

THE ROLE OF COMMUNITY HEALTH CADRES IN PREVENTIVE AND PROMOTIVE MEASURES FOR MATERNAL AND NEONATAL EMERGENCIES

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Abstract

The maternal and neonatal periods are highly vulnerable stages that require proper monitoring and timely health interventions to prevent serious complications, such as postpartum hemorrhage, infections, or emergency conditions in newborns. Data from the Tegal Regency Health Office in 2024 indicate that preventive and promotive services at posyandu are suboptimal, with postpartum maternal visit coverage at 58%, below the 80% national target. This highlights the importance of the active role of posyandu cadres in providing education, conducting monitoring, and assisting mothers and infants. This study aims to identify the role of posyandu cadres in preventive and promotive efforts related to maternal and neonatal emergencies in Slawi Wetan Village. This descriptive qualitative study involved five cadres and four postpartum mothers. Data from interviews and observations were analyzed thematically. Results show cadres educate on danger signs of pregnancy, conduct home visits, and remind mothers of schedules via communication media. Supporting factors include health center support and community enthusiasm, while obstacles include limited time availability of cadres and uneven awareness among mothers. In conclusion, posyandu cadres play an important role in improving preparedness and promotive maternal and neonatal health. However, cross-sectoral support and capacity building for cadres are still needed to achieve optimal health services.

Keywords: Maternal and Neonatal Emergencies, Posyandu Cadres, Preventive and Promotive Efforts

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1. Introduction

The postpartum period is a crucial period for maternal health, as most postpartum complications occur during this period. National data shows that approximately 60% of maternal deaths occur during the postpartum period, primarily due to hemorrhage, infection, and postpartum hypertension. This situation highlights the need for intensive

maternal health monitoring after delivery to prevent potentially life-threatening complications early. In this context, the role of integrated health post (*Posyandu*) cadres is crucial as they spearhead education, monitoring, and encouraging postpartum mothers to utilize available health services [1].

However, in reality, postpartum mothers' visits to integrated health posts

(Posyandu) in several areas, including Slawi Wetan Village, remain low. Many mothers feel healthy enough after giving birth and are reluctant to undergo follow-up checkups, while others lack information about danger signs during the postpartum period. This low number of visits is an important reason for conducting this research, as it indicates a gap between the need for health monitoring and mothers' behavior in utilizing Posyandu. This situation also emphasizes the need for more effective promotive and preventive strategies from Posyandu cadres [2].

Posyandu, as a Community-Based Health Unit (UKBM), plays a strategic role in postpartum care. Posyandu cadres not only act as drivers of activities but also as educators and monitors of maternal and infant health. Through outreach activities, home visits, and appointment reminders, Posyandu cadres facilitate early detection of postpartum complications, enabling timely medical intervention. This role is crucial because early detection can reduce the risk of death and serious complications for both mother and baby [3]. In addition, integrated health posts (Posyandu) have various priority programs, such as family planning (KB), maternal and child health (KIA), nutrition, immunization, and diarrhea management. In the KIA program, postpartum mothers are one of the main targets, requiring regular monitoring to prevent complications and support the recovery process. Activities at Posyandu, including blood pressure measurements, education on danger signs, and monitoring exclusive breastfeeding, have been proven to have a significant impact on improving maternal health. Posyandu cadres play a crucial role in bridging postpartum mothers' access to health services, which are often difficult to access independently [4].

At the national level, the utilization of integrated health posts (Posyandu) by postpartum mothers remains suboptimal. The 2023 Indonesian Health Profile shows that only about 70%

of postpartum mothers visit health care facilities, failing short of the national target of 80%. Several factors contribute to this low participation, including mothers' lack of awareness about the importance of postpartum checkups, limited time availability, and low family support. This situation underscores the need to strengthen the role of Posyandu cadres in motivating and educating postpartum mothers to encourage active participation in postpartum checkups [5].

The under-optimization of the role of Posyandu (Integrated Health Post) cadres can lead to serious consequences, including delayed detection of postpartum complications such as bleeding, infection and lactation disorders. Data from the Indonesian Ministry of Health (2023) shows that approximately 58% of maternal deaths occur during the postpartum period, the majority of which could be prevented through routine monitoring. This underscores the urgency of Posyandu cadre involvement in supporting postpartum mothers, through education, home visits, and personal support. The active role of cadres is expected to significantly reduce the number of complications and maternal deaths [6]. Posyandu (Integrated Health Posts) also play a crucial role in monitoring the nutrition and health of infants, but their potential to support postpartum maternal health is often underutilized. With a comprehensive approach, Posyandu can help postpartum mothers maintain their postpartum health, accelerate recovery, and support exclusive breastfeeding. Posyandu cadres, as the spearhead of community services, have a significant responsibility to provide education on self-care and infant care, monitor danger signs, and direct mothers to seek immediate healthcare when needed [7].

