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## ANALYZING POSYANDU CADRES' MOTIVATION IN COMBATING STUNTING THROUGH THE LENS OF MASLOW'S HIERARCHY OF NEEDS

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## A B S T R A C T

Introduction: Stunting is a common child malnutrition form, hampers growth due to poor nutrition, infections, and limited psychosocial stimulation. Primarily affecting those under five, especially in the first 1,000 days, it becomes nearly irreversible later. Linked to impaired brain development, childhood morbidity, and mortality, it heightens the risk of chronic diseases in adulthood, impacting cognitive function and productivity. Objective: This research aims to analyze factors related to the motivation of Posyandu cadres in tackling stunting in the Belu Regency, RI-RDTL border. Method: The method used in this research is mixed methods. The mixed method research strategy applied is the Concurrent Embedded method. The quantitative method used is a descriptive approach while the qualitative method uses a case study. The study was conducted at Haliwen Health Center and South Atambua Health Center, with a quantitative research sample of 150 people and 10 qualitative research informants. The research findings indicate that the dominant cadre motivation factors include Social Needs at 99.3%. Result: Based on Maslow's Basic Human Needs motivation factors, when viewed from the results of quantitative and qualitative data analysis, the motivation of cadres in handling stunting is social needs. Meanwhile, in qualitative research, a main theme was found, namely Humanitarian Harmony, which was divided into 3 categories, namely Volunteering, Dedication, and Caring. Volunteering, Dedication, and Caring are included in social needs. Humans in general need to interact and contribute to society. Conclusion: Dedication, caring, and volunteering are ways to fulfill this social need by providing support or assistance to others without expecting immediate reward.

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# 1. INTRODUCTION

During the era of sustainable development, there has been a considerable improvement in children's health globally. Globally, the under-five mortality rate has halved, from 93 per 1,000 live births in 1990 to 38 in 2019 (UNICEF et al., 2020). Remarkable global progress has also been achieved in reducing the prevalence of stunting in children under five, which fell from 33% in 2000 to 22% in 2020 (World Health Organization, 2021). However, progress towards reducing stunting remains poor in Indonesia, where an average of 30.8% of children under the age of five were stunted in 2018 (UNICEF et al., 2018).

Even though Indonesia has not been able to reduce stunting by 32% in 2015 as targeted in the National Medium Term Development Plan (RPJMN), Indonesia has succeeded in reducing stunting by 30.8%, with 6.7% of children severely stunted in 2018. The current government has an ambitious target in the 2020-2024 RPJMN to reduce stunting by up to 19% (Bappenas, 2019). Meanwhile, the results of the 2021 Indonesian Toddler Nutritional Status Study show that the prevalence rate of stunted toddlers in 2019 was 27.7%, down by 3.3% in 2021, namely 24.4%. Meanwhile, the province with the highest prevalence of stunting in 2021 is ranked first in East Nusa Tenggara (37.8%) with 15 districts in the red category for stunting cases, including South Central Timor, North Central Timor, Alor, Southwest Sumba, Manggarai East, Kupang, Rote Ndao, Belu, West Manggarai, West Sumba, Central Sumba, Sabu Raijua, Manggarai, Lembata and Malaka (Kemenkes RI, 2021). Based on the evaluation of the weighing operation in August 2022, the total target number of toddlers weighed, 18,101 (100%), and it was found that the prevalence of stunting in Belu Regency was 2,473 (13.7%) (Dinas Kesehatan Kabupaten Belu, 2022).

Stunting is a bad consequence of malnutrition from before birth to early childhood (Montenegro et al., 2022). Stunting is the most common form of child malnutrition (de Onis & Branca, 2016). Stunting is a growth and development disorder experienced by children due to poor nutrition, recurrent infections, and inadequate psychosocial stimulation (Nasution, 2022). A child is said to be stunted if the Z score for height for age (HAZ or TB/U index) is less than minus two standard deviations (-2 SD) below the median. HAZ between -2 and -3 SD is classified as moderate stunting and HAZ >–3 SD is considered severe stunting (WHO, 2015).

Stunting is a condition of failure to thrive in children under five due to chronic malnutrition, especially in the first 1,000 days of life. Stunting after the first 1,000 days of life is almost irreversible (Georgiadis & Penny, 2017; Stewart et al., 2013). Stunting affects brain growth and development. Children who experience stunting are also at higher risk of developing chronic diseases in adulthood. Stunting is associated with increased childhood morbidity and mortality, decreased cognitive function, and lost productivity due to chronic disease in adulthood (Montenegro et al., 2022).

