

# INCREASE SKILLS IN YOUTH CADRE COMMUNICATION THROUGH TRAINING COMMUNICATION EFFECTIVE IN RIDOGALIH VILLAGE

Beatrix Elizabeth<sup>1</sup>, Ika Juita Giyaningtyas<sup>2</sup>, Aprilina Sartika<sup>3</sup>

Universitas Medika Suherman, Cikarang <sup>1\*</sup> <u>beatrixelizabeth24@gmail.com</u>, <sup>2</sup> <u>ikajuitaa@gmail.com</u>, <sup>3</sup> <u>aprilsrt18@gmail.com</u>

### Abstract

Cadres have a role in preventing disease and improving people's ability to help themselves to achieve optimal health. The incidence of diabetes in adolescents is increasing day by day, so it needs early prevention. Ridogalih Village has Youth cadres but they still can not communicate with the community or their peers. The cadres in Ridogalih village have so far only focused on pregnant women and the elderly, so adolescents do not get good health information. The purpose of community service activities through training adolescent cadres conducted by Medika Suherman University is to improve the knowledge and skills of adolescent cadres so that they can optimize health in Ridogalih village. The method of service carried out provides training on how to communicate effectively, especially with peers. Youth cadres who participated in this training were 30 children who had been appointed as youth cadres before. Evaluation of this activity uses a knowledge questionnaire and a pre-posttest knowledge checklist. The results of the training obtained increased knowledge and skills in effective communication. The results of the training obtained increased knowledge and skills about effective communication. Pre-test cadre knowledge was less as much as 17 or 56.7%, sufficient cadre knowledge as much as 12 or 40.0% and good cadre knowledge as much as 1 or 3.3% while the total score of post test answers in the less category was 4 or 13.3%, enough as much as 16 or 53.3% and good as much as 10 or 33.3%.

Keywords: Adolescents, Cadres, Effective Communication, Cadre Training.

## **INTRODUCTION**

Diabetes DM is a disease caused by a metabolic disorder characterized by elevated blood sugar levels called hyperglycemia (Care, 2018). DM is a disease that is hidden before simple symptoms such as hunger, thirst, and frequent urination appear. These symptoms are often recognized when the patient feels uncomfortable, so it is called a silent killer (Isnaini & Ratnasari, 2018). The Indonesian Pediatric Association IDAI 2018 stated that the incidence of DM in children aged 0-18 years has increased by 700 over the past 10 years (Malik et al., 2022). In addition, Basic Health Research Data Riskesdas 2013 shows the incidence of risk factors for type-2 DM, namely 18.8 children aged 5-12 years are overweight and 10.8 suffer from obesity.

Based on data from the Ministry of Health of the Republic of Indonesia (2016),

Indonesia's population is expected to increase from 8.4 million in 2016 to 21.3 million in 2030. Indonesia has 5.7 million people with type 2 diabetes, and 1.1% of them die from type 2 diabetes. According to WHO, the number of people with DM is increasing worldwide due to lifestyle factors and poor diet. WHO has a special mission to deal with DM, namely prevention, especially Type 2 Diabetes Mellitus and minimizing complications and maximizing quality of life for people with DM. (WHO, 2016).

Data obtained from the 2018 Riskesdas results when compared to 2013, the prevalence of DM based on doctor's diagnosis in the population aged  $\geq$  15 years increased to 2%. As shown by the data above, the number of people with DM in Indonesia is very large. With the possibility of an increase in the number of people with DM in the future, it will be a very heavy burden to be handled alone by medical personnel such as general practitioners, specialists or subspecialists or even by all available health workers. DM disease greatly affects the quality of human resources and of course also has an impact on increasing health costs which are quite large. Therefore, all parties, both the community and the government, should actively participate in DM prevention efforts, especially in prevention efforts (PERKENI, 2015).

Cikarang Utara is a district in Bekasi Regency, West Java Province, Indonesia. The incidence of diabetes mellitus in North Cikarang is increasing every month. Seeing this, the author feels that there is a need to prevent the incidence of diabetes mellitus in adolescents in cikarang so that the incidence of diabetes does not increase every month. Community service activities to prevent diabetes by training teenagers to become cadres will help the task of the Health Office in Bekasi district to improve the degree of health in Cikarang. The knowledge of the general public, especially the younger generation in North Cikarang, about the dangers of DM and its medical and traditional treatments is still lacking. People in North Cikarang have a lifestyle that is at risk of increasing blood sugar levels.

