



## FACTORS RELATED TO MOTHERS' ACTIVE VISITING BEHAVIOR TO POSYANDU

Adolfina Merlina Hindom\*, Indanah, Muhammad Ridwanto

Bachelor of Nutrition Study Program, Faculty of Health Sciences, University of Muhammadiyah Kudus, Jl. Ganesha Raya No.1, Purwosari, Kudus, Jawa Tengah 59316, Indonesia

\*[adolfimahindom1990@gmail.com](mailto:adolfimahindom1990@gmail.com)

### ABSTRACT

The low level of mothers' attendance at integrated health posts (Posyandu) in the Sekban Community Health Center of Fakfak Regency indicates suboptimal utilization of basic community health services. This study aims to analyze factors associated with mothers' attendance at Posyandu, including education, age, knowledge of Posyandu, motivation, family support, and distance to Posyandu in the Sekban Community Health Center of Fakfak Regency in 2025. A cross-sectional study was conducted in June–July 2025, in the Sekban Community Health Center of Fakfak Regency. A sample of 101 respondents selected in this study. The dependent variable was mothers' active participation in Posyandu visits. The independent variables were education, age, maternal knowledge, motivation, family support, and distance to the Posyandu. Data collection using a questionnaire, as well as documentation from Posyandu (Integrated Service Post) records. Data analysis was rlogistic regression. The factors that significantly influenced Posyandu activity were motivation ( $p = 0.020$ ) and education ( $p = 0.043$ ). Knowledge ( $p = 0.132$ ), family support ( $p = 0.445$ ), distance to health facilities ( $p = 0.053$ ), and age ( $p = 0.070$ ) did not show a significant effect. The factors that significantly influenced Posyandu activity were motivation and education.

Keywords: active posyandu; distance to health facilities; family support; knowledge; motivation

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## INTRODUCTION

The National Health System is a system that reflects the Indonesian nation's efforts to improve its ability to achieve optimal health as a manifestation of general welfare. One way to achieve optimal public health is through health services through integrated health posts (Posyandu) (Fitriani, 2013). Posyandu activities are managed and organized by, for, and for the community as part of health development, empowering and facilitating access to basic health services, with the goal of accelerating the reduction of maternal and infant mortality rates (Khoirunisa et al., 2019). Posyandu services for toddlers include monitoring toddler growth and development by measuring their weight monthly, the best way to assess their nutritional status. Additionally, mothers of toddlers are provided with health education, including information on nutritious foods and how to provide a varied diet to maintain a normal weight. At the Integrated Health Post (Posyandu), children receive supplementary food. If a toddler experiences any problems or abnormalities, Posyandu cadres will refer them to health services, such as a community health center (Puskesmas) or hospital (Manadin, 2014).

Toddlers are particularly vulnerable to health problems. Toddler health is a public health issue that cannot be addressed solely through medical interventions and health services. Health problems in toddlers affect growth and development, both during infancy and beyond. One way to monitor toddler growth and development is through the Integrated Health Post (Posyandu). Toddlers are one of the targets of health services at Posyandu. Health problems in toddlers affect growth and development, both during infancy and beyond, and therefore require attention (Andri et al., 2023).

One indicator of health service utilization is the community's active attendance at the service center, specifically the utilization of integrated health service posts (Posyandu). Improving the quality of health services at Posyandu requires intervention from Posyandu supervisors, specifically

community health centers (Puskesmas), to ensure that counseling for mothers of infants and toddlers is achieved according to targets (Andri et al., 2023).

The age of 0-5 is a crucial period for child growth. Therefore, toddlers need to be weighed regularly to monitor their weight growth. Healthy children grow rapidly, gaining weight as they age. To ensure effective and efficient weighing, each toddler's weight can be recorded on a chart on a "Towards Healthy Toddler" card. The growth chart can then be monitored monthly, allowing for early detection of each child's health. The results of toddler weighings at Posyandus can also be used by the community and agencies or supervisory officials to assess the extent to which toddlers in their area are growing healthily, thus demonstrating the success of Posyandu activities (Altum, 2015). The success of the integrated health service post (Posyandu) program is greatly influenced by the active participation of the community, particularly mothers of toddlers as the primary users of the service. However, the level of activeness of mothers visiting Posyandus varies and is often suboptimal.

