Posyandu cadres: their roles for improving health services in Jembayan Dalam Village



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ABSTRACT

Posyandu (Integrated Service Post) is a center of community activities where the community can simultaneously obtain family planning and health services including nutrition, immunization, Child Health (MCH), Maternal and and diarrhea prevention. Posyandu services are greatly supported by the role of cadres. Therefore, the role of cadres is needed to accelerate the reduction in maternal and infant mortality rates. The purpose of conducting this research is to find the role of posyandu cadres in health posyandu services. This study was qualitative research. Research respondents are informants were divided into two, namely the main informant consisting of 6 informants (as posyandu cadres) and 1 supporting informant (as health worker). Data collection techniques used by Focus Group Discussion. Posyandu cadres have implemented the principle of 5 tables when posyandu activities are taking place. In addition, the cadres also routinely attend training on the roles and duties of cadres in carrying out posyandu, so the cadres are able to provide basic health services, in order to accelerate the reduction in maternal and infant mortality rates. From the results of this study, it can be concluded that the implementation of the 6 aspects of the role of posyandu cadres has been well implemented the *Posyandu* of Jembayan Village.

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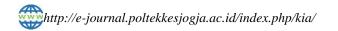
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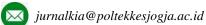
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INTRODUCTION

Posyandu is a center of community activities where the community can simultaneously get Family Planning and health services such as nutrition, immunization, Maternal and Child Health (MCH) and diarrhea prevention and treatment. Another definition of obtaining basic health services is to accelerate the reduction in maternal and infant mortality rates¹.





Posyandu was established to provide health services for the community, especially posyandu services aimed at pregnant women, nursing mothers, infants and toddlers as well as couples of childbearing (Pasangan Usia Subur). Usually carried out once a month in a place that is easily visited by the community and determined by the community itself¹.

The Department of Health sets the vision: "Independent community for healthy living". Based on the Ministry of Health's vision, it is expected that the community can manage, maintain, and utilize the Health Posyandu as a means of infrastructure in monitoring the development of pregnant women, breastfeeding mothers, toddlers as well as prevention and can overcome health problems so that the community can improve their health as much as possible. The village government of Jembayan Dalam and Posyandu cadres have implemented, managed and made use of the existing Posyandu, this can be seen from the number of toddlers who routinely carry out immunization at the posyandu and routinely the posyandu provides vitamin A to toddlers.

The posyandu is expected to be able to maintain and improve the health of infants, toddlers, mothers and couples of childbearing age. Posyandu also plans and also develops through posyandu cadres with the Village Head and also the Village Community Resilience Institute (Lembaga Ketahanan Masyarakat Desa) and the implementation is carried out by voluntary posyandu cadres who are ready to be trained in the KB-Kes field, coming from mothers of Community Welfare Empowerment (Pemberdayaan Kesejahteraan Kemasyarakatan), prominent figures community, youth with the guidance of the district level LKMD supervisory team².

In Posyandu management it must be from the community, by the community and for the community. Before conducting the management, the Jembayan villagers held a meeting to establish a Posyandu management. The Posyandu management structure consists of a chairman, a secretary, a treasurer and members. After forming the Posyandu structure, it will determine the Posyandu cadres. Criteria for Posyandu cadres such as coming from local community members, having the ability to read and write, being able to mobilize the community and being willing to work voluntarily and have free time.

The role of Posyandu cadres increases. This is not only the responsibility of the Government but all components of society. Before being inaugurated, prospective cadres were provided with training that included Posyandu and core material consisting of: 1) understanding cadres' tasks in holding posyandu, 2) understanding health issues at posyandu targets, 3) mobilizing the community, 4) implementing 5 tables 5) implementing counseling and 6) implementing posyandu recording and reporting³.

In health posyandu services in Jembayan village, support and participation and active roles are needed by the entire community, and in this case the most dominant role of Posyandu cadres is directly in utilizing and reviving Posyandu in order to monitor and overcome health problems experienced by the community. This study aims to find the role of posyandu cadres in health services in Jembayan Dalam Village.

METHOD

This research was conducted in the posyandu area of Jembayan Dalam Village, Loa Kulu Subdistrict in December 2019. Researchers used a qualitative research, based on the results stated that qualitative research was more about delivering the description and explaining the results that researchers had found while in the field⁴. In this study there are 7 research informants. The informants were divided into two group, namely the main informant consisting of 6 informants (as posyandu cadres) and 1 supporting informant (as health worker). Data collection techniques used Focus Group Discussion (FGD). FGD is one of the most commonly used techniques, because by using this technique researchers can obtain data quickly and can save time in qualitative data collection⁴. The research instrument is the researcher himself using research aids such as the FGD guide and the tape recorder.

The data analysis technique was carried out with the following steps⁵: 1) Data reduction is a summary or choose things that are considered basic so that it can provide a clearer picture and make it easier for researchers to do further data collection, so it does not complicate the process of further data analysis; 2) Presentation of data after the results of data reduction that has been arranged. The data was organized, arranged in a relationship pattern, so that it is easy to understand; 3) Conclusion or verification is the third step in qualitative data analysis. The conclusions obtained are still temporary, and do not rule out the possibility of change if no strong evidence is found, and that supports the next stage of data collection. In this study the authors reduce the data through the dominant data found while in the field, classify data, selects the data if in accordance with the objectives then conclusions was drawn and verified.

