



# Analysis of Health Cadres Knowledge about Hypertension Management at the ILP (Primary Service Integrity) Posyandu Service in Singonegaran Village Kediri City

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## ABSTRACT

Problems that still occur during the transformation of primary services, especially in the treatment of hypertension, where there is still a lack of knowledge among cadres in treating hypertension. The aim of this study was to determine the relationship between cadre knowledge and the management of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City. This research design is a correlational study with a cross-sectional approach. Respondents were selected using a simple random sampling technique. The population consisted of 102 peoples, with a sample size of 81 peoples. The independent variable is the cadre's knowledge and the dependent variable is the treatment of hypertension. The statistical test results used Spearman rank. Almost all respondents, 70 (86.4%) of whom had good knowledge of cadres, knew about hypertension. Almost all respondents, 73 (90.1%) of whom had good knowledge of hypertension. The results of the data analysis show that the significance level is  $0.000 < \alpha = 0.05$  so that  $H_0$  is rejected and  $H_1$  is accepted, thus there is a relationship between cadre knowledge and the handling of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City. The better the cadres' knowledge, the better the treatment of hypertension. It is hoped that cadres will always provide information to the public about preventing and treating hypertension.

**Keywords:** cadres, health post, hypertension, integrated, knowledge, primary care integrity

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## BACKGROUND

Problems that still occur during the transformation of primary services, especially in the treatment of hypertension, where there is still a lack of knowledge among cadres in treating hypertension (Wirakhmi & Novitasari, 2021). Due to the transformation of primary services, cadres still feel confused in providing health services, even marked by cadres not knowing clearly about the division of life cycle clusters such as pregnant women, toddlers, teenagers, adults (productive age), and the elderly (senior age) (Yoto et al., 2024). Sometimes cadres still make mistakes in grouping each cluster per life cycle, especially in the treatment of hypertension in cluster 3 which includes adults (productive age) and the elderly (elderly) (Surtimanah et al., 2024).

World Health Organization (WHO) (2024), reported that the prevalence of hypertension in the world is increasing. Approximately 40% of the world's population in 2024 will have hypertension. The World Health Organization estimates that by 2025 the number of hypertension sufferers will increase to 60% or approximately 1.56 billion (WHO, 2013). The prevalence of hypertension is most dominated by women with a percentage of 75.71% while



men are 24.29%. The percentage of hypertension incidents is highest in the 46-65 age group (57.14%) and the lowest in patients aged 26-45 years (14.29%). The 2024 Basic Health Research (Riskesdas) reported that the prevalence of hypertension, based on measurements among the 18-year-old population, was 34.1%. Of this figure, 8.8% were diagnosed with hypertension, 13.3% were not taking medication, and 32.3% were not taking medication regularly. This indicates that most people with hypertension are unaware that they have it and therefore do not receive treatment. Based on the age grouping, hypertension occurs in the 31-44 age group. (31.6%), 45-54 years old (45.3%), and 55-64 years old (55.2%). The East Java Provincial Health Office (2024) reported that hypertension cases in East Java have now reached 30 percent of the total population. The trend of high blood pressure or hypertension sufferers in East Java continues to increase every year. In fact, hypertension patients are among the top three most frequently treated patients in hospitals in East Java (East Java Health Office, 2024).

The initial data survey conducted by researchers on February 17, 2025 at the ILP Posyandu in Singonegaran Village, Kediri City, showed that services had been running well, but there were still cadres who had insufficient knowledge about integrated health services for the entire life cycle (infants-elderly), especially in the treatment of hypertension. The results of a preliminary study by interviewing 10 cadres showed that 5 cadres said that they still felt confused and did not fully understand about Posyandu ILP because Posyandu, which initially only focused on maternal and child health, has now changed or transformed to cover the entire life cycle. 3 cadres said that in handling hypertension, cadres also sometimes still have difficulty in determining the life cycle in each cluster, even cadres will ask more active questions to health workers directly or via mobile phone to ensure accuracy in the life cycle per cluster. In addition, the two cadres were always right in determining the life cycle of each cluster, especially in handling hypertension, especially in cluster 3 which includes adults and the elderly (Results of Interviews with Respondents at the ILP (Primary Service Integrity) Posyandu, Singonegaran Village, Kediri City, 2025).

