

Reinforcement of the Cadres' Role of Toddler Integrated Healthcare Center to Prevent Stunting During the Covid-19 Pandemic

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ABSTRACT

Integrated Healthcare Center, commonly known as Posyandu, is a form of a community resource health service system that is managed and organized from, by, for, and with the community. The idea is to develop and grow Posyandu as one of the indicators of community health empowerment. Through the attempt of human resource quality development, in this context was Posyandu cadres, Posyandu activities during the COVID-19 Pandemic had become a challenge for the cadres in carrying out their role. Therefore, health protocol was prioritized to upkeep Health and safety in general. Community service activities carried out by organizing group socialization for Toddler Posyandu cadres had become a strategy to improve cadres' knowledge and skills in managing Posyandu activities. Test results of pretest and post-test analysis ($\rho = 0,017$) show a difference between before and after the mentoring. The Posyandu cadres are expected to be able to implement the knowledge they get during socialization.

Keywords: Cadres, Posyandu, Covid-19

INTRODUCTION

Integrated Healthcare Center, commonly named *Posyandu*, is a form of a community resource health service system that is managed and organized from, by, for, and with the community. This activity has been conducted by the community since early 1970. Family Empowerment & Welfare (PKK) cadres have actively brought weight scale to each house to weigh toddlers. Developing and growing *Posyandu* has become one of the indicators of community health empowerment. Through the attempt to create human resource quality, *Posyandu* cadres are expected to optimize the potential of child development evenly. If the community resource health service system like *Posyandu* can be carried out effectively and efficiently, all targets in need of health service can be reached. (Kemkes 2011)

Posyandu service quality can be improved through service aspects like improvement of facility and infrastructure, human resources, and implementation of quality *Posyandu* activities. Quality *Posyandu* services must be followed by the tasks and functions of *Posyandu* fostering institution as a whole, which are the sustainability of *Posyandu* as a community basic health service unit (Kemenkes RI 2014)

Indonesia has been in a period of COVID-19 pandemic since March 2020. However, health efforts in Integrated Healthcare Center (*Posyandu*) in adaptation to new practice were still carried out to prevent stunting, improve mother and child health, health information socialization and dissemination, and community resource health surveillance to prevent and control COVID-19. *Posyandu* health efforts, as stated in the Decree of the Minister of Health (2020), *Posyandu* within the green zone are allowed to operate on *Posyandu* days based on the consent of the village/ward government. While *Posyandu* in the yellow, orange, and red zone are not allowed to work on *Posyandu* days, activities are held through community mobilization for independent health activities or appointments with health workers and reporting to *Posyandu* cadres, which can be implemented by utilizing information and communication technology. (KemKes 2020)

One of the attempts in preventing stunting, which is expected to accelerate its decreasing has become an implementation strategy of the government through *Posyandu*. Stunting may occur because of nutritional deficiency, especially during the first 1000 days of life. One of the ways to prevent stunting is nutrition fulfillment and health services for pregnant women. The government has sought to do sustainable high-level advocacy and carry out multi-

sector approaches through nutrition-sensitive programs held simultaneously from various programs, namely *Posyandu*. (Kemenkes 2018)

Posyandu is a method to monitor a toddler's health and development. *Posyandu* plays a significant role within society. Although *Posyandu* is identical to babies and toddlers, its activities and benefits are beyond that. *Posyandu* programs are designed for pregnant women, nursing mothers, and couples of childbearing ages. *Posyandu* spread across the region in villages have become the frontliners in preventing stunting.

Five table services of *Posyandu* carried out by PKK cadres were expected to educate and encourage nutrition fulfillment for children. Routine weighing is held to identify the increase of body weight; hence, stunting conditions can be detected early (Kemenkes 2018)

The abovementioned considerations have encouraged the Nursing Department of Faculty of Medicine to conduct community service on the *Posyandu* of toddler cadres to prevent stunting.

METHODS

Community service was held by applying discussion and demonstration methods on all *Posyandu* of toddler cadres in Ambawang Kuala Village, Kubu Raya Regency. There were 20 cadres from 5 *Posyandu* of toddlers. Several phases of this activity were as follows:

1. Coordinating with the Community Health Center of Sungai Ambawang to determine the location of community service activities that suit the target of the student creativity program (PKM).
2. Discussing with the Chief of Ambawang Kuala Village and performing field orientation, especially concerning community health issues in the village.
3. Communicating with the local midwives to decide which implementation strategy helps improve health service for the village community.
4. Participative planning, activity mechanisms, and parties involved in the community service were set in this phase.
5. Implementation. Activity implementation was aimed at the cadres of *Posyandu* for toddlers. Cadres of *Posyandu* for toddlers.

RESULTS

The community service was carried out by all lecturers of the Nursing Department, Faculty of Medicine, Universitas Tanjungpura in Ambawang Kuala Village, Kubu Raya Regency under the recommendations of Community Health Center of Sungai Ambawang as the Village Development Partner of Faculty of Medicine UNTAN. The activities were followed by 20 cadres from 4 *Posyandu* for toddlers, which were *Posyandu* Kasih Ibu, *Posyandu* Nusa Indah, *Posyandu* Mekar Indah, dan *Posyandu* Melati. The activities were carried out by considering safety and health aspects by implementing health protocol.

