ABSTRACT

The role of cadre holds a major role in running health services in posyandu to realize optimal health status, so that all activities conducted by cadre leads to the purpose and purpose of posyandu. The research aimed to know the relationship of role of cadres with elderly visit in follow elderly posyandu in Kemendung hamlet Penanggungan village, Trawas sub-district, Mojokerto regency. Research design used correlational analytics with cross sectional approach. The population of elderly people in Kemendung Hamlet aged 60-74 years of 120 elderly. Sampling technique used by means of Total Sampling to get a sample of 120 elderly. Data were collected using questionnaires instruments for cadre and KMS roles to find out elderly visits. Data analysis using cross tabulation. The result of the research shows that from 49 respondents who evaluated the role of positive cadres in their active visit were 24 respondents (49.0%) and from 71 respondents who assessed the role of negative cadres in the visit that never was 44 respondents (62.0%). It can be included that there is a relationship between the Relationship Role of Cadres with Elderly Visit to Elderly Posyandu In Dusun Kemendung Village Penanggungan District Trawas Mojokerto Regency. It is because the role of cadres can affect the liveliness of the posyandu elderly visit. The better the role of cadres in running posyandu, the higher the liveliness of visit in posyandu elderly.

INTRODUCTION

As the elderly population increases, the government has formulated various elderly health service policies aimed at improving health status through health services in the form of elderly in Posyandu (Sunaryo et al., 2016). However, in its implementation, there are still problems that influence the low number of elderly Posyandu visits, one of which is the lack of cadres. The role of Community-Resourced Development Effort institutions such as Integrated Service Posts (Posyandu) plays an important role in providing basic health services to the elderly. Utilization of Posyandu has a dominant role in improving the health elderly if followed by optimal utilization by the community assisted by health workers and cadres so that all elderly Posyandu activities carried out by cadres lead to the aims and objectives of the Posyandu (Ismawati, Proverawati, & Pebriyanti, 2010).

According to data from the Central Statistics Agency, the number of elderly people in Indonesia in 2020 is estimated to reach 28.8 million (11.34%). The elderly population in Indonesia in 2016 was around 22.6 million, equivalent to 8.03%. World Population Prospects data, the 2012 Revision...
of the elderly population in Indonesia and the world in 2013, 2050 and 2100 has increased with the percentage of the elderly group from 2013 (8.9% in Indonesia and 13.4% in the world) until 2050 (21.4% in Indonesia and 25.3% in the world) and 2100 (41% in Indonesia and 35.1% in the world). The life expectancy of the Indonesian population since 2004-2015 showed an increase from 68.6 years to 70.8 years. In 2030-2035 it will reach 72.2 years (Statistik, 2015). The results of population projections for 2010-2035, Indonesia will enter the elderly period, where 10% of the population will be aged 60 years and over, in 2020. Data on the percentage of the elderly population in Indonesia by province in 2015 was 8.5% and in East Java 11.5% (Indonesian Ministry of Health, 2015).

The number of elderly women is greater than that of men, namely 9.0% of elderly women compared to 8.0% of elderly men. Meanwhile, 10.87% of elderly people live in rural areas, more than 9.37% of elderly people live in urban areas. The population in Mojokerto Regency in 2012 was 1,049,967 people with 270,750 elderly people (25.79%) consisting of 131,457 elderly men and 139,293 women (Mojokerto District Health Office, 2013). Based on the Java Health Service Report Timur obtained data based on the level of development of Posyandu from year to year showing an increase. In 2011 (50.29%) in 2012 (54.07%) and 2013 (60.28%) Posyandu, so there was an increase of 6.21% from 2012 to 2013. However, according to the Health Service, Posyandu coverage should have reached 80%-90%. It is hoped that by increasing the implementation of posyandu, posyandu can achieve the coverage recommended by the Health Service.

