



## Overview of Factors Affecting the Implementation of Integrated Healthcare Center (*Posyandu*)

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### ABSTRACT

**Background:** One of the health facilities provided by the government is integrated health center in the village or *Pos Pelayanan Terpadu* or *Posyandu*. The impact of *posyandu* that does not run smoothly will result in a decline in the quality of public health. The purpose of this study is to provide an overview of the factors that influence the implementation of *posyandu* in Kaliboto Lor Village, Jatiroto District, in 2020.

**Method:** The research was carried out with descriptive observation and also qualitative design. The sampling technique used is snowball sampling with a total sample of 6 people. The research was conducted from October to November 2021.

**Result:** The research found that the implementation of *posyandu* in Kaliboto Lor Village, Jatiroto District could not be carried out every month due to restrictions on activities and the application of health protocols. There are supporting factors, including parties' participation, infrastructure facilities, good coordination, the existence of coaching, and evaluation of activities. Inhibiting factors include non-optimal use of the forum, limited *posyandu* targets, lack of commitment from parties, and an unsupportive environment. The efforts made are counseling, home visits, appointments, and monitoring of periodic evaluations. There is no significant difference between the implementation of *posyandu* with the previous year.

**Conclusion:** In general, the implementation of *posyandu* is still not optimal due to the constrained method and the need for a follow-up plan from the *puskesmas*. The research results obtained can be used as a reference in improving the performance of *posyandu*.

**Keywords:** *integrated healthcare center, pandemic, public health center*

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## INTRODUCTION

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Public health has an important role in efforts to improve the quality of human resources. The quality of public health is something that the government is continuously improving. One of the health facilities provided by the government is integrated health center or *Pos Pelayanan Terpadu (Posyandu)*, with the main objective of focusing on increasing birth rates while under-five and infant mortality continue to be suppressed so as not to increase. The basic health services utilize the community's participation to solve health problems experienced by individuals, groups, or the wider community. Mothers and toddlers are the main targets in *posyandu* activities<sup>1,2</sup>.

Community Based Health Efforts or *Upaya Kesehatan Bersumber Daya Masyarakat (UKBM)*, whose implementation aims to build health and make it easier for the community to get basic services called *posyandu*. This *Posyandu* is an empowerment forum for the community that is formed by deliberation and consensus within the scope of the village which is managed by the *Posyandu* manager and confirmed by the decision of the village head. The benefits of having this *posyandu* for mothers and children include getting a variety of information about maternal and child health, such as breastfeeding, complementary feeding, and disease prevention. In addition, at the *Posyandu* there is also monitoring of children's growth and development so that children are protected from the risk of malnutrition or malnutrition. If there are abnormalities in children, pregnant women, and breastfeeding mothers with the *Posyandu*, they can be detected early so that treatment can be immediately carried out. Also, with this *posyandu*, it is hoped that the decline in the Maternal Mortality Rate (MMR), Infant Mortality Rate (IMR), and Childhood Mortality Rate is expected to be accelerated<sup>3,4</sup>.

Based on the Directorate of Health Promotion at the Ministry of Health of the Republic of Indonesia in 2018, the number of *Posyandu* in Indonesia was 283,370. In addition, there were only 173,750 *posyandu* implemented, with a percentage of 61% with a target of 60%. Based on data from the 2019 East Java Health Profile, the number of *posyandu* in East Java is 46,868 with 37,135 active *posyandu* and 79% active *posyandu*. Lumajang district with 25 health centers has 1,294 *posyandu* with 748 active *posyandu* and 58% active *posyandu*. The Jatiroto Health Center with an inpatient *puskesmas* type consists of 6 villages with a total of 64 *posyandu* with an achievement target of 48 or 75% by 2020 the target achieved is 67.2% or as many as 43 *posyandu* have been achieved. This shows that the performance of Public Health Center or *Pusat Kesehatan Masyarakat (Puskesmas)* in the *Upaya Kesehatan Masyarakat (UKM)* on the UKBM *Posyandu* for *posyandu* balita Purnama Mandiri (PURI) is low with results  $\leq 80\%$ <sup>5,6,7</sup>.

Many factors cause *Posyandu* inactivity. External factors from implementing the *posyandu* program include community education, socio-economic conditions, and the number of children under five in the area. Internal factors can be in the form of monetary funds managed by the *posyandu*, cadres' activity, and infrastructure that supports the implementation of *posyandu* activities. Problems that often occur for the *posyandu* program include *puskesmas* officers being often late or absent, not carrying out regular training for cadres, and many people who do not regularly attend the *posyandu*<sup>8,9</sup>.