The activities were initiated with a pretest to identify the knowledge of cadres about *Posyandu*. The questions were about activities conducted while carrying out their role as the cadres of *Posyandu* for toddlers. Before the group coaching, the PKM team distributed a set of anthropometric instruments for each cadre to help with the mentoring. A set of anthropometric instruments consisted of: stepping scale, baby scale, height measurement scale, and infant's head circumference measurement. The next activity was group coaching to train cadres concerning 5 table service in *Posyandu*, using anthropometric instruments to monitor toddlers' growth. During the mentoring assistance, discussions and observational evaluation were also carried out for *Posyandu* cadres after the anthropometric set operational mentoring for toddlers. The next activity after mentoring and discussion activities was the posttest for *Posyandu* cadres. Below are the results of average pretest and posttest scores of cadres from 4 *Posyandu*

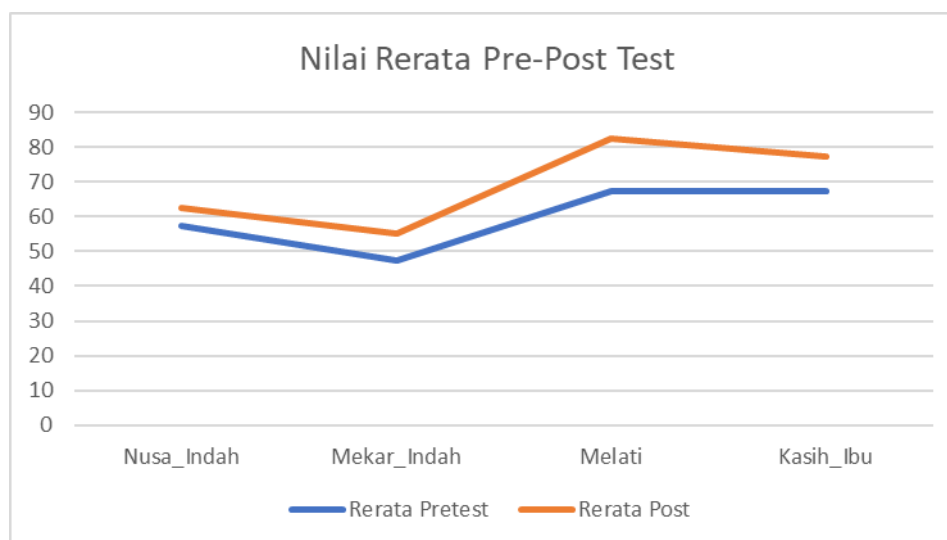


Figure 1. The average score of pretest and posttest of the Toddler *Posyandu* cadres in Ambawang Kuala Village

Based on the displayed figure, the average pretest-posttest score of the *Posyandu* cadres shows differences. The highest average score came from the cadres of *Posyandu* Melati; the difference of the average score is 1.5.

The results of pretest and posttest were followed by analysis test as shown in the following table:

Table 1. Test Results of Pretest and Posttest Difference Analysis

Variable	Mean \pm Std. Deviation	<i>p</i> -Value
Pretest Average	5.35 \pm 1.039	0.017
Posttest average	6.15 \pm 1.039	

DISCUSSION

Reinforcement of toddler *Posyandu* cadres was carried out through mentoring with the correct use of an anthropometric set. The mentoring was held in groups of each *Posyandu*. The activities were initiated with a pretest, held before the mentoring of anthropometric measurement in *Posyandu* service. The mentoring activity was about anthropometric measurement techniques and the explanation of the 5 table system in *Posyandu*.

Mentoring is a way to improve cadre's knowledge, skills, and attitude (Restusari 2019). The supporting statement is stated by Sukiarko (2007), who acknowledges that knowledge improvement of nutritional cadres who participated in mentoring that applied Problem-Based Learning Method (PBL) increases by 63.3%. Mentoring that combines lecture and discussion methods, simulation, and practice can increase students' knowledge in *Posyandu* (Sukiarko 2007).

Posyandu has a major impact in reducing infant mortality, under – five mortality and maternal mortality, so it is necessary to monitor and encourage the level of development of *Posyandu*. Improving the quality and independence of *posyandu* through training and mentoring cadres to manage *posyandu* (Lestari et al. 2019)

Mentoring activities on *Posyandu* cadres have resulted in knowledge and skill improvement in using anthropometric measurement. This is indicated by the results of the pretest and posttest scores of cadres, most of which experienced a score improvement.

CONCLUSION

After the mentoring and discussion with cadres, it can be concluded that the knowledge of Toddler *Posyandu* cadres is improved. This is proved with the improvement of the average

score of each group of *Posyandu* cadres. *Posyandu* cadres were very enthusiastic about this mentoring activity. In addition to mentoring, each *Posyandu* also got an anthropometric set to support the service activities of *Posyandu* for Toddlers.

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