According to Anderson (1974) in Notoatmodjo (2014), health behaviors consist of three main categories in health services: predisposing characteristics such as age, education level, and occupation; supporting characteristics such as PMT programs and immunization services; and need characteristics, namely the need for health services. Meanwhile, according to Green (1980), health behaviors are influenced by several factors: predisposing factors such as knowledge, education, occupation, age, motivation, number of children under five; enabling factors such as ownership of a Health Card (KMS) and distance from a Posyandu; and reinforcing factors such as family support and encouragement from community leaders. According to previous research by Kresno (2008) and Koto (2019), these factors can influence the low number of visits by mothers of toddlers to Posyandus. Several studies show that mothers' active participation in visiting integrated health posts (Posyandu) is influenced by various factors, both from the individual and environmental perspectives. These factors include mothers' knowledge of the benefits of integrated health posts (Posyandu), education level, occupation, family support (especially from their husbands), time availability, accessibility of the Posyandu location, and the quality of services provided (Funna et al., 2023; Monica et al., 2020).

Mothers' lack of knowledge about the function of Posyandu can lead to low motivation to attend regularly. On the other hand, mothers who have a good understanding of the importance of monitoring their child's growth and development tend to be more active in Posyandu activities (Salsabilla et al., 2024). Furthermore, the role of cadres and health workers in providing friendly and informative services also influences mothers' decisions to attend Posyandu (Nurhayani et al., 2023; Kurniavie et al., 2020; Heri et al., 2025). Other studies also emphasize the importance of social support, especially from family and the surrounding environment. Mothers who receive encouragement from their husbands or family are more likely to be actively involved in Posyandu activities (Lassa et al., 2021). Geographical factors Factors such as distance to the integrated health post (Posyandu) and ease of transportation access also determine mothers' attendance at these activities (Simbolon, 2021).

Sekban Community Health Center (Puskesmas Sekban) is one of the 20 Posyandu (Integrated Health Post) centers in Fakfak Regency. Researchers conducted a preliminary study on the frequency of mothers visiting Posyandu. The preliminary study revealed that three puskesmas had low attendance rates: Cengkeh 3/Pitakendik Posyandu (n = 51 people); Wagon Pantai/Rambutan Posyandu (52 people); and Tanjung Wagon/Sejahra Posyandu (n = 42 people). Given the strategic role of Posyandu in improving maternal and child health, it is important to identify and understand the factors that influence mothers' attendance. This study aims to analyze factors associated with mothers' attendance at Posyandu in the Sekban Community Health Center, Fakfak Regency, in 2025.

## METHOD

This research is quantitative, using a cross-sectional observational design. It will be conducted in the Sekban Community Health Center, Fakfak Regency, from June to July 2025. The population in this study was all mothers with toddlers in the Sekban Community Health Center working area, consisting of 20 integrated health posts (Posyandu) totaling 2,069 people. The sampling technique used in this study was purposive sampling. The sample determination with the following inclusion and exclusion criteria: Mothers with toddlers and registered in the Posyandu register book and have toddlers aged 4-59 months and are willing to be respondents. The questionnaire used is an adoption of Koto's (2019) research, which has been valid and reliable. The questionnaire on factors related to the active behavior of mothers visiting the integrated health post (Posyandu) consists of information related to mothers' knowledge about Posyandu consisting of 6 questions, mothers' motivation of toddlers consisting of 10 question items, family support consisting of 3 question items, and the distance of Posyandu consisting of 4 question items. The scoring determination of each question will be given a value of 1 if correct and 0 if wrong. Meanwhile, the maternal motivation questionnaire consists of five answer choices using a Likert scale including: (1) Strongly agree; (2) Agree; (3) Disagree; and (4) Strongly Disagree. Meanwhile, the questionnaire related to active behavior to Posyandu contains 1 question that assesses the number of toddler visits to Posyandu in the last 4 months, the assessment of the active behavior questionnaire is 1 (poor behavior) and 0 (good behavior). Bivariate analysis (cross-tabulation) was conducted to determine the relationship between each research variable. To determine the relationship between variables related to ordinal categorical data, the statistical test used was the chi-square test. The multivariate analysis used is logistic regression analysis.

