



The Role of Elderly Posyandu Cadres in Improving Community Welfare

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ABSTRACT

One village located in Toapaya District, Bintan Regency, Province of Riau is called South Toapaya Village. With a total area of 90.18 km², South Toapaya Village is home to approximately 6,000 people. The most common condition mentioned is hypertension. The number of elderly is expected to increase to 1.5 million by 2050. As the number of elderly health problems continue to rise, one of the main issues is hypertension, which is the first illness to appear in elderly. Patients and their families frequently treat hypertension, therefore they continue to use the health facilities when problems arise. This requires cooperation from all parties, including family members and the elderly cadre posyandu. This cadre's presence is necessary for the general public's elderly health. The limited number of cadres in the community will harm health care, especially in Asia. In addition to the benefits of lansia posyandu, the number of kaders must also be taken into consideration so that lansia health communication may be effectively monitored. As of right now, role cadres have been carried out globally. Kader is referred to by the WHO as a community health worker. According to WHO, kader is a group of people who live in a particular region and provide health services to the local population. Even though kader is not a professional health care provider, he has formal education and training so that he can assist health care providers in carrying out specific tasks in the community's daily activities, such as posyandu elderly. As stated, cadre is not a key component in promoting health, but cadres and health workers are important steps in enhancing the general public's health. Elderly cadre is the spearak that is most closely related to elderly. Because cadre that is more frequently sentient to the elderly through posyandu elderly, the role of elderly cadres is very large. In this community service program, the service team focuses on forming new posyandu cadres and providing blood pressure measurement training. This training is expected to help cadres in improving the health of the elderly and knowing about hypertension in general.

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A. INTRODUCTION

One village located in Toapaya District, Bintan Regency, Province of Riau is called South Toapaya Village. With a total area of 90.18 km², South Toapaya Village is home to approximately 6,000 people. The most common condition mentioned is hypertension. The number of elderly is expected to increase to 1.5 million by 2050. As the number of elderly health problems continue to rise, one of the main issues is hypertension, which is the first illness to appear in elderly. Patients and their families frequently treat hypertension, therefore they continue to use the health facilities when problems arise. This requires cooperation from all parties, including family members and the elderly cadre posyandu. This cadre's presence is necessary for the general public's elderly health. The limited number of cadres in the community will harm health care, especially in Asia. In addition to the benefits of lansia posyandu, the number of kaders must also be taken into consideration so that lansia health communication may be effectively monitored. As of right now, role cadres have been carried out globally. Kader is referred to by the WHO as a community health worker. According to WHO, kader is a group of people who live in a particular region and provide health services to the local population. Even though kader is not a professional health care provider, he has formal education and training so that he can assist health care providers in carrying out specific tasks in the community's daily activities, such as posyandu elderly. As stated, cadre is not a key component in promoting health, but cadres and health workers are important steps in enhancing the general public's health. Elderly cadre is the spearak that is most closely related to elderly. Because cadre that is more frequently sentient to the elderly through posyandu elderly, the role of elderly cadres is very large. In this community service program, the service team focuses on forming new posyandu cadres and providing blood pressure measurement training. This training is expected to help cadres in improving the health of the elderly and knowing about hypertension in general.

B. THEORETICAL REVIEW

Community empowerment in the health sector is one of the goals of the Posyandu. Posyandu is a forum for improving welfare in the health sector. Health empowerment is a form of effort or process to foster awareness, willingness, and ability to maintain health. The community empowerment movement is a movement to improve the ability of the community to raise their dignity and health. Awareness of the importance of health should be instilled in the community, so that people take care of themselves and their families from diseases, and are willing to visit the local Posyandu so that Posyandu cadres provide assistance to the health conditions of the elderly. (Siregar, 2021)

Community empowerment activities are one of the effective activities in order to make the community independent and empowered, of course. These activities can be carried out anytime, anywhere, and by anyone. Basically, community empowerment activities are aimed at the underprivileged, in order to be able to make them independent, in order to make them able to help themselves (Erliana, 2016).

Empowerment in the field of health is a process of continuously and sustainably providing information to individuals, families, or groups (clients) in accordance with the clients' development, and a process of assisting clients so that they change from not knowing to knowing or being aware (knowledge aspect), from knowing to wanting (attitude aspect), and from wanting to be able to carry out the introduced behavior (action aspect).



