Journal Kesmas Prima Indonesia
Vol. 10 No. 2 Juli 2026
E-ISSN: 2721-110X

The Role of Posyandu Cadres in the Integrated Implementation of Specific and Sensitive Nutrition Interventions for Stunting Reduction at the South Pekalongan Health Center

Chelsy Rachel Dwindasari[1], Yuniarti[2], Dewi Nugraheni Restu Mastuti[3]
Pekalongan University
chelsyrachell11@gmail.com

ABSTRACT

Stunting remains a major nutritional challenge in Indonesia. The South Pekalongan Health Center recorded a stunting prevalence of 7.70% in early 2025, highlighting the need for integrated specific and sensitive nutrition interventions involving multiple stakeholders, including *posyandu* cadres. This study aimed to analyze the role of *posyandu* cadres in implementing integrated nutrition interventions to reduce stunting. A qualitative descriptive approach was employed using in-depth interviews, observations, and documentation. Data were analyzed using the Health Belief Model (HBM), focusing on self-efficacy and perceived barriers, alongside Edward III's policy implementation theory emphasizing communication and resources. The findings indicate that the role of *posyandu* cadres has generally been effective but remains suboptimal. Several cadres reported limited confidence in performing certain responsibilities, while high workloads and low community participation hindered program implementation. Communication challenges, including occasional miscommunication among stakeholders, also affected service delivery. In addition, limited human resources due to increasing program demands and budget efficiency measures constrained program optimization. Strengthening cadre capacity, improving communication, increasing community participation, and ensuring adequate resource allocation are essential to enhance the effectiveness of integrated nutrition interventions and accelerate stunting reduction efforts.

Keywords: Posyandu Cadres, Specific and Sensitive Nutrition Interventions, Stunting.

INTRODUCTION

Stunting is still one of the chronic nutrition problems that is a global health challenge, including in Indonesia. This condition occurs due to malnutrition that lasts for a long time, thus hindering the growth and development of children. By 2024, it is estimated that as many as 150.2 million children under five in the world will experience stunting with a global prevalence of 23.2%, of which most cases are in Africa and Asia. The impact of

stunting not only affects physical growth, but also cognitive development, the quality of human resources, and economic productivity in the future (Asmawanti et al., 2022).

In Indonesia, the prevalence of stunting based on the Indonesian Nutrition Status Survey (SSGI) in 2024 is 19.8%, decreasing compared to 2022 which reached 24.4%, but is still above the national target. To accelerate the reduction of stunting, the government established Presidential Regulation Number 72 of 2021 and implemented various interventions, such as supplementary feeding, growth monitoring, nutrition education, improving sanitation, providing clean water, and strengthening health services through cross-sector collaboration (Rahman et al., 2023).

In Central Java Province, the prevalence of stunting in 2024 will be 17.1%, while Pekalongan City will reach 19.3%, so it is still above the national target of 14%. Based on a preliminary survey at the Pekalongan City Health Office, the South Pekalongan Health Center ranks third with the highest number of stunting cases, which is 140 cases. This condition shows the need to strengthen specific nutritional interventions from the health sector and sensitive nutrition interventions involving sectors outside of health as an effort to accelerate the reduction of stunting in a sustainable manner (SSGI, 2024).

The success of the implementation of nutritional interventions is greatly influenced by the role of posyandu cadres as the spearhead of public health services. Cadres play a role in conducting early detection, counseling, mentoring mothers under five, and being a liaison between health workers and the community. In the work area of the South Pekalongan Health Center, there are 202 cadres spread across 36 posyandu with a target of nearly 2,000 toddlers. However, various problems are still found, including low consumption of blood-boosting tablets, low coverage of weighing toddlers, and suboptimal achievement of healthy household indicators in several urban villages (Nugraheni et al., 2023).

The results of the preliminary survey show that various programs to accelerate stunting reduction have been implemented, including the distribution of blood supplement tablets, anemia surveys, posyandu services, health screening, nutrition education, local supplementary feeding, as well as the promotion of sanitation and PHBS. However, its implementation still faces various obstacles, such as differences in the ability and confidence of cadres, low community participation, suboptimal parenting, communication constraints, budget limitations, increasing workload of cadres, and suboptimal use of facilities and infrastructure. These obstacles show that the success of the program is not

only determined by the implementation of activities, but also by the readiness of human resources and environmental support.