According to data from the Tamantirto Village Health Center, the number of elderly people is quite large, namely 11.3% of the population, but the coverage of elderly posyandu visits below 50% is still 66.7% (Prasetya, Yanti, & Swedarma, 2019). According to research conducted by Sumiati in 2012 regarding the use of posyandu for the elderly. The average number of visits to Posyandu for elderly people who come to receive health services in a month in the two posyandu groups is 91 people or 19.53% of 466 people (100%) while the coverage target is 70% (Sumiati & Ramdan, 2012). Another research conducted by Atika regarding a phenomenological study of the level of attendance of elderly people atposyandu in the working area of the Kesesi I Community Health Center, Pekalongan Regency, revealed that the role of cadres is one of the factors that increases the presence of elderly people at elderly posyandu (Atika, Samino, & Sari, 2022).

A cadre is someone who is chosen or appointed by the community to lead the development of posyandu in a place or village and the role of the cadre is an effort to increase the community's ability to help themselves to achieve optimal levels of health. Apart from that, cadres also play a role in developing the community in the health sector through activities that carried out at the posyandu by approaching government officials and community leaders. Apart from mobilizing the community, the role of cadres is always to make themselves available to make home visits to elderly people who do not attend the posyandu due to physical limitations and distance from the elderly posyandu. (Rasmiat et al., n.d.) Posyandu cadres have an important role because they are health providers who are located near the posyandu's target activities and the frequency of face-to-face contact with cadres is more frequent than other health workers. (Meilani, n.d.).

Factors that influence the elderly to come to the elderly posyandu, namely, there are many factors that influence the interest of the elderly in the elderly posyandu, determined by 3 main factors, namely, predisposing factors which include knowledge, attitudes, supporting factors (enabling factors) which include facilities and facilities. health, posyandu distance and reinforcing factors which include family support, the role of cadres (Notoatmodjo, 2007).

The low number of visits to elderly posyandu to attend posyandu for the elderly is one of the reasons for the lack of cadres' role. In order for the posyandu to run well and to overcome the various problems that surround it, it needs support from cadres. For this reason, cadres provide assistance or guidance for elderly posyandu activities to encourage elderly people to come to elderly posyandu by
providing health promotion, counseling and collaborating with the community, placing elderly posyandu locations that are easily accessible to all elderly people, advocating to community leaders to obtain support for the formation and sustainability of posyandu for the elderly, as well as completing standard facilities and infrastructure for posyandu activities for the elderly to support health checks as stated in the KMS. That's why cadres are required to have the ability to develop, guide and be supported by skills and experience. In this way, the health status of the elderly will increase so that a happy and prosperous old age can be achieved (Ma’rifatul, 2011).

RESEARCH METHODS
This research uses a correlation analytical design type with the research using a cross sectional study approach. The population in this research is all 120 elderly people in Kemendung Hamlet, Mojokerto Regency in Trawas District. This research uses the Total Sampling technique. The sample in this study was 120 elderly people in Kemendung Trawas Hamlet, Mojokerto. This research uses questionnaires and observation instruments. The data formed is processed and analyzed using a frequency distribution table.

RESEARCH RESULT
1. Characteristics of respondents based on cadre role
Table 1 Distribution of respondents based on cadre role in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency

<table>
<thead>
<tr>
<th>No</th>
<th>Cadre Role</th>
<th>Frequency(f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Positive</td>
<td>49</td>
<td>40.8</td>
</tr>
<tr>
<td>2</td>
<td>Negative</td>
<td>71</td>
<td>59.2</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>120</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on table 1 above, it shows that the majority of respondents have a negative cadre role, namely 71 respondents (59.2%)

2. Characteristics of respondents based on elderly visits
Table 2 Distribution of respondents based on elderly visits in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency

<table>
<thead>
<tr>
<th>No</th>
<th>Elderly Visitation</th>
<th>Frequency(f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Never</td>
<td>51</td>
<td>42.5</td>
</tr>
<tr>
<td>2</td>
<td>Not Active</td>
<td>33</td>
<td>27.5</td>
</tr>
<tr>
<td>3</td>
<td>Active</td>
<td>36</td>
<td>30.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>120</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on table 2 above, it shows that the majority of respondents had never attended an elderly Posyandu, namely 51 respondents (42.5%)

