

## Posyandu Cadre Perceptions of Video-Based Learning Media in Improving Posyandu Cadre Skills at the Mamboro Public Health Center in Palu City

Ketut Suarayasa<sup>\*1</sup>, Miranti<sup>2</sup>, Eliyane Bangkele<sup>3</sup>, Sumarni<sup>4</sup>, Diah Mutiarasari<sup>5</sup>

<sup>1,2,3,4,5</sup>Department of Public Health and Community Medicine Faculty of Medicine, Tadulako University, Palu

**ABSTRACT:** Posyandu in the era of primary care transformation provides services for the entire life cycle, including pregnant women, childbirth and postpartum women, infants, toddlers, preschoolers, school-age and adolescents, productive age groups, and the elderly. Therefore, it is necessary to improve the skills of Posyandu cadres as mobilizers, counselors, and recorders to be able to provide services for the entire life cycle through 25 basic cadre skills, including: 1) Posyandu Management Skills; 2) Infant and Toddler Skills; 3) Skills for Pregnant and Breastfeeding Women; 4) Skills for School-Age and Adolescents; and 5) Skills for the Productive Age Group and the Elderly.

The purpose of this study was to determine the perceptions of Posyandu (Integrated Service Post) cadres regarding video-based learning media in improving the skills of Posyandu cadres at the Mamboro Community Health Center. This study used qualitative methods through in-depth interviews and focus group discussions (FGDs) with Posyandu cadres at the Mamboro Community Health Center to obtain information on their perceptions regarding the use of learning videos in improving Posyandu cadre skills.

The results showed that Posyandu cadres accepted the Posyandu cadre skills learning videos as a method to improve their knowledge and skills, provided they watched them in their entirety, consistently, and practiced them at the Posyandu.

Conclusion: The cadres assessed that the video learning model could be used to improve Posyandu cadre understanding and skills, provided they diligently watched the videos and directly practiced them at the Posyandu. The challenge lay in having an Android device with sufficient capacity to store the learning videos.

**KEYWORDS :** perception, posyandu cadres, learning videos, posyandu cadre skills

### INTRODUCTION

In Indonesia, primary health care services are provided by Community Health Centers (Puskesmas), which currently number 10,374 Puskesmas (Community Health Centers) and 27,768 Sub-Community Health Centers (Puskesmas Pembantu), along with other primary health care facilities and various Community-Based Health Efforts (UKBM), such as Poskesdes (42,051) and Posyandu (301,068). Posyandu, as a strategic partner of the government, plays a crucial role in public health development efforts<sup>1</sup>. Decree of the Minister of Health of the Republic of Indonesia Number 2015 of 2023 states that the implementation of fulfilling community needs for health services at Posyandu must be carried out in an integrated, sustainable, and comprehensive manner<sup>2</sup>.

The Ministry of Health is currently implementing Primary Health Care Transformation, namely by strengthening basic health care services (Primary Health Care) by encouraging increased promotive and preventive efforts, supported by innovation and the use of technology, and implemented using a strategic approach of integrating primary health care services, community empowerment, and multisectoral collaboration<sup>3</sup>. In its implementation, the transformation of primary health services focuses on a lifecycle approach, strengthening promotive and preventive efforts and bringing health services closer through the Integrated Health Service Post (Posyandu) network down to the hamlet/neighborhood/community unit (RT/RW) level<sup>4</sup>.

Posyandu in the era of primary service transformation provides services for the entire lifecycle, from pregnant women, those in labor and postpartum, to infants, toddlers, preschoolers, school-age and adolescents, the productive age, and the elderly<sup>5</sup>. Therefore, it is necessary to improve the skills of Posyandu cadres as mobilizers, counselors, and recorders to be able to provide services for the entire lifecycle through 25 basic cadre skills, including: 1) Posyandu Management Skills, with 4 types of skills; 2) Infant and Toddler Skills, with 7 types of skills; 3) Pregnant and Breastfeeding Skills, with 6 types of skills; 4) School-Age and Adolescent Skills, with 3 types of skills; and 5) Productive Age and Elderly Skills, with 5 types of skills<sup>6</sup>.

Palu City, which consists of 14 Community Health Centers (Puskesmas), has 230 Integrated Health Posts (Posyandu) spread across 8 sub-districts and 46 villages. Based on the Posyandu stratification model before the primary care transformation era, there were 12 Pratama Posyandus, 89 Madya Posyandus, 106 Purnama Posyandus, and 23 Mandiri Posyandus. Of the 230 Posyandus, most have not yet provided training for the 25 basic skills of Posyandu cadres<sup>7</sup>.

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The Mamboro Community Health Center, which has 14 Posyandus, has not yet conducted any training for the 25 basic skills of Posyandu cadres. Based on this, researchers have developed video-based learning media for basic skills for Posyandu cadres to be used in Posyandu cadre training. This study aims to determine Posyandu cadre perceptions of the use of these learning videos in improving Posyandu cadre skills. If Posyandu cadre perceptions of these visual media are positive, the videos will be further used in Posyandu cadre training programs in Palu City.