Based on the Health Belief Model (HBM**) theory**, self-efficacy factors and perceived barriers affect the ability of cadres to carry out their roles, while Edward III's policy implementation theory emphasizes the importance of communication and the availability of resources in the success of the program. Until now, most studies have addressed nutrition interventions separately and using a single theoretical approach, so they have not provided a comprehensive picture of the implementation of specific and sensitive nutrition interventions in an integrated manner. Therefore, this study was conducted to analyze the role of posyandu cadres in the integrated implementation of specific and sensitive nutritional interventions and the factors that affect them in the working area of the South Pekalongan Health Center.

METHODS

This study uses a qualitative approach with a descriptive design to explore the role of posyandu cadres in the implementation of specific and sensitive nutrition interventions as an effort to reduce stunting in the working area of the South Pekalongan Health Center, Pekalongan City. The research refers to the Health Belief Model theory which focuses on aspects of self-efficacy and perceived barriers, as well as the theory of the implementation of Edward III's policy which focuses on communication and resources. Informants were selected using purposive sampling techniques based on direct involvement in the implementation of the program, which included posyandu cadres as the main informants, nutrition officers, cadre coordinators or midwives as supporting informants, as well as nutrition officers, health promotion officers of the Pekalongan City Health Office, and village heads as triangulation informants. Data collection was carried out until it reached data saturation, with the number of informants estimated at 10 people.

Data collection was carried out through semi-structured in-depth interviews, non-participatory observations, and documentation studies. The interview was conducted using interview guidelines prepared based on the framework of research theory, equipped with probing techniques to dig deeper information about experiences, obstacles, communication, and the implementation of the role of posyandu cadres. Observations are carried out in posyandu activities to observe the implementation of specific and sensitive nutritional interventions, while documentation is used to complete the data through the

review of activity reports, stunting data, operational standards procedures, policies, and other supporting documents. The validity of the data is maintained through source triangulation, method triangulation, and peer debriefing.
The main instrument in this study is the researcher (human instrument), which is supported by interview guidelines, observation guidelines, documentation sheets, field notes, and recording devices. The focus of exploration includes the role of posyandu cadres in the implementation of specific and sensitive nutrition interventions, self-efficacy, perceived barriers, communication, and resources. Data was analyzed using thematic analysis through the stages of transcription, *coding*, category grouping, theme preparation, interpretation, and presentation of research results in the form of narratives supported by informant citations.

RESULTS

Based on the research results, the following results were obtained:

The Role of Posyandu Cadres in the Implementation of Specific and Sensitive Nutrition Interventions

Based on the results of the research, posyandu cadres have a strategic role in the implementation of specific and sensitive nutritional interventions to reduce stunting in the working area of the South Pekalongan Health Center. Cadres play the role of implementing posyandu services through weighing and measuring activities for toddlers, growth monitoring, recording, providing health education, distribution and manufacture of additional foods (PMT), as well as early detection of toddlers at risk of stunting. In addition, cadres also contribute to sensitive nutrition interventions through clean and healthy living behavior education (PHBS), parenting, assistance for at-risk families, and the delivery of health information to the community. This role is in line with the provisions of Permendagri Number 13 of 2024 which affirms the function of cadres in service, education, monitoring, and community mobilization, and is supported by research by Sarwoko et al. (2024) and Julianti et al. (2021) which shows that the proximity of cadres to the community makes them an effective liaison between health workers and program targets. Therefore, optimizing cadre capacity through training, coaching, and cross-sector support is an important factor to increase the effectiveness of the implementation of the stunting reduction acceleration program (Permendagri No. 13 of 2024).

Self-Efficacy

Based on the results of the study, the self-efficacy aspect of posyandu cadres in the implementation of specific and sensitive nutritional interventions in the work area of the South Pekalongan Health Center is quite good. Cadres generally have self-confidence in carrying out weighing and measuring toddlers, growth monitoring, health education, and family assistance as part of efforts to reduce stunting. According to the Health Belief Model (HBM) theory, self-efficacy is a factor that affects an individual's ability to carry out health behaviors, so that cadres who have adequate experience, knowledge, and skills tend to be more confident in carrying out their duties. However, some cadres still experience doubts when facing a society that is less cooperative, providing counseling materials beyond their competence, and as a result of the uneven training received. These findings are in line with the research of Hendrawati et al. (2025) which shows that the experience and involvement of cadres in posyandu activities contribute to increasing self-efficacy. Therefore, continuous training and coaching is needed to increase the confidence and capacity of cadres in supporting the success of stunting reduction programs.