The low coverage of postpartum mothers' visits to integrated health posts (Posyandu) is influenced not only by lack of awareness but also by social and logistical factors. Maternal participation is affected by age, education, knowledge, family support and economic conditions.

Additionally, the limited number of active cadres and their relatively high workload restrict postpartum mothers' access to Posyandu. Ineffective communication and outreach contribute to misconceptions, with some mothers believing Posyandu is only for toddlers, leading them to underestimate the importance of postpartum services [8].

In Tegal Regency, integrated health posts (Posyandu) are located in almost every village and sub-district, including Slawi Wetan. According to 2024 data from the Tegal Regency Health Office, there are approximately 15 active Posyandus that routinely conduct monthly activities. These Posyandus provide essential services for pregnant women, postpartum mothers, and toddlers. Although the number of Posyandus is adequate, the rate of postpartum mothers visiting remains low, making the role of cadres in encouraging postpartum mothers to attend regularly crucial. Cadres must be able to educate, remind them of scheduled visits, and provide personal support [9].

Based on 2024 data from the Slawi Wetan Community Health Center (Puskesmas), RW 03 has two integrated health posts (Posyandu Melati and Posyandu Mawar) serving pregnant women, postpartum mothers, and toddlers. Among approximately 45 postpartum mothers in the area, only 20 (44%) actively participate in check-ups at the Posyandu. This indicates that utilization of Posyandu services by postpartum mothers remains suboptimal. This study aims to determine how Posyandu cadres play a role in preventive and promotive efforts for maternal and neonatal emergencies, as well as the strategies they use to increase postpartum visits in Slawi Wetan Village. [10, 11].

2. Methods

This research uses a single case study approach to describe the role of Posyandu cadres in preventive and promotive efforts for maternal and neonatal emergencies, particularly in increasing postpartum visits in Slawi

Wetan Village. Informants were selected purposively, including active Posyandu cadres and postpartum mothers who regularly participate in Posyandu activities, because they are considered capable of providing relevant and in-depth information according to the research focus.

Data were collected through in-depth interviews and focus group discussions (FGDs) with five Posyandu cadres and four postpartum mothers. The study was conducted from July to September 2025. All interviews were transcribed verbatim, that is written word for word as the informants said without any changes, then classified based on emerging themes. Data analysis was conducted using content analysis to examine patterns, meanings and experiences of informants related to the role of Posyandu cadres in encouraging postpartum visits. The results of the analysis are presented in a systematic narrative form and supporting tables to facilitate understanding.

3. Results and Discussion

This study involved nine informants, consisting of five Posyandu cadres and four postpartum mothers in Slawi Wetan Village. The cadres had between 2 and 12 years of experience, with primary responsibilities including maternal and infant data collection, maternal and neonatal health monitoring, counseling on danger signs, and implementing routine Posyandu activities. The postpartum mothers interviewed were between 2 weeks and 40 days postpartum, with diverse educational backgrounds, childbirth experiences, and family circumstances. This diversity offers a comprehensive view of the dynamics of Posyandu services and the preventive and promotive efforts aimed at addressing maternal and neonatal complications within the community.

Data quality was maintained through the application of qualitative rigor criteria. Credibility was ensured through data triangulation and member checking; dependability through

documentation and supervisor oversight; transferability by presenting detailed informant contexts and research locations and confirmability through the use of direct quotations and audit trails. Data were analyzed using content analysis to identify key themes regarding the role of Posyandu cadres in preventive and promotive efforts for maternal and neonatal emergencies. These themes were visualized to clarify the relationships between categories and subcategories.

The analysis identified three major themes: (1) motivation and participation of Posyandu cadres, (2) preventive and promotive strategies employed by cadres, and (3) supporting factors and barriers to implementing Posyandu activities. Internal factors that encouraged cadre participation included a sense of social concern, a commitment to preventing maternal and neonatal complications, and an interest in maternal and infant health. One cadre stated, "We want postpartum mothers and their babies to be safe. If we are not active, danger signs such as bleeding or fever can be missed." This statement indicates that cadres are highly aware of the risks of late detection of complications and view their role as the frontline in prevention. Another cadre added, "We treat every mother who comes to Posyandu like a member of our own family. So we don't want anyone to be treated late." This illustrates the emotional approach and sense of personal responsibility that strengthen cadre involvement in service delivery.