3. Relationship between the role of cadres and visits from the elderly in attending Posyandu for the elderly in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency
Table 3 Cross Tabulation of the Relationship between the Role of Cadres and Visits of the Elderly in Attending Posyandu for the Elderly in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency

<table>
<thead>
<tr>
<th>Cadre Role</th>
<th>Never</th>
<th>Not Active</th>
<th>Active</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>7</td>
<td>1</td>
<td>36</td>
<td>44</td>
</tr>
<tr>
<td>Negative</td>
<td>4</td>
<td>0</td>
<td>21</td>
<td>16</td>
</tr>
<tr>
<td>Total</td>
<td>5</td>
<td>3</td>
<td>27</td>
<td>30</td>
</tr>
</tbody>
</table>

Based on table 3 above, it can be seen that of the 49 respondents in the positive cadre role category with never visits there were 7 respondents (14.3%), those who made inactive visits were 18 respondents (36.7%) and those who made active visits were as many as 24 respondents (49.0%). Meanwhile, of the 71 respondents in the negative cadre role category with never visits, 44 respondents (62.0%), 15 respondents (21.1%) made
inactive visits and 12 respondents (16.9%) made active visits.

**DISCUSSION**

1. **Characteristics of Respondents Based on Cadre Role**

   Based on table 1, it shows that the majority of respondents have a negative cadre role, namely 71 respondents and 49 respondents have a positive cadre role.

   A role is everything a person or group of people do in carrying out an activity because of the position they have (Cahyaningtyas, 2013). The cadre role in question is a way to express the cadre's activities in practice, where the cadre has received training, the knowledge and skills carried out must be adapted to the cadre's duties in developing health programs in the village where the cadre's role is able to participate in efforts to increase the community's ability to achieve health status, the optimal one (Angraeni, 2014). The role of cadres in increasing the active role of the elderly is by inviting the community to get involved in carrying out activities at the posyandu by visiting the elderly (Cahyaningtyas, 2013)

   Factors that influence the role of cadres include work. The work environment can enable a person to gain experience and knowledge both directly and indirectly. If a cadre works, he will not have enough time to carry out posyandu activities. That one of the criteria for cadres is a man or woman who has sufficient time to carry out all the cadre tasks that have been determined, where posyandu activities are usually carried out on working days and hours. Based on the results of research on respondents, it shows that the elderly state that posyandu cadres have a role. The majority of negative cadres have never visited a posyandu for the elderly, as many as 44 respondents (62.0%). Based on filling out the questionnaire, 71 respondents found the role of negative cadres. Cadres who do not invite the elderly to come to the posyandu do not have enough information about the activities of the elderly posyandu, so that the elderly do not know where activities are held and the benefits of the elderly posyandu. This is because the positive role of posyandu cadres will always monitor the elderly and always tell them everything related to the elderly posyandu, the cadres will also invite the elderly to come to the posyandu whenever there are activities, this of course makes the elderly feel encouraged to come to the posyandu and have their health checked. However, from the research results it was also found that there were 12 elderly respondents with a negative cadre role but who were active in participating in posyandu activities (16.9%). This can happen because of encouragement from the family to always encourage the elderly to have their health checked at the posyandu or also because of invitations from friends who invite them to go to the posyandu.

   From the research results, it was also found that 49 respondents had a positive cadre role, but 18 respondents (36.7%) did not actively visit the elderly posyandu. This happens because there are no friends who come together to the posyandu, especially for elderly people who are lazy to travel alone, or also elderly people who are unable to come to the posyandu because there is no family to take them to the posyandu and the distance of the posyandu from home is too far, around >500 meters. According to the elderly, the distance is so far that the elderly feel tired from coming to the posyandu. The role of the cadre in question is a way to express the cadre's activities in practice, who have received education and training from the puskesmas. These posyandu cadres have an important role because they are health services located near the posyandu's target activities. Where someone carries out their rights and obligations in accordance with their position, they are said to be carrying out a role. For this reason, the role of cadres in encouraging people to come to the posyandu for the elderly must have the skills to provide education about the importance of visiting the posyandu for the elderly. In its implementation, cadres also need support from various parties, because
cadres themselves only play an important role as intermediaries in conveying information to the community so that cadres have a positive influence on increasing the activeness of the elderly in participating in Posyandu activities. This is very necessary to improve cadres in carrying out their duties better, remembering that cadres carry out their duties voluntarily. Support from community leaders and Community Health Center officers can increase cadres’ confidence in carrying out their duties so that the cadres’ role can be even better.

