

The Effectiveness of Education on the Implementation of Village Standby on the Motivation and Activity of Kader

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The Effectiveness of Education on the Implementation of Village Standby on the Motivation and Activity of Kader in Batuputih District Sumenep

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ABSTRACT

Currently, there is an increase in health problems, including the high death rate plus the emergence of various disasters that have often happened to our country in the last period. The purpose of this study was to analyze the effect of education on the implementation of village alert on the motivation and activity of cadres in Batuputih District, Sumenep Regency. The design of this research is an observational quantitative study with a cross sectional approach with the focus of the research being directed at analyzing the effect of education about the implementation of the standby village on the motivation and activity of cadres in Batuputih District, Sumenep Regency. The total population is 142 respondents and a sample of 105 respondents is taken by using Simple Random Sampling technique. The findings showed that almost half of the respondents before being given education had a moderate category of motivation of 46 respondents (44%), while after being given education almost half of respondents had a high category of motivation of 49 respondents (47%). Most of the respondents before being given education did not have an active number of 74 respondents (70%), while after being given education most of the respondents had an activity of 62 respondents (52%). Based on the results of the Paired T-Test analysis, it shows that the p-value is $0.000 < 0.05$, so H_0 is rejected and H_1 is accepted, so it can be concluded that there is an effect of education on the implementation of the standby village on the motivation and activity of cadres in Batuputih District, Sumenep Regency.

Keywords: active, alert, education, motivational village.

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INTRODUCTION

Currently, there is an increase in health problems, including the high death rate plus the emergence of various disasters that have often happened to our country in the last period. Given the importance of the above health problems, the government through the Ministry of Health issues a program that is expected to overcome health problems and facilitate the acceleration of achieving the highest possible health status for the entire population by developing preparedness at the village level or known as the standby village (Hardito, 2015).

The Ministry of Health of the Republic of Indonesia has a vision of "Independent Society for Healthy Living" and the mission of "Making People Healthy". The vision and mission of the Ministry of Health of the Republic of Indonesia make the province of East Java to further improve the welfare of its people, especially in terms of health, namely to form standby villages according to the authority and responsibility of each city or district. Alert village activities in all cities or districts in Indonesia, refer to the Minimum Service Standards (SPM) which targets 80% of standby villages to be active by 2020 (Menkes RI, 2013). In Java Timur there are 29 districts and 9 cities, one of which is Sumenep district. Sumenep Regency consists of 27 sub-districts, 4 sub-districts, and 330 villages, 80 of them have become standby villages, one of which is in the Batuputih sub-district.

Maternal Mortality Rate (MMR) due to pregnancy, childbirth, and postpartum in Batuputih District in 2012 reached 85/100,000 live births; in 2013 increased to 243/100,000 live births; and in 2014 it decreased to 0/100,000 live births (Dinkes Kab. Sumenep, 2014). Meanwhile, in 2015, the temporary MMR obtained was 0/100,000 live births. This situation encourages Batuputih sub-district to maintain and improve the implementation of the village alert program. Batuputih District has 19 villages. (Sumenep District Health Office, 2015).

Based on the results of a preliminary survey conducted by researchers on October 4, 2020 in Batu Putih District, it was found that there was a problem, namely the lack of education and training so that the motivation and abilities of the cadres were limited, causing the activity of cadres to decrease, but some health cadres still persisted in their work to be able to participate in village development.

A village has become an alert village if it has at least one village health post (Poskesdes). Its services include promotive, preventive, and curative efforts carried out by health workers (especially midwives) by involving cadres or other voluntary workers (Wijayanto, 2014).

The implementation of standby village programs requires cooperation from several related parties including village officials, community leaders, health cadres, youth, NGOs, and all members of the community in general. Health cadres are the implementers of the standby village program. Health cadres who are active in carrying out their duties well can be an indicator of the success of developing the standby village program (Syafrodin, Hamidah, 2014).

Health cadres have a very complex job, the cadre's task in developing an alert village is to mobilize the community in terms of: clean and healthy living behavior, observing health problems in the village, environmental health efforts, improving the health of mothers, babies and toddlers, correctional levels, and community preparation for disasters (Iggra, 2012).

Given the many and varied tasks of health cadres in the development of standby villages, it is very important to provide insight, knowledge and skills in the form of training and incentives for the smooth work of cadres in carrying out their duties and it is hoped that high motivation and activity will grow in carrying out the tasks they carry out. Based on the above conditions, the authors are interested in researching the effectiveness of education about the implementation of the alert village on the motivation and activity of cadres in Batuputih District, Sumenep Regency.