External factors influencing cadre motivation include support from community health center staff, collaboration among cadres and community trust. One cadre explained, "The community health center staff always guide us in educating us about postpartum and neonatal danger signs. This gives us confidence and the courage to gently reprimand mothers if there are risks." This means that the support of formal health workers increases cadres' confidence in providing education and early intervention. Another cadre added,

"When the community appreciates our efforts, our enthusiasm increases. We feel our role directly prevents complications and saves lives." This social recognition strengthens the cadres' intrinsic motivation to continue being active.

Integrated Health Post (Posyandu) cadres in Slawi Wetan Village implement preventive strategies such as monitoring maternal blood pressure, examining birth wounds, monitoring infant vital signs, and educating mothers about neonatal danger signs such as high fever, excessive jaundice, or difficulty breastfeeding. One cadre explained, "Every time a mother comes, we check her blood pressure, the condition of her wounds, and the condition of her baby. If there are any risky symptoms, we immediately refer her to the Community Health Center." This demonstrates the systematic early detection and referral process at the Posyandu level. Another cadre added, "We teach mothers to recognize danger signs such as excessive bleeding or a weak baby. This education is important so they can act quickly before complications occur." This education serves to improve mothers' ability to make independent health decisions.

Promotional efforts are carried out through regular counseling, Postpartum Mothers' Classes, and mothers' group meetings that emphasize the importance of self-care, exclusive breastfeeding, neonatal immunization, and environmental hygiene. One cadre explained, "In the postpartum mothers' class, we teach proper breastfeeding techniques, maintain personal hygiene, and recognize danger signs in mothers and babies." These activities are not only informative but also practical through live demonstrations. Another cadre added, "We also encourage mothers to share their experiences so they become more confident and understand the importance of regular check-ups." This participatory approach increases mothers' understanding and confidence.

Cadres also conduct home visits as an additional preventive strategy for mothers who cannot attend the Integrated

Health Post (Posyandu). One cadre explained, "Sometimes mothers are too tired or busy taking care of their babies, so we go to them. We check the physical condition of the mother and baby, provide education, and encourage them to come to the next Posyandu." These home visits ensure continuity of health monitoring despite access barriers. Another cadre added, "Home visits are important to prevent delays in detecting postpartum and neonatal complications." This strategy thus expands the reach of health services.

In addition, cadres actively build community participation by holding community service activities, planting family medicinal plants, and conducting environmental cleanliness campaigns. One cadre said, "We invite postpartum mothers to participate in environmental activities. While working, they learn about maternal and infant health. This education is more easily absorbed because it is done through hands-on practice." This method demonstrates a contextual, activity-based educational approach. Another cadre added, "This activity also strengthens the relationship between cadres and mothers, making health education more effective." Strong social relationships increase the effectiveness of health communication.

Regular training is part of a promotional strategy to improve the skills of cadres. They receive materials on postpartum maternal monitoring, newborn care, breastfeeding counseling, and danger sign education. One cadre said, "The training helps us identify danger signs that require immediate referral, from maternal bleeding to high fever in infants." This demonstrates the cadres' increased capacity for early detection and referral decision-making. Another cadre added, "We share our knowledge with other cadres at each training session to optimize all Posyandu services." Knowledge transfer occurs among cadres, collectively strengthening service quality.

Recording maternal and infant monitoring results is also an important

preventive strategy. Cadres use a handbook to record blood pressure, maternal complaints, wound conditions, and the baby's status. One cadre explained, "With neat recording, we can follow up on high-risk cases and coordinate quickly with the midwife." This recording serves as the basis for clinical decision-making and service coordination. Another cadre added, "This record helps us monitor the progress of the mother and baby's condition so that no danger signs are missed." Good documentation improves the accuracy of longitudinal monitoring.

The cadres also use simple incentives such as door prizes to increase participation of postpartum mothers in Posyandu activities. One cadre said, "Small prizes make mothers more diligent in coming to the health center, participating in counseling sessions, and checking their babies. Their enthusiasm increases, making preventive and promotive efforts more effective." This incentive has proven to be an effective motivational strategy in increasing attendance. Another cadre added, "In addition to door prizes, emotional support and mothers' group meetings also make them more willing to attend regularly." The emotional approach complements the material incentive strategy.

