

FREQUENCY OF TODDLER'S VISIT TO *POSYANDU* AND NUTRITIONAL STATUS OF TODDLERS (BW/A, BH/A, BW/BH)

Rahayu Ariningtias¹, Yuli Yantina^{2*}, Anissa Ermasari³

¹Malahayati University, Bandar Lampung

²Corresponding Email: yyantina42@gmail.com

ABSTRAK : REKUENSI KUNJUNGAN BALITA KE POSYANDU DAN STATUS GIZI BALITA (BB/U, BB/U, BB/TB)

Latar belakang: Berdasarkan hasil riset kesehatan dasar (Riskesdas) pada Tahun 2018 prevalensi balita underweight di Kabupaten Way Kanan sebesar 19,57%. Kunjungan balita ke Posyandu sangat penting dan berfungsi untuk mendapatkan pelayanan kesehatan seperti penimbangan, vaksinasi, penyuluhan gizi dan lain-lain. Akibat adanya pandemi COVID-19, kegiatan posyandu balita sempat diberhentikan sementara, salah satunya posyandu balita di kampung Negeri Jaya kecamatan Negeri Besar.

Tujuan: Diketahui Hubungan Frekuensi Kunjungan Balita ke Posyandu dengan Status Gizi Balita di Kampung Negeri Jaya.

Metode : Penelitian ini merupakan penelitian kuantitatif menggunakan rancangan Analitic dengan pendekatan Cross Sectional, dilaksanakan dari Februari sampai dengan Juli di Kampung Negeri Jaya. Penelitian ini menggunakan data skunder berupa laporan bulanan posyandu dengan jumlah sampel sebanyak 154 orang balita. Analisis data dengan cara analisis univariat dan bivariat menggunakan uji Chi Square dengan derajat kepercayaan $<0,05$.

Hasil : Terdapat 68 Balita (44,2%) aktif posyandu dan 86 balita (55,8%) tidak aktif posyandu. Status gizi berdasarkan BB/U (gizi kurang 39 orang atau 25,3%, gizi baik 103 orang atau 66,9%, gizi lebih sebanyak 12 orang atau 7,8%). Status gizi TB/U (balita pendek 28 orang atau 18,2%, balita normal 126 orang atau 81,8%). Status gizi BB/TB (balita kurus 26 orang atau 16,9%, gizi normal 115 orang atau 74,7%, gemuk sebanyak 13 orang atau 8,4%).

Kesimpulan : Ada hubungan frekuensi kunjungan balita ke posyandu dengan status gizi balita BB/U (p value = 0,03), TB/U (p value=0,04), BB/TB (p value=0,01). saran : meningkatkan kerjasama antara pemerintah kampung dan kader posyandu dengan bidan desa setempat untuk meningkatkan cakupan kunjungan balita keposyandu sehingga status gizi balita dapat terpantau dengan baik.

Kata Kunci : Posyandu balita, kunjungan posyandu, status gizi balita

ABSTRACT

Backgrounds: Based on the results of basic health research (Riskesdas) in 2018 the prevalence of underweight toddlers in Way Kanan Regency was 19.57%. Toddlers's visit to *Posyandu* is very important and beneficial to get health services such as weighing, vaccination, nutrition counseling and etc. As a result of the COVID-19 pandemic, *Posyandu* activities for toddlers were temporarily suspended, one of them was *posyandu* for toddlers in Negeri Jaya village, Negeri Besar sub-district.

Purpose: Gaining information about the relation between the frequency of visits by toddlers to *Posyandu* and the nutritional status of toddlers in Negeri Jaya village.

Methods: This research is a quantitative study using an analytical design with a cross-sectional approach held from February to July in Negeri Jaya village. This study used secondary data in the form of monthly *posyandu* reports with total samples about 154 toddlers. Data analysis was carried out by means of univariate and bivariate analysis using the Chi Square test with a degree of confidence <0.05 .

