

# **MODEL PREDIKSI OPTIMALISASI KINERJA KADER POSYANDU DI KECAMATAN BETUNG KABUPATEN BANYUASIN PROPINSI SUMATERA SELATAN**

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**PRED ICTING PERFORMANCE OPTIMALIZATION**

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## **ABSTRACT**

### **MODEL FOR PRED ICTING PERFORMANCE OPTIMALIZATION OF POSYANDU KADER AT BETUNG SUB-DISTRICT BANYUASIN DISTRICT SOUTH SUMATRA PROVINCE**

**The objectives** of this study are to (1) conduct surveys on knowledge, attitude and performance (KAP) twice, in one month interval, to the same Posyandu kaders, and by utilizing the same questionnaire and method, in order to get Markov chain model in matrices form, (2) assess the accuracy of the established matrices by comparing the matrices' prediction results with the third KAP survey result, (3) predict the optimal (highest point) condition of Posyandu kaders' KAP by using the matrices, and (4) implement intervention by conducting training of Posyandu kaders' knowledge and skill when the kaders' performance has achieved its optimal condition, in order to prove that by doing an intervention, the optimal condition can again be improved / increased. **The design** of the study for measuring KAP (four times) is a cross sectional study and for evaluating the intervention results on KAP is a non-equivalent control group design quasi eksperimental. **The main outcomes** are the accuracy of Markov chain model matrices and the re-increase of performance from its optimal (stagnant) condition after training intervention has been implemented. **The results** showed that the accuracy of Markov chain model in predicting kaders' performance and knowledge are really very high with kappa value 100% for performance and 92,93% for knowledge, and the performance and knowledge of kaders' are very much increase. This study **concluded** that Markov chain model is a valid and very useful tool for predicting knowledge and performance changes of kaders from time to time, including for predicting when the knowledge and performance will reach their optimal condition, and that intervention can successfully re-increase the kaders' performance after it has already reached optimal condition.

## SUMMARY

### **MODEL FOR PREDICTING PERFORMANCE OPTIMALIZATION OF POSYANDU KADER AT BETUNG SUB-DISTRICT BANYUASIN DISTRICT SOUTH SUMATRA PROVINCE**

The role of Posyandu as part of the basic health need service provider system for improving the human resource quality, as an effort to provide basic health need and to improve community nutritional status, has already been well acknowledged. But, in general, the function and the performance of Posyandu has not been optimal, because there are a lot of in-active kader (community health volunteer), and a lot of drop-out kader. Some researcher also highlighted about the lack of skill of kaders in filling Kartu Menuju Sehat (Health Guide Card / KMS), and in conducting recording and reporting.

Ideally, kaders who are involved in Posyandu program should be selected based on the established criteria, but in the real practice this selection process can not be conducted because only limited number of people willing to be a kader, even frequently, the number of people who agree to be kaders are less than the actual amount required. So the actual condition in the field is not about how to select the people who want to be kaders, but how to persuade people so that they agree to be kaders, and to continue as kaders as long as possible.

Related to the above problems, and considering the lack of knowledge and skill of kaders, the success of Posyandu Program mostly depend on how much regular and continuous support and supervision the kaders receive from the Posyandu program manager and advisors. But the fact indicate that the support and supervision that the kader receive is very limited. As the result, the increase of kader's knowledge, attitude and practice (performance) have been occurring naturally without a systematic intervention from outside kaders. So far, there is no information about how fast and how big the changes occur.

This study is intended to build a model that is able to explain and predict the changes of kader's knowledge, attitude and performance (KAP), so that the Posyandu manager and supervisor can make required decision at the right time, without any delay.