The purpose of this study was to determine the perceptions of Posyandu cadres regarding video-based learning media in improving the skills of Posyandu cadres at the Mamboro Community Health Center.

## RESEARCH METHODS

This study uses qualitative methods aimed at gaining a deep understanding of the meaning, experiences, and perspectives of individuals or groups regarding an object, event, or phenomenon<sup>8</sup>. In this study, data were obtained through observation, in-depth interviews, and focus group discussions (FGDs) to provide a comprehensive overview of the context and factors influencing perceptions.

The research locations were three Integrated Health Service Posts (Posyandu) representing the sub-districts of Mamboro, West Mamboro, and Taipa. The key informants were Posyandu cadres at the three research locations, selected using a purposive sampling technique with the following inclusion criteria: 1) Posyandu cadre tenure of more than 5 (five) years; 2) previous Posyandu cadre training; and 3) motivation to learn.

In this study, the researchers sought to understand the perceptions of informants from different backgrounds, such as age, education level, type of employment, and location of the Posyandu informants. These variables were then used to determine the most influential factors shaping the cadres' perceptions. As explained by Sugiyono (2020), qualitative research analysis was conducted before entering the field and after completion of the fieldwork, so that the analysis was not only completed when the fieldwork was completed<sup>9</sup>. Furthermore, the results of the crosstab processing were then analyzed by connecting the results of interviews with informants, learning videos, and integrated health post activities.

## RESEARCH RESULTS

The researchers conducted direct field observations and in-depth interviews with Posyandu (Integrated Health Post) cadres to determine their understanding and mastery of skills in assisting pregnant and breastfeeding mothers, which are part of the 25 basic skills for Posyandu cadres according to the Integrated Primary Service (ILP) Posyandu guidelines. The following are the characteristics of the key informants :

**Table 1. Informant Characteristics**

| Number | Name Initials | Age | Occupation        | Highest Education | Posyandu of Origin | Year as a Cadre |
|--------|---------------|-----|-------------------|-------------------|--------------------|-----------------|
| 1      | Ny. SD        | 39  | Private           | SMA               | Beringin           | 7 years         |
| 2      | Ny. ZR        | 50  | Household         | SMA               | Beringin           | 15 years        |
| 3      | Ny. SA        | 34  | Household         | D3                | Seruni             | 9 years         |
| 4      | Ny. KA        | 59  | Household Teacher | SMA               | Seruni             | 20 years        |
| 5      | Ny. IW        | 32  | Household         | S1                | Teratai            | 6 years         |
| 6      | Ny. NH        | 44  | Private           | SMP               | Teratai            | 12 years        |

Understanding these skills is crucial, given the active role of cadres in providing education and basic services to mothers and children in the community. Afterward, the researchers provided each Posyandu cadre who served as informants with a video to teach them about Posyandu cadre skills as a form of stimulus. They then provided the cadres with the opportunity to reflect on and interpret the material (video learning). These stages generally included sensory stimulation, information organization, and interpretation, influenced by past experiences (cadre training), motivation as a cadre, and individual personality.

### a. Perceptions of the 25 Cadre Skills

All informants considered the 25 Posyandu cadre skills that cadres need to know to be both burdensome and challenging. According to informants, these 25 skills were particularly challenging for older cadres who had served at the Posyandu for a long time. Their ability to understand and comprehend the 25 skills was not as easy as for younger cadres.

*"...I've heard from Mr. Alan (the person in charge of the integrated health post), that it's a bit burdensome for older cadres like me..." (Mrs. KA, 59 years old).*

*"There are a lot of skills to learn... It's a bit difficult for me. But younger cadres might pick it up more quickly..." (Mrs. ZR, 50 years old)*

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*"... It's a bit difficult, but if you study, you can definitely do it..." (Mrs. IW, 32 years old)*

Although learning, understanding, and practicing the 25 cadre skills is not easy, all informants were optimistic that they could do it as long as they were consistent.

*"...if you're willing to learn, you can definitely do it..." (Mrs. SA, 34 years old)*

*"If it has to be done, of course I'll try. The important thing is to learn and practice often. It was difficult when I first became a cadre, but now I'm used to it." (Mrs. ZR, 50 years old)*

*"...If I were older, it would definitely be difficult to learn... But if I keep trying, I'll definitely be able to do it..." (Mrs. KA, 59 years old)*

*"I don't really know yet, but after hearing the explanation, it seems difficult. I have to read it again and practice it straight away..." (Mrs. SD, 39 years old)*

### b. Perceptions of the Video Learning Model

Informants were given time to watch a video learning about cadre skills as a form of stimulus. They were then given the opportunity to reflect, provide meaning, and interpret the learning material (video). Afterward, the researcher conducted in-depth interviews with the informants. All informants agreed that the video model was very helpful in facilitating cadre understanding, provided it was frequently opened and put into practice.