MATERIALS AND METHODS

In this study, the researcher used an observational quantitative design with a cross sectional approach, which is a study to study the dynamics of the correlation between risk factors and effects, by approaching, observing or collecting data at once (point time approach), meaning that each subject The study was observed only once and measurements were made on the status of the character or variable of the subject at the time of examination. This does not mean that all research subjects are observed at the same time (Soekidjo, 2012). This research will analyze the effect of education on the implementation of the standby village on the motivation and activity of cadres in Batuputih District, Sumenep Regency. The total population is 142 respondents and a sample of 105 respondents is taken by using Simple Random Sampling technique. Analysis of the data using the Paired Simple T-Test. This research has gone through the ethical test phase with the SK number: 2285/KEPK/III/2021.

RESULT

Table 1. Paired T-Test : statistical test results the effectiveness of providing health education using flipchart and video media on preventing early stunting on the knowledge of mothers under five at the Sumberpetung Posyandu, Sempu Village, Nganjuk District, Kediri Regency.

Category	Category	mean	Sample	Sig.
Motivation	Motivation before	5.02	105	0.000
	Motivation After	7.11	105	
Activity	Prior activity	6.39	105	0.010
	Activity After	8.87	105	

a. Motivation

Based on the results of the Paired T-Test : analysis This shows that the p-value is $0.000 < 0.05$, so H_0 is rejected and H_1 is accepted, so it can be concluded that there is an effect of education on the implementation of the standby village on the motivation of cadres in Batuputih District, Sumenep Regency.

b. Activity

Based on the results of the Paired T-Test : analysis This shows that the p-value is $0.010 < 0.05$, then H_0 is rejected and H_1 is accepted. So it can be concluded that there is an effect of education on the implementation of the standby village on the activity of cadres in Batuputih District, Sumenep Regency.

DISCUSSION

Cadre motivation in implementing desa siaga in batuputih subdistrict, sumenep regency before and after interventions are given

The results showed that before the intervention was given, almost half of the respondents had moderate motivation, 46 respondents (44%). In addition, 25 respondents (33%) have low motivation. And a number of 24 respondents (23%) have high motivation. Meanwhile, after the intervention, almost half of the respondents had high motivation, a total of 49 respondents (47%). In addition, 44 respondents (42%) have moderate motivation. And a number of 12 respondents (11%) have low motivation.

Motivation is what causes and supports a person. According to Maslow (2010) in Sunaryo (2013), individuals will be motivated to fulfill what needs are strongest in themselves at a certain time. If it is said that the emergence of a person's behavior at any given moment is determined by a need that has high power then it is important for every manager to have knowledge of the needs that are felt to be most important to their subordinates.

According to Ngain Purwanto (2010) Motivation is everything that encourages someone to do something. Motivation is to provide a stimulus or impetus or an excitement to a person or group to want to work properly and enthusiastically. With its ability to achieve goals in an efficient and effective manner (Wiyono D, 2012).

Meanwhile, Terry GR, provides a definition of motivation is the desire contained in an individual who stimulates him to take actions. According to Ishak Asep (2013) motivation is something basic, which encourages someone to work.

According to Sutarya in a psychology book for nursing (2013), motivation is the desire and need of the individual, to motivate the individual to fulfill his needs and direct behavior towards everything he is aiming for. According to Nancy Stevenson (2011) motivation is all verbal, physical, or psychological things that make someone do something in response. And according to Suwarno, sw (2010) motivation refers to the movement process, including encouraging situations that arise from within the individual, behavior evoked by the situation and the ultimate goal of the movement or action.

According to researchers, motivation is something that must exist in every human being so that they can do things as well as possible. With high motivation someone wants to work, because of the encouragement of various needs. The need is tiered or tiered if one basic need has been met, it will increase to a higher need and so on. Based on the results of the study, it was found that before being given education, there were still many standby village cadres who had low motivation where this was

due to a lot of ignorance of cadres on how to do a good and correct standby village and also because of a lack of interest in contributing to the standby village.

