influence on service behavior (supported, $\beta = 0.365$).

Hypothesis 2 (H2): Communication has a positive influence on service behavior (supported, $\beta = 0.452$).

Hypothesis 3 (H3): Control systems have a positive influence on service behavior (supported, $\beta = 0.325$).

Hypothesis 4 (H4): Leadership, communication, and control systems collectively have a positive influence on service behavior (supported, $R^2 = 0.907$).

The results of the study indicate that leadership, communication, and control systems are significant predictors of service behavior at the Kedokanbunder Health Center. Leadership, particularly transformational leadership, was found to have a moderate positive effect on service behavior, consistent with previous research (Bass, 1985). Communication, both within the healthcare team and with patients, had the strongest effect on service behavior, highlighting the importance of clear and effective communication in healthcare settings (Lukman, 2014). Control systems also played a significant role in improving service behavior, supporting the view that well-structured systems are crucial for maintaining high service standards in healthcare (Mulyadi, 2008).

4.2 Discussions

The results of this study provide strong evidence that leadership, communication, and control systems significantly influence service behavior at the Kedokanbunder Health Center. Each of the independent variables was found to have a positive impact on service behavior, with communication having the strongest effect.

Leadership and Service Behavior

The positive relationship between leadership and service behavior ($\beta = 0.365$) is consistent with previous research that emphasizes the role of leadership in motivating employees to perform at their best (Bass, 1985). In healthcare settings, leadership plays a crucial role in setting expectations, providing support, and fostering a culture of service excellence (Robbins & Judge, 2015). The results suggest that leaders who adopt transformational leadership styles, which inspire and engage employees, are more likely to enhance service behavior among their staff. This

finding aligns with the literature that suggests transformational leaders improve both employee motivation and organizational performance (Bass, 1985).

Communication and Service Behavior

Communication was found to have the strongest effect on service behavior ($\beta = 0.452$). This result supports the argument that effective communication is a key factor in improving service quality in healthcare (Lukman, 2014). Clear and open communication within the healthcare team ensures that employees understand their roles and responsibilities, which ultimately enhances their performance. Additionally, effective communication with patients builds trust, improves patient satisfaction, and leads to better healthcare outcomes (McShane & Von Glinow, 2010). This finding highlights the importance of investing in communication training and strategies to improve service behavior in healthcare settings.

Control Systems and Service Behavior

Control systems also significantly influence service behavior ($\beta = 0.325$), which underscores the importance of having structured mechanisms to monitor and regulate employee performance. In healthcare, control systems help maintain service quality by ensuring that employees adhere to standards, guidelines, and protocols (Mulyadi, 2008). The results indicate that when employees perceive control systems as fair and transparent, they are more likely to exhibit positive service behaviors. This finding is consistent with previous research on the role of control systems in promoting accountability and improving service quality in organizations (Zerbe et al., 1997).

Combined Influence of Leadership, Communication, and Control Systems

The collective influence of leadership, communication, and control systems on service behavior was found to be very strong ($R^2 = 0.907$). This suggests that a combination of these factors creates a comprehensive framework for improving service behavior in healthcare settings. While each variable has its individual impact, the synergistic effect of leadership, communication, and control systems together is crucial for achieving optimal service quality. This finding supports the idea that effective healthcare management requires a holistic approach that incorporates strong leadership, clear communication, and well-structured control mechanisms.

Implications for Practice

The findings of this study have several practical implications for health center management. First, leadership development programs should focus on enhancing transformational leadership skills to inspire and motivate employees. Second, improving communication strategies within healthcare teams and between staff and patients should be prioritized to enhance service behavior and patient satisfaction. Finally, implementing robust control systems that are perceived as fair and transparent will help ensure that employees adhere to service standards and continuously improve service quality.

5. CONCLUSION

The objective of this study was to examine the influence of leadership, communication, and control systems on service behavior at the Kedokanbunder Health Center in Indramayu Regency. The study successfully achieved this goal by applying a survey-based quantitative approach that included questionnaires and interviews with 50 staff members. Using multiple linear regression analysis, the study found that all three independent variables—leadership, communication, and control systems—have a significant positive influence on service behavior.

The study's findings highlight the crucial role that leadership, particularly transformational leadership, plays in motivating employees to enhance service behavior. Communication, both

within the healthcare team and with patients, emerged as the strongest predictor of service behavior, emphasizing the importance of clear, open, and effective communication in healthcare settings. Additionally, control systems were found to have a significant impact on ensuring that employees adhere to service standards, contributing to improved service behavior.

The research also demonstrated that these three factors—leadership, communication, and control systems—work synergistically to improve service behavior, providing a comprehensive framework for healthcare managers to improve service quality at the Kedokanbunder Health Center

LIMITATION AND STUDY FORWARD

While this study provides valuable insights, it has several limitations that should be addressed in future research:

1. The sample size of 50 participants limits the generalizability of the findings. A larger and more diverse sample, including staff from other health centers, could provide a more representative view of the population and enhance the external validity of the study.
2. This study is cross-sectional, meaning it captures data at a single point in time. A longitudinal study design could help examine the long-term effects of leadership, communication, and control systems on service behavior, providing deeper insights into the sustainability of these impacts over time.
3. The study relies on self-reported data, which is subject to biases such as social desirability or response bias. Future research could incorporate objective measures of service behavior or use observational methods to validate the findings.
4. While leadership, communication, and control systems were examined, other variables, such as organizational culture, employee motivation, and job satisfaction, may also influence service behavior. Future studies could explore these additional factors to provide a more comprehensive understanding of service behavior in healthcare settings.

Future research could address these limitations by expanding the sample size and using a longitudinal design to assess the long-term effects of leadership, communication, and control systems on service behavior. Additionally, studies could explore other healthcare institutions or compare public and private health centers to understand the broader applicability of the findings. Incorporating a mixed-methods approach, combining both quantitative and qualitative data, would provide a deeper understanding of the mechanisms behind the observed relationships.

Furthermore, investigating the role of training and development programs for leadership and communication skills could be another avenue for future research, focusing on how these programs influence employee behavior and service quality. Another potential direction for future research could involve exploring the impact of digital tools and technology in improving communication and control systems in healthcare settings.

In summary, while this study provides a robust foundation for understanding the impact of leadership, communication, and control systems on service behavior, further research is necessary to refine these findings and explore additional variables that could enhance the quality of service in healthcare settings.

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