

Empathic communication training for cadres in assisting families of stunting toddlers

Puput Mariyati^{1*}, Denis Melati², Nining Tyas Triatmaja²

¹Psychology Study Program, Faculty of Health Sciences, Institut Ilmu Kesehatan Bhakti Wiyata Kediri, Jl. KH. Wahid Hasyim No.65–67, Kediri, East Java 64114, Indonesia

²Nutrition Study Program, Faculty of Health Sciences, Institut Ilmu Kesehatan Bhakti Wiyata Kediri, Jl. KH. Wahid Hasyim No.65–67, Kediri, East Java 64114, Indonesia

e-mail: puput.mariyati@iik.ac.id

Received 10 March 2025

Revised 30 June 2025

Accepted 30 July 2025

ABSTRACT

Posyandu cadres are the spearhead of real Community Health Center services in helping to address nutritional problems in the community. To support their role, Posyandu cadres must possess adequate communication skills to convey nutrition and health messages in a simple manner. Cadres are required to listen actively, non-judgmentally, respond empathetically, understand emotions, and create a comfortable atmosphere for those receiving nutritional assistance, ensuring optimal intervention. Empathetic communication training is an effort to improve the cadres' abilities to support families of stunted toddlers. This study uses a quantitative approach with a one-group pretest-posttest experimental design method, which aims to determine the effect of empathic communication training in improving the knowledge and skills of Posyandu cadres in assisting families with malnutrition. This study involved 20 participants from the village cadres distance Plosoklaten Kediri. Conducting given is empathic communication training that contains material about the process of empathic communication and empathic communication practice roleplay. Understanding of the training material was measured using questionnaires made by researchers who describe the role of cadres, concepts, and processes of empathic communication, as well as scenarios containing cases for practicing empathic communication. Hypothesis testing using a paired samples t-test with p value = 0.001 ($p < 0.05$). There is a significant difference in the level of knowledge between before and after being given empathic communication training for Posyandu cadres.

Keywords: Posyandu Cadres, Empathic Communication, Health Communication, Stunting.



1. INTRODUCTION

Stunting remains a serious health issue in Indonesia. Based on the Indonesian nutritional Status survey or Survei Status Gizi Indonesia (SSGI) in 2024, the prevalence of stunting in Indonesia was 19.8%. This figure is 0.3% lower than the stunting prevalence target set for 2024, which is 20.1%. This point remains a new challenge for Indonesia, because the government has set a stunting reduction target for 2025 is 18.8%. This certainly requires further efforts involving collaboration across various sectors, including government, the private sector, and the public. East Java is one of the six provinces with the highest number of stunted toddlers, at 430,780 toddlers (Kemenkes RI, 2024). Based on the Indonesian nutritional Status survey (SSGI) in 2022, the prevalence of stunting in East Java Province was 19.2% (Kemenkes RI, 2022). By 2024, the prevalence had decreased to 14.7%. Three regions in East Java were included in the group with very high stunting rates: Jember, Bondowoso, and Situbondo. Kediri Regency was included in the third cluster, which was classified as having moderate stunting. Kediri Regency is one of the regencies in East Java province, with a stunting prevalence of 21.6% in 2022, decreasing to 7.9% in 2024 (Kemenkes RI, 2024). However, stunting in Kediri Regency remains a priority for addressing nutritional issues, as stunting causes long-term negative impacts on children (Soliman et al., 2021).

The tangible impacts of stunting include impaired child development, such as delayed cognitive development, lower school achievement, and long-term consequences, such as lower income, a higher risk of chronic non-communicable diseases in adulthood, and suboptimal work productivity. Stunted children are more likely to experience higher levels of mortality, morbidity, and suboptimal cognitive and motor development (Black et al., 2013). Based on Kemenkes RI (2020), stunting is malnutrition characterized by a Z-score value for height or length for age (TB/U or PB/U) of less than -2 standard deviation (SD). Stunting is a chronic malnutrition problem caused by a long-term lack of nutritional intake, resulting in insufficient nutritional needs. Chronic nutritional deficiency manifests as linear growth failure in children, making them appear shorter than other children of the same age (Akbar et al., 2023). The Indonesian government, through the Ministry of Health, has implemented various efforts to address and prevent stunting. Specific nutritional interventions aimed at addressing the direct causes of stunting include ensuring adequate nutrition during pregnancy, providing exclusive breastfeeding for six months, providing complete immunizations, preventing childhood infections, monitoring toddler growth and development, providing nutrition education, and early intervention if signs of stunting are detected (Tim Percepatan Penurunan Stunting - Setwapres, 2024).

