

# The Effect of Community Education Using Media Leaflet, Poster and Pocket Book Towards Posyandu Cadre Knowledge on Children Development and Growth, Supplementary Feeding, Iodine Deficiency Disorder and UPGK

B. Doddy Riyadi<sup>1</sup>, Juin Hadisuyitno<sup>2</sup>

<sup>1,2</sup>Department of Nutrition, Poltekkes Kemenkes Malang

**Abstract:** Based on the results of baseline data for the year 2016 in the Sumbersekar village of the District Dau Malang undertaken by students of level 3 diploma courses majoring in nutrition at Malang Health Polytechnic show that the percentage of Posyandu cadre knowledge about Posyandu was 43%, growth and development of infants 39%, Supplementary Feeding (PMT) 47.8%, iodine deficiency disorders (GAKI) 17%, Family Nutrition Improvement Efforts (UPGK) 48%, all were included in the category of less. This is evidenced from the scores obtained in the questionnaire about knowledge posyandu less than 60. The general purpose of this research is to analyze the effect of media outreach with leaflets, booklets and posters on the level of knowledge about Posyandu of Posyandu cadres in the village Sumbersekar Dau District of Malang. This research was conducted in the village of Sumbersekar the District Dau Malang on 16 January 2017 until 18 February 2017. The research is a Quasi-experimental study the design of the study was one group pretest posttest. The research instrument used is a personal data questionnaire, cadre knowledge by pretest-posttest, pretest-posttest matter for the posters, leaflets and booklets, stationery, Posters, Leaflets and Handbook. The sample used is 23 cadres posyandu in Sumbersekar Village. The results showed that there were differences before and after community education with the media leaflets, booklets and posters to the knowledge level of Posyandu cadre about posyandu, development and growth of children, supplementary feeding (PMT), disorders due to iodine deficiency (GAKI), Efforts to Repair Family Nutrition (UPGK). There is influence of giving media (leaflet, pocket book and poster) to knowledge about posyandu cadres about posyandu, and the most influential media in changing knowledge of posyandu cadres of toddler is pocket book. It is suggested that posyandu cadres should increase the use of media leaflet, pocket book and poster in order to give education to the community.

**Keywords:** community, education, media, posyandu, cadre

## 1. Introduction

Based on Posyandu activities, the organization of Posyandu is divided into 5 tables, namely: a) Table I for registration, either under-five, pregnant mother or EFA. B) Table II for toddler weighing and measurement of LILA of pregnant mother and EFA. C) Table III for the registration of toddlers, pregnant women, and PUS / WUS. D) Table IV for counselling. E) Table V for health services and family planning (Ministry of Health RI, 2013, 13-24).

Based on the results of baseline data for the year 2016 in the village of Sumbersekar the District Dau Malang undertaken by third level students study program diploma 3 Department of Nutrition Health Polytechnic Malang shows that the percentage of knowledge of Posyandu cadres on Posyandu was 43%, on the growth and development of infants 39%, on supplementary feeding (PMT) 47.8%, on iodine deficiency disorders (GAKI) 17%, Family Nutrition improvement efforts (UPGK) was 48% included in the category of less. This is evidenced from the score obtained in the questionnaire about posyandu knowledge less than 60.

Therefore, it is necessary to improve knowledge of cadres to support the implementation of the activities at posyandu. To support the ability of cadres in carrying out their duties, one way that can be used is to utilize communication using print media. For example poster, leaflets and pocket books.

From the above background, the researchers wanted to determine the effect of counseling with the media leaflets, booklets and posters to the knowledge level cadres Posyandu toddler about IHC, Development and Growth Toddler Feeding (PMT), deficiency disorders Iodine (GAKI), Effort Nutrition Improvement family (UPGK) in the village Sumbersekar Dau District of Malang.

## 2. Methods

The type of research was Quasi Experiment because of field research that provide treatment or action in the form of counseling with a lecture and give leaflet and pocketbooks and putting up posters to cadres of Posyandu, which was then measured the result or effect of the community education towards the knowledge of cadres as well as the effect of the poster, Leaflet and pocket book that was done on January 16, 2017 until February 18, 2017 at village Sumbersekar district Dau Malang district.

Population in this research was cadres who are in the village Sumbersekar, Puskesmas Dau, Malang was 30 with a sample of 23 cadres Posyandu toddler who is still active in Posyandu.

Independent variable in this research was providing education with media leaflet, pocket book and poster with dependent variable was knowledge of posyandu cadre.

