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*The Indonesian Journal of Health Promotion***Research Articles****Open Access****Analysis of Determinants Associated with the Activeness of Posyandu Cadres in the Working Area of the Tarus Health Center, Kupang Tengah Sub-District, Kupang District****Carmen H. F. Viana<sup>1\*</sup>, Ribka Limbu<sup>2</sup>, Marni Marni<sup>3</sup>**<sup>1</sup>Universitas Nusa Cendana, | email [helenacarmen106@gmail.com](mailto:helenacarmen106@gmail.com)<sup>2</sup>Universitas Nusa Cendana | email [ribka.limbu@stafundana.ac.id](mailto:ribka.limbu@stafundana.ac.id)<sup>3</sup>Universitas Nusa Cendana | email [marni@staf.undana.ac.id](mailto:marni@staf.undana.ac.id)\* Corresponding Author: [helenacarmen106@gmail.com](mailto:helenacarmen106@gmail.com)**ABSTRACT**

**Background:** The activeness of cadres is very important in Posyandu activities because if cadres are not active then the provision of health services and Posyandu activity programs cannot run well, so cadre coaching is needed by health workers to increase the active role of cadres in the implementation of Posyandu activities.

**Purpose:** This study aims to analyze the determinants associated with the activeness of Posyandu cadres in the working area of Puskesmas Tarus, Kupang Tengah District, Kupang Regency in 2024.

**Methods:** This type of research is an analytic survey with a cross sectional research design. The sample in this study were 71 people. Sampling in this study using simple random sampling technique with a level of significance  $\alpha = 0.05$ .

**Results:** The results showed that there was a relationship between the variables of knowledge ( $p=0.000$ ), attitude ( $0.002$ ) and training  $0.002$  with the activeness of Posyandu cadres in the working area of the Tarus Health Center, Kupang Tengah District, Kupang Regency.

**Conclusion:** It is expected that health workers at the Tarus Health Center should always maintain the implementation of cadre training by providing counseling on the importance of activeness of Posyandu cadres so that Posyandu activities can run well, and it is also expected that Posyandu cadres can increase activeness as a social responsibility in the community.

**Keywords:** Posyandu Cadres; Activeness; Knowledge; Attitude; Training; Incentives

## INTRODUCTION

Posyandu is one of the Community-Based Health Efforts (UKBM) which is managed from, by, for and with the community to empower the community and provide convenience to the community in obtaining basic health services and accelerating the reduction of maternal and child mortality (1). Posyandu services are carried out by cadres as an extension of the Puskesmas.

The existence of Posyandu and the active role of cadres are very influential because cadres are responsible for implementing the Posyandu program. It is the role of cadres who are in charge of inviting the community to attend Posyandu. Cadres are required to make home visits if there are mothers, toddlers and pregnant women who do not come to Posyandu. Health cadres are a manifestation of the active role of the community in health services if the cadres are not active, then the implementation of Posyandu does not run smoothly and as a result the nutritional status of infants or toddlers cannot be detected early and clearly. This will directly affect the success rate of Posyandu, especially in monitoring the growth and development of toddlers (2).

Several factors still hamper the optimization of Posyandu services, including limited financial resources, recruitment of new cadres, cadre capacity that still needs to be improved, lack of community motivation to access Posyandu services routinely, and the lack of guidance from the Posyandu operational working group (pokjanal) and Posyandu working group (pokja) on improving the quality of Posyandu activities (3). According to Lowrence Green (1980) in Notoadmodjo, 2010 says that factors that influence health behavior are predisposing factors: knowledge, education, employment status, marital status, skills. supporting factors: availability of facilities and infrastructure, distance and affordability of service places, cadre motivation, cadre training and driving factors: health behavior, community leaders, and husband or family support (4).

