

Screening Of Toddler Development In Working Area Of Community Health Center South Jakarta

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Abstract

Monitoring the growth and development of toddlers is an important step toward improving children's health from an early age. Community health centers (*Puskesmas*), as primary healthcare facilities, play a strategic role in monitoring child development through *posyandu* activities and maternal and child health services. However, several challenges remain in its implementation. These include limited parental knowledge regarding the importance of regular child development monitoring, the limited capacity of *posyandu* cadres to conduct early developmental screening, and suboptimal systems for recording child development. These conditions may result in developmental delays not being detected at an early stage.

This community service activity aims to improve the quality of child development monitoring at community health centers by enhancing the capacity of healthcare workers and *posyandu* cadres, strengthening the child development recording system, and increasing parental knowledge regarding age-appropriate child development stimulation.

The solutions offered through this activity include training healthcare workers and *posyandu* cadres in the early detection of toddler growth and developmental problems, developing and implementing a more systematic child development monitoring system, and providing education to parents regarding age-appropriate child development stimulation. In addition, assistance will be provided in implementing child development monitoring activities at *posyandu*.

The targeted outcomes of this activity include improved capacity among healthcare workers and *posyandu* cadres to conduct child developmental screening, the availability of a more structured child development recording system, increased parental knowledge regarding child development stimulation, and an increased number of children receiving regular developmental monitoring. Through this activity, it is expected that developmental delays in children can be detected more effectively and at an earlier stage, thereby supporting optimal child growth and development.

Keywords: Community Services, Development, Screening, Toddler

Introduction

The toddler period (12–59 months) is an important phase in a child's life cycle, as it is characterized by rapid growth and development in physical, cognitive, and socio-emotional domains. Routine monitoring of child development is a strategic measure for the early detection of potential growth and developmental problems, allowing interventions to be provided more promptly and appropriately. In Indonesia, child growth and development monitoring efforts have been integrated into basic health services through the Early Stimulation, Detection, and Intervention for Growth and Development (SDIDTK) program, which is implemented at healthcare facilities such as community health centers (*puskesmas*) and integrated health posts (*posyandu*).

As primary healthcare facilities, community health centers (*puskesmas*) play a crucial role in monitoring the growth and development of toddlers. In addition to providing basic healthcare services, *puskesmas* also serve as centers for community health development, including the monitoring of child growth and development. In South Jakarta, an area characterized by relatively high population density and dynamic population mobility, child growth and development monitoring services are particularly important to ensure that children receive optimal healthcare from an early age.

One of the partners in this community service activity is a community health center in South Jakarta with substantial service coverage for toddlers aged 12–59 months. Based on the health service profile of the community health center, the number of toddlers registered each year is considerable, highlighting the need for an effective and sustainable developmental monitoring system. Monitoring is generally conducted through *posyandu* activities, routine examinations at the community health center, and documentation in the Maternal and Child Health (MCH) Book.

However, based on initial observations and discussions with healthcare workers at the community health center, several challenges remain in implementing toddler developmental monitoring. First, there are limitations in the systematic and integrated recording and reporting of child development data. Most data are still recorded manually, which may lead to recording inaccuracies, delays in reporting, and difficulties in conducting periodic analyses of child development.

Second, parental participation in regular child development monitoring remains suboptimal. Some parents attend *posyandu* primarily to have their children weighed without fully understanding the importance of comprehensive developmental monitoring, including motor, language, and social development. This indicates that community health literacy regarding child development still needs to be improved.

Third, the limited capacity of healthcare workers and *posyandu* cadres to conduct comprehensive developmental monitoring presents an additional challenge. Given the considerable number of toddlers served, the process of child developmental screening is often not conducted optimally during every visit. Nevertheless, regular developmental monitoring is essential for the early detection of potential developmental delays.

Furthermore, from the perspective of technology utilization, most child development monitoring processes have not yet made optimal use of digital systems that could facilitate data management, developmental monitoring, and data-driven decision-making. The use of information technology has the potential to improve the efficiency of health services and assist healthcare workers in monitoring child development more accurately and systematically.

Based on these conditions, it can be concluded that although the community health center has performed its role in providing toddler health services, several challenges still need to be addressed, particularly those related to the developmental monitoring system for toddlers aged 12–59 months. Therefore, community empowerment activities and capacity strengthening for healthcare workers and *posyandu* cadres are needed to support child developmental monitoring that is more systematic, measurable, and sustainable.