Volume 6 Issue 8, August 2017

[www.ijsr.net](http://www.ijsr.net)

Licensed Under Creative Commons Attribution CC BY

### 3. Results and Discussion

Knowledge of Posyandu Balita cadres is the cadre understanding about posyandu. Notoatmodjo (2012) states that knowledge is the result of "know" that occurs after a person performs sensing of a particular object. Sensing takes place through the human five senses, ie the sense of sight, hearing, smell of taste and touch, much of human knowledge through the ears and eyes.

**Table 1:** Frequency Distribution of Pretest and posttest knowledge of Cadres About Posyandu

Knowledge level	Pretest		Posttest	
	N	%	N	%
Good	4	17	3	13
Enough	14	61	17	74
Less	5	22	3	13
Total	23	100	23	100

Table 1 shows the scores before and after counseling for Posyandu cadres, cadres in the category of less knowledge on the pretest was 22% or five respondents. Enough was 61% or 14 respondents. Good was 17% or by 4 respondents. While the level of knowledge of cadres Posyandu after given an education using the media poster, leaflet and booklet have the knowledge to the category of 13% or less by the number of respondents ie 3. Simply equal to 74% or 17 respondents ie. Good by 13% or 3 respondents ie. Knowledge of cadres before and after extension by using the media leaflets, booklets and posters were increased and some others are the same, can be seen in Table 9 which shows that the category of less than 22% pretest and posttest decreased at the time with less category of 13%, and proved in the lowest score on the pretest posttest by 45 and the lowest score increased by 15 points to 60 for the lowest score and the highest score on the pretest of 85 while on a posttest at 95. this is due to several factors that affect one is the age, occupation, education as expressed by Cahyaningsih, et al (2013) ie age is one of the sociodemographic factors that can affect a person's level of knowledge. Age can affect the thinking, capture and memory of a person against certain information. The mean age of respondents was low.

**Table 2:** Frequency Distribution of Pretest and posttest of Cadres About Toddlers Growth and Development.

Knowledge level	Pretest		Posttest	
	N	%	N	%
Good	2	9	3	13
Enough	17	74	18	78
Less	4	17	2	9
amount	23	100	23	100

Based on Table 9 shows that knowledge of posyandu cadres before being given counseling by using media poster, leaflet and pocket book with good category as much as 2 respondents or 9%, in enough category as many as 17 Respondents or 74% and in the category less as much 4 respondents or 17% . The lowest value on pretest is 20 and the highest value is 75. While at the level of knowledge of posyandu cadre after given counseling using posyandu media, leaflet and pocket book, posyandu cadre with knowledge of good category increased to 3 respondents or

13%, in category enough as much as 18 respondents or 78% and in the category less decreased to 2 respondents or 9%. Knowledge of cadre before and after given counseling by using media of poster, leaflet and pocket book which have improvement there is the same. Counseling with the use of media can affect this can be seen from the lowest value on the posttest that is equal to 55 and the highest value is 100. So that counseling is effective in increasing the posttest value which means there is an increase of knowledge posyandu cadres. This is due to several factors that affect, one of which is age, occupation, education as expressed by Cahyaningsih, et al (2013) ie Age is one of the sociodemographic factors that can affect a person's level of knowledge. Age can affect the thinking, capture and memory of a person against certain information. The low average age of respondents (can be an obstacle in increasing knowledge because it is slower in capturing information). Cahyaningsih, et al (2013) stated that sociodemographic factor that can also affect the level of one's knowledge. The work environment can affect one's social life.

**Table 3:** Frequency Distribution Pretest and posttest of Cadres About Supplementary Feeding

Knowledge level	Results pretest leaflets, posters, booklets	
	N	%
Good	1	4
Enough	18	78
Less	4	18
<b>amount</b>	<b>23</b>	<b>100</b>

Table 3 shows that the knowledge of cadres belonging to the category of less during the pretest as many as 4 people or 18%. The level of education of respondents influences the knowledge of the respondents before being given health education. According Emilia (2009) Education respondents 39% of junior high school graduates will affect the initial knowledge of the respondents before being given health education.

