

ANALYSIS OF THE AVAILABILITY OF POSYANDU FACILITIES AND INFRASTRUCTURE AND ITS INFLUENCE ON PARTICIPATION OF HEALTH SERVICE TARGETS IN SUKADANA VILLAGE, TERARA DISTRICT, EAST LOMBOK REGENCY, WEST NUSA TENGGARA

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Abstract

Posyandu (Integrated Health Post) is a form of Community-Based Health Effort (UKBM) that plays a crucial role in improving public health. The success of Posyandu activities is greatly influenced by the availability of adequate facilities and infrastructure and the active participation of the community as the target of health services. This study aims to analyze the availability of Posyandu facilities and infrastructure and their influence on the participation of health service targets in Sukadana Village, Terara District, East Lombok Regency. This study used descriptive qualitative methods with data collection techniques through observation, interviews, and documentation. Informants consisted of Posyandu cadre leaders, cadres, and related parties who support the implementation of health services. The results showed that the main Posyandu facilities and infrastructure, such as baby scales, digital scales, and height measuring devices, were available and still suitable for use. However, there were still limitations in supporting facilities such as service tables and chairs. The availability of adequate facilities and infrastructure influenced the smooth running of health services and the level of community participation. The low participation of some targets was influenced by busy factors, health conditions, and limited time and mobility. Therefore, ongoing support from village governments and health workers is needed to improve the quality of facilities, the capacity of cadres, and community participation in integrated health post activities.

Keywords: *Posyandu, Facilities and Infrastructure, Community Participation, Health Services, Posyandu Cadres.*

INTRODUCTION

Health is a fundamental right of every individual in society and is an investment stipulated in Article 28 H paragraph 1 of the 1945 Constitution. Therefore, all elements of the nation must strive to improve health so that people can enjoy a healthy life. Health is not only the responsibility of the government, but also a shared responsibility between the government and society. The need for high health is very important for every individual, especially for children. In the era of globalization, Indonesia is committed to advancing its country by creating a healthy, advanced, and prosperous society. Developments in various fields of science have produced positive achievements, especially in science and technology in the medical field, which can increase the number of toddlers and children.

According to information from the Ministry of Health, Family Planning, and Community Empowerment (KOPMK) (2023), there are 338,881 Integrated Health Posts (Posyandu) across Indonesia. Posyandus are vital to the community, serving as a means of empowerment for the exchange of information

and skills between staff and residents. Furthermore, Posyandus also provide access to basic health services, particularly in efforts to reduce maternal mortality (MMR), infant mortality (IMR), and child mortality (KABA).

According to Pamungkas G, Kurniasari N. (2019), in general, facilities are anything that can be used as a supporting tool for the success of the integrated health post (Posyandu) implementation process because if they are not available, the maternal and child health program will not achieve the expected results according to plan. Various previous studies have shown that the Integrated Service Post (Posyandu) is an important instrument in improving the health status of mothers and children, especially in rural areas. Nurlia Ikaningtyas's 2025 research proved that the existence of Posyandu contributed significantly to improving the nutritional status of toddlers and reducing the risk of stunting through a community-based health service approach. (Ikaningtyas, Sari & Puspita 2025). Similar findings were also stated by Siti Murti Dewi et al, 2024 who assessed the effectiveness of Posyandu using program effectiveness indicators, and concluded that the success rate of Posyandu is greatly influenced by community participation and the capacity of cadres. Posyandu (integrated service post) is a form of Community-Based Health Efforts (UKBM) that has an important role in improving the health status of the community, especially in groups of pregnant women, babies, toddlers, adolescents, productive age, and the elderly. Posyandu is organized from, by, for and with the community as a means of providing basic health services aimed at improving the health status of the community independently.

Posyandu (Integrated Health Post) is a form of community-based health services (UKBM) that facilitates access to basic health services and supports improvements in public health. The success of Posyandu activities is dependent on the availability of adequate facilities and infrastructure. Facilities and infrastructure such as baby scales, height measuring devices, basic health equipment, tables, chairs, and other supporting facilities are essential for smooth health services. Adequate availability can increase service effectiveness, ensuring optimal service delivery to those targeted.

