

The Participation of Cadres with the compliance of toddlers visits to the Integrated Healthcare Center

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ABSTRACT

Peer Health development can function optimally if it is supported by community empowerment and as a form of community empowerment is the presence of Integrated Healthcare Center cadres and mothers of toddlers who bring their toddlers to Integrated Healthcare Center. The purpose of this study was to analyze the relationship between the participation of Integrated Healthcare Center cadres with the compliance of toddlers' visits to the Integrated Healthcare Center at the Sejahtera Integrated Healthcare Center. This study uses a correlational analytic design with a cross sectional approach. The sample in this study were 32 respondents with a total sample of 35 respondents. sampling in this study using simple random sampling technique. Collecting data using questionnaires and MCH handbooks. Data analysis to see the relationship between the independent variable and the dependent variable using the chi square statistical test with a significant level of $= 0.05$. The results showed that from 32 respondents, most of the roles of Integrated Healthcare Center cadres were good, as many as 18 respondents (56.2%), and most of the respondents at the Sejahtera Integrated Healthcare Center, obediently visited the Integrated Healthcare Center, as many as 22 respondents (68.8%). The results of data analysis using Chi Square statistical test obtained P value < 0.05 ($0.000 < 0.05$) which means that there is a relationship between Integrated Healthcare Center cadre participation and compliance with toddler visits in Integrated Healthcare Center Sejahtera. The Integrated Healthcare Center activities can take place and there is an increase in visits by mothers of children under five to the Integrated Healthcare Center every month.

I. Introduction

Implementation of Integrated Healthcare Center is expected to improve the health status of the community. The establishment of more than 250,000 Integrated Healthcare Center at the village level in the last 25 years which provide special health care for mothers and children and the implementation of basic health programs including family planning, nutrition and immunization have also contributed to the reduction in the number of infant and child deaths. However, the spread of Integrated Healthcare Center in quantity is not necessarily accompanied by good quality of service, here the role of cadres and community participation is needed so that the results of visits to Integrated Healthcare Center are in accordance with the targets set by the ministry of health (Razak, 2017).

The coverage of visits by toddlers to Integrated Healthcare Center in Indonesia is 85% of the target set at 95%. (RI Ministry of Health, 2020). Coverage of toddler visits in Central Kalimantan Province is 78%, this coverage is lower than the planned target of 85% (Central Kalimantan Provincial Health Office, 2020).

Coverage of toddler visits to Integrated Healthcare Center in East Kotawaringin Regency is 59.7%, this coverage is lower than the specified target of 85% (East Kotawaringin Health Office, 2020), while the coverage of visits to Integrated Healthcare Center Sejahtera Cempaka Mulia Barat Village is 50% still far from the specified target of 80%. (Integrated Healthcare Center Sejahtera Desa Cempaka Mulia Barat, 2021).

Based on the results of interviews conducted by researchers with 10 mothers with toddlers, it



was found that 6 mothers (60%) who had toddlers were disobedient in visiting Integrated Healthcare Center, this was due to the lack of knowledge of mothers and the lack of participation of cadres in providing comprehensive information about the importance of visits by toddlers to Integrated Healthcare Center such as the absence of cadres who inform the Integrated Healthcare Center schedule to mothers of toddlers so that they do not come at the time of implementation of the Integrated Healthcare Center every month. In addition, mothers of children under five think that going to Integrated Healthcare Center is a waste of time, mothers of children under five feel that Integrated Healthcare Center is only a place to get immunizations and after that there is no need to come to bring their children to the Integrated Healthcare Center, while 4 mothers (40%) are obedient in making visits to Integrated Healthcare Center. This is because mothers of toddlers think that a visit to the Integrated Healthcare Center has many benefits in addition to child immunization, the mother can also find out the growth and development of the child and the mother can also get additional insight or information from counseling activities at the Integrated Healthcare Center.

To increase compliance with visits by mothers under five to Integrated Healthcare Center can be done by improving service facilities at Integrated Healthcare Center, besides that the participation of cadres and health workers can be more active in providing information about Integrated Healthcare Center activities, telling what can be obtained from these activities, and providing counseling to mothers about the benefits and impacts of bringing toddlers to Integrated Healthcare Center.

