

Empowerment of Posyandu Cadres and Toddler Mothers in the Supplementary Food Provision Program (PMT) at Posyandu with the Asset-Based Community Development (ABCD) Approach

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ABSTRACT

Child nutrition problems are not only problems regarding the intake provided. Child nutrition problems in the community can occur due to several factors, such as the lack of role of health workers, parental behavior (mothers), clean and healthy living behavior (PHBS) of the family, and risks and natural geographical conditions. Jayasakti Village, Muara Gembong District, is a village located on the coast. This village still has child nutrition problems such as nutritional status not increasing, underweight, and stunting. The Jayasakti Village community also has other factors that can contribute to child nutrition problems, such as difficult access to clean water for drinking and hygiene sanitation, the economic status of the head of the family, who are mostly fishermen, and insecurity of access to food. Efforts to provide additional food (PMT) have been carried out by the health center and the local village government as an effort to eradicate child nutrition problems. In its implementation, of course, various evaluations are needed so that the next PMT program can run better. This community service activity focuses on empowering cadres and parents of toddlers in implementing the PMT program in Jayasakti Village. The approach model used is Asset-Based Community Development (ABCD), where this approach has a flow of activities that are suitable for application in the community service process in Jayasakti Village. The activity process involved 5 posyandu cadres and 22 parents of toddlers, and a series of activities carried out included Pre Test and Post Test, Forum Group Discussion, providing material on PMT from local food ingredients, educational games with the title One Table-One Goal, exploring aspirations, and signing a joint commitment to make PMT a success in the future. Some of the outputs obtained from this community service activity include the target of the activity to find out the potential assets that can be improved in the implementation of PMT, increasing knowledge measured through pre-test and post-test scores, aspirations and hopes of cadres and parents of toddlers regarding the implementation of PMT, and a joint commitment to make PMT a success in the future.

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INTRODUCTION

Jayasakti Village, located in the Muaragembong Sub-district of Bekasi Regency, is a region facing significant nutritional challenges that require focused intervention. According to data from August 2023, there were 216 stunted toddlers in Puskesmas Muaragembong service area, and Jayasakti Village is classified as having nutritional status conditions with criteria for 8 toddlers experiencing nutritional status not increasing, 15 toddlers with underweight nutritional status, 6 toddlers with stunting nutritional status, and 1 pregnant woman with chronic energy deficiency status (Pemkab Bekasi, 2023). This should be a concern given that one of the health indicators assessed in the Sustainable Development Goals (SDGs) in Indonesia is the nutritional status of children under five, especially stunting. With the prevalence of this case in Jayasakti Village, it may be a challenge to achieve the SDGs target of eliminating all forms of malnutrition by 2030 (Bappenas, 2020).

In overcoming this, an intervention program has been implemented, namely Provide Additional Food (PMT) to targets, where this activity is intended to be able to overcome existing malnutrition problems. But on the other hand, the PMT activities need to be carried out correctly according to the recommended consumption rules. For example, PMT for toddlers must be in the form of nutritional supplementation in the form of biscuits with special formulations and fortified with vitamins and minerals given to infants and toddlers aged 6-59 months in the underweight category. For infants and children aged 6-24 months, this supplementary food is used in conjunction with complementary foods, so the preparation and delivery of PMT must be optimized (Kemenkes RI, 2024).

Whether or not the posyandu runs depend on the cadre's level of activity, their position as a driving force in PMT provision can serve as one of the criteria for the effectiveness of PMT provision (Mulat, 2017). During the implementation of posyandu for PMT provision, cadres must understand the health problems in their area and have the passion to improve the quality of life of the community. Through cadres who have the capacity and quality in the implementation of PMT, it is hoped that the implementation of PMT can be successful until it reaches its goal. Because of this, continuous cadre empowerment is needed; with the empowerment of cadres, it is hoped that cadres can become the right educators about balanced nutrition. Enhancing the cadres' ability to process the PMT menu is another goal of cadre empowerment. Without nutrition and health education combined with a change in the target's behavior, PMT activities will not be carried out successfully.

Posyandu Dahlia in Jayasakti Village as a place for cadres to carry out PMT activities is one of the posyandu in Puskesmas Muaragembong working area, precisely in the village with a population coverage of 4,321 people. Despite obstacles including the lack of infrastructure and access to healthcare in Muara Gembong Sub-district, five cadres play a significant role in linking several public health initiatives. Geographical circumstances further exacerbate pre-existing issues, such as the state of the region with the majority of the coastline and the placement of distant communities, particularly those that are far from medical services.

