

## **IMPLEMENTATION OF THE INTEGRATED SERVICE POST PROGRAM YOUTH (ADOLESCENT POYANDU) IN BAROS VILLAGE, SUKABUMI CITY**

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### **Abstract**

This study examines the Implementation of the Integrated Service Post Program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. This study aims to determine the Implementation of the Integrated Service Post Program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. The research method used is qualitative with a descriptive approach, and data collection techniques in the form of observation, interviews, and documentation. The stages of data analysis are carried out through data reduction, data presentation, and drawing conclusions. The results of the study were measured using 4 indicators based on the theory of Edward III (1980:10) which include communication, resources, disposition, and bureaucratic structure. The results of the study indicate that the Implementation of the Integrated Service Post Program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City has not been running optimally. Limited resources, both in terms of funds, facilities, and cadre personnel are the main obstacles. This program also shows good adaptation through various parties, although it still needs to be improved in several aspects such as the provision of adequate facilities and infrastructure and youth participation that needs to be increased so that adolescent health services can run effectively.

**Keywords:** Policy Implementation, Adolescent Health, Adolescent Integrated Health Post

### **INTRODUCTION**

The primary foundation for living a healthy life is health physically, mentally, emotionally, socially, spiritually, and environmentally that enables everyone to live productively and happily. Health is a human right that must be safeguarded and protected by the government and society, emphasizing the importance of health as a human right to achieve optimal public health.

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Health Law Number 36 of 2009 states that the government is responsible for providing access to information, education, and health care facilities to improve and maintain the highest possible level of health. The government also encourages active community participation in all forms of health efforts, as health is not solely the responsibility of the government, but a shared responsibility of the government and the community, including the private sector.

The Strategic Plan for 2015 to 2019, which was established through the Decree of the Minister of Health of the Republic of Indonesia Number HK.02.02/Menkes/52/1015, stated that one of the references for the direction of the Ministry of Health's Policy is the implementation of an integrated and sustainable health service approach to all stages of the human life cycle. In this case, it means that health services must be carried out throughout the human cycle, from when still in the womb, until birth and becoming a baby, growing into a toddler, school-age child, teenager, young adult (productive age), and finally into the elderly.

One form of community-based public health efforts is the Integrated Health Planned Service Post. According to the Indonesian Ministry of Health (2013), Posyandu is a form of Community-Based Health Effort that is managed and organized from, by, for and with the community in the implementation of health development to empower the community and provide convenience to the community in obtaining basic health services to accelerate the reduction of maternal and infant mortality rates.

According to data from the Ministry of Home Affairs (2022), the number of integrated service posts (Posyandu) in Indonesia reached 213,670 units in 2022. These units are spread across 34 provinces. By region, the largest number of Posyandus is in East Java, with 46,890 units. This is followed by West Java with 42,349 units. Central Java recorded 37,705 Posyandu units. This demonstrates the strategic and crucial role of Posyandu in supporting public health services at the village or sub-district level, including health services for adolescents.

According to the World Health Organization (WHO, 2022), adolescence is the phase between childhood and adulthood, spanning the ages of 10 to 19, known as puberty. Adolescence is a period of rapid growth, with physical, psychological, and social changes occurring. Adolescence is a potentially vulnerable stage of psychological development, known as the search for identity. During this phase, individuals are no longer children, but they are not yet adults either.

Minister of Health Regulation Number 25 of 2014 states that adolescent health services are provided through School Health Units and Youth Health Services. The Youth Health Care Program is one of the health service programs implemented in community health centers to address adolescent health issues. However, the Youth Health Care Program still faces challenges in terms of service coverage, especially for adolescents who are not in school or have limited access to health facilities. Therefore, community-based services such as the Youth Integrated Health Post (Adolescent

Posyandu) are needed, which can reach all levels of adolescents regardless of educational status.

The Youth Integrated Health Post (Adolescent Posyandu) is a development of the independent Posyandu (Integrated Health Post) focused on adolescent health services. This program aims to enhance the role of adolescents in health services, improve healthy living skills, and raise awareness of the importance of physical and mental health. In addition to providing direct benefits to adolescents, the the Integrated Service Post Youth also plays a crucial role in helping families and communities develop healthy lifestyles for the younger generation.