*"It's easier, because it's like watching a movie. As long as I open it frequently..." (Mrs. SA, 34 years old)*

*"It's suitable for me, as an older person. It's easier to understand. I just follow the instructions in the video. The important thing is to keep watching..." (Mrs. KA, 59 years old)*

*"I think it's very good. The important thing is to watch it frequently and practice..." (Mrs. NH, 44 years old)*

### c. Perceptions of Improving Cadre Skills

According to informants, if the video were used as a model in cadre training, it would improve the understanding and skills of Posyandu cadres. Cadres simply had to follow along and practice the interviews in the video. Moreover, the models in the videos are their own friends, fellow cadres.

*"When we were training cadres before, we didn't use videos like that. We just practiced. Now, using videos would definitely be easier..." (Mrs. KA, 59 years old).*

*"I think it could be tried during cadre training. As long as we were given the opportunity to practice. It's like role-playing. We become the actors in the video." (Mrs. IW, 32 years old)*

### d. Perceptions of Obstacles

According to the integrated health post (Posyandu) cadres, the only obstacle to this learning video model is the availability of devices or Android phones to watch them. This is because not all cadres (especially the elderly) have Android phones. "The only problem is my phone. I only have this one..." (showing her Nokia phone)." (Mrs. ZR, 50 years old)

*"...Yes, that's right... The only problem is the availability of phones... Maybe they can give me one... (laughing)" (Mrs. NH, 44 years old)*

Several cadres mentioned that their problem is their phone's memory. They can't save the videos on their phones, so they can't watch them whenever they want without a Wi-Fi signal.

*"I have an Android phone...but it has limited memory. I definitely can't save these videos" (Mrs. SA, 34 years old)*

*"Yes, that's right... The problem is storage. If they could save them, they could watch them anytime..." (Mrs. Ag, 43 years old)*

## DISCUSSION

Perception is a cognitive process that allows individuals to recognize, organize, and interpret information from their environment. It involves how we see, hear, taste, smell, and feel the world around us<sup>10</sup>. Perception forms the basis of our understanding of reality and plays a crucial role in shaping our responses and actions toward the environment. Perception is the brain's ability to interpret stimuli or the process of interpreting stimuli that enter the human senses. Human perception has different perspectives on sensing. Some perceive something as good or positive, while others perceive it as negative, which will influence human actions that are apparent or real<sup>11</sup>.

The results of the study showed that all informants agreed that the cadre learning video was very effective for training cadres, making it easier for them to understand and practice the 25 skills of Posyandu cadres. The process of forming cadre perceptions in this study is as follows: 1) the stimulus provision stage, in the form of a Posyandu cadre skills learning video; 2) the physiological stage, when the stimulus received by the senses is transmitted by the sensory nerves to the brain; 3) the psychological stage, when processes occur in the brain as the center of consciousness, so that individuals become aware of what is seen, heard, or touched; 4) the perceptual stage, when individuals become aware of what is seen, heard, or touched, namely stimuli received through the senses.

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At this final stage, informants responded positively to the learning video as a model/instrument for improving the skills of Posyandu cadres.

Several factors influence perception, including<sup>12</sup>: 1) Stimulus, whether physical stimuli or information received by our senses. In this study, the learning videos provided to informants went through the stages of analysis, design, development, implementation, and evaluation (ADDIE)<sup>13</sup>. Validation of the learning videos was carried out by experts in the fields of media and content; 2) Previous experiences have a significant impact on how we perceive new things. Past experiences form a mental framework used to compare and interpret new information. Therefore, the inclusion criteria for informants in this study were cadres who had received training so they could compare with the video learning model, and those who had served as cadres for more than 5 (five) years, thus gaining experience and comparisons. 3) Context, in this case the situational context in which information is received also influences perception.

The way we perceive something can differ depending on the surrounding environment. 4) Motivation and goals, where people tend to perceive information relevant to their goals more intensely than irrelevant information<sup>14</sup>. In this study, information in video format was relevant to the cadres' needs. 5) Personality, which can influence how a person perceives themselves and their environment. Education and employment influence the formation of a person's personality and ability to view themselves and their environment.

Results of in-depth interviews and focus group discussions (FGDs) with several informants indicated that the video learning model for cadre skills received a very positive response. Cadres found the video engaging, challenging, and easy to understand, as it presented a realistic simulation of Posyandu activities in visual and audio form that was easy to follow. This provides a more concrete learning experience than counseling or one-way learning methods and helps understand the flow of skills visually and auditorily, facilitating learning and retention.

This is consistent with and evidenced by previous research by (Ikhsan, F., et al., 2023) which evaluated cadre competencies using the "Five Steps of Posyandu" method. They found that cadres experienced increased knowledge after participating in an educational competition with a service post simulation (registration, weighing, recording, counseling, and examination)<sup>15</sup>. This is also supported by findings from (WHO, 2018b) and (Sugiarto et al., 2018) that visual simulation media can increase the effectiveness of practical skills learning<sup>16</sup>.

## CONCLUSION

Cadres assessed that the Posyandu cadre skills training video model can be used to improve their understanding and skills. Cadres should consistently access the videos and practice them directly at the Posyandu. A challenge lies in having a mobile phone capable of storing the videos.

## SUGGESTION

Posyandu cadres should be monitored to ensure they continue learning and improving their skills based on the videos shown in the training videos. Cadres are also required to practice these skills during their services at the Posyandu.

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