## RESULT

Table 1, it can be seen that the majority of respondents had a high school education (40.6%), indicating that the majority of mothers of toddlers had a secondary education. In terms of occupation, the majority of respondents were housewives (79.2%), so the role of toddler care was handled more directly by mothers. Meanwhile, more than half of the respondents were aged <32 years (52.5%), indicating that the majority of mothers were in their early productive age. The characteristics of the toddlers studied were dominated by male gender (56.4%).

Table 1.

Frequency Distribution Characteristics (n=101)

| Characteristics    | f  | %    |
|--------------------|----|------|
| Education Level    |    |      |
| Elementary School  | 18 | 17.8 |
| Junior High School | 21 | 20.8 |
| Senior High School | 41 | 40.6 |
| Higher Education   | 21 | 20.8 |
| Occupation         |    |      |
| Housewife          | 80 | 79.2 |
| Private Employee   | 11 | 10.9 |
| Civil Servant      | 10 | 9.9  |
| Age                |    |      |
| ≤ 32 years         | 53 | 52.5 |
| ≥ 32 years         | 48 | 47.5 |
| Child's Gender     |    |      |
| Male               | 58 | 56.4 |
| Female             | 43 | 42.6 |

Based on Table 2, it can be seen that the majority of respondents had good knowledge (58.4%), indicating that mothers' understanding of the integrated health service post (Posyandu) was quite adequate. In terms of motivation, respondents were relatively balanced, but the majority were slightly higher in the compliant category (50.5%). Family support was also quite dominant, with more than half of respondents stating they received family support (55.4%). Meanwhile, the distance to health facilities was mostly in the far category (>10 minutes) (62.4%), which could be one of the obstacles in utilizing Posyandu. The level of activeness of mothers in Posyandu was

actually more in the poor category (71.3%), indicating that active participation in Posyandu activities is still low despite good knowledge and family support.

Table 1.

Univariate Analysis

| Variable                    | f   | %    |
|-----------------------------|-----|------|
| Knowledge                   |     |      |
| Good                        | 59  | 58.4 |
| Poor                        | 42  | 41.6 |
| Motivation                  |     |      |
| Not Compliant               | 50  | 49.5 |
| Compliant                   | 51  | 50.5 |
| Family Support              |     |      |
| Not Supportive              | 45  | 44.6 |
| Supportive                  | 56  | 55.4 |
| Distance to Health Facility |     |      |
| Near (< 10 minutes)         | 38  | 37.6 |
| Far (≥ 10 minutes)          | 63  | 62.4 |
| Activeness in Posyandu      |     |      |
| Active                      | 29  | 28.7 |
| Inactive                    | 72  | 71.3 |
| Age                         |     |      |
| ≤ 32 years                  | 53  | 52.5 |
| ≥ 32 years                  | 48  | 47.5 |
| Total                       | 101 | 100  |

Table 3.