Results: There were 68 toddlers (44.2%) who were active in *posyandu* and 86 toddlers (55.8%) who were not active in *posyandu*. Nutritional status based on BW/A (undernourished 39 people or 25.3%, well nutrition 103 people or 66.9%, over nutrition 12 children or 7.8%). Nutritional status BH/A (28 short toddlers or 18.2% and normal toddlers 126 children or 81.8%). BW/BH nutritional status (26 thin under-five years old children or 16.9%, normal 115 people or 74.7%, 13 over weight or 8.4%).

Conclusion: There is a relationship between the frequency of visits by toddlers to *posyandu* and the nutritional status of toddlers shown by BW/A (p value = 0.03), BH/A (p value=0.04), BW/BH (p

value=0.01). Suggestion: increasing cooperation between the village government and *posyandu* cadres with local midwife to increase toddlers's visit to *posyandu* so that their nutritional status can be properly monitored.

Keywords : *Posyandu* for toddlers, *posyandu* visits, nutritional status for toddlers

INTRODUCTION

Human development in Indonesia is currently still limited by nutritional problems, especially child nutrition (Saputra & Nurriszka, 2012). According to the Decree of the Minister of Health of the Republic of Indonesia No. 14 of 2019, Toddlers are children under 5 years old (0-59 months 29 days) (Kemenkes RI, 2019). The golden age phase is a term used where growth and development in toddlers occurs very rapidly. Accordingly, this phase becomes a crucial period in the growth and development of toddlers. At this time, it is necessary to pay close attention to the growth and development of toddlers so that they can detect abnormalities as early as possible. Early detection of abnormalities in growth and development can be done by assessing physical growth and development in toddlers (Rosidi, 2012).

The World Health Organization (WHO) in 2018 estimates that there are 51 million children under five years old having nutritional problems. "Under-five" deaths due to nutritional problems amounted to 2.8 million people. The highest nutritional problems occur in African and Asian countries including Indonesia (WHO, 2018). The results of the Indonesian Demographic and Health Survey (IDHS, 2017) show that from year to year IMR has decreased significantly, from 68 deaths per 1,000 live births in 1991, to 24 deaths per 1,000 live births in 2017 (Simbolon, 2020).

Based on data from the 2022 Indonesian Nutritional Status Survey (SSGI) Nutritional Status of Toddlers Based on Body Weight for Age Index (BW/A). The percentage of underweight/underweight/undernourished in the toddler group is 17.1%. Toddler Nutritional Status Based on Height-for-Age Index (BH/A). The percentage of stunting/shortness in the toddler group is 21.6%. Nutritional status of toddlers based on body weight for Height Index (BW/BH) was 7.7% of toddlers have a thin nutritional status (Kemenkes RI, 2022).

According to Nutrition Status Monitoring in 2017 in Lampung Province, the nutritional status of toddlers based on Body Weight Index for Age (BW/A) for the poor nutrition category was 3.5%, the malnutrition category was 15%. Nutritional status of toddlers based on Height-for-Age Index (BH/A) was very short category about 10.1%, short category about 21.5%. Nutritional Status of Toddlers Based

on Body Weight for Height Index (BW/BH) about 2.9% was in the very thin category, and 6.4% was in the thin category (PSG, 2017).

In Way Kanan District, there were 6 cases of malnutrition in 2018. Whereas in 2019 the number of cases of malnutrition did not increase, but there were 2 cases of malnutrition who died, they were in Rebang Tangkas District and Blambangan Umpu District. Whereas in 2020 no new cases of malnutrition were found in Way Kanan District. Based on the results of basic health research (Risksdas) in 2018 the prevalence of underweight toddlers in Way Kanan Regency was 19.57% (Dinas Kesehatan Way Kanan Health, 2021).

Posyandu (Integrated service post) is one of the community based on health works which is carried out the society, from and together with the society, to empower and provide convenience to the society to obtain health services for mothers, babies and toddlers (Kemenkes RI, 2012). Toddler's visit to *Posyandu* is very important and beneficial to get health services such as weighing, vaccination, nutrition counseling and others. For young children, it is suggested to visit *Posyandu* regularly every month or 12 times a year (Kemenkes RI, 2011).