Cadre activity in the implementation of desa siaga in batuputih district, sumenep regency before and after the intervention is given

The results showed that before the intervention was given, most of the respondents did not actively carry out the standby village, 74 respondents (70%). And a total of 31 respondents (30%) are actively implementing village alerts. Meanwhile, after the intervention, most of the respondents were active in implementing the standby village, a total of 62 respondents (59%). And a total of 43 respondents (41%) are not actively implementing village alerts.

Cadres come from the community, are chosen by the community itself and cooperate voluntarily. In general, the term health cadres are cadres chosen by the community to be the organizers of health activities. According to LA Gunawan (2013), there are limits on health cadres where health cadres are also called village health promoters (prokes) are voluntary workers chosen by the community and tasked with developing the community. In addition, according to the Indonesian Ministry of Health (2014) provides a cadre limit, namely cadres are local community members who are selected and reviewed by the community and can work voluntarily.

Activeness comes from the word active which means active, persistent, dynamic and powerful or as opposed to static or sluggish and has a tendency to spread or develop (Suharno and Retnoningsih, 2015). Activity is a behavior that can be seen from the regularity and involvement of a person to be active in activities. Cadre activity is a real behavior or action that can be seen from the regularity and involvement of a cadre in various activities, both internal and external activities. According to Suryani (2013) Behavior is the action of the individual against the reaction of the relationship with the environment. In this regard, one of the problems is how to shape the behavior as expected.

The implementation of village alert programs requires cooperation from several related parties including village officials, community leaders, health cadres, youth, NGOs, and all members of the community in general. (Syafrudin, Hamidah, 2014). Health cadres are implementing village alert programs. Health cadres who are active in carrying out their duties well can be an indicator of the success of developing the standby village program (Syafrudin, Hamidah, 2014).

According to researchers on the activity of health cadres, it can be assumed that active health cadres carry out their duties properly in accordance with their authorities and responsibilities, so these health cadres are included in the active category. However, if the health cadres are unable to carry out their duties, they are classified as inactive. The activeness of health cadres is expected to help the success of the standby village program. Based on the results of the study, it was found that before being given education, most of the respondents were not actively carrying out village standby activities, then after being given health education and observations, it could be seen that there was an increase where most of the respondents were active in carrying out village alert activities.

The effect of education on the implementation of desa siaga on the motivation of cadres in batuputih district, sumenep regency

Based on the results of the Paired T-Test analysis This shows that the p-value is $0.000 < 0.05$, so H_0 is rejected and H_1 is accepted, so it can be concluded that there is an effect of education on the implementation of the standby village on the motivation of cadres in Batuputih District, Sumenep Regency.

The National Development Vision 2005-2025 is an Indonesia that is Independent, Advanced, Just and Prosperous. So to support the achievement of this vision, the Ministry of Health has set a vision for health development for 2010-2014, namely "Healthy Community that is Independent and Just". In an effort to achieve the vision and mission, the Ministry of Health sets out a strategy, one of which is empowering the community, private sector, and civil society in health development through national and global collaboration. The development of Desa Siaga or Kelurahan Siaga is one form of strategy to realize a healthy, independent and just Indonesia (Ministry of Health, 2013).

Village development efforts are carried out to improve the quality of the Desa or Kelurahan Siaga, so that revitalization is carried out. This revitalization aims to accelerate the achievement of targets that must be achieved in 2015, namely 80% of villages or urban villages in Indonesia to become Active Alert Villages or Villages. This is stated in the Regulation based on the Decree of the Minister

of Health No: 1529 / Munkes / SK / X / 2010 concerning **General Guidelines for the Development of Active Alert Villages and Sub-districts** (Ministry of Health RI, 2013).

Desa/Kelurahan Siaga is a picture of a community that is aware, willing and able to prevent and overcome various health problems that occur in the community such as malnutrition, the emergence of infectious diseases and diseases that have the potential to cause (Extraordinary Events (KLB), natural disasters, accidents and other. The role of the community in utilizing local potential, so that a culture of mutual cooperation is established. The development of the Alert Village/Kelurahan includes efforts to bring basic health services closer to the community in the village/kelurahan, making the community ready to face health problems, increasing community independence in implementing clean and healthy living behaviors (Ministry of Health, 2010).

High motivation from cadres in developing Desa/Kelurahan Siaga is needed, especially in mobilizing and encouraging the community to implement clean and healthy living behaviors, recognizing health problems in the village, making environmental health efforts, improving the health of mothers, infants and toddlers, promoting levels of health, and preparing communities in the face of natural disasters. One of the keys to the success and sustainability of the Active Alert Village/Kelurahan is the activeness of the cadres. Therefore, there is a need for efforts to develop coaching to meet the needs of cadres so that drop outs do not occur (Ministry of Health RI, 2012).