The impact of the *posyandu* that does not run smoothly will result in a decrease in the quality of public health, including a decrease in the level of public understanding about the importance of maintaining the health of children under five, an increase in Maternal Mortality

Rate (MMR), Infant Mortality Rate (IMR), and Childhood Mortality Rate. Given that *posyandu* is an important sector in improving the quality of health, it is necessary to evaluate the *Posyandu* in Kaliboto Lor Village, Jatiroto District, in 2020. This is due to the low achievement of *posyandu* implementation at Jatiroto Health Center during 2020.

The purpose of this study is to provide an overview of the factors that influence the implementation of *posyandu* in Kaliboto Lor Village, Jatiroto District in 2020. The research was carried out by conducting observations, interviews, and documentation. The primary data obtained is the result of in-depth interviews, while the secondary data resulted from the Jatiroto Health Center Performance Assessment in 2020. From this data, interpretation is carried out so that descriptive data is obtained from the written words of the community and the observed behavior. From this, an overview of the problem and its solution will be obtained. The research results obtained can be used as a reference in improving the performance of *posyandu*.

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## METHODS

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This type of research is qualitative research. This research uses a case study approach by exploring one case in depth and detail and involving sources of information from interviews and observations. This research is located in Kaliboto Lor Village, Jatiroto District. The research was carried out from October to November 2021. The results of this study were descriptive data derived from the written words of the community and observed behavior. After getting the data, there needs to be a depiction process so that the existing problems get answers<sup>10</sup>.

Data was collected using 3 ways: observation, interviews, and documentation. Observations were made to assess the factors that influence the

implementation of the *posyandu* program in Kaliboto Lor Village, Jatiroto District, in 2020. In-depth interviews were carried out by asking directly about important points related to problems that arose.<sup>11</sup> The interviews were conducted with the Head of the Jatiroto Health Center, the person in charge of the health promotion program, the *Posyandu* manager, and the village midwife as the *Posyandu* implementer. While the documents needed in this case are all matters related to the implementation of the *posyandu* and the factors that influence it. This method is carried out to see and describe the significant factors in implementing *posyandu* in 2020. Several tools were used in the data collection process, such as informed consent, voice recorders, and interview guides. From the data collection, primary data was obtained in the form of in-depth interviews and secondary data from the Jatiroto Health Center Performance Assessment in 2020.

The population in this study was the head of the *puskesmas*, the person in charge of health promotion, the village midwife, cadres, the head of the Family Welfare Movement (PKK), and the local community. The sampling method used in this research is snowball sampling. This method is done by getting samples in a rolling manner from one informant to another. In more detail, in the beginning, the sample was determined by selecting one or two people. Still, because the data obtained were not complete, they looked for other informants to complete the data and so on, until the existing data were more and more complete. The number of informants in this study were six people including the head of the *puskesmas*, 1 person in charge of health promotion, 1 village midwife as the *posyandu* implementer, 1 cadre, 1 head of PKK, and 1 community member. Triangulation of data in this study conducted in-depth interviews and observations related to the implementation of the *posyandu* to the person in charge of the health promotion.

The main informant in this study was the village midwife as the *posyandu* implementer.

This research was conducted with permission from the Health Research Ethics Commission of the Unimus Faculty of Medicine, as evidenced by the issuance of Ethical Clearance No. 112/EC/FK/2021. The ethical aspects of this study include the willingness to conduct interviews and sign informed consent, an explanation of the purpose of this study, the benefits received by respondents in the form of information on factors that influence the implementation of the *posyandu*, there is no risk posed by this research to informants, and the confidentiality of informants will be guaranteed by the researcher.

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## RESULT

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### Implementation of *Posyandu*

*Posyandu* activities at the Jatiroto Health Center during 2020 follow government regulations whose implementation is adjusted to the Covid-19 spread zone. *Posyandu* in Kaliboto Lor Village, Jatiroto District, cannot be done every month due to the covid-19 pandemic. In addition, the Jatiroto Health Center has also reduced activities during the implementation of the *posyandu* during the 2020 pandemic. The reduction in these activities includes routine monthly *posyandu* activities being stopped for 6 months, group counseling not carried out during a pandemic, health services for pregnant women, postpartum women, breastfeeding mothers, PUS abolished, and only providing health services for healthy babies and toddlers who will be immunized.

In the implementation of the *posyandu* in Kaliboto Lor Village, Jatiroto District, there are group counseling activities. Still, because in 2020 there are limitations to implementing the *posyandu*, counseling is only carried out in 5 tables with the village midwife.

