

Competency Gap Analysis at The Echelon Level and Implications in The Implementation of The Principle of Right Person on The Right place at The MAPPI District Health Office

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Abstract. *This study aims to map the types and levels of competency gaps, identify competency gaps, and analyze the implications of implementing the right person in the right place principle at the Mappi Regency Health Office. The background of this study is a mismatch between the competencies of echelon III and IV officials and the demands of their positions, resulting in a high prevalence of malnutrition among toddlers. This study used a qualitative approach with a case study method. Eleven informants were selected through purposive and snowball sampling techniques. Data were obtained through in-depth interviews, document studies, and indirect observations. Data were analyzed interactively and continuously using an interactive analysis model. The results indicate that competency gaps are mapped into three main types: knowledge gaps, skill gaps, and attitude gaps. Of these three aspects, the skill gap was identified as the highest and most critical area. The competency gap at the Mappi Regency Health Office is the accumulation of policy and regulatory factors, management process factors, and human resource development factors. The identified competency gap has implications for systemic violations of the principle of meritocracy, resulting in declining individual and organizational performance. These findings emphasize that the implementation of the Right Person on the Right Place principle in the Mappi Regency Health Office must prioritize meritocracy without eliminating affirmative action policies. Therefore, it is crucial to develop a theoretical model that integrates Person-Job Fit theory, Strategic Human Resource Management, and affirmative action policies within the context of public organizations in underdeveloped regions.*

Keywords: Competency Gap; Mappi Regency; Right Person on the Right Place.

1. Introduction

In 2024, a study by the International Institute for Management Development [IMD] showed that Indonesia ranked 46th out of 67 countries in terms of human resource competitiveness (Mediana, 2024), and 3rd in Southeast Asia, after Singapore and Malaysia (Rafli, 2024). This

indicates that the competence and professionalism of Indonesian human resources working in public organizations are still low compared to Malaysia and Singapore. In the modern world of government, the demand for competent, professional, and adaptable apparatuses is the main key to increasing competitiveness.

Indonesia. As stated by the Indonesian Minister of Administrative and Bureaucratic Reform, Rini Widyantini, the current transformation of ASN management is focused on creating a professional bureaucracy and prioritizing competence in filling positions (Panrb, 2025).

To achieve this, the Right Person on the Right Place (RPORP) principle serves as a fundamental foundation. Implementing this principle ensures that every strategic position within the bureaucracy, particularly at the echelon level, is filled by individuals with the appropriate competencies. In local government, this principle is a key factor in improving public services (Muksin, 2022). This is crucial for local governments, especially institutions directly responsible for the quality of life of the community, such as health departments.

However, in practice, gaps are often found between the ideal theory of RPORP and the reality on the ground. Public organizations in the regions face problems related to the mismatch between their competencies and the demands of their positions.

These principles, in the context of Indonesian bureaucracy, refer to employee placement based on the suitability of individual competencies, qualifications, and characteristics to existing job requirements. The government has issued Minister of Administrative and Bureaucratic Reform Regulation Number 38 of 2017 concerning Civil Service Job Competency Standards. This regulation outlines three main aspects: technical competency based on the main duties and functions of the position. Managerial competencies include: integrity, cooperation, communication, results-oriented, public service, self-development and that of others, managing change, and decision-making. Socio-cultural competency is the ability to interact with the community and the environment (MenpanRB, 2017). The same regulation contains the qualifications for echelon III [Administrator Position] and echelon IV [Supervisory Position] positions as can be seen in the table below.

In practice, discrepancies or gaps between the ideal RPORP theory and the reality on the ground are frequently found. In the Mappi District Health Office, based on the results of initial interviews conducted by the author with the Head of Personnel, several employees were placed in certain positions based on affirmative action, namely referring to Law No. 2 of 2021 concerning Special Autonomy for Papua, rather than because of their competency (Maimuna, 2025). Mappi District Health Office personnel data shows that four echelon IV officials and one echelon III official do not meet formal education requirements or technical competency requirements.

