

PENGEMBANGAN KAPASITAS KADER SEBAGAI UPAYA DUKUNGAN MANAJEMEN TERPADU BALITA SAKIT BERBASIS MASYARAKAT DI KABUPATEN BANYUMAS

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Abstrak

Latar belakang: Petugas kesehatan dari puskesmas belum optimal menjangkau pelayanan anak sakit ke seluruh masyarakat. Peluang jumlah kader aktif memungkinkan melibatkan kader. Peran kader di masyarakat baru sebatas kegiatan penimbangan balita di posyandu balita setiap bulan. Kapasitas kader perlu ditingkatkan untuk kompetensi tata laksana anak sakit.

Tujuan: Kapasitas kader bertambah dalam tata laksana anak sakit di masyarakat, dan diketahui respon masyarakat terhadap penambahan peran kader.

Metode: *Mixed methods* dengan rancangan eksperimental, tahap pertama kuantitatif untuk menganalisis pengetahuan dan kompetensi kader, dilanjutkan analisis kualitatif untuk mengetahui respon masyarakat terhadap penambahan kapasitas kader dalam tata laksana anak sakit. Desain studi *randomized controlled trials*. Sampel kader berjumlah 50 pada kelompok intervensi dan 50 pada kelompok kontrol. Informan untuk mengetahui respon masyarakat, dari sepuluh kader, empat petugas puskesmas, dan 20 warga. Variabel meliputi pengetahuan tentang kapasitas kader, kompetensi kader, respon masyarakat dan ketercapaian pelayanan anak sakit di masyarakat. Analisis data kuantitatif dengan *paired t-test*, *independent t-test*, dan kualitatif dengan analisis *semantic relationship QDA*.

Hasil: Peningkatan pengetahuan pada kelompok intervensi lebih baik ($I=14,42/K=4,44/p\text{-value } 0,001$). Kelompok intervensi lebih kompeten dalam tata laksana anak sakit ($p\text{-value } 0,001$). Masyarakat menerima penambahan peran kader, petugas kesehatan terbantu dengan peran kader, kasus terdeteksi lebih dini, kader lebih percaya diri melaksanakan tugas, dan pelayanan menjangkau lebih luas.

Kesimpulan: Pengetahuan dan kompetensi kader meningkat dalam tata laksana anak sakit. Penambahan peran kader tentang tata laksana anak sakit, menghasilkan respon yang baik dari masyarakat dan petugas kesehatan. Rekomendasi, hendaknya ditindaklanjuti untuk penerapan tata laksana anak sakit di wilayah puskesmas yang lain oleh dinas kesehatan.

Kata kunci: kader, tata laksana anak sakit, masyarakat

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CAPACITY BUILDING OF CADRE AS SUPPORTED INTEGRATED MANAGEMENT CHILD ILLNESS TO COMMUNITY IN BANYUMAS DISTRICT

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Abstract

Background: Health workers from community health centered are not optimally reaching the sick child's service to the whole community. Opportunity of the number of active cadres allows involving cadres. The role of cadres in the community is limited to the weighing activities of children under five in *posyandu* every month. The capacity of the cadre needs to be improved for the competency of the child illness management.

Objective: The capacity of cadres increases in the management of child illness in the community, and known to the community response to the addition of the cadre's role.

Method: Mixed methods with experimental design, quantitative first step to analyze knowledge and competence of cadres, followed by qualitative analysis to know the community response of the addition of cadre capacity in the management child illness. Study design of randomized controlled trials. The cadre sample was 50 in the intervention group and 50 in the control group. Informants to know the response of the community are ten cadres, four health workers, and 20 mother. Variables include knowledge about cadre capacity, cadre competency, community response, and achievement of child illness services in the community. Analysis of quantitative data with paired t-test, independent t-test, and qualitative with semantic relationship QDA analysis.

Result: Improved knowledge in the intervention group was better (I=14.42/C=4.44/p-value 0.001). The intervention group was more competent in the management of child illness (p-value 0.001). The community received additional role of cadres, health workers assisted by the role of cadres, cases detected earlier, cadres more confident to carry out the task, and services reach a wider range.

Conclusion: The knowledge and competence of cadres increases in the management of child illness. The addition of the cadre's role on the management of child illness, resulting in a good response from the community and health workers. Recommendation, should be followed up for the implementation of the management of child illness in other health centers by the health department.

Keywords: cadre, child illness management, community

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