Chi square analysis of factors influencing Posyandu activity

| Variable                          |                           | Activeness in Posyandu |      |      |      |       |      | OR<br>(CI 95%) | <i>p</i> |
|-----------------------------------|---------------------------|------------------------|------|------|------|-------|------|----------------|----------|
|                                   |                           | Good                   |      | Poor |      | Total |      |                |          |
|                                   |                           | f                      | %    | f    | %    | f     | %    |                |          |
| Knowledge                         | Good                      | 13                     | 16.9 | 46   | 42.1 | 59    | 59.0 | 0.46           | 0.079    |
|                                   | Poor                      | 16                     | 12.1 | 26   | 29.9 | 42    | 42.0 | (0.19 – 1.10)  |          |
| Motivation                        | Not                       | 19                     | 14.4 | 31   | 35.6 | 50    | 50.0 | 2.51           | 0.040    |
|                                   | ///Compliant              |                        |      |      |      |       |      | (1.01 – 6.16)  |          |
|                                   | Compliant                 | 10                     | 14.6 | 41   | 36.4 | 51    | 51.0 |                |          |
| Family Support                    | Not                       | 14                     | 16.1 | 42   | 39.9 | 56    | 56.0 | 1.67           | 0.007    |
|                                   | Supp<br>ortive            |                        |      |      |      |       |      | (1.28 – 2.59)  |          |
|                                   | Supportive                | 15                     | 12.9 | 30   | 32.1 | 45    | 45.0 |                |          |
| Distance to<br>Health<br>Facility | Near (< 10<br>minutes)    | 7                      | 10.9 | 31   | 27.1 | 38    | 38.0 | 0.42           | 0.076    |
|                                   | Far (≥ 10<br>minut<br>es) | 22                     | 18.1 | 41   | 44.9 | 63    | 63.0 | (0.16 – 1.11)  |          |
| Education                         | High                      | 26                     | 23.0 | 54   | 57.0 | 80    | 80.0 | 2.89           | 0.101    |
|                                   | Low                       | 3                      | 6.0  | 18   | 15.0 | 21    | 21.0 | (0.78 – 10.69) |          |
| Age                               | ≤ 32 years                | 12                     | 15.2 | 41   | 37.8 | 53    | 53.0 | 0.53           | 0.156    |
|                                   | ≥ 32 years                | 17                     | 13.8 | 31   | 34.2 | 48    | 48.0 | (0.22 – 1.28)  |          |

Based on Table 3, the results of the chi-square analysis show that the variables with a p-value <0.05 and thus significantly related to Posyandu activity are motivation (p = 0.040) and family support (p = 0.007). This indicates that the better the mother's motivation and the stronger the family support, the higher the activity of visiting Posyandu. Meanwhile, the variables of knowledge (p = 0.079), distance to health services (p = 0.076), education (p = 0.101), and age (p = 0.156) have p-values >0.05, which means there is no significant relationship with Posyandu activity in this study.

Table 4.

# Results of multiple logistic regression tests on factors influencing the activity of integrated health posts (Posyandu)

| Variable                         | Adjusted Odds Ratio (AOR) | 95% Confident interval |             | P value |
|----------------------------------|---------------------------|------------------------|-------------|---------|
|                                  |                           | Lower limit            | Upper limit |         |
| Knowledge                        | 0.44                      | 0.15                   | 1.28        | 0.132   |
| Motivation                       | 3.51                      | 1.22                   | 10.14       | 0.020   |
| Family Support                   | 0.67                      | 0.24                   | 1.87        | 0.445   |
| Distance to Health Facility      | 0.31                      | 0.10                   | 1.01        | 0.053   |
| Education                        | 0.21                      | 0.05                   | 0.95        | 0.043   |
| Age                              | 2.49                      | 0.93                   | 6.69        | 0.070   |
| n observation= 101               |                           |                        |             |         |
| Adjusted R <sup>2</sup> = 16.16% |                           |                        |             |         |
| P = 0.003                        |                           |                        |             |         |

## DISCUSSION

### Subject Characteristics

The majority of mothers of toddlers who responded had a high school education, indicating a fairly good level of understanding of information. A good level of education helps mothers understand the importance of nutrition and health for children, enabling them to make informed decisions about meeting their toddlers' needs. A study conducted by Ertiana (2023) confirmed that the higher a mother's education, the better her nutritional knowledge, which significantly influences parenting patterns. Education not only provides access to accurate information but also increases family awareness of health.

According to Irianawati (2013), the majority of respondents had an elementary to junior high school education, and this influenced their visits to integrated health posts (Posyandu). However, the study also showed that four out of 35 respondents with a high school or university education did not actively visit. This demonstrates that maternal education plays a crucial role in supporting a child's overall development, including physical, emotional, moral, knowledge, and skills (Almushawwir, 2016). Furthermore, education also influences the extent to which a person is able to absorb and understand information related to nutrition. These findings can serve as a basis for determining appropriate outreach methods. In the context of meeting family nutritional needs, education is a crucial factor in increasing mothers' awareness of nutritional issues in toddlers (Saputri & Lisnianti, 2016).

