



Mother's Knowledge and the Role of Cadres Affecting Mother's Activeness at the Integrated Service Posts

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Track Record Article	Abstract
Revised: 11 April 2026 Accepted: 25 June 2026 Published: 30 June 2026 How to cite: Demmalewa, J. Q., Raharjo, D. A., & M, H. I. (2026). Mother's Knowledge and the Role of Cadres Affecting Mother's Activeness at the Integrated Service Posts. <i>Contagion: Scientific Periodical Journal of Public Health and Coastal Health</i>, 8(2), 606–618.	<i>The activeness of mothers in utilizing the integrated service post in the Puriala Community Health Center work area, which has not yet reached the target, is thought to be related to the level of knowledge of mothers and the role of cadres in education and assistance, so research is needed to examine the factors that influence it. This study aims to analyze the relationship between knowledge and the role of cadres with the activeness of mothers in bringing toddlers to the integrated service post. This type of study involved a cross-sectional design. Conducted from June 10 to September 25, 2025. Sample are a total of 87 mothers with toddlers aged 0-59 months who were selected and enrolled in the Puriala Health Center area using Stratified Random Sampling and data were collected through a questionnaire that has been validated and is reliable. The primary outcome of the study was that the level of maternal knowledge was sufficient (72.4%), and the role of cadres (59,8%) was in the role category. The chi-square test results obtained a p-value of 0.0026 for knowledge and 0.002 for the role of cadres. In conclusion, there is a relationship between maternal knowledge and the role of cadres with the activeness of mothers in bringing toddlers to the integrated health post in the working area of the Puriala Health Center Regional Technical Implementation Unit. Recommended for the health center to develop the skills and abilities of the integrated service post cadres.</i> Keywords: Mothers, Knowledge, Role, Cadres, Activeness.

INTRODUCTION

Integrated service posts are a form of community-based health effort managed and implemented by, for, and with the community in health development, aimed at empowering communities and facilitating access to basic health services, primarily to accelerate the reduction of maternal and infant mortality rates (Anwar et al., 2024; Ministry of Health, 2023).

The existence of integrated service posts plays a strategic role in accelerating the reduction of infant and toddler mortality rates, improving nutrition, and increasing the coverage of complete basic immunization (Ministry of Health, 2023; Ningsih et al., 2025). Maternal and child health, especially for toddlers, is a crucial measure of a nation's progress. Toddlers are an age group that is highly vulnerable to health and nutritional problems; therefore, comprehensive monitoring of their development is essential (Admasari, 2024; Elysa et al., 2024; Ministry of Health, 2023; Ministry of Health of the Republic of Indonesia, 2024; Yuniarti et al., 2024).

Data from the Indonesian Health Survey (Ministry of Health of the Republic of Indonesia, 2024) shows that nationally, the prevalence of toddler visits to integrated service posts reached 83.2%, but in Southeast Sulawesi Province it was only 68.2%. Furthermore,

results (Ministry of Health, 2024) show that nationally, toddler visits to integrated service posts reached 87.4%, while in Southeast Sulawesi the figure remained at 68.2% (below the Ministry of Health's standard of 80%), and growth monitoring in Southeast Sulawesi was only 50.8%. In Konawe Regency, according to data from the Konawe Regency Health Office in 2024, the number of visits to integrated service posts reached 64.7%, and in the first quarter of 2025 (Office, 2025), participation in integrated service posts reached 72.1%. This figure is still below the Ministry of Health's target of 80% for 2025.

Puriala Community Health Center is one of 29 community health centers in Konawe Regency, with a working area covering 16 villages. Data on toddler visits to the integrated service post in 2024 showed a figure of 56.4%, and in the first quarter of 2025 it only reached 63.7%. This data indicates that the coverage of toddler visits to the integrated service post has not met the desired target in various regions (Puriala Health Centre, 2025).