Competency gap This is an early indication of the suboptimal performance of public organizations. Data from the 2024 Government Agency Performance Accountability Report [LAKIP] from the Mappi District Health Office shows that several Community Health Centers

(Puskesmas) have not achieved Key Performance Indexes (IKU), such as the percentage of Community Health Center Infrastructure Standard Compliance and the prevalence of malnutrition in toddlers (Mappi District Health Office, 2024).

This situation indicates that the low performance of public organizations is caused by a competency gap. The more appropriate placement of human resources (HR) has a positive impact on the organization's success in achieving its goals, conversely, inappropriate placement has a negative impact on the organization (Sugianinggrat & Sarmawa, 2024). This is confirmed by personnel data from the Mappi Regency Health Office, which found several employees holding echelon IV and III positions who did not match their job competencies. This finding confirms the existence of a systemic problem that requires further investigation.

This creates a competency gap that ultimately harms both organizations and the public as service recipients. This problem arises from a lack of training and development (Wahyuni et al., 2020), the lack of mapping of job competencies required for each position (J. Kaur & Kumar, 2013), and the ineffective implementation of a competency assessment system. Furthermore, the urgent need and affirmative action policies to fill vacant positions often override a thorough competency identification process. Consequently, the job filling process is not based on accurate data regarding the gap between existing and required competencies.

Placing personnel that does not match needs and expertise can result in decreased productivity, increased medical errors, and dissatisfaction among both providers and recipients of services (Aiken et al., 2012). Therefore, strategic human resource management is an essential foundation for the performance of the Mappi District Health Office. The right person in the right place is crucial in job placement, where a person's placement is based on their abilities, expertise, education, and experience. Theoretically, appropriate placement is the core of the merit system in the public sector, which emphasizes placement based on qualifications, competence, and performance, rather than non-professional considerations such as nepotism or collusion (Daengs, 2022). This merit system is believed to improve the accountability, efficiency, and quality of public services (Sary et al., 2024). In the health context, placement according to competence is crucial given the complexity and sensitivity of services that directly impact human life (Aiken et al., 2012).

The Right Person in the Right Place principle is a fundamental concept in modern, competency-based HR management (Daengs, 2022). This principle emphasizes the importance of matching individual characteristics (academic achievement, experience, physical and mental health, attitude, marital status, age) with the specific requirements and challenges of a position or task (Daengs, 2022). Implementing this principle aims to maximize individual potential, increase motivation and job satisfaction, and ultimately boost overall organizational performance (Asrini et al., 2025; Zein, 2023).

Several studies have proven that the application of the principle of The Right Person in the Right Place have a positive impact on the organization. FlatauHarrison et al., (2023)

conducted research on frontline workers such as midwives and police officers, finding that individual fit with work is related to safety behavior, thus creating a positive image for the organization. Research conducted by Pham et al., (2024) proved that there is a relationship between individual fit with their work and public sector performance in Vietnam. Wiegand & Morgan, (2025) integrated the fit between people and the work environment can improve work results. In addition, research (N. Kaur & Kang, 2021) also shows that people and work confirm a positive relationship on employee job satisfaction.

Placing the right people can be done in several ways, one of which is through competency analysis. However, competency analysis that is not implemented properly will result in employee placement that does not match their abilities [competency gap]. Competency gaps are quite important for organizations, so many studies have conducted research on competency gaps with different focuses. Wahyuni et al., (2020) focused on competency gaps and training needs, (Purabdollah et al., 2024) emphasized the difference between the expected and perceived competency levels of final-year nursing students, (Gulati et al., 2023) focused on leadership competency gaps and gender disparities, Kubota et al., (2024) focused their research on pre-education and in-service midwifery competency gaps.

(Braun et al., (2025) focused on researching the management of skills gaps and challenges faced by the manufacturing industry, Mhaske et al., (2025) emphasized on identifying the determinants of the digital skills gap, (Malekshahian et al., 2025) focused on the job skills gap in the field of chemical engineering, (Abbasi et al., 2018) focused more on the gap between the expected skills and the skills possessed by business graduates working in the banking industry.