The Sukabumi City Government, through the Sukabumi City Regional Development Planning Agency , has established 461 Youth Integrated Health Posts as part of a strategy to reduce the number of early marriages in the city. The Head of the Sukabumi City Regional Development Planning Agency stated that early marriage is a serious problem facing adolescents. Therefore, the Integrated Service Post Youth are expected to be an effective educational platform for protecting and fulfilling children's rights.

The Sukabumi City Government fully supports the development of the Youth Posyandu, because this posyandu is very necessary in promotive and preventive efforts to the community. With various supports from the Sukabumi City Government, it is hoped that Posyandu services to the community in Sukabumi City can be of higher quality and able to provide an alternative as a front guard, to provide basic public health services in order to achieve an independent and multifunctional Posyandu towards a happy Sukabumi City physically and mentally. The number of cadres in Sukabumi City currently reaches 4,487 people, meaning there is an increase of 31.54% compared to 2023 which had 3,121 people, because in 2024 there are many new cadres, especially Youth Posyandu cadres (KDP Sukabumi City, 2024).

The implementation of the Youth Posyandu (Integrated Health Post) in Baros District is a community-based health program managed under the coordination of the Baros Community Health Center. This program is spread across four strategic sub-districts: Baros, Jayaraksa, Jayamekar, and Sudajaya Hilir, with the aim of providing comprehensive health services specifically for adolescents aged 10-19 years. This program also integrates creative and educational activities that are interesting for adolescents, so as to increase their participation and awareness of the importance of maintaining health from an early age. With full support from the Baros Community Health Center and community participation in the four sub-districts.

There are 24 adolescent Posyandu (integrated health service posts) in Baros Village and 12 newly established ones. Some of these Posyandu have been operating for several years, while others have only been operating since 2023 (PKK Baros Village). The implementation of Posyandu Remaja has been carried out in several villages, including Baros Village. Baros Village is the center of Baros District and is the location of the Baros

Community Health Center as the main coordination point. This provides easier access for coordination with the community health center and allows for more integrated research into the district's health service system.

With 12 adolescent Posyandu (Integrated Health Post) units and 86 adolescent Posyandu cadres, Baros Village has a significant and representative number for research. However, based on initial observations, several problems were found in the implementation of the Adolescent Posyandu in Baros Village, Sukabumi City, such as limited resources in terms of funds, facilities and infrastructure, and the number of cadres. Inadequate Posyandu facilities and limited operational funds are the main obstacles. In addition, adolescent participation in Adolescent Posyandu activities is still low, especially among adolescents who are not in school or who are already working.

Based on these issues, this research is crucial to examine the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. This research also aims to identify inhibiting and supporting factors in the implementation of the Posyandu Remaja program, thus providing information for future evaluation and improvement.

## **RESEARCH METHOD**

This study uses a qualitative descriptive research method. According to Cresswell (2016:4), a qualitative descriptive research method is an approach that aims to explore and understand the importance of a number of individuals or groups of people who are considered to originate from social or humanitarian problems. The qualitative research process involves important efforts, namely asking questions and procedures, collecting specific data from participants, analyzing data inductively, specific themes to general themes to interpret the meaning of the data.

According to Sugiyono (2022:104), data collection techniques are the most strategic step in research, as the primary goal is to collect data. Without understanding data collection techniques, researchers will not obtain data that meets established data standards. Therefore, the data collection techniques used in this study include observation, interviews, and documentation.

In determining the informants, the researcher used the Purposive Sampling technique. According to Sugiyono (2022:95-96), purposive sampling is a technique for sampling data sources with certain considerations, which are considered capable of explaining and having direct knowledge and understanding of the situation that occurs. From this, the researcher selected 6 informants who were considered knowledgeable in this research problem, namely; the Head of Baros Village, the Head of Baros Health Center, Baros Health Center Officers, Adolescent Posyandu Cadres, Adolescent Posyandu Participants, and the Baros Village Community.