Perceived Barriers

Based on the results of the study, the perceived barriers aspect shows that posyandu cadres still face various obstacles in the implementation of specific and sensitive nutritional interventions to reduce stunting, both from internal and external factors. The main obstacles include low community participation in posyandu activities, lack of public acceptance of the education provided by cadres, limited budget, as well as workload and time constraints that have an impact on the implementation of mentoring and monitoring activities. According to the Health Belief Model (HBM) theory, the perception of obstacles can affect the implementation of health behaviors, so that this condition has the potential to reduce the optimization of the role of cadres. This finding is in line with research by Rianda et al. (2023) which shows that the low participation of mothers under five in posyandu activities is influenced by a lack of knowledge and family support. Therefore, efforts are needed to increase community participation, strengthen health education, and increase support from health workers and across sectors so that the implementation of stunting reduction programs can run more effectively and sustainably (Wardani & Harumi, 2022).

Communication

Based on the results of the study, the communication aspect in the implementation of specific and sensitive nutritional interventions to reduce stunting at the South Pekalongan Health Center has gone quite well through coordination between the Health Office, Health Centers, urban villages, posyandu cadres, and the community. Communication is carried out directly through coordination meetings, meetings, and posyandu activities, as well as indirectly through digital media such as WhatsApp as a form of adjustment to budget limitations. According to Edward III's implementation theory, effective communication is an important factor in supporting the success of policy implementation because it facilitates coordination and delivery of information to all program implementers. These findings are in line with the research of Harahap et al. (2025) which states that the success of stunting prevention programs is influenced by effective communication of cadres through various media according to the needs of the community. Therefore, strengthening sustainable communication and coordination is still needed to increase the effectiveness of the implementation of stunting reduction programs (Anasa et al., 2024).

Resources

Based on the results of the study, the resource aspect in the implementation of specific and sensitive nutritional interventions to reduce stunting at the South Pekalongan Health Center has generally supported the implementation of the program, although there are still some limitations. Based on Edward III's implementation theory, the availability of resources in the form of human resources, infrastructure, training, authority, and budget are important factors that determine the success of policy implementation (Anasa et al., 2024). The results of the study show that the infrastructure and the number of cadres in general are adequate, and supported by funding from various parties for posyandu activities and supplementary feeding (PMT). However, obstacles were still found in the form of damage to several facilities, uneven training, additional cadre workload, and budget limitations due to efficiency that had an impact on program maintenance and operations. These findings are in line with research by Harahap et al. (2025) which states that resource support, training, and funding play an important role in increasing the effectiveness of stunting prevention program implementation. Therefore, sustainable resource optimization is still needed so that the implementation of stunting reduction programs can run more effectively and sustainably (Harahap et al., 2025).

DISCUSSION

Posyandu cadres have a strategic role in the implementation of specific and sensitive nutritional interventions to reduce stunting in the working area of the South Pekalongan Health Center. Cadres play a role in monitoring the growth of toddlers, anthropometric measurements, recording, supplementary feeding (PMT), nutrition education, promotion of clean and healthy living behaviors (PHBS), and assistance to at-risk families. This role is in line with Permendagri Number 13 of 2024 and is supported by previous research that shows that the closeness of cadres to the community makes them an effective liaison between health workers and program targets. From the aspect of self-efficacy, most cadres have good self-confidence in carrying out their duties based on their experience and knowledge. However, there are still cadres who lack confidence when facing a less cooperative society or when delivering material outside their competence, so continuous training and coaching are still needed to increase the capacity of cadres (Hendrawati et al., 2025).

The perceived barriers aspect shows that the implementation of the program still faces various obstacles, both from external and internal factors. The main obstacles include low community participation in posyandu activities, lack of acceptance of education provided by cadres, limited budget, as well as workload and time constraints due to the addition of programs. This condition has the potential to reduce the optimization of the role of cadres in supporting stunting reduction programs. Therefore, increasing community participation, strengthening health education, and cross-sectoral support are necessary efforts to minimize obstacles and increase the effectiveness of program implementation (Wardani & Harumi, 2022).