Knowledge is a factor influencing the management of hypertension. Notoatmodjo (2019) explains that knowledge is the result of knowing and occurs after a person senses a particular object. Sensing occurs through the five human senses: sight, hearing, smell, taste, and touch. Most knowledge is acquired through the eyes and ears. Knowledge serves as a guide in shaping one's actions. Therefore, the better a person's knowledge, the better their behavior in carrying out something well, and vice versa (Suryawati et al., 2022). Cadres' knowledge of integrated health services, which are implemented for pregnant women, toddlers, adolescents, adults (of productive age), and the elderly, is crucial. Furthermore, promotive and preventive services include counseling, early detection, rapid testing, immunization, and supplementation. The Integrated Health Post (Posyandu) ILP program can be implemented routinely and simultaneously across all life cycles. Therefore, in implementing health services, Posyandu cadres must be competent and accompanied by health workers (Pradna & Nisa, 2024). Community health centers (Puskesmas) provide primary care, supported by a network of health services (clinics, independent practices) and Community-Based Health Efforts (UKBM), such as Poskesdes (Village Health Posts) and Posyandu (Integrated Health Posts). However, data on the achievement of Minimum Service Standards (SPM) in the district/city health sector indicates that these networks are not yet effective enough to reach the entire target population. Therefore, a new approach to providing these services is needed (Elmeida et al., 2024). Cadres' knowledge about the transformation of primary services, especially in the management of hypertension per life cycle, must be provided with good knowledge by health workers in the local work area in order to improve effective and efficient primary services.



## METHODS

This study design was a correlational study with a cross-sectional approach. Respondents were selected using simple random sampling. The population consisted of 102 people, with a sample size of 81. The independent variable was the cadre's knowledge, and the dependent variable was hypertension management. The statistical test results used the Spearman rank test with an  $\alpha$  value of 0.05.

## RESULTS

### General Data

Age	Frekuensi	Prosentase (%)
< 25 Years	2	2.5
25-35 Years	5	6.2
> 35 Years	74	91.4
<b>Amount</b>	<b>81</b>	<b>100.0</b>
Age	Frekuensi	Prosentase (%)
SD	5	6.2
SMP	14	17.3
SMA	62	76.5
Diploma/Bachelor's Degree	0	0.0
<b>Amount</b>	<b>81</b>	<b>100.0</b>
Work	Frekuensi	Prosentase (%)
Farmer/House wife	21	25.9
Entrepreneur/Trader/Self-Employed	53	65.4
Private Employees	7	8.6
Civil Servants	0	0.0
<b>Amount</b>	<b>81</b>	<b>100.0</b>

Based on the table above, it shows that the age of the respondents is known to be almost all respondents with age > 35 years, namely 74 (91.4%) respondents. The education of the respondents is known to be almost all respondents with the highest education of high school, namely 62 (76.5%) respondents. The occupation of the respondents is known to be mostly working as traders, namely 53 (65.4%) respondents.

### Specific Data

No	Cadre knowledge	Frekuensi	Prosentase (%)
1	Less	4	4.9
2	Sufficient	7	8.6
3	Good	70	86.4
	<b>Amount</b>	<b>81</b>	<b>100.0</b>
No	Treatment of Hypertension	Frekuensi	Prosentase (%)
1	Less	3	3.7
2	Sufficient	5	6.2
3	Good	73	90.1
	<b>Amount</b>	<b>81</b>	<b>100.0</b>

The table above shows that almost all respondents (86.4%) recognized the knowledge of cadres at the Integrated Primary Service Post (ILP) in Singonegaran Village, Kediri City, with 70 (86.4%) respondents categorizing it as good. Almost all respondents (90.1%) recognized the knowledge of hypertension management at the Integrated Primary Service Post



(ILP) in Singonegaran Village, Kediri City, with 73 (90.1%) respondents categorizing it as good.