Furthermore, in this research method, the process required for data collection, processing, and analysis is data validation. According to Sugiyono (2022:181), validation

is the degree of accuracy between the data reported by the researcher and the actual data found on the research object. The data validation used in this study is triangulation, defined as a method of checking data from various sources in various ways and at various times.

Triangulation in validation according to Sugiyono is divided into three, namely, first, triangulation of data sources to test the credibility of the data is done by checking the data obtained through various sources including in the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, then the data collection obtained by the researcher will be described, categorized, which is more specific from various related parties regarding the youth posyandu program and data that has been analyzed by the researcher and produces conclusions then agreed upon with the related parties.

The second technique is triangulation, a data collection technique used to test data credibility by cross-checking data with the same source using different techniques. In this study, triangulation techniques were obtained from in-depth interviews conducted with six data sources believed by the researcher to be informants. The results of the interviews and observations, conducted using specific methods or techniques, were then tested for accuracy and inaccuracy.

Finally, triangulation of data collection time. Data collected using the interview technique in the morning when the informant is still fresh and has not faced many problems will provide valid data and therefore more credible (Sugiyono, 2022:191). Judging from the three triangulations above, the researcher only used two: triangulation of data sources and triangulation of data collection techniques. This is because, when using the triangulation technique of data collection time, the researcher needs to consider the time of day when collecting data, whether in the morning, afternoon, or evening.

The data analysis stages in the research on the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City used the Miles and Huberman (2014:16-19) model analysis technique, which includes three main stages: the first stage, data reduction, which is carried out to simplify the data obtained according to the research focus. The second stage, data presentation, which is carried out in the form of descriptive narratives to facilitate understanding of the research results. The final stage is drawing conclusions as an interpretation of all the analyzed data.

## **RESULTS AND DISCUSSION**

This research was conducted in Baros Village, Sukabumi City on Jl. Garuda No. 4, Baros, Baros District, Sukabumi City, West Java 43161. The focus of this research is on the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. Furthermore, there are several research locations related to this research, namely, public health service center in Baros,

Sukabumi City located on Jl. Baros No. 250 Km. 5, Baros, Sukabumi City, West Java 43161, and the implementation of adolescent posyandu which is carried out in several places in Baros Village, Sukabumi City. The location selection was carried out carefully, by considering several important aspects such as the existence of interesting phenomena to be studied, data availability, time efficiency, and cost and energy limitations.

Based on these considerations, the researcher chose Baros Village, Sukabumi City, and the community health service center in Baros, Sukabumi City, as the research location. After determining the research location, the next step was to obtain a research permit to conduct initial observations to obtain data relevant to the problem phenomenon. The researcher had to apply for a permit and conduct initial observations in Baros Village, Sukabumi City, and the public health service center in Baros, Sukabumi City, as well as direct field observations to ensure that the research focus and title were in accordance with actual conditions in the field. During the observation process, the researcher recorded situations and conditions relevant to the research theme. In this study, the researcher used a qualitative method with a descriptive approach to provide a more specific, in-depth, and comprehensive picture of actual field conditions.

After identifying the problem and location that will be used as the research site, the researcher attempted to prepare various assumptions starting from a theoretical review to be more focused and study a number of references, including legislation and other library sources, as material for conducting an analysis of the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. At the implementation stage in the field, the researcher conducted direct observations and began the interview process with informants. Before the interview was conducted, the researcher had prepared an interview guide as a reference in data collection. The interview technique used was semi-structured with an open approach.

The selection of informants in this study was carried out using the snowball sampling technique, namely a technique for determining information in stages based on recommendations from previous informants, who are considered to understand and have important information related to the focus of the study. The first informant interviewed by the researcher was the Head of Baros Village, Sukabumi City. After obtaining initial data from the informant, the researcher continued the interview process with the next recommended informants. In the next activity, the researcher will conduct direct observations and conduct interviews with the Head of the Baros Community Health Center, Baros Community Health Center Officers in Sukabumi City who are directly involved in the adolescent posyandu program, and with the Adolescent Posyandu Cadres, Adolescent Posyandu Participants, and the Baros Community of Sukabumi City.