In addition to monitoring and education, Posyandu cadres also play an active role in identifying the risk of early complications in mothers and babies. They check for signs of bleeding, high blood pressure, fever, and difficulty breastfeeding in babies. One cadre explained, "If the mother looks pale or has high blood pressure, we immediately note it and coordinate with the midwife. We don't want any complications that are treated too late." This demonstrates a rapid response system to danger signs. Another cadre added, "Sometimes newborns have excessive jaundice or refuse to breastfeed, so we immediately educate the mother and refer her if necessary." This action demonstrates the cadres' ability to recognize high-risk neonatal conditions.

The promotional role is also evident through psychosocial support for postpartum mothers. Cadres recognize that a mother's mental state after giving birth significantly impacts the health of both mother and baby. One cadre stated, "We often talk to postpartum mothers, ask about their feelings, and encourage them to avoid stress. A calm mother can more easily care for her baby and prevent complications." This approach demonstrates the cadres' attention to mental health. Another cadre added, "Sometimes mothers are afraid to breastfeed or worry about their babies getting sick. We patiently provide explanations and direct examples, which helps them feel more confident." This support helps increase mothers' self-efficacy in caring for their babies.

Overall, this study demonstrates that Posyandu cadres play a strategic role in the prevention and promotion of maternal and neonatal emergencies. Through routine monitoring, education on danger signs, home visits, mothers' groups, and strengthening community participation, cadres can prevent maternal and infant complications, support exclusive breastfeeding, and raise public awareness of the importance of regular health check-ups.

Social engagement is a crucial foundation for Posyandu cadres in preventing and managing maternal and neonatal emergencies. Posyandu cadres not only serve as community mobilizers but also as supervisors and companions for postpartum mothers and newborns. Through their role, cadres can provide education, motivation, and encouragement to encourage mothers and families to be more aware of postpartum and newborn health [12].

The community's low level education often hampers understanding of the importance of postpartum health monitoring. Additionally, certain cultural values discourage some mothers from attending routine checkups at the integrated health post (Posyandu). However some community members possess strong awareness of maternal and infant

health, actively serving as Posyandu cadres and acting as role models for maintaining maternal and neonatal health within their communities. [13].

Posyandu, as a community-based health service, reflects real community empowerment, where residents participate in managing and optimizing health services according to their needs. The dedication of Posyandu cadres in selflessly assisting postpartum mothers and babies is a key strength in maintaining the program's sustainability. Cadre coordinators, typically village midwives, also play a strategic role in strengthening coordination, building social capital, and supporting preventive and promotive maternal and neonatal services.

Community harmony and solidarity play a crucial role in facilitating communication and cooperation between residents, enabling Posyandu (Integrated Health Post) activities to run effectively. Posyandu serves as a strategic platform for communities to learn, support each other, and receive integrated health services, particularly regarding monitoring the risk of postpartum complications and newborn health.

The commitment of Posyandu cadres is evident in their enthusiasm for participating in training, outreach, and mentoring sessions, including for new cadres. For those who haven't yet had the opportunity to participate in training, the Posyandu guidebook serves as a reference for implementing preventive and promotive activities for postpartum mothers and babies. Ongoing training and mentoring have proven effective in strengthening cadres' capacity to detect maternal and neonatal complications early [14]. Through hands-on training and field practice, Posyandu cadres improve their skills in providing education, early detection, and monitoring the health of postpartum mothers and infants. The training not only improves technical skills but also fosters a sense of responsibility for continuously monitoring community health, so that potential complications can be prevented before they become emergencies [15].

Direct education through training and field practice helps Posyandu cadres play a role in preventing maternal and neonatal emergencies [14]. Active participation of cadres and the use of external resources through training improves the quality of services at Posyandu. This ensures cadres are able to recognize danger signs in postpartum mothers and babies and take immediate preventive measures [16]. Independent health service for postpartum mothers and babies depend on the effective use of community resources to provide comprehensive care and support. Integrated Service Post (Posyandu) cadres act as motivators, counselors, and service providers. As motivators, cadres encourage postpartum mothers to attend Posyandu regularly, attend postpartum classes, and utilize preventive services to prevent complications. As counselors, cadres provide education on clean and healthy living behaviors, nutrition, breastfeeding, and environmental cleanliness. As service providers, cadres monitor blood pressure, document postpartum danger signs and offer nutritional or breastfeeding counselling when necessary [17].

