

The Influence of Knowledge, Skill and Attitude to Midwife Professionalism of D IV Midwife Educator (Bidan Pendidik) Student in Tribhuwana Tunggadewi University Malang

Titin Sutriyani Tribhuwana Tunggadewi University, Telaga Warna St. Tlogomas, Malang, Indonesia

Abstract

The purpose of this research is found out the influence of knowledge, skill and attitude to midwife professionalism and to seek which one among them that has significant influence on professionalism. This research uses quantitative method with inferential approach. Sample collection technique is random sampling with sample amount of 75 from 105 students. Data analysis method is parametric statistic analysis with regression -3 predictor as its technique analysis. It is evident that F_{count} value (12,390) is bigger than F_{table} value (3,350). Thus, this research had proven that there is significant influence from midwife knowledge ((X_1), midwife skill (X_2), midwife attitude (X_3) to midwife professionalism (Y). Summary of this research are 1) Knowledge, skill and midwife attitude act together in influencing midwife professionalism 2) Knowledge, skill, and midwife attitude have influence on midwife professionalism in partial. 3) Midwife knowledge gives more dominant influence to midwife professionalism compare to midwife skill and attitude.

Keywords: Knowledge, Skill, Attitude and Midwife Professionalism

I. INTRODUCTION

Good health as one of general welfare element should be realizing in accordance with Indonesian wishes that states in Indonesian Constitution 1945. One strategy of national health development program to fulfill "Indonesia Sehat 2015" is applying national development focused on health vision which means for every effort in development program must contain positive contribution for creating healthy behavior and environment.

The problem of Mother Death Rate (Angka Kematian Ibu=AKI) in 2013 reach 5.019 women, for East Java province number of AKI is 642 women which classified as 25,70 % in pregnancy time, 23,05 % in labour time, and 51,25 % in postnatal time. Meanwhile, AKI in Malang has total number of 39 women. (Routine Report of Mother's Healthcare Program 2013 which received from Province Health Department).

Midwife as an element of national health force has important and strategic position in particular for declining the Mother Death Rate (*Angka Kematian Ibu : AKI*), Baby Sickness and Death Rate (*Angka Kesakitan dan Kematian Bayi: AKB*). The involvement of midwife in labour process is the key to decline those numbers therefore knowledge, skills and attitude, training or education and also motivation from midwife are require to posses then have to be linked with their work performance. Midwife also acts as implementer, manager, and educator. Midwife give sustainable and complete maternity services that focuses on prevention aspect, a promotion by partnership and society empowerment as the foundation to act together with other health forces in helping anyone who needs health services, anytime and anywhere she stationed. To assure the quality of midwifery services it needs a professionalism act from a midwife.

According to decision of Minister of Health in article no 836/MENKES/VI/2005 concerning about Guidelines of Management Development in Midwifery and Nursery Work Performance states that the essence of professional health services conduct by nurse or midwife to individual, family, group of people or society in sickness or healthy conditions are following the existed nursery and midwifery principles.

Sujianti and Susanti (2009) explain about midwife professionalism. It is a skillful attitude and behaviour in their work areas where their expertise come from interest function and habitual learning. While Wahyuningsih (2008) said about professional ethics of midwife that she must have high commitment to give qualified midwifery care by standard of ethical behaviour in midwifery care application.

Besides midwifery knowledge and skills as foundation of their proffessionalism, she must have values, ethics, philosophical meaning as a midwife, sensitivity in nursing needs and ability to facilitate and make decision in act (Soepardan, 2008).

Based on the background of the study mentioned above, the writer took interest in "The Influence of knowledge, skill and attitude to midwife professionalism of D IV Midwifery Educator (Bidan Pendidik) students in Tribhuwana Tunggadewi University in Malang".

II. RESEARCH METHODS

The method of this research is quantitative with inferencial approach, a research to test a hypothesis and relying on result summary of error probability, rejection of nill hypothesis.



2.1. Population, Sample and Sampling

Population of this research is 105 D IV (Diploma IV) Midwifery students of Tribhuwana Tunggadewi Malang. Sample that use in this research is 75 students. Sampling technic is random sampling to make all population members has same opportunity as sample member (Suryabrata, 2003:89).