Method

The implementation method for this community service activity was systematically designed to address the problems faced by the target partners, namely community health centers (*puskesmas*), *posyandu* cadres, and communities with children aged 12–59 months in the South Jakarta area. Considering that the target group includes economically non-productive community members, the activities focus on two main areas: improving the quality of child health services and enhancing community health literacy related to the monitoring of child growth and development.

The activities are implemented through several stages: socialization, training, the application of science and technology (*Ipteks*), mentoring and evaluation, and program sustainability.

1. Socialization Stage

The socialization stage serves as the initial step to introduce the community service program to the target partners and establish a shared commitment to implementing the activities. Socialization is conducted through coordination meetings involving the community service team, the community health center, *posyandu* cadres, and community representatives with children aged 12–59 months.

The socialization activities include:

- 1) Presenting the objectives and implementation plan of the community service program to the partner institutions.
- 2) Discussing the current conditions of child developmental monitoring in the community health center's working area.
- 3) Identifying the partners' needs related to improving the child development monitoring system.
- 4) Reaching an agreement on the activity schedule and the roles and responsibilities of each party in implementing the program.

Through this socialization stage, all partners are expected to develop a shared understanding of the program objectives and actively participate in every stage of the planned activities.

2. Training Stage

The training stage aims to enhance the capacity of primary healthcare workers, *posyandu* cadres, and parents to monitor child development accurately and systematically.

The training covers several main topics:

1) Training on Monitoring Toddler Growth and Development

This topic covers the concepts of growth and development among children aged 12–59 months, indicators of child development, and methods for screening child development using instruments recommended by the Ministry of Health, such as the Pre-Screening Developmental Questionnaire (*Kuesioner Pra Skrining Perkembangan* [KPSP]).

2) Training on the Use of Educational Media for Child Development

Participants are introduced to various educational media that can be used to improve parents' understanding of child development, including leaflets, posters, and simple educational modules.

3) Training on Recording and Reporting Child Development Data

This training aims to improve the ability of healthcare workers and *posyandu* cadres to systematically record and report child development data so that the information obtained can be used for continuous monitoring of child development.

The training is conducted using participatory methods, including interactive lectures, group discussions, simulations, and hands-on practice using child development monitoring instruments.

3. Application of Science and Technology (*Ipteks*) Stage

The *Ipteks* application stage involves implementing the knowledge and skills acquired during the training activities. At this stage, a more structured child development monitoring system is implemented within the community health center and integrated health post (*posyandu*) settings.

The activities conducted during this stage include:

- 1) Implementing routine child developmental screening instruments during *posyandu* activities and child health services at the community health center.
- 2) Applying a more structured child development recording system to facilitate regular and continuous monitoring by healthcare workers.

- 3) Providing educational media for parents regarding the importance of monitoring child growth and development.
- 4) Conducting community education activities on age-appropriate child development stimulation.

Results

The mentoring and evaluation stage is conducted to ensure that the application of science and technology (*Ipteks*) in toddler developmental monitoring can be carried out accurately, effectively, and in accordance with child health service guidelines. Mentoring is provided directly to healthcare workers and *posyandu* cadres to support the application of skills acquired during the training activities. The mentoring activities include assisting *posyandu* cadres in conducting child developmental screenings using the instruments provided and practiced during the training. In addition, the service team assists healthcare workers in recording the results of child developmental monitoring and provides reinforcement regarding the reporting procedures for monitoring results. During the mentoring process, discussions and consultations are conducted with healthcare workers and *posyandu* cadres to identify various challenges encountered in implementing child developmental monitoring in the field.

Program evaluation is conducted to assess the achievement of the program objectives and changes in participants' knowledge and skills after participating in the activities. Knowledge is evaluated through pre-tests and post-tests. The evaluation results indicate changes in participants' knowledge levels after receiving training and education on child developmental monitoring. Skills are evaluated by observing cadres as they conduct child developmental monitoring using the provided instruments. The observation results indicate that the cadres are able to implement the stages of child developmental monitoring in accordance with the training materials and practices provided.