**Table 4:** Frequency Distribution Pretest and posttest of Cadres Iodine Deficiency Disorder

Knowledge level	Pretest		Posttest	
	N	%	N	%
Good	3	13	6	26
Enough	17	74	15	65
Less	3	13	2	9
amount	23	100	23	100

Table 4 shows that the knowledge of cadres belonging to the category of less during the pretest as many as 3 people or 13%. While the respondents who fall into category enough as much 17 people or equal to 74%. Then the respondents are categorized as good as 3 people or 13%. Furthermore, knowledge of the cadre included in the category of less when the posttest of 2 people or 9%. Then the respondents are categorized. Enough as many as 15 people or 65%. And respondents who are either category 6 people or 26%. From the results of questionnaires to collect data about the effect of giving counseling on the level of knowledge posyandu cadre about Impaired Iodium Disorders (GAKI) the lowest pretest value is 55 and the highest pretest value is 90. While

the posttest results the lowest value is 80 and the highest value is 100 .

The results showed that the education influenced the knowledge level of the respondents. This is because through this education, the respondents are interested to know more about Iodine Deficiency Disorders (GAKI) so that the right content that can be received well.

Knowledge is the result of knowing, this happens after people do sensing of a particular object. According to Notoatmodjo (2003) there are six levels of cognitive knowledge, namely: know, understand, application, analysis, synthesis and evaluation. So knowledge increases then attitude or behavior will be improved better. The influence of counseling on cadre knowledge was measured by comparing cadre counseling before and after counseling.

**Table 5:** Frequency Distribution Pretest and posttest of Cadres About UPGK

Knowledge level	Pretest		Posttest	
	N	%	N	%
Good	4	17	4	17
Enough	15	66	17	74
Less	4	17	2	9
amount	23	100	23	100

Table 5. show before and after counseling for Posyandu cadres, cadres knowledge in both categories on the pretest of 17% or amounted to 4 respondents and the same at posttest for 17% or 4 respondents. Then enough at pretest category by 66% or amounted to 15 respondents, while at posttest increased to 74% the same as the 17 respondents. Then cadres Posyandu knowledge in the poor category in the pretest of 17% or amounted to 4 respondents and the posttest in the poor category decreased to 9% the same as 2 respondents. In this study, a questionnaire respondents value the highest score, namely 90 while the value of the questionnaire lowest score : 50. Education with the media leaflets, booklets and posters about UPGK respondents to better understand the material presented so that the increased value of the questionnaire on the pretest.

Knowledge is the result of knowing, this happens after people do the sensing of a particular object. According to Soekidjo Notoadmodjo (2003) there are 6 levels of cognitive knowledge, namely: know, understand, application, analysis, synthesis and evaluation. So knowledge increases then attitude or behavior will be improved better. With the right method, it can increase the knowledge of posyandu cadres of children under five in understanding what is being delivered by health personnel. Because according to Notoatmodjo (2010) that knowledge is a very important domain for one's actions, because from experience and existing research, it turns out that behavior based on knowledge will last longer than not based on knowledge. So, before a new person behaves, he or she first knows what the meaning or benefits of the behavior are.

A statistical test to determine whether there is influence of illumination on increasing the knowledge of cadres using paired sample t-test.

**Table 6:** T test of Cadres Before and After Using Media Leaflet, Pocket Books and Posters About posyandu

	T count	Df	Sig
Pretest - posttest	-5639	22	.000

Statistical test using paired sample t-test for normally distributed cadres knowledge after the normality test using skewness *sk* values and the value of kurtosis of the pretest and posttest are at  $\pm 2$ , then the normal distribution of data. According to the table 6 the difference of Posyandu cadre knowledge before and after counseling with the media leaflets, booklets and posters show that  $Sig\ 0.000 > 0.05$ . So to  $H_0$  accepted that there are significant differences between the pretest to posttest value which means education using leaflets and posters media pocket book effect on the level of knowledge of cadres Posyandu. In this study the value - average pretest cadre is 70 and value - average posttest 82. Thus, there is the effect of posters, leaflets and pocket book to the knowledge level cadres are given counseling before and after using the media. It was in accordance with the opinion of Sudjana DKK (2001), which states the benefits of media in education, among others, the extension will attract more attention so that the mother can foster motivation and interest of the respondent, extension materials will be quite vague so it can be better understood by the mother and allow mothers to master the purpose of better education, more varied methods of counseling will not merely communication verbal through the narrative told by extension so that mothers do not get bored, the mother will be more activity because not only listen to the material extension, still i also do other activities