Table 1. Number of visitors to the Sukadana Village Integrated Health Post in 2026

| Month | Number of people) |
|-------|-------------------|
| March | 112 |
| April | 101 |
| May | 110 |

Facilities and infrastructure are crucial supporting factors in enhancing the quality of health services at integrated health service posts (Posyandu) because they influence the smooth implementation of activities and the satisfaction of the community as service recipients. However, in practice, various problems have been found related to limited facilities and infrastructure at several Posyandus, including in Sukadana Village, Terara District, East Lombok Regency. These limited facilities can hinder the implementation of Posyandu activities and impact the quality of services provided to the community. This condition has the potential to reduce public interest in utilizing available health services. Community participation is an important indicator of the success of Posyandu implementation. The level of attendance and involvement of health service targets, such as pregnant women, infants, toddlers, adolescents, and the elderly, indicates the extent to which Posyandu programs are accepted and utilized by the community.

Zafira and Widiyarta (2025) stated that community participation in integrated health service post (Posyandu) activities is influenced by various factors, including service quality, the role of cadres, family support, community knowledge, and the availability of facilities that support Posyandu activities. In addition to facilities and infrastructure factors, community participation is also influenced by awareness, knowledge, and support from the surrounding environment. The role of Posyandu cadres in providing education and motivation to the community is also a factor that can increase the attendance of health service targets. Therefore, an in-depth analysis is needed regarding the relationship between the availability of Posyandu facilities and infrastructure and the level of participation of health service targets. Based on these problems, this study was conducted to analyze the availability of Posyandu facilities and infrastructure and

its influence on the participation of health service targets in Sukadana Village, Terara District, East Lombok Regency. The results of this study are expected to provide an overview of the condition of Posyandu facilities and infrastructure at the research location and serve as evaluation material for the village government, health workers, and Posyandu cadres in an effort to improve the quality of public health services.

RESEARCH METHODS

The research approach used in this study is descriptive qualitative. According to Moleong (in Feny et al., 2022:4), qualitative research aims to understand the phenomena experienced by research subjects, including behavior, perception, motivation, actions, and other aspects, holistically and descriptively, using words in a natural context and utilizing various scientific methods.

This research employed a qualitative descriptive method. Sugiyono (2021:29) explains that qualitative descriptive methods are used to describe or analyze research results in greater depth without using statistical calculations. The goal of this approach is to collect facts, information, phenomena, and conditions that occurred during the research and then describe them according to the existing situation. Thus, this method helps researchers interpret the data truthfully.

Research data consists of primary and secondary data. According to Sandu Sitoyo (2015:57), primary data is new data obtained directly from sources through researchers. Meanwhile, secondary data is information collected through reading materials, documents, or other relevant media (Sugiyono:137).

According to Aryoko Wibowo (2018), qualitative descriptive research methods are used to describe or analyze a phenomenon without attempting to establish causal relationships. According to Creswell (2014), this method focuses on an in-depth understanding of a phenomenon through qualitative data collection such as interviews, observations, and document analysis.

This study uses a qualitative descriptive study. This study aims to describe the condition of the availability of integrated health service post facilities and infrastructure and analyze its influence on the participation of health service targets in Sukadana Village, Terara District, East Lombok Regency. Data were obtained through observation, interviews, and documentation with integrated health service post cadres, health workers, the community, and village officials as research informants.

In the context of this research, direct interaction with participants was conducted to understand their perceptions, experiences, and barriers to accessing integrated health service posts (Posyandu). The data collected were in the form of sentences, narratives, and situational descriptions.

Types and Approaches of Research

According to (Abdussamad 2021), this study uses a qualitative approach with a descriptive research type that aims to explore and understand the meaning of community participation in the development of Posyandu services in Sukadana Village, Terara District, East Lombok Regency. This study uses a qualitative descriptive approach. The qualitative approach was chosen to understand in depth how the availability of Posyandu facilities and infrastructure affects the participation of health service targets based on the researchers' experiences, perceptions, and daily practices in the field. The descriptive method aims to systematically and realistically describe the actual conditions of Posyandu facility availability and target participation patterns in Sukadana Village without making quantitative generalizations.

Location and Time of Research

The research was conducted in Sukadana Village, Terara District, East Lombok Regency, West Nusa Tenggara. Interviews took place in June 2026, aligning with the field data collection schedule.