Low maternal participation in Integrated Service Post activities can have serious consequences for the early detection of nutritional and developmental issues in toddlers, as well as for decreased immunization coverage. Consequently, toddlers are at higher risk of stunting, malnutrition, or other health problems that can hinder their optimal development (Ratna Suminar et al., 2025; Thilakoun, 2025). Various factors are believed to influence the level of maternal participation in bringing their toddlers to Integrated Service Posts. Mothers with a good understanding are more likely to recognize the importance of regularly bringing their children to Integrated Service Posts. Furthermore, family support, especially from husbands and other immediate family members, also plays a significant role (Sarifah et al., 2026).

Support in the form of encouragement, funds, or practical assistance (such as accompanying or helping to care for other children) can encourage mothers and reduce obstacles they may face. Furthermore, the role of Integrated Service Post cadres is crucial as community mobilizers (Ekayanti et al., 2025). Cadres who play an active role in providing counseling, reminding mothers about the Integrated Service Post schedule, conducting home visits, and creating a friendly and informative Integrated Service Post environment can significantly increase maternal engagement (Amsriani et al., 2026).

The novelty of this research lies in its analytical approach, which simultaneously combines individual and community factors to explain mothers' active participation in bringing their toddlers to the Integrated Health Post. This study not only assesses maternal knowledge as an internal factor but also examines the role of cadres as the primary drivers of the integrated service post's sustainability. Furthermore, this research is novel because it was conducted

within the working area of the Puriala Community Health Center in Konawe Regency, which is characterized by low integrated service post visit coverage compared to the national target. The results are expected to provide evidence-based information regarding factors related to maternal participation in integrated service post utilization and provide input for health workers and cadres in designing more effective interventions, such as strengthening health education and optimizing the role of integrated service post cadres in increasing toddler visit coverage. Given the importance of the integrated health service post in monitoring toddler growth and development, and the low level of maternal participation in bringing toddlers to the integrated service post, further study is needed to determine the influencing factors. Therefore, this study aims to analyze the relationship between maternal knowledge and the role of cadres on mothers' active participation in bringing toddlers to the Integrated Service Posts in the Puriala Community Health Center work area.

METHODS

This research is a descriptive analytical study using a cross-sectional approach. It was conducted in the Puriala Community Health Center working area. The study was conducted from June 10 to September 25, 2025. The population consisted of 695 mothers with toddlers aged 0-59 months living in the Puriala Community Health Center area. The sample consisted of selected mothers with toddlers aged 0-59 months living in the Puriala Community Health Center area. The sample size was calculated using the Slovin formula as follows:

$$n = N / (1 + N(d)^2)$$

Note:

n = Number of Samples

N = Population

d = Significance Level 10% (0.1)

(Sulianta, 2024)

Based on the formula above, the results are:

$$n = 695 / (1 + 695 (0.1)^2)$$

$$n = 695 / (1 + 6.95)$$

$$n = 695 / 7.95$$

$$n = 87.42$$

Based on the calculation above, the sample size for this study was 87 respondents. The sampling technique used in this study was Stratified Random Sampling, which divides the

population into several strata or small groups based on specific characteristics relevant to the study. The sample distribution based on proportions can be seen in Table 1 as follows:

Table 1. Sampling Based on Proportion per Village

No	Village	Population	Sample
1	Puriala	69	9
2	Poanaha	32	4
3	Ahuawali	26	3
4	Watundehoa	42	5
5	Sonai	81	10
6	Watusa	36	5
7	Wonua Morome	31	4
8	Puusangi	65	8
9	Lalonggatu	43	5
10	Tetewatu	35	4
11	Mokaleleo	52	7
12	Unggulino	36	5
13	Tetehaka	39	5
14	Puuhopa	26	3
15	Laloonaha	47	6
16	Wawosanggula	35	4
Total		695	87

The independent variables in this study were the level of maternal knowledge and the role of integrated service post cadres. The dependent variable was the mother's activeness in bringing her toddler to the integrated service post. Knowledge is categorized into two categories: Adequate if the total score is $\geq 50\%$ and Poor if the total score is $<50\%$. The role of cadres is categorized into two categories: Active if the total score is $\geq 50\%$ and Not Active if the total score is $<50\%$. Mothers' active participation in integrated service post activities is categorized into Participating if they attend integrated service post activities more than 3 times a year and Not Participating if they do not regularly attend integrated service post activities more than 3 times a year (Rukmana et al., 2024).