Several previous studies have examined the competency gap from a capability perspective, such as research by Herhausen et al. (2020) focusing on the digital marketing capability gap; Sadi & Álvarez-Nobell (2024) focusing on capacity gaps related to key strategic issues and activities in public relations and communication management. Research examining the competency gap from a leadership perspective, such as Gulati et al. (2023) focusing on the leadership competency gap and gender disparities; and Graham (2020) focusing on the leadership gap of clinicians.

The previous studies described above can be grouped into three main focuses: those focused on competency gaps, particularly skills gaps, capability gaps, and leadership gaps. Of these four focuses, there is still a lack of research that specifically examines the fit between the abilities, knowledge, and attitudes of an official (person) with the demands and responsibilities of their position (Job) at the echelon level in the health sector in underdeveloped regions. This research will fill this research gap.

The general theoretical framework underlying this research is strategic human resource management [HRM] theory, particularly in the field of Competency.

Based on Human Resources management. This theory emphasizes that all HR processes, from recruitment to development, must be competency-oriented. This theory leads to the identification of a key problem: the mismatch between individual competencies and job requirements.

Furthermore, the Person-Job Fit theory provides a lens for analyzing the fit between an official's (person) abilities, knowledge, and attitudes with the demands and responsibilities of their position (job). A mismatch between the two creates a misfit, which is the root of the competency gap. This theory serves as the foundation for selecting and identifying core issues within an echelon context.

The central issue of this research is an in-depth analysis of the form, level, and causes of competency gaps at the echelon level in Mappi Regency. This issue is crucial because echelon positions play a role in planning and policymaking. Any competency gaps at this level will impact the performance of the Mappi Regency Health Office.

Mappi Regency, with its challenging geographic characteristics and limited infrastructure, relies heavily on the leadership capacity of its Health Office. Competency gaps at the leadership level will have serious implications for addressing health issues. Therefore, the Mappi Regency context provides special urgency and strategic value for this research. Based on the problem identification and theoretical framework, the selection of research questions focused on three main aspects: first, mapping the types and levels of competency gaps among echelon officials; second, analyzing the factors causing these gaps; and third, examining the implications of these gaps for the implementation of the right person in the right place principle and organizational performance.

The implications of the competency gap for RPORP implementation are an integral theme. This research will investigate how this gap affects the effectiveness of the implementation of these principles. It will also determine whether it causes inefficiency, decreased service quality, or even resistance to organizational change. Understanding these implications is necessary for designing a appropriate intervention.

2. Research Methods

This research employs a qualitative approach using a case study method. This approach is considered most appropriate because it allows researchers to deeply and comprehensively explore the competency gap phenomenon and the implications of implementing the right person in the right place principle in a real-world context within the Mappi District Health Office. Through the case study method, researchers can capture the dynamics and complexity of the problem from the perspective of the key actors directly involved in the process. Thus, this research is expected to provide a richer, deeper, and more contextual understanding of the phenomenon under study.

3. Results and Discussion

3.1. Synthesizing Findings to Answer Research Questions

This study aims to deeply uncover the phenomenon of competency gaps at the echelon level in the Mappi District Health Office and its implications for the implementation of the right person on the right place (RPORP) principle. Based on the data presented in the results section, this discussion will systematically compile these findings to answer the three established problem formulations, namely mapping the types and levels of competency gaps, identifying the causal factors, and analyzing their implications for the implementation of the RPORP principle.

3.1.1. Answering the First Problem Formulation

The research findings have comprehensively mapped the competency gap into three main types in accordance with the regulatory framework. Minister of PANRB Number 38 of 2017, namely the knowledge gap, knowledge gap, skill gap, and attitude gap. Knowledge gap mapping shows that the level of knowledge gap varies. Echelon officials have a relatively good understanding of national and regional health policies, as reflected by the low gap in this indicator. However, significant gaps occur in the aspects of personnel regulations and HR management, which fall into the high category.

Furthermore, knowledge gaps in administrative and technical aspects of services, such as minimum service standards (SPM) and epidemiological data, are moderate. This indicates that while officials understand the basic concepts, they remain weak in technical implementation and knowledge updating, ultimately impacting the quality of program planning.