The implementation of *Posyandu* can be carried out by observing the rules according to standards. To prevent the spread of COVID-19, community activities, including *posyandu*, are required to enforce strict health protocols, considering that there are vulnerable groups in the *posyandu* implementation target.

### Supporting Factors for *Posyandu* Implementation

The success of the *posyandu* program in its implementation cannot be separated from supporting factors, including:

a. Participation

One that supports the implementation of *posyandu* is the parties involved, including health workers from the *puskesmas* as implementers, cadres, and the community and other related parties. The village midwife, as the *posyandu* implementer, is tasked with providing services and conveying information to cadres and the local community to achieve the goals of the *posyandu* itself. Apart from *puskesmas* officers, cadres, and the community, cross-sectors also play a role in supporting the implementation of *posyandu*.

b. Infrastructure

During 2020 the facilities and infrastructure of the Jatiroto Health Center did not become an obstacle in the implementation of the *posyandu*; even an evaluation of its completeness was carried out. The availability of infrastructure facilities and adequate financial management or funds also support the successful implementation of *posyandu*.

c. Coordination with related parties

Each party involved in implementing the *posyandu* has its duties and functions in the *posyandu* program. Coordination and communication between parties certainly support the successful implementation of *posyandu*.

## d. Coaching

The guidance is carried out by the *puskesmas* to support the implementation of the *posyandu* so that it can run optimally. Coaching is also carried out to overcome problems or obstacles faced in the implementation of *posyandu*. The coaching at the Jatiroto Health Center itself has been carried out well.

e. Evaluation of *posyandu* activities

*Posyandu* activities need to be evaluated to assess how far the activities have been implemented and identify problems that arise to find solutions for related problems. Evaluation of *posyandu* activities in Kaliboto Lor Village, Jatiroto District, is always carried out and carried out in a structured manner by the *puskesmas* to assess ongoing *posyandu* activities. However, from the evaluation carried out, it was found that there was still no follow-up plan regarding the existing problems related to the low number of *posyandu* visits.

### Obstacle Factors for Implementing *Posyandu*

In the implementation of *posyandu* there are several obstacles found as follows.

## a. The use of forums in the village is not optimal

In its implementation, utilizing activities at forums in the village to mobilize people to come to the *posyandu* in Kaliboto Lor Village, Jatiroto District, is still not optimal. Many people still choose not to come to the *posyandu* for various reasons. In addition, the cadres have provided counseling regarding implementing the *posyandu*, but the community itself still tends to be reluctant to come to the *posyandu*.

b. *Posyandu* targets only healthy toddlers

*Posyandu* service health efforts are aimed at the community, with the main focus being infants, children under five, pregnant women, postpartum

mothers, breastfeeding mothers, and couples of childbearing age (PUS). However, during the *posyandu* activities that took place in 2020, the targets were slightly different. Sick toddlers are not allowed to come to the *posyandu*. If the *posyandu* is used for immunization purposes for toddlers, it is allowed while for other purposes, wait until after the PPKM is finished.

c. The commitment of related parties and imprecise implementation of *posyandu*

Commitment from officers as *posyandu* implementers in mobilizing and working on *posyandu* implementation as well as from the community or other parties, will determine the success of *posyandu* implementation. The conformity of the specified schedule can facilitate the implementation of the *posyandu*, but this is ignored and becomes a new problem in the service process.

## d. Environment

The environment includes external factors that also influence the success of the *posyandu*. In Kaliboto Lor Village, Jatiroto District, the implementation of the *posyandu* in 2020 is different from the previous year. The high number of Covid-19 cases caused the *posyandu* not to be implemented for several months. This also causes people to feel afraid to come to the *posyandu*. The surrounding environment also affects the arrival of the community in *posyandu* activities.

### Efforts to Overcome Barriers to *Posyandu* Implementation

In overcoming obstacles from the implementation of *posyandu*, several efforts were made as follows.