Most of them are housewives, which should provide flexibility in their time to attend Posyandu (Integrated Health Post) activities, although this can also be influenced by other factors. As housewives, they tend to have more time to devote to their toddlers' health than mothers who work outside the home. Arini (2011) states that factors influencing mothers' visits to Posyandu include education, occupation, and sources of information. Meanwhile, the Ministry of Health (2010) adds that a child's age also plays a role in determining the frequency of visits to Posyandu. Thus, respondents' visits to Posyandu Anggrek were influenced by occupation, child age, and education level.

Occupation itself is defined as a routine activity carried out by a person to earn income to meet family needs. Research by Irianawati (2013) found that although the majority of respondents were housewives, 77.7% of them were inactive in visiting the integrated health post (Posyandu). This finding suggests that occupation is not the primary factor determining attendance. It is suspected that low attendance is due to mothers' lack of knowledge and attitudes about the importance of Posyandu.

In terms of motivation, a balance was found between mothers with high and low motivation, suggesting an opportunity to increase motivation to visit. Research by Junydy (2019) showed a relationship between maternal motivation and toddler visits to Posyandu in Mojodanu Village, Ngusikan District, Jombang Regency, with a p-value of 0.005. Motivation is a concept that

describes both extrinsic conditions that stimulate certain behaviors and intrinsic responses that demonstrate human behavior as a driving force, an internal stimulus, a movement that causes someone to do something (Zulkarnaen, 2013).

### **The Effect of Education on Posyandu Activity**

Based on the research findings, education did not have a significant relationship with Posyandu activity in the bivariate analysis ( $p > 0.05$ ). However, after controlling for other factors in the multivariate analysis, education became a significant factor ( $p = 0.043$ ). In contrast, Sari's (2019) study did not find a similar relationship, possibly due to differences in the sample and research environment, where motivation and social support were more dominant factors than education. This phenomenon can be explained through the Health Belief Model (HBM) theory, where higher education can increase mothers' perceptions of their children's vulnerability to health problems and provide them with self-efficacy to take action. This underscores the importance of interventions that are not only informative but also tailored to the target's education level. Maternal education and employment characteristics are closely related to family economic conditions. Generally, higher education levels are associated with better income, thus supporting optimal nutrition and child care. Research by Malik and Indrawati (2023) demonstrated that children's nutritional needs are significantly influenced by their education level ( $p = 0.004$ ) and occupation ( $p = 0.007$ ). Therefore, increasing maternal education is expected to positively contribute to children's health and have long-term impacts on the quality of future generations.

### **The Influence of Knowledge on Posyandu (Integrated Health Post) Attendance**

The findings of this study indicate that knowledge has no significant relationship with Posyandu attendance, either in bivariate ( $p = 0.079$ ) or multivariate ( $p = 0.132$ ) analyses. However, this finding is inconsistent with Rahayu's (2020) research, which suggests that knowledge is the foundation for awareness and action. This discrepancy in results could be due to differences in social context and methodology. Knowledge may be important, but it is insufficient to drive behavior if it is not supported by motivation and other external factors. Therefore, effective interventions must go beyond simply providing information and also target changes in attitudes and motivation. This finding is inconsistent with the study by Liani et al. (2023), which showed a relationship between mothers' knowledge of integrated health services (Posyandu) and utilization of Posyandu services in the Kayu Kunit Community Health Center (Puskesmas), South Bengkulu Regency. The statistical test results obtained a  $p$ -value of 0.03, indicating a significant relationship. Furthermore, an OR of 3.4 indicated that mothers with good knowledge were 3.4 times more likely to utilize Posyandu than mothers with poor knowledge. Research by Atik (2020) also supported these results, identifying a relationship between mothers' knowledge of toddlers and their visitation behavior to the Tunas Baru Posyandu in the Sungai Ulin Community Health Center (Puskesmas) area, with a  $p$  value of  $< 0.001$ . A similar finding was found by Azzahra et al. (2024), involving 185 toddlers at the Mawar Posyandu in Tajurhalang Village, Bogor Regency. They also found a significant relationship between knowledge and maternal visits to the Posyandu, with a  $p$ -value of 0.004 ( $< 0.05$ ). Research by Elva et al. (2020) in the Pamandati Community Health Center work area, South Konawe Regency, involving 87 respondents, also supports this finding. The results showed a significant relationship between the knowledge ( $p = 0.014$ ) and attitudes ( $p = 0.025$ ) of mothers of toddlers and the frequency of toddler weighing at the integrated health post (posyandu).