The coverage indicator for visit by children under five (years old) to the *posyandu* is expressed by D/S, namely by calculating the ratio between the number of children under five who come to the *posyandu* and weighing the total number of children under five (years old) in the working area of the *posyandu*. Where S means the number of children aged 0 to 59 months from all *posyandu* reporting in a work area at a certain time. Whereas D is used to express the number of toddlers weighing at health service facilities including *Posyandu* and other places where toddlers are weighed (Pusdatin, 2015).

Based on the results of research by Asrini.N et al (2022) shows that there was decreased visit by toddlers to *posyandu* in Kayuputih Village due to decreased visits by toddlers (37.7%), monitoring toddlers' growth (53.3%), and giving vitamin A (12.14%) before the pandemic and during the COVID-19 pandemic. In accordance to those facts, the researchers are interested in researching the relationship between the frequency of visit by toddlers to *Posyandu* and the nutritional status of toddlers in Negeri Jaya Village, Negeri Besar District in 2023.

The purpose of this study was to determine the relationship between the frequency of toddler's visit to *Posyandu* and the nutritional status of toddlers in Negeri Jaya Village, Negeri Besar District in 2023

RESEARCH METHODS

Type of this research is quantitative research and used Cross Sectional approach. This research conducted from February 10 2023 to July 30 2023. . The population in this study were all toddlers in Negeri Jaya Village, Negeri Besar Subdistrict, Way Kanan Regency as many as 180 children. We took 154 children who was born in July 2018 to June 2022 in Negeri Jaya Village, Negeri Besar Subdistrict, Way Kanan Regency as samples for this study.

The independent variable in this study is toddler's visit to *Posyandu*, whereas the dependent variable in this study is the nutritional status of th toddlers BW/A, BH/A, BW/BH. The measuring tool used in this study is the *Posyandu* monthly report. The data collection technique used in this research is secondary data in the form of documentation studies.

Univariate analysis aims to explain or describe the characteristics of each research variable, while bivariate analysis will only show a relationship between the two variables concerned (independent variable and dependent variable). Data analysis in this study used the chi-square test.

RESEARCH RESULTS

Characteristics of Respondents

Table 1
Frequency Distribution of Respondents's Characteristics

Characteristic	Amount (n)	Percentage (%)
Toddler Ages		
10 – 12 months	4	2,6
13 – 24 months	41	26,6
25 – 36 months	41	26,6
37 – 48 months	29	18,8
49 - 60 months	39	25,3
Gender		
Boy	91	59,1
Girl	63	40,9

Based on table 1 above, it is known that the most respondents are toddlers who are in the ages between 13-24 months and toddlers aged 25-36 months. They were 41 respondents (26.6%) with

male sex (boy) as many as 91 people (59.1%).

Univariate Analysis

Table 2
Distribution of Frequency of Visits to *Posyandu*

Characteristic	Amount (n)
Routine	68
Not a routine	86

Based on Table 2, it is known that the total frequency of visits (n) of toddlers to *Posyandu* in Negeri Jaya Village in the period of July 2022 to June 2023 was 154 toddlers. There were 68 toddlers who regularly came to the *posyandu* or 44.2%, while the toddlers who did not regularly come to the *posyandu* were 86 people or 55.8% sourced from secondary data from the monthly reports of *Posyandu* in Negeri Jaya Village.

Table 3
Distribution of the frequency of nutritional status of children under five (years old) weight / age

Nutritional Status	Amount (n)
Malnutrition	39
Well-nutrition	103
Over-nutrition	12

Based on table 3, the distribution of the frequency of nutritional status for children under five years of age/ age shows that there were 39 under-nourished children or 25.3%, 103 children with good nutrition or 66.9%, while 12 children with excess (over) nutrition or 7.8 %.

Table 4
Frequency distribution of nutritional status of children under five years of height/age

Nutritional Status	Amount (n)
Short	28
Normal	126

Based on table 4 nutritional status of height/age, the results showed that there were 28 short toddlers or 18.2%, while toddlers with normal height were 126 children or 81.8%.

