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The Establishment of Youth Posyandu to Increase Adolescent's Productivity

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Abstract

The complexity of health problems in adolescents needed requires an comprehensive and integrated treatment that involves all elements across the programs and related sectors. Youth Posyandu was a solution that can be offered to community. This activities aims as a forum that brings together adolescent or youth in managing and facilitating them to getting informations which is about healthy lifestyle, adolescent reproductive health and other health problems. The methods used include 3 steps: preparation, actions, and evaluation. The location was in Lempuing, Ratu Agung District, Bengkulu City, and involving 25 adolescents. The results of the activity showed that the establishment of the youth Posyandu in Lempuing had a positive impact on partners. In conclusion, this youth Posyandu makes it easier for teenagers to obtain information related to a healthy lifestyle, forms youth support groups, and becomes a forum that facilitates youth in understanding their daily problems.

Keywords: adolescent's health, adolescent's productivity, youth posyandu

A. Introduction

Adolescence is a period of transition from childhood to adulthood [1]. This transitional period will have an impact on rapid physical-psychological changes [2]. These rapid changes will have an impact on adolescents to find their identity [3]. If during this adolescent period they do not get a good environment, it will be easy for deviant attitudes and behavior to occur [4]. if prevention efforts are not made as early as possible it will cause a terrible destruction, namely the large number of teenagers who fall into promiscuity [2,5]. Based on the results of the 2017 School-Based Health Survey in Indonesia (GSHS), a national overview of health risk factors can be seen in students aged 12-18 years (junior high and high school). As many as 41.8% of men and 4.1% of women admitted that they had smoked, 32, 82% of smokers smoked for the first time at the age of \leq 13 years [6]. The same data also showed that 14.4% of men and 5.6% of women had consumed alcohol, then it was also found that 2.6% of men had used drugs [7,8]. Another description of health risk factors is sexual behavior where 8.26% of male students and 4.17% of female students aged 12-18 years have had sexual intercourse [9]. Premarital sexual behavior certainly has a broad impact on adolescents, especially related to the transmission of infectious diseases and unwanted pregnancies and abortions [5,10].

The complexity of health problems in adolescents, of course, requires comprehensive and integrated treatment that involves all elements from cross-programs and related sectors [11]. Health sector policies related to adolescent health services as referred to in Permenkes Number 25 of 2014 are intended so that every child has the ability to live a clean and healthy life, have healthy life skills, and good social skills so that they can learn, grow and develop in harmony and optimally become human resources. qualified human beings [11,12].

The existence of a youth posyandu is a solution that can be offered in the community, so that having a youth posyandu can improve the welfare and reproductive health of adolescents [13]. Posyandu has become an important thing in the community [14]. According to data from the Ministry of Health for 2018, there are 266,827 Posyandu spread throughout Indonesia, which means that there are around 3-4 Posyandu in each village [6,11]. The purpose of the Youth Posyandu is to provide knowledge about adolescent reproductive health, provide knowledge of the importance of reproductive health and drug education for adolescents, create a forum for the younger generation in each village as a forum for

coaching and understand the importance of a healthy lifestyle [11,14]. Youth Posyandu activities consist of basic health services such as weighing and measuring blood pressure, counseling on youth reproductive health problems and problems experienced by adolescents in general, such as drugs, sexuality, HIV/AIDS [8]. So based on the complexity of health problems in adolescents, community service will be carried out in the form of forming a Youth Posyandu.

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B. Methods

This community service activity was carried out in Lempuing Village, Ratu Agung District, Bengkulu City from July to December 2021. The team for this Community Service activity were Midwifery Lecturers with a Masters in Midwifery education background, involving Stakeholders or several related partners including; Head of the Lempuing Health Center, Head of the Lempuing Village Head, Manager of the Bangga Kencana BKKBN Program (Korlap and Family Planning Extension), PJ of the PKPR Program at the Lempuing Health Center, Chair of the Lempuing BKR, Lempuing PKK Working Group Team. There were 25 Lempuing youths participating in the activity. Service activities carried out in the form of forming the Youth Posyandu program. The approach method used in this community service activity is divided into three (3) stages of activity, namely preparation, implementation, and evaluation.

Activity Preparation

In the preparation step, some of the preparations made by the service team are:

- 1. Preliminary data survey, the Team conducted an initial survey in the form of collecting data on the number of adolescents in the Lempuing Health Center area, Bengkulu City
- 2. Determination of priority issues and activity plans

Some of the problems found with partners were then identified and the most prioritized problems determined, approached or advocated with local community leaders, and set a schedule for implementing activities (Table 1).