The second type of gap, the skills gap, was identified as the highest and most critical area. This finding clearly answers the research question regarding the level of gap. Skills in program planning, strategic decision-making, and monitoring and evaluation showed significant gaps, particularly among Community Health Center (Puskesmas) heads.

Low scores on these core managerial skills confirm that echelon officials struggle to translate their knowledge into concrete actions. This inability to plan and supervise is a direct cause of program inefficiencies, reporting delays, and failure to achieve performance targets set in the LAKIP.

In contrast to the previous two types, mapping the attitude gap shows very positive results. The gap in attitudes is relatively low, with indicators such as responsibility and commitment to public service even exceeding expected standards. This finding answers the question of this type of gap, which suggests that the primary problem lies not in the willingness or good intentions of officials.

Strength in this attitudinal aspect is a very valuable fundamental asset. It demonstrates that officials possess high integrity and dedication, which are essential prerequisites for the success of any capacity-building program. This strong sense of goodwill should serve as the foundation for building the knowledge and skills that remain left behind.

Thus, the answer to the first research question is that the competency gap in the Mappi District Health Office is multidimensional. The skill gap is the most dominant and high-level, particularly in managerial aspects. The knowledge gap is moderate, with the weakest point being HR regulations. Meanwhile, the attitude gap is low and represents an organizational strength.

3.2. Interpreting Findings Through a Theoretical Perspective

After compiling the findings to answer the research questions, this section will interpret the findings in more depth using the theoretical perspectives outlined in the literature review.

Dialogue between empirical data from the Mappi District Health Office and theory Strategic Human Resource Management, Person-Job Fit, and the Competency Gap concept will reveal a more fundamental meaning of the phenomena discovered.

This theoretical understanding is crucial for positioning this research within the broader scientific landscape. By comparing the findings in Mappi with previous research, we can identify general patterns as well as unique contexts that enrich our understanding of how competency gaps form and operate within public organizations, particularly in underdeveloped regions.

3.2.1. Theoretical Dialogue with Human Resource Management Theory

Research findings regarding the less than optimal selection and placement process for echelon officials indicate weak implementation of Strategic Human Resource Management (Strategic HR) principles at the Mappi District Health Office.

As stated by Nathaniel (2022) and Febriana (2023), the core of Strategic HRM is the vertical alignment of HR practices with organizational strategy, as well as the horizontal alignment between HR functions. In the Mappi context, non-competency-based placement practices create a mismatch between existing human resources and the organization's strategic objectives as outlined in the Strategic Plan.

The failure to achieve the Key Performance Indicator (KPI) targets in the LAKIP is empirical evidence of this misalignment. The organization has ambitious strategic goals, but is not supported by officials with sufficient competence to realize them. This contradicts Mills' (1983) view that it is people who implement them.

strategic plan.

Furthermore, these findings confirm Pfeferr's (1998) view in The Human Equation that investment in people through proper selection and adequate training is the key to competitive advantage.

The absence of rigorous selection practices (selective hiring) and extensive training at Mappi actually creates a competitive disadvantage, where the organization loses efficiency and effectiveness.

Ulrich's (1997) Four Roles of HR Model also provides a lens for understanding this issue. In carrying out its role as a strategic partner, the HR function in Mappi Regency has not been able to connect HR strategy with the organization's business objectives. As a change agent, the existing HR system has also failed to guide the organization through its transformation toward better governance.

This weak HR role is illustrated by the Head of Personnel's statement that competency mapping has never been conducted. Without accurate data, the HR function cannot act as administrative experts building an effective HR infrastructure, let alone become employee champions that enhance employee commitment and capabilities. As a result, the HR management cycle proceeds without clear direction.

From the perspective of Gary Becker's Human Capital Theory (1993), education, training, and health are investments that generate economic returns. The findings of a wide knowledge and skills gap among echelon officials indicate that human capital investment in Mappi Regency is suboptimal. Officials occupying strategic positions lack sufficient knowledge and skills to generate added value for the organization.