The effort was carried out at Posyandu (Pos Pelayanan Terpadu), a primary health care facility in Indonesia that aims to monitor and improve public health. Activities at Posyandu include weighing and height measurements, recording on the Health Card or Kartu Menuju Sehat (KMS), providing information and counseling on toddler development, nutrition education, exclusive breastfeeding and nutritious complementary feeding or Makanan Pendamping ASI (MP-ASI), and infant and young child feeding practices or Pemberian Makanan Bayi dan Anak (PMBA) (Kemendagri RI, 2024). Posyandu cadres are individuals tasked with carrying out Posyandu functions, including identifying children at risk of stunting, conducting early interventions, such as providing nutritional supplements or nutritional counseling to prevent more severe stunting, and providing vitamin A capsules to children to prevent vitamin deficiencies that can lead to health problems. To carry out these duties, cadres need to be equipped with knowledge about nutrition, toddler growth and development, and infant and young child feeding. Cadres are also required to have skills related to weighing and measuring height, nutrition education, identifying children at risk of stunting, and early intervention related to stunting management (Iswarawanti, 2010). In general, Posyandu cadres have duties for carrying out services according to their field of Service, preparing the place for Posyandu implementation, collecting data and identifying Posyandu services in accordance with minimum service standards, compiling Posyandu service activities as material for preparing Posyandu service reports to the management and communicating, providing information, and education in accordance with minimum service standards (Kemendagri RI, 2024).

Improvement of the nutritional status of stunted toddlers requires comprehensive intervention. In this case, cadres play an important role in realizing two roles: I am responsible for health and Community

Services exactly. In the Handbook of basic competencies of cadres in the health sector made by the Ministry of health of the Republic of Indonesia in 2023, it is explained that there are basic competencies of cadres that need to be developed, including assessment and learning, conducting home visits, and communicating effectively. Therefore, drawing his attention to the ability of the technique to understand emotional states and understand the environment is positive for the target population. These tasks require empathic communication skills so that cadres can provide optimal services to the community (Kerasidou et al., 2021). Studies about the efficacy of communication training in cadres have been done, such as Turistiati et al (2021), Rohmani & Utari (2020), Rosalia et al (2020), Noorikhshan et al (2024), Efkelin et al (2024), and Dewi et al (2018), but no one has discussed empathic communication training. Cadres need to have empathic communication skills so that people feel understood and willing to be accompanied. Cadres have a strategic role and position because they are the spearhead in delivering health information, education, and assistance to the community. If the empathic communication skills can be implemented by cadres, then more positive results will be achieved in preventing stunting. This training was expected to be reapplied by cadres in assisting families of malnourished toddlers so that it can provide wider benefits.

2. THEORETICAL BACKGROUND

2.1. Posyandu Cadres

According to Peraturan Menteri Dalam Negeri Nomor 13 of 2024, posyandu cadres are members of the community who are willing, able, and have time to assist village heads in community empowerment, participate in the planning and implementation of development, and improve community services in villages based on minimum service standards. Posyandu cadres have duties, including: 1) carrying out services according to their field of Service, 2) preparing the place for Posyandu implementation, 3) collecting data and identifying Posyandu services in accordance with minimum service standards, 4) communicating, providing information, and education in accordance with minimum service standards; and 5) compiling Posyandu service activities as material for preparing Posyandu service reports to the management (Kemendagri RI, 2024).