Since its announcement in 1986, the number of Posyandu in Indonesia increased rapidly in 2019 from 25,000 to 296,777. then in 2022 to 213,670 units spread across 34 provinces. This increase in number has not been followed by an increase in quality, namely implementing family planning (KB), nutrition, immunization, diarrhea prevention, and maternal and child health (MCH) services, only 63.95% of which are active Posyandu (5). An active Posyandu is a Posyandu that is able to carry out its main activities every month (MCH: pregnant women, postpartum women, infants, toddlers, family planning, immunization, nutrition, prevention and control of diarrhea) (6).

The results of the initial survey conducted, Puskesmas Tarus has a service area of 8 villages namely Oelnasi, Oelpuah, Oebelo, Noelbaki, Tarus, East Penfui, Mata Air and Tanah Merah and has 270 Posyandu cadres located in 54 Posyandu. Each area has 5 cadres and the number of Posyandu varies according to the distance and residence of the community to the Posyandu.

Posyandu is a major focus in health development in Indonesia. The indicator target for the percentage of districts / cities that carry out active Posyandu guidance in 2020 is 51%, but the achievement obtained by the data as of January 23, 2021 is only 6%. When compared to the 2020 target, the performance achievement of the percentage of districts or cities that implement active Posyandu is 11.76%. This illustrates that there is still a difference of 88.24% from the indicator target that has not been met. The target indicator for active Posyandu development in 2022 has also not been met where the target for active Posyandu is 90%, but the achievement indicator obtained is only 65.95%. So this shows that the achievement of active Posyandu development in 2022 still does not meet the target of achieving active Posyandu (7).

Based on Riskesdas data, 2018 as many as 55.4% of toddlers in Indonesia do not weigh regularly at Posyandu. Based on the toddler visit coverage data registered in the annual report of Puskesmas Tarus in 2022, there were 3,617 toddler targets from 8 villages. The level of activeness of toddler visits to follow Posyandu activities for each village included in the Tarus Puskesmas working area is Oelnasi Village with 268 of 282 registered toddlers, Oelpuah Village with 149 of 163 registered toddlers, Oebelo Village with 368 of 391 registered toddlers, Noelbaki village 680 out of 772 registered toddlers, Tarus village 395 out of 415 registered toddlers, Penfui Timur village 634 out of 678 registered toddlers, Mata Air village 417 out of 523 registered toddlers, Tanah Merah village 364 out of 393 registered toddlers. Judging from the existing data, the coverage of under-five visits is still not fully met. Posyandu cadres are the spearhead at the Posyandu service level so there are several efforts that have been made by the government, one of which is training on the orientation of specific nutritional interventions for monitoring toddler growth in Posyandu and the distribution of cadre incentives by the Kupang District Health Office. The results obtained have increased community participation in Posyandu activities although not reaching 100% community participation. This increase does not continue to occur, seen from the data on the coverage of visits by toddlers registered at the Tarus Health Center that not all registered toddlers visit Posyandu (8).

The Tarus Puskesmas working area found that the participation and activeness of the cadres were still lacking in carrying out their duties and roles during Posyandu activities. This can be seen from the results of interviews with several Posyandu cadres who said that Posyandu services were less effective because not all cadres

were active in every Posyandu activity implementation. This is due to a lack of knowledge related to their duties and roles as Posyandu cadres. Knowledge is a very important domain in shaping a person's actions or behavior (9). The lack of knowledge of cadres is due to the lack of training received by cadres. According to cadres, it is very important to be given training because sometimes cadres are still mistaken when registering and weighing. Cadres said that they had given proposals to the Puskesmas to hold training but the information obtained was that there had to be new cadres, then training could be held while cadres felt that the very rare training held had an effect on the understanding of cadres who were still minimal so that it had an impact on the skills and inactivity of cadres in carrying out their duties.

Incentives provided for cadres are also related to cadre activeness in Posyandu activities (10). But in reality, from initial observations during Posyandu activities at one of the Posyandu in the Tarus Puskesmas working area, the cadres received incentives from the local village and puskesmas. The results of the observation found the fact that the incentives obtained should be once a month with the amount of Rp. 50,000 rupiah, instead the incentives were received 3 to 6 months from the Puskesmas but of the 5 existing cadres only 3 cadres received incentives.