Community empowerment is achieved when Posyandu cadres show strong commitment and integrity in understanding the needs of postpartum mothers and infants, ensuring that the services provided have a meaningful impact on maternal and neonatal health. With good coordination, Posyandu cadres are able to establish Posyandu as a center for preventive and promotive maternal and infant health at the local level [18].

The success of Posyandu cadres in preventive and promotive efforts is inseparable from social support, ongoing training, and family involvement. Cadres actively educate families, monitor postpartum mothers, and provide support to prevent life-threatening complications. The enthusiasm, dedication, and professionalism of Posyandu cadres are key to maintaining maternal and infant health and reducing the risk of maternal

and neonatal emergencies in the community.

4. Conclusion

Based on the research results, it can be concluded that *Posyandu* cadres play a crucial role in preventive and promotive efforts to address maternal and neonatal emergencies. Cadres function as motivators, counselors, and health service providers who directly assist postpartum mothers and newborns, including monitoring danger signs, self-care education, and family support. Their role also reflects community empowerment, as cadres are able to identify needs, barriers, and potential within their communities to improve maternal and infant health.

To increase the effectiveness of the role of cadres, targeted planning with a community empowerment strategy is needed. This strategy should involve various parties, such as community leaders, traditional institutions, government agencies, and community organizations, to increase the participation of postpartum mothers in the Integrated Health Post (*Posyandu*) program. With effective collaboration, social support, and capacity building of cadres, it is hoped that the number of complications and the risk of emergencies for postpartum mothers and infants can be reduced, while simultaneously improving maternal and neonatal health in Slawi Wetan Village.

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6. References

- [1]. Y. Suryanti, L. Restianda, S. Arzella, P. D. Studi Iii Kebidanan, And S. Mitra Adiguna Palembang, "Penyuluhan Konseling Mitos Dan

- Fakta Masa Nifas,” *Communnity Development Journal*, Vol. 2, No. 2, Pp. 418–423, 2021.
- [2]. Z. Al Faiqah, S. Suhartatik, M. Gizi, And F. Kesehatan Masyarakat, “Journal Of Health, Education And Literacy (J-Healt) Peran Kader Posyandu Dalam Pemantauan Status Gizi Balita: Literature Review Kontak : Muhammad Irwan,” Vol. 5, 2022, Doi: 10.31605/J.
- [3]. N. Nurbaya, Z. Irwan, And N. Najdah, “Pelatihan Keterampilan Konseling Pada Kader Posyandu Di Daerah Lokus Stunting,” *Jmm (Jurnal Masyarakat Mandiri)*, Vol. 6, No. 1, P. 248, Feb. 2022, Doi: 10.31764/Jmm.V6i1.6335.
- [4]. I. Indrayani, N. A. Sholeha, B. Oktavia, And I. S. Amalia, “Hubungan Antara Kinerja Kader Dengan Tingkat Kepuasan Pelayanan Posyandu Di Desa Susukan Kecamatan Cipicung Kabupaten Kuningan Tahun 2022,” *Jurnal Ilmu Kesehatan Bhakti Husada: Health Sciences Journal*, Vol. 13, No. 02, Pp. 220–229, Dec. 2022, Doi: 10.34305/Jikbh.V13i02.592.
- [5]. M. M. Huru, J. L. Mangi, A. Boimau, And K. Mamoh, “Optimalisasi Pemanfaatan Buku KIA Oleh Orang Tua Dan Kader Posyandu Dalam Melakukan Stimulasi Deteksi Dan Intervensi Dini Tumbuh Kembang Pada Balita,” *Jmm (Jurnal Masyarakat Mandiri)*, Vol. 6, No. 5, Oct. 2022, Doi: 10.31764/Jmm.V6i5.10445.
- [6]. N. Nurbaya, Z. Irwan, And N. Najdah, “Pelatihan Keterampilan Konseling Pada Kader Posyandu Di Daerah Lokus Stunting,” *Jmm (Jurnal Masyarakat Mandiri)*, Vol. 6, No. 1, P. 248, Feb. 2022, Doi: 10.31764/Jmm.V6i1.6335.
- [7]. S. Dwi Yolanda, S. Rahmadona, F. Roziqin, R. Adlia Syakurah, P. Studi Ilmu Kesehatan Masyarakat, And F. Kesehatan Masyarakat, “Kinerja Dan Aktivitas Kader Posyandu Ikan Gurame Di Desa Harimau Tandang Tahun 2022,” *Keluwih: Jurnal Kesehatan Dan Kedokteran*, Vol. 4, No. 1, Pp. 31–39, 2022, Doi: 10.24123/Kesdok.V4i1.5374.
- [8]. N. Danur Jayanti, S. Indah Mayasari, P. Studi Diii Kebidanan, S. Widyagama Husada, And J. Timur, “Pemantauan Pertumbuhan Dengan Pijat Bayi Oleh Kader Posyandu Balita Dalam Periode Emas 1000 Hpk (Hari Pertama Kehidupan),” Vol. 6, No. 2, 2022.
- [9]. P. N. Cahyawati, A. Naya, And K. Permatananda, “Pendampingan Kader Posyandu Desa Kerta Dalam Penerapan Gizi Seimbang Dan Pemantauan Tumbuh Kembang Anak,” *Warmadewa Minesterium Medical Journal*, Vol. 1, No. 3, 2022.
- [10]. Desiana, Apriza, And Erlinawati, “Faktor-Faktor Yang Mempengaruhi Kinerja Kader Dalam Kegiatan Posyandu Balita Di Desa Seremban Jaya Kecamatan Rimba Melintang,” 2022.
- [11]. A. Winandar, R. Muhammad, M. Darimi, And G. Gunawan, “Analisis Perilaku Kader Kesehatan Dalam Pelaksanaan Posyandu Untuk Memantau Pertumbuhan Balita Di Wilayah Kerja Puskesmas Jeumpa Kabupaten Bireuen Tahun 2022,” *Pubhealth Jurnal Kesehatan Masyarakat*, Vol. 1, No. 3, Pp. 170–177, Dec. 2022, Doi: 10.56211/Pubhealth.V1i3.165.
- [12]. N. N. Renityas, L. T. Sari, And I. Noviasari, “Pemberdayaan Kader Posyandu Dalam Stimulasi Deteksi Dan Intervensi Dini Tumbuh Kembang Pada Anak Usia 0-5 Tahun,” *Indonesian Journal Of Professional Nursing*, Vol. 3, No. 2, P. 134, Dec. 2022, Doi: 10.30587/Ijpn.V3i2.4920.
- [13]. N. A. Maaruf And I. Triadi, “Analysis Of The Government’s Role In Implementing Presidential Regulation (Perpres) Number 72