## a. Counseling by Utilizing Village Forums

The use of forums in the village has been carried out to increase the success of the *posyandu* implementation. This effort is still carried out by village cadres and PKK. All parties work together in providing counseling to the

public regarding the implementation of the *posyandu* during the pandemic, while still paying attention to the conditions regarding the COVID-19 pandemic.

b. Home Visit

During the pandemic, the target of implementing the *posyandu* is only for healthy infants and toddlers. From the Jatiroto Health Center itself, efforts have been made regarding the target of implementing this *posyandu* to carry out home visits for a toddler who are not healthy.

c. Periodic Monitoring and Evaluation

Commitment from various parties in implementing health protocols and also the inaccurate schedule for implementing the *posyandu* certainly present obstacles. The Jatiroto Health Center has made efforts by monitoring and regularly evaluating, coming directly to each *posyandu*.

d. Environment

The efforts made by the Jatiroto Health Center certainly coordinate with various parties. The cadres themselves conduct outreach to the community to increase visits to *posyandu*. The village midwife also makes home visits so that toddlers can still get the needed services.

**Impact of Implementing *Posyandu* in 2020**

The implementation of the *Posyandu*, which has been running in 2020 has had the following impacts.

a. Scope of *Posyandu* Implementation Results

The coverage of the results of *posyandu* activities in Kaliboto Lor Village, Jatiroto District, during 2020 has decreased. The scope of this activity is used as a reference for monitoring and evaluating *posyandu* activities over the years. From the beginning of the pandemic period, government policies resulted in changes in *posyandu* activities that also affected the scope of activity results.

b. The outcome of *Posyandu* Implementation

The implementation of the *posyandu* in Kaliboto Lor Village, Jatiroto District is still not optimal, judging from its implementation which has experienced various obstacles with the COVID-19 pandemic. In addition, the *posyandu* strata themselves in Kaliboto Lor Village, Jatiroto District, also experienced a decrease because the D/S coverage also decreased in 2020. The Jatiroto Health Center has made efforts so that the implementation of the *posyandu* can run optimally. Furthermore, the goals of the *posyandu* can be achieved and the health status, especially toddlers and pregnant women can be improved.

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**DISCUSSION**

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In 2020, *Posyandu* was stopped in April 2020. *Posyandu* was started again in August 2020 following operational guidelines for health efforts, *Posyandu* located only in green zone areas can carry out *Posyandu* opening day activities. In addition to implementing the problem, there is also a reduction in activities. Research in Karangmoncol Subdistrict, Purbalingga Regency, showed the same thing, resulting in the inhibition of monitoring toddlers' growth, which was carried out regularly at the *posyandu*. The implementation of the *posyandu* is carried out according to health protocols according established standards. In line with the research in Pekalongan, the implementation of the activities has implemented government regulations<sup>10,12</sup>.

*Posyandu* implementation is supported by all parties who are actively involved, from village midwives who provide services and deliver information, cadres in providing PMT, reminding the schedule for *posyandu* implementation, as well as good cross-sectoral coordination. In line with research conducted in Sidoarjo, preparing the *posyandu* in a

pandemic situation was carried out to keep it running by adapting to new habits. The availability of adequate infrastructure and optimal financial management also supports the successful implementation of *posyandu* in Kaliboto Lor Village, Jatiroto District. In line with the research at the Totikum Health Center, Banggai Islands Regency, the infrastructure is adequate, but the shortcomings lie in the records and reporting. In addition, the village midwife communicates directly with the village, village staff, village PKK, and cadres to implement *posyandu*. Then with cross sectors such as coaching, joint monitoring of the *posyandu* was also carried out. The results of research in Bandung show that coordination between cadres and the community has been carried out well<sup>13,14,15</sup>.

The coaching in Kaliboto Lor Village itself has been carried out regularly every year holding cadres refreshing and coaching related to *posyandu* materials. Under the research in Pekalongan, guidance aimed at cadres was carried out by village midwives together with officers on a one-month visit with a discussion of activities during *posyandu*. In addition to coaching, evaluation of activities has also been carried out in a structured manner by the *puskesmas* to assess deficiencies and then plan to improve *posyandu* strata. Following the research in Soka Pundong Hamlet, Bantul, it is necessary to conduct an evaluation meeting and follow-up plans for implementing the *posyandu* in the following month<sup>12,16</sup>.

The cadres in Kaliboto Lor Village, Jatiroto District, have conducted counseling regarding the implementation of the *posyandu*. However, from the community, many still choose not to come to the *posyandu*. Following research at the Totikum Health Center, Banggai Islands Regency, the idea of "*posyandu* only to measure baby's weight" has become a habit because the residents themselves do not regularly go to the *posyandu*. In

addition, *posyandu* targets are aimed at healthy toddlers under operational guidelines for health efforts. Another problem in Kaliboto Lor Village, Jatiroto District, there are still many who open and close masks, there are also targets that are not according to the schedule, so they cannot be controlled and resulting in crowds which also affects the service process and recording. A similar thing happened in a study in Pekalongan, showing that residents could not carry out activities by observing the proper protocol. The surrounding environment also affects the arrival of the community in *posyandu* activities. Under research at the Totikum Health Center, Banggai Islands Regency, the Totikum community prefers to stay at home to anticipate the spread of the COVID-19 virus<sup>10,12,14</sup>.