**Cross Tabulation Results Between Independent And Dependent Variables**

			Treatment of Hipertension			Total
			Less	Sufficient	Good	
Cadre Knowledge	Less	Frekuensi	3	1	0	4
		%	3.7%	1.2%	0.0%	4.9%
	Sufficient	Frekuensi	0	2	5	7
		%	0.0%	2.5%	6.2%	8.6%
	Good	Frekuensi	0	2	68	70
		%	0.0%	2.5%	84.0%	86.4%
Total		Frekuensi	3	5	73	81
		%	3.7%	6.2%	90.1%	100%

The table above shows that the majority of cadres' knowledge is in the good category, so that 68 (84.0%) respondents (84.0%) of the respondents in the ILP (Integrity of Primary Services) Posyandu Service in Singonegaran Village, Kediri City, are in the good category.

**Data Analisis**

**Hasil Spearman Rank Statistical Test Results**

Variabel	Significance level
Cadre Knowledge	0.000
Treatment of Hipertension	

The results of the data analysis show that the significance level is  $0.000 < \alpha = 0.05$  so that  $H_0$  is rejected and  $H_1$  is accepted, thus there is a relationship between cadre knowledge and the handling of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City.

**DISCUSSION**

**Knowledge of cadres in the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City**

Based on the results of the study, it is known that the knowledge of cadres at the ILP (Integrity of Primary Services) Posyandu Service in Singonegaran Village, Kediri City is known to almost all respondents, namely 70 (86.4%) respondents in the good category. This is supported by the results of filling out the questionnaire by cadres that respondents have knowledge in the good category about hypertension where blood pressure reaches  $\geq 140/90$  mmHg then a person is said to suffer from hypertension, with symptoms that often arise in sufferers of prolonged hypertension are anxiety, heart palpitations, dizziness, and headaches. Hypertension can only be treated with medication from a doctor, regularly taking antihypertensive medication continuously over a long period of time, even hypertension sufferers should not forget to take antihypertensive medication, the medication should be taken as soon as possible when remembered. Hypertension sufferers can also do physical activities such as aerobic exercise and brisk walking regularly to lower blood pressure and reduce salt and alcohol intake, thus lowering blood pressure.

The theory supporting the researcher's findings, according to Notoatmodjo (2019), states that knowledge is the result of a person's knowledge of a particular object. A person's knowledge is influenced by the senses of hearing, sight, smell, taste, and touch, but is largely influenced by the eyes and ears. Knowledge itself is influenced by educational factors, where it is expected that someone with a high level of education also has a high level of knowledge, but this does not mean that someone with a low level of education also has low knowledge



(Nafilah & Palupi, 2021). The knowledge of health cadres is very important in preventing the prevalence of hypertension. Health cadres, as representatives of the community, have a role is crucial in preventing complications from hypertension. Essentially, cadres act as health motivators, educators, and service providers, mobilizing the community to improve their health status. The role of cadres in the community is crucial for improving health, particularly for those experiencing hypertension (Surtimanah et al., 2024).

Based on the facts and theories described, the researchers conclude that cadres' good knowledge of hypertension is supported by their level of education and information obtained from health workers and the internet. Furthermore, good cadre knowledge is also supported by cadres with a work experience of more than 5 years, thus possessing extensive experience related to hypertension. Furthermore, to improve cadre knowledge, training and mentoring are needed for health workers to enhance their knowledge and attitudes in serving the community experiencing health problems or disorders, particularly hypertension, which is prevalent in Indonesia.

### **Handling of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City**

Based on the results of the study, it is known that the handling of hypertension in the Posyandu ILP (Primary Service Integrity) Service in Singonegaran Village, Kediri City is known to almost all respondents, namely 73 (90.1%) respondents in the good category. This is supported by the results of the questionnaire that in handling hypertension carried out by cadres by conducting early detection and treatment of hypertension with a family approach, connecting communication between health workers and the community, providing self-management assistance in improving healthy living behavior and reducing non-compliance in handling hypertension, providing assistance with routine health checks every 1 month, providing assistance and supervision of taking hypertension medication regularly, providing assistance with a low-salt diet and consuming healthy foods (no junk food).