This research was conducted with due regard for research ethics principles to protect the rights, safety, and comfort of respondents. The researcher applied the principle of respect for persons by providing explanations regarding the research's purpose, benefits, and procedures, and obtaining voluntary informed consent. The principles of beneficence and non-maleficence were applied by ensuring the research provided benefits and did not pose risks to respondents. The principle of justice was implemented by providing equal opportunities to all respondents according to the research criteria. Confidentiality and anonymity were maintained by not listing respondents' identities and using codes in data processing.

The research instrument used a questionnaire. The validity test results showed that all question items on the variables had a correlation coefficient value of $r_{\text{count}} > 0.431$, greater than the value of r_{table} , so that all items were declared valid. Furthermore, the results of the reliability test using the Cronbach's Alpha method showed that maternal knowledge obtained a Cronbach's Alpha value of 0.819, the variable of the role of cadres was 0.841, and the variable of maternal activity was 0.863. This indicates that the questionnaire is reliable. The data processing stage involved cleaning, editing, coding, entry, and tabulation. Bivariate analysis was used to determine the relationship between two variables. The chi-square statistical test was used to determine the relationship between the variables.

RESULT

Characteristics of Respondents

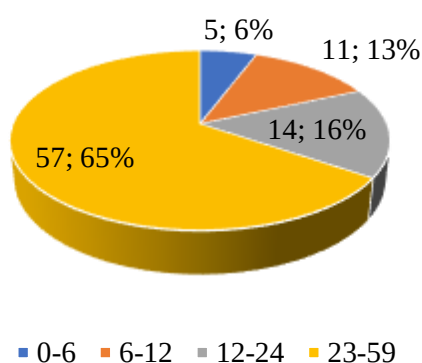


Figure 1. Sample Distribution by Age (n=87)

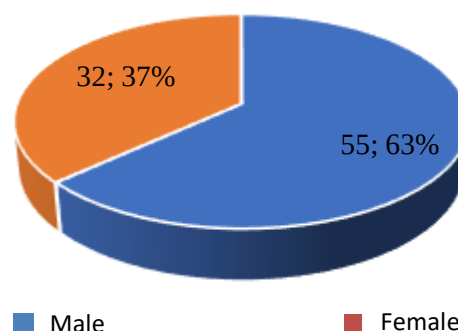


Figure 2. Sample Distribution by Gender (n=87)

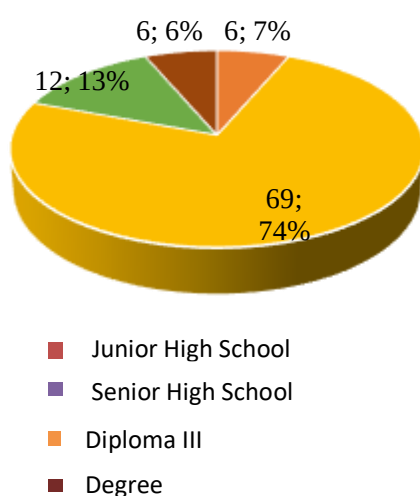


Figure 3. Sample Distribution by Education (n=87)

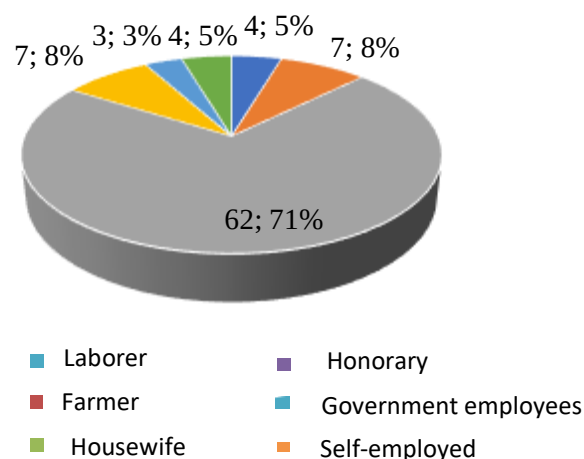


Figure 4. Sample Distribution by Occupation (n=87)