In addition to evaluating knowledge and skills, the team evaluates the involvement of participants and partners throughout the implementation of the activities. The participation of healthcare workers, *posyandu* cadres, and community members is demonstrated through their attendance, active involvement in discussions, participation in practical sessions, and responses to the materials provided. The evaluation results serve as a basis for the team and partners to identify aspects that require further

strengthening and to determine follow-up actions for child developmental monitoring activities in the partner's area. Through these mentoring and evaluation activities, the application of science and technology in toddler developmental monitoring can be implemented in a more structured and standardized manner. These activities also enhance the readiness of *posyandu* cadres and healthcare workers to conduct child developmental monitoring as an integral component of community health services.

Discussion

Program sustainability is one of the important outcomes of community service activities. Based on discussions and evaluations with partners, child development monitoring activities will be integrated into routine *posyandu* activities and child health services at the community health center. This integration is intended to ensure that the knowledge and skills acquired during the activities can be applied sustainably in community health services. The role of *posyandu* cadres has also been strengthened in supporting child development monitoring at the community level. Cadres are expected to play an active role in increasing parents' awareness of the importance of regular child development monitoring and assisting in the identification of children who require further assessment or follow-up by healthcare workers. The educational media used during the activities can also be reused by healthcare workers and *posyandu* cadres as supporting materials when providing information to parents of toddlers. The continued use of these media is expected to help maintain and improve community knowledge regarding the importance of monitoring children's growth and development.

In addition, this activity strengthens collaboration between the university and the community health center in implementing community health programs. The results of the implementation and evaluation activities provide input for the development of subsequent mentoring programs, particularly those aimed at strengthening the capacity of healthcare workers and *posyandu* cadres and improving community health literacy regarding child development. Thus, the program does not end with the implementation of training but is directed toward the continued utilization of the knowledge, skills, and educational media acquired through *posyandu* services and ongoing child development monitoring.

Partners actively participated throughout the entire series of community service activities. The community health center (*puskesmas*) played a key role as the main partner by providing support in supplying data and information related to the target groups, providing facilities for activity implementation, and involving healthcare workers in the training, mentoring, and evaluation processes.

Posyandu cadres were actively involved in the training activities and child development monitoring practices. They participated in the learning process, practiced using developmental monitoring instruments, and engaged in discussions regarding challenges encountered during field activities. This involvement demonstrated the cadres' support and readiness to apply the knowledge and skills acquired from the training in routine *posyandu* activities. Parents of toddlers also participated in educational activities and child development monitoring. They received information about the importance of regular child development monitoring and were encouraged to become more actively involved in observing their children's development and consulting with cadres or healthcare workers if conditions requiring further attention were identified.

Overall, partner participation was demonstrated not only through attendance but also through active involvement in training, practical sessions, discussions, evaluations, and program follow-up activities. This active participation was an important supporting factor in the successful implementation of the community service program.

Conclusion

The community service activity aimed at improving the monitoring of the development of toddlers aged 12–59 months at community health centers in the South Jakarta area was successfully implemented. This activity strengthened the capacity of healthcare workers and *posyandu* cadres to monitor child development in a more systematic, comprehensive, and instrument-based manner. The implementation of training, mentoring, and evaluation demonstrated improvements in the knowledge and skills of healthcare workers and *posyandu* cadres in monitoring toddler development. The cadres also gained practical experience in conducting developmental screenings and understanding the importance of recording and reporting monitoring results as an integral part of child health services.

Educational activities for parents improved their understanding of the importance of regular monitoring of children's growth and development. Parental involvement in these activities also demonstrated support for child development monitoring efforts and increased awareness of the need for routine monitoring through *posyandu* (integrated health posts) and healthcare facilities. The implementation of a more structured monitoring system supported the processes of recording, reporting, and evaluating child development. Through strengthened capacity among healthcare workers and cadres, supported by appropriate educational media and monitoring instruments, child development monitoring at the community level became more systematic, directed, and standardized.

Overall, this community service activity contributed to strengthening toddler developmental monitoring and supporting the early detection of potential developmental deviations or disorders. The results also provide a foundation for the sustainability of child development monitoring through the integration of these activities into routine *posyandu* and community health center (*puskesmas*) services, as well as through strengthening the role of cadres as an integral part of the child health monitoring system at the community level.

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