Based on the results of analysis and discussion with several teenagers in North Cikarang, it can be formulated that specific problems are cadres who are not exposed to the occurrence of diabetes in adolescents, cadres are more focused on pregnant women and the elderly in Ridogalih Village so that adolescents there do not maintain a healthy lifestyle for the prevention of diabetes, lack of knowledge of adolescents in North Cikarang about diabetes mellitus as well as a lack of public awareness and knowledge about the prevention of diabetes mellitus.To increase public knowledge about the science of how to prevent DM, especially in adolescents, direct counselling and training are needed.

#### **IMPLEMENTATION METHOD**

Based on the results of the analysis and existing problems, the solution provided is to conduct training for existing youth cadres to improve communication in providing health information that can prevent the incidence of diabetes in adolescents. The participants of this activity were Ridogalih village youth cadres totalling 30 people. Training activities were carried out for 7 days starting at 09.00 - 12.00 WIB, located in the meeting room in Ridogalih Village. Before starting the training, teenage cadres were given a pretest questionnaire of knowledge on how to communicate well. After filling out the questionnaire, the cadres will get training material delivered by the service team which acts as an instructor and facilitator. After 7 days of training, teenage cadres were asked to demonstrate to their friends how to communicate well

such as providing health education. The media used in community service activities are LCD, Laptop, Speaker, Leaflet, Whiteboard and Pen.

## **RESULTS AND DISCUSSION**

The first activity in the training began with socialization and presentation to Youth Cadres knowing and understanding how to communicate effectively.



Figure 1. Youth cadres receive a presentation on Effective Communication.

The next activity is a demonstration of effective communication with an example of providing health education to peers. Demonstrations are carried out alternately by means of cadres coming forward and trying to provide Health Education to their playmates. Demonstration activities are given 5 minutes per person. During the demonstration activity, the other youth cadres listened carefully and each youth cadre watching was tasked with providing feedback to a friend who had demonstrated.



Figure 2. Youth Cadre Demonstrating Effective Communication

The next activity was to evaluate the cadre training activities that have been carried out. Evaluation of training results was carried out twice (pretest and posttest). The pretest was given before the training and the post-test was conducted after the training intervention. The pre and post-test processes were carried out with a chair distance between the training participants. Youth cadres understand how to communicate well and effectively when providing education to the community in Ridogalih Village, especially peers. This knowledge of how to communicate motivates youth cadres to provide health education to the community. To find out the changes that occur in youth cadres can be seen in the results of the pretest and posttest evaluations as shown in the following table:

Variable	Group		P value
	Pre (N=30)	Posts (N=30)	
Answer			
Less	17 (56.7%)	4 (13.3%)	
Enough	12 (40.0%)	16 (53.3%)	
Good	1(3.3%)	10 (33.3%)	

# Table 1. Comparison of Pre and Post-Test Knowledge Scores for Youth Cadres

Note: ordinal data p value tested with Wilcoxon test based on p-value <0.05 \* sign indicates p value <0.05 means significant or statistically meaningful.

Based on the table above, the total score of pre-test answers in the category of less is 17 or 56.7%, enough is 12 or 40.0% and good is 1 or 3.3% while the total score of post-training answers in the category of less is 4 or 13.3%, enough is 16 or 53.3% and good is 10 or 33.3% (table 1).

The evaluation results showed a significant increase in all adolescent cadres participating in the training. It is expected that adolescent cadres can conduct counseling to peers and other communities in accordance with the knowledge and skills gained, to increase self-confidence and be motivated to be the best.

## CONCLUSION

Youth cadre training increases the knowledge and skills of Ridogalih village youth cadres to carry out counseling and prevention of diabetes at an early age. It is hoped that the health center through the village midwife will continue to assist youth cadres in providing counseling and all types of prevention of diabetes, especially in adolescents.

### REFERENCES

- Care, M. (2018). Standards of medical care in diabetes-2018. *Diabetic Retinopathy*, 1–36. https://doi.org/10.1142/9789814304443\_0001
- Isnaini, N., & Ratnasari, R. (2018). Risk factors influence the incidence of type two diabetes mellitus. *Aisyiyah Journal of Midwifery and Nursing*, 14 (1), 59–68. https://doi.org/10.31101/jkk.550
- Ministry of Health of the Republic of Indonesia. (2016). Indonesia Health Profile 2016. In *Bali Province Health Profile*. http://www.depkes.go.id/resources/download/pusdatin/profilkesehatan-indonesia/Profil-Kesehatan-Indonesia-2016.pdf
- Malik, F.S., Sauder, KA, Isom, S., Reboussin, B.A., Dabelea, D., Lawrence, J.M., Roberts, A., Mayer-Davis, E.J., Marcovina, S., Dolan, L., Igudesman, D., & Pihoker, C. (2022). Trends in Glycemic Control Among Youth and Young Adults With Diabetes: The SEARCH for Diabetes in Youth Study. *Diabetes Care*, 45 (2), 285–294. https://doi.org/10.2337/DC21-0507