

# THE INFLUENCE OF TEAM COHESION AND TRUST ON TEAM EFFECTIVENESS IN PREVENTING TUBERCULOSIS

## *Pengaruh Kohesi dan Kepercayaan Tim terhadap Efektifitas Tim dalam Penanggulangan Tuberculosis*

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### Abstract

**Background:** The transmission of tuberculosis (TB) is hard to stop. Surabaya city has the highest TB cases in East Java and only achieved <90% of the target in 2017-2018. The formation of preventing TB team in every primary health care (PHC) is expected to work effectively in preventing TB cases in society.

**Aims:** This study aimed to analyze the impact of cohesion and trust within a team on team effectiveness in preventing TB cases in Surabaya.

**Methods:** This study was an observational study with a cross-sectional design conducted in 43 primary healthcare centers (PHC), and it involved 319 respondents selected by proportional stratified random sampling. The data were collected through questionnaires and tested descriptively and through multivariable linear regression to confirm the most significant models of independent variables and dependent variables.

**Results:** The result showed that task cohesion of the cohesion variable (RR= 0.374; p= 0.014) and cooperative behaviors of the trust variable (RR= 0.558; p= 0.000) had a significant influence on team effectiveness. The others dimension of team cohesion and trust had no significant impact on team effectiveness.

**Conclusion:** Team effectiveness is dependent on team cohesion and trust that the teamwork process component. The Surabaya City Health Office needs to collaborate with the PHC management to evaluate the teamwork of the preventing TB team through in-depth interviews or other methods to get the problem in the team.

**Keywords:** healthcare, system organization, team cohesion, team trust, tuberculosis.

### Abstrak

**Latar Belakang:** Penularan tuberculosis (TB) merupakan penyakit yang sulit untuk dihentikan. Kota Surabaya adalah kota dengan pertambahan kasus TB tertinggi di Jawa Timur dan masih mencapai target <90% selama periode 2017-2018. Pembentukan tim penanggulangan TB di setiap Puskesmas diharapkan dapat bekerja secara efektif dalam menanggulangi kasus TB pada masyarakat.

**Tujuan:** Penelitian ini bertujuan untuk menganalisis pengaruh kohesi tugas dan kepercayaan terhadap efektifitas kerja tim dalam penanggulangan TB di Kota Surabaya.

**Metode:** Penelitian ini merupakan penelitian observasional dengan desain potong lintang yang dilaksanakan pada 43 Puskesmas dan melibatkan 319 responden yang terpilih dengan sampling terstratifikasi proporsional. Data diperoleh dengan menyebarkan kuisioner dan kemudian diuji secara deskriptif dan uji multivariable regresi linier untuk mengkonfirmasi model paling signifikan terhadap variabel bebas dan terikat.

**Hasil:** Hasil penelitian menunjukkan bahwa dimensi kohesi tugas pada variable kohesi tim (RR=0.374; p= 0.014) dan perilaku kooperatif pada variabel rasa percaya tim (RR= 0.558, p= 0.000) memiliki pengaruh yang signifikan terhadap efektifitas tim. Sedangkan dimensi lain di dalam variabel kohesi dan kepercayaan tim tidak memiliki pengaruh yang signifikan terhadap efektifitas tim.

**Kesimpulan:** Disimpulkan bahwa kohesi dan kepercayaan tim sebagai proses tim memiliki pengaruh yang signifikan terhadap efektifitas tim. Disarankan kepada Dinas Kesehatan Kota Surabaya berkolaborasi dengan manajemen Puskesmas, untuk melakukan evaluasi terhadap proses tim dengan melakukan indepth interview atau metode lain untuk mendapatkan persoalan tim penanggulangan TB dalam melaksanakan program.

**Kata kunci:** kohesi tim, kepercayaan tim, layanan kesehatan, sistem organisasi, tuberculosis.



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## Introduction

Tuberculosis (TB), one of the communicable diseases caused by *Mycobacterium Tuberculosis*, still becomes a challenging health issue in Indonesia. The government has tried to stop TB transmission by 2030. The Regulation of the Indonesian Ministry of Health No. 67/2016 describes preventive efforts to overcome TB cases, one of which is to form a team at the sub-district level under primary healthcare centers. According to Burn (2004), a team is a working group consisting of more than two people who have equal competence and are independent in their work. It is also defined as a group of two or more people interacting with each other, being part of an organization, and having the organization's goals (McShane and Von Glinow, 2018).