Stunting during the first 1,000 days of life is associated with immediate and long-term consequences, including reduced motor development/decreased physical growth, lower academic performance in educational attainment, cognitive deficits, and poor economic capabilities (Akseer et al., 2022; Islam et al., 2020). Stunting in childhood can hurt learning performance at school, such as repeating grades (Gansaonré et al., 2022). Girls who experience stunting in childhood are not only shorter in adulthood but are also more likely to have stunted offspring (Black et al., 2013).

Linear growth disorders often begin in the womb. Most stunting factors usually develop or have a greater influence on children at an early age (<2 years) (Islam et al., 2020). Children who experience stunting are at risk of reaching their maximum height, including cognitive potential. Despite decreasing prevalence, stunting is still the predominant type of pediatric malnutrition affecting children globally (WHO, 2015).

Stunting is often unnoticed in communities where short stature is so common that it is considered normal (de Onis & Branca, 2016). The difficulty in visually identifying stunted children and the lack of routine assessment of linear growth in primary health care took a long time to recognize the magnitude of this hidden scourge. However, after years of neglect, stunting is now identified as a top global health priority (WHO, 2018). The increased international attention is the result of greater awareness of the importance of stunting as a major public health problem (Mediani et al., 2022; Miranti et al., 2020).

Stunting is the result of a complex interaction of various factors such as low economic level (level of economic status); low education level (low maternal education level); increasing age of the child; exclusive breastfeeding; maternal age < 20 years poor feeding practices; birth length and maternal parity; birth spacing; Low Birth Weight (LBW); history of immunization status; genetic disorders; infection; and poor sanitation (Brahima et al., 2020; Lewa et al., 2020; Marni et al., 2021; Miranti et al., 2020; Sukamto et al., 2021; Tahangnacca et al., 2020). Apart from that, eating habits; habits of obtaining health services; hygiene habits; child rearing habits (parenting patterns) contribute to the incidence of stunting; and delayed initiation of breastfeeding (Muldiasman et al., 2018; Syahputra et al., 2022). Other factors related to the incidence of stunting include the nutritional status of toddlers; mother's attitude towards stunting; male gender; low maternal BMI (<18.5); poor households; long breastfeeding; drinking water sources are not clean and healthy; episodes of diarrhea; the practice of providing complementary foods with breast milk that is less than optimal; father's education and residence are low (rural) (Astuti et al., 2021; Martin et al., 2021; Nasution, 2022; Ogutu et al., 2022; Tahangnacca et al., 2020). These factors contribute to the high rate of stunting.

Various factors that cause stunting in children can be avoided through a holistic, communitybased multi-strategy approach considering that the predisposing factors for stunting are multifactorial (Tahangnacca et al., 2020). However, there are challenges and obstacles in reducing the incidence of stunting, including rarely evaluating stunting prevention programs (iron supplements for pregnant women and high school students; providing complementary breast milk food for toddlers; children's Posyandu; workshops and counseling on feeding practices for parents and health cadres; minimal effectiveness of iron supplementation (Sukamto et al., 2021). In addition, the implementation of stunting prevention activities is hampered due to the government's focus on the COVID-19 prevention program; lack of commitment and participation of social workers; invalid measurements; lack of monitoring and evaluation; lack of sectoral cooperation (Sukamto et al., 2021, 2022). The complexity of external factors that cause stunting has proven to complicate and hinder efforts to prevent and restore stunting.

Cadres play an important role in efforts to prevent and restore stunting. The role of cadres is also very important because cadres are responsible for implementing the Posyandu program. If cadres are not active then the implementation of Posyandu will also be hampered as a result of

which the nutritional status of toddlers cannot be detected early and accurately. This directly influences the level of success of the Posyandu program, especially in monitoring the growth and development of toddlers. Cadres play a role in children's growth and development and maternal health because through cadres mothers get health information earlier. Several studies have found that cadre motivation has a dominant influence on cadre performance. Cadre performance in the form of work results achieved by Posyandu cadres is by their respective responsibilities, although some cadres are still not optimal in carrying out their duties (Afifa, 2019; Sengkey & Pangemanan, 2015). The motivation of Posyandu cadres can be justified using Maslow's hierarchy of needs as they play a crucial role in addressing the physiological, safety, love and belongingness, and esteem needs of the community. By actively participating in the Posyandu program, cadres contribute to the overall well-being of the community and move towards fulfilling their potential, aligning with the principles outlined in Maslow's hierarchy. Maslow's hierarchy of needs provides a framework to justify the linkage between cadre motivation, Posyandu program implementation, and the overall well-being of toddlers and mothers. Cadres, by addressing basic physiological needs and contributing to higher-level needs, play a vital role in the success of the program and the overall health of the community.