This situation is exacerbated by the lack of a systematic post-placement development program. Organizations lose potential returns on investment from their employees because they are unable to manage and develop existing human capital. Yet, as Porter (1985) stated, HR is a critical support activity that creates competitive value. When this activity is weak, the entire organizational value chain is disrupted.

3.3. Analysis of Causal Factors in the Theoretical Framework

The multidimensional causes of the competency gap can be explained using systems theory. Failure in one subsystem (e.g., selection) will impact other subsystems (e.g., performance). This aligns with the principles of Strategic Human Resource Management, which emphasize the importance of alignment between HR functions.

The affirmative action policy of Papua's Special Autonomy, when analyzed using justice theory, creates a dilemma between distributive justice (for local people) and procedural justice (competence-based procedural justice). This policy, while socially just, becomes procedurally unfair if not balanced with a capacity-building safety net, as the community ultimately becomes the victim of poor services.

The findings regarding the weak selection and assessment process confirm research by J. Kaur & Kumar (2013), which stated that the competency gap arises from a lack of mapping of required job competencies. In Mappi, not only is there a lack of mapping, but also of instruments to measure it. This indicates a deeper level of severity.

Organizational culture factors that prioritize seniority and "respect" can be explained by Edgar Schein's theory of organizational culture. These unwritten core assumptions strongly influence daily behavior and decisions, including how to assess the performance of colleagues. Changing these core assumptions is the most difficult challenge in any reform effort bureaucracy.

Mappi's challenging geographic conditions, as an external environmental factor, reinforce contingency theory in management. No single HR management system fits all contexts. Remote areas like Mappi require a different HR development system design, for example, utilizing technology for distance learning, something that hasn't been optimally implemented.

3.3.1. Implications of Implementing RPORP from a Theoretical Perspective

The implications of the competency gap for the implementation of the RPORP principle demonstrate that violating the Person-Job Fit theory will trigger a series of negative consequences that ripple throughout the organization. This demonstrates that fit is not a static, ideal condition, but rather a dynamic foundation that impacts all aspects.

The loss of staff trust in the legitimacy of incompetent superiors' leadership can be explained by social exchange theory. Staff provide loyalty and performance in the expectation of competent direction and support from their superiors. When these expectations are not met, the psychological contract between superiors and subordinates is broken.

Budget inefficiencies resulting from planning errors by incompetent officials are a concrete manifestation of agency theory in the public sector. Officials, as "agents," are supposed to carry out the mandates of the "principals" (the public and the government) to the best of their ability. However, when agents are incompetent, they fail to fulfill their functions, and the principal suffers the losses.

The impact on organizational performance, reflected in the failure to achieve LAKIP targets, demonstrates a direct relationship between human resource quality and organizational effectiveness. This aligns with the findings of Pham et al. (2024) in Vietnam, which showed that person-organization fit positively impacts public sector performance.

Furthermore, the finding that competency gaps reduce individual work motivation confirms research by N. Kaur & Kang (2021), which found a positive relationship between person-job fit and job satisfaction. When someone feels unsuited to their job, job satisfaction declines, and ultimately, commitment to the organization is eroded.

