ORIGINAL RESEARCH

ANALYSIS OF THE UTILIZATION OF POSYANDU JIWA IN THE BLOTO PUBLIC HEALTH CENTER IN 2025

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ABSTRACT	Keywords
Mental health is part of the health status that must be achieved at the optimal level. Indicators that can be used include a decrease in psychosocial problems and the incidence of people with mental disorders (ODGJ). A service that plays a fundamental role and directly impacts the community is Posyandu Jiwa. This service is provided by the community, from the community, and for the community. The main service providers at Posyandu are mental health cadres under the guidance and support of health workers at the local Community Health Center. Posyandu Jiwa provides services for people with mental disorders (ODGJ). Services provided include regular health screenings, skills or vocational development, spiritual guidance, Group Activity Therapy (TAK), and family therapy. The purpose of this study was to analyze the utilization of Posyandu Jiwa in the working area of Bloto Health Center in 2025. This type of research is quantitative with a Cross Sectional approach. The sampling technique is total sampling. The research data were obtained from questionnaires on ODGJ knowledge, cadre behavior, family support, and ODGJ motivation. Data analysis using Chi square. There is a relationship between knowledge and the utilization of Posyandu Jiwa in Bloto Health Center in 2025 with a p-value = 0.000 (p <0.05). There is a relationship between cadre behavior and the utilization of Posyandu Jiwa in Bloto Health Center in 2025 with a p-value = 0.001 (p <0.05). There is a relationship between family support and the utilization of Posyandu Jiwa in Bloto Health Center in 2025 with a p-value = 0.001 (p <0.05). There was a correlation between patient motivation and utilization of the Posyandu Jiwa (Mental Health Post) at the Bloto Community Health Center in 2025, with a p-value of 0.002 (p < 0.05). The factor most closely related to Posyandu Jiwa utilization was knowledge, with a p-value of 0.001 (p < 0.05). One effort that needs to be improved to further optimize Posyandu Jiwa utilization is to improve knowledge among cadres, families, and cooperative individuals with mental disorders.	**Utilization of Posyandu Jiwa**

INTRODUCTION

The global mental health theme for 2025 is "Mental Health in Humanitarian Emergencies." This theme highlights the importance of access to mental health services amidst disasters, conflicts, and other crises, and underscores the need for

emotional support during crises. Meanwhile, the national theme in Indonesia is "Mental Health in All Situations." The population of people with mental disorders is currently increasing; at the beginning of 2025, there were 253 people with mental disorders (ODGJ) in East Java. Meanwhile, the number of people with mental disorders (ODGJ) in the Bloto Community Health Center (Puskesmas) in Mojokerto City reached 47 at the end of 2024. Treatment for people with mental disorders (ODGJ) includes a promotive-preventive approach (education and early screening), curative, and rehabilitative (restoring social and personal functions). Key to success includes the active role of the government, health workers, and support from families and communities free from stigma. The problem of people with mental disorders (ODGJ) remains a public health challenge in various regions of Indonesia, including East Java Province, particularly in the Bloto Community Health Center area. With a dense and diverse population, the Bloto area faces various obstacles in handling people with mental disorders, ranging from limited facilities to persistent social stigma. However, various efforts are continuously made by health workers and stakeholders to realize more inclusive and humane mental health services. The government has emphasized in the law that the central government, regional governments, and other policymakers must implement concrete measures to improve the health status of individuals with mental disorders, enabling them to become healthy, independent, active, productive, and empowered individuals for their families and communities. Based on the current situation, one of the community's important roles in addressing this situation is to be proactive and directly involved by optimizing the role of mental health cadres and promoting existing Posyandu Jiwa activities.

RESEARCH METHODS

Research Type and Design

The research design used was quantitative. This study employed a cross-sectional study approach, where the dependent variable (Utilization of the Mental Health Post) and the independent variables (Knowledge, Cadre Behavior, Family Support, and Motivation of People with Mental Disorders) were observed and measured simultaneously.

Research Variables
a. Independent Variable
The independent variables used in this study were Knowledge, Cadre Behavior, Family Support, and Motivation of People with Mental Disorders.
b. Dependent Variable
The dependent variable used in this study was Utilization of the Mental Health Post.

Population and Sample

The population in this study was all mental health cadres, families with people with mental disorders in the Bloto Community Health Center area, each with 47 individuals, and 47 clients with mental disorders. The sample used in this study was the Total Sample.
Data Collection Tools
This study used the Bloto Community Health Center Profile and a questionnaire as instruments. The questionnaire was closed-ended, requiring respondents to answer and mark their chosen answer alternatives.