The results of the initial observations conducted by the researcher that the the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, the researcher found that the Youth Posyandu Program

in Baros Village, Sukabumi City has limited resources that are in accordance with the standards of adolescent health services, both in terms of quality and quantity and lack of awareness about the importance of routine health checks, many adolescents are reluctant to come to the posyandu because they are not interested. Based on the results of the observation, the researcher is interested in knowing how the the implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. To find out this, the researcher uses the theory put forward by Edward III (1980:10) which has 4 dimensions, namely, communication, resources, disposition, and bureaucratic structure.

**Communication in the Implementation of the Youth Posyandu Program**

Based on the results of interviews with 6 (six) informants, communication from the Sukabumi City Government to implementers in the field takes place in a top-down manner through social media, RT or RW meetings, announcements in mosques, and visits to people's homes. The implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City shows that effective communication is one of the key factors in the success of the program. Adaptive and comprehensive communication strategies, supported by a structured coordination system and the implementation of regular monitoring and evaluation, are important elements that support the effectiveness of the program. Although there are still challenges, such as limited facilities and infrastructure and coordination between agencies that is not yet fully optimal, the overall communication process in the implementation of this program has run well and contributed positively to the achievement of program objectives.

**Resources in the Implementation of the Youth Posyandu Program**

The implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, still faces challenges related to limited resources, both in terms of human resources, infrastructure, and funding. In general, the number of Youth Posyandu cadres is sufficient, and they have received training from the Health Office and support from the Main Posyandu. Although the cadres' competence is considered quite good, there are still obstacles in gathering active participation from teenagers. In terms of facilities and infrastructure, the implementation of the Youth Posyandu is still highly dependent on facilities owned by the Main Posyandu. Special equipment for youth activities, including tools and administrative needs, is not yet fully available, thus limiting the effectiveness of the service. Meanwhile, in terms of budget, Youth Posyandu activities are still largely dependent on funds from the Main Posyandu, local government, and the community. However, the available funds are not yet fully sufficient to support the implementation of a sustainable and innovative program.

Table 1. Data on Youth Posyandu in the Baros Subdistrict work area  
Sukabumi City

No	Youth Integrated Health Post	Number of Cadres
1	Posyandu Delima 02A	8 people
2	Posyandu Delima 02B	6 people
3	Posyandu Delima 03	10 people
4	Posyandu Delima 04	8 people
5	Posyandu Delima 06	7 people
6	Posyandu Delima 07A	5 people
7	Posyandu Delima 08A	9 people
8	Posyandu Delima 10	7 people
9	Posyandu Delima 11	7 people
10	Posyandu Delima 12	9 people
11	Posyandu Delima 13	5 people
12	Posyandu Delima 14	5 people
<b>Amount</b>		<b>86 people</b>

Source:  
Baros

Subdistrict, Sukabumi City

### **Disposition (attitude and commitmen of implementers) in the Youth Posyandu Program**

Positioning refers to the attitudes, commitment, and active role of policy implementers, particularly adolescent Posyandu cadres, in carrying out their duties and responsibilities. Overall, the attitudes of adolescent Posyandu cadres in Baros Village demonstrate enthusiasm, concern, and openness in providing services to adolescents. They strive to create a friendly, educational, and comfortable atmosphere so that participants feel involved and derive tangible benefits from each activity. This is also supported by the main Posyandu, coordination with village officials, and cross-sector collaboration, such as with youth organizations and the Community Health Center.

The suboptimal cadre development process, due to the majority of cadres still being students, risks creating a shortage of cadres in the future. In terms of community support, the Youth Posyandu program has received a positive and enthusiastic response. The community, especially parents and village officials, believes the program is beneficial in fostering character, raising awareness of healthy living, and providing a health education space tailored to the needs of adolescents. Program supervision and control are carried out through the active roles of the Family Welfare Movement Team, the village, and the Community Health Center, which conduct regular monitoring, receive routine reports from cadres, and provide technical assistance as needed. The Puskesmas' role is more focused on the technical aspects of health services, while the village holds control over the management and sustainability of the program.