## 2. METHODS

## **Research Design**

The method used in this research is mixed methods. Mixed Method is a procedure for collecting, analyzing, and mixing quantitative and qualitative methods in research or a series of research to understand the researcher's problems (Nadirah et al., 2022). The mixed method research strategy applied is the "Parallel Convergent" method, which is a mixed method design that combines qualitative and quantitative data separately but at the same time to obtain a more comprehensive understanding of the research phenomenon. This approach is also known as "Concurrent Triangulation" or "Concurrent Embedded". In a "Convergent Parallel" design, the researcher collects qualitative and quantitative data in parallel, meaning the data is collected at the same time (Setiawan et al., 2023). The quantitative method used to assess the motivation of Posyandu cadres uses a descriptive approach. The qualitative method used to assess the motivation of Posyandu cadres employs a case study approach.

## **Population and Sample**

The population in this study was all Posyandu cadres in the working area of the Haliwen Health Center and South Atambua Health Center, totaling 432 people. The inclusion criteria for Posyandu cadres are cadres who are in the two working areas of the Haliwen Health Center and South Atambua Health Center. Meanwhile, the exclusion criteria for Posyandu cadres are not being present/traveling outside the city/country. Next, the sample size calculation in this study uses the Slovin sample size formula (Rifkhan, 2023). Based on this formula, the sample size obtained in this study was 283 Posyandu cadre respondents. Quantitative and qualitative research uses the purposive sampling method, also called judgment sampling, which is a sample determination technique by selecting a sample from the population according to the researcher's wishes (goals/problems in the research), so that the sample can represent previously known

characteristics of the population (Prasetia, 2022; Ramadhani & Bina, 2021; R. K. Sari et al., 2023). The sample size obtained during data collection was 150 Posyandu cadre respondents who met the inclusion criteria. Meanwhile, the sample in qualitative research was 10 informants. There were ten participants consisting of 6 posyandu cadres, 2 health workers, and 2 parents of toddlers. This is related to the remoteness and breadth of the research area covering 10 villages/sub-districts and researchers having limitations in following Posyandu schedules which are scheduled simultaneously at the same time in different areas, causing researchers to have limited scope in searching for samples. During the data input process, no samples were found that dropped out.

#### Instrument

The instrument used to measure the motivation of Posyandu cadres was adopted by Nulfikayani (2021). Based on Maslow's hierarchy of needs, the questionnaire consists of 30 items, comprising 8 items related to physiological needs, 6 items related to safety needs, 6 items related to social needs, 6 items related to esteem needs, and 4 items related to self-actualization needs. This variable is measured using a 4-point Likert scale with answers that strongly agree given a score of 4; Agree is given a score of 3; Disagree answers were given a score of 2; and the answer strongly disagrees is given a score of 1. Nulfikayani, (2021) has carried out the validity test and reliability test of the instrument. The validity test shows a value of 0.592 with a table value of 0.3610 so the instrument is considered valid because the value of r count>r table. The reliability test showed a Cronbach Alpha value of 0.791 with a table value of 0.600 so the instrument is considered reliable because the value of r alpha>r table. Physiological need, safety needs, social needs, esteem needs, and self-actualization need are in the high category if the total percentage of respondents' answers has a value of < 62.5%.

Furthermore, in qualitative research, the instruments are interview guides with 3 questions, field notes, and cell phones with voice recorders. Validity in qualitative research often involves establishing credibility, dependability, and transferability. Ensuring that the interview guides capture relevant information and using triangulation with various data sources enhances validity. Reliability is achieved through consistent data collection methods and maintaining accurate field notes. Overall, addressing validity and reliability involves considering the rigor and appropriateness of the instruments for both research types.