The team, which consists of doctors, nurses, and laboratory analysts, is responsible for carrying out TB prevention, and control programs success is measured by case detection rate, case notification rate, and success rate. The success rate shows the number of TB patients who undergo the whole treatment. The preventing TB teams are in charge of promotive preventive, curative, and rehabilitative measures for TB cases mini, based on Indonesian Ministry of Health Regulation No.67/2016 about TB Control.

On the other hand, the number of TB cases in Indonesia increases every year. In East Java in 2019, 330,025 people were suspected of TB, thus stating East Java as one of the provinces with the highest suspected TB in Indonesia. The patients who received good TB services 96.5%. Moreover, Surabaya city, located in East Java Province, had the highest TB cases. The trend of positively confirmed TB cases in Surabaya increases every year. Its success rate from 2015 to 2018 was, on average 78.23% which did not reach the

target (>90%) (Dinas Kesehatan Kota Surabaya, 2019). Treatment has a major role in breaking the chain of TB cases and reducing multidrug resistance. When the treatment failed, it increased the probability of multidrug-resistance cases.

Based on the Regulation of the Indonesian Ministry of Health No. 67 of 2016, the team is also responsible for TB treatment. There are a lot of problems during implementing the TB prevention program. The preliminary interview results showed team effectiveness seems to be affected by trust between team members and team cohesion. The preliminary interview was conducted with the preventing TB team's leader who is responsible for managing the teamwork. Furthermore, trust among team members affects project success, which also affects cohesion and knowledge sharing among members (Imam and Zaheer, 2021).

Ilgen (2006), in line with McShane and Von Glinov's theory (2018) mentions team effectiveness includes assessing team performance targets and meeting the needs of each team member. In this study, team effectiveness is considered the satisfaction and desire of team members to work in the same team. Changing team members will impact team effectiveness in the program implementation. Based on this background, this study further examined the influence of cohesion and trust on team effectiveness in preventing TB cases.

Our study hypothesized that team cohesion and team trust had a significant impact on team effectiveness. The data analyzed came from team members' questionnaire answers. The data were analyzed statistically to confirm our hypothesis; thus, the result was the baseline for discussion and recommendations to related parties.

## Method

An observational study was conducted using a cross-sectional design and a proportional stratified random sampling method to select the samples. The analysis unit in this study was primary health care in Surabaya city, with the population of this study was preventing TB teams in Surabaya City. It involved 43 primary healthcare centers consisting of 29 with a success rate of >90.01% and 14 with an unachieved success rate (<90.01%). A questionnaire was tested for validity and reliability using the Pearson test before data collection. It was distributed twice by the researchers and enumerators to doctors, nurses, and laboratory analysts who work closely with patients. Questionnaires about cohesion and trust were first disseminated than the team effectiveness questionnaire. Of 345 team members, only 318 answered correctly.

The questionnaire scales include strongly agree, agree, disagree, and strongly disagree. Individual and average scores of all members are considered (Ehrhardt *et al.*, 2014). The linear multivariable regression test was applied to collect the average score of each team member based on the significant value through a backward model. The variable is deemed significant if a p-value is less than  $\alpha$  (0.05). Before the multivariable regression test, linear regression assumption testing was carried out, namely the normality test, the non-multicollinearity test, and the non-heteroscedasticity test. The normality test in this study, using the P-Plot test with SPSS version 25 software, was declared normal if the data pattern was around the line. The next test is a multicollinearity test, looking at the tolerance value of >0.10 and the VIF value of <10. If the variable meets these values, then it is worth doing a regression test. The next test is the heteroscedasticity test by statistical means of a glejser test with a significance value between the residual

>0.05 then there is no heteroskedasticity problem. Figure 1 illustrates how team effectiveness is affected by cohesion and trust within a team.

Team cohesion of this study defined the perception of the team preventing TB members related to their desire and motivation to become team members (McShane and Von Glinow, 2018). Team cohesion consists of three dimensions: task cohesion, social cohesion, and individual attraction to a group. Team trust in this study defined the perception of the team preventing TB members related to their positive expectations among the other team preventing TB members (McShane, and Von Glinow, 2018). Team trust consists of four dimensions: the propensity of trust, perceived trustworthiness, cooperative behaviors, and monitoring behaviors.