### **Bureaucratic Structure in the Youth Posyandu Program**



The bureaucratic structure and coordination pattern of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, have been formally established but still require strengthening to achieve optimal effectiveness. The simple yet functional organizational structure consists of a chairperson, secretary, treasurer, and cadres who still rely on the Main Posyandu, especially in the preparation of Standard Operating Procedures (SOPs) and activity implementation. The division of authority between the Community Health Center, the Village, the Neighborhood Association (RT/RW), and cadres has been structured. Cross-sectoral coordination is already underway, but its intensity and substance need to be increased to be more responsive to the needs of adolescents. The Standard Operating Procedures (SOPs) used are still adapted from those of the Main Posyandu and are not fully aligned with the characteristics of adolescent services. Supervision has been carried out, but has not been comprehensive and intensive, so that substantial aspects of the service remain underdeveloped.

#### **Factors Inhibiting the Implementation of the Adolescent Posyandu Program**

Furthermore, the inhibiting factors in the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City are, limited facilities and infrastructure that are not yet available independently so that the implementation of this youth posyandu activity still depends on the completion of the main posyandu, inadequate budget sources to support all youth posyandu activities, low participation of youth in posyandu activities and lack of awareness of the importance of regular health checks, regeneration of cadres who are mostly still in school or college which causes limited time and consistency in youth Posyandu activities and several Youth Posyandu in Baros Village become Vacuum because there are no active cadres, Standard Operating Procedures (SOP) which still refer to the SOP of the Main Posyandu which has not been adjusted to the specific needs of youth, therefore it is necessary to compile a more specific and applicable SOP for the Youth Posyandu Program.

#### **Supporting Factors for the Implementation of the Adolescent Posyandu Program**

Thus, despite the inhibiting factors in the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, it does not rule out the possibility that this Posyandu Remaja Program has supporting factors, namely first, there is clear, systematic, and hierarchical communication from the city government to cadres in the field (top-down). Socialization of Posyandu Remaja activities is carried out through various media and forums such as RT/RW meetings, social media, announcements in mosques, and visits to each community home. Second, routine coaching from the health center as a two-way communication forum that strengthens coordination between implementers, as well as monitoring and evaluation carried out periodically by the Health Office. Third, the involvement and commitment of cadres demonstrate a friendly, open and empathetic attitude towards adolescent participants. Cadres are always actively coordinating with the Village, Main Posyandu, and community

leaders. Fourth, the community health service center, Village, Posyandu Cadres, and the Community fully support the Adolescent Posyandu program because they see its benefits for adolescent health and character. Fifth, the organizational structure of the Youth Posyandu (Integrated Health Post) has been established, although simple but functional. Finally, Youth Posyandu cadres in Baros Village received training from the Health and Family Welfare Development Office, covering topics on youth services, communication, and activity procedures. Furthermore, the concept of Cadre Strata, or tiered training, supports capacity building for cadres.

### **Analysis/Discussion**

The implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City in this study was analyzed using the policy implementation theory according to Edward III (1980), which includes 4 (four) variables, namely, communication, resources, disposition, and bureaucratic structure. The results of the analysis were interpreted based on field data, documentation, interviews, and direct observations of researchers. Communication is one of the important aspects in the successful implementation of public policies. Based on the results of field research, communication from the local government through the Sukabumi City Health Office and the Baros Community Health Center to the youth Posyandu cadres has been running well.

However, there are gaps in communication to the primary target group, adolescents. Information regarding the benefits and objectives of adolescent integrated health service posts activities has not been effectively conveyed to adolescents in Baros sub-district. Therefore, this finding reinforces Edward III's (1980) theory that communication must be comprehensive, both vertical and horizontal. While vertical communication from policymakers to implementers is well-established, horizontal communication to program targets remains weak. This results in low adolescent participation, which is an indicator of suboptimal policy implementation.