#### **Research Procedure**

This research was conducted from August to September 2023. The data used in this research is primary data and secondary data. Primary data was collected directly by filling out a motivational questionnaire for Posyandu cadres, while secondary data regarding the number of Posyandu cadres was obtained from the 2023 South Atambua Health Center and Haliwen Health Center reports. The qualitative procedure involves utilizing interview guides, field notes, and cell phones with voice recorders. Here's a concise breakdown: The researcher conducts interviews with informants following specific steps. Initially, the researcher makes appointments and establishes a time agreement to ensure informant availability. Interviews take place in an agreed-upon space and

follow the interview guide. The results are thematically analyzed. Preparation involves setting up the space, ensuring equipment readiness, and introducing oneself and the objectives to the informants. During the interview, the researcher uses simple language, open-ended questions, and records descriptions of the informant actions and the environment. Interruptions may temporarily halt the interview. Informants are allowed to elaborate based on their knowledge, and the interview concludes with a summary and a time agreement if necessary.

## **Data Analysis**

Data processing was carried out using the SPSS application with the following stages: editing, coding, scoring, entry, cleaning, tabulating. Data analysis in quantitative research uses univariate analysis to get a portrayal of the frequency distribution of respondents for each variable. The qualitative analysis used while in the field is the Miles and Huberman model content analysis technique, combining the results of in-depth interviews and observations, and then conclusions are drawn. Miles and Huberman explained that the activities carried out during qualitative data analysis were carried out by directly interacting with information providers continuously until the data obtained showed saturated data. Activities in data analysis, namely data reduction, data display, and data conclusion drawing/verification. Data validity or validity in qualitative research lies in the belief that the researcher has accessed and represented it accurately and refers to the selection of a measurement method that is capable of representing what is stated in the measurement. The approach taken to measure the validity of qualitative data uses triangulation. Triangulation is the combination of different data from different sources and different methods used in one study. The triangulation used in this research is source triangulation, method triangulation, and data triangulation. In this study, the researcher applied triangulation as an approach to validate and strengthen the collected data. Triangulation was implemented through the integration of information from three primary sources: Posyandu cadres (PK), healthcare professionals (PTK), and parents of toddlers (OT). This approach also involved the collection of quantitative data and the application of methods such as interviews, observations, and surveys.

## **Ethical Clearance**

This research has obtained permission from the ethics commission of Universitas Aisyiyah Yogyakarta with the number 1777/KEP-UNISA/VIII/2023.

## 3. RESULT

Demographic data includes age, gender, latest education, marital status, length of service, and training. The data is presented as frequencies and percentages.

Based on table 1, It is clarified that the majority of cadres (74.7%) fall into the Highly Productive age group (15-49 years), are female (98%), and have a moderate level of education (Middle school/High School) (66.7%). The majority of cadres are married (94.7%), and have worked for a long time ( $\geq$  5 years) (60%). Additionally, most cadres have attended training fewer than 5 times (94%).

Characteristics		f	%
Age	Unproductive ( $\geq 65$ Years)	1	0,7
	Productive (50-64 Years)	37	24,7
	Highly Productive (15-49 Years)	112	74,7
Gender	Male	3	2
	Female	147	98
Education	Low (No School/Primary School)	42	28
	Moderate (Middle school/High School)	100	66,7
	High (College)	8	5,3
Marital Status	Married	142	94,7
	Single	7	4,7
	Divorced	1	0,7
Length of Service	New (< 5 Year)	60	40
	Old ( $\geq$ 5 Year)	90	60
Training	< 5 Times	141	94
	$\geq$ 5 Times	9	6

#### Table 2. Maslow's Hierarchy of Needs (n=150)

Characteristics		f	%
Physiological Needs	High	128	85,3
	Low	22	14,7
Safety Needs	High	142	94,7
-	Low	8	5,3
Social Needs	High	149	99,3
	Low	1	0,7
Esteem Needs	High	143	95,3
	Low	7	4,7
Self-Actualization	High	139	92,7
Needs	Low	11	7,3

Based on table 2, The majority of cadres express high physiological needs (85.3%), security needs (94.7%), social needs (99.3%), reward needs (95.3%), and self-actualization needs (92.7%).

Based on the thematic analysis of verbatim from In-Depth Interviews and document analysis, one main theme emerged, namely "Humanitarian Harmony." This theme revolves around the motivation of Posyandu cadres in addressing stunting. The research theme is depicted in Figure 1. From the verbatim analysis, three categories were identified: voluntary, dedication, and caring. Motivations include (responsibility, voluntary service, genuine willingness, and noble work).