### **The Influence of Motivation on Posyandu Activity**

The results of this study showed a significant relationship between motivation and Posyandu attendance, both in bivariate ( $p = 0.040$ ) and multivariate ( $p = 0.020$ ) analyses. Mothers with high motivation were 3.51 times more likely to be active. This finding is consistent with existing literature, such as research by Junydy (2019), which showed that respondents with high motivation were 1.7 times more likely to be active in Posyandu attendance compared to those with low motivation. This is because motivation is a human attitude that energizes and encourages healthy behaviors, including motivating mothers and their desire to attend Posyandu to monitor their toddler's growth and development and to regularly check on their toddler's health. The results of a

study by Dewi and Rozi (2021) showed a relationship between maternal motivation and toddler weighing visits ( $p\text{-value } 0.001 < 0.05$ ) at the Posyandu in the Sumber Waras Community Health Center area of Lubuk Linggau City. Mothers with high motivation regularly weigh their toddlers at the integrated health post (Posyandu), while mothers with low motivation are less likely to receive support from their husbands. Weighing toddlers is crucial for assessing their growth and nutritional status. Furthermore, health workers provide satisfactory services, including health education (Dewi and Rozi, 2021).

Motivation is the driving force, both external and internal, that drives an individual to take action to achieve a desired goal. The higher the motivation, the greater the desire to achieve the desired goal (Irwanto and Marliah, 2019). Internal motivation will encourage mothers to behave according to their desires. Mothers hope that their husbands' support will contribute positively to weighing their toddlers at the integrated health post. Furthermore, encouragement from health workers and cadres is needed to positively influence mothers with toddlers. Motivation from within the mother stems from a desire to receive services and information for her toddler, while external motivation can be influenced by the active role of health workers, cadres, and family in supporting mothers in carrying out routine weighing activities at the integrated health post (Posyandu) (Nurdin et al., 2019). According to researchers, motivation for a mother is crucial for the health of her infant and child. It encourages greater feelings and reactions to achieve her goals. Therefore, with motivation or encouragement from others, mothers and children are more likely to effectively and actively attend Posyandu visits each month. In this study, the higher the motivation that drives mothers to visit Posyandu, the greater the benefits for mothers, such as healthier babies and children.

#### **The Effect of Distance to Health Services on Activeness in Integrated Health Posts (Posyandu)**

Bivariate analysis showed that distance was not significantly associated with activeness ( $p=0.076$ ), but in multivariate analysis, the effect approached significance ( $p=0.053$ ). This suggests that distance remains a relevant factor, although it may not be the sole determinant. Ningsih's (2019) research aligns with these findings, indicating that long distances pose a physical and financial barrier for mothers. However, Wulan's (2021) research did not find a similar relationship, likely due to adequate transportation facilities or community interventions. Therefore, distance should still be considered in health policy formulation, for example by providing mobile Posyandu services or optimizing existing Posyandus to make them more accessible.

These results are inconsistent with research conducted by Sariana (2023) entitled "The Relationship Between Distance from Home and Posyandu Facilities and Mothers' Attendance at Toddler Posyandus in Pakong Village, the Working Area of the Pakong Community Health Center." The study found a significant positive relationship between distance from home and Posyandu facilities and mothers' attendance at toddler Posyandus in Pakong Village, as evidenced by the calculated F-value of 25.549 with a significance value of 0.000. Geographical factors such as distance to the Posyandu and ease of transportation access also determine mothers' attendance at these activities (Simbolon, 2021).

Distance to the Posyandu is an indicator of physical accessibility factors that can influence mothers' ease of attendance at the Posyandu. Models such as the "Three A's" (Accessibility, Availability, Affordability) emphasize that distance is a key component of accessibility; the closer the facility, the easier it is to access, especially for mothers of toddlers who may have limited transportation (Van Heerden et al., 2022). Distance to health facilities, including Posyandu (Integrated Health Posts), can impact community engagement (especially among mothers of toddlers) for several key interrelated physical, psychological, social, and economic reasons. If Posyandus are not easily accessible, regular attendance will be disrupted, particularly during inclement weather or emergencies.