The *puskesmas* cooperate with villages and cadres in counseling the community about the importance of *posyandu* while still paying attention to health protocols including 3M. In line with research at the Totikum Health Center, Banggai Islands Regency, one of the roles of village midwives is to provide health education so that *posyandu* visits continue to increase. In addition, during the Covid-19 pandemic, the target of implementing *posyandu* for infants and toddlers is only for healthy toddlers, in this regard, efforts have been made to ensure that toddlers who have complaints of coughs and colds or are in unhealthy condition are not allowed to come to the *posyandu* but make an appointment with a midwife. In addition, according to the operational guidelines for health efforts, sick toddlers receive services at the *puskesmas* with applicable service standards<sup>17,14</sup>.

Regarding the monitoring and evaluation of the *puskesmas*, namely by coming to each *posyandu* in turn according to the schedule. In line with research in Kelebu Village, Batunyala Health Center Working Area, this monitoring was carried out to pay

attention to the increase in visits to *posyandu*. Then the village midwife together with cadres in Kaliboto Lor Village, Jatiroto District, visited the residence of the toddler who was not present so that the toddler could still receive health services. Similar to the research at the Totikum Health Center, Banggai Islands Regency, the *posyandu* was initially carried out but the lack of visitors resulted in health workers who immediately came down from home<sup>14,18</sup>.

The coverage of the results of *posyandu* activities in Kaliboto Lor Village, Jatiroto District, during 2020 has decreased strata because the D/S itself also decreased. In line with research in the city of Padang, toddlers were present, and then their weight was measured, and the impact on the number of visits decreased in April, this could happen because the people themselves were afraid to attend because of the covid-19 pandemic. The implementation of the *Posyandu* in Kaliboto Lor Village is still less than optimal, seen from its implementation, which experiences various obstacles. In line with research in Tasikmalaya City, many regions in Indonesia have stopped *posyandu* services due to the COVID-19 pandemic. However, some areas take the initiative to conduct mobile *posyandu*<sup>19</sup>.

Efforts can be made by paying attention to the inhibiting factors for the implementation of the *posyandu* in Kaliboto Lor Village are counseling by utilizing the village forum to the community regarding the implementation of the *posyandu* so that people want to come to the *posyandu*. Apart from that, home visits and appointments can also be made by the village midwife and cadres to the homes of toddlers who do not come to the *posyandu*.

The method used in the implementation of the *posyandu* does not work, it can be seen through village forums that are still not able to mobilize the community to come to the *posyandu* so that the implementation can be said to

be running. Besides that, from the *puskesmas* itself, in conducting periodic monitoring and evaluation, there is still no follow-up plan to overcome existing problems and resulting in unresolved problems<sup>14,18</sup>.

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## CONCLUSION

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From the research conducted, it was found that the results of the implementation of the *posyandu* in Kaliboto Lor Village, Jatiroto District in 2020 there were no significant differences from the previous year. Home visits are prioritized for sick toddlers, but in general, the implementation of *posyandu* is still not optimal due to constrained methods and the absence of a follow-up plan from the *puskesmas*. The supporting factors for implementing this *posyandu* include the participation of all relevant parties, adequate infrastructure, good coordination, coaching, and evaluation at the end of each *posyandu* activity. While the inhibiting factors for the implementation of this *posyandu* include the use of village forums that are not optimal, the *posyandu* target is only for healthy toddlers, the commitment of related parties is still lacking, the implementation of *posyandu* is not precise, and the community is anxious to come to the *posyandu*. From these obstacles, several improvement efforts were made, including counseling by making village forums more active, conducting home visits related to *posyandu* implementation targets, appointments at home for toddlers who do not come to *posyandu*, monitoring, and evaluation related to follow-up planning regarding existing problems that are still not running. The impact of the 2020 *posyandu* in Kaliboto Lor Village, Jatiroto District, is that the scope of activities has decreased, so the implementation of *posyandu* during 2020 is considered not optimal. From these conditions, it is hoped that the *puskesmas* can carry out follow-



up planning related to existing problems, especially in the implementation of *posyandu*, so that they can be resolved properly. It is also necessary to carry out periodic monitoring and evaluation every three months so that problems related to the implementation of *posyandu* can be identified as a whole.

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