Amidst the limitations, Posyandu cadres still strive to always move closer to the community and continue to strive to become a forum for community empowerment, especially in facing the challenges of existing health problems. Promotive and preventative prevention initiatives have taken center stage in public health initiatives in the age of health transformation brought about by the integrated primary care (ILP) paradigm. Posyandu may be completely employed to inform and support community initiatives to avoid illness through its cadres (Purwanto, 2022).

Through empowered cadres, they will be able to invite the community to be more aware of the potential and risks around them related to their health. For example, in the PMT program, cadres can

provide information about the potential of coastal natural resources that can be used to make quality PMTs from local food ingredients. The community must also be aware that malnutrition, such as stunting, is not only a matter of food intake but is also influenced by how parents (mothers) behave in an effort to implement clean and healthy living behavior (PHBS) (Asni Aprizah, 2021), the risks of coastal geography can also make it difficult to access water for drinking purposes and sanitary hygiene, which can affect children's nutrition (Nisa et al., 2021), and also coastal areas are often categorized as food-insecure areas because the economic status of the head of the family, who works as a fisherman, is certainly very dependent on the season. This can indirectly affect the nutritional intake of their children due to insecure access to food (Salim & Darmawaty, 2016).

METHOD

Location, Time, and Participants

Kegiatan pengabdian masyarakat dilaksanakan di Posyandu Dahlia, Desa Jayasakti, Kecamatan Muaragembong, Kabupaten Bekasi pada Selasa, 14 Januari 2025.

Tools and Materials

The tools used include a laptop, an infocus, and a microphone to provide material. Educational media and tools like leaflets, educational videos, and healthy food menu lists.

Method of Activity Implementation

The method of implementing the community empowerment program implemented at Posyandu Dahlia in Jayasakti Village follows the basic principles of empowerment involving community organization and community development.

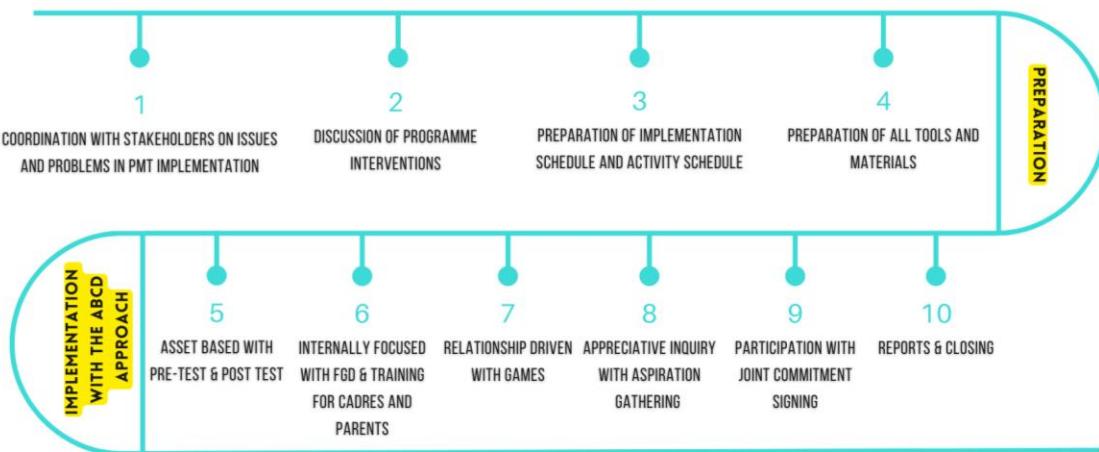


FIGURE 1. Stages of Activity Implementation

The steps involved in this activity start with a coordination meeting with stakeholders to discuss the type of community service program to be conducted, identify the schedule of activities, and investigate the underlying causes of the issues discovered in the PMT program that has been in operation. The asset-based community development (ABCD) approach paradigm, which includes asset-based, internally centered, relationship-driven, appreciative inquiry, and participatory activities, is used to undertake community service projects. At Posyandu Dahlia Jayasakti village, all of these activities will be modified to fit the activity model that can be used for cadres and mothers of toddlers.

RESULTS AND DISCUSSION

This community service activity is a type of health education related to the Supplementary Feeding Program (PMT) using local food ingredients through the Asset Based Community Development (ABCD) approach for Posyandu Cadres and Toddler Mothers at Posyandu Jayasakti Village, Muara Gembong District, Bekasi Regency, West Java. The activity was carried out by students of the Master of Public Health Study Program as field practice for the COCD (Community Organization & Community Development) and PPM (Community Organizing and Development) course assignments.