The figure above shows that the majority (65%) of the samples taken in this study were in the 23–59 month age group, and the smallest (6) were samples aged 0-6 month. Then, for gender, it shows that the majority (63%) of the samples taken in this study were male. For education, the majority had a senior high school education, and occupation shows that the majority (71%) of the samples taken in this study were housewives.

Descriptive Statistics

Table 1. Distribution of Knowledge Role of Cadres and Activeness in Bringing Toddlers to the Integrated Health Post (n=87)

Variables	n	%
Knowledge		
Enough	63	72.4
Less	24	27.6
The role of cadres		
Play a role	52	59.8
Do not play a role	35	40.2
Actively taking toddlers to the integrated health post		
Active	56	64.4
Not active	31	35.6

Table 1 illustrates that the majority (72.4%) of the sample in this study had enough knowledge. Furthermore, 59.8% of the sample in this study had a role as cadres. Furthermore, the majority (64.4%) of the mothers of toddlers in this study were actively taking their toddlers to the integrated health post.

Table 2. Cross-tabulation of Knowledge and Role of Cadres in Actively Bringing Toddlers to the Integrated Health Post (n=87)

Variables	Actively Bringing Toddlers to the Integrated Health Post				p-value
	Active		Not Active		
	n (56)	% (64.4)	n (31)	% (35.6)	
Knowledge					
Less	45	51.7	18	20.7	0.0026
Enough	11	12.6	13	14.9	
Role of Cadres					
Play a role	50	57.5	19	21.8	0.002
Not play a role	6	6.9	12	13.8	

Table 2 shows that of the 87 samples, 45 respondents (51.7%) had less knowledge and actively participated, while 13 respondents (14.9%) had enough knowledge and were not active in attending the integrated health post. The results of the statistical analysis using the chi-square test showed a p-value of 0.0026 (<0.05), thus concluding that there is a significant relationship between maternal knowledge and the active participation of toddlers in bringing their children to the integrated health post in the Puriala Community Health Center work area.

The table above also shows that of the 87 samples, 50 respondents (57.5%) had a cadre role in the supporting and active participation category, and of the respondents whose cadres did not play a role, 12 respondents (13.8%) did not actively participate in the integrated services post, and 6 people (6.9%) were active in the integrated health post. The statistical analysis using the chi-square test showed a p-value of 0.002 (<0.05), thus concluding that there is a significant relationship between the role of cadres and the active participation of toddlers in bringing toddlers to the integrated services post in the Puriala Community Health Center.

DISCUSSION

The Relationship Between Knowledge and Activeness in Bringing Toddlers to the Integrated Health Post

The research revealed that knowledge level is not the only factor related to mothers' active participation in bringing their toddlers to the integrated service post; it is likely influenced by other factors such as economic and family support. Knowledge is the result of understanding after observing a particular object. A mother's knowledge of the integrated service post and its benefits is crucial in influencing her choice to actively bring her toddler to the integrated service post. This is a person's perception (overt behavior).

Most human senses are acquired through the eyes and ears. Knowledge is a behavioral change that does not always go through five stages: awareness, interest (attraction to a stimulus), evaluation (evaluating or weighing the stimulus's merits or demerits), trial (trying), and adoption. Increased knowledge does not always lead to behavioral change, but there is a positive relationship between it and behavior. Behavior is determined by three factors: enabling factors, reinforcing factors, and predisposing factors. Knowledge is not necessarily instantaneous in response to awareness or knowledge, but the cumulative effect of increased awareness and knowledge is related to values, beliefs, trust, interests, and behavior (Putri et al., 2026; Rukmana et al., 2024).