The resources referred to in Edward III's (1980) theory include human resources, funding, infrastructure, and information. Regarding human resources, the majority of cadres are still students, limiting their time to carry out activities. Consequently, the risk of a vacancy in the future is quite high due to suboptimal regeneration. In terms of infrastructure, which is still dependent on the main Posyandu facility, this condition directly impacts the quality of services provided to adolescents. Furthermore, funding for the adolescent Posyandu program in Baros sub-district is insufficient to support ongoing and innovative activities, so cadres experience difficulties in developing the program. Therefore, without adequate resource support, policies cannot be implemented effectively. This is clearly reflected in the conditions in Baros sub-district, where limited resources limit the cadres' room to implement the program optimally.

Disposition refers to the attitudes, commitment, and motivation of policy implementers. Interviews indicate that the cadres exhibit a high level of commitment and concern. Cadres demonstrate a friendly, open, and empathetic attitude toward adolescent Posyandu participants. They strive to build communication with adolescents by involving parents, the sub-district office, and the community health center. The implementers' positive attitude aligns with Edward III's (1980) notion of the importance of implementer disposition to policy success. However, a positive attitude is insufficient without understanding the cadres' capacities through training and the development of specific standard operating procedures, which are urgently needed.

The bureaucratic structure for implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, has been formally established, with a division of roles between the Baros Community Health Center, the Baros Village, Posyandu cadres, and support from the Family Welfare Movement and Youth Organizations (Karang Taruna). However, the standard operating procedures used are inadequate. Cross-sector coordination has indeed been implemented, but its frequency and quality need to be improved to be more responsive to field dynamics. Routine monitoring and evaluation by the Baros Community Health Center and the Sukabumi City Health Office have not fully addressed the substantive aspects of health services. Therefore, integrated strategic efforts are needed so that the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City can provide quality and sustainable adolescent health services in the future. The implementation of this policy will be successful if the local government, Puskesmas, cadres, and the community collaborate actively and effectively.

Based on the overall interpretation of the research results, communication factors, resources, disposition, and bureaucratic structure have generally been optimally formed. The Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City faces a duality of conditions, on the one hand there is a commitment to implementation and support from health institutions, but on the other hand there are systemic obstacles including limited resources, non-specific Standard Operating Procedures, and communication strategies that have not effectively targeted adolescents. Within this theoretical framework, the implementation of this condition policy indicates that implementation at the field level is still partial and adaptive, not strategic and systematic. The lack of integrity of structural aspects such as regulations, standard operating procedures, and funding as well as cultural aspects such as adolescent motivation, and the role of the family hinders the conversion of objectives into tangible results in the field.

Therefore, active collaboration between local governments, community health centers, cadres, and the community is key to successful implementation going forward. Local governments need to take strategic steps by establishing technical regulations, allocating a dedicated budget, and developing a youth health service management

system that is oriented towards the needs of the target population. Furthermore, increasing the capacity of cadres and strengthening youth participation through communication innovations is also essential. Thus, the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City, is expected to develop into a professional, inclusive, and sustainable community health service for youth.

## CONCLUSION

This study concludes that the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City has not been running optimally. Based on Edward III's theory (1980), which includes 4 (four) variables, namely, communication, resources, disposition, and bureaucratic structure, still faces various obstacles. Communication from the government to cadres has been systematic, but has not been effective in reaching adolescents as the main target of the program. Limited resources in the form of infrastructure, funds are the main obstacles in the Implementation of the Integrated Service Post program Youth (Adolescent Posyandu) in Baros Village, Sukabumi City. Although cadres show good disposition and high commitment, they still lack specific understanding regarding adolescent health services. The bureaucratic structure has been formed, but is not supported by specific and applicable standard operating procedures.

Scientifically, the results of this study strengthen Edward III's (1980) theory of policy implementation in the context of community-based public health services. This research also enriches the literature related to adolescent health services at the local level, particularly through the approach of adolescent integrated health posts, which has not been widely studied. In practice, the results of this study can be used as a basis for evaluating and improving adolescent health service policies in the region, particularly related to the development of specific standard operating procedures for adolescent Posyandu, increasing the capacity of cadres, providing independent supporting facilities, and strengthening youth-friendly communication strategies. With appropriate development, adolescent Poyandu can be a strategic solution to improve adolescent health effectively and inclusively.

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