The Asset-Based Community Development (ABCD) approach is a suitable method of community empowerment as it focuses on utilizing the assets and potential of the community. In the ABCD approach, the community is responsible for the development of any limited potential. This approach does not only focus on vulnerable and marginalized groups but also on all elements of society that have positive power to change for the better (Aisah et al., 2024).

Preparation

In order to discuss the planning of the community service activities, including the location, timetable, infrastructure and facilities, participation, and lodging, the head of Jayasakti Village was consulted. The health issues that the community in Muara Gembong District, which has a population of over 40,000, faces—namely, the lack of adequate health care facilities—were the basis for the activity of identifying issues with toddler nutritional status and maternal behavior in providing additional food other than breast milk in Jayasakti Village. Puskesmas in Muaragembong was only established in 2022; existing obstacles such as lack of medical personnel, lack of stock of medicines, and limited infrastructure hamper the effectiveness of services. In this case, the role of integrated health posts is crucial to help overcome public health efforts because integrated health posts have a contribution in solving existing health problems, especially accelerating basic health services that may be difficult for the community to obtain (Fadly & Rahmayana, 2018).

In an effort to eradicate nutritional problems in the puskesmas work area, posyandu are present as an extension of the government through the Additional Food Provision (PMT) program. Additional food provision is carried out routinely by integrated health post cadres every month by ensuring that PMT materials are sourced from easily obtained local food materials. Every food material must be ensured to be safe and of good quality from the aspect of food safety that is processed according to the nutritional needs of the PMT targets (Irwan, 2019).

Cadres play a crucial part in PMT, and health cadres who volunteer and originate from the local community will carry out its implementation. The cadres' existence must be preserved, and their skills must be continually enhanced (Dewi, 2017). Cadres are a critical component of the best PMT program. The success of PMT depends on its cadres, who are the backbone of Posyandu. Without a thorough understanding of their responsibilities, Posyandu activities would not develop (Tristanti & Khoirunnisa, 2018).

However, cadres encounter obstacles when putting PMT into practice, such as those related to human resources (the cadres' expertise and knowledge), logistics (the availability of food items for PMT preparation), and targeted program socialization. Posyandu Dahlia Jayasakti Village only has five cadres with little expertise; PMT funding facilities are also insufficient, and PMT infrastructure and supporting facilities are not yet accessible.

According to the findings of interviews with a number of moms of infants who are stunted, their kids were fed unhealthy treats from street vendors and stalls. Snacks that are high in preservatives and lack nutritious value include meatballs, candies, packaged snacks, and so on.



FIGURE 2. Discussion of activity preparation with stakeholders

Source: Personal Documentation

Implementation

On Tuesday, January 14, 2025, the Jayasakti village hall hosted the launch of the Education Program for Providing Additional Food (PMT) for Posyandu Cadres and Toddler Mothers, which uses local food and the Asset Based Community Development (ABCD) strategy. Along with Dr. Tati Nuryati, SKM, M.Kes, and Dr. Handayani S.ST. M.Kes (Lecturer of the UHAMKA IKM Masters Study Program), the Jayasakti Village Head opened the activity and welcomed the UHAMKA postgraduate master's students at the Jayasakti Village Office Hall.



FIGURE 3. Opening of community service event in Jayasakti Village

Source: Personal Documentation

After the opening ceremony was over, the students headed to the Dahlia Posyandu as the place for implementing the Education Program for Providing Additional Food (PMT) using local food ingredients through the Asset Based Community Development (ABCD) approach.

Asset Based

Starting with the Pre-Test Implementation Registration, all cadres and parents of toddlers as the target of the activity were confirmed to have gathered at the location. The activity began with the icebreaking by student representatives. The total number of participants present at this activity was 22 people who were cadres and parents of toddlers.



FIGURE 4. Icebreaking with participant

Source: Personal Documentation

Internally Focused

The following task is the main component of the community service that was completed, which is to educate people about the the supplementary feeding programme (PMT), which uses local food and the Asset-Based Community Development (ABCD) strategy : Forum Group Discussion (FGD) as an asset-based mapping and internally focused exploration of the potential for the success of the PMT program, as well as a search for the root causes of the PMT's sub-optimal performance.

Discussions with the target activities revealed a number of issues that frequently arise during the implementation of the PMT program in Muaragembong, such as a lack of attention to detail when choosing the target of PMT distribution, a less varied menu, flavors that children dislike, and a lack of knowledge and instruction on other factors that raise the risk of underweight, stunting, and malnutrition in children.



