

Empowering Posyandu Cadres through Enhancing Parenting Communication Skills to Strengthen Community-Based Family Education

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Abstract.

This community service program was conducted at Posyandu Teratai, South Tangerang, with the aim of enhancing parenting communication skills among female health cadres. Traditionally, posyandu has focused primarily on maternal and child health services, while its potential as a center for community-based family education has not been optimally utilized. Field observations revealed that many mothers continue to apply authoritarian or permissive communication patterns, which may hinder children's emotional and social development. The program employed a participatory approach that included socialization activities, interactive training sessions, role-play simulations, group discussions, and continuous mentoring. Evaluation was carried out using pre-test and post-test instruments, observations, and reflective forums. The results of the program indicated an improvement in participants' understanding and application of democratic and empathetic parenting communication. The cadres demonstrated increased confidence and enhanced ability to establish two-way communication with children, and began to assume roles as change agents within their communities. The novelty of this program lies in its effort to position posyandu cadres not only as health facilitators, but also as community educators in family communication. Overall, the program contributes to strengthening family resilience and expanding the social role of posyandu within the community.

Keywords: Posyandu, Community Empowerment, Parenting Communication, Family Education

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INTRODUCTION

Posyandu is a community-based health service that plays a strategic role in improving maternal and child health through various preventive, promotive, and educational activities that are implemented routinely and in a sustainable manner [1]. As one of the closest health service units to families at the grassroots level, posyandu serves as an accessible entry point for monitoring child growth and development, providing basic health services, and disseminating essential health information to mothers and caregivers. Beyond these primary functions, the presence of posyandu also operates as a space for social interaction that is closely connected to family life within the community, where mothers, caregivers, and cadres engage in regular interactions, exchange experiences, and build mutual support networks [2].

Beyond its health-related functions, posyandu has considerable potential to be further developed as a center for family empowerment and education, as it relies on the active participation of female cadres who possess strong emotional and social ties with the community they serve [3]. These cadres function not only as health volunteers, but also as trusted community members who understand local contexts, cultural values, and everyday family challenges. This potential positions posyandu as a strategic platform for instilling healthy parenting values, strengthening family capacities, and supporting the development of human resources from early childhood. Through community-based approaches that integrate local wisdom and participatory practices, posyandu can contribute to fostering sustainable improvements in family well-being and community resilience [4].

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Nevertheless, parenting communication problems remain a significant and persistent challenge in many communities, particularly in relation to the dominance of authoritarian or permissive communication styles that are still frequently applied in everyday parenting practices [5]. These patterns are often rooted in long-standing cultural norms, limited access to parenting education, and the absence of adequate guidance on effective communication strategies that are responsive to children's developmental needs. Authoritarian communication patterns are generally characterized by one-way interactions, a strong emphasis on obedience, and minimal opportunities for dialogue between parents and children. Such interactions tend to position children as passive recipients of instructions, thereby restricting their ability to express feelings, needs, and opinions openly, as well as limiting the development of emotional regulation, autonomy, and critical thinking skills [6].

In contrast, permissive communication styles tend to grant extensive freedom to children without the provision of clear boundaries, consistent guidance, or appropriate supervision. While this approach may be intended to respect children's autonomy, the lack of structure can potentially lead to role confusion, difficulties in understanding expectations, and weakened processes of value formation and discipline. Over time, these conditions may affect children's social adjustment, emotional stability, and capacity to internalize norms and responsibilities within the family and broader social environment [7]. Together, the continued prevalence of authoritarian and permissive communication styles highlights the need for balanced, empathetic, and dialogical parenting communication approaches that can support healthy child development and more harmonious parent-child relationships.

Both communication approaches, although often applied by parents with good intentions and a desire to support their children, may have less optimal effects on children's emotional, social, and character development when implemented in an unbalanced manner [8]. When authoritarian or permissive communication styles dominate parenting practices, children may experience limited opportunities to develop emotional expression, social competence, self-regulation, and a clear understanding of values and boundaries. This condition is further exacerbated by limited access among parents particularly mothers at the community level to accurate information, structured guidance, and practical training on parenting communication patterns that are more adaptive and aligned with children's developmental needs. As a result, many parents rely on habitual or culturally inherited communication practices that may not fully address the complex emotional and social challenges faced by children in contemporary contexts.