To carry out the roles and tasks of cadres, it is necessary to provide knowledge and skills, not only in the form of hard skills, but also soft skills. Hard skills are technical or practical skills that support professional functioning and success in a job, while soft skills are interpersonal skills, such as communication, problem solving, and emotional intelligence (Cimatti, 2016). Both of these skills are needed for individuals to complete tasks by utilizing appropriate resources, including those acquired through training or previous experience. Both involve cognitive and motor skills that, together, form the basis of mastering a job (Roebbers et al., 2014; Lamri & Lubart, 2023). One of the essential soft skills that cadres must possess is effective communication.

2.2. Empathic Communication

According to Shane (2011), communication is the process of transmitting and understanding information between two or more people. Communication is a connection, dialogue, expression, information, persuasion, and symbolic interaction (Waisbord, 2019). In it there are transactions and the creation of messages, and the entire process takes place in a context consisting of physical space, cultural and social values and psychological conditions (Kourkouta & Papathanasiou, 2014). Effective communication requires an understanding of the thoughts and feelings expressed by the interlocutor. That means the receiver and the giver of information must have the same understanding. The recipient of the information not only listens to what is being said, but must also convey the message that he can be understood and accepted. The ability to understand the thoughts and feelings of others is called empathy.

Empathy is a person's willingness and ability to see things from another person's point of view, recognize and experience their emotions, and communicate them so that the person feels supported (Bylund & Makoul, 2005). Empathy is a concept that involves cognitive, affective, and behavioral

components, and is related to linguistic expression. Empathy can be both an attitude and a skill learned through communication training. Empathic communication is a combination of verbal and nonverbal expressions to create satisfaction for the interlocutor, facilitate the achievement of communication goals, and maintain a good relationship (Durongtham et al., 2024).

2.3. Empathic Communication in Health Communication

In a health communication perspective, empathic communication is related to the ability to provide emotional support. Empathic communication centers on the patient recognizing the patient's point of view and engaging in shared understanding and decision-making that fits the patient's needs and values. Empathic communication includes statements in which the patient explicitly describes the emotions they feel or related physical, psychosocial, or life changes that are positive, such as their progress or success, and negative, such as the challenges they face. In addition, empathic communication also includes responses that validate emotions, repeat or give clear nonverbal recognition cues, ask questions and offer support), confirm the patient's feelings or experiences (Iannarino, 2022). Empathic communication has an impact on higher levels of Health Information Disclosure and treatment adherence, less negative behaviour, building trust and good relationships. Researchers have extensively developed and evaluated empathic communication training programs for clinicians and health workers in the context of health care. Research (Kerr et al., 2020) has developed empathic communication training through drama performances to help medical students communicate empathically with patients.

3. METHODOLOGY

This study uses a quantitative approach with a one-group pre-test-post-test experimental design. The purpose of this study was to determine the effectiveness of empathic communication training in Posyandu cadres in assisting families of stunted toddlers. Researchers conducted a comparison between before and after the intervention was given to participants without strict control over the measured variables. Participants were given a pre-test to determine the initial condition, then a post-test after being given a manipulation (intervention) with the same measuring instrument. The research instrument used questionnaires prepared by researchers containing material on empathic communication and roleplay related cases for simulation of assistance to families with stunted toddlers. The subjects of this study were 20 Posyandu cadres. The study was conducted on May 27, 2025, at the Jarak, Plosoklaten, Kediri Regency.

3.1. Data Collection

Sample of this study was 20 cadres of Jarak Village, Plosoklaten of Kediri Regency. The study aims to assess the effectiveness of empathic communication training and its effect on the knowledge and skills of cadres in the effort to assist families of stunted toddlers. This study uses a questionnaire as the desired data collection techniques. The questionnaire is a data collection technique that is done by giving a set of questions or written statements to respondents to be answered. Respondents completed questionnaires containing material on empathic communication before and after training. Observations were also made when cadres simulated empathic communication practices based on the scenario provided by the trainer. The conversational content contained in empathic communication and non-verbal interaction with the toddler's mother was recorded by the observers during the session.