## 1) Volunteering

Volunteering of Posyandu cadres refers to the active and unpaid involvement or service provided by individuals who are part of Posyandu, which are integrated health posts in Indonesia. Posyandu cadres willingly contribute their time, effort, and skills without financial compensation for the betterment of community health, particularly in addressing issues like stunting. It signifies a selfless dedication to community well-being and healthcare initiatives. Quotes from informants that contribute to this theme include:

"It comes from the heart; we have been working voluntarily for a long time" (PK3, 38 years old, Female)

"*I have my conscience; even though we don't have money, we don't complain*" (PK4, 52 years old, Female)

"Posyandu cadres are community members who are willing, able, and have the time to organize Posyandu activities voluntarily"(PTK1, 31 years old, Female)

"*Posyandu cadres are volunteers closest to the community in improving public health*" (PTK2, 36 years old, Female)

"In between their busy schedules, they can still give their time as Posyandu volunteer cadres" (OT1, 35 years old, Female)

"the cadres volunteers and patiently served us" (OT2, 42 years old, Female)

## 2) Dedication

Dedication of Posyandu cadres signifies the committed and devoted efforts of individuals who serve as cadres in Posyandu. It refers to the wholehearted commitment, loyalty, and earnest application of time and energy by these individuals to fulfill their responsibilities and contribute to the goals and objectives of Posyandu. In the context of community health, dedication among Posyandu cadres implies a strong sense of responsibility and passion for improving the well-being of the community they serve. Quotes from informants that contribute to this theme include:

"*There is a responsibility or obligation to measure the weight of children under the age of five*" (PK1, 58 years old, Female)

"One neighborhood unit corresponds to one standard cadre, enabling each person to work independently in their respective area with specific responsibilities" (PK6, 48 years old, Female) "The enthusiasm and dedication of posyandu cadres in efforts to deal with stunting is extraordinary" (PTK1, 31 years old, Female)

"They always work hard and are highly dedicated to carrying out their duties" (OT2, 42 years old, Female)

# 3) Caring

Caring of Posyandu cadres refers to the compassionate and attentive actions and attitudes exhibited by individuals serving as cadres in Posyandu. It indicates their genuine concern and empathy for the well-being of the community members, especially in the context of health and wellness. Posyandu cadres demonstrate caring by actively engaging with the community, providing support, and addressing health-related needs with a sense of empathy and nurturing. This caring aspect is crucial in fostering a positive and supportive environment within the community health framework. Quotes from informants that contribute to this theme include:

"Being a cadre is a noble job; by becoming a cadre, we can serve" (PK2, 44 years old, Female) "They don't look at the value but at the dedication to the noble work" (PK5, 48 Years, Female)

"Posyandu cadres in villages are very noble because they help monitor the growth of children in the village"(PTK1, 31 years old, Female)

"The task of posyandu cadres is very noble because they can save the nation's generation" (PTK2, 36 years old, Female)

"The work carried out by Posyandu cadres is very noble, not necessarily other people want it to be like that"(OT1, 35 years old, Female)



Figure 1. Research Result Themes Sources: Primary Data, 2023

#### 4. DISCUSSION

Motivation is also a meaningful construct, namely the desire to satisfy certain desires, and is the main pillar in the workplace (Forson et al., 2021). Several theories explain the concept of motivation, one of which is Maslow's hierarchy of needs (Ivancevich et al., 2006). Maslow's theory (1954) is about basic needs, not about motivation. However, this theory later became known as Maslow's theory of motivation. In humans, there are several basic needs, which inevitably must be met. This need is instinctive, it exists by itself, just as it exists in animals to different degrees. Because there are needs that must be met, humans are encouraged (motivated) to find ways (efforts) to fulfill these needs. So, it needs to encourage motivation. That is why Maslow's theory of needs is also called motivation theory. In other words, Maslow's motivation theory is based on basic human needs (Misbach et al., 2010).

Based on the research results, we found that the dominant motivation factors were Social Needs at 99.3%; Esteem Needs at 95.3%; Safety Needs at 94.7%; Self-actualization needs at 92.7%; and Physiological Needs at 85.3%. According to researchers, motivation has a crucial role in improving performance. Someone who is motivated tends to be more enthusiastic, focused, and determined to achieve goals. Motivation can come from a variety of sources including job satisfaction, recognition, responsibility, or personal aspirations. When someone feels motivated this can positively influence work results and contributions in the work environment. Work motivation can be considered an important catalyst for organizational success, because it encourages effective employee performance. However, employees who are less motivated will perform poorly even if they are skilled (Vo et al., 2022).