Data sources in this research consist of:

- a. **Primary Data**, This data was obtained directly through interviews with the head of the Genjer Baru cadre. We conducted a direct interview with the head of the Genjer Baru cadre, Mrs. Ely Karyani, 35, who served from 2018 to 2026, to ensure the information we obtained was more accurate and in line with actual conditions.

b. Secondary Data, This includes supporting data obtained from documents, photographs, field notes, and relevant literature. Secondary data was also obtained from scientific journals, articles, and previous research reports discussing health and integrated health posts (Posyandu). This data was used to strengthen the theoretical foundation and support the analysis of research results in the field.

c. Data collection technique

The data collection techniques used were observation, interviews, and documentation. Informants were selected using purposive sampling, resulting in four informants. After collection, the data was analyzed through the stages of data reduction, data presentation, and drawing and verifying conclusions.

Interviews were conducted directly with the head of the Genjer Baru cadre using an interview instrument developed by the researcher. The questions were structured and related to the integrated health post (Posyandu) facilities and infrastructure. Documentation, including photographs, field notes, articles, and journals related to Posyandu facilities and infrastructure, served as supporting data.

RESULTS AND DISCUSSION

Analysis of Availability of Facilities and Infrastructure

Based on interviews with the head of the Genjer Baru Integrated Health Post (Posyandu) cadre, it was discovered that the available facilities and infrastructure have supported the implementation of basic health services for the community. Some of the available equipment includes digital scales for weight measurement, anthropometric devices for monitoring child growth, and various types of scales used according to the target age group. For infants, the Posyandu provides baby scales used to accurately measure infant weight. In addition, standing digital scales are also available for ages 2 years and up. The use of various measuring instruments aims to adapt measurement methods to the age and condition of the target health service. The availability of child growth measurement facilities indicates that the Muara Kasih Posyandu Genjer Baru already has the basic facilities needed to support monitoring of nutritional status and child growth and development. These facilities are an important part of the implementation of maternal and child health services, especially in the early detection of growth and development problems in infants and toddlers. Implementation of Posyandu health services is carried out through several stages. Targets are first registered based on age groups: infants, toddlers, pregnant women, adolescents, productive age, and the elderly. After the registration process, the targets underwent a screening process that included weighing, height measurement, mid-upper arm circumference (MUAC) for certain age groups, and waist circumference measurement for productive age groups and the elderly. All test results were then recorded to monitor the targets' status.

Figure 1. Digital Scales Used at Muara Kasih Integrated Health Post



Source: Personal Documentation, June 25, 2026

Based on an interview with the head of the Muara Kasih Integrated Health Post (Posyandu) cadre in Genjer Baru Hamlet, most of the health facilities used in the Genjer Baru Posyandu activities are still in good condition. Baby weighing machines, adult scales, and height measuring devices are still usable to support health services. However, the head of the cadre explained that the height measuring devices had been damaged due to improper use, although the damage has been repaired so that the devices can still function properly. Although the main health equipment is available, the Posyandu still faces limitations in supporting facilities, especially chairs and service tables. The number of available chairs is not enough to accommodate all the targets who attend, especially when the number of targets increases. This condition causes some targets to have to wait their turn with limited facilities. In addition, the use of digital devices requires periodic battery replacement, which is a routine operational need every month. To address the limited facilities and infrastructure, the Posyandu has submitted a request for assistance to the village government. Previously, some of the health equipment used was donated by the health sector, so support from the village government is expected to help meet the needs of facilities that are still lacking.

The Influence of Facilities and Infrastructure on Target Participation

Based on the results of an interview with the Head of the Muara Kasih Posyandu Cadre, it was discovered that at the beginning of its implementation, the posyandu activities were still combined with the posyandu in the Genjer Induk hamlet area. However, due to the large number of service targets, a division was made, resulting in the formation of the Muara Kasih (Genjer Baru) posyandu as a separate service unit. The cadre interviewed stated that he had been actively serving as a cadre since 2018 and during his early service still served at the Genjer Induk posyandu before joining the Genjer Baru posyandu. Although the exact year of the posyandu expansion cannot be confirmed, the Head of the Cadre explained that the process occurred around 1 to 2 years after starting to become a cadre. The implementation of posyandu activities is carried out routinely once a month. The service targets include pregnant women, infants, and toddlers. In addition, the posyandu also provides health services for productive age groups through the Integrated Non-Communicable Disease Development Post (Posbindu PTM) program. The targets of this program include people of productive age, namely around 15-59 years, as well as youth groups who are part of promotive and preventive efforts to improve the health status of the community.