A study conducted by Dianita Andi et al., 2022 showed that incentives are related to the activeness of Posyandu cadres. Cadres who get incentives are more active than cadres who do not get incentives. The data obtained that of the many cadres who received incentives who had active Posyandu during the co-19 pandemic (70.4%) compared to inactive Posyandu (29.6%). In addition, there is a relationship between knowledge and motivation with the activeness of Posyandu cadres (11).

The results of research conducted by (Qashash, 2023), the results of interviews show that according to some Posyandu cadres, the reason for cadres who are less active is because there is no reward that motivates cadres to work, and other inhibiting factors such as lack of training, limited knowledge and education should be owned by cadres. So from the results of the study found that there is a relationship between attitude and motivation with the activeness of Posyandu cadres under five (12).

Based on the description, it is necessary to conduct research on knowledge, attitudes, training and incentives by conducting a study entitled: "Analysis of Determinants Associated with the Activeness of Posyandu Cadres in the Tarus Health Center Working Area, Kupang Tengah District, Kupang Regency".

## METHOD

This study is an analytical survey research using cross sectional method conducted at Tarus Health Center, Kupang Tengah District, Kupang Regency. The population in this study was 270 Posyandu cadres with a sample of 71 Posyandu cadres. The sampling technique is Simple Random Sampling, which is random sampling without regard to a stratum and all populations have the opportunity to be selected. The type of data in this study is primary data, namely data taken directly by going to the field to conduct interviews using questionnaires that have been made and secondary data, namely data obtained from related agencies such as the Tarus Health Center Profile. Data processing includes editing, coding, scoring, entry and tabulating. data analysis using the chi square test.

## RESULTS

### Characteristics Of Respondents

#### Age of Posyandu Cadres

**Table 1.** Age Characteristics of Posyandu Cadres in the Working Area of Tarus Health Center, Kupang Regency in 2024

Age (Year)	Total	
	n	%
31-40	18	25,4
41-50	34	47,9
>50	19	26,8
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 1. Shows that most respondents have ages 41-50 years as many as 34 people (47.9%) compared to ages > 50 years as many as 19 people (26.8%) and ages 31-40 years as many as 18 people (25.4%).

## Education of Posyandu Cadres

**Table 2.** Education Characteristics of Posyandu Cadres in the Working Area of Tarus Health Center, Kupang Regency in 2024.

Education	Total	
	n	%
Elementary	20	28,2
Junior High	11	15,5
High School	30	42,3
College	10	14,1
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 2. Shows that most respondents have a high school education as many as 30 people (42.3%) compared to elementary school as many as 20 people (28.2%), junior high school as many as 11 people (15.5%) and college as many as 10 people (14.1%).

## Occupation of Posyandu Cadres

**Table 3.** Occupational Characteristics of Posyandu Cadres in the Working Area of the Tarus Health Center, Kupang Regency in 2024

Work	Total	
	n	%
Employed	8	11,3
Not Working	63	88,7
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 3. Shows that most respondents did not work as many as 63 people (88.7%) compared to respondents who worked as many as 8 people (11.3%).

## Univariate Analysis

### Activeness of Posyandu Cadres

**Table 4.** Distribution of activeness of Posyandu cadres in the working area of Tarus Health Center, Kupang Regency in 2024.

Activity of Posyadu Cadres	Total	
	n	%
Not Active	20	28,2
Active	51	71,8
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 4. Shows that of the 71 respondents, most respondents who are active in Posyandu activities ( $\geq 8$  times a year) are active cadres as many as 51 people (71.8%) compared to cadres who are not active ( $< 8$  times a year) as many as 20 people (28.2%).