2. Elderly Visits to Participate in Posyandu for the Elderly

Based on table 2, it shows that the majority of respondents have never attended an elderly posyandu, namely 51 respondents (42.5%), inactive, namely 33 respondents (27.5%), active, namely 36 respondents (30.0%).

Posyandu for the elderly is a vehicle for services for the elderly which is carried out from, by and for the elderly which focuses on promotive and preventive efforts, without neglecting curative and rehabilitative efforts. (Notoatmodjo, 2007). Health services for the elderly group include physical and mental emotional examinations. The Health Care Card (KMS) for the elderly as a recording and monitoring tool to find out in advance the disease they are suffering from or the threat of health problems they are facing, and record developments in the Health Care Manual Book (BPPK) for the elderly or records of health conditions used at the Community Health Center. The aim of the elderly posyandu is to improve the health status and quality of life of the elderly to achieve a happy and efficient old age in family and community life in accordance with their existence. (Nursinah, Serli, Tondok, Tafor, & Hairuddin, 2023).

Several factors influence elderly posyandu visits including age, gender, education, occupation, distance and information. Based on research, it was found that the majority of respondents were aged 60-65 years, namely 73 respondents (60.8%). This shows that age influences elderly posyandu visits because as a person ages there will be physical and psychological aspects. According to researchers, physical factors in old age mean that most people are unable to carry out existing activities. As for other factors, it was found that the majority of respondents did not go to school, namely 72 respondents (60.0%). This shows that education can influence community participation and participation in organizing posyandu. The higher the education, the easier it is to receive information so that the more knowledge one has. According to a low level of education, it indicates a lack of knowledge and understanding of respondents about health. Respondents with low education have lower knowledge so they are less aware of the benefits of posyandu for the elderly. The educational level of highly educated respondents is considered to understand and know about nutrition and health sciences as well as the importance of visiting posyandu for the elderly. Therefore, the low level of education must be balanced by providing health knowledge so that the health insight of the elderly is further increased, for example by health education.

From the research results, it can be seen that the majority of respondents who never visited the elderly posyandu were 51 respondents (42.5%). There are several reasons why visits are never made by the elderly, including the long distance from home. In the research, this was related to the distance from the respondent’s home. Based on the research, it was found that the majority of respondents were far from home to the posyandu, namely 74 respondents (61.7%). This shows that the farther the respondent has to travel from home to the elderly posyandu, the lower the level of visits to the elderly posyandu. The close distance of the posyandu will make it easy for elderly people to reach the posyandu without having to experience fatigue or physical fatigue due to decreased endurance or physical strength of the body. According to researchers, there are still many respondents whose house is far from
the posyandu, so many elderly people have experienced a decrease in visits to the posyandu for the elderly, it is better if the posyandu is located in a place that is easily accessible to the community and determined by the community itself.

The results of further research showed that 33 respondents (27.5%) had inactive visits. This is because the elderly do not understand the importance of visiting posyandu for the elderly, so the majority of respondents visit the posyandu for the elderly but are still inactive. In the research, this is related to work. Based on the research, it was found that the majority of respondents worked as farmers, namely 62 respondents (51.7%). This shows that there are still many respondents who think that they do not have time to visit posyandu for the elderly regularly or regularly because the elderly are busy working, namely as farmers and there are many obstacles that arise in trying to visit posyandu for the elderly due to the work that a person does every day in life, to meet life's needs. Working elderly is one of the reasons why many elderly people do not visit the elderly posyandu regularly and optimally but still make elderly posyandu visits even though they are still in the inactive category. Meanwhile, 36 respondents (30.0%) made active visits. In this study, working elderly people still managed to make good posyandu visits because they still had free time and the opportunity to make elderly posyandu visits or because the elderly deliberately took the time to make good elderly posyandu visits for routine monthly health checks (check ups).