**Table 7:** Paired Samples T-Test of Cadres Before and After education on Growth and development

Variable	Average		T-Count	P
Knowledge level	Before	After	-9.915	0,000
	52.8	79.5		

Based on the statistical test used paired sample t-test for normally distributed cadres knowledge after the normality test using kuortosis skweness. The results of statistical tests show that the value of t arithmetic -9.915, with p-value  $0.000 < 0.05$ . So  $H_0$  is rejected that there is a significant difference between the value of pretest with posttest value which means counseling by using media poster leaflets and pocket books affect the level of knowledge posyandu cadres, the knowledge of posyandu cadres are increasing there are also the same, but no posyandu cadres who have knowledge in the category less. In this study the average value of pretest cadres is 52.8 and the mean posttest 79.5. So that there is influence of giving poster, leaflet and pocket book to cadre knowledge level before and after giving counseling using media. This is in line with the opinions Sudjana and Riva (2001), which states the benefits of media in education, among others, the extension will attract more attention so that the mother can foster motivation and interest of the respondent, extension materials will be quite vague so it can be better understood by the mother and allow mothers to master Better education outcomes, extension methods will be more varied not just verbal communication through vocabulary by the counselor so that mothers do not get bored, mothers will do more activities because not only listen to extension materials, but also do other activities.

**Table 8:** Paired Sample T Test of Cadres Before and After Provision Leaflets, Posters, Handbook on supplementary feeding

	Average	SD	Min	Max	Average difference	P
Pretest	62.61	8.9	45	85	21.89	0,000
Posttest leaflet	84.5	8.9	65	100		
Pretest	62.61	8.9	45	85	23.04	0,000
Posttest poster	85.65	7.5	75	100		
Pretest	62.61	8.9	45	85	26.61	0,000
Posttest pocket book	89.35	7.7	75	100		

Statistical test using paired sample t-test for normally distributed cadres knowledge after the test for normality using the Kolmogorov-Smirnov. Statistical test results showed the value of  $p < 0.05$  is equal to 0.000 at posttest leaflet,  $p < 0.05$  is 0.000 at posttest posters, and  $p < 0.05$  is 0.000 at posttest pocket book, it means the provision of leaflets, posters, and books pocket significant effect on increasing the knowledge of cadres posyandu. In accordance with the stimulus theory of organisms that states that the cause of behavior change depends on the excitability of stimuli (stimulus) that communicates with the organism. That is, the quality of communication resources (sources) for example credibility of leadership and speaking style to determine the success of behavior change a person, group, or community. It is also supported by the theory of Kurt Lewin argued driving forces increase. This happens because of the stimulus-stimulus that encourages the occurrence of behavioral changes. This stimulus is in the form of counseling-peny penyahanahan or information related to the behavior in question. This is in line with Pratiwi's research (2012) which states that there is an influence between prior and post-training knowledge of posyandu cadres.

**Table 9:** Paired Samples t test of Cadre on Iodine Deficiency

	t <sub>Count</sub>	Df	Sig
Paired sample t-test	-7,391	22	,000

The statistical test uses paired sample t-test because the knowledge data of the cadre is normally distributed after the pretest and posttest normality test with skewness and kurtosis value. According to the table 14 on the statistical test using paired sample t-test showed that the value sig (0,000) with a 95% confidence level. So it can be concluded there is a significant difference between the value of pretest and posttest value. It is also shown in table 10 that the posttest of respondents with the category of knowledge level both increased and the respondents with the knowledge level category decreased less when compared with the pretest value.

Increasing the level of knowledge of respondents from before giving media education (pretest) until after giving counseling with media leaflet, pocket book and poster (posttest 3) caused responden get repeated counseling that is three times. So with the counseling, make respondents understand and understand about the material delivered and can change the knowledge of respondents.

In accordance with the stimulus theory of organisms that states that the cause of behavior change depends on the excitability of stimuli (stimulus) that communicates with the organism. That is, the quality of sources of communication (sources) such as leadership credibility, and style of speech determine the success of a person's behavior change, group, or community. It is also supported by the theory of Kurt Lewin who believes the driving forces are increasing. This happens because of the stimulus-stimulus that encourages the occurrence of behavioral changes. This stimulus is in the form of counseling-peny penyahanahan or information related to the behavior in question.