Table 5
Distribution of the frequency of nutritional status of children under five (BW/BH)

Nutritional Status	Amount (n)
Thin	26
Normal	115
Over-weight	13

Based on table 5 of the nutritional status of weight/height, it was found that there were 26 underweight children or 16.9%, 115 children with normal weight or 74.7%, while 13 over-weight children or 8.4%.

Bivariate analysis

Based on table 6, 11 children (16.2%) under five who routinely visit the *posyandu* have less nutrition, 49 people (72.1%) are well nourished, 8 people are overnutrition (11.8%) and toddlers who do not routinely visit *Posyandu* had 28 children with malnutrition (32.6%), good nutrition with 54 people (62.8%), with excess (over) nutrition with 4 children (4.7%). Statistical test results obtained p value (0.031)) α (0.05), if the sig p value <0.05 then there is a statistically significant relationship so it can be concluded that there is a relationship between the number of *Posyandu* visits and the nutritional status of toddlers (1-5 years) based on body weight/age.

Table 6
Correlation between visit to *posyandu* and nutritional status of toddlers based on body weight/age

<i>Posyandu</i> Visit	Nutritional Status			Total (n)	P-value
	Malnutrition (n)	Well nutrition (n)	Over-nutrition (n)		
Routine	11	49	8	68	0.031
Not routine	28	54	4	86	

Table 7
Relationship of *posyandu* visits and toddler nutritional status based on body height/age

<i>Posyandu</i> Visit	Nutritional Status		Total (n)	P-value
	Short (n)	Normal(n)		
Routine	7	61	68	0.041
Not routine	21	65	86	

Based on table 7. toddlers who routinely visit *posyandu* have short height category as much as 7 children (10.3%), normal height as much 61 people (89.7%) while toddlers who do not routinely visit

posyandu have short height category as much as 21 children (24.4%), normal height as many as 65 children (75.6%). Statistical test results obtained p value (0.041).

Table 8
Relationship between visit to *posyandu* and nutritional status based on body weight/body height

<i>Posyandu</i> Visit	Nutritional Status			Total (n)	P-value
	Thin (n)	Normal (n)	Over-weight (n)		
Routine	5	55	8	68	0.012
Not routine	21	60	5	86	

Based on table 8, toddlers who routinely visit *posyandu* in thin category as much as 5 people (7.4%), normal as much as 55 children (80.9%), over weight status as much as 8 children (11.7%) while toddlers who are 21 children (24.4%) had thin nutritional status, 60 children (69.8%) had normal nutritional status, 5 children (5.8%) were obese. Statistical test results obtained p value (0.012).

DISCUSSION

Distribution of the frequency of visits by toddlers to *posyandu*

Based on the research conducted, it is known that the total number of visits of toddlers (n) to *Posyandu* in Negeri Jaya Village during July 2022 to June 2023 was 154 toddlers. There were 68 toddlers who regularly came to the *posyandu* or 44.2%, while the toddlers who did not regularly

came to the *posyandu* were 86 people or 55.8%.

In line with research conducted by Diagama et al (2019), moms respondents who did not bring their children to visit the *posyandu* were 237 people (62%) and who regularly visited the *posyandu* were 145 people (38%).

It is really good and necessary for toddlers to routinely visit *Posyandu*, about every month or 12 times per year. Visits by 8 or more times within one year are considered routine, and visits by less than 8 times per year are considered non-routine (Diagama et al, 2019). Mothers who come to *Posyandu* will be given counseling related to maternal and child health by health workers from the Puskesmas, so as to increase mothers's understanding of the nutritional status, growth and development of their children (RI Kemenkes, 2012).

Distribution of the frequency of nutritional status of children under five body weight / age

Based on the research, the frequency distribution of the nutritional status of children under five (years old) of body weight/ age showed that under five children were 39 children or 25.3%, toddlers with well nutrition were 103 children or 66.9%, while toddlers with over nutrition were 12 people or 7.8%.

