

THE EFFECTIVENESS OF SURVEILLANCE TRAINING ON IMPROVING KADER SKILLS

Abu Kasim¹, Arfah Husna²

^{1,2}Program Study of Public Health, Faculty of Public Health, Universitas Teuku Umar, Meulaboh
E-mail: ¹kasimjunadi@gmail.com, ²arfahhusna@utu.ac.id

Abstract

Stunting is a chronic malnutrition problem caused by inadequate nutritional intake for a long time due to feeding that is not in accordance with nutritional needs. Aceh is the third highest prevalence of stunting in children under five in Indonesia, which is 37.3%. Compared to the national average, only 30.8%. The prevalence of stunting in Aceh is much higher than the provinces of Papua, Maluku and other regional provinces in Indonesia. The purpose of this study was to determine the understanding of cadres in carrying out the tasks carried out as Integrated Health Center cadres in dealing with stunting problems in Kaway XVI sub-district. The research method is a quasi-experimental method. The data were collected using a cross-sectional design method, with pretest and posttest questionnaires on a total population of 18 Integrated Health Center cadres and 18 samples of Integrated Health Center cadres observations, with purposive technique and then tested using the dependent t test. The understanding of Integrated Health Center cadres increased from the initial understanding of the average value from 58.61 to 67.50. And the obtained p value of 0.004 means that there is a relationship between providing education and increasing knowledge of Integrated Health Center cadres. The conclusion of the intervention is that it is able to increase the knowledge of Integrated Health Center cadres especially West Aceh, especially Kaway XVI. Suggestions for Integrated Health Center cadres that are necessary to do a full-down so that understanding is increased in dealing with stunting rates in Kaway XVI.

Keywords: *Cadre, Training, Integrated Health Center, Surveillance, Stunting.*

1. INTRODUCTION

Short Toddler or called stunting is where the nutritional status based on the index of body length or height does not match where in anthropometric standards, the assessment of the nutritional status of children, the results of these measurements are in the threshold (Z-Score) <-2 SD to -3 SD (short/stunted) and <-3 SD (very short/severely stunted). Stunting is a chronic malnutrition problem caused by inadequate nutritional intake for a long time due to feeding that is not in accordance with nutritional needs. Stunting can occur from the first 1000 days of life (FDB) children can cause growth disorders that are difficult to fix when they are adults, such as cognitive which can affect learning performance in school (Ministry of Health of the Republic of Indonesia, 2016).

Nutritional problems are problems that exist in every country, both poor countries, developing countries and developed countries. The problem of malnutrition often gets attention in various developing countries including underweight, stunting, wasting and micronutrient deficiency (Maulina, 2021). Nutritional status is a very important health indicator, where the age of toddlers is a group that is very vulnerable to malnutrition problems in toddlers, especially stunting where the condition is failure to thrive in toddlers who experience chronic nutritional deficiencies characterized by weight and height that are not appropriate for age (below average).

This was conveyed by the Minister of Health on 12 November 2019, coinciding with the 55th National Health Day (Kompas.com, 12 November 2019). Data on the prevalence of stunting in children under five collected by the World Health Organization (WHO) released in 2018 states

that Indonesia is the third country with the highest prevalence in the South-East Asian Region after Timor Leste (50.5%) and India (38.4%). which is 36.4% (Ministry of Health Data and Information Center, 2018). The stunting prevalence rate in Indonesia is still above 20%, meaning that Indonesia has not yet reached the WHO target of below 20%.

Aceh is the third highest prevalence of stunting in children under five in Indonesia, which is 37.3%. Compared to the national average, only 30.8%. The prevalence of stunting in Aceh is much higher than the provinces of Papua, Maluku and other regional provinces in Indonesia. Monitoring of nutritional status from 2014 to 2017 shows almost the same number, namely 35.0% in 2014, 31.5% in 2015, 26.4% in 2016 and the last 35.7% in 2017 (Source, Riskesdas 2018).

Toddlers are the main assets that determine the development of a nation. Healthy toddlers will improve the quality of human resources who are healthy, accomplished, and productive, while toddlers who experience health problems will not only reduce productivity in the future but will also become a burden on the state. Toddler age as a stage of child development that is susceptible to various diseases, including chronic diseases caused by lack of nutrient intake. (Kusbiantoro, 2015).

Integrated Health Center cadres are community members who are involved by the Public Health Center to manage the Integrated Health Center voluntarily, they are the main pillar and the front line of defense in improving the health status of the community because they are the ones who best understand the characteristics of the community in their area. (Ramadan et al., 2021). So it is necessary to increase the knowledge and skills of Integrated Health Center cadres in providing services to the community so as to prevent the high rate of stunting.

Based on the background explanation in the description described above, the formulation of the problem in this study is to see how the influence of the role of cadres, family support and motivating mothers on maternal behavior in preventing stunting in toddlers. Through the training, it is hoped that the Integrated Health Center cadres who attend the training can become facilitators and dynamists of various programs and activities carried out, and can improve the quality of service to the community in their respective Integrated Health Center.