The average value of cadre knowledge at pretest was 74 and increased by 15 points during posttest. So the counseling provided the impact of increased knowledge of posyandu cadres of toddlers on Impaired Due to Iodine Deficiency. This is in line with research Zal Fitriyah (2011) states, the increase of cadres knowledge about nutrition of children under five by 7 points after given nutrition intervention. In addition, research conducted by Fatmah (2012) states an increase

**Table 10:** Paired Samples t test Before and After Education

	T count	Df	Sig.	Decision
Paired t test	-6,817	22	0,000 < 0.05	Ho accepted

Table 10. indicates that the value of  $p < 0.05$  is 0.000, meaning that education significantly influence the improvement of cadres Posyandu knowledge of pretest and posttest. According to Chalik in Nugroho and Nurdiana (2010) states that knowledge and education of a person will affect the behavior of one's health. This means the knowledge of both respondents can affect the activity of a cadre in posyandu activities. Whereas on the contrary Kader who have poor knowledge will affect the inactivity of cadres in the participation of posyandu activities.

Differences in research results can be due to differences in methods and media extension. Research Pratiwi (2012) and Fatmawati (2012) counseling to improve knowledge by lecture method and use leaflet media, sheets and posters of the younger accepted and memorable in the delivery of information. Notoadmodjo (2010) stated that the lack of information or knowledge that is frequently and repeatedly to raise the person's knowledge retention.

#### 4. Conclusion

- 1) An increased knowledge of cadres Posyandu was observed from pretest and posttest about Posyandu , Growth and Development, Supplementary Feeding (PMT), Iodine deficiency disorders (GAKI), and the Family Nutrition Improvement Efforts (UPGK).
- 2) There was influence of media leaflets, booklets and posters towards the knowledge of cadres Posyandu toddler about IHC, Growth and Development, Feeding (PMT), and a deficiency disorders Iodine (GAKI), Effort Nutrition Improvement Family (UPGK) with test results One Way Anova.