According to research conducted by Rahma et al (2020), the nutritional status of toddlers according to body weight/age shows that the majority of toddlers have good nutrition, as much as 59 out of 89 toddlers (66.3%), undernourished as many as 25 out of 89 toddlers (28.1%), malnutrition as much as 5 out of 89 toddlers (5.6%). Body weight is a parameter that provides an overview of body mass. Body mass is very sensitive to sudden changes, such as the presence of an infectious disease, decreased appetite or decreased amount of food consumed. Determination of growth status is said to be rising if the BW graph follows the growth line or the increase in BW is the same as KBM (minimum increase in BW) or more. (Kemenkes RI, 2012).

Frequency distribution of nutritional status of children under five years of body height /age

Based on the research that conducted, the frequency distribution of the nutritional status of children under five years of age/ age showed that there were 28 short toddlers or 18.2%, while toddlers with normal height were 126 children or 81.8%. In line with the research conducted by Bertalina & Amelia (2018) on 88 toddler respondents, the results showed that there were no

respondents with high nutritional status, the number of respondents with normal nutritional status as many as 69 children (78.4%), the number of respondents with short nutritional status as many as 19 children (21.6%) and the number of children under five with very short nutritional status did not exist.

Height is an anthropometry that describes the state of skeletal growth. Under normal circumstances, height growth is in line with age. Unlike body weight, height growth is relatively less sensitive to the problem of malnutrition in the short term. So that the effect of nutrient deficiency on height will appear in a relatively long time. Thus, the BW/A indicator is more appropriate for describing nutritional fulfillment in the past. Based on research conducted on the distribution of the frequency of nutritional status, body weight/body height, it was found that there were 26 under-fives or 16.9%, 115 under-fives with normal nutrition or 74.7%, while 13 under-fives or 8.4% were excess nutrition.

Distribution of the frequency of nutritional status of children under five BW/BH

Based on the results of research conducted by Kusuma & Hasanah (2018) calculating the nutritional status based on the weight and height of the respondents, most respondents had normal nutritional status, namely 81 out of 84 respondents (96.4%). Respondents who fall into the criteria of being thin (2.4%) and over-weight (1.2%). BW/BH is the best anthropometric measurement indicator, because it can describe the current nutritional status more sensitively and specifically. Body weight is linearly correlated with height, it means that the increase in body weight will be followed by an increase in height.

Relationship of frequency of toddler's visit to *Posyandu* and toddler Nutritional Status based on Body Weight/U

The results showed that 11 children (16.2%) under five who regularly visited the *posyandu* had less nutrition, 49 children (72.1%) had well nutrition, 8 people (11.8%) had excess (over) nutrition. While toddlers who did not routinely 28 children (32.6%) visited *Posyandu* had less nutrition, 54 children (62.8%) had good nutrition, 4 children (4.7%) had excess (over) nutrition. Statistical test results obtained p value (0.03) < α (0.05), so it can be concluded that there is a relationship between the number of *Posyandu*'s visit and the nutritional status of toddlers (1-5 years) based on body weight/age.

Based on research conducted by Theresia (2020), there is a relationship between the number

of visits by mothers to *posyandu* and the nutritional status of toddlers. More routine the mother visits the *posyandu*, the nutritional status of the toddler will be better. This can be seen from toddlers whose mothers routinely visit the *posyandu* have a good nutritional status percentage of 69.0% compared to mothers who do not routinely visit the *posyandu*. Their toddlers have well nutritional status by having a percentage of 43%.

This is reinforced by the results of research by Oktavianis, 2016 that concerning the relationship between family activity in *Posyandu* activities and the nutritional status of toddlers, There is a relationship between family activity in *Posyandu* and the nutritional status of toddlers. Muharry et al (2017) concerning the relationship between the activity of visiting mothers and the development of the nutritional status of children aged 6-23 months, they found that the activity of visiting mothers at *posyandu* also affects the nutritional status of children.

Monitoring the growth of toddlers is crucial to do to find out if there is growth faltering at an early stage. Weighing every month become very necessary to find out this. Growth and development in toddlers can be monitored by weighing the child's weight every month routinely (Kemenkes RI, 2015).