Consequently, parenting communication issues should not be viewed solely as problems confined to the private sphere of the family, but rather as broader social concerns that reflect the need for community-based educational interventions. Such interventions are essential to introduce, model, and strengthen more empathetic, dialogical, and democratic communication practices that can be applied consistently in everyday parenting situations [9]. By situating parenting communication within a community framework, these interventions also create opportunities for shared learning, peer support, and collective reflection among parents and caregivers.

A number of previous studies have emphasized the importance of empathetic and democratic communication in supporting children's emotional and social development, as well as in fostering positive character formation and healthy interpersonal relationships [10]. However, despite the growing body of research on parenting education programs, relatively few studies have specifically focused on empowering posyandu cadres as agents of parenting communication education at the community level [11]. This gap highlights the limited attention given to the strategic role of posyandu cadres, who are closely connected to families and possess strong social influence within their communities. Therefore, this program aims to strengthen parenting communication skills among posyandu cadres and to expand the role of posyandu beyond health services, positioning it as a center for family education that actively supports the development of healthy parenting practices within the community [12].

Preliminary observations conducted at Posyandu Teratai indicated that cadres frequently encountered parenting communication challenges among mothers in the community, particularly in managing children's emotional responses and maintaining constructive dialogue within the family setting.

METHODS

This community service program adopted a participatory training and mentoring approach that positioned participants as active subjects throughout all stages of the activities. The participatory approach was

deliberately selected to promote engagement, a sense of ownership, and the sustainability of applying parenting communication skills in daily life [13]. The program stages began with an initial needs assessment to identify participants' levels of understanding and the parenting communication issues they encountered, followed by socialization activities aimed at explaining the objectives and emphasizing the importance of effective communication in parenting practices.

Subsequently, parenting communication training was conducted using an interactive design that combined the delivery of core materials, group discussions, and simulation activities. This training was further strengthened through practical mentoring to ensure that participants were able to apply the acquired skills in real-life contexts [14]. The participants consisted of female cadres of Posyandu Teratai, South Tangerang, who play a strategic role as community mobilizers and information disseminators. The training materials covered the principles of democratic parenting, empathetic communication in parent-child relationships, and active listening techniques as a foundation for building healthy and constructive two-way communication [15].

Program evaluation was carried out in a staged manner to assess its effectiveness, including the use of pre-test and post-test questionnaires to examine changes in participants' understanding, field observations to identify shifts in communication behaviors, and reflective discussions as a means of gathering feedback and informing future program improvements.

The target beneficiaries of this community service program were female cadres of Posyandu Teratai, South Tangerang. A total of 15 cadres participated in the program. The participants ranged in age from 25 to 50 years old and had diverse educational backgrounds, predominantly senior high school graduates, with several participants holding diploma degrees. All participants were actively involved in routine posyandu activities, including child growth monitoring, health counseling, and community outreach.

The specific problems identified during the initial needs assessment included limited understanding of empathetic and democratic parenting communication, the persistence of authoritarian or permissive communication patterns in daily interactions with children, and a lack of structured guidance on effective two-way communication strategies. Many cadres reported difficulties in managing children's emotional expressions and resolving conflicts constructively within the family context. These findings confirmed the need for targeted training and mentoring to strengthen parenting communication competencies among posyandu cadres.

RESULT AND DISCUSSION

The results of the program indicate meaningful developments in participants' understanding and application of parenting communication skills during the community service activities at Posyandu Teratai, South Tangerang. These developments were reflected in noticeable changes in participants' perspectives on communication within parenting practices, as well as in the communication behaviors they demonstrated throughout the training and mentoring process. Participants showed a growing awareness of the importance of empathetic communication, democratic parenting, and two-way communication as fundamental elements in building healthy, respectful, and supportive relationships between parents and children. In this regard, participants increasingly recognized the value of listening to children, acknowledging their emotions, and responding in ways that promote trust and openness.

This shift in understanding suggests that participants began to view communication not merely as a means of delivering instructions or enforcing rules, but as an interactive and relational process that fosters mutual understanding, emotional connection, and psychological security within the family. Such a perspective encourages parents to engage in dialogue rather than monologue, enabling children to actively participate in interactions and feel respected as individuals. As a result, parenting communication becomes a tool not only for guiding behavior, but also for nurturing emotional bonds, supporting children's social and emotional development, and creating a more harmonious family environment.