Based on the interview results, the target of health services at the Muara Kasih Integrated Health Post (Genjer Baru) covers various age groups, ranging from children, adolescents, to productive age. The adolescent group is one of the service targets that receives attention in Posyandu activities, as an effort to improve health from an early age. In addition, health services are also provided to the productive age group through regular health monitoring activities. Regarding the number of health targets, the Head of the Posyandu Cadre explained that target data always changes every month. These changes are caused by the addition or reduction of targets according to local community conditions. Therefore, data collection is carried out routinely every month to ensure the number of targets recorded corresponds to the actual conditions in the field. This monthly data serves as the basis for planning and implementing health service activities at the Genjer Baru Integrated Health Post. Based on data from the Muara Kasih Integrated Health Post (Genjer Baru) in March, April, and May, the number of health service targets recorded was 59 toddlers, 85 teenagers, 110 productive age groups, and 98 elderly people for the groups, infants, adolescents, productive age, elderly and toddlers. Of this number, 59 toddlers aged 0-23 were served in March, April, and May. In addition to these primary targets, the integrated health post (posyandu) also serves other age groups, namely 85 adolescents, 380 productive age groups, and 98 elderly people. Interviews indicate that the number of health service targets is dynamic and can change every month. This change is caused by the addition of new targets or changes in population conditions in the integrated health post's working area. For pregnant women, there was an increase in the number of targets from 2 people in May to 6 people in June. These data indicate that routine data collection and reporting activities carried out by integrated health post cadres play an important role in monitoring the development of health service targets and supporting the planning of more effective health programs that are in line with community needs.

Table 2. Posyandu Target Attendance Data for May

| Target Group | Number of targets | Present |
|----------------|-------------------|---------|
| Toddler | 59 | 45 |
| Teenager | 85 | 20 |
| Productive Age | 380 | 110 |
| Elderly | 98 | 12 |

Based on attendance data for March, April, and May, the number of health service targets attending integrated health service posts (Posyandu) activities has not yet reached the full registered target. Among productive-age participants, the number of participants was recorded at 110, while for the elderly group, there were 98. Attendance among adolescents remains relatively low and is not held regularly. According to the Head of Cadres, the low participation of adolescents is due to the Posyandu activity schedule coinciding with school hours, so most adolescents are unable to participate in health service activities.

Interview results also indicated that target absenteeism was influenced by several factors. In the toddler group, absenteeism often occurred when the child was sick or had a fever, preventing them from attending immunization services. Furthermore, some parents were unable to bring their children to the integrated health post (Posyandu) due to work or other commitments. The low level of target attendance was a concern for health workers and Posyandu cadres, which could impact the delivery of established health services. To address low participation, Posyandu cadres implemented various efforts, including home visits, particularly for the elderly with limited mobility and unable to attend the Posyandu in person. These efforts were undertaken to ensure that the target population continued to receive services and regular health monitoring.

Obstacles and Efforts to Improve Services

Based on interviews with the Head of the Muara Kasih Genjer Baru Integrated Health Post (Posyandu) cadres, several obstacles were encountered in implementing health services. One of the main obstacles was the inaccuracy of the target arrival times. Most targets arrived simultaneously, almost immediately after the activity began, resulting in long queues and overwhelmed cadres in providing services in an orderly and organized manner. Furthermore, limited facilities and infrastructure also impacted the smoothness of services. Equipment limitations, such as the need for battery replacement on digital scales, can affect the accuracy of measurement results if not promptly replaced. This impacts the accuracy of weighing and measurement data used to monitor the health status of targets.

Another obstacle faced is the limited number of cadres in implementing integrated health post (Posyandu) activities. Although a rotating cadre system exists for several hamlets, the number of cadres present during activities is still considered insufficient to cover all the large numbers of participants. This situation results in a significant workload for cadres, especially when the number of visits increases. On the other hand, cadres continue to provide health education to the community, particularly regarding toddler nutrition, providing nutritious food, as well as education on postpartum maternal care and breastfeeding techniques. However, not all cadres have the same skills in providing counseling, so capacity building is needed through regular training to ensure optimal implementation of health education.