Cohesion, an independent variable assessed, includes three dimensions: task cohesion, social cohesion, and individual attraction to a group. The cohesion questionnaire is modified using the GEQ (Brawley, Carron, and Widmeyer, 1987). One of the questions listed for the task cohesion dimension was, "according to my opinion, all of the team members were united to reaching the target of preventing TB program". The social cohesion questionnaire list example was "according to my opinion, all of the team members were closed to each other". One individual attraction to the group dimension was "according to my opinion, each team member befriended each other."

Trust in a team is modified using a questionnaire by Costa and Anderson (2011). This variable consists of four dimensions: the propensity of trust, perceived trustworthiness, cooperative behaviors, and monitoring behaviors. Team effectiveness, a dependent variable, was measured from member satisfaction and survival according to the theory by McShane and Von Glinow (2018).

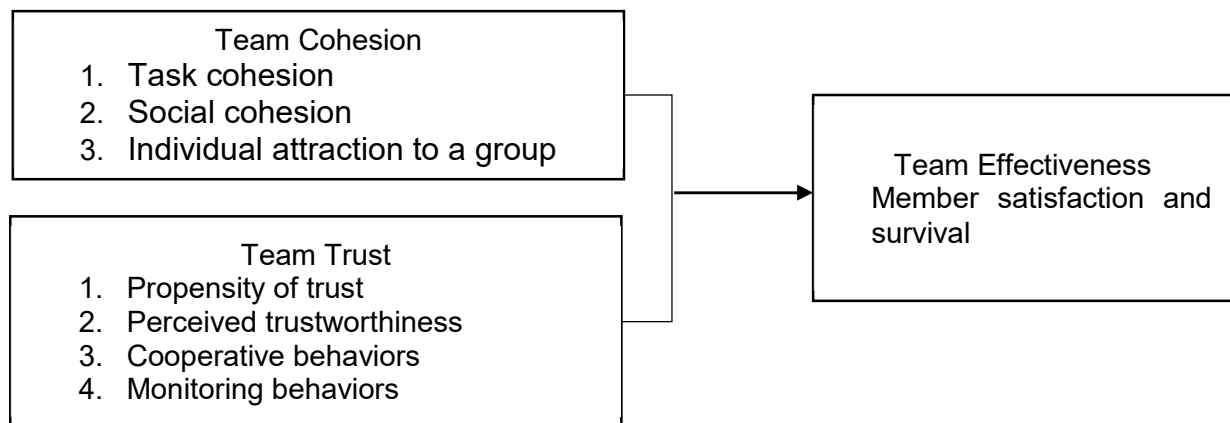


Figure 1. Research Framework

The question for the propensity of trust dimension, one of the list was “according to my opinion, each team members ask for assistance openly. The example for the perceived trustworthiness dimension question was “according in my opinion, each team member can rely on each other”. The cooperative behaviors dimension’s question was “according to my opinion, each team member always considering the member’s opinion before deciding plan activities.” The question for monitoring behaviors dimension was, “according to my opinion, all of the team members slightly oversee the other member’s activities”.

The team effectiveness consists of two sub-variables. The first is to satisfy member needs, and the last is to maintain team survival. The questionnaire for this variable was constructed from 11 question list. The example for the questionnaire was “according to my opinion, the team’s conflict was resolved clearly.”

The average score of team members was analyzed descriptively and calculated statistically. According to the Pareto principle, 80% of consequences would occur because of 20% of causes. The cutting point of mean value less than 3.20

is captured from 80% of marks by a problem. Each answer is worth four points.

## Results and Discussion

This study analyzed the influence of cohesion and trust within a team on work effectiveness in TB prevention. The influence of each dimension of the independent variables is described in Table 1.

Cohesion within the teams is mostly integrated (93%) with a mean value of less than 3.20, meaning that they faced problems. The effect of every dimension of cohesion on team effectiveness was still low. Task cohesion was considered weak. Social coherence is at a mean value of 2.98, indicating the teams had a poor coherent relationship. The individual attraction to a group has a mean value of 3.00, indicating a lack of cohesion (Lestyoningrum, 2020).

Cohesion is the process by which members share the same desire to work in the team (Grossman *et al.*, 2015). A team must have an integrated coherence to support each other to achieve work targets and objectives. The low mean value of the social cohesion dimension is caused by team involvement in other groups.