Relationship of frequency of toddler's visit to *Posyandu* and toddler Nutritional Status based on Body Height/age

Toddlers who regularly visit *posyandu* have a short height category by only 7 children (10.3%), normal height as many as 61 children (89.7%) while toddlers who do not routinely visit *posyandu* have short height category as many as 21 children (24.4%), normal height as many as 65 people (75.6%). Statistical test results obtained p value (0.04) < α (0.05), so it can be concluded that there is a relationship between the number of toddler's visit to *Posyandu* and the nutritional status of toddlers (1-5 years) based on body height/age.

The results of research conducted by Destiadi et al (2015) stated that the proportion of respondents who had a frequency of *posyandu* visits < 8 times and was stunted was 61.9%, while the proportion of respondents who had a frequency of *posyandu* visits \geq 8 times and was stunted by only 38.1%, with p- value 0.013, means that there is a relationship between the frequency of *posyandu* visits and the incidence of stunting in children aged 3-5 years old. The OR value was 3.003 (1.253-7.341), which means that children with low attendance at *Posyandu* have a 3.1 times more risky of stunting when compared to children who

regularly attend *Posyandu*. The results of the multivariate analysis obtained that the frequency of visits to *posyandu* was the most dominant factor in the incidence of stunting.

The BL/A or BH/A index describes the growth of a child's length or height based on their age. This index able to identify children who are short (stunted) or very short (severely stunted), which is caused by prolonged malnutrition or frequent illness (Permenkes RI, 2020). Stunting is used as an indicator of chronic malnutrition which describes a history of child malnutrition in the long term so that stunting shows how the state of nutrition was before (Kartikawati, 2011).

Relationship of frequency of toddler's visit to *Posyandu* and toddler Nutritional Status based on Body Weight / Body Height

Toddlers who routinely visit *posyandu* have a thin nutritional status by only 5 children (7.4%), normal nutritional status by 55 children (80.9%), over nutritional status by 8 children (11.7%) while toddlers who do not routinely visit *Posyandu* had underweight nutritional status reached 21 children (24.4%), normal nutritional status of 60 children (69.8%), over nutritional status of 5 children (5.8%). Statistical test results obtained p value (0.01) < α (0.05), so it can be concluded that there is a relationship between the number of toddler's visit to *Posyandu* and the nutritional status of toddlers (1-5 years) based on body weight/ body height.

This research was supported by several earlier similar research. First, research conducted by Diagama (2019) which shows that there is a relationship between the number of *posyandu* visits and the nutritional status of toddlers (1-5 years) obtained from the results of thevalue(0.00). Second, research conducted by Revelation et al, 2019 which shows that there is a relationship between the activity of mothers visiting *Posyandu* with the nutritional status of toddlers obtained from the results of thevalue0.042 (p < 0.05). This research also supported by the results of research conducted by Theresia, 2020 which states that there is a relationship between the number of *posyandu* visits and the nutritional status of toddlers obtained from the results of P Value=0.00.

To carry out the balance of nutrition efforts, every family must be able to identify, prevent, and overcome nutritional problems in every family member. This is in accordance with Regional Regulation No. 23 Kemenkes of 2014 concerning Efforts to Improve Diet. Efforts to identify, prevent, and address nutritional problems consist of regular weighing and exclusive breastfeeding for babies

from birth to six months. Food supplements provided according to Minister of Health Regulation Number 51 of 2016 concerning food supplement product standards include vitamin A capsules, blood tablets (TTD), complementary food for pregnant women, children under five and school age. children, complementary. breast milk food and multitasking powders, vitamins and minerals (Kemenkes RI, 2021).