Community empowerment in the health sector is an active process, where the target/client and the empowered community must actively participate (participate) in health activities and programs. (Mardikanto, 2017).

The implementation of the Elderly Integrated Health Post (Posyandu Lansia) cannot be separated from the involvement of elderly cadres. The elderly cadres serve as a link between the Puskesmas and the organization of the Elderly Posyandu activities in their area. These cadres are the agents of change and mobilize the community to have awareness to better maintain their health by participating in Posyandu activities. It is not difficult for the Posyandu cadres to invite the community to participate in activities at the Posyandu, because the cadres are already accustomed to mobilizing the community in an activity. It is hoped that the community becomes more aware that maintaining health is important and needs to be disseminated to a larger audience. Big or small, many or few benefits received by the community in participating in posyandu activities are expected to affect the continuation of their daily lives. The main capital of the community is actually awareness of the importance of maintaining their own health.

The role of health cadres as the frontline in the health sector is starting to decline, marked by the utilization of posyandu at only 13% and 14% in the Purnama and Mandiri posyandu categories. Therefore, cadres as agents of change are part of the system. They are the ones who can influence the attitudes of the elderly community in accepting innovations. In order for posyandu to function properly, the support of cadres who must be agents of change is needed. The role of cadres as agents of change in development work can be achieved by providing support in the form of joint services such as measuring height and weight, measuring blood pressure, filling out KMS (health cards), and providing counseling or socialization. Health information, mobilizing and inviting the elderly to attend and participate in elderly posyandu activities, therefore requires cadres who have the ability and experience in coaching, guidance and support. (Dayaningsih, 2020).

C. METHOD

The location of this activity is in Toapaya Selatan Village RT 09,10,11, RW 003 with a hypertension prevalence rate of 52%. In addressing the above issues, the service team conducted outreach on the elderly and refresher training for elderly cadres on how to check blood pressure and non-pharmacological therapy alternatives for hypertension sufferers.

The activities are divided into several stages as follows:

The activity began with a pretest given to the cadres and the community, aimed at measuring the participants' understanding of hypertension and the role of the cadres. The activity continued with the presentation of material on hypertension, cadres, followed by a discussion and question-and-answer session. Next, participants were given a post-test to assess their understanding of the material that had been provided.

The next activity is the selection of cadres who will play a role in public health, especially for the elderly. The selection is based on the motivation of the cadres' participation, recommendations from the neighborhood head, and their understanding of the material that has been provided. The next step is training in blood pressure measurement for the selected cadres, which amounts to 5 people. The material provided includes the procedures for measurement, the use of a digital sphygmomanometer, and comparing the results with normal values according to the age of the elderly. Selected cadres took turns demonstrating blood pressure



measurement. The activity continued with the provision of non-pharmacological hypertension material, namely Light Massage Therapy.

D. RESULTS AND CONCLUSION

After the community service activities were conducted, active participation from the community was observed from the beginning until the end of the activities. The outreach activities have had an impact on increasing the participants' knowledge. The outreach on health education methods can run smoothly. Respondents are active, enthusiastic, able to cooperate well, can improve, and possess knowledge and understanding. (Retnaningsih, 2022).

Based on the data obtained, the most prevalent disease among the elderly is Hypertension. This is due to a lack of knowledge, a diet for hypertension, and the refreshment of elderly cadres. The success of hypertension management is also closely tied to the roles and functions of the cadres. (Syukkur, 2022) The role and function of cadres are very important in controlling blood pressure in the community, in accordance with the research results of Setiyaningsih & Ningsih (2019) which found a positive and statistically significant influence of the role of cadres on hypertension control behavior ($OR = 5.10, p= 0.05$). There was an increase in knowledge from 50% to 65%.



Picture 1
Blood Pressure Measurement



Picture 2
Counseling and Cadre Formation



E. CONCLUSION

The contribution of elderly posyandu in improving the health of the elderly is very significant, but until now the quality of services at elderly posyandu still needs to be improved. The presence of cadres and existing facilities is an asset for the sustainability of the elderly posyandu. Revitalization is an effort to revitalize an area or part of a city that was once vital or lively but has since experienced decline.

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