Social needs amount to 99.3% of motivation for cadres. According to the researchers themselves, social needs such as social interaction, team support, and compatibility in the work environment can have a significant influence on performance. A supportive work environment can increase motivation, collaboration, and job satisfaction. Positive relationships with coworkers and the feeling of belonging to a solid team can motivate individuals to contribute better, which in turn can improve overall performance. Based on research Adnyaswari & Adnyani, (2017) found that social support has a positive effect on performance, the higher the social support provided, the

higher the performance will be. Furthermore, based on research Muiz et al., (2022) concluded that good social support will be formed from emotional support that arises from cadres such as a sense of high work enthusiasm and mutual attention to each other as well as from informative support such as the knowledge possessed by cadres in carrying out their work.

Cadre Esteem Needs are 95.3%. The need for rewards and recognition for good performance can provide a significant motivational boost. Feeling appreciated by your boss or coworkers can increase job satisfaction and enthusiasm to perform better in the future. Rewards can take the form of positive feedback, public recognition, or other incentives, and these can create a work environment that motivates individuals to make maximum contributions. The need for recognition for performance refers to the human urge to be given recognition or appreciation for good work results. Meeting these needs can increase motivation, job satisfaction, and overall performance, creating a positive cycle in the work environment. Providing appropriate rewards can be an effective strategy for motivating individuals and teams. Nurpina's research, (2016) concluded that rewards have a direct positive effect on motivation, meaning that accuracy in giving awards results in increased motivation.

Cadre safety needs are 94.7%. Safety needs, such as job stability, reliable income, and a safe work environment, can provide a strong foundation for good performance. When individuals feel financially secure and their work environment is stable, they tend to be more focused and productive. This security creates conditions that support concentration on tasks and achievement of work goals, enabling better overall performance. Security, whether in the work context or work environment, can have a positive impact on performance. Job security, guaranteed income, and a guaranteed work environment can reduce stress, allowing cadres to work more efficiently, and creatively, and contribute positively to organizational goals. Therefore, creating an environment that ensures security can support increased performance. The research Susilawati & Mayasari, (2022) found that the work environment has a positive and significant effect on worker performance as a whole and is significant on motivation. Meanwhile, Rahayu's research, (2021) states that employee motivation to continue working, seen from Maslow's needs theory, is at the level of security needs because they are given guarantees in the form of health insurance for the family.

Cadres' need for self-actualization is 92.7%. Achieving self-actualization, which involves fulfilling personal potential and achieving meaningful goals, can provide a major boost to performance. When a person can work toward personal goals, feel engaged in meaningful work, and continually improve, this can increase motivation, creativity, and dedication to tasks. Self-actualization plays an important role in forming high performance by having a positive impact on a person's thoughts, attitudes, and contributions in the work environment. Self-actualization, as described by Abraham Maslow's needs theory, includes fulfilling personal potential and achieving high personal goals. The relationship between self-actualization and performance can be seen through the strong intrinsic motivation that emerges when a person works towards fulfilling his or her potential. When individuals can pursue goals that are meaningful and satisfy personal aspirations, this can provide a high motivational boost. This intrinsic motivation can increase focus, endurance, and creativity, which in turn can improve overall performance. Therefore, self-actualization can be a powerful driver behind high performance in the work environment. Research Syauta & Yuniasanti, (2017) found that the need for self-actualization has an effective contribution

of 36.2% to work motivation. The higher the need for self-actualization, the higher the work motivation; conversely, the lower the need for self-actualization, the lower the work motivation. Stefan et al., (2020) found that employees of the Romanian health system were mostly motivated by fulfilling higher-level needs, especially self-actualization needs.

Cadre physiologycal needs are 85.3%. Physiological needs, such as adequate food, adequate sleep, and other basic body needs, can have a direct impact on performance. When physiological needs are met, the body and mind function optimally, increasing endurance, concentration, and response to tasks. Conversely, an imbalance or dissatisfaction with physiological needs can result in decreased energy, poor focus, and decreased performance. Therefore, ensuring the fulfillment of physiological needs is an important factor in supporting good performance in the work environment. Research by E. Sari & Dwiarti, (2018) found that physiological needs are the most dominant variable influencing work performance.

Based on Maslow's Basic Human Needs motivation factors, when viewed from the results of quantitative and qualitative data analysis, the motivation of cadres in handling stunting is social needs. Meanwhile, in qualitative research, a main theme was found, namely Humanitarian Harmony, which was divided into 3 categories: Volunteering, Dedication, and Caring.