3.2. Data Analysis

Data obtained from the questionnaire were tested with paired sample t-test. Paired sample t-test is a statistical method to test the average difference of two samples that are interconnected (paired). This test is used when the study subjects are the same but subjected to two different treatments or measurements,

for example before and after treatment. All statistical analyses in this study were conducted using SPSS edition 22.

4. RESULTS AND DISCUSSION

4.1. Characteristic of Subject

The characteristics of cadres based on age can be seen in Table 1. The results of the study found that there were more early adulthood cadres (60%) compared to middle age cadres (40%). A larger number of early adulthood cadres would be beneficial for this study.

Table 1. Characteristics of cadres based on age

Age Category	Quantity (n)	Percentage (%)
Early adulthood: 25-40 years	12	60 %
Middle age: 40-60 years	8	40 %
Total (N)	20	100%

Cognitive abilities in early adulthood are better than those in middle age, as the aging process can diminish cognitive abilities (Saliassi et al., 2015). The affective aspect differs from the cognitive aspect. Early adulthood, aged 18-39, tends to have unstable emotions. This is related to the risk of stress and anxiety in early adulthood. Early adulthood are still learning to control their emotions. Meanwhile, middle-aged individuals (aged 40 and over) show more stable emotions (Papatungan, 2023). Early adulthood showed better physical and psychomotor skills than middle-aged adults. This is related to a decline in physiological function caused by decreased nerve and muscle function, changes in physical structure, and hormonal changes (Nasution et al., 2024). Early adulthood and middle-aged cadres each have their own strengths. Therefore, implementing mentoring for families of stunted toddlers using empathic communication techniques requires collaboration between cadres. This ensures that cadres of different ages can support each other's roles. In addition, all of the participants in this study are females. Increasing knowledge in cadres who are all women can be related to gender. Research from Pang et al., (2023) found that women exhibit superior empathic abilities than men.

4.2. The Effectiveness of Empathetic Communication Training on The Knowledge of Posyandu Cadres

The results of the descriptive test of the effectiveness of empathetic communication training can be seen in Table 2. There was an increase in the average score from 8.00 ± 1.02 in the pre-test to 9.50 ± 0.68 in the post-test. The increase in the average was followed by an increase in the minimum and maximum scores. During the pre-test, there were cadres who answered 6 points correctly, but during the post-test, the lowest score was 8 points. During the post-test, there were cadres who answered all points correctly.

Table 2. Results of Knowledge Analysis Before And After Training

	Mean \pm SD	Min	Max	p-value
Pretest	$8,00 \pm 1,02$	6,00	9,00	0,001*
Posttest	$9,50 \pm 0,68$	8,00	10,00	

*Description: *) Statistical test using paired T-test, significant if p value <0.05*

The results showed that there was a significant difference in the knowledge of cadres between before and after the empathic communication training ($p < 0.05$). It can be said that there is an increase in knowledge gained by participants after following the roleplay material and practice from the facilitator. The improvement of knowledge related to empathic communication can be correlated with the theory of

social learning from Bandura. Bandura's social learning theory states that new behaviour can be formed by observing and imitating others. Empathic communication training provides learning for cadres, not only knowledge but also simulation or direct practice based on observation of the model (facilitator) in delivering empathic communication to the target (mother of a stunted child). Cadres learn new behaviours (empathic communication) by observing the facilitator and then the observation is transformed into action. With hands-on practice, understanding related to empathic communication materials can be further increased.

The increase in knowledge can be attributed to environmental factors that surround the participants. Posyandu cadre of Jarak Village, Plosoklaten, Kediri Regency is an official community formed by the health system in Indonesia. Based on the ecological theory initiated by Bronfenbrenner, humans are influenced by and affect the environmental system. The process of interaction between individuals and environmental systems is influenced by various contexts that may not even be aware of by the individual in question. Posyandu cadres of Jarak villages are included in the mesosystem. Mesosystems are interrelations between two or more Microsystems. In this case, posyandu cadres play an important role to become a bridge between Microsystems and ecosystems. Posyandu cadres are the main players involved in community mobilization, counselling, and health monitoring (Kemendagri RI, 2024). Cadres have a very strategic role to help the realization of health improvement efforts in vulnerable groups, including toddlers with malnutrition, which is carried out at the above level (ecosystem), namely Puskesmas (Center of Public Health) and local village governments through the program of Posyandu Balita.