Table 1. Alternative solutions offered in community service programs

| No | Alternative Solutions | Activity plan |
|----|--|---|
| 1 | Efforts to increase the active participation | Coordinate with stakeholders, TOMA, |
| | of the community in tackling youth | and form a joint commitment |
| | problems | (Cooperation MoU) |
| 2 | Improving the success and expanding the | Outreach, involving BKKBN partners, |
| | reach of the Adolescent Care Health | Genre Ambassadors, forming Youth |
| | Service Health Center (PKPR) Program in | Posyandu, Forming the organizational |
| | tackling youth problems | structure of Youth Posyandu |
| | | management |
| 3 | Increase partner community understanding | Delivery of information/socialization for |
| | of the importance of Youth Posyandu | understanding perceptions about |
| | managed by youth and for youth | Posyandu Youth, and Initial Debriefing |
| | • | Activities. |

Implementation of Activities

At the implementation stage, the steps taken include (Table 2).

Table 2. Action implementation steps

| No | Activity | Information | Source person |
|----|--|--|----------------------------|
| 1 | Coordinate with the parties/partners involved: Lempuing PKM, Lempuing Village Head, and BKKBN Bangga Kencana Program Manager (Korlap and KB Extension) | problem priorities, activity plans, and joint output | and |
| 2 | Socializing the formation of a youth Posyandu, and distributing leaflets that have been made | | Wewet .S |
| 3 | Attracting 25 local youths as Youth Posyandu participants | Involve local youth to attend formation activities | Dwie Yunita and Nispi Y |

| No | Activity | Information | Source person |
|----|--|--|---|
| 4 | Signing of the Joint Commitment and cooperation MOU | Involve all partners, service implementation team, and youth present | Whole Team |
| 5 | Formation of Youth Posyandu | The joint output targets have been achieved according to the agreement | Lecturer Team, and Youth Ambassadors (genre) |
| 6 | Recruitment of Cadres and establishment of the organizational structure of the youth Posyandu | The organizational structure and youth posyandu cadres have been formed | Lecturer Team, and Youth Ambassadors (genre) |
| 7 | Socialization of initial training on basic tasks for youth posyandu cadres that have been formed and develop a youth Posyandu work program | The initial socialization of the youth posyandu program has been carried out | Wewet S. and Dwie Yunita |

Activity Evaluation

The third stage is evaluation, in the form of evaluating the availability of places for carrying out the activities of forming a Youth Posyandu, evaluating the presence of stakeholders/partners involved, evaluating the response or responses of the local community, and planning follow-up of the sustainability of the Youth Posyandu program.

C. Result and Discussion

Community service activities that have been carried out by the Midwifery Lecturer Team at the Bengkulu Ministry of Health Poltekkes involving three students, and several interested partners/stakeholders, resulted in a Joint Commitment in increasing the productivity of adolescents through assistance in the establishment of the Youth Posyandu, which can be described as follows:

Support and Support for the Implementation of Activities

The implementation of the activities to form the Lempuing Youth Posyandu program has reached an agreement between several related parties and is going very well. As for the form of direct support and support provided when the implementation of this community service activity takes place, namely by the direct presence of Stakeholders or several partners involved, including; Head of the Lempuing Health Center, Head of the Lempuing Village Head, Manager of the Bangga Kencana BKKBN Program (Korlap and Family Planning Extension), PJ of the PKPR Program at the Lempuing Health Center, Chair of the Lempuing BKR, Lempuing PKK Working Group Team. All elements present took part in the signing of the Joint Commitment plaque board and the signing of the partner cooperation MoU sheet which had been stamped from both parties involved.







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Figure 1. Signing of MoU and Joint Commitment

Lempuing Youth Posyandu was Formed

Youth Posyandu is a form of Community-Based Health Efforts that is managed and organized from, by, for and with the community, including youth, in the implementation of health development, in order to empower the community and provide convenience in obtaining health services for adolescents to improve their health status and adolescent healthy life skills [11,13]. Health sector policies related to adolescent health services are listed in Permenkes Number 25 of 2014, aimed at so that every child has the ability to live a clean and healthy life, have healthy life skills, and good social skills, so that they can learn, grow, and develop harmoniously and optimally become quality human resources [4,11].

The successful implementation of this community service activity was the formation of the Lempuing Youth Posyandu Working Group. The Youth Posyandu Working Group is a forum that coordinates the development of Youth Posyandu, and is part of the Posyandu Pokjanal at the sub-district level. A working group or commonly abbreviated as Pokja Posyandu for Lempuing youth has been formed and approved by the Head of the Lempuing Village Head on October 15, 2021 as a form of direct involvement in community service activities by the Team of Midwifery Lecturers at the Bengkulu Ministry of Health. This sub-district level Working Group will be responsible to the Posyandu Working Group in the Village/Kelurahan, and has responsibility for coordinating various coaching efforts related to improving the function and performance of the Youth Posyandu in their working area (Juknis Posyandu Remaja, 2019).