Volunteering is closely linked to Maslow's Hierarchy of Needs, encompassing elements of social needs, esteem needs, and self-actualization. Social Needs: Volunteering is a social activity that directly addresses the need for connection and a sense of belonging. Engaging in volunteer work allows individuals to form meaningful connections with others who share similar values and causes. This fulfills the social needs outlined in Maslow's hierarchy. Esteem Needs: Volunteering can contribute significantly to fulfilling esteem needs. When individuals volunteer and make a positive impact on their communities or causes, they often experience a sense of accomplishment, recognition, and increased self-esteem. The recognition may come from both internal satisfaction and external acknowledgment. Self-Actualization Needs: Volunteering can be a powerful tool for self-actualization. By dedicating time and energy to a cause one is passionate about, individuals often find a sense of purpose, personal growth, and fulfillment. This aligns with the higher-level need for self-actualization—striving to become the best version of oneself. In essence, volunteering is a holistic activity that not only addresses the need for social connection but also provides avenues for personal and collective growth, aligning with the principles outlined in Maslow's Hierarchy of Needs.

Volunteering is time willingly given for the common good and without financial gain. Volunteering is equally important for the mental and social development of a person, especially in adolescents and elderly, since it positively impacts cognitive function, altruism, and sense of belonging. A person involved in volunteerism feels better mentally and physically since it releases mental as well as physical stress. Volunteerism is an important practice for health care systems around the world and it contributes to the development of health care services as well (Kably et al., 2021).

Based on research by Danoff & Kopel (1994) The majority of respondents placed moderate importance on Safety and Security (46%), Self-Esteem (74%), and Social and Belongingness (66%). Self-Actualization was the only scale in which the majority of volunteers placed high importance (57%). The majority of people who volunteer at the (service) organization are

supplemental volunteers who are motivated by the need to self-actualize. Volunteers in this category are searching for self development, the effort to become all that they can be. They have goals similar to those of the service organization whose purpose is to help others or to do things for others (Heidrich, 1988). They may want to be involved in social reform and solving community problems, and they feel they can contribute something to society.

In addition, research by Evans et al., (2017) found that volunteer respondents primarily focused on the provision of highly-skilled, complex resources while community respondents focused on basic necessities (food, water, etc.) Volunteer respondents were also the only group to also mention spiritual/religious/life experiences, personal skills development, and relationships as perceived benefits. Applying Maslow's hierarchy thus demonstrates a difference in needs: community respondents focused on benefits that address deficiency needs at the bottom of the hierarchy while volunteers focused on benefits addressing self-transcendence/actualization needs at the top of the hierarchy. Furthermore, research Prytz et al., (2023) showed that the factors community, self-image, and competence were the strongest positive predictors for the motivation to continue volunteers. "Community" and "Self-image" relate to the feeling of doing something good, and that it feels important for the individual to personally to help others (Prytz et al., 2023). Motivations to volunteer for interest, social connection, self-growth, recognition, and support appeared conducive to positive volunteering experiences (Same et al., 2020). People may also volunteer due to career-related motivations, where individuals perceive volunteering as beneficial in gaining industry-specific experiences, skills, or contacts. Social motives may be served by volunteering, in that individuals may have the opportunity to spend time with others or build new relationships and social networks. Volunteering may also be motivated by a desire to engage with new experiences, learning, or skills-building, as described by the Clary and colleagues' understanding function. Finally, enhancement motivations encapsulate those wherein a person volunteers due to self-oriented reasons, such as self-development or self-esteem (Clary et al., 1998; Same et al., 2020).

Dedication aligns with Maslow's Hierarchy of Needs, particularly in the realms of esteem and self-actualization. Esteem Needs: Dedication often involves committing oneself to a particular goal, project, or cause. Achieving success in these endeavors contributes to a sense of accomplishment and recognition, fulfilling esteem needs. Recognition from others and self-respect are important components of esteem, and dedication to a purposeful pursuit can provide a pathway to fulfilling these needs. Self-Actualization Needs: Dedication goes hand in hand with selfactualization, the pinnacle of Maslow's hierarchy. Self-actualization is about realizing one's full potential, pursuing personal growth, and finding meaning in life. When individuals are dedicated to a cause they are passionate about, whether it's a creative endeavor, a career, or a social cause, they are on a path toward self-actualization. In essence, dedication is a powerful force that propels individuals toward fulfilling their higher-level needs. It provides a sense of purpose, accomplishment, and contributes to personal and social growth, aligning with the principles outlined in Maslow's Hierarchy of Needs.