### Knowledge of Posyandu Cadres

**Table 5.** Distribution of knowledge of Posyandu cadres in the working area of Tarus Health Center, Kupang Regency in 2024

Knowledge of Posyadu Cadres	Total	
	n	%
Less	37	52,1
Enough	34	47,9
Good	0	0,0
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 5 shows that of the 71 respondents, the most respondents who had poor knowledge were 37 people (52.1%) compared to respondents who had sufficient knowledge as many as 34 people (47.9%).

### Attitude of Posyandu Cadres

**Table 6.** Attitude Distribution of Posyandu Cadres in the Working Area of Tarus Health Center, Kupang Regency in 2024

Attitude of Posyadu Cadres	Total	
	n	%
Negative	23	32,4
Positive	48	67,6
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 6. Shows that out of 71 respondents, most respondents have a positive attitude as many as 48 people (67.6%) compared to respondents who have a negative attitude as many as 23 people (32.4%).

### Posyandu Cadre Training

**Table 7.** Distribution of Training of Posyandu Cadres in the Working Area of Tarus Health Center, Kupang Regency in 2024

Posyadu Cadre Training	Total	
	n	%
Less	53	74,6
Good	18	25,4
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 7. shows that out of 71 respondents, most respondents had less training as many as 53 people (74.6%) compared to respondents who had good training as many as 18 people (25.4%).

### Incentives for Posyandu Cadres

**Table 8.** Distribution of Posyandu Cadre Incentives in the Tarus Health Center Working Area, Kupang Regency in 2024

Incentives for Posyadu Cadres	Total	
	n	%
Not appropriate	71	100,0
Appropriate	0	0,0
Total	71	100,0

Source: Primary Data from Research Respondents 2024

Table 8. Shows that out of 71 respondents, all active and inactive Posyandu cadres received inappropriate incentives (< Rp 50,000.00) as much as 100% by Puskesmas Tarus during their time as Posyandu cadres.

There were no statistical analysis results because all 71 respondents obtained inappropriate incentives with most active cadres obtaining inappropriate incentives 51 respondents (71.8%) compared to inactive cadres with inappropriate incentives 20 respondents (28.2%).

### Bivariate Analysis

#### Relationship between knowledge and activeness of Posyandu cadres

**Table 9.** Chi Square Test Results of the Relationship between Knowledge and Activeness of Posyandu Cadres in the Tarus Health Center Working Area, Kupang Regency in 2024

Cadre Knowledge	Cadre Activity		Total	<i>p</i> value
	Not Active	Active		
less	20 54,1 %	17 45,9 %	37 100 %	0,000
Cukup	0 0,0 %	34 100 %	34 100 %	
Good	0 0,0 %	0 0,0 %	0 0,0%	
Total	20 54,1 %	51 145,9 %	71 200 %	

Source: Primary Data from Research Respondents 2024

Table 9. Shows that cadre knowledge is less with more inactive cadres, namely 20 respondents (54.1%) compared to less cadre knowledge with active cadres, namely 17 respondents (45.9%) then active enough cadre knowledge is more, namely 34 respondents (100.0%) compared to sufficient cadre knowledge with inactive cadres, namely 0 respondents (0.0%).

The results of statistical test analysis using chi square showed that  $p$  value = 0.000 <  $\alpha$  = 0.05 with a contingency coefficient value of 0.600 this indicates that there is a relationship between the variable knowledge with the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency.

#### Relationship between attitude and activeness of Posyandu cadres

**Table 10.** Chi Square Test Results of the Relationship between Attitudes and the Activeness of Posyandu Cadres in the Tarus Health Center Working Area, Kupang Regency in 2024.

Cadre Attitude	Cadre Activity		Total	<i>p</i> value
	Not Active	Not Active		
Negative	12 52,2 %	11 47,8 %	19 100 %	0,002
Positive	8 16,7 %	40 83,3 %	48 100 %	
Total	20 68,9 %	51 131,1 %	71 200 %	

Source: Primary Data from Research Respondents 2024

Table 10. shows that the negative cadre attitude with inactive cadres is more, namely 12 respondents (52.2%) compared to negative attitudes with active cadres, namely 11 respondents (47.8%) then positive cadre attitudes with active cadres are more, namely 40 respondents (83.3%) compared to positive attitudes with inactive cadres, namely 8 respondents (16.7%).