2. IMPLEMENTATION METHOD

The approach method used to solve the problem is by providing a series of educational activities or training in understanding Integrated Health Center cadres on stunting, this type of research uses a quasi-experimental method, namely an experimental research design carried out in conditions that do not allow controlling or manipulating all relevant variables (Danim, 2013). So the researchers wanted to know the increase in knowledge and skills of Integrated Health Center cadres in anthropometric measurements of infants and toddlers. The aim is that researchers can obtain in-depth information about the Effectiveness of Surveillance Training on Cadre Skills.

The place for the implementation of educational outreach to cadres was in the Kaway XVI sub-district office hall with 18 Integrated Health Center cadres being given counseling and training for a day. Before the education was carried out, the cadres first filled out a knowledge pretest questionnaire which was collected with an instrument about knowledge consisting of 17 multiple choice questions and 3 essays that had been provided. All of them are questions related to nutritional problems in children and how to measure body length, height, weight, head circumference and chest circumference in infants and toddlers. 18 is the population and also the sample, namely total sampling with purposive non-random sampling technique.

After filling out the pretest questionnaires and then collecting them, further education regarding the anthropometric measurements of stunting and the roles or tasks of Integrated Health Center cadres at each table, namely firstly registering which includes pregnant women, toddlers, postpartum mothers, breastfeeding mothers, and other targets. The second is weighing and measuring toddlers. Third, record weighing and measurements on toddlers and others. Fourth provides counseling and services on cases of nutrition for toddlers, pregnant women, and breastfeeding mothers. The five health services are family planning and immunization.

3. RESULTS AND DISCUSSION

3.1 Results

Tabel 1 The results of the bivariate analysis of the t-test dependent on the training of posyandu cadres

	Mean	N	Std. Deviation	P. Value
Pretest	58,61	18	15,321	
Posttest	67,50	18	17,761	0,004

3.2 Discussion

Kaway XVI sub-district is the sub-district with the third largest population after Meureubo. Most of the residents are still local natives, making the area a target for service. Due to the high population, the higher the public health indicators, Kaway XVI District consists of 44 villages, the selection of four villages as places of service, namely the villages of Tanjung Bungong, Puuk, Pungkie and Keudeh Tanjung. The distance of the village from the city center is ± 23 km.

Based on the table above, it can be seen the increase in knowledge of Integrated Health Center cadres before providing education by filling out pretest questionnaires and after being educated posttest. From the analysis of the variables above, it can be seen that before being educated and filling out the pretest questionnaire the level of knowledge of cadres was still lacking in understanding stunting and the role or duties of being a Integrated Health Center cadres. And after providing education with lecture and discussion methods which were quite effective in delivering material to Integrated Health Center cadres, within ± 30 minutes of providing education after that the Integrated Health Center cadres filled out the posttest questionnaire with the same instrument.

Where we can immediately see from the table above, the understanding of Integrated Health Center cadres increased from the initial understanding of the average value from 58.61 to 67.50. The results of the p value of 0.004 means that there is a relationship between giving intervention and increasing knowledge of Integrated Health Center cadres, thus increasing knowledge of Integrated Health Center cadres in intervention because Integrated Health Center cadres are very enthusiastic in participating in training effectiveness education surveillance on improving the skills of Integrated Health Center cadres. Several studies have shown a significant relationship between education level and the incidence of stunting. (Aini, Elsa Nur., Nugraheni, Sri Achadi., Pradigdo, 2018).

This same understanding and concern can help cadres in assessing and giving opinions about stunting so that perceptions or attitudes of cadres can change. The interprofessional work process must involve health experts (village midwives) with areas of expertise who can work together

seamlessly, Integrated Health Center cadres must be firm and willing to cooperate, cadres must provide good service and uniqueness is generated from the combination of views and expertise provided society. (Leathard, n.d., 2018).

This empowerment program seeks to create Integrated Health Center cadres who are knowledgeable and highly aware, revitalize Integrated Health Center cadres and services to reduce stunting prevalence in children under five in Kaway XVI District. Four village Integrated Health Center cadres were chosen as empowerment subjects because good child growth in the first 1000 days of life is a good provision to encourage child growth and prevent stunting. The empowerment of Integrated Health Center cadres was developed based on the facts on the ground, the lack of stakeholder involvement and the lack of resources owned by the Kaway XVI Community Health Center.

Cadre is an internal community in Kaway XVI District so that cadres have a deeper understanding related to the condition of mothers and toddlers in Kaway XVI District and the process is expected to deliver communication, information and educate mothers of toddlers in the right way and on target. The importance and empowerment of Integrated Health Center cadres can be a good solution for handling stunting, it is hoped that active cadres will form mothers of toddlers who are active and sensitive to health needs, especially reducing stunting rates in Kaway XVI.

4. CONCLUSION

Education is able to increase the knowledge of Integrated Health Center cadres. This research needs to be done by educating Integrated Health Center cadres in order to increase their understanding of Integrated Health Center cadres in dealing with stunting rates in Aceh, especially West Aceh, especially Kaway XVI. Suggestions for Integrated Health Center cadres are that it is necessary to do a full-down so that understanding is increased in dealing with stunting rates in Kaway XVI.

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