Based on the description above, the researcher is interested in conducting research on the analysis of the role of Integrated Healthcare Center cadres with compliance with toddler visits to Integrated Healthcare Center at Integrated Healthcare Center Sejahtera.

II. Methods

In this study using a correlational analytic research design with a cross-sectional approach. The population is all mothers under five in Integrated Healthcare Center Sejahtera, totaling 35 respondents with a sample of 32 respondents using simple random sampling. Data obtained from questionnaires and processed by chi-square test.

III. Results and Discussion

Table 1. Characteristics of respondents in research.

Age	Frequency	Percentage (%)
<20 years	3	9,3
20-30 years	24	75,0
>30 years	5	15,7
Amount	32	100
Education	Frequency	Percentage (%)
Elementary school	15	46,9
Junior high school	10	31,2
Senior high school	5	15,7
University	2	6,2
Amount	32	100
Work	Frequency	Percentage (%)
Not Working (house wife)	25	78,2
Private	5	15,6
Self-employed	0	0
civil servant	2	6,2
Amount	32	100
Parity	Frequency	Percentage (%)
Primipara	12	37,5
Multipara	16	50,0
Great many	4	12,5
Amount	32	100

Table 2. Characteristic of variable

No	The Role of Integrated Healthcare Center Cadre	Frequency	Percentage (%)
1	Good	18	56,2
2	Enough	5	15,7
3	Less	9	28,1
	Amount	32	100

No	Compliance to Visits Integrated Healthcare Center	Frequency	Percentage (%)
1	Comply	22	68,8
2	Disobedient	10	31,2
	Amount	32	100

Data analysis

Table 3. Chi-Square Test Results

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	22.277 ^a	2	.000
Likelihood Ratio	26.740	2	.000
Linear-by-Linear Association	21.544	1	.000
N of Valid Cases	32		

a. 3 cells (50,0%) have expected count less than 5. The minimum expected count is 1,56.

Based on data collection, then performed data analysis using *chi-square test* Based on the chi square test, a value of p value (0.000) was obtained. Seeing that there is no expected count value that is less than 5 so that it fulfills the chi square test requirements of $0.000 < 0.05$, there is a relationship. It can be concluded that there is a relationship between the participation of Integrated Healthcare Center cadres and compliance with toddler visits to Integrated Healthcare Center at Integrated Healthcare Center Sejahtera.

The Role of Integrated Healthcare Center Cadre

Based on the table above, it was found that of the 32 respondents, most of the respondents had a good role for Integrated Healthcare Center cadres, namely 18 respondents (56.2%) the role of Integrated Healthcare Center cadres was sufficient by 5 respondents (15.7%), and the role of Integrated Healthcare Center cadres was lacking by 9 respondents (28.1%)

Integrated Healthcare Center cadres are volunteers recruited from, by and for the community, who are tasked with helping the Integrated Healthcare Center services run smoothly. (Ismawati, 2016). At the time of Integrated Healthcare Center implementation, the minimum number of cadres is 5 people. While the performance of cadres is the achievement of individuals or a person in carrying out their duties and responsibilities as cadres in Integrated Healthcare Center management. (RI Ministry of Health, 2016)

The results showed that the role of Integrated Healthcare Center cadres was good, this was because in this study, the guidance provided by cadres was active and evenly supported by the educational factors of Integrated Healthcare Center cadres, namely high school and the cadres' work as housewives so they had a lot of free time. According to the higher education level, they will have better insight and skills so that they will be more able to provide guidance to the community, and the more free time the better the work carried out by a Integrated Healthcare Center cadre. Through the guidance received by the cadres, the cadres have a lot of experience and are known by visitors, so they lack communication when making home visits.

Therefore, in improving guidance it is still necessary to have support from various sectors to hold cadre training which can improve the ability of cadres to provide guidance to the community. Previous research related to coaching concluded that the characteristics, coaching of cadres and behavior of cadres have a significant influence on the role of Integrated Healthcare Center cadres.

Compliance with Toddler Visits to Integrated Healthcare Center

Based on table 4.3 above, it was found that of the 32 respondents, most of the respondents obeyed visiting the Integrated Healthcare Center, namely 22 respondents (68.8%) and those who did

not comply with visiting the Integrated Healthcare Center were 10 respondents (31.2%).