2.2 Data Collection

Method of data collection for this research are interview, observation, documentation, and questionnaire. Data sources are D IV Midwifery students of Tribhuwana Tunggadewi Malang that will be use to gather data about knowledge, skill, attitude, and midwifery professionalism (1). Data about midwife knowledge will be gather by Midwife Knowledge Test (2). Data about midwife skill will be gather by Midwife Skill Test (3). Data about midwife attitude will be gather by Midwife Attitude Scale (4). Data about midwife professionalism will be gather by Midwife Professionalism Scale.

III. DISCUSSION AND RESEARCH RESULT

Result of this research processed by SPSS program with result presentation as follow:

3.1 Data Analysis

3.1.1 Double Linear Regression Analysis

Double Linear Regression Analysis use for predicting the size of relation between dependent variable (Y) with independent variable (X). The observed variables are midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) and for dependent variable is midwife professionalism (Y).

Table 1. Analysis and Test Result On The Influence of Midwife Knowledge (X₁), Midwife Skill (X₂),

Midwife Attitude (X₃) To Midwife Professionalism (Y)

Variables	F Count	F table	R Square	Exp
Knowledge (X_1)				
Skill (X ₂)	12,390	3,350	0,734	Significant
Attitude (X ₃)				

Source: Primary Data Tabulation, 2014.

Table 1 is showing that value of F_{count} is 12,390 which is bigger than F_{table} value 3,350 which approve that there is significant influence of midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) to midwife professionalism (Y). Moreover, R square value of 0,734 has proven that midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) to midwife professionalism (Y) has value of 73,4% with 26,6% as the rest is influenced by other variables which do not include in this research model.

3.1.2 The Influence of Midwife Knowledge (X1) To Midwife Professionalism (Y)

Analysis and Test result on the influence of Midwife Knowledge (X_1) to Midwife Professionalism (Y) is conduct by using regression analysis method by looking at *Standardized Coefficients* values with result below:

Table 2. Analysis and Test Result On The Influence of Midwife Knowledge (X_1) To Midwife Professionalism (Y)

Variables	Standardized Coefficients (Beta)	t count	Sig.	Ехр
	0,596	8,920	0,000	Significant

Source: Primary Data Tabulation 2014.

According to table 2 the result is showing that influence of Midwife Knowledge (X_1) to Midwife Professionalism (Y) is formulate into analysis and statistic hypothesis as follow:

Standardized coefficients value will show the size of Midwife Knowledge (X_1) influence to Midwife Professionalism (Y).

Ho = $\beta_{Y.X1}$ = 0, Midwife Knowledge (X₁) has no significant effect to Midwife Professionalism (Y)

Ha = $\beta_{YX1} > 0$, Midwife Knowledge (X₁) has significant effect to Midwife Professionalism (Y)

Based on rules of analysis and criteria of acceptance or rejection from hypothesis above, then it can be stated that:

- 1. Midwife Knowledge Variable (X_1) has significant influence to Midwife Professionalism variable (Y) with value of 0,596 or 59,6%.
- 2. t_{count} has value of 8,920 > t_{table} value (3,025), thereby Midwife Knowledge Variable (X_1) has significant influence to Midwife Professionalism (Y) in partial with significant level of 0,000.

3.1.3 The Influence of Midwife Skill (X2) To Midwife Professionalism (Y)

Analysis and Test result on the influence of Midwife Skill (X₂) to Midwife Professionalism (Y) are as follow:



Table 3. Analysis and Test Result On The Influence of Midwife Skill (X₂) To Midwife Professionalism (Y)

Variable	Standardized Coefficients (Beta)	t count	Sig.	Ехр
The influence of Midwife Skill (X ₂) To Midwife Professionalism (Y)	0,575	8,425	0,000	Significant

Source: Primary Data Tabulation, 2014

According to table 3 the result is showing that influence of Midwife Skill (X_2) to Midwife Professionalism (Y) is formulate into analysis and statistic hypothesis as follow:

Standardized coefficients value will show the size of Midwife Skill (X_2) influence to Midwife Professionalism (Y).

Ho = $\beta_{Y,X2}$ = 0, Midwife skill (X₂) has no significant effect to Midwife Professionalism (Y)

Ha = $\beta_{Y,X2} > 0$, Midwife skill (X₂) has significant effect to Midwife Professionalism (Y)

Based on rules of analysis and criteria of acceptance or rejection from hypothesis above, then it can be stated that:

- 1. Midwife Skill Variable (X_2) has significant influence to Midwife Professionalism variable (Y) with value of 0,575 or 57,5%
- 2. t_{count} has value of $8,425 > t_{table}$ value (3,025), thereby Midwife Skill Variable (X_2) has significant influence to Midwife Professionalism (Y) in partial with significant level of 0,000.