Posyandu cadres of distance villages can be said to be active cadres in participating in activities to overcome stunting organized by the Kediri Regency Office. But unfortunately, they experience some obstacles, especially in providing motivation to mothers with stunted toddlers. This difficulty arises with various causes, such as the efficacy of the mother is less because it does not succeed in raising the child's weight, the child refuses to eat with a nutritious menu that has been made by their mother, less support from the family, and less knowledge and cooking skills related to a nutritious menu that is appropriate for the child's age. These results are in line with the findings of study from Efkelin et al (2024) that cadres often have difficulty in conveying health messages clearly, persuasively, and in accordance with local needs and culture. The study from Hasanah et al (2022) also reinforces the finding that health workers experience layered pressures in carrying out their roles so that they are unable to communicate aesthetically with their patients.

Studies on the efficacy of communication training have been conducted to improve the ability of cadres, but not much has been discussed about empathy communication training for cadres. Studies from Rohmani & Utari (2020) conducting effective communication training for Posyandu cadres with video role play techniques to communicate effectively in the organization of posyandu in the region. The results show that communication is the basic capital for cadres in carrying out health promotion and carrying out their roles and duties as community movers. It's just that there are still cadres who have not been able to provide solutions and advice to posyandu participants regarding health problems faced by the community. This empathic communication training provides direct practice simulation at the end of the session so that cadres are expected to better understand how to conduct empathic communication in assisting families with stunted toddlers.

Research by Glanz et al (2015) also stated that the development of robust communication infrastructure, particularly at the local level, is often not a priority in improving effective communication in public health. Empathic communication is emerging as an ongoing foundation for re-establishing relationships and trust between health practice and society (Miller & Haskins, 2022). Posyandu cadres as the frontline in the prevention and control of stunting have an important role to be involved with health care providers (Akbar et al., 2023). In addition, empathic communication can assist cadres in conducting health services because Posyandu cadres are the most important part of the community that can make contact easily with the community (Purwanta et al., 2023). In a social context, communication is a social event that occurs when humans interact with other humans. Communication contains a specific purpose, namely informative and persuasive. Persuasive communication is more difficult than informative communication because it is not easy to change the attitude, opinion, or behavior of a person or a number

of people (Harnack & Fest, 1964). Persuasive communication is a challenge for cadres, especially in changing attitudes. Family views and behaviors in overcoming stunting. To be able to achieve this, cadres are required to be able to understand the feelings and thoughts of mothers and families with stunted toddlers in order to feel understood and appreciated for their efforts in overcoming stunting. When mothers and families with stunted children experience obstacles in handling stunting, cadres are expected to be able to conduct empathic communication to overcome existing obstacles. Lunenberg and Ornstein (2012) stated that communication will be effective if the recipient of the message can estimate the response given by the sender of the message, so that they can attempt to understand the framework of view of the sender. In other words, empathy as a technique for understanding the framework of another person needs to be applied to overcome barriers in communication.

5. CONCLUSION

This study shows that, based on age characteristics, early adulthood (60%) outnumbered middle-aged cadres (40%). Furthermore, analysis of cadre knowledge scores before and after treatment showed a significant increase ($p < 0.005$) from 8.00 ± 1.02 in the pre-test to 9.50 ± 0.68 in the post-test. This suggests that empathic communication training can enhance Posyandu cadres' understanding of empathic communication. The increase of knowledge is associated with their age characteristics, which are predominantly early adulthood aged 25-39. Young adults are considered to have better cognitive abilities than middle-aged adults. Openness to information, education, optimal health, and exposure to technology are factors contributing to cognitive abilities. In this study, researchers only assessed changes in knowledge levels. We did not analyse attitudes and behaviours. Future research is expected to analyse the changes in attitudes and behaviours of Posyandu cadres in implementing empathic communication to support nutrition problems solving. The number of respondents in this study is quite small so that needs to add more cadres to be applied to other situations. The use of a design without a control or comparison group is a methodological weakness that can obscure research results from potential confounding factors, testing effects, and social desirability biases.