The results of statistical test analysis using chi square showed that  $p$  value = 0.002 <  $\alpha$  = 0.05 with a contingency coefficient value of 0.369 this indicates that there is a relationship between the attitude variable and the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency.

#### Relationship between training and activeness of Posyandu cadres

**Table 11.** Chi Square Test Results of the Relationship between Training and Activeness of Posyandu Cadres in the Tarus Health Center Working Area, Kupang Regency in 2024

Cadre Training	Cadre Activity	Total	<i>p</i>
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	Not Active	Not Active		value
Less	20 37,7 %	33 62,3 %	53 100 %	0,002
Good	0 0,0 %	18 100 %	18 100 %	
Total	20 37,7 %	51 162,3 %	71 200 %	

Source: Primary Data from Research Respondents 2024

Table 11. Shows that cadre training is less with more active cadres, namely 33 respondents (62.3%) compared to less cadre training with inactive cadres, namely 20 respondents (37.7%) then good cadre training with more active cadres, namely 18 respondents (100.0%) compared to good cadre training with inactive cadres, namely 0 respondents (0.0%).

The results of statistical test analysis using chi square showed that  $p \text{ value} = 0.002 < \alpha = 0.05$  with a contingency coefficient value of 0.365 this indicates that there is a relationship between training variables with the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency.

## DISCUSSION

### Relationship between Knowledge and Activity of Posyandu Cadres

Cadre knowledge is one of the internal factors underlying a Posyandu cadre to be active in every Posyandu activity. According to (Notoatmodjo, 2014), knowledge is a very important factor for the formation of a person's actions. Knowledge is the result of knowing and this occurs after people perceive a certain object. Sensing occurs through the human five senses, namely the senses of sight, hearing, smell, taste and touch. The higher the level of knowledge possessed by a Posyandu cadre, the more cadres will know and understand each task and function and the role of cadres in Posyandu activities. Knowledge in this study is the knowledge of cadres about the duties and functions of cadres in Posyandu activities. A high level of knowledge of Posyandu by health cadres can form a positive attitude towards the Posyandu program, especially on the use of the extension table. Posyandu cadres who have good knowledge will have more confidence than cadres with less knowledge.

The results of statistical test analysis using chi square showed that  $p \text{ value} = 0.000 < \alpha = 0.05$ , this indicates that there is a relationship between the variable knowledge with the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency. Based on the findings, some Posyandu cadres received previous basic training from Puskesmas officers in providing health services to the community including getting information about how to implement Posyandu. The knowledge of cadres will always increase when cadres are always active in Posyandu activities. In addition there are cadres with less knowledge as many as 17 respondents (45.9%) but active in Posyandu activities according to the assumption of researchers this is because cadres motivate themselves from family support to participate in Posyandu activities.

The cadres who have sufficient and insufficient knowledge but are not active in posyandu activities because there are cadres with low education levels, lack of understanding of posyandu activities, objectives and service systems at the posyandu desk, as well as lack of guidance and training from health workers so that this can be seen when there are some cadres who are less confident in their knowledge in filling out the questionnaire. This is due to the lack of training received by cadres. In the interview process, cadres felt the need for frequent training because sometimes cadres still make mistakes when registering and weighing. Cadres said that they had made suggestions to the Puskesmas to hold training, but the information obtained was that there must be new cadres, then training could be held, while cadres felt that the very rare training held had an effect on the understanding of cadres who were still minimal, which had an impact on the skills and inactivity of cadres in carrying out their duties. According to (Pering et al., 2022), better knowledge greatly influences cadres to be active in posyandu activities and if cadre knowledge is lacking then cadres do not have performance and are not active in posyandu activities because they are not equipped with good knowledge.