Recommendations for Developing Integrated Health Posts in Sukadana Village

Based on the results of interviews with the Head of the Genjer Baru Posyandu Cadre, there are high hopes for improving the quality of Posyandu services in the future. The Head of the Genjer Baru cadre stated that the sustainability and development of Posyandu is highly dependent on the active role of cadres and broader community participation. It is hoped that future Posyandu cadres will be more active in driving Posyandu activities, especially in raising community awareness to attend and participate in every health service activity. In addition, the Head of the cadre emphasized the importance of continued support from the village government, especially in terms of fulfilling and completing Posyandu facilities and infrastructure. The availability of adequate medical equipment is considered very important to support

smooth services, including measuring instruments and other supporting facilities that still need to be improved. This hope also includes the village government's attention to health programs such as stunting management and improving community nutrition, which currently still require further strength in implementation. In terms of technical services, the cadre hopes for increased accuracy in the process of measuring and weighing toddlers, considering that differences in results can occur if procedures are not carried out consistently by each cadre. Therefore, more uniform operational standards and regular training for cadres are needed so that measurement results are more accurate and can be used as a basis for monitoring children's nutritional status appropriately.

Ministry of Health of the Republic of Indonesia. (2011). General Guidelines for Integrated Service Post Management. "Posyandu requires adequate service locations, health equipment, outreach media, and administrative equipment." In addition, the head of the cadre also provided advice to the 2026 Hamzanwadi University Community Service Program (KKN) involved in the Posyandu mentoring activities to continue to help strengthen the capacity of cadres, especially in implementing the Posyandu service system such as the 5 pillars of service. With increased knowledge, skills, and good coordination between cadres, it is hoped that the quality of Posyandu services can improve and provide more optimal benefits to the community. Based on the results of interviews with the Head of the Muara Kasih Posyandu Cadre, it was discovered that the selection of the health sector as the focus of activities was based on the direction and recommendations of the health office. Of several fields that could be the focus of activities such as education, culture, and health (Posyandu) was chosen because it has an important role in public health services. The results of the interviews showed that Posyandu cadres have been actively carrying out their duties since 2018-2026. This relatively long period of service indicates sufficient experience in implementing Posyandu activities. Furthermore, the continuity of health services at the integrated health post (Posyandu) is supported by a number of cadres who remain active to this day. The active participation of cadres is a crucial factor in supporting the implementation of health programs, particularly in maternal and child services and community health monitoring activities at the village level.

Interviews also demonstrated strong collaboration between the Muara Kasih Genjer Baru Integrated Health Post (Posyandu) cadres, the village government, health workers, and various other relevant parties. Posyandu activities not only involve cadres and health workers but also receive support from the village government, the Family Welfare Movement (PKK) team, and social program facilitators who participate in the implementation. This collaboration is a supporting factor in the provision of sustainable health services to the community.

CONCLUSION

This study shows that the availability of facilities and infrastructure at the Muara Kasih Integrated Health Post (Posyandu) in Genjer Baru Hamlet, Sukadana Village, is generally sufficient to support the implementation of basic health services for the community. Basic facilities such as baby scales, digital scales, and height measuring devices are available and still suitable for use, thus helping to smoothly monitor the health status of the target population. However, there are still limitations in supporting facilities such as service tables and chairs that are insufficient when the number of participants increases. The results also show that the availability of adequate facilities and infrastructure contributes to smooth service delivery and encourages community participation. However, the target population's attendance rate is not optimal due to factors such as busyness, health conditions, school schedules, and limited mobility in the elderly group. This study has limitations because it was only conducted at one Posyandu with a limited number of informants, so the results cannot reflect the condition of all Posyandus in the Genjer Baru area, Sukadana Village, Terara Subdistrict.

Based on these findings, ongoing support from village governments, community health centers, and related parties is needed to provide facilities and infrastructure, increase the capacity of cadres through training, and strengthen education and outreach strategies to increase community participation. Efforts such as home visits, regular target data collection, and adjusting service schedules according to community characteristics need to be continuously developed to ensure health services are more effective and reach all

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target groups. Further research is recommended to involve more integrated health posts (Posyandu), informants, and research areas by combining qualitative and quantitative approaches so that the relationship between the availability of facilities and infrastructure, service quality, and the level of community participation can be analyzed more comprehensively. The findings of this study are expected to serve as evaluation material and the basis for policy formulation to improve the quality of Posyandu implementation and strengthen community-based health services.

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