Ethical approval

This research did not require ethical approval.

Informed consent statement

This research did not require informed consent.

Authors' contributions

Conceptualization, P.M., D.M., and N.T.T.; methodology, P.M., and D.M.; validation, P.M., and N.T.T.; formal analysis, D.M., and N.T.T.; resources, P.M., D.M., and N.T.T.; writing original draft preparation, P.M., and D.M.; writing review and editing, P.M., D.M., and N.T.T.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Data availability statement

The data presented in this study are available on request from the corresponding author due to privacy reasons.

Funding

This research received no external funding.

NOTES ON CONTRIBUTORS

Puput Mariyati

Puput Mariyati is a researcher in the Psychology Study Program at Institut Ilmu Kesehatan Bhakti Wiyata Kediri. Her academic interests include mental health, health psychology, and behavioral interventions in clinical and community settings. She is actively involved in multidisciplinary research focusing on psychological well-being and public health promotion.

Denis Melati

Denis Melati is a researcher of the Nutrition Study Program at Institut Ilmu Kesehatan Bhakti Wiyata Kediri. Her research focuses on community nutrition, dietary behavior, and nutritional interventions for public health. She is committed to advancing nutritional education and improving food security awareness through evidence-based approaches.

Nining Tyas Triatmaja

Nining Tyas Triatmaja is an academic in the Nutrition Study Program at Institut Ilmu Kesehatan Bhakti Wiyata Kediri. Her research areas include pediatric nutrition, micronutrient deficiencies, and sustainable dietary practices. She is passionate about promoting nutrition literacy and developing health promotion strategies targeted at vulnerable populations.

REFERENCES

- Abdullah, S. M. (2019). Social cognitive theory: A Bandura thought review published in 1982-2012. *Psikodimensia: Kajian Ilmiah Psikologi*, 18(1), 85-100.
- Akbar, R. R., Kartika, W., & Khairunnisa, M. (2023). The Effect of Stunting on Child Growth and Development. *Scientific Journal*, 2(4), 153–160. <https://doi.org/10.56260/scienc.v2i4.118>
- Black, R. E., Victora, C. G., Walker, S. P., Bhutta, Z. A., Christian, P., de Onis, M., Ezzati, M., Grantham-McGregor, S., Katz, J., Martorell, R., & Uauy, R. (2013). Maternal and child undernutrition and overweight in low-income and middle-income countries. *The Lancet*, 382(9890), 427–451. [https://doi.org/10.1016/S0140-6736\(13\)60937-X](https://doi.org/10.1016/S0140-6736(13)60937-X)
- Bylund, C. L., & Makoul, G. (2005). Examining Empathy in Medical Encounters: An Observational Study Using the Empathic Communication Coding System. *Health Communication*, 18(2), 123–140. https://doi.org/10.1207/s15327027hc1802_2
- Cimatti, B. (2016). Definition, development, assessment of soft skills and their role for the quality of organizations and enterprises. *International Journal for Quality Research*, 10(1), 97–130.
- Dewi, R., Dida, S., & Anisa, R. (2018). Pelatihan Komunikasi Bagi Kader Posyandu di Desa Pegerwangi, Kecamatan Lembang, Kabupaten Bandung Barat – Jawa Barat. *Jurnal Abdi MOESTOPO*, 1(2), 58–65.
- Durongtham, O., Chusanachoti, R., & Iramaneerat, C. (2024). Needs analysis of empathic communication enhancing program for health-science EFL students. *LEARN Journal: Language Education and Acquisition Research Network*, 17(2), 110–133.
- Efkelin, R., Mailintina, Y., Martini, & Lipin. (2024). Factors That Affect The Performance Of Matahari Lima Posyandu Kader In Providing Excellent Service In RT 001 RW 03 Village Sunter Agung North Jakarta. *Jurnal Edubhealth*, 15(3), 276–287.
- Glanz, K., Rimer, B. K., & Viswanat, K. (2015). *Health Behavior: Theory, Research, And Practice: Vol. V*. John Wiley & Sons.
- Harnack, R. V., & Fest, T. B. (1964). Group discussion: Theory and technique (pp. 21-23). New York: Appleton-Century-Crofts.
- Hasanah, U., Bahfiarti, T., & Farid, M. (2022). Analisis Hambatan Komunikasi Interpersonal Antara Tenaga Kesehatan dan Pasien Covid-19 di RSUD Kota Bima . *JHIP (Jurnal Ilmiah Ilmu Pendidikan)*, 5(9), 3697–3700.