The theory supporting the researchers' findings, according to Notoatmodjo (2019), states that hypertension is a disease condition characterized by persistently elevated blood pressure, requiring appropriate management to control blood pressure. Persistent hypertension causes a person's heart to work extra hard, resulting in damage to the blood vessels, heart, kidneys, brain, and eyes. Hypertension is often referred to as a silent killer because it is a fatal disease. Hypertension does not directly kill sufferers, but it can be a risk factor for coronary heart disease, heart failure, and heart rhythm disorders (Aisyiah et al., 2023). Hypertension treatment can be carried out through pharmacotherapy and non-pharmacological therapy. Hypertension can be treated through pharmacotherapy and non-pharmacological therapies to control blood pressure. Non-pharmacological therapy involves lifestyle modifications, including weight loss, regular physical exercise, reducing salt intake, quitting alcohol, quitting smoking, and a diet low in cholesterol and saturated fat (Patriyani Ros et al., 2022). As an alternative non-pharmacological treatment for hypertension, utilizing herbal plants is expected to be a breakthrough in addressing hypertension (Sukmawati et al., 2023).

Based on the facts and theories explained, the researcher believes that education on the management and control of non-communicable diseases such as hypertension is a key element in developing the skills and knowledge of cadres. This is because broadening knowledge regarding non-communicable diseases such as hypertension will reduce the high prevalence of non-communicable diseases such as hypertension in Indonesia. This is because handling hypertension is not only the responsibility of health workers in community health centers; health cadres are also part of the promotive and preventive efforts regarding non-communicable diseases such as hypertension. Health cadres play a crucial role in mobilizing the community in the health sector. They are the bridge between health service providers and the community.



### **The relationship between cadre knowledge and the management of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City**

The results of the data analysis show that the significance level is  $0.000 < \alpha = 0.05$  so that  $H_0$  is rejected and  $H_1$  is accepted thus there is a relationship between cadre knowledge and the handling of hypertension in the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City. The results of the cross tabulation show that most of the cadre knowledge is in the good category so that the handling of hypertension in the ILP (Primary Service Integrity) Posyandu Service in Singonegaran Village, Kediri City, namely 68 (84.0%) respondents are in the good category.

The knowledge of cadres in the Integrated Primary Care Post (IPP) Service must be supported by training to support effective and efficient primary health care, especially in the treatment of hypertension. The better the cadres' knowledge of the Integrated Primary Care Post (IPP), the better their behavior in providing comprehensive health services, especially in determining the life cycle per cluster (Surtimanah et al., 2024). Cadres' knowledge of the integrated health services implemented covers pregnant women, toddlers, adolescents, adults (productive age), and the elderly. Furthermore, promotive-preventive services implemented include counseling, early detection, rapid testing, immunization, and supplementation. The implementation of the Integrated Primary Care Post (IPP) for all life cycles can be carried out routinely, simultaneously at one time. Therefore, in implementing health service activities, Posyandu cadres must be competent and accompanied by health workers (Pradna & Nisa, 2024).

### **CONCLUSION**

Based on the research results, it can be concluded that the knowledge of cadres at the ILP (Integrity of Primary Services) Posyandu Service in Singonegaran Village, Kediri City is known by almost all respondents, namely 70 (86.4%) respondents in the good category. The management of hypertension at the ILP (Integrity of Primary Services) Posyandu Service in Singonegaran Village, Kediri City is known by almost all respondents, namely 73 (90.1%) respondents in the good category. The results of data analysis show that the significance level is  $0.000 < \alpha = 0.05$  so  $H_1$  is accepted, thus there is a relationship between cadre knowledge and the handling of hypertension at the ILP (Primary Service Integrity) Posyandu service in Singonegaran Village, Kediri City.

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