This study was implemented in 4 phases: (1) the phase of conducting surveys on knowledge, attitude and performance twice, in one month interval, to the same Posyandu kaders, and by utilizing the same questionnaire and method, in order to get Markov chain model in matrices form, (2) the phase of assessing the accuracy of the matrices (evaluation phase) by comparing the matrices' prediction results with the third KAP survey result, (3) the phase of predicting the optimal (highest point) condition of Posyandu kaders' KAP by using the matrices, and (4) the phase of implementing intervention by conducting training of Posyandu kaders' knowledge and skill when the kaders' performance has achieved its optimal condition, in order to prove that by doing an intervention, the optimal condition can again be improved / increased.

The results of the study show that the Posyandu kaders' lowest score knowledge ( $n = 120$ ) is 5,69, whereas the highest score is 90,99 with the mean of 53,95, standard deviation of 17,46 and median of 55,11. The highest mean of the knowledge score achieved by kaders is the knowledge about Posyandu activities at table 3 (KMS filling table), whereas the lowest mean of the knowledge score is on the knowledge related to activities at table 5 (health services table) and table 1 (Posyandu members application

table). There are significant different between knowledge score of table 1 compared to table 2,3 and 4; between knowledge score of table 5 compared to table 2,3 and 4; and between knowledge score of table 2 compared to table 3 and 4.

There are no significant different between age of kaders, marital status, children belonging status, length of working as kader, occupational status, and monthly family income with their knowledge related to Posyandu. But there is a significant different between kaders' educational level with their knowledge related to Posyandu.

From the first survey, the kaders' attitude is already very good. In general 96% of kaders feel that the community support their existence and activities as kaders; 100% of kaders stated that the monthly babies' body weight weighting/measurement is really needed and must be conducted; 97,5% agree that pregnant women health education session is an important thing to be done; 100% support the important of Posyandu to be opened every month; and 100% of kaders confirmed that Posyandu is beneficial for community. During the next surveys the kaders attitude become better and better. It is believed that the conducted surveys were considered by kaders as a way of supporting and supervising their existence and their free of charge service provider as kaders. So they believe that their existence and the Posyandu are really needed by community and also important for government (including the Puskesmas), and lead to better attitude about the Posyandu activities that they routinely performed.

In general, the kaders' performance, which was assessed by checking the completeness and correctness of filling the Posyandu register book, KMS and KIA book, is really need to be improved. From the completeness point of view, sequentially, the most frequent register that was left blank (not filled in) by Posyandu is register 5 (Posyandu activities record) which is 88,9% or by 24 Posyandu, register 4 (material and equipment stock) which is 81,5% or 22 Posyandu, register 3 (the under-five nutritional status) which is 51,9% or 14 Posyandu, register 1 (Pregnant women record) which is 37,3% or 10 Posyandu, and register 2 (under-five body weight weighting) which is 7,4% or 1 Posyandu. Further more, from the correctness aspect, sequentially, the most frequent register that was correctly filled in by Posyandu is register 1 (Pregnant women record) which is 18,5% or 5 Posyandu, register 2 (under-five body weight weighting) which is 7,4% or 2 Posyandu, register 4 (material and equipment stock) which is 3,7% or 1 Posyandu. For register 3 (the under-five nutritional status) and register 5 (Posyandu activities record) no one of the Posyandu filled them fully correct.

No KMS that is not filled in by Posyandu, but only 3 Posyandu (11,1%) filled all items on the KMS completely, whereas the other 24 Posyandu filled in the KMS incompletely. Further more, from the correctness aspect, 22 Posyandu (81,5%) filled in the KMS correctly. The remaining 5 Posyandu made mistakes when putting the babies' body weight on the growth chart.

No KIA book that is not filled in by Posyandu, but there are 12 Posyandu (44,4%) filled in the KIA book incompletely. Further more, from the correctness aspect, 15 Posyandu (55,6%) filled in the KIA book correctly. The remaining 12 Posyandu made one or more mistakes.

From the first until third survey the results of performance category measurement are exactly the same, no change at all. There is no posyandu increase from bad category performance to moderate, and there is also no improvement from moderate to good

performance. On the other hand, there is no posyandu decrease from good category performance to moderate, or from moderate to bad performance.