RESULTS

In this study there were 7 research informants. The informants in this study were divided into two, namely the main informant consisting of 6 informants who were posyandu cadres and 1 supporting informant, namely health workers. All cadres in Jembayan Dalam Village are female were all cadres have never graduated or attended high school. Aside from serving as a cadre, each cadre works as a housewife and farmer. The overall identity of respondents can be seen in Table 1.

Table 1. Characteristics of Respondents

No	Inisial	Gender	Pendidikan	Profession	Age	Tugas
1.	Н	F	SMP	housewife	44 th	Cadre
2.	M	F	SD	housewife	47 th	Cadre
3.	Α	F	SD	farmer	56 th	Cadre
4.	Т	F	SD	housewife	40 th	Cadre
5.	W	F	SMP	farmer	45 th	Cadre
6.	S	F	SMP	farmer	50 th	Cadre
7.	D	F	D3 Kebidanan	Midwife	30 th	Midwife

All cadres routinely attend training twice a year. So in the implementation of Posyandu that is held, cadres can be assigned according to their respective responsibilities. Before the Posyandu, each cadre routinely reminded the mothers in the Jembayan Dalam village to come for a check up on their children, or just to get health education. In Posyandu activities, the cadres conducted 5 tables. After the Posyandu service activities, the cadres recorded the names of mothers who were not present to be recorded and would be visited directly to their homes to be provided with health services.

DISCUSSION

There are 6 aspects that need to be considered by cadres to carry out their role as posyandu cadres, as follows:

Understand the Cadres Tasks in Organizing Posyandu

The implementation of Posyandu activities is carried out by those who are fully responsible and familiar with the flow and stages in posyandu activities such as posyandu cadres, Posyandu cadres who voluntarily carry out the tasks that have been given to improve the health status of the community as high as possible and are able to work together with the Puskesmas overcome existing health problems³. Posyandu will be implemented maximally if Posyandu cadres are active in implementing Posyandu. This is because cadres can be the right motivators to help realize the health of mothers and children.

Based on the results of the Focus Group Discussion, the information obtained from the informants was as follows "I routinely attend cadre training, so at the time of implementing the Posyandu, I already knew my job" (FGD T, 2019). "Yes,,, of course. The

implementation of this Posyandu, it was not the first or second time we did. So we understand each other duties at the Posyandu" (FGD A, 2019). Based on the results of interviews and direct field observations by researchers Posyandu cadres know their so at the time on the day of the implementation of the posyandu they will immediately move and take responsibility for their work.

Notoatmodjo (2007) states that several factors that influence a person's level of knowledge include: age, education, work, long experience of work, communication tools, and socio-culture ⁶. In line with research conducted by Prahastuti, et al (2016) shows that the level of knowledge of cadres are influenced by several factors including: age, education, work, and length of work to become a cadre¹¹.

This is inversely proportional in this study where the cadres already understand about their respective roles. Even though the level of education of cadres in the Posyandu of Jembayan Dalam Village has never graduated from high school, they can hold responsibilities as cadres. This is because the cadres routinely participate in training twice a year organized by the government and Community Health Services of Loa Kulu.

Understanding Health Problems in Posyandu Objectives

Health problem is a very common occurrence and can be interrelated with other problems outside of health problems. There are several factors or causes of health problems such as behavior, knowledge and attitudes of the community in responding to existing diseases⁷.

Based on the results of the Focus Group Discussion, the information obtained from the informants was as follows "Baby nutrition is not the same as stunting anyway in my opinion" (FGD M, 2019). "Hmm ... like an unhealthy lifestyle" (FGD W, 2019). The respondent also mention that can be understood the mothers who are posyandu cadres already understand what problems occur in the Jembayan Dalam village environment, especially on the posyandu target.

Community Development

Community Organizations mainly appear more in literature originating from or oriented to the United States while Community Development is more often found in literature originating from or oriented to the United Kingdom. Even though the name is different, the contents and concept are the same. Both are oriented towards the process towards achieving independence through the involvement or active participation of the whole community member.

Based on the results of the Focus Group Discussion, the information obtained from the informants is as follows "The bottleneck is the pack, sometimes sometimes we call it the time for our weighing, sometimes we don't come to the invitation in the invitation, they don't come, the reason, the injection in the injection is often sick like a fever, we will invite them to weigh the time" (FGD H, 2019). "It's raining because it can't go down RT. 4-5, the location of posyandu is not too far away just because they are the reason my son's book was still sleeping, I didn't want to wake up poorly, even though we often tell him the date, even though it was only awoken for a while at the posyandu, it was considered finished after a long time and take time" (FGD S, 2019). Based on the results of the discussion, obstacles such as weather when it rains, there are some mothers who have difficulty visiting Posyandu and there are some mothers deliberately not attending Posyandu because they do not want their children to have fever due to being immunized. There are also some mothers who forget during the Posyandu so they must be reminded again.