CONCLUSION

Based on the results and discussion of research that has been conducted at *Posyandu* of Negeri Jaya Village, Negeri Besar subdistrict, Way Kanan Regency, it can be concluded that there were 68 toddlers (44.2%) who were active in *posyandu* and 86 toddlers (55.8%) who were not active in *posyandu*. Nutritional status based on body weight/age showed that there were 39 under nutrition toddlers or 25.3%, 103 well-nutrition toddlers or 66.9%, while 12 toddlers with excess nutrition or 7.8%. The nutritional status by body height/age was 28 children or 18.2%, while toddlers with normal height were 126 children or 81.8%. The nutritional status by BW/BH was the result of 26 underweight toddlers or 16.9%, 115 under fives with normal nutrition or 74.7%, while 13 over nutrition toddlers or 8.4%. There is a relationship between the frequency of visits by toddlers to the *posyandu* with the nutritional status of children under five in Negeri Jaya Village, Negeri Besar Subdistrict, Way Kanan Regency, obtained from the P value=0.003 with a significant level (α) of <0.05. There is a relationship between the frequency of visits by toddlers to *posyandu* with the nutritional status of children under five years old in Negeri Jaya village, Negeri Besar Subdistrict, Way Kanan Regency, obtained from the P value= 0.04 with a significant level (α) of <0.05. There is a relationship between the frequency of visits by toddlers to the *posyandu* with the nutritional status of children by body weight/body height in Negeri Jaya village, Negeri Besar SubDistrict, Way Kanan Regency, obtained from the P value=0.012 with a significant level (α) of <0.05.

SUGGESTION

For mothers and families who have children under five suggested to increase the frequency of visits to *posyandu* so that the nutritional status of toddlers can be monitored and detected early if the toddler is malnourished and can be treated immediately by health workers. It is expected that mothers under five can improve their knowledge about balanced nutrition in order to improve and

maintain the nutritional status of their children especially under five. It is hoped that the local health center can conduct training and counseling for *posyandu* cadres on balanced nutrition and the nutritional status of toddlers for further enhance the capacity and the knowledge of cadres in carrying out their duties such as providing additional food to toddlers in order to improve nutrition. For research sites, based on the research results that have been obtained, we suggested that there is a necessary for cooperation between the village government and *posyandu* cadres with the local midwife to increase toddlers's visit to *posyandu* so that their nutritional status can be properly monitored. They are hoped to completing *Posyandu* facilities and infrastructure which are deemed inadequate, providing additional food such as milk, vitamins, and additional food for toddlers who have nutritional problems. For future researchers, the results of this study can be used as a reference for conducting similar research, or developing similar research by adding new variables and using different methods and designs.

REFERENCES

- Ahgren, B., & Axelsson, R. (2011). A decade of integration and collaboration: the development of integrated health care in Sweden 2000–2010. *International journal of integrated care*, 11(Special 10th Anniversary Edition).
- Amalia, E., Syahrida, S., & Andriani, Y. (2019). Faktor mempengaruhi kunjungan ibu membawa balita ke posyandu kelurahan tanjung pauh tahun 2018. *Jurnal Kesehatan PERINTIS*, 6(1), 60–67.
- Aritonang, J., Anita, S., Sinarsi, S., & Siregar, W. W. (2020). Kecemasan pandemi COVID-19 dalam keikutsertaan posyandu di Kelurahan Pekan Tanjung Morawa tahun 2020. *Jurnal Health Reproductive*, 5(1), 1–6.
- Ariyani, R. D., Susanti, R., & Mardiyansih, E. (2012). Faktor yang berhubungan dengan frekuensi penimbangan balita di posyandu. *Jurnal Keperawatan Soedirman*, 7(3), 166–173.
- Astrini, N. L., Megaputri, P. S., & Dewi, P. D. P. K. (2022). Pelaksanaan Kegiatan Posyandu Balita di Masa Pandemi COVID-19. *Jurnal Kebidanan*, 12(2), 93–101.
- Bazikho, H. (2019). HUBUNGAN PARTISIPASI IBU KE POSYANDU DAN KELENGKAPAN IMUNISASI DENGAN STATUS GIZI ANAK USIA 12-59 BULAN DI DESA TANJUNG GUSTI DIWILAYAH KERJA PUSKESMAS PETUMBUKAN.