The results of this study are in line with research conducted by (Profita, 2018) in Pengadengan Village, working area of Puskesmas 1 Wangon which concluded that there is a significant relationship between knowledge and the activeness of Posyandu Cadres with a P value of 0.000 ( $p < 0.005$ ). Similar research conducted by (Herlinawati, 2020) also concluded the results that there was a significant relationship between knowledge and the activeness of Posyandu Cadres in the working area of the Cirebon City Attorney's Health Center with a P value of 0.000 ( $p < 0.005$ ).

### **Relationship between attitude and activeness of Posyandu cadres**

Attitude is a person's reaction or response that is still closed to a stimulus or object. Attitude is not yet an action or activity, but a predisposition to action or behavior. Attitude measurement can be done directly or indirectly. Directly it can be stated how the respondent's opinion or statement towards an object, while indirectly it can be done with hypothetical questions and then stated the respondent's opinion (Notoatmodjo, 2014). The attitude in this study is the attitude of cadres towards Posyandu activities.

According to (Kusuma & Nurcahayati, 2021), attitudes are feelings and beliefs that we hold, be they pleasant or unpleasant, about certain people, objects, events, or ideas that result in a tendency to behave. Attitudes have direction, meaning that attitudes are chosen in two directions of agreement, namely whether to agree or disagree, whether to support or not support, whether to take sides or not to take sides with something, or someone as an object. Attitude also has consistency, which means that there is a match between the attitude statement expressed and the response to the attitude object (Wau, 2018).

The results of statistical test analysis using chi square showed that  $p \text{ value} = 0.002 < \alpha = 0.05$ , this indicates that there is a relationship between the attitude variable and the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency. Based on the findings of more cadres have a positive attitude because they do Posyandu activities voluntarily do not distinguish social status and listen to complaints of mothers visiting Posyandu. However, it is different with cadres who have a negative attitude due to the lack of awareness of cadres to invite pregnant women to Posyandu to be willing to come to Posyandu, do not pay attention to complaints submitted by Posyandu targets, when at the weight measurement table do not really pay attention to the measurement results, do not ask Posyandu targets to visit Posyandu as much as possible according to schedule. this is in line with research conducted by (Irianty et al., 2017) which shows that attitudes greatly affect the performance of cadres in implementing Posyandu services.

The results of this study are in line with the results of research (Qashash, 2023) which concluded that there is a significant relationship between attitude and the activeness of Posyandu cadres in the Working Area of the Sri Padang Health Center, Tebing Tinggi City in 2023 with a P value of 0.007 ( $p < 0.005$ ). The results of this study are in accordance with the opinion (Notoatmodjo, 2014), that attitude is an intention within a person to carry out or not carry out a job. The better a person's attitude towards their work, the higher the tendency of that person to carry out their work.

### **Relationship between Training and Activeness of Posyandu Cadres**

Training is a systematic effort to develop human resources both individuals and groups will improve the skills and activeness of cadres in the implementation of Posyandu activities (Yustina, 2023). Training that is carried out regularly at least once a year is also important as a medium for refreshing cadres so that they are not bored with monthly activities at Posyandu.

The results of the statistical test analysis using chi square show that the  $p \text{ value} = 0.002 < \alpha = 0.05$ , this indicates that there is a relationship between the training variable and the activeness of cadres in Posyandu activities in the working area of Puskesmas Tarus Kupang Regency. This research is in line with research conducted by (Afrida, 2019) which states that there is a significant relationship between training and the activeness of Posyandu cadres in the working area of the Kota Juang Health Center, Bireuen Regency with a  $p \text{ value} = 0.003$  ( $p < 0.05$ ), with respondents who actively participate in training as much as (83.9%).