These findings were derived from systematic field observations, reflective discussions, and direct interactions conducted during the mentoring activities. The female cadres of Posyandu Teratai began to demonstrate greater awareness in selecting positive, respectful, and nonjudgmental language when communicating with children, particularly in situations that previously tended to trigger authoritative responses. In addition, participants gradually reduced the use of negative verbal expressions, such as

shouting or one-way commands, and replaced them with more dialogical approaches that provide space for children to express their feelings, needs, and opinions openly. Such changes indicate an increasing capacity among the cadres to regulate their communication strategies and adapt them to the emotional and developmental needs of children. Figure 1 presents the documentation of the community service program, encompassing (i) Interactive Parenting Communication Training Session, (ii) Child Health Monitoring and Family Engagement Activity, (iii) Role-Play Simulation on Empathetic and Democratic Parenting Communication, and (iv) Group Discussion and Reflective Forum on Family Communication Practices.



(i)



(ii)



(iii)



(iv)

Figure 1. Documentation of Community Service Activities on Parenting Communication Empowerment at Posyandu Teratai

These transformations were clearly observed during simulation activities (role play), where participants practiced alternative communication strategies, as well as when they shared their experiences of applying parenting communication practices within their families during experience-sharing forums that formed an integral part of the community service program. The reflective exchanges among participants further reinforced learning by allowing them to collectively evaluate challenges, successes, and contextual factors influencing communication practices at home. Overall, these findings highlight the effectiveness of combining participatory training with continuous mentoring in facilitating meaningful and sustainable improvements in parenting communication skills at both the individual and community levels.

In addition to its impact on parent-child communication patterns, the program also contributed to strengthening the self-confidence of posyandu cadres in performing their roles within both family and community contexts. The cadres not only felt more confident in applying healthy and constructive parenting communication practices within their own families, but also became better prepared to serve as role models and reliable sources of information for other mothers during routine posyandu activities. This increased confidence enabled the cadres to communicate parenting-related messages more assertively, clearly, and empathetically, thereby enhancing their credibility and acceptance among community members. Based on

the community service program reports and reflective discussions, the cadres gradually began to position themselves as facilitators of family education who are capable of delivering parenting-related messages in a more persuasive, context-sensitive, and accessible manner to diverse groups within the community.

These developments indicate that the intervention produced effects that extend beyond the individual and family levels, as it also strengthened collective awareness and learning processes at the community level. In this regard, the program contributed to reinforcing the social function of posyandu not only as a health service unit, but also as a center for community-based family education and empowerment. Such a shift highlights the importance of integrating educational and communicative dimensions into existing community health structures in order to address broader family and social issues.

These findings are consistent with previous studies emphasizing that democratic and empathetic parenting communication plays a crucial role in supporting children's emotional and social development, as well as character formation. Furthermore, the results of this community service program demonstrate that empowering cadres through participatory training and mentoring approaches can effectively optimize the social capital inherent in posyandu. Through this approach, cadres not only function as providers of health services, but also develop into community educators and agents of social change who are capable of initiating and sustaining positive transformations within their communities. Therefore, the program shows strong potential for sustainability, as the parenting communication skills acquired by the cadres can continue to be practiced, further refined, and disseminated more widely within the Posyandu Teratai community, thereby contributing to long-term improvements in family resilience and community well-being.

CONCLUSION

The findings of this community service program demonstrate that strengthening parenting communication skills among posyandu cadres represents a strategic approach to expanding the role of posyandu beyond conventional maternal and child health services. By addressing the limited attention previously given to the empowerment of posyandu cadres as agents of parenting communication education, this program contributes to filling an important gap in community-based family development initiatives.

Through participatory training and mentoring, cadres developed a deeper understanding of empathetic, dialogical, and democratic communication practices, which were subsequently reflected in their parenting interactions and their engagement with other mothers in the community. The intervention not only improved communication practices at the family level but also reinforced the social positioning of posyandu cadres as trusted community educators.

These results indicate that integrating parenting communication education into posyandu activities has strong potential to enhance family resilience and promote healthier parenting practices at the community level. Therefore, posyandu can be repositioned not merely as a health service unit, but as a sustainable platform for community-based family education. Future programs are encouraged to replicate and further develop this model in other posyandu settings to strengthen long-term social impact and community empowerment.

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