- Iannarino, N. T. (2022). Empathic Communication and Emotions. In *The International Encyclopedia of Health Communication* (pp. 1–5). Wiley. <https://doi.org/10.1002/9781119678816.ieh0676>
- Iswarawanti, D. N. (2010). Kader Posyandu: Peranan dan Tantangan Pemberdayaannya Dalam Usaha Peningkatan Gizi Anak Di Indonesia. *Jurnal Manajemen Pelayanan Kesehatan*, 13(4), 169–173.
- Kemendagri RI. (2024). *Peraturan Menteri Dalam Negeri Nomor 13 Tahun 2024 Tentang Pos Pelayanan Terpadu*. Kementerian Dalam Negeri Republik Indonesia.
- Kemenkes RI. (2020). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 2 Tahun 2020 Tentang Standar Antropometri Anak*. Kementerian Kesehatan Republik Indonesia.
- Kemenkes RI. (2022). *Survei Status Gizi Indonesia (SSGI)*. Kementerian Kesehatan Republik Indonesia.
- Kemenkes RI. (2023). *Buku Panduan Keterampilan Dasar Kader Bidang Kesehatan*. Kementerian Kesehatan Republik Indonesia.
- Kemenkes RI. (2024). *Survei Status Gizi Indonesia Dalam Angka*. Kementerian Kesehatan Republik Indonesia.
- Kerasidou, A., Bærøe, K., Berger, Z., & Caruso Brown, A. E. (2021). The need for empathetic healthcare systems. *Journal of Medical Ethics*, 47(12), e27–e27. <https://doi.org/10.1136/medethics-2019-105921>
- Kerr, A. M., Biechler, M., Kachmar, U., Palocko, B., & Shaub, T. (2020). Confessions of a Reluctant Caregiver Palliative Educational Program: Using Readers' Theater to Teach End-of-Life Communication in Undergraduate Medical Education. *Health Communication*, 35(2), 192–200. <https://doi.org/10.1080/10410236.2018.1550471>
- Kourkouta, L., & Papathanasiou, I. (2014). Communication in Nursing Practice. *Materia Socio Medica*, 26(1), 65. <https://doi.org/10.5455/msm.2014.26.65-67>
- Lamri, J., & Lubart, T. (2023). Reconciling Hard Skills and Soft Skills in a Common Framework: The Generic Skills Component Approach. *Journal of Intelligence*, 11(6), 107. <https://doi.org/10.3390/jintelligence11060107>
- Lunenburg, F. C., & Ornstein, A. (2021). *Educational administration: Concepts and practices*. Sage Publications.
- Miller, Mark. R., & Haskins, J. (2022). *Restoring trust in public health: There are no shortcuts*. <https://www.statnews.com/2022/08/29/no-shortcuts-restoring-trust-in-public-health/>
- Nasution, F., Wibowo, A., Nasution, T. M. S., & Edith, I. R. (2024). Konsep Dasar, Ruang Lingkup Psikologi Dewasa Dan Manula, Kondisi Dewasa Awal. *Jurnal Ilmu Psikologi Dan Kesehatan*, 1(3), 108–114.
- Noorikhsan, F. F., Muharry, A., Annashr, N. N., Yogaswara, D., & Nurohman, T. (2024). Penguatan dan Peningkatan Keterampilan Komunikasi Antar Pribadi Kader Kesehatan dalam Pencegahan Penyakit Tidak Menular di Desa Cipakat Kecamatan Singaparna. *Abdimas Galuh*, 6(2), 1590. <https://doi.org/10.25157/ag.v6i2.15407>
- Pang, C., Li, W., Zhou, Y., Gao, T., & Han, S. (2023). Are women more empathetic than men? Questionnaire and EEG estimations of sex/gender differences in empathic ability. *Social cognitive and affective neuroscience*, 18(1), nsad008.
- Paputungan, F. (2023). Karakteristik Perkembangan Masa Dewasa Awal. *Journal of Education and Culture (JEaC)*, 3(1).
- Purwanta, P., Sadewa, D. M. A., Sahrinanda, D., Rizky, I., Muthoharoh, I. M., & Yunistyaningrum, V. (2023). Enabling the Grass Root: Health Cadres Empowerment Program in Efforts to Prevent and Manage Hypertension in the Tanjung Sub-Village Community. *Jurnal Pengabdian Kepada Masyarakat (Indonesian Journal of Community Engagement)*, 9(3), 181. <https://doi.org/10.22146/jpkm.86250>
- Roebbers, C. M., Röthlisberger, M., Neuenschwander, R., Cimeli, P., Michel, E., & Jäger, K. (2014). The relation between cognitive and motor performance and their relevance for children's transition to school: A latent variable approach. *Human Movement Science*, 33, 284–297. <https://doi.org/10.1016/j.humov.2013.08.011>
- Rohmani, N., & Utari, D. (2020). Pemberdayaan Masyarakat melalui Pelatihan Komunikasi Efektif bagi Kader Posyandu. *Jurnal Pengabdian Pada Masyarakat*, 5(1), 167–174. <https://doi.org/10.30653/002.202051.271>