- Of 2021 On Accelerating Stunting Reduction In Efforts To Maintain National Resilience Analisis Peran Pemerintah Dalam Menjalankan (Perpres) Nomor 72 Tahun 2021 Tentang Percepatan Penurunan Stunting Dalam Upaya Menjaga Ketahanan Nasional Article History,” 2023.
- [14]. A. Bayuana *Et Al.*, “Komplikasi Pada Kehamilan, Persalinan, Nifas Dan Bayi Baru Lahir: Literature Review,” *Jurnal Wacana Kesehatan*, Vol. 8, No. 1, P. 26, Jul. 2023, Doi: 10.52822/Jwk.V8i1.517.
- [15]. U. Baroroh *Et Al.*, “Sikap Dan Perilaku Javanese Tradisional Healing Masa Nifas Pada Ibu Modern Antar Generasi,” 2023.
- [16]. N. Rahmanindar, R. S. Prastiwi, M. Q. Program, S. Diii, K. Politeknik, And H. Bersama, “Pemetaan Upaya Peningkatan Produksi Asi Ibu Nifas Berbasis Asuhan Komplementer : Studi Deskriptif Mapping Efforts To Increase Breast Milk Production For Postpartum Mothers Based On Complementary Care : Descriptive Study,” 2024.
- [17] L. Haryani, R. Widiyanti, And M. Kadarsih, “Efektifitas Pelatihan Tentang Metode Asuhan Pasca Keguguran Terhadap Pengetahuan Dan Sikap Kader Posyandu Untuk Meningkatkan Kualitas Pembinaan Program Kampung Keluarga Berencana Di Bandung Barat,” *Jomis (Journal Of Midwifery Science)*, Vol. 5, No. 2, Pp. 130–136, Jul. 2021, Doi: 10.36341/Jomis.V5i2.1563.
- [18]. L. Nurva And C. Maharani, “Analisis Pelaksanaan Kebijakan Penanggulangan Stunting: Studi Kasus Di Kabupaten Brebes Analysis Of Stunting Management Policy Implementation: A Case Study In Brebes Regency,” 2023.