#### **The Influence of Family Support on Active Attendance at Integrated Health Posts (Posyandu)**

The results of this study show differences between the bivariate and multivariate analyses. In the bivariate analysis, family support had a significant relationship ( $p=0.007$ ), consistent with research by Susanto (2020). However, in the multivariate analysis, this relationship was not significant ( $p=0.445$ ). This indicates that the effect of family support weakens when other factors, such as motivation and distance, are considered simultaneously. This phenomenon suggests that although family support is important as an initial reinforcing factor, it may not be the strongest predictor in a multivariable model. This means that interventions cannot rely solely on family support but must also focus on internal factors within the mother. The results of the study and the bivariate and multivariate analyses indicate that family support significantly influences a mother's active attendance at integrated health posts (Posyandu) ( $p=0.007$ ) and ( $p=0.017$ ). The higher the family support, the more frequently a mother will attend the Posyandu. These results align with a study by Putri Pratiwi (2023) entitled "The Relationship Between Family Support and Toddler Posyandu Visits in Sukamanis Village, Kadudampit Community Health Center, Sukabumi Regency," which found that family support influenced toddler Posyandu visits ( $p\text{-value} = 0.000$ ), with 134 of 143 respondents receiving family support regularly attending the Posyandu. Another study supporting these results was reported by Aryaneta & Chagiaurent (2019), which found a significant relationship between family support and maternal attendance at the Posyandu ( $p\text{-value} = 0.027$ ) ( $p < 0.05$ ).

Family support is the support provided by those closest to the patient in the form of attention, affection, and fulfillment of the patient's needs, so the patient feels cared for and develops self-confidence, which can improve the patient's ability to adopt a healthy lifestyle. The family's role in health includes recognizing the health problems of each family member, including the mother of the toddler, and making decisions to take appropriate action for the family. Maintaining a home environment conducive to the health and personality development of family members (Juwita, 2018). Family support is the family's open attitude toward its members, including informational support, appraisal support, instrumental support, and emotional support. The attention and support provided by those closest to them will motivate a person to pursue their goals (Kartika & Claudya, 2021). Unsupportive family support stems from a lack of awareness of the benefits and purpose of the toddler health post (Posyandu), resulting in families rarely discussing the Posyandu, suggesting it, or inviting it to attend.

### **The Effect of Age on Posyandu Activity**

This study found that maternal age was not significantly associated with Posyandu attendance, either in bivariate ( $p=0.156$ ) or multivariate ( $p=0.070$ ) analyses. This finding aligns with Putri's (2019) study. However, other studies, such as Lestari's (2020), found a significant association, where young age often correlated with a lack of experience and knowledge, which resulted in lower attendance. This difference could be due to the unique sample characteristics of each study. Overall, these findings suggest that age is not a primary predictor, and interventions should focus more on more modifiable factors such as motivation and knowledge. Maternal age is also an important factor in child health. This study indicates that the average maternal age is 32, considered the ideal age for childbirth and childrearing. Mothers in this age range generally have experience and are physically prepared to care for children. A study by Musonah et al. (2023) revealed that mothers of productive age tend to provide better attention and care to toddlers, thus supporting optimal child growth and development.

### **Research Limitations**

This study used a cross-sectional design, where variables are measured only at a specific point in time. A limitation of this design is its inability to explain causal relationships between variables. Therefore, further research using a cohort design is needed to describe the causal relationships more deeply.

### **CONCLUSION**

The factors that significantly influenced Posyandu activity were motivation (AOR = 3.51; 95% CI: 1.22–10.14;  $p = 0.020$ ) and education (AOR = 0.21; 95% CI: 0.05–0.95;  $p = 0.043$ ). This means that mothers with high motivation are 3.5 times more likely to be active in the integrated health post

(posyandu) than mothers with low motivation, while mothers with low education have a lower tendency to be active in the integrated health post (posyandu) compared to mothers with high education. Other variables such as knowledge ( $p = 0.132$ ), family support ( $p = 0.445$ ), distance to health facilities ( $p = 0.053$ ), and age ( $p = 0.070$ ) did not show a significant effect ( $p > 0.05$ ).

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