Based on Sabetsarvestani et al., (2022) dedication is related to the high job commitment, together with the manifestation of a feeling of significance, pride at work, and inspiration. Dedication refers to being strongly involved in one's work and experiencing a sense of

significance, enthusiasm, inspiration, pride, and challenge. Dedication was defined as a feeling and state of mind and heart, like an untiring commitment. It is caring from one's heart with all human beings and technical resources available. This act usually happens without expectation for any reward or incentives in such a way that may lead to neglecting one's own needs (Sabetsarvestani et al., 2022). In addition, research by Kumar et al., (2016) the presence of a dedicated, efficient and adequately resourced public health cadre with professionally trained public health professionals and often the support of robust public health regulations, these cadres have contributed to improved health, environment, and development outcomes.

Caring is intricately connected to Maslow's Hierarchy of Needs, primarily in the domains of social needs, esteem needs, and even touching upon self-actualization. Social Needs: Caring is a fundamental aspect of fulfilling social needs. Human beings have an innate desire for connection and positive relationships. When individuals care for others, it fosters a sense of belonging, love, and acceptance—key components of social needs according to Maslow. Esteem Needs: Caring behaviors can also contribute to fulfilling esteem needs. When individuals care for others and make a positive impact on their lives, it often results in a sense of accomplishment and recognition. This recognition, whether from others or self-directed, contributes to the development and satisfaction of esteem needs. Self-Actualization Needs: Caring goes beyond immediate social and esteem needs; it can be a pathway to self-actualization. Engaging in activities that involve caring for others can be a source of personal growth, fulfillment, and the realization of one's potential. It aligns with the higher purpose and meaning-seeking aspects of self-actualization. In summary, caring is a powerful force that addresses not only the foundational social needs for connection but also contributes to a sense of accomplishment and recognition. Additionally, caring can be a meaningful pathway toward self-actualization as individuals find purpose and fulfillment in positively impacting the lives of others. Based on Janus & Misiorek (2019), the motive for the importance of caring for other people is an altruistic motive. This is also supported by research Mattis et al., (2009) which shows that altruism has four categories of motives including needscentered motives, norm-based motives deriving from religious/spiritual ideology, relationships and personal factors, abstract motives (e.g., humanism), and sociopolitical factors. Meanwhile, altruism resulting from respect and/or concern for fellow humans is included in abstract motives (general humanistic orientation). Apart from that, altruism which emphasizes the importance of caring for others is a norm-based motive with a sub-category of relational norm-based motives (Mattis et al., 2009; Schott et al., 2019).

The quantitative analysis revealed striking levels of need fulfillment among respondents: social needs ranked highest at 99.3%, followed closely by esteem needs at 95.3%, safety needs at 94.7%, self-actualization needs at 92.7%, and physiological needs at 85.3%. Complementing these figures, qualitative findings illuminated the intricate tapestry of human experiences. In the realm of social needs, respondents emphasized the significance of interpersonal bonds, social support, and active community engagement. Esteem needs surfaced through personal achievements, external recognition, and a sense of valued contribution. Meanwhile, self-actualization needs unfolded as a narrative of seeking life meaning, personal growth, and the pursuit of individual potential. This dual-method approach not only provides comprehensive quantitative insights but also enriches our understanding with the nuanced, qualitative nuances of human needs.

## 5. CONCLUSION

In conclusion, the findings from the comprehensive mixed-methods research conducted in the work areas of Haliwen Health Center and South Atambua Health Center reveal a clear pattern regarding the motivation of Posyandu cadres. The dominant variable influencing their motivation is identified as social needs, further substantiated by the overarching theme of Humanitarian Harmony. This theme, encompassing the elements of volunteering, dedication, and caring, underscores the profound impact of intrinsic values and a sense of duty on the motivation of Posyandu cadres. The integrated results from both quantitative and qualitative approaches provide a holistic understanding of the factors shaping the commitment and enthusiasm of these cadres in their crucial role within the healthcare system. This nuanced perspective highlights the interconnectedness of social needs and the intrinsic values of volunteering, dedication, and caring, emphasizing the importance of a human-centric approach in sustaining and enhancing the motivation of Posyandu cadres. It is recommended to establish community engagement programs to strengthen collaboration between cadres and the community, promoting shared responsibility and program success.

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# 7. CONFLICT OF INTEREST

The authors have no conflicts of interest to declare

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140 | Jurnal Pendidikan Keperawatan Indonesia, Volume 9 Issue 2, December 2023 Page 123–140