Based on the findings of more cadres have less training due to various things, one of which is training or refresher cadres held by health workers is rarely done even in the interview process there are some cadres who say that in the last three years did not get training. When training is held, not all cadres follow it only representatives coupled with some cadres who have a low level of education so that indirectly this can also affect the level of knowledge of cadres about the main duties and functions as posyandu cadres, this is the reason some posyandu cadres have poor knowledge so that it is quite influential on the inactivity of cadres and the process of Posyandu activities.

When conducting research, researchers found several obstacles experienced by posyandu cadres in this case the facilities and infrastructure supporting activities in the posyandu are not complete and adequate. To the local village government in order to provide good facilities and infrastructure in the posyandu and health workers can also provide training and refreshment of cadres to increase cadre knowledge so that it can achieve what is a common goal.

### **Relationship between Incentives and Activeness of Posyandu Cadres**

Incentives are a stimulus that attracts someone to do something because by doing this behavior, it will be rewarded. Incentives are a way to increase the activeness of cadres and the performance of posyandu cadres. If posyandu activities begin, then the cadres must work fully from morning until the completion of all posyandu activities. Even though when posyandu activities are carried out, cadres must leave their main jobs such as



household chores or other jobs whose income is much greater. Therefore, it is only natural that posyandu cadres should receive appropriate incentives (Aome, 2022).

There are no statistical analysis results because all cadres as many as 71 respondents received incentives not according to the Tarus Health Center. According to (Aome, 2022), incentives in the form of money provide their own motivation for cadres to participate in posyandu activities. This award is able to motivate cadres to be enthusiastic in carrying out their functional duties at Posyandu. Incentives given to Posyandu cadres in the form of material and non-material obtained from the Local Government and the Puskesmas will be a driving force for cadres in the implementation of Posyandu activities. The interview process of active and inactive cadres obtaining incentives is not appropriate. Cadres receiving incentives from the local government or from the Puskesmas will be a motivator for cadres in implementing Posyandu activities. However, based on the existing reality that the incentives obtained for active cadres are on average Rp 30,000 per month and will be obtained every 6 months, but of the 5 existing cadres only 3 cadres get incentives from the Puskesmas.

Based on the findings, incentives given to cadres in the form of money, goods or awards can be one of the motivations and encouragement for cadres to be more active in implementing, maintaining and developing Posyandu activities. If cadres are not active, Posyandu cannot run smoothly. Researchers concluded that incentives are a factor that greatly influences the activeness of Posyandu cadres. This is in line with research which states that incentives given to cadres in the form of money, goods or awards can be one of the motivations and encouragement for cadres to be even more active in carrying out, maintaining and developing Posyandu activities (Afrida, 2019).

Similar research was also found by (Dianita Andi et al., 2022), that the data showed that in the presence of incentives, cadres were generally more motivated to complete their tasks than when cadres did not receive incentives. Thus, incentives are one of the factors driving cadres to work.

Similar research was also found by (Wirapusita, 2013), that cadres also need incentive support that is regularly provided, where most cadres are housewives who need additional income for their families. Incentives provided both material and non-material are able to guarantee increased motivation in Posyandu cadres.

## CONCLUSION

There is a relationship between knowledge and the activeness of Posyandu cadres in the work area of the Tarus Health Center, Kupang Tengah District, Kupang Regency.

There is a relationship between attitude and the activeness of Posyandu cadres in the work area of the Tarus Health Center, Kupang Tengah District, Kupang Regency.

There is a relationship between training and the activeness of Posyandu cadres in the working area of the Tarus Health Center, Kupang Tengah District, Kupang Regency.

## SUGGESTION

It is hoped that for the Tarus Health Center, this research can be a consideration for the Tarus Health Center to always maintain the application of cadre training so as to further increase knowledge and activeness in carrying out the roles and duties of posyandu cadres, namely in providing health services. For Posyandu cadres, each cadre further enhances their participation, especially in improving the implementation of activities in the posyandu and for other researchers, it is hoped that further research related to this study will further examine the determinants associated with the activeness of Posyandu cadres using other variables.

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