After establishing the matrices of Markov chain model, assessed the accuracy of the model, and conducted intervention (training) to kaders when performance had reached optimal condition, this study can conclude that: (1) the accuracy of Markov chain model in predicting kaders' performance and knowledge are really very high with kappa value 100% for performance and 92,93% for knowledge, (2) training intervention given to the kaders when their performance has already reached optimal condition can successfully re-increase the kaders' performance, (3) The results of repeated surveys ( 3 times) with one month interval, using the same questionnaire and method, showed that knowledge and attitude increase consistently (an up ward change), (4) even though the third surveys confirmed that the kaders' performance has already reached optimal condition, but the result of previous study by other researcher showed that performance is also increase from time to time, (5) from the conclusion number 3 and 4 above, it is concluded that together, knowledge, attitude and performance consistent change following a spiral shape that spin up ward, until it reaches the optimal condition.

## **RINGKASAN** **MODEL PREDIKSI OPTIMALISASI KINERJA** **KADER POSYANDU DI KECAMATAN BETUNG** **KABUPATEN BANYUASIN PROPINSI SUMATERA SELATAN**

Peran Posyandu sebagai bagian dari sistem penyelenggaraan pelayanan kebutuhan kesehatan dasar bagi peningkatan kualitas SDM, dalam upaya pemenuhan kebutuhan kesehatan dasar dan peningkatan status gizi masyarakat, sudah diakui keberadaannya. Namun fungsi dan kinerja Posyandu secara umum masih belum menunjukkan hasil yang optimal, karena banyak kader yang kurang aktif atau tidak aktif dan kurang atau tidak baik kinerjanya, serta banyaknya kader yang memutuskan mengundurkan diri. Beberapa peneliti lainnya menggarisbawahi tentang keterampilan kader yang masih kurang dalam hal mengisi Kartu Menuju Sehat dan dalam melakukan pencatatan pelaporan.

Idealnya, kader yang terlibat dalam program posyandu harus diseleksi sesuai dengan syarat-syarat yang telah ditetapkan, namun dalam prakteknya hal ini tidak mungkin diterapkan karena mereka yang mau menjadi kader tidaklah banyak, bahkan sering terjadi kekurangan tenaga yang bersedia menjadi kader. Sehingga penerapan dilapangan bukanlah bagaimana melakukan seleksi terhadap warga yang ingin menjadi kader melainkan bagaimana membujuk warga agar mau menjadi dan mau terus bertahan sebagai kader.

Berkaitan dengan hal di atas, mengingat berbagai keterbatasan pengetahuan dan keterampilan yang dimiliki kader, maka keberhasilan program Posyandu sangat tergantung dari seberapa jauh upaya pelaksanaan tugas kader mendapatkan bimbingan dan dukungan yang teratur dan berkelanjutan dari pengelola dan pembina program Posyandu. Kenyataan dilapangan memperlihatkan bahwa bimbingan dan dukungan tersebut sangat kurang. Sehingga perubahan pengetahuan, sikap dan kinerja kader Posyandu sebagian besar berlangsung secara alamiah tanpa campur tangan secara sistimatis dari pihak-pihak diluar diri kader Posyandu itu sendiri. Sampai sejauh ini

belum ada informasi yang menjelaskan berapa cepat dan berapa besar perubahan tersebut terjadi. Penelitian ini bertujuan untuk mengembangkan sebuah model yang mampu menjelaskan dan memprediksi perubahan pengetahuan, sikap dan kinerja kader Posyandu tersebut, sehingga pengelola dan pembina Posyandu dapat mengambil keputusan yang diperlukan pada saat yang tepat dan tidak terlambat.