FIGURE 5. Forum Group Discussion with Participant

Source: Personal Documentation

Internally Focused with Training of Cadres and Parents of Toddlers Receiving PMT as an increase in knowledge to increase self-potential.



FIGURE 6. Training for Cadres and Parents of Toddlers
Source: Personal Documentation

Relationship Driven

Relationship Driven by increasing synergy between cadres and parents of toddlers receiving PMT through a quiz and game approach about PMT with titled “One Table - One Goal”.

The One Table-One Goal Games have two objectives: (1) Mothers learn how to prepare a single, ideal PMT meal for their children using ingredients from local foods, and (2) Mothers learn to avoid giving their children harmful meals. This will be an important foundation. The role of parents is also inseparable from the nutritional status of children. This is an important basis in providing proper care for children. Parents who know how to consume adequate nutrition and measure their children's nutritional status periodically will be able to support their children's growth, development, and health properly (Rizona et al., 2023).

The main lessons to be learned from this game are: Create the perfect PMT food by selecting local, healthful items. The tool used was 40 local food ingredients written on paper, consisting of ingredients with carbohydrates, protein, vegetables, fruit, and unhealthy food ingredients.



FIGURE 7. Increased participant synergy through quizzes and games
Source: Personal Documentation

Appreciative Inquiry

After the quiz and game activities were completed, an evaluation of the results of the education on PMT made from local food through the Asset-Based Community Development (ABCD) approach was carried out by conducting a post-test. The results showed that there was a difference between the respondents' knowledge score before education with a score of 64 and after education with a score of 85. This is consistent with the findings of the Noya et al. 2021 research, which shown that training and counseling as empowerment activities might improve cadres' knowledge and abilities (Noya et al., 2021). The cadre training approach can enhance the cadre's capacity to acquire and comprehend information about stunting by employing a variety of techniques and offering stimulants for many senses in activities aimed at addressing nutritional status, such as stunting (Hanifah & Hartriyanti, 2023).

In addition, aspirational exploration was also carried out by asking questions about the material that had been delivered, where participants who could answer received prizes, and good results were shown with all participants able to answer every question given.



FIGURE 8. Prizes for participants with active participation

Source: Personal Documentation

Participation

All participants in the activity signed a Joint Commitment as a demonstration of their involvement and commitment to the future success of PMT events. In order to implement the various lessons learned from the educational activities conducted as part of this community empowerment activity, and to continue working toward various goals in order to maintain adequate nutrition for children in Jayasakti village, Muaragembong sub-district, this commitment aims to maintain the synergy of all stakeholders, particularly cadres as program drivers and parents of toddlers as program targets.



FIGURE 9. Signing of Joint Commitment

Source: Personal Documentation

Reports and Closing

The activity was closed with a report from the student team leader regarding the results of the activities carried out and then continued with the awarding of award plaques and souvenirs to Posyandu Dahlia Cadres by Uhamka Postgraduate Students as a sign of gratitude and appreciation for good cooperation in the preparation and implementation of community service activities that have been

completed. Furthermore, a written report will also be made and disseminated to all stakeholders involved in this agenda.



FIGURE 10. Group Photo and Awarding Plaques to Cadres

Source: Personal Documentation

CONCLUSION AND RECOMMENDATIONS

The execution of counseling and education aimed at empowering cadres and mothers of toddlers within the supplementary feeding program (PMT) at Posyandu Dahlia Jayasakti Village was effectively conducted, despite encountering several challenges; it adhered to the planned sequence of activities. The impediments were adverse weather conditions that led to the event's delay, the lateness of some stakeholders, and the necessity of awaiting a quorum of intended participation

Support from cadres, active involvement of postgraduate students of the UHAMKA Master of Public Health Study Program, and active participation of the local community made this program run well. The things obtained from this activity are that the Asset-Based Community Development (ABCD) approach can be applied effectively in community empowerment activities through PMT counseling and education programs to cadres and parents of toddlers. This is evidenced by the increase in knowledge of activity participants from the results of pre-test and post-test scores, success in exploring the root causes and analysis of problem-solving in the PMT program, as well as a joint commitment to continue to work together in the success of PMT activities in order to eliminate cases of malnutrition or stunting in Jayasakti Village, Muara Gembong District.

To ensure that PMT implementation operates as best it can in accordance with standards, stakeholders are advised to enhance collaboration and efficient communication amongst each institution. The village government and puskesmas' supervisory role has to be strengthened, particularly to guarantee the cadres' engagement, the appropriateness of the PMT target beneficiaries, and the oversight of other technical issues such food quality, menu changes, and flavor.

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