According to the researcher, by giving a stimulus or additional knowledge to a cadre, it can increase that person's knowledge so that he can have a higher motivation to be able to carry out productive activities such as village alert activities. By providing education, many health cadres are more motivated to be able to contribute more to village alert activities and hope to do better in the future. Where this is in accordance with the results of research conducted by researchers, namely the existence of a significant influence given education about the implementation of the alert village on the motivation of cadres in Batuputih District, Sumenop Regency.

The effect of education on the implementation of desa siaga on cadre activities in batuputih district, sumenop regency

Based on the results of the Paired T-Test analysis This shows that the p-value is $0.010 < 0.05$, then **H_0 is rejected and H_1 is accepted**. So it can be concluded that there is an effect of education on the implementation of the standby village on the activity of cadres in Batuputih District, Sumenop Regency.

Currently, there is an increase in health problems, including the high death rate plus the emergence of various disasters that have often happened to our country in the last period. Given the importance of the above health problems, the government through the Ministry of Health issues a program that is expected to overcome health problems and facilitate the acceleration of achieving the highest possible health status for the entire population by developing preparedness at the village level or known as the standby village (Hardito, 2015).

A village has become an alert village if it has at least one village health post (Poskesdes). Its services include promotive, preventive, and curative efforts carried out by health workers (especially midwives) by involving cadres or other voluntary workers (Wijayanto, 2014).

The implementation of standby village programs requires cooperation from several related parties including village officials, community leaders, health cadres, youth, NGOs, and all members of the community in general. Health cadres are the implementers of the standby village program. Health cadres who are active in carrying out their duties well can be an indicator of the success of developing the standby village program (Syafrudin, Hamidah, 2014).

Health cadres have a very complex job, the cadre's task in developing an alert village is to mobilize the community in terms of: clean and healthy living behavior, observing health problems in the village, environmental health efforts, improving the health of mothers, babies and toddlers, correctional levels, and community preparation for disasters (Iggro, 2012).

According to researchers, health cadres must be active in carrying out their duties, because the tasks that must be carried out are good for all levels of society, especially in the standby village. Given the many and varied tasks of health cadres in the development of standby villages, it is very important to provide insight, knowledge and skills in the form of training and incentives for the smooth work of cadres in carrying out their duties and it is hoped that high activeness will grow in carrying out the tasks they carry out. So that this is in accordance with the results of research conducted by researchers, namely

the existence of a significant influence by providing education about the implementation of the standby village on the activity of cadres in Batuputih District, Sumenep Regency.

CONCLUSION

1. Almost half of the respondents before being given education they had a moderate category of motivation, 46 respondents (44%), while after being given education almost half of the respondents had a high motivation category of 49 respondents (47%).
2. Most of the respondents before being given education, there were 74 respondents (70%), who were not active, while after being given education, most of the respondents were active, as many as 62 respondents (52%).
3. There is an effect of education on the implementation of the standby village on the motivation of cadres in Batuputih District, Sumenep Regency.
4. Aila the effect of education on the implementation of the village alert on the activity of cadres in Batuputih District, Sumenep Regency.

SUGGESTION

1. For Respondents
It is hoped that the standby village cadres can be more active in carrying out these activities and coordinate well starting from the chairman and arrange the composition of activities evenly for each cadre.
2. For Educational Institutions
It is hoped that educational institutions can use the results of this research as learning input in the influence of education about the implementation of the standby village on the motivation and activity of cadres in Batuputih District, Sumenep Regency and can be developed again for further research to be more useful for readers and researchers.
3. For Further Researchers
It is hoped that further research needs to be deepened and added more specific research on the effect of education on the implementation of the standby village on the motivation and activity of cadres in Batuputih District, Sumenep Regency.

ACKNOWLEDGMENT

I solemnly declare that to the best of my knowledge, in this thesis there is no scientific work that has been submitted by another person to obtain an academic degree at a university, and there is no work or opinion that has been written or ordered by anyone, others, except those quoted in this manuscript and mentioned in the citation sources and bibliography.

CONFLICT OF INTEREST

In this study, there is no interest whatsoever regarding myself or with other institutions other than the Indonesian Strada Institute of Health Sciences, Kediri City.

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