**Penelitian dilaksanakan dalam 4 tahap yaitu:** (1) tahap melakukan survei pengetahuan, sikap dan kinerja sebanyak 2 kali dalam selang waktu satu bulan, terhadap kader posyandu yang sama dan dengan menggunakan metode dan kuesioner yang sama, untuk mendapatkan model rantai Markov berupa matriks, (2) tahap menilai keakuratan matriks (tahap evaluasi) dengan cara membandingkan hasil prediksi matriks dengan hasil survei pengetahuan, sikap dan kinerja yang ketiga, (3) tahap memprediksi kondisi optimal (jenuh) pengetahuan, sikap dan kinerja kader Posyandu dengan menggunakan matriks, dan (4) tahap melakukan intervensi berupa pelatihan pengetahuan dan keterampilan terhadap kader Posyandu saat kinerja telah mencapai titik jenuh, untuk membuktikan bahwa dengan melakukan intervensi maka kondisi jenuh tersebut masih bisa ditingkatkan lagi. Dari hasil penelitian ( $n = 120$ ) didapatkan nilai pengetahuan kader posyandu yang terendah adalah 5,69 sedangkan nilai pengetahuan kader tertinggi adalah 90,99 dengan nilai rerata 53,95, simpangan baku sebesar 17,46 dan median 55,11. Rerata skor pengetahuan tertinggi yang didapatkan oleh kader adalah pada pengetahuan mengenai kegiatan posyandu di meja 3 (pengisian KMS), sedangkan skor pengetahuan terendah adalah pada pengetahuan yang berkaitan dengan kegiatan posyandu di meja 5 (pelayanan kesehatan) dan meja 1 (pendaftaran peserta). Terdapat perbedaan yang bermakna antara skor pengetahuan meja 1 dengan meja 2,3 dan 4; antara skor meja 5 dengan meja 2, 3 dan 4, serta antara skor meja 2 dengan meja 3 dan meja 4.

Tidak ada hubungan bermakna antara usia kader, status pernikahan, status kepemilikan anak, lamanya bertugas sebagai kader posyandu, status pekerjaan, serta penghasilan bulanan keluarga dengan skor pengetahuan mereka tentang kegiatan yang berkaitan dengan posyandu. Namun terdapat hubungan yang bermakna antara tingkat pendidikan kader dengan skor pengetahuan mereka mengenai kegiatan yang berkaitan dengan posyandu.

Mulai dari survei yang pertama sikap kader sudah sangat baik. Secara umum 96% kader merasa bahwa masyarakat mendukung keberadaan dan kegiatan mereka sebagai kader; 100% kader menyatakan bahwa penimbangan berat badan bayi setiap bulan memang perlu dan harus dilakukan; 97,5% setuju bahwa penyuluhan ibu hamil merupakan hal yang penting untuk dilakukan; 100% mendukung perlunya posyandu dibuka secara rutin setiap bulan; dan 100% kader menyatakan posyandu bermanfaat untuk masyarakat. Pada survei-survei berikutnya sikap kader terus menjadi lebih baik. Diperkirakan bahwa survei-survei yang dilakukan tersebut telah dianggap oleh para kader posyandu sebagai bentuk perhatian dan dukungan terhadap keberadaan dan pengabdian mereka. Sehingga timbul lagi keyakinan mereka bahwa keberadaan mereka dan posyandu memang bermanfaat bagi masyarakat dan penting bagi pemerintah (termasuk bagi puskesmas), dan dengan sendirinya membentuk sikap yang lebih baik terhadap kegiatan-kegiatan posyandu yang telah rutin mereka kerjakan.