Data Collection Procedure
The researcher collected data after obtaining permission from the Mojokerto City Health Office to conduct the research. They then requested permission from the Bloto Community Health Center to conduct the research and review the 2025 Bloto

Community Health Center Profile, which served as secondary data for the study. As a first step in the study, the researcher reviewed the identified respondents and confirmed their number. After obtaining a definitive number of respondents, the next step was to determine the time and location for data collection. The research began with an explanation of the purpose and objectives of the study. After respondents understood, consent was obtained. After obtaining consent, a questionnaire related to the utilization of the Mental Health Post (Posyandu) was administered to respondents.

Data Analysis

Univariate Analysis

The univariate analysis aimed to obtain a picture of the frequency distribution of each of the variables studied: education, knowledge, cadre behavior, family support, and motivation of people with mental disorders (ODGJ).

Bivariate Analysis

Bivariate analysis was conducted to determine the relationship between the independent and dependent variables. The chi-square test was used to examine these two variables with a 95% confidence level, or $\alpha=0.05$. If the p-value is less than $\alpha=0.05$ (p<0.05), there is a significant relationship between the independent and dependent variables. If the p-value is greater than $\alpha=0.05$ (p>0.05), there is no significant relationship between the independent and dependent variables.

Multivariate Analysis

Multivariate analysis was used to examine the relationship between the dependent variables and the independent variables. This study used linear regression analysis to determine the most influential factors in the utilization of the integrated health service post (Posyandu Jiwa) at the Bloto Community Health Center in 2025.

RESULTS AND DISCUSSION

Research Results
Respondent Characteristics by Gender
Table 1.1 Distribution of Respondents' Gender

No	Gender	N	%
1	Male	5	5,4%
2	Female	42	94,5%
	Total	47	100%

Respondents' gender was grouped into male and female. There were 5 male respondents (5.4%) and 42 female respondents (94.5%).

Education

Table 1.2 Distribution of Respondents' Education

No	Education	N	%
1	No Education	6	10,8
2	Elementery School	8	16,2
3	Junior High School	16	37,8
4	Senior High School	13	29,7
5	College	4	5,4
	Total	47	100%

Based on respondents' education level, 6 respondents (10.8%) did not attend school. Eight respondents (16.2%) had an elementary school education. Sixteen respondents (37.8%) had a junior high school education. 13 respondents (29.7%) had a high school education, and four respondents (5.4%) had a college education.

Knowledge of the Jiwa Posyandu

Table 1.3 Distribution of Knowledge of the Jiwa Posyandu

No	Knowledge of Posyandu Jiwa	N	%
1	Good	23	48,6%
2	Adequate	24	51,4%
	Total	47	100%

Based on respondents', 23 respondents (48.6%) had good knowledge of the Jiwa Posyandu, and 24 respondents (51.4%) had sufficient knowledge.

Cadre Behavior

Table 1.4 Distribution of Cadre Behavior

No	Cadre Behavior	N	%
1	Good	20	43,2
2	Adequate	16	25,1
3	Poor	11	21,6
	Total	47	100%

Cadre behavior was categorized as good, adequate, and inadequate. Twenty respondents (43.2%) rated cadre behavior as good. Sixteen (25.1%) rated cadre behavior as adequate, and eleven (21.6%) rated cadre behavior as poor.

Family Support
Table 1.5 Distribution of Family Support

No	Family support	N	%
1	Good	13	27,0
2	Adequate	20	43,2
3	Poor	14	29,7
	Total	47	100%

Family support was categorized as good, adequate, and inadequate. Thirteen (27.0%) reported good family support. Respondents with adequate family support numbered 20 (43.2%), and 14 (29.7%) had inadequate family support.

Motivation of People with Mental Disorders
Table 1.6 Distribution of Motivation of People with Mental Disorders

No	Motivation	N	%
1	Good	14	29,7
2	Adequate	22	48,6
3	Poor	11	21,6
	Total	47	100%

Patients' motivation was categorized as good, adequate, and inadequate. 14 (29.7%) respondents had good motivation, 22 (48.6%) respondents had adequate motivation, and 11 (21.6%) respondents had inadequate motivation.