3.1.4. The Influence of Midwife Attitude (X₃) To Midwife Professionalism (Y)

Analysis and Test result on the influence of Midwife Attitude (X_3) to Midwife Professionalism (Y) are as follow: Table 4. Analysis and Test Result On The Influence of Midwife Attitude (X_3) To Midwife Professionalism (Y)

Variable	Standardized Coefficients (Beta)	t count	Sig.	Exp
The influence of Midwife Attitude (X ₃) To Midwife Professionalism (Y)	0,483	8,425	0,000	Significant

Source: Primary Data Tabulation, 2014.

According to table 4 the result is showing that influence of Midwife Attitude (X_3) to Midwife Professionalism (Y) is formulate into analysis and statistic hypothesis as follow:

Standardized coefficients value will show the size of Midwife Attitude (X₃) influence to Midwife Professionalism (Y).

Ho = $\beta_{Y.X3}$ = 0, Midwife Attitude (X₃) has no significant effect to Midwife Professionalism (Y)

Ha = $\beta_{Y.X3} > 0$, Midwife Attitude (X₃) has significant effect to Midwife Professionalism (Y)

Based on rules of analysis and criteria of acceptance or rejection from hypothesis above , then it can be stated that:

- Midwife Attitude variable (X₃) has significant influence to Midwife Professionalism (Y) with value of 0,483 or 48.3%
- 2. t_{count} has value of 8,124 > t_{table} value (3,025), thereby Midwife Attitude Variable (X₃) has significant influence to Midwife Professionalism (Y) in partial with significant level of 0,000.

3.1.5 Dominant Influence To Midwife Professionalism (Y)

Analysis and Test result on the dominant influence of Midwife Knowledge (X_1) , Midwife Skill (X_2) , Midwife Attitude (X_3) with Midwife Professionalism (Y) as independent variable are as follow:

Table 5 Analysis and Test Result On The Dominant Influence to Midwife Professionalism (Y)

Variable	Standardized Coefficients (Beta)	t count	Sig.	Exp
Knowledge (X ₁)	0,596	8,920	0,000	Significant
Skill (X ₂)	0,575	8,425		
Attitude (X ₃)	0,483	8,124		

Source: Primary Data Tabulation, 2014.

According to tabel 5 the value of *Standardized Coefficients* midwife knowledge variable (X_1) is 0,596 with t_{count} value is 8,920 which is bigger than value of *Standardized Coefficients of* midwife skill (X_2) , and midwife attitude (X_3) . Therefore, it can be declared that midwife knowledge variable (X_1) has dominant influence to midwife professionalism (Y).

IV. DISCUSSION

Sujianti and Susanti (2009:8) suggest that midwife knowledge is an art with its practice combining science, philosophy, and approach method to human as the requirement or rules while maintaining women's health care,



their normal reproductive process, along with her baby labour by including family member or someone meaningful for her. In this research according to rules of analysis and acceptance or rejection of that hypothesis, the result is showing that midwife knowledge (X_1) has very significant influence to midwife professionalism (Y) with t count value of 8,920 > t table5% value (3,025) or by significance level 0,000 < 0,05. This result has meaning that in partially midwife knowledge (X_1) has very significant influence to midwife professionalism (Y). This is supported by double correlation (R) 0,382 with significance level of 0,000 and effective contribution of knowledge (X_1) to midwife professionalism with value of 32,1%. This result become evident that midwife knowledge has a very significant influence to midwife professionalism.

Skill is one of the required competencies must be owned by a midwife in practicing her midwifery practices in secure and responsibility ways to various health services order (Sujianti & Susanti, 2009:17). In this research, by looking at rules of analysis and acceptance or rejection of that hypothesis then it can be stated that midwife skill (X_2) has a very significant influence to midwife professionalism (Y) with t count value of 8,425 > t table5% (3,025) or by significance level of 0,000 < 0,05. Thereby midwife skill variable (X_2) has a very significant influence to midwife professionalism (Y) in partially. This result is supported by double correlation (R) 0,274 with significance level of 0,002 and effective contribution of skill (X_2) to midwife professionalism with value of 21,4%.