Secara umum kinerja kader, yang dinilai dari kelengkapan dan kebenaran pengisian buku register posyandu, KMS dan Buku KIA masih sangat perlu untuk ditingkatkan. Dari segi kelengkapan, secara berturut-turut register yang paling banyak tidak diisi (dikosongkan) oleh posyandu adalah register 5 (catatan kegiatan) sebanyak 88,9% atau 24 posyandu, register 4 (persediaan alat dan bahan) sebanyak 81,5% atau 22 posyandu, register 3 (gizi balita) sebanyak 51,9% atau 14 posyandu, register 1 (ibu hamil) sebanyak 37,3% atau 10 posyandu, dan terakhir register 2 (penimbangan balita) sebanyak 3,7% atau 1 posyandu. Selanjutnya bila dilihat dari kebenaran pengisian, secara berturut-turut register yang paling banyak diisi secara benar oleh posyandu adalah register 1 (catatan ibu hamil) sebanyak 18,5% atau 5 posyandu, register 2 (penimbangan balita) sebanyak 7,4% atau 2 posyandu, register 4 (persediaan alat dan bahan) sebanyak 3,7% atau 1 posyandu. Sedangkan register 3 (gizi balita), dan register 5 (catatan kegiatan) tidak ada 1 posyandu pun yang melakukan pengisian dengan benar.

Tidak ada KMS yang tidak diisi oleh posyandu, namun dari semua yang diisi tersebut hanya terdapat 3 posyandu (11,1%) yang secara lengkap mengisi semua keterangan yang tertera dalam KMS tersebut, sedangkan 24 posyandu lainnya mengisi secara tidak lengkap. Selanjutnya, dari sisi kebenaran cara pengisian, 22 posyandu (81,5%) mengisi dengan benar. Sisanya yang 5 posyandu lagi ada kesalahan dalam pengisian berat badan pada grafik pertumbuhan.

Dari semua posyandu, tidak ada yang tidak mengisi buku KIA, namun terdapat 12 posyandu (44,4%) yang dalam pengisian buku KIA ada yang tidak lengkap. Dari sisi kebenaran cara pengisian, 15 posyandu (55,6%) mengisi dengan benar. Sisanya yang 12 posyandu lagi ada kesalahan dalam pengisian.

Dari survei pertama sampai survei yang ketiga hasil pengukuran kategori kinerja persis sama, tidak ada perubahan apapun dalam kinerja posyandu. Tidak ada satu pun posyandu yang kinerjanya berubah dari buruk menjadi sedang (apalagi menjadi baik), dan tidak ada juga yang dari sedang berubah menjadi baik. Begitu juga sebaliknya, tidak ada yang dari baik turun menjadi sedang, atau dari sedang turun menjadi buruk.

Setelah dilakukan pembuatan matriks Model Rantai Markov, menilai ketepatan model tersebut, dan melakukan intervensi (pelatihan) terhadap kinerja kader saat kinerja tersebut telah mencapai titik jenuhnya, maka penelitian ini dapat menyimpulkan bahwa (1) Ketepatan Model rantai *Markov* (*Markov chain model*) dalam memprediksi kinerja dan pengetahuan kader posyandu sangat tinggi dengan nilai kappa 100% untuk kinerja dan 92,93% untuk pengetahuan, (2) intervensi berupa pelatihan yang dilakukan terhadap kader yang kinerjanya telah mengalami titik jenuh, terbukti dapat meningkatkan kembali kinerja kader-kader tersebut, (3) hasil survei yang dilakukan sebanyak tiga kali berturut-turut selama selang waktu yang sama, dengan kuesioner dan metode survei yang sama, memperlihatkan bahwa pengetahuan dan sikap secara konsisten terus meningkat (perubahan kearah atas), (4) walaupun pada survei yang ketiga diketahui bahwa kinerja kader posyandu telah berada dalam kondisi jenuh, namun dari hasil studi sebelumnya oleh peneliti lain menunjukkan bahwa kinerja juga dari waktu ke waktu terus meningkat, (5) dari kesimpulan 3 dan 4 di atas, dapat disimpulkan bahwa, secara bersama-sama, pengetahuan, sikap dan kinerja berubah mengikuti suatu bentuk spiral yang terus berputar ke atas, sampai akhirnya mencapai titik jenuhnya.