A person will understand what is valid and what is true, and this belief will form an idea about a stimulus, a belief that is engendered by knowledge. Knowledge is essential because it is a crucial domain in shaping behavior, particularly when actively bringing their toddlers to the integrated service post. If the toddler's mother's perception of the integrated service post is positive, it will result in more active attendance, based on knowledge and awareness of the importance of attending the integrated service post. However, knowledge is constantly evolving, and knowledge can be obtained from various media in this increasingly advanced era. Therefore, mothers of toddlers with low educational backgrounds who actively

hear and see information about the integrated service post will be more active in bringing their toddlers to the integrated service post (Anis Ervina et al., 2024; Ashar et al., 2025; Biks et al., 2024).

The knowledge possessed by the toddler's mother forms the basis for developing awareness of the importance of activities at the integrated service post. A good understanding of the goals, benefits, and functions of the integrated service post in monitoring child growth and development will increase mothers' understanding of the importance of early detection of health problems, nutritional fulfillment, immunization, and regular monitoring of toddler growth and development. These cognitive processes play a role in shaping mothers' positive perceptions, motivation, and attitudes toward active participation in integrated service post activities (Putri et al., 2026). This also aligns with Anis et al.'s opinion that knowledge or cognition is a crucial domain in shaping one's actions. If the acceptance or adoption of a new behavior is based on knowledge, awareness, and a positive attitude, the behavior will be sustainable. Conversely, if the behavior is not based on knowledge and awareness, it will not last long. Lack of knowledge leads mothers to be unaware of the importance of bringing toddlers to the integrated service post. Mothers lack awareness and a positive attitude toward participating in activities at the integrated service post (Anis Ervina et al., 2024).

This research aligns with Agustami et al., (2025) find research results that there was a correlation between knowledge and visits by mothers of toddlers at the integrated health post with a p-value of 0.016, so is research (Aulia & Anjani, 2022; Jusuf et al., 2022) on factors related to maternal participation at integrated service posts, which concluded that there is a significant relationship between maternal knowledge and active participation in bringing toddlers to integrated service posts. Knowledge is a predisposing factor that influences a person's decision-making and health-related actions. Mothers who are well-informed about the benefits of Integrated Health Posts, such as growth monitoring, immunizations, vitamin and nutritional supplements, and early detection of developmental disorders, will have a stronger understanding of the importance of regular Integrated Health Post visits.

Samosir and Simamora research in 2025 show a significant relationship between the mother's level of knowledge and their activeness in bringing toddlers to the Integrated Health Post (p-value 0.001). Mothers with good knowledge were more actively involved, while those with poor knowledge tended to lack understanding of the benefits of the integrated service post and were less active (Samosir & Simamora, 2025). Furthermore, Rivanica & Pratiwi (2022), who examined the relationship between maternal knowledge and visits to integrated service posts, concluded that knowledge is related to maternal participation at integrated service posts.

Mothers with good knowledge of Integrated Health Posts tend to understand that these activities are not just for weighing children, but also for monitoring their child's growth and development, early detection of nutritional problems, immunizations, vitamin supplementation, nutritional counseling, and health education. This understanding increases mothers' perception that integrated service post visits provide direct benefits to their toddler's health and development, thus encouraging them to actively participate.

This research is in line with Apriasih's research, which found that the participation of mothers of toddlers in Integrated Health Posts in several regions in Indonesia is below the target set by the Indonesian Ministry of Health, which is 80%. The participation of mothers who have toddlers in integrated service posts is influenced by predisposing factors such as work, education, knowledge, attitudes, and motivation. Enabling factors include distance to the integrated service post, while reinforcing factors include the role of cadres and health workers, as well as family support (Apriasih, 2022).

