

THE ROLE OF CADRES IN PROMOTING THE PARTICIPATION OF MOTHERS' TODDLERS IN THE INTEGRATED HEALTH CENTER OF KAMPUNG BARU VILLAGE, PASAR REBO SUBDISTRICT, EAST JAKARTA

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Abstract

The Integrated Health Center is a community-based health initiative that aims to empower and facilitate the community's access to essential health services to reduce maternal mortality rate (MMR) and infant/child mortality rate. However, there is a need to increase the number of visits from mothers with toddlers to the Integrated Health Center, aiming for a 41% participation rate. This study seeks to investigate the role of cadres in promoting the involvement of mothers' toddlers in the Integrated Health Center program and to identify the factors that impact their participation rate. Conducted using a qualitative approach with a case study design and purposive sampling focusing on cadres, the data was gathered through in-depth interviews and focus group discussions (FGD), utilizing source and method triangulation for comprehensive insight. The findings indicate that cadres in the community serve as motivators, educators, and health service providers. They can recognize needs, address barriers, and facilitate the provision of health services. In addition to the cadres at the Integrated Health Posts (Posyandu), factors such as education level, economic status, and accessibility to health facilities play a role in the participation of mothers with toddlers in the Posyandu program. This research underscores the essential role of Posyandu cadres in encouraging the engagement of mothers with toddlers.

Keywords: Role of Cadres, Participation of Mothers with Toddlers, Posyandu

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1. Introduction

Health development initiatives are vital for promoting well-being among individuals and enhancing overall societal health outcomes. The Integrated health center, a key component of Community Resource Health Efforts, is a community-led endeavor focused on empowering local populations and ensuring access to essential healthcare services [1]. Its primary objective is to expedite the decrease in maternal and

infant mortality rates through community health advancement [2].

The Integrated Health Center implements pivotal programs such as family planning, maternal and child health, nutrition, immunization, and diarrhea treatment. This facility plays a crucial role in reducing child mortality rates by proactively identifying community health and nutrition issues. Adopting a comprehensive approach, the integrated health center addresses under-

five malnutrition, stunting, and other prevalent health conditions impacting maternal and child well-being [3].

Despite its significance, maternal utilization of integrated health centers in Indonesia remains suboptimal, particularly in the lower-than-targeted coverage rate for infant weight assessments at integrated health centers. The Indonesia Basic Health Research 2010 data reveals that only half of toddlers require routine weight monitoring at integrated health facilities. Additionally, research indicates a decline in visits to these centers for weight monitoring as children grow older, highlighting potential gaps in pediatric healthcare provision [4].

The underutilization of cadres in utilizing integrated health centers for monitoring young children's growth and development poses notable risks, including delayed detection of health issues in early childhood. The prevalent health status of children under five in Indonesia falls short of expectations, notably evidenced by the significant under-five mortality rate attributed primarily to malnutrition [5]. Data underscores that approximately 53% of child deaths in this age group result from poor nutrition. This underscores the critical role of cadres in raising community awareness about the importance of utilizing integrated health centers for monitoring child health and growth and facilitating timely interventions. Enhancing the involvement of cadres and public awareness means reducing under-five mortality rates due to malnutrition and other health challenges can be achieved [6].

The integrated health center plays a crucial role in addressing societal nutritional challenges, with substantial potential to significantly impact the health status of children under five in Indonesia. Optimal utilization of these centers can yield remarkable outcomes, highlighting the importance of active cadre involvement in ensuring program

success and enhancing the nutritional well-being of young children [7].

Inadequate coverage of integrated health center services often stems from a need for more public awareness regarding access to these facilities. Various factors influence maternal participation in integrated health center activities for young children, including maternal age, education level, knowledge, family size, income, and attitudes. Furthermore, the need for more healthcare personnel also contributes to the low service coverage of integrated health centers. Therefore, concerted efforts are essential to enhance public awareness of the significance of integrated health centers and bolster workforce availability to promote program participation [8].

As of 2019, Indonesia boasted approximately 330,000 integrated health centers spread across its 33 provinces, with DKI Jakarta alone hosting 4,148 centers distributed evenly across various regions. For instance, in the Pasar Rebo subdistrict of East Jakarta, multiple integrated health centers are situated in different villages, underscoring the widespread availability of such facilities at the community level [9]. In East Jakarta, particularly in the Pasar Rebo subdistrict, multiple integrated health centers are distributed among five subdistricts. Gedong Village has 15 centers, Cijantung Village has 26 centers, Baru Village has 16 centers, Kalisari Village has 19 centers, and Pekayon Village has 22 centers [10].