4. Conclusion

Based on the research results and discussions that have been described in the previous chapter regarding the competency gap analysis at the echelon level and its implications in the application of the right person on the right place principle at the Mappi District Health Office, the following conclusions can be drawn: 1. Mapping the Types and Levels of Competency Gaps in Echelon Officials: This study successfully mapped the competency gap among echelon III and IV officials at the Mappi District Health Office into three main types in accordance with the Minister of PANRB Regulation Number 38 of 2017, namely the knowledge gap, the skill gap, and the attitude gap. Of these three aspects, the skill gap was identified as the area with the highest level and the most critical. Program planning, strategic decision-making, and monitoring and evaluation skills showed a very wide gap with a difference reaching 2.6 to 2.8 points from the expected standard. The weakness of these core managerial skills makes it difficult for echelon officials to translate knowledge into concrete actions, which results in program inefficiency and failure to achieve performance targets. In the knowledge aspect (knowledge gap), the level of disparity is in the moderate category with an average difference of 1.3 points. The highest gap occurs in Understanding of personnel regulations and human resource management in health (a 2.0-point difference), while understanding of national and regional health policies was relatively good (low gap). This indicates that officials have a sufficient knowledge base, but there are still blind spots in the legal-formal aspects and personnel management. Meanwhile, the attitude gap showed very positive results with an average gap of only 0.32 points (low category). Indicators such as responsibility for tasks and commitment to improving health services even exceed expected standards. Strength in this attitude aspect is a valuable fundamental asset for future human resource development efforts. 2. Factors Causing Competency Gaps at the Echelon Level: Competency gap The problems at the Mappi District Health Office did not emerge suddenly, but rather resulted from the accumulation of various multidimensional and interrelated causal factors. Policy and regulatory factors are the primary causes, with the implementation of Papua's Special Autonomy affirmative action policy often disregarding the principle of meritocracy. Prioritizing local candidates with minimal requirements has resulted in technical competence being devalued, creating a mismatch between individual capacity and job requirements. Regulatory weaknesses are also evident in the lack of operational and measurable job competency standards and the absence of firm sanctions for inappropriate placement practices. Management process factors also contribute significantly, where the selection and placement process for echelon officials still uses very simple methods and is not yet able to measure competency comprehensively. The absence of valid competency assessment instruments, such as assessment centers, has led to the assessment process relying solely on interviews, which are prone to subjectivity. Consequently, placement decisions are based more on seniority, personal familiarity, or availability than on objective competency data. Human resource development is also a crucial factor, with existing training and development programs being sporadic, unplanned, and not based on actual competency needs. The lack of induction

programs for new officials and limited access to training for officials in remote community health centers further widen the competency gap. 3. Implications of the Competency Gap for the Implementation of the Right Person in the Right Place Principle: The identified competency gap has far-reaching implications for the implementation of the right person on the right place (RPORP) principle at the Mappi District Health Office. The most fundamental implication is a systemic violation of the principle of meritocracy, where a non-objective placement process has resulted in a clear mismatch between the educational background and competency of officials and the demands of the position. The principle of placing the right person in the right place remains merely a slogan without any concrete implementation. This weak implementation of RPORP further erodes leadership legitimacy among staff, triggering team dysfunction such as uneven task delegation and ineffective communication. The implications for individual performance are reflected in the decline in the officials' self-confidence and work motivation. Officials feel "forced to swim without being taught," which can trigger work stress and ultimately reduce productivity and the quality of decision-making. The implications for organizational performance and public services are the most critical impact, where the failure to achieve Key Performance Indicators (IKU) in the LAKIP, such as the unaddressed prevalence of malnutrition and the suboptimal fulfillment of community health center infrastructure standards, are clear evidence that the competency gap at the leadership level leads to the organization's failure to fulfill its mandate. The community as service recipients feels the direct impact in the form of slow, unresponsive services and neglected preventive programs.

5. References

Journals:

- Abbasi, F. K., Ali, A., & Bibi, N. (2018). Analysis of skill gap for business graduates: managerial perspective from banking industry. *Education and Training*, 60(4), 354–367.
- Aiken, L. H., Sermeus, W., Van Den Heede, K., Sloane, D. M., Busse, R., McKee, M., Bruyneel, L., Rafferty, A. M., Griffiths, P., Moreno-Casbas, M. T., Tishelman, C., Scott, A., Brzostek, T., Kinnunen, J., Schwendimann, R., Heinen, M., Zikos, D., Sjetne, I. S., Smith, H. L., & Kutney-Lee, A. (2012). Patient safety, satisfaction, and quality of hospital care: Cross sectional surveys of nurses and patients in 12 countries in Europe and the United States. *BMJ (Online)*, 344(7851).
- Braun, G., Rätty, P., Bokinge, M., Rikala, P., Hämäläinen, R., Syberfeldt, A., & Stahre, J. (2025). The skill bridge – A global qualitative analysis of skill gap management. *Journal of Environmental Management*, 395, 127738.
- Flatau-Harrison, H., Wilson, M. K., & Vleugels, W. (2023). The reciprocal relationship between safety behaviour and person-job fit: A self-regulation perspective. *Safety Science*, 168.