As this has been explained above, it can be concluded that cadres are able to move the community even though some obstacles still occur without being able to be prevented by posyandu cadres.

The Application of 5 Tables

In implementing Posyandu, cadres have several roles that must be carried out, namely preparing equipment for implementation before Posyandu begins, such as preparing notebooks, KMS, props and weighing and measuring instruments for infants and

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toddlers. When the Posyandu activities begin, some cadres register and record the presence of infants, toddlers, pregnant women and women of childbearing age who attend the Posyandu, after that do weighing infants and toddlers, record the results of weighing in KMS books and conduct counseling or socialization of individuals or groups to mothers -ibu next table. After Posyandu activities, the cadres routinely make home visits to conduct counseling and remind the time of implementing Posyandu⁸.

Posyandu cadres understand quite well in the application of 5 tables, namely Table 1: registration, Table 2: weighing, Table 3: filling KMS (Kartu Menuju Sehat), Table 4: counseling and Table 5: health services, and Provision of supplementary food, distribution of vitamin A and worm medicine for infants and toddlers who come to Posyandu. At the time of the implementation of the Health Posyandu Information obtained from the informant is as follows "Per month Weighing Perogram, vitamins are the distribution of vitamin A, worm medicine ves supplementary food like bread senenakan senakan also weighing" (FGD A. 2019).

Before carrying out Posyandu activities the Cadres divide the tasks according to the application of 5 tables, the division of tasks is arranged according to the needs, the obstacle that occurs in the implementation of Posyandu activities is the incomplete measurement of the length of the baby so that, even though the presence of a baby length measure the cadres can prevent children at risk Stunting in Jembayan Dalam Village.

Carry out Health Education

Health education is one of the efforts in health promotion strategies aimed at increasing public knowledge through the provision of information and learning from health workers⁹.

The purpose of implementing health education itself is more about efforts to change people's behavior so that they can behave healthily so as to achieve the highest degree of public health, it is expected that the results of health education, especially on the cognitive aspects (knowledge and understanding) will increase so that the implementation of health education in the community can slowly -land formed healthy behavior in individual families, and society¹⁰.

At certain times, posyandu cadres collaborate with puskesmas in conducting health counseling activities for residents during posyandu activities. There are some posyandu cadres conducting counseling in groups and individually by visiting mothers whose children have health problems in Jembayan Dalam Village to check their condition at the Posyandu. Counseling is not routinely carried out by Posyandu cadres and Puskesmas, counseling is usually done if there are problems that can affect the health of mothers and children such as many children at risk of malnutrition. "If we, as cadres, do better health promotion, do counseling 'to improve good health ..." (FGD H, 2019).

Carry out Reporting of Health

The role of Posyandu cadres in carrying out recording and reporting such as moving the records of the implementation of Posyandu activities from the Card to Health (KMS) book into the register book or cadre's help book as well as registering pregnant women, breastfeeding mothers, and toddlers in Jembayan Dalam Village. Reporting is done when there are incidents of children at risk of malnutrition and children at risk of stunting, so that it can be followed up by the Puskesmas so that they can immediately resolve the problems that exist in the Posyandu working area of Jembayan Dalam Village. Recording and reporting is one of the measurement tools for evaluating the results of Posyandu activities that have been carried out and is also a useful output for the Puskesmas to monitor the development of maternal and child health in Jembayan Dalam Village, with the output data can also help detect early various problems health that occurs in mother and child.

"If there are children who are malnourished, there will be people directly from the puskesmas who come down to handle us. They will report to the midwife for 3 months. They will monitor their misunderstanding" (FGD D, 2019).

Recording and reporting is a very important tool to find out whether the activities carried out in accordance with the provisions and have implemented an activity that can be seen as an indicator of its success. With the recording and reporting activities, the results of the activities can be seen and can be analyzed whether the activity has been successful or not. The results of recording and reporting in the form of detailed information and data useful in the development of an organization⁶.

CONCLUSION

From the results of this study it can be concluded that the application of the 6 aspects of the posyandu cadre's role, including: 1) understanding the cadres' duties in posyandu implementation; 2) understanding health problems at the posyandu target; 3) mobilizing the community; 4) implementing 5 steps of posyandu and development activities; 5) conducting counseling and; 6) carrying out recording and reporting of posyandu that have been implemented well in Posyandu Desa Jembayan Dalam although there are still some cadres who do not understand well the roles they have to play during posyandu.

It is expected that routine Puskesmas conduct training and outreach to improve the capability of posyandu cadres in achieving their tasks and it is expected that the Coomunity Health Center (Puskesmas) of Loa Kulu should always monitor activities and efforts made to utilize Posyandu health in order to create effective coordination between posyandu cadres and health workers. The Coomunity Health Center (Puskesmas) of Loa Kulu and Jembayan Dalam Village and Government needs to provide more adequate facilities for the ongoing process of activities to run well.

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