In the context of RW 02, Kampung Baru Village, Pasar Rebo Subdistrict, East Jakarta, which comprises nine RTs (neighborhood units), two integrated health centers cater to the infant population. Despite 241 infants residing in the area, only 41% of them are visited by mothers at the Posyandu, with a mere 100 infants actively participating in growth monitoring activities. This highlights the ongoing need to enhance efforts for infant weight monitoring and growth surveillance within RW 02, emphasizing

the importance of cadre support in encouraging mother and infant engagement with the Integrated Health Center Program [11].

The current research investigates the cadre's role in promoting mother participation in the Integrated Health Center Program in Kampung Baru Village, Pasar Rebo Subdistrict, East Jakarta while identifying influential factors shaping mother-infant participation under age five.

2. Method

This study adopts a single case study methodology to elucidate the pivotal role of cadres in Kampung Baru Village in facilitating the engagement of mothers with young children in health-related activities. Data for this research were gathered via in-depth interviews and focus group discussions (FGD). The study sample comprised Posyandu cadres from Baru Village, selected purposively. A total of five respondents and five informants participated in in-depth interviews, while eight FGD participant informants were included in the cadre group and six in the community group availing integrated health center services. The data collection period spanned from November 2023 to January 2024.

Subsequent to data collection, all information was transcribed and analyzed utilizing opencode software. Coded data were organized categorically to cluster similar themes. The axial coding process was employed to discern specific patterns across categories. The outcomes of data analysis were then conveyed through narratives, tables, and figures, offering a comprehensive presentation of the research findings.

3. Results and Discussion

Internal and external factors play a role in influencing cadre participation in Kawal Village. Internally, cadres are driven by a strong sense of social responsibility towards aiding others in the healthcare sector, alongside a thirst for knowledge on health matters,

particularly concerning children and expectant mothers, and insights into infant growth and development to enhance family well-being.

One cadre emphasized, *"...to serve as a cadre, we must possess a robust social spirit, particularly towards environmental and child care, to promote health within our community"*. Conversely, another cadre shared, *"I derive satisfaction from sharing knowledge and harbor a deep curiosity. Despite not actively pursuing higher education, I am keen on expanding my informal knowledge to broaden my perspectives. Involvement with the Integrated Health Center has facilitated my learning journey, progressing from initial confusion to enhanced comprehension"*

External influence on cadre engagement encompasses supportive government initiatives targeting cultivating healthy children and providing easily accessible family healthcare services.

"We are dedicated to ensuring optimal child health and strive to meet government objectives. Notably, our locality exhibits a high infant population, compelling us to exert maximum effort". (Cadre 5)

Cadres deliver comprehensive health services encompassing registration, infant and toddler weighing, data management, health education, vitamin A supplementation, immunization, and guidance on maintaining clean and healthy lifestyles and environmental sanitation practices. Through focus group discussions with cadres, it is evident that the operations of the integrated health center, employing a 5-desk system, are effectively operational, covering registration, weighing, recording, counseling, immunization, and healthcare provision.

However, a need for heightened public awareness regarding routine infant weighing remains. Some posit that conducting infant weighing in alternate locations with accessible scales, such as shops or stores, could prove more

advantageous. Moreover, there exists a necessity for more straightforward elucidation on immunization procedures at the integrated health center, as certain parents harbor apprehensions regarding potential post-immunization side effects like fever.

"Some individuals harbor skepticism towards the integrated health center, believing infant weighing can be undertaken elsewhere. They exhibit a preference for shop scales despite their comparative lack of accuracy. Transforming their viewpoint poses a challenge". (Cadre 2)

"A considerable number of parents exhibit reluctance in taking their children to the integrated health center due to fears surrounding injections and potential post-immunization fevers. Cadres should actively engage by visiting households to demonstrate understanding, especially in cases where the mother is occupied with work and unable to accompany her child." (Health center worker)

Cadres foster community engagement by involving residents in collaborative initiatives to cultivate family medicinal plants and uphold environmental cleanliness.