According to Mohammad (2012), attitude is one of psychological aspect from an individual that has important role, because attitude is a tendency to behave which it will vary behavior of someone. Attitude from every person is different among one another, either in quality or its type which eventually will color that person attitude into vary. In this research, by looking at rules of analysis also acceptance or rejection of that hypothesis, then it can be stated that midwife attitude (X_3) has a very significant influence to midwife professionalism (Y) with t_{count} value of $8,124 > t_{table}$ value (3,025) or with significance level of 0,000 < 0,05, thereby midwife attitude (X_3) has a very significant influence to midwife professionalism (Y) in partial. This result is supported by double correlation (R) s 0,205 with significance level of 0,002 and effective contribution of midwife attitude (X_3) to midwife professionalism with value of 19,9 %.

Analysis and test result on the influence of midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) to midwife professionalism (Y) has acquire F count value which is 12,390, bigger than F_{table} 3,350, thereby this research has proven that there is a significant influence of midwife knowledge (X_1) , midwife skill (X_2) ,midwife attitude (X_3) to midwife professionalism (Y). R square value of 0,734 proven that the value of midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) to midwife professionalism (Y) is 73,4 % while the rest of 26,6 % is influenced by other variables which do not include in this research.

Meanwhile for analysis and test result on the dominant influence of midwife knowledge(X_1), midwife skill (X_2), midwife attitude (X_3) with midwife professionalism (Y) as dependent variable is found that *Standardized Coefficients* value of midwife knowledge variable (X_1) has value of 0,596 with t count value of 8,920, midwife skill (X_2) has a value of 0,575 with t count value of 8,425. Midwife attitude (X_3) has value of 0,483 with t count value of 8,124. Therefore, it can be declared that midwife knowledge variable (X_1) has dominant influence to midwife professionalism (Y).

V. CONCLUTIONS

As a conclution from this research, there is a very significant influence that act together from knowledge, skill, and attitude of midwife. Result from analysis and test of the influence of midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) to midwife professionalism (Y) find that F_{count} value is 12,390 which is bigger than F_{table} value 3,350. Therefore, hypotesis which said that there is significant influence of knowledge, skill and attitude from midwife to midwife professionalism can be accepted.

By R^2 value of 0,734 has proven that midwife knowledge (X_1) , midwife skill (X_2) , midwife attitude (X_3) have influence on midwife professionalism (Y) as big as 73,4 % with 26,6 % as the rest that influenced by other variables which do not include in this research model.

In partial, midwife knowledge and midwife attitude have a very significant influence to midwife professionalism. It is showing on knowledge with t_{count} value of 8,920 > $t_{table5\%}$ value of 3,025 or by significance level of 0,000 < 0,05. Skill with t_{count} value of 8,425 > nilai t_{tabel} (3,025) or by significance level of 0.000 < 0.05.

Meanwhile, midwife knowledge giving more dominant influence on midwife professionalism as big as 32,1% compare to midwife skill (21,4%) and midwife attitude (19,9%). Therefore, midwife knowledge variable (X_1) has dominant influence to midwife professionalism (Y).

VI. SUGGESTIONS

1. Midwifery knowledge is an art and practices which combine science, phylosophy, and approach to human as requirement or rules for maintain health care for mother, children and her family. For acquire knowledge therefore a midwife must join formal/informal education to get an update science.



- 2. Midwifery skill is one of many competencies that must be possessed by a midwife for applying any maternity practices in highly safety and responsibility manners at various health services order. A midwife must upgrade her skill by following series of workshops or any training in accordance to her competency area
- 3. Midwifery attitude is one of psychological aspect from every individual that play important role because it is a tendency to behave. As a result it will make many personality colours for midwife attitude. Then, a midwife must have a representative attitude that allows patient believe and feel secure with her. She should have a stable emotion in dealing with patients and posses a trustable behaviour as well, as a professional midwife.
- **4.** Midwifery professionalism is a behaviour, expertise, or quality from a professional individual. To be a professional midwife, she must upgrade her responsibility, having a good value, high morality and philosophy with decent ethics in delivering services to communities.

REFERENCES

Ali, Mohammad. 2012. Psychology for Adolescence, A Progress for Education Trainee (Psikologi Remaja Perkembangan Peserta Didik). Jakarta: PT.Bumi Aksara.