- Graham, G. L. (2020). The Leadership Gap: Supporting New Front line Leaders in Cancer Care. *Journal of Medical Imaging and Radiation Sciences*, 51(1), 54–61.
- Hendry, C., & Pettigrew, A. (1986). The Practice of Strategic Human Resource Management. In *Personnel Review*, Vol. 15, Issue 5, pp. 3–8.
- Herhausen, D., Miočević, D., Morgan, R. E., & Kleijnen, M. H. P. (2020). The digital marketing capabilities gap. *Industrial Marketing Management*, 90, 276–290.
- Kaur, J., & Kumar, V. (2013). Competency Mapping: A Gap Analysis. *International Journal of Education and Research*, 1(1), 1.
- Kaur, N., & Kang, L. S. (2021). Person-organisation fit, person-job fit and organisational citizenship behaviour: An examination of the mediating role of job satisfaction. *IIMB Management Review*, 33(4), 347–359.
- Kubota, S., Ando, M., Murray, J., Khambounheuang, S., Theppanya, K., Nanthavong, P., Tengbriacheu, C., Sisavanh, M., Khattiyod, T., Asai, D., Sobel, H., & Jimba, M. (2024). A gap analysis of midwifery to deliver essential reproductive, maternal, newborn, child and adolescent health services in Lao People's Democratic Republic. *The Lancet Regional Health - Western Pacific*, 43.
- Malekshahian, M., Dautelle, J., & Shahid, S. (2025). Bridging the skills gap: Enhancing employability for chemical engineering graduates. *Education for Chemical Engineers*, 52, 26–36.
- Mhaske, P., Bhattacharjee, B., Haldar, N., Upadhyay, P., & Mandal, A. (2025). Bridging digital skill gaps in the global workforce: A synthesis and conceptual framework building. *Research in Globalization*, 11.
- Pham, T. P. T., Van Nguyen, T., Van Nguyen, P., & Ahmed, Z. U. (2024). The pathways to innovative work behavior and job performance: Exploring the role of public service motivation, transformational leadership, and person-organization fit in Vietnam's public sector. *Journal of Open Innovation: Technology, Market, and Complexity*, 10(3).
- Purabdollah, M., Zamanzadeh, V., Ghahramanian, A., Valizadeh, L., Mousavi, S., & Ghasempour, M. (2024). Competency gap among graduating nursing students: what they have achieved and what is expected of them. *BMC Medical Education*, 24(1), 1–11.
- Purcell, J. (1999). Best Practice or Best Fit: Chimera or Cul-de-sac. *Human Resource Management Journal*, 9, 26–41.
- Referensi yang memiliki nama publikasi jurnal/prosiding, nomor volume, nomor isu, halaman, atau nomor DOI.

Sadi, G., & Álvaro-Nobell, A. (2024). Capability gap in relation to public relations' strategic issues in Latin America. *Public Relations Review*, 50(1).

Tims, M., Derks, D., & Bakker, A. B. (2016). Job crafting and its relationships with person-job fit and meaningfulness: A three-wave study. *Journal of Vocational Behavior*, 92, 44–53.

van Woerkom, M., Bauwens, R., Gürbüz, S., & Brouwers, E. (2024). Enhancing person-job fit: Who needs a strengths-based leader to fit their job? *Journal of Vocational Behavior*, 154.

Wahyuni, D. S., Agustini, K., Sindu, I. G. P., & Sugihartini, N. (2020). Analysis on vocational high school teacher competency gaps: Implication for VHS teacher training needs. *Journal of Physics: Conference Series*, 1516(1).

Wiegand, J. P., & Morgan, T. J. (2025). Strive to fit: Person, vocation, and organization strivings' impact on employee engagement and job performance. *Personality and Individual Differences*, 246.