"We frequently organize 'gotong royong' (community work) sessions to tend to gardens. Amidst dry spells, we rally residents for collective environmental clean-up efforts and conduct workshops on optimizing garden spaces, promoting medicinal plants and flower cultivation." (Cadre 4)

Recognizing the significance of enhancing cadres' proficiencies in dispensing healthcare services to the populace, emphasis is placed on their continuous skill development. Through training sessions, cadres acquire expertise, which they subsequently share with their peers who did not partake in training, fostering a peer education framework.

"I have undergone training covering topics like infant socialization, child development, nutritional supplementation, breastfeeding

significance, supplementary food provision (PMT), accurate weighing techniques, growth chart (KMS) completion, and height measurement." (Cadre FGD)

Equipped with a guidebook delineating the provision of health-related services to the community, cadres effectively implement the "5 Tables" approach, comprising registration procedures, weighing activities, growth chart completion, immunization status, child development monitoring, and dissemination of information to mothers of young children.

"We can easily follow the service process as guidance is provided for registration, weighing, completing the growth chart, and monitoring the child's growth and development through books. Any deficiencies are promptly communicated to the mother." (Cadre 3)

One effective way to encourage community engagement at integrated health centers is by offering door prizes to parents of young children actively participating in center activities. These prizes, funded by contributions from cadres, are given out every three months and can include items like clothes and children's equipment. The goal is to promote the center and motivate ongoing involvement.

"We regularly motivate the community with prizes every three months, which include clothes, children's equipment, and more, to promote the center. In case of limited funds, we consult with other cadres." (Cadre 4)

"We received training on making ORS solution, bathroom cleaning techniques, and child care." (Community member)

"When parents seldom bring their children to the centers, we gradually extend invitations, addressing concerns like vaccination fears to ensure timely care for all children." (FGD cadre)

Cadres also conduct biannual "Toddler Classes" to educate mothers on toddler care, health, and children's development [12]

"We conduct biannual infant classes for mothers to learn about child development, emphasizing hand hygiene, shoe usage during play, and food handling practices." (Cadre 2)

Community empowerment fosters a social spirit that inspires, anticipates, activates, stimulates, mobilizes, and motivates action. Cadres play a crucial role in utilizing internal and external motivation, resources, and skills to engage the community effectively in the health sector with a strong social spirit [13].

In community education, low education levels often hinder access to health information due to adherence to traditional/cultural values conflicting with health behaviors. Despite this, some community members recognize the importance of family health and can evolve into proactive cadres [13].

Community-based health services are key to community empowerment, enabling communities to run health centers tailored to their needs. Cadres' unpaid dedication showcases their genuine commitment to enhancing community health. Cadre coordinators, usually village midwives, effectively coordinate cadre activities, fostering strong social capital through teamwork within social groups [14].

Societal harmony is pivotal in facilitating inter-community communication and achieving shared health objectives. Integrated health centers, serving as communication platforms and public health facilities, hold strategic importance in human resource development and pursuing a harmonious and prosperous family, as outlined in Effendy's research.

Ensuring cadre training and socialization activities, especially for newcomers on a rotating basis, demonstrates commitment. Those yet to undergo training can refer to the integrated health center guidebook for guidance, reinforcing their role in community empowerment.

Imparting direct health service education helps Posyandu cadres fulfill their community empowerment role. Training acts as a mechanism for leveraging external resources, with training levels and organizational involvement impacting cadre continuity. The training aims to enhance understanding and skills for Posyandu tasks.

Community-led health services leverage community resources and potentials, assigning key roles to health motivators, educators, and service providers. Health motivators mobilize the community for integrated health center engagement, cultivate family medicine gardens (TOGA), raise self-help funds, and enhance infant nutrition. Health educators convey Clean and Healthy Living Behaviors (PHBS), sanitation education, and environmental hygiene. On the other hand, health service providers register community members, conduct infant and toddler weigh-ins, monitor infant development, offer child growth and development counseling, administer vitamin A supplements, and provide immunizations. Community empowerment thrives when cadres display commitment and integrity in addressing community needs [15].

4. Conclusion

Based on research findings, cadres serve as vital health motivators, educators, and service providers at the integrated health center. Community empowerment, therefore, hinges on fostering motivation to enhance family and community health and the capacity to identify healthcare needs and barriers while leveraging available resources. To address low community involvement effectively, targeted planning incorporating empowerment strategies is essential. To boost mothers' participation with under-five children in the integrated health center program at Kampung Baru Village, Pasar Rebo Subdistrict, East Jakarta, collaboration among stakeholders such as community leaders,

traditional institutions, government, and community organizations is imperative.

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