Compliance with Integrated Healthcare Center visits is compliance with visits made by mothers to weigh their babies or toddlers. It is best for toddlers to visit Integrated Healthcare Center regularly every month or 12 times a year. For this visit under five is given a limit of 8 times per year. Integrated Healthcare Center whose frequency of weighing or visiting their toddlers is less than 8 times per year is still considered vulnerable. If the frequency of weighing has been 8 or more times within one year it is considered good enough, but the frequency of weighing depends on the type of Integrated Healthcare Center (Ministry of Health RI, 2016).

The results showed that most of the respondents obeyed the visit to the Integrated Healthcare Center, this was due to several factors such as the participation of good cadres, besides that the compliance with the visit of mothers under five to the Integrated Healthcare Center was influenced by the factor of the mother's free time so that she had a lot of time to visit the Integrated Healthcare Center. To increase compliance with visits by mothers under five to Integrated Healthcare Center, it is hoped that mothers under five can provide time to actively participate in coming to Integrated Healthcare Center on the opening day of the Integrated Healthcare Center to receive guidance from cadres so that mothers under five receive information about their toddler's health. In addition, cadres and the community can jointly determine the Integrated Healthcare Center activity schedule and choose the right Integrated Healthcare Center location. The more disobedient mothers of toddlers come to Integrated Healthcare Center every month, the less information they get about their toddler's health which causes the child's health status to not be monitored so that the child's health status is not optimal.

IV. Conclusion

The role of cadres in Integrated Healthcare Center activities is mostly in the good category and visits by toddlers to Integrated Healthcare Center. Most are obedient to come.

There is a significant relationship ($p\ 0.000 < 0005$) between the role of cadres and compliance with Integrated Healthcare Center visits.

V. References

- Dinkes Provinsi Kalimantan Tengah, (2020). *Profil Kesehatan Provinsi Kalimantan Tengah*
- Hidayat, A. (2016). *Metode Penelitian Kebidanan dan Teknik Analisa Data*, Jakarta : Salemba Medika.
- Ika Trisanti, Fania Nurul Khoirunnisa, (2018). *Kinerja Kader Kesehatan Dalam Pelaksanaan Posyandu Di Kabupaten Kudus*. Jurnal Ilmu Keperawatan dan Kebidanan Vol.9 No.2 (2018) 192-199.
- Ismawati,. (2016). *Posyandu dan Desa Siaga*. Nuha Medika. Yogyakarta.
- Kemenkes RI. (2020). *Panduan Pelayanan Kesehatan Balita Di Masa Pandemi Covid-19*. Jakarta
- Kementerian Kesehatan RI. (2016). *Ayo Ke Posyandu Setiap Bulan*. Jakarta
- Kementerian Kesehatan RI. (2016). *Pedoman Umum Pengelolaan Posyandu*. Jakarta.
- Khotimatul Husna, (2018). *Faktor Yang Memengaruhi Kunjungan Ibu Balita Dalam Pemanfaatan Posyandu Di Desa Sei Rotan Kecamatan Percut Sei Tuanwilayah Kerja Puskesmas Bandar Khalipa*. Skripsi : Universitas Sumatera Utara Medan.
- Niven, (2016). *Psikologi Pendidikan dan Kesehatan*, Jakarta : EGC
- Notoadmojo, Soekidjo. (2016). *Promosi Kesehatan dan Ilmu Perilaku*, Rineka Cipta. Jakarta
- Notoatmodjo, Soekidjo, (2016). *Metode Penelitian Kesehatan*. Jakarta : Rineka Cipta.
- Nursalam, (2016). *Konsep Dan Penerapan Metodologi Penelitian Ilmu Keperawatan*. Jakarta: Salemba.
- Rahayu, Budi. (2015). *Buku Pegangan Kader Posyandu*. Surabaya : Dinkes Propinsi Jawa Timur.

- Rinawati. (2016). *Faktor-faktor yang Berhubungan dengan Rendahnya Kunjungan ke Posyandu di Wilayah Kerja Puskesmas Sukakarya*. Sabang. Sekolah Tinggi Ilmu Kesehatan U'budiyah
- Sugiyono, (2016). *Metode Penelitian Pendidikan Pendekatan Kuantitatif, Kualitatif, R&D*. Bandung.
- Sulistiyaningsih. (2016). *Metodologi Penelitian Kebidanan*. Yogyakarta: STIKes 'Aisyiyah Yogyakarta.