Utilization of Mental Health Posts

Table 1.7 Distribution of Utilization of Mental Health Posts

No	Utilization of Mental Health Posts	N	%
1	Utilizing	20	40,5
2	Not Utilizing	27	59,5
	Total	47	100%

Utilization of Mental Health Posts was categorized as utilizing and not utilizing. Twenty respondents (40.5%) utilized Mental Health Posts, while 27 respondents (59.5%) did not utilize Mental Health Posts.
Bivariate Analysis

Bivariate analysis was used to examine the relationship between education, knowledge, cadre behavior, family support, and patient motivation, and utilization of Mental Health Posts. The statistical test used was Chi-Square. The confidence interval was 95% ($\alpha = 0.05$). If the p-value is less than α ($p < 0.05$), a significant relationship exists between the two variables studied. If the p-value is greater than α ($p > 0.05$), it means there is no significant relationship between the two variables studied.

Relationship between Knowledge and Utilization of the Jiwa Posyandu

Table 1.8 Relationship between Knowledge and Utilization of the Jiwa Posyandu in the Bloto Community Health Center Work Area in 2025

Knowledge	Utilization of the Jiwa Posyandu			
	Ulitilizes N	Not Utilize e	Total H	P value e
Good	16	8	24	0,000
Adequate	4	19	23	
Total	20	27	47	

Knowledge is the result of "knowing" obtained through sensing or experience, which is then stored, understood, and systematically accessed. Some experts define it as the ability to remember facts (Widyawati), learned understanding (Tamime), or justified belief (Plato).

The table above shows that of the 16 respondents who had good knowledge and utilized the Jiwa Posyandu. Eight respondents had good knowledge but did not utilize the Posyandu Jiwa (mental health service post). Four respondents had sufficient knowledge and utilized the Posyandu Jiwa. Nineteen respondents had sufficient knowledge but did not utilize the Posyandu Jiwa. The Chi-square test results showed a p-value of 0.000, concluding that there was a relationship between knowledge and Posyandu Jiwa utilization at the Bloto Community Health Center in 2025.

High or low Posyandu Jiwa utilization can be influenced by the level of knowledge about Posyandu Jiwa. The greater a person's knowledge, the higher their utilization of Posyandu Jiwa, and vice versa. This limited knowledge will have a negative impact on mental health. Knowledge of the benefits of Posyandu Jiwa can be gained from personal experience in daily life.

Attitude formation can encourage interest or motivation for patients to consistently attend Posyandu Jiwa (Kurniasari, 2013). The results of this study indicate that the lower a person's level of knowledge, the lower their utilization rate and the more difficult it is to understand the true meaning of Posyandu, and vice versa. The success of the integrated health service post (Posyandu) program is not solely determined by health workers but is also influenced by the community's strong understanding and awareness of implementing what they have learned during the implementation.

The results of this study align with Farida Octaviani's (2016) study at the Posyandu Jiwa (Mental Health Post) at the Pandak II Bantul Community Health Center, which demonstrated a correlation between knowledge and utilization of Posyandu Jiwa. Knowledge motivates logical behavior, meaning that good knowledge leads to correct behavior; in this case, good knowledge about Posyandu encourages patients to visit the Posyandu.

Knowledge is influenced by several factors, including education, mass media/information, environment, experience, and age of Posyandu cadres. Education is the foundation of a person's intellectual knowledge; the higher the education, the greater the ability to absorb and accept information, thus broadening their knowledge and insight. Furthermore, it is one of the factors underlying the actions taken and will subsequently influence a person's behavior (Mubarok, 2011).

Relationship between Cadre Behavior and Utilization of the Mental Health Post (Posyandu Jiwa)

Table 1.9 Relationship between Cadre Behavior and Utilization of the Mental Health Post (Posyandu Jiwa) in the Bloto Community Health Center Work Area in 2025

Behavior	Posyandu Jiwa Utilization			
	Utilizes N	Not Utilize	Total	P value
Good	14	6	20	0,001
Adequate	3	13	16	
Poor	2	9	11	
Total	19	28	47	

Mental health cadres are community members specially trained to act as extensions of mental health professionals at the community level. Their duties include psychoeducation, early detection of mental health problems, monitoring medication adherence, and facilitating referrals for individuals requiring further treatment.

The table above shows that 14 respondents considered the cadre behavior to be good and utilized the Posyandu.