The strengths of this study include comprehensive data collection, appropriate statistical analysis (chi-square), and attention to the local social and cultural context. However, the cross-sectional design limits the ability to assess causality, and some data, such as mothers' perceptions or the influence of family support, are subjective. Nevertheless, this study provides valuable insights into the factors that encourage mothers' participation and highlights practical strategies, particularly through the role of cadres, to increase community engagement in the integrated service post program.

The Relationship Between the Role of Cadres and the Activeness of Bringing Toddlers to the Integrated Health Post

The results showed that of the 87 respondents sampled, 50 respondents (57.5%) had a cadre role in the supporting and active participation category, and of the 18 whose cadres did not play a role, 12 respondents (13.8%) did not actively participate in the integrated services post, and 6 people (6.9%) were active in the integrated health post. Despite the crucial role of cadres, challenges remain in increasing maternal participation. Many factors influence this participation, including mothers' knowledge of the benefits of the Integrated Service Post and the accessibility of health services. Integrated Service Post cadres often need to conduct outreach and home visits to reach mothers who are not actively participating. In many areas, the role of cadres is also influenced by social and cultural factors. Cadres need to understand the cultural background of the local community to communicate effectively and overcome stigma or beliefs that may hinder participation. Research shows that cadres who can adapt to local norms can be more successful in encouraging community participation (Ampulembang

et al., 2025). The Role of Integrated Service Post cadres as a driving force in the community. Cadres who are active in providing outreach, reminding mothers about the schedule of the Integrated Service Post, conducting home visits, and creating a comfortable and informative atmosphere at the Integrated Service Post can significantly increase mothers' participation (Sukmawati et al., 2024).

The results of statistical analysis using the chi-square test showed a p-value of 0.002 (<0.05), thus concluding that there is a significant relationship between the role of integrated service post cadres and the active participation of toddlers in bringing them to the integrated service post in the Puriala Community Health Center work area.

This research aligns with Lubis et al., who examined the role of integrated service post cadres in increasing participation of mothers of toddlers. They concluded that integrated service post cadres influence the participation of mothers of toddlers in the integrated service post. Cadres serve as sources of information, motivators, companions, and liaisons between health services and the community. The more active and effective the cadres are in providing education and support to mothers of toddlers, the more likely they are to actively participate in integrated service post activities (Lubis et al., 2025).

Furthermore, Hartati, who examined the relationship between the role of cadres and visits by toddlers to the integrated service post, concluded that there is a significant relationship between the role of integrated service post cadres and the participation of mothers of toddlers in the integrated service post. Cadres who actively carry out their duties, such as providing health education, reminding mothers about integrated service post activity schedules, collecting data and monitoring toddlers, providing motivation to mothers, and conducting home visits to absent toddlers, can increase exposure to health information and reduce barriers for mothers in accessing integrated service post services (Hartati, 2026). This research is strengthened by Basrowi's research, which states that intensive interaction between cadres and mothers of toddlers can also build a trusting relationship so that mothers feel more supported and encouraged to participate in integrated service post activities (Basrowi et al., 2024).

In the Puriala Community Health Center work area, there are 170 integrated service post cadres, with most of them playing a role. This is shown based on interviews with respondents, most of whom feel that they have been helped by the presence of integrated service post cadres in the area, this assistance includes always informing them about the schedule of the integrated service post that will be implemented before opening the integrated service post, helping with the integrated service post process, and even making home visits for toddlers who do not have time to come to the integrated service post.

CONCLUSION

This study confirms a significant relationship between mothers' knowledge and the role of integrated service post cadres with mothers' active participation in bringing toddlers to the integrated service post in the Puriala Community Health Center area. The recommendations are practical for both the community, to maintain active participation, and the health center, to guide policy and develop cadres' skills. While the cross-sectional design limits causal conclusions, the study provides valuable insights into key social factors influencing maternal participation and offers practical guidance for enhancing integrated service post effectiveness and strengthening cadre roles in supporting child health. The authors would like to express their sincere gratitude to all those who contributed to the preparation of this article. Special thanks are extended to the Ministry of Higher Education, Science, and Technology for providing funding for the publication.

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