Books:

Asrini, S., Appono, J., Negara, M., Rahayu, S., & Talakua, P. (2025). *Manajemen Sumber Daya Manusia* (M. A. Putra, Ed.; 1st ed., Vol. 1). Serasi Media Teknologi.

Becker, B., Huselid, M., & Ulrich, D. (2001). *The HR Scorecard: Linking People, Strategy, and Performance*. Harvard Business School Press.

Becker, G. S. (1993). *Human Capital: A theoretical and empirical analysis, with special reference to educational* (3rd ed.). The University of Chicago Press.

Daengs, A. (2022). *Membangun Kinerja Karyawan Berbasis Kompetensi* (Achmad Daengs, Ed.; 1st ed., Vol. 1). Unitomo Press.

Ebert, R. J., & Griffin, R. W. (2011). *Business Essentials* (10th ed.). Prentice Hall.

Fayol, H. (1949). *General and Industrial Management* (2nd ed.). Pitman.

Ghofar, A., Sariwulan, T., & Thamrin, S. (2025). *Perilaku Organisasi dan Manajemen Kinerja Membangun Keunggulan Kompetitif*. Pradina Pustaka.

Gratton, L. (2011). *The Shift: The Future of Work is already here*. HarperCollins.

Juhaeti, Damayanti, N., Permatasari, R. I., & Sitio, V. S. S. (2024). *Manajemen Sumber Daya Manusia*. Penerbit NEM.

Mills, D. Q. (1983). *The new competitors: A report on American managers*. John Wiley & Sons.

Muksin, I. (2022). Pengembangan Kapasitas Pemerintah Daerah (Safrinal, Ed.; Vol. 1). CV. Azka Pustaka.

Nathaniel, R. (2022). Manajemen Sumber Daya Manusia. Uwais Inspirasi Indonesia.

Pfeferr, J. (1998). The Human Equation: Building Profits by Putting People First. Harvard Business School Press.

Porter, M. (1985). Competitive Advantage. The Free Press.

Ratnasari, S. (2012). Frank B. Gilberth, Lillian M. Gilberth dan Perkembangan Ilmu Manajemen (E. Widiana, Ed.; 2nd ed.). UP Press.

Rivai, V. (2004). Manajemen Sumber Daya Manusia untuk Perusahaan dari Teori ke Praktik (1st ed.). PT RajaGrafindo Persada.

Septiani, S., Munir, S., Lestari, D., Ramadhi, & Haryanto. (2024). Manajemen Pelatihan dan Pengembangan Karyawan. Sada Kurnia Pustaka.

Taylor, F. W. (1911). The Principles of Scientific Management. Harper & Brothers.

Ulrich, D. (1997). Human Resource Champion: The next agenda for adding value and delivering result. Harvard Business School.

Zein, H. M. (2023). Transformasi Birokrasi pada Abad 4.0 (M. R. Kurnia, Ed.; 1st ed., Vol. 1). PT. Sada Kurnia Pustaka.

Internet:

Dinkes Kabupaten Mappi. (2024). Laporan Akuntabilitas Kinerja Instansi Pemerintah [LAKIP] Dinas Kesehatan Kabupaten Mappi 2024. (Laporan Kinerja Pemerintah).

Gulati, K., Davies, J., & González De La Fuente, Á. (2023). Addressing leadership competency gaps and gender disparities in India's medical workforce: a call to action. <https://www.statista.com> (Data/Rilis Statistik Statista).

Maimuna, B. (2025). Wawancara Awal. (Data Lapangan Primer).

Mediana. (2024, September 19). Daya Saing SDM Indonesia Peringkat Ke-46 dari 67 Negara. Kompas.Id. (Berita Media Massa).

Panrb. (2025, August 1). Menteri Rini: Rekrutmen Berbasis Kompetensi Kunci Birokrasi Profesional. Kementerian Pendayagunaan Aparatur Negara Dan Reformasi Birokrasi. (Siaran Pers Resmi Kementerian).

Rafli, M. (2024, October 1). Daya Saing SDM Indonesia Terbaik Ketiga di ASEAN. GoodStats.Com. (Artikel Data Informasi).