The table above shows that 11 respondents with good family support utilized the Posyandu (Integrated Health Post). 2 respondents with good family support did not utilize the Posyandu for mental health. 5 respondents who assessed adequate support utilized the Posyandu. 15 respondents with adequate support did not utilize the Posyandu. 4 respondents with insufficient support utilized the Posyandu. 10 respondents with insufficient family support did not utilize the Posyandu for mental health. The Chi-square test results showed a p-value of 0.001, concluding that there is a relationship between family support and Posyandu for mental health utilization at the Bloto Community Health Center in 2025.

Family support is the attitudes, actions, and acceptance provided by family members to each other to cope with stress and problems. This support can take the form of informational, emotional, instrumental, and appraisal assistance. This support makes family members feel valued, cared for, loved, and have a greater sense of security and self-confidence.

Family support is the primary support system for people with mental disorders in maintaining their health. Family support for patients includes caring for, maintaining, and improving mental health, anticipating socioeconomic changes, and providing motivation and facilitating spiritual needs.

Family support plays a significant role in encouraging patients' interest or willingness to participate in integrated health service posts (Posyandu). Families can be powerful motivators for patients by consistently accompanying or taking them to the Posyandu, reminding them if they forget to go to the Posyandu, and trying to help them overcome any problems together.

The study results showed that the majority of patients (20 respondents) had adequate family support. Family support is the support provided by families in making decisions about using health services. Family support in monitoring the health of the elderly is essential for utilizing the Posyandu. Family support provides encouragement and motivation, both morally and materially (Utami, 2017).

The results of this study align with research conducted by Panjaitan et al. (2017) at the Posyandu Jiwa (Mental Health Post) at Semparu Community Health Center, where a statistical test obtained a p-value of 0.003. This indicates that the p-value is less than the significance level of 0.005, thus concluding that there is a relationship between family support and patient participation in Posyandu (Integrated Service Post). Therefore, family support is very important and has a significant relationship with adherence and participation in Posyandu Jiwa.

Relationship between Family Support and Utilization of the Jiwa Posyandu
Table 1.10 Relationship between Family Support and Utilization of the Jiwa Posyandu in the Bloto Community Health Center Work Area in 2025

Family support	Utilizies posyandu jiwa			
	Utilizies N	Not Utilized	Total	P value
Good	11	2	13	0,001
Adequate	5	15	20	
Poor	4	10	14	
Total	20	27	47	

The table above shows that 11 respondents with good family support utilized the Jiwa Posyandu. Two respondents with good family support did not utilize the Jiwa Posyandu. Five respondents who assessed adequate support utilized the Jiwa Posyandu. Fifteen respondents with adequate support did not utilize the Jiwa Posyandu. Four respondents with insufficient support utilized the Jiwa Posyandu. Ten respondents with insufficient family support did not utilize the Jiwa Posyandu. The Chi-square test results showed a p-value of 0.001, concluding that there is a relationship between family support and the utilization of the Posyandu (Integrated Service Post) at the Bloto Community Health Center in 2025.

Family support is the attitudes, actions, and acceptance provided by family members to one another to cope with stress and problems. This support can take the form of informational, emotional, instrumental, and appraisal assistance. This support makes family members feel valued, cared for, and loved, and increases their sense of security and self-confidence.

Motivation	Utilizies posyandu jiwa			
	Utilizies N	Not Utilized	Total	P value
Good	11	3	14	0,001
Adequate	5	17	22	
Poor	4	7	11	
Total	20	27	47	

Family support is the primary support system for people with mental disorders in maintaining their health. Family support for sufferers includes caring for or nurturing them, maintaining and improving their mental health, anticipating socioeconomic changes, and providing motivation and facilitating spiritual needs.

Family support plays a significant role in encouraging patients' interest or willingness to participate in Posyandu activities. Family members can be a strong motivator for sufferers by consistently accompanying or taking them to the Posyandu, reminding them if they forget to go to the Posyandu, and trying to help them overcome any problems together.

The results showed that the majority of sufferers, 20 respondents, had adequate family support. Family support is the support provided by families in making decisions about using health services. Family support in monitoring the health of the elderly is essential for utilizing integrated health services (Posyandu). Family support provides encouragement and motivation, both morally and materially (Utami, 2017).

The results of this study align with research conducted by Panjaitan et al. (2017) at the Posyandu Jiwa (mental health post) at Semparu Community Health Center. A statistical test obtained a p-value of 0.003. This indicates that the p-value is less than the significance level of 0.005, thus concluding that there is a relationship between family support and patient participation in Posyandu. Therefore, family support is crucial and has a significant relationship with adherence and participation in Posyandu Jiwa.