Ambarwati, Eny Retna. Rismintari, Y. Sriati. 2009. Community Midwifery Care (Asuhan Kebidanan Komunitas). Yogyakarta: Nuha Medika.

Ambarwati, Eny Retna. Wulandari, Diah. 2010. Postnatal Midwifery Care (Asuhan Kebidanan Nifas). Yogyakarta: Nuha Medika

Azwar, Saifuddin. 2005. Research Methods (Metode Penelitian). Yogyakarta: Pustaka Pelajar.

Azwar, Saifuddin. 2009. Reability and Validity (Reliabilitas dan Validitas). Yogyakarta: Pustaka Pelajar.

______. Psychology Scale Arrangement (Penyusunan Skala Psikologi). Yogyakarta: Pustaka Pelajar

Azwar, Saifuddin. 2010. Human Behaviour: Theory and Its Measurement (Sikap Manusia: Teori dan Pengukurannya). Yogyakarta: Pustaka Pelajar.

Dewi, Vivian.N.L. 2010. Neonatal Baby and Children Under Five Care (Asuhan Neonatus Bayi dan Anak Balita). Jakarta: Salemba Medika.

Dewi, Vivian.N.L, Sunarsih Tri. 2011. Post Partum Mother Care (Asuhan Kebidanan pada Ibu Nifas). Jakarta : Salemba Medika

Estiwidani, Dwiana. 2008. Midwifery Concept (Konsep Kebidanan). Yogyakarta: Fitramaya.

Fadlun, Feryanto, Achmad. 2013. Pathological Midwifery Care (Asuhan Kebidanan Patologis). Jakarta : Salemba medika.

Hani, Ummi. 2010. Midwifery Care For Physicological Pregnancy (Asuhan Kebidanan pada kehamilan Fisiologis). Jakarta: Salemba Medika

Hidayat, Asri. Sujiatini. 2010. *Midwifery Care For Labour Process (Asuhan Kebidanan Persalinan*). Yogyakarta : Nuha Medika

Kesuma, Dharma. 2012. Character Building, Theoritical Study and Practice for School (Pendidikan Karakter Kajian Teori dan Praktik di Sekolah). Bandung: PT Remaja Rosdakarya.

Kusmiyati, Yuni. 2009. *Pregnancy Care (Perawatan Ibu Hamil (Asuhan Ibu Hamil)*. Yogyakarja: Fitramaya Marzuki. 2000. *Research Methodology (Metodologi Riset)*. Yogyakarta: PT. Prasetia Widia Pratama.

Meilani, Niken. 2009. Community Midwifery (Kebidanan Komunitas). Yogyakarta: Fitramaya

Mochtar, Rustam. 2011. Obstetric Synopsis: Physiology Obstetric, Pathology Obstetric 3rd Ed, Volume 1 (Sinopsis Obstetri: Obstetri Fisiologi, Obstetri Patologi Ed 3 Jilid 1). Jakarta: EGC

Muslihatun, Wafi Nur. 2010. Neonatal Baby and Children Under Five Care (Asuhan Neonatus bayi dan Balita). Yogyakarta: Fitramaya

Mustafa, Zainal. 2009. Explain Variables to Instrumentation (Mengurai Variabel Hingga Instrumentasi). Yogyakarta: Graha Ilmu.

Notoatmodjo, Soekidjo. 2012. Health Research Methodology (Metodologi Penelitian Kesehatan). Jakarta : Rineka Cipta .

Romauli, Suryati. 2011. Maternity Care Text Book 1: Basic Concept of Pregnancy Care (Buku Ajar Asuhan Kebidanan 1: konsep dasar asuhan kehamilan). Yogyakarta : Nuha medika

Rukiyah, Ai Yeyeh. Yulianti, Lia. 2010. *Midwifery Care IV (Midwifery Pathology) (Asuhan Kebidanan IV (Patologi Kebidanan)*. Jakarta: Trans Info Medika.

Saifuddin, Abdul Bari. Dkk. 2012. Practical Guidelines of Maternal and Neonatal Health Care (Buku Panduan Praktis Pelayanan Kesehatan Maternal dan Neonatal). Jakarta: Yayasan Bina Pustaka Sarwono Prawiraharjo.

Samani, Muchlas. 2012. Concept and Model of Character Building (Konsep dan Model Pendidikan Karakter). Bandung: PT. Remaja Rosdakarya.