## References

- [1] Adriani, Merryana dan Wirjatmadi, Bambang.2012. *Pengantar Gizi Masyarakat*. Jakarta.Kencana
- [2] Almatsier, Sunita.2009.*Prinsip Dasar Ilmu Gizi*.Jakarta:Gramedia Pustaka Utama
- [3] Amalia, Icca Stella. 2013. *Evaluasi Media Poster Hipertensi pada Pengunjung Puskesmas Talaga Kabupaten Majalengka* (jurnal ilmiah), Jurnal Kesehatan Masyarakat Vol 9, No 1 tahun 2013
- [4] Arisman. 2004. *Gizi dalam Daur Kehidupan*. Jakarta : Penerbit Buku Kedokteran Jakarta
- [5] Aritonang,I. 2012. Perencanaan dan Evaluasi Program Intervensi Gizi Kesehatan. Leutika Books,Yogyakarta.
- [6] Berg, A. 1986. Pendidikan Untuk Gizi Yang Lebih Baik. Peranan Gizi Dalam Pembangunan Nasional. Jakarta : Rajawali.
- [7] Brieger. Pendidikan Kesehatan Pedoman Pelayanan Kesehatan Dasar. Bandung. ITB Bandung. 1992
- [8] Cahyaningsih. 2011. *Pertumbuhan Perkembangan Anak dan Remaja*. Jakarta : TIM
- [9] Daryanto.2011. Media Pembelajaran. Bandung. Nurani Sejahtera
- [10] Dharmastuti, Silvia P.2017.*Pengaruh Pendidikan Kesehatan tentang Bahaya Merokok Melalui Media Booklet dan Poster terhadap Pengetahuan dan Sikap Siswa SMPN 2 Tasikmadu* (jurnal penelitian). Universitas Muhammadiyah Surakarta
- [11] Dinas Kesehatan Provinsi Jawa Timur. 2013. *Buku Pedoman Penanggulangan Gangguan Akibat Kekurangan Iodium (GAKI) Bagi Petugas Kesehatan Tingkat Kabupaten / Kota, Puskesmas dan POKJA Penanggulangan GAKI*.Surabaya: Bagian Proyek Penanggulangan GAKI, Dinas Kesehatan Provinsi Jawa Timur.
- [12] Edisi Khusus Posyandu.(<http://gizi.depkes.go.id/wpcontent/uploads/2011/11/lemba-beritavolume-1-2009.pdf>.)
- [13] Ibu Dalam Memberikan Makanan Pendamping Air Susu Ibu di Puskesmas Pamulang. Skripsi. Program Ilmu Keperawatan, UIN Syarif Hidayatullah, Jakarta
- [14] Isaura, V. 2011. *Faktor – faktor yang Berhubungan dengan Kinerja Kader Posyandu*. Fakultas Kedokteran Universitas Andalas
- [15] Istikomah, H. Sumantri dan Dwi.Luthfiana, U. 2014. *Gambaran Pelaksanaan kegiatan Posyandu di Desa Ngering Kecamatan Jogonalan Kabupaten Klaten*. Jurusan Kebidanan, Poltekkes Surakarta kota Surakarta.
- [16] Jaringan Informasi pangan dan Gizi. 2009, Volume XV, No.1. Lembar Berita
- [17] Kegiatan Posyandu di Kelurahan Gubug Kabupaten Grobongan. Skripsi. Jurusan Ilmu Kesehatan Masyarakat. Universitas Negeri Semarang.
- [18] Kemenkes. 2011. *Pedoman Umum Pengelolaan Posyandu*. Kementrian Kesehatan RI Dan Pokjanal Nasional.
- [19] Keterampilan Kader Dalam Pelayanan Posyandu Balita di Desa Nogotirto Gamping Sleman Yogyakarta. Program Studi Ilmu Keperawatan. Sekolah Tinggi Ilmu Kesehatan Aisyah Yogyakarta.
- [20] Kusnani, 2011, *Posyandu*, (Online), (<http://www.posyandu.com>), diakses tanggal 3 Oktober 2016
- [21] Marzoeki, D. *Budaya Ilmiah dan Filsafat Ilmu*. Jakarta: Gramedia, 2002
- [22] Marzoeki, D. *Budaya Ilmiah dan Filsafat Ilmu*. Jakarta: Gramedia, 2002
- [23] Mudjiono. 2009. Belajar dan Pembelajaran. Jakarta. Rineka Cipta.
- [24] Notoatmodjo, S. *Pendidikan dan Perilaku*. Jakarta: Rineka Cipta, 2003
- [25] Notoatmodjo, S. Prinsip-Prinsip Dasar Ilmu Kesehatan Masyarakat. Jakarta : Rineka Cipta, 2003
- [26] Notoatmodjo, S. *Promosi Kesehatan dan Ilmu Perilaku*. Jakarta: Rineka Cipta, 2007
- [27] Penggunaan Media Cetak dan Media Elektronik dalam Promosi Kesehatan terhadap Peningkatan Pengetahuan dan Perubahan Sikap (jurnal ilmiah), Jurnal Kesehatan Lingkungan Vol 4 No 1, Mei 2014 : 29-39
- [28] Peraturan Menteri Dalam Negeri. 2011. no.115/MENDAGRI/PER/2011
- [29] Sari, Rosanna K. 2012. *Peningkatan Pengetahuan Ibu tentang MP ASI Sesudah Diberi Penyuluhan dengan Media Booklet di Kelurahan Luwang Kecamatan Gatak Kabupaten Sukoharjo* (jurnal ilmiah), Universitas Muhammadiyah Surakarta
- [30] Siagian, Albiner; Jumirah; Tampubolon, Fourgelina. 2010. *Media Visual Poster dan Leaflet Makanan Sehat serta Perilaku Konsumsi Makanan Jajanan Siswa Sekolah Lanjutan Atas di Kabupaten Mandailing Natal* (jurnal ilmiah), Jurnal Kesehatan Masyarakat Nasional Vol 4, No 6, Juni 2010
- [31] Sudjana, DKK. 2001. Media Pengajaran. Sinar Baru Algensindo. Bandung
- [32] Supariasa, I Dewa. 2001.*Penilaian Status Gizi*.Jakarta : EGC
- [33] Supariasa. 2015. *Pendidikan dan Konsultasi Gizi*. Jakarta. Penerbit Buku Kedokteran ECG
- [34] Suryani, Eko; Syamsiatun, Nurul H. 2014. *Buku Saku Stimulasi Perkembangan Meningkatkan Pengetahuan dan Sikap Ibu di TK Pembina* (jurnal ilmiah), Poltekkes Kemenkes Yogyakarta
- [35] Tim Lintas Sektor. 2002. Buku Panduan Pelatihan kader Posyandu
- [36] Widiastuti. A. (2016). Faktor yang Berhubungan dengan Partisipasi Kader dalam Yulianti, 2010. Hubungan Antara Tingkat Pengetahuan Ibu dan Praktek
- [37] Yustisa, Putu F; Aryana, I Ketut, Suyasa, I Nyoman Gede. 2014. *Efektivitas Penggunaan Media Cetak dan Media Elektronik dalam Promosi Kesehatan terhadap Peningkatan Pengetahuan dan Perubahan Sikap* (jurnal ilmiah), Jurnal Kesehatan Lingkungan Vol 4 No 1, Mei 2014 : 29-39