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Figure 2. Formation of Youth Posyandu

The organizational structure of the Lempuing Youth Posyandu management structure and the Recruitment of Youth Posyandu Cadres were formed

The formation of the Youth Posyandu is flexible, developed according to the needs, partner problems, and available resource capabilities. The formation of the Lempuing Youth Posyandu was carried out through MMD (Village Deliberation Meeting) based on SMD (Introduction Survey), namely through an internal approach and an external approach that the Community Service Team has carried out so that a sense of belonging to the community arises through their own findings on the problems faced and the potential they have. The selection of the organizational and management structure as well as the recruitment of Lempuing Youth Posyandu cadres was carried out through a special meeting involving the local youth community, namely 25 teenagers in the Lempuing Village, as well as inviting work partners from the Lempuing Health Center, Korlap and Family Planning Counselors from BKKBN, Chair of BKR, Coordinator PKPR Program, as well as involving leaders and community members such as the Head of the Lurah, the PKK Working Group Team, and Genre Ambassadors. The selection was carried out by deliberation for consensus in accordance with the applicable procedures and criteria, so that the results obtained were one Chairperson, Secretary, Treasurer, and 5 Youth Posyandu Cadres.





Figure 3. Lempuing Youth Posyandu management structure organization

Understanding of the basic concept of Youth Posyandu

The stages that are no less important after the formation of organization and management, and recruitment of Youth Posyandu Cadres, the team conducts socialization or delivery of material related to the basic concept of what a Youth Posyandu is, and why this Posyandu is important to form. An understanding of the duties and responsibilities as selected cadres is an early form of basic knowledge provision for the youth Posyandu Cadres involved. Information on the initial briefing on the basic tasks for youth posyandu cadres that had been formed involved 25 youth, and the focus of the material on what a youth posyandu was was conveyed during socialization by the head of the community service team at the Bengkulu Ministry of Health Poltekkes. Participants have also been given a set of

participant contacts, which contain stationery/ATK, youth posyandu leaflets, and a short module on the importance of youth Posyandu.







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Figure 4. Socialization activities as the initial provision of Youth Posyandu

Continuity

The success of the implementation of community service activities is thanks to thisdynamic coordination and good communication from several parties/partners involved, so that this becomes an important element in the sustainability of the Youth Posyandu activity program that has been formed. In the future, hopefully withthe formation of this youth posyandu can facilitate adolescents in obtaining information related to a healthy lifestyle, being able to independently form youth support groups, being able to become a forum that facilitates adolescents in understanding the problems experienced by adolescents including regarding adolescent reproductive health, and the best solutions in overcoming problems adolescent health [13,14].

In previous research, it was stated that the establishment of a youth posyandu in Krecek Village, Badas District, Kediri Regency, carried out the main activities, namely education on healthy life skills, adolescent reproductive health in the form of providing information about adolescent reproductive organs, puberty, the process of pregnancy, menstruation, family planning, sexually transmitted diseases, sexually transmitted infections, gender, and maturing age of marriage, HIV and information about the transmission, prevention and symptoms of HIV/AIDS [15]. The implementation of the youth posyandu uses a 5 table system, the same as the posyandu for toddlers, which consists of; 1) Registration (filling in the attendance list, for the first visit adolescents fill out personal data forms), 2) Measurements (weighing, measuring height, blood pressure, upper arm circumference, anemia check for young women), 3) Recording (carried out by cadres), 4) Health services provided according to client problems, and 5) KIE (Communication, Information and Education), this is the same as establishing youth posyandu cadres in Bokoharjo Prambanan [15,16]. In this community service activity, the new team managed to form a core board of youth posyandu cadres in Lempuing, form an organizational structure, and socialization as an initial preparation so that they know the importance of youth posyandu. It is hoped that monitoring the continuity of activities, cadre training, and youth posyandu activity programs will become a development effort in the next stage.

D. Conclusion

Community service activities to increase youth productivity through the establishment of a Youth Posyandu have a positive impact on partners. Partners gave a good and positive impression in responding to the establishment of the youth posyandu program in Lempuing, because this was something new and the first time it had happened in Bengkulu City. Partners stated the usefulness of this activity, being able to provide increased promotive and preventive services to youth targets regarding their health, and hopes that the Youth Posyandu program will continue to be sustainable in the future and can become a pilot Youth Posyandu at the Middle level.

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