Silalahi, Ulber. 2009. Social Research Methods (Metode Penelitian Sosial). Bandung: PT. Refika Aditama.

Sobur, Alex. 2011. General Pschology (Psikologi Umum). Bandung: CV. Pustaka Setia.

Soepardan, Suryani. 2007. Concept of Midwifery (Konsep Kebidanan). Jakarta: EGC.

Sofyan, Mustika. 2006. 50 Years of Ikatan Bidan Indonesia, Midwifes Greet The Future (50 Tahun Ikatan Bidan Indonesia Bidan Menyongsong Masa Depan). Jakarta: PP.IBI.

Sudarti. Fauziah, Afroh. 2013. Neonatus Midwifery Care: High Risk and Critical Condition (Asuhan Kebidanan Neonatus: Risiko Tinggi dan Kegawatan). Yogyakarta: Nuha Medika.

Sugiono. 2011. Quantitative, Qualitative Research Method and R & D (Metode Penelitian Kuantitatif, Kualitatif, dan R&D). Bandung: Alfabeta.

Suherni. 2009. Post Partum Care (Perawatan Masa Nifas). Yogyakarta: Fitramaya

Sujianti dan Susanti. 2009. Maternity Concepts: Theory and Its Application (Konsep Kebidanan: Teori dan Aplikasi). Yogyakarta: Penerbit Mulia Medika.

Sujiyatini. 2009. Midwifery Pathology Care: plus Examples of Midwifery Guidelines (Asuhan Patologi Kebidanan: plus contoh Asuhan Kebidanan). Yogyakarta: Nuha Medika

Sulistyawati, Ari. 2009. Textbook of Midwifery Care for Post Partum Mother (Buku Ajar Asuhan Kebidanan pada Ibu Nifas). Yogyakarta: C.V Andi Offset.

Sulistyawati, Ari. 2011. Pregnancy Care in Pregnancy Time (Asuhan Kehamilan pada Masa Kehamilan). Jakarta: Salemba Medika

Sumanto. 1997. Education and Social Research Methodology (Metodologi Penelitian Sosial dan Pendidikan). Yogyakarta: Penerbit Andi Offset.

Sumarah. 2009. Treatment for Woman in Labour (Midwifery Care for Mother in Labour) (Perawatan Ibu Bersalin (Asuhan Kebidanan Pada Ibu Bersalin). Yogyakarta: Fitramaya

Suryabrata, Sumadi. 2003. Research Methodology (Metodologi Penelitian). Jakarta: Penerbit CV. Rajawali.

Syah Muhibbin. 1997. *Psychology of Education with New Approach (Psikologi Pendidikan, Dengan Pendekatan Baru*). Bandung: PT. Remaja Rosdakarya.

Wahyuningsih, Puji Heni. 2008. Ethic of Midwifery Profession (Etika Profesi Kebidanan). Yogyakarta: Penerbit Fitramaya.

Winarsunu, Tulus, 2006. Statistic for Psychology and Education (Statistik Dalam Penelitian Psikologi Dan Pendidikan). Malang: UMM Press.

Yulifah, Rita. Yuswanto, Tri Johan Agus. 2009. *Midwifery Care for Community (Asuhan Kebidanan Komunitas*). Jakarta: Salemba Medika.

The IISTE is a pioneer in the Open-Access hosting service and academic event management. The aim of the firm is Accelerating Global Knowledge Sharing.

More information about the firm can be found on the homepage: http://www.iiste.org

CALL FOR JOURNAL PAPERS

There are more than 30 peer-reviewed academic journals hosted under the hosting platform.

Prospective authors of journals can find the submission instruction on the following page: http://www.iiste.org/journals/ All the journals articles are available online to the readers all over the world without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. Paper version of the journals is also available upon request of readers and authors.

MORE RESOURCES

Book publication information: http://www.iiste.org/book/

Academic conference: http://www.iiste.org/conference/upcoming-conferences-call-for-paper/

IISTE Knowledge Sharing Partners

EBSCO, Index Copernicus, Ulrich's Periodicals Directory, JournalTOCS, PKP Open Archives Harvester, Bielefeld Academic Search Engine, Elektronische Zeitschriftenbibliothek EZB, Open J-Gate, OCLC WorldCat, Universe Digtial Library, NewJour, Google Scholar