Relationship between Motivation and Utilization of Posyandu Jiwa

Table 1.11 Relationship between Motivation and Utilization of Posyandu Jiwa in the Bloto Community Health Center Work Area in 2025

The table above shows that 11 respondents with good motivation utilized Posyandu. Three respondents with good motivation did not utilize Posyandu. Five respondents with sufficient motivation utilized the integrated health service post (Posyandu). Seventeen respondents with sufficient motivation did not utilize the Posyandu. Four respondents with insufficient motivation utilized the Posyandu. Seven respondents with insufficient motivation did not utilize the Posyandu.

The Chi-square test results showed a p-value of 0.002, concluding that there is a relationship between motivation and Posyandu utilization at the Bloto Community Health Center in 2025.

Based on the results, it can be concluded that patient motivation influences patient participation in Posyandu.

This study aligns with research conducted by Nurzia (2017) at the Jiwa Posyandu in the Simpang Kawat Community Health Center, Jambi City, which found a relationship between motivation and Posyandu utilization, as seen from the p-value of 0.001 (p < 0.05).

The causal factor for this relationship between motivation and Posyandu visits is a lack of active participation in seeking information about the benefits of Posyandu, resulting in low motivation. Therefore, it can be concluded that motivation has a fairly strong relationship with the frequency of attendance at the integrated health post (Posyandu).

Multivariate Analysis

The analysis of the relationship between the independent variables most closely related to the utilization of the integrated health service post (Posyandu) at the Bloto Community Health Center in 2025 can be described as follows:

No	Variable	B	S.E	Wald	Df	Sig	Exp r	95.0% C.I for EXP(B)	
								Lower	Upper
1	Knowledge	4.102	1.625	6.376	1	0.001	60.46	2.504	1.46
2	Behavior	2.697	1.093	6.09	1	0	14.83	1.742	126
3	Family Support	0.729	1.112	0.431	1	0.001	2.074	0.235	18.323
4	Motivation	0.749	1.048	0.495	1	0.005	2.095	0.268	16.36

Table 1.12 Results of Logistic Regression Test of Factors Most Associated with the Utilization of the Integrated Health Service Post (Posyandu)

Based on the results of the logistic regression test, knowledge most significantly influenced the utilization of the Posyandu Jiwa at the Bloto Community Health Center in 2025, with a significance value of 0.001 or p-value <0.005. Thus, knowledge influences Posyandu utilization.

The B value is calculated by dividing the prevalence of the effect in the group with risk factors by the prevalence of the effect in the group without risk factors. The table shows a B value for knowledge of 4.102 (4%), indicating that respondents with good knowledge are more likely to utilize the Posyandu Jiwa compared to respondents with adequate knowledge.

CONCLUSIONS AND SUGGESTIONS

Conclusion

Based on the results of the study on the utilization of Posyandu Jiwa (Mental Health Post) in the Bloto Community Health Center (Puskesmas) work area in 2025, the following conclusions can be drawn:

1. There is a relationship between knowledge and utilization of Posyandu Jiwa (Mental Health Post) at Bloto Community Health Center in 2025 with a p-value of 0.000 ($p<0.05$).

2. There is a relationship between cadre behavior and utilization of Posyandu Jiwa (Mental Health Post) at Bloto Community Health Center in 2025 with a p-value of 0.001 ($p<0.05$).

3. There is a relationship between family support and utilization of Posyandu Jiwa (Mental Health Post) at Bloto Community Health Center in 2025 with a p-value of 0.001 ($p<0.05$).

4. There is a relationship between patient motivation and utilization of Posyandu Jiwa (Mental Health Post) at Bloto Community Health Center in 2025 with a p-value of 0.002 ($p<0.05$).

5. The factor most closely related to the utilization of the Posyandu Jiwa (Mental Health Post) was knowledge, with a p-value of 0.001 ($p<0.05$).

Recommendations

Based on the above conclusions, the researcher offers the following recommendations:

1. For Bloto Community Health Center

Health workers at the Community Health Center should undertake efforts such as increasing education related to health issues within the Posyandu Jiwa so that they can better understand health issues and be more willing to utilize the Posyandu Jiwa.

2. For Cadres

Mental health cadres should continuously improve their knowledge and attitudes in providing services to patients at the Posyandu Jiwa.

3. For Future Researchers

Due to the limitations of time, energy, and knowledge, it is recommended that future researchers further examine the variables that may prevent patients from utilizing the Posyandu Jiwa.

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