Table 1. Perceived Dimensions of Cohesion in TB Prevention Team in Surabaya City in 2019

Dimensions	Very Unintegrated		Unintegrated		Integrated		Very integrated		Total	
	n	%	n	%	n	%	n	%	N	%
Task Cohesion	0	0.0	1	2.3	36	83.7	6	14.0	43	100
								Mean		3.11
Social Cohesion	0	0.0	3	7.0	38	88.4	2	4.7	43	100
								Mean		2.98
Individual attraction to a group	0	0.0	3	7.0	37	86.0	3	7.0	43	100
								Mean		3.00
<b>Team Cohesion</b>	0	0.0	0	0.0	40	93.0	3	7.0	43	100

Sources: Primary data (Rochmah *et al.*, 2020)

Table 2. Perceived Dimensions of Trust in TB Prevention Team in Surabaya City in 2019

Dimensions	No trust at all		Little trust		Moderate trust		Strong trust		Total	
	n	%	n	%	n	%	n	%	N	%
Propensity of trust	0	0	0	0	37	86.0	6	14.0	43	100
								Mean		3.14
Perceived trustworthiness	0	0	0	0	37	86.0	6	14.0	43	100
								Mean		3.14
Cooperative behavior	0	0	0	0	35	81.4	8	18.6	43	100
								Mean		3.19
Monitoring behavior	0	0	0	0	39	90.7	4	9.3	43	100
								Mean		3.09
<b>Team Trust</b>	0	0	0	0	38	88.4	5	11.6	43	100

Sources: Primary data (Rochmah *et al.*, 2020)

Table 2 shows that 88.4% of members trust their team. Each dimension has a value of <3.20, which previous research considers a low trust (Rochmah, Lestyoningrum, and Widyacahya, 2020). Trust will contribute to team decision-making. Cooperative behavior has the highest mean value. It can influence members to welcome assistance and advice at work. The lowest mean value is found in the monitoring behavior dimension, although the team members still monitored each other.

Better work performance will come as every member trusts others' ability, integrity, and wisdom in carrying out tasks (McShane, and Von Glinow, 2018).

Empirical research defines trust as the willingness of each team member to believe in others (Dyer and Chu, 2003). Trust is lower when members are unprepared for unpredictable circumstances and risks (Yang, 2014). Regarding survival, most teams (86.0%) perceived a good relationship in future work. Its mean value is 3.14, indicating low survival. With diverse professions in the teams, training on TB prevention should be provided to build their teamwork. Teams who have a good relationship with the members will have a significant impact on the implementation of the TB prevention program (Eaton *et al.*, 2017). While for satisfaction, most of the teams (90.7%) felt satisfied with their work.

Table 3. The Influence of Cohesion and Trust on Team Effectiveness

Dimensions of Cohesion	Sig.	Standard Coefficient Beta
Task cohesion	0.014**	0.374
Social cohesion	0.180	0.222
Individual attraction to a group	0.919	0.018
<b>Dimensions of Trust</b>		
Propensity of trust	0.433	0.119
Perceived trustworthiness	0.477	0.214
Cooperative behaviors	0.000**	0.558
Monitoring behaviors	0.601	0.091

Team effectiveness as a dependent variable \*\*) significance

The mean value of member satisfaction is lower than 3.20, indicating some unmet needs.

Table 3 illustrates that task cohesion had a significant influence on team effectiveness. The significance value is 0.014 with a beta value of 0.374 indicating the independent variables likely affect the dependent variable. Some teams (37.4%) thought they had task cohesion. While the significance values of social cohesion and individual attraction to a group do not meet the threshold values, the beta coefficient value was meaningless.

The strength of team cohesion will affect team performance (Grossman *et al.*, 2015; Gill, 2017; McShane, and Von Glinow, 2018). The team for TB prevention consists of different professions. Doctors enforce the diagnosis to patients suspected of TB, and nurses must take care of patient treatment (Indonesian Ministry of Health Regulation, 2016). Task cohesion significantly affects interactions between team members in task priority and expressing of opinion (Lyle *et al.*, 1995). The result of this study found that task cohesion impacts team effectiveness significantly. The other study found that task cohesion was changed over time caused by performance proved goal-oriented (Acton, Braun, and Foti, 2020). It is proved that the team should clearly understand the team's goal-oriented. Task cohesion among team members captures the degree of their commitment and focus

on the task (Dobrijević, Đorđević Boljanović, Alčaković, and Lazarević, 2020). Table 3 showed that task cohesion's mean value was higher than social cohesion and individual attraction. It means that the prevention TB team has the exact definition of team goal-oriented and focused on the task.