- Destiadi, A., Nindya, T. S., & Sumarmi, S. (2015). Frekuensi Kunjungan Posyandu dan Riwayat Kenaikan Berat Badan sebagai Faktor Risiko Kejadian Stunting pada Anak Usia 3–5 Tahun. *Media Gizi Indonesia*, 10(1), 71–75.
- Diagama, W., Amir, Y., & Hasneli, Y. (2019). Hubungan Jumlah Kunjungan Posyandu Dengan Status Gizi Balita (1-5 Tahun). *Jurnal Ners Indonesia*, 9(2), 97–108.
- Dwi Astrini Wulandari, D. A. W., & Enny Fitriahadi, E. F. (2021). Gambaran kualitas pelayanan posyandu balita di wilayah kerja Puskesmas Umbulharjo I Yogyakarta. *Jurnal Kebidanan*, 10(1), 35–50.
- Hadi, Z., Anwary, A. Z., & Asrinawaty, A. (2022). Kejadian Stunting Balita ditinjau dari Aspek Kunjungan Posyandu dan Perilaku Pemberian ASI Eksklusif. *Jurnal Akademika Baiturrahim Jambi*, 11(1), 1–13.
- Herawati, B. C., Soraya, S., & Rahmiati, B. F. (2019). Peran Posyandu dalam Meningkatkan Kualitas Kesehatan Masyarakat di Dusun Suwangi Selatan Desa Suwangi Kecamatan Sakra Kabupaten Lombok Timur. *JPMB: Jurnal Pemberdayaan Masyarakat Berkarakter*, 2(1), 80–88.
- Husna, A., Andika, F., Rahmi, N., & Safitri, F. (2022). Determinan Peran Kader dan Dukungan Keluarga dengan Kehadiran Ibu ke Posyandu di Wilayah Kerja Puskesmas Cot Ba'u. *Journal of Healthcare Technology and Medicine*, 7(2), 774–781.
- Kemenkes, R. I. (2012). Kurikulum dan modul pelatihan kader posyandu. Jakarta, Kemenkes RI.
- Kemenkes, R. I. (2012). *Ayo Ke Posyandu Setiap Bulan*. Jakarta: Kemenkes RI
- Kemenkes, R. I. (2016). *Data dan Informasi Kesehatan Profil Kesehatan Indonesia*. Jakarta.
- Khairunisa, D., Nurhasanah, T. S., & Januardi, F. (t.t.). *The Role of Integrated Healthcare Center (Posyandu) Cadres in Increasing Maternal and Child Health during COVID-19 Pandemic*.
- Khoirunisa, E., Karsidi, R., & Yusuf, M. (2019). The role of posyandu as primary health care services in implementing early detection and intervention for autistic children in Indonesia. *International Journal of Multicultural and Multireligious Understanding*, 6(1), 101–109.
- Lestari, T. R. P. (2019). *Pencapaian Status Kesehatan Ibu Dan Bayi Sebagai Salah Satu Perwujudan Keberhasilan Program Kesehatan Ibu Dan Anak*. *Kajian*, 25 (1), 75–89.
- Notoatmodjo, S. (2010). Metodologi Penelitian Kesehatan Notoatmodjo S, editor. Jakarta: PT. Rineka Cipta.
- Nursalam, I. I. (t.t.). *Metodologi Penelitian Ilmu Keperawatan: Pendekatan Praktis*.
- Nursalam, M. (2015). Metodologi Penelitian Ilmu Keperawatan Edisi ke-4. Jakarta: Penerbit Salemba Medika.
- Nursalam, N. (2019). *Konsep dan Penerapan Metodologi Penelitian Ilmu Keperawatan (87)*. Stikes Perintis Padang.
- Saepudin, E., Rizal, E., & Rusman, A. (2017). Peran Posyandu sebagai pusat informasi kesehatan ibu dan anak (Posyandu roles as mothers and children health information center). *Record and library journal*, 3(2), 201–208.
- Sulistyoningsih, H. (2011). *Gizi Untuk Kesehatan Ibu Dan Anak, Graha Ilmu*. Yogyakarta.
- Welasasih, B. D., & Wirjatmadi, R. B. (2012). Beberapa faktor yang berhubungan dengan status gizi balita stunting. *the Indonesian journal of public health*, 8(3), 99–104.