### 3. Relationship between the role of cadres and elderly visits to Posyandu

Based on the research, it can be seen that of the 49 respondents who have a positive cadre role with never visits, there are 7 respondents (14.3%), those who make inactive visits are 18 respondents (36.7%) and those who make active visits are 24 respondents (49.0%). Meanwhile, of the 71 respondents who had a negative cadre role with never visits, 44 respondents (62.0%), 15 respondents (21.1%) made inactive visits and 36 respondents (16.9%) made active visits.

From the results of the analysis using cross tabulation, it was found that there was a relationship between the role of cadres and elderly visits to elderly posyandu in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency. The results of the analysis mean that the relationship between the role of cadres and elderly visits has a strong connection, the direction of the relationship is positive, meaning that the higher the role of cadres, the higher the level of elderly visits in attending the elderly posyandu. This means that the role of cadres is very important in providing information to the elderly to improve the health status of the elderly. To further increase the level of attendance of elderly people visiting Posyandu for the elderly, it is necessary to provide information regarding the schedule and location of the posyandu and also provide information about the benefits of the Posyandu program for the elderly to the community so that the public, especially the elderly, know about the benefits of the Posyandu program for the elderly in order to improve the welfare of the elderly. In its implementation, cadres also need support from various parties. This is very necessary to improve the performance of cadres in carrying out their duties better, considering that cadres carry out their duties voluntarily. In accordance with the theory that support from community figures, Puskesmas officers can increase cadres' confidence in carrying out their duties so that the cadres' role can be even better. The good service provided at the Posyandu for the elderly will increase the interest of the elderly in visiting the Posyandu for the elderly (Nilasari & Farich, 2012).

From the analysis it can be seen that of the 49 respondents who had a positive cadre role with never visits, there were 7 respondents (14.3%). This happens because the elderly are sometimes lazy to go to the posyandu because the location of the posyandu is far away, so they are lazy to come to the posyandu. Respondents who made inactive visits were 18 respondents...
This happens because many respondents still believe that they do not have time to visit posyandu for the elderly regularly or regularly because the elderly are busy working, namely as farmers. Meanwhile, those who have a positive cadre role, most of the visits to the posyandu for the elderly are classified as active visits, namely 24 respondents (49.0%). This is caused by the respondent receiving information well. Elderly people who assess the role of cadres are positive in general because the elderly want to understand and understand how to maintain their health by coming to the posyandu. Then, based on the role of negative cadres, the majority of visits to elderly posyandu were in the never category, namely 44 respondents (62.0%). This was due to the lack of information obtained by respondents both from health service settings and from various media about the importance of elderly people visiting posyandu. elderly. Those who made inactive visits were 15 respondents (21.1%). This is because most of the elderly are reluctant to come to attend the elderly posyandu because the distance between home and the location of the elderly posyandu is far and because of the age factor which causes the elderly to not be physically strong enough to walk long distances and those who make active visits are 12 respondents (16.9%). This is because cadres who do not invite the elderly to come to the posyandu do not have enough information about the activities of the elderly posyandu, so that the elderly do not know when the elderly posyandu is held and the benefits of the elderly posyandu. According to researchers, the better the role of cadres, the better the level of elderly posyandu visits. It would be better for cadres to increase their knowledge of the benefits of posyandu by providing counseling to the elderly about how to live a healthy life. This will certainly make the elderly feel encouraged to take part in elderly posyandu activities to check their health.

So, based on the description above, it can be concluded that the better the role of the cadres, the higher the number of elderly visits to the elderly posyandu in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency. The role of cadres who come from local community members who are elected and appointed by the community and can work voluntarily to help the community in maintaining and improving health status.

CONCLUSION

Results of research that has been carried out. It can be concluded that H1 is accepted, which means there is a relationship between the role of cadres and visits by the elderly in attending Posyandu for the elderly in Kemendung Hamlet, Penanggungan Village, Trawas District, Mojokerto Regency. This is because the role of cadres can influence the activeness of elderly posyandu visits. The better the role of cadres in running the posyandu, the higher the activity of visits to the elderly posyandu.

REFERENCE