Social cohesion is essential for a team to work harmoniously with the same vision and mission to achieve its main goals (Fonseca, Lukosch, and Brazier, 2019). Social cohesion does not significantly influence team effectiveness in contrast to some studies that found a significant influence of social cohesion on team effectiveness (Carless and Paola, 2014; Grossman *et al.*, 2015; Gill, 2017; McShane, and Von Glinow, 2018). Cohesion is related to the diversity of members and the number of team members (Love, 2018). Social cohesion could trigger team performance. However, social cohesion in this study was low (2.98) due to the various types and number of team members. It is associated with the study that found social cohesion can be influenced by team members' agreeableness and openness (Acton *et al.*, 2020). A team with good agreeableness and openness among members would increase the social cohesion of the team. Due to the various types and number of members in the teams, it would increase the variety of opinions.

Individual attraction to a group means how members individually and in the group accept interactions and desires between team members (Carless and Paola, 2014). The results showed that individual attraction to a group did not significantly influence team effectiveness. Similarly, previous research found that individual attraction to a group did not significantly influence team effectiveness (Carless and Paola, 2014). Due to multiple other groups' involvement, the teams have no attachment to their members.

Table 3 illustrates the influence of trust on team effectiveness. The cooperative behavior dimension significantly influenced team effectiveness compared to other dimensions. The standard beta coefficient is 0.558 which means that 55.8% of the members perceived their team as having cooperative behaviors. While the other dimension (propensity of trust, perceived trustworthiness, monitoring behaviors) does not influence because of its significant value of more than 0.05.

Cooperative behaviors relate to the willingness of team members to synergize at work (Castro, 2014). With trust, team members may have interpersonal relationships at community and institutional levels (Costa, 2005). Trust determines team performance (Costa, Fulmer and Anderson, 2018).

Trust relates directly to health care users; thus, teams should commit to performing good services (Hall *et al.*, 2001). Trust likely leads to good member coordination (Bond-Barnard, Fletcher and Steyn, 2018). Trust is important for teams with various types of professions and several people. However, other research showed that trust did not significantly influence the team size in the TB control program (Rochmah, Lestyoningrum and Widyacahya, 2020).

Team leaders ensured workflow by assigning tasks to each team member.

However, the teams faced some problems in terms of various numbers of professions and work incompetency. Some members had background knowledge of TB prevention, while others did not. Recognition is also an important factor in organizations despite pseudo teams (Havig *et al.*, 2013). The teams were given a lot of workloads that were not related to the prevention TB program. Thus, members may not be performing a task with focus. It is a special note and becomes a bias of this study.

In general, this study only focused on whether cohesion and trust influence team effectiveness or not, but it did not include other factors (such as individual, social and regulatory factors), deemed to influence team effectiveness.

## Conclusion

Task cohesion and cooperative behavior had a significant impact on team effectiveness. It is recommended to the Surabaya City Health Office to collaborate with the PHC management to evaluate the teamwork of the preventing TB team through in-depth interviews or other methods to get the problem in the team. Teams with strong integration and trust likely have a greater chance of building an effective team. Capacity building should be done to improve worker performance and allow workers to know each other and build the same visions and missions. Furthermore, it is recommended for future research to search more about the determinant factors that influence the cohesion and trust of the health care team.

## Abbreviations

PHC: Primary Health Care; Sig.: Significance; TB: Tuberculosis; WHO: World Health Organization.

## Declarations

### Ethics Approval and Consent Participant

This study has obtained an ethical clearance approved by the Health Research Committee, Faculty of Nursing, Universitas Airlangga (No. 1316-KEPK). Respondents were informed about the research objectives and purposes, and they submitted verbal consent to participate in the study.

### Conflict of Interest

The authors declare that there are no significant competing financial, professional, or personal interests that might have affected this study.

### Availability of Data and Materials

Data and material research can be provided upon request.

### Authors' Contribution

SDL conceptualized the study and the methodology; SDL created the methodology, analyzed the data, wrote, reviewed, and edited the original draft and manuscript; YP and DRF analyzed the data, wrote and reviewed the manuscript.

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