- Rosalia, N., Pratiwi, M. R., & Nuraliya, F. (2020). Pengembangan Kemampuan Komunikasi Keluarga untuk Kader Jppa Kelurahan Sadeng Dalam Mewujudkan Kota Layak Anak. *Jurnal Pemberdayaan Masyarakat Universitas Al Azhar Indonesia*, 2(2), 38. <https://doi.org/10.36722/jpm.v2i2.368>
- Saliasi, E., Geerligs, L., Dalenberg, J. R., Lorist, M. M., & Maurits, N. M. (2015). Differences in cognitive aging: typology based on a community structure detection approach. *Frontiers in Aging Neuroscience*, 7. <https://doi.org/10.3389/fnagi.2015.00035>
- Shane, P. M. (2011). Empowering the Collaborative Citizen in the Administrative State: A Case Study of the Federal Communications Commission. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.1759439>
- Soliman, A., De Sanctis, V., Alaraj, N., Ahmed, S., Alyafei, F., Hamed, N., & Soliman, N. (2021). Early and long-term consequences of nutritional stunting: From childhood to adulthood. *Acta Biomedica*, 92(1). <https://doi.org/10.23750/abm.v92i1.11346>
- Tim Percepatan Penurunan Stunting - Setwapres. (2024). *Strategi Nasional Percepatan Pencegahan dan Penurunan Stunting 2025-2029*. Sekretariat Wakil Presiden Republik Indonesia.
- Turistiati, A. T., Nurchandriani, P. S., Putri, R., & Nurkhalida, E. (2021). Pelatihan Komunikasi Asertif Bagi Kader ASI Hebat Jejaring Kesehatan Purwokerto Utara. *Jurdimas (Jurnal Pengabdian Kepada Masyarakat) Royal*, 4(1), 51–58. <https://doi.org/10.33330/jurdimas.v4i1.944>
- Waisbord, S. (2019). *Communication: A post-discipline*. John Wiley & Sons.