From the implementation aspect, communication and resources in general have supported the implementation of stunting reduction programs. Coordination between the Health Office, Puskesmas, sub-districts, posyandu cadres, and the community takes place through direct meetings and digital media, making it easier to deliver information and coordinate programs. In addition, the availability of infrastructure, the number of cadres, training, and budget support is considered quite adequate even though obstacles are still found in the form of damage to several facilities, uneven training, and budget limitations due to efficiency. As per Edward III's implementation theory, effective communication and adequate resources are important factors in the successful implementation of the policy. Therefore, strengthening coordination, increasing cadre capacity, and optimizing resource

support needs to be carried out on an ongoing basis so that the implementation of specific and sensitive nutrition interventions can be more effective in supporting the acceleration of stunting reduction (Anasa et al., 2024).

CONCLUSION

Based on the results of the study, the implementation of specific and sensitive nutritional interventions to reduce stunting in the working area of the South Pekalongan Health Center has generally gone well. Posyandu cadres play an important role in collecting target data, weighing and measuring toddlers, recording, counseling on clean and healthy living behaviors (PHBS), home visits, growth monitoring, and being a liaison between the community and the Health Center, the Health Office, and the village government. The aspect of cadre self-efficacy is classified as good because it is supported by experience, knowledge, training, and mentoring, although some cadres still lack confidence in counseling and communication activities. On the other hand, program implementation still faces various barriers (perceived barriers), such as low community participation, overlapping program schedules, budget limitations, differences in cadre capacity, and obstacles in facilities and infrastructure. Nevertheless, communication between program implementers has been quite effective through direct coordination and digital media, so that various obstacles can be overcome through cross-sector coordination and cooperation. In addition, the available resources, including the number of cadres, infrastructure, training, and budget support, have generally supported the implementation of the program, although there is still a need to improve the equitable distribution of training, maintain facilities, optimize budget, and strengthen community participation so that the implementation of the stunting reduction program can run more effectively and sustainably.

REFERENCES

Anasa, Y., Kurnia, I., Salingkat, S. (2024). Implementation of Stunting Prevention Programs in Enu Village, Sinduk District, Donggala Regency. *Journal of Publicity Studies*, 1(1).

Asmawanti, D., Sari, N., Fitranita, V., Hidayat, W. (2022). Prevention Health Socialization Stunting and Malnutrition in Pregnant Women and Baduta in Tanjung Jaya Kota Village Bengkulu. *In Journal of Community Empowerment*, 1(1).

Audit Board of the Republic of Indonesia. (2024). *Regulation of the Minister of Home Affairs Number 13 of 2024 concerning Integrated Service Posts*. https://share.google/K3PAXT8kPijVWfRqq. Retrieved June 24, 2026.

Harahap, T., Wibowo, A. (2025). Communication Strategy of Posyandu Cadres in Handling Stunting in Tengklik Village, Gunungkidul Regency, 8(2).

Hendrawati, S., Suzana, H., Triana, V. (2025). Looking at the Self-Efficacy of Posyandu Cadres in Promotive and Preventive Stunting Efforts. *Indonesian Journal of Nursing Health Science ISSN*, *10*(1), 34–47.

Ministry of Health of the Republic of Indonesia. (2024.) Indonesia's Nutrition Status Survey 2024 In Numbers. *SSGI 2024 Drafting Team in Numbers*.

Nugraheni, N., & Malik, A. (2021). The Role of Posyandu Cadres in Preventing Stunting Cases in Ngijo Village, Semarang City. Lifelong Education Journal, 3(1). https://journal.imadiklus.or.id/index.php/lej

Rahman, H., Rahmah, M., Saribulan, N. (2023). Efforts to Handle Stunting in Indonesia. *Journal of Equatorial Voice Government*, (01), 44–59.

Wardani, N., Harumi, A. (2022). Analysis of Perceived Benefits and Perceived Barriers On the Behavior of Mothers of Toddlers in Stunting Prevention Based on Health Theory Belief Model. *Malahayati Nursing Journal, 4*(3), 556–563.