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The role of health cadres in improving maternal adherence to basic immunization among children aged 0-24 months

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Abstract

Background: Basic immunization is an important preventive intervention for protecting children against vaccine-preventable diseases. However, maternal adherence to recommended immunization schedules remains a challenge in some communities. The working area of Kasihan II Public Health Center has shown uneven immunization coverage across villages, indicating the need for community-based strategies to strengthen maternal adherence.

Purpose: This study aimed to explore the role of health cadres in improving maternal adherence to basic immunization and to identify barriers encountered by mothers in completing their children's immunization schedules.

Method: This study used a descriptive qualitative design conducted in the working area of Kasihan II Public Health Center, Bantul, from January 9 to 13, 2026. Informants were selected purposively and consisted of four health cadres, four mothers of children under five, and one immunization coordinator midwife. Data were collected through semi-structured interviews, observations, and documentation and were analyzed thematically.

Results: Three main roles of health cadres were identified: motivators, educators, and facilitators. Cadres motivated mothers by providing reassurance regarding mild post-immunization reactions, educated mothers about immunization benefits, schedules, and possible side effects, and facilitated access through WhatsApp reminders and home visits. However, barriers remained, including fear of side effects, limited maternal time due to work and household responsibilities, misinformation and personal beliefs, and limited availability of health personnel to accompany cadres during community-based services.

Conclusion: Health cadres play an important role in supporting maternal adherence to basic immunization through motivation, education, and facilitation. Strengthening cadre communication skills, improving access to immunization services, and increasing collaboration between cadres and health workers are needed to address maternal concerns and improve timely immunization.

Keywords: Basic Immunization; Cadre Role; Maternal Adherence; Toddlers Aged 0-24 Months.

INTRODUCTION

Immunization is one of the most important and effective public health programs for preventing infectious diseases and reducing morbidity, disability, and mortality among children. This program aims to develop immunity against vaccine-preventable diseases (VPDs), such as measles, diphtheria, tetanus, and polio. However, the success of immunization programs largely depends on maternal adherence to bringing their children to receive complete immunization according to the recommended schedule (Arpen & Afras, 2023).

Maternal non-adherence to immunization can have serious consequences for child and community health. Children who do not receive complete immunization are at greater risk of contracting infectious diseases and transmitting them to other children. Consequently, outbreaks of diseases such as measles and diphtheria may still occur. This condition indicates that immunization adherence is not only an individual responsibility but also an important public health issue (Fata et al., 2025).

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According to data from the World Health Organization (WHO, 2025), approximately 20 million children worldwide do not receive complete immunization each year, resulting in more than 1.5 million deaths from diseases that could otherwise be prevented through immunization. The 2023 Indonesia Health Profile reported that complete basic immunization coverage had reached only 87%, which remained below the minimum target of 95% recommended by the World Health Organization (WHO) to establish community immunity (herd immunity). This condition indicates that gaps remain in the implementation of immunization programs, particularly at the community level (Ministry of Health of the Republic of Indonesia, 2024).

In 2023, Bantul Regency administratively achieved Universal Child Immunization (UCI) Village status, defined as a village or urban village in which at least 95% of infants aged 0–11 months have received complete basic immunization. The Bantul Regency Health Office reported that all 75 villages had achieved UCI Village status, with complete basic immunization coverage of 97.13%. However, data from the working area of Kasihan II Public Health Center indicate that complete basic immunization coverage was not evenly distributed, and some villages had not yet achieved the 95% target. This condition suggests that aggregate UCI status does not fully reflect individual maternal adherence to immunization (Bantul Regency Health Office, 2023).

The Indonesian government consistently places complete basic immunization as a priority in national health policy. This is reflected in various regulations, including Regulation of the Minister of Home Affairs of the Republic of Indonesia Number 19 of 2011 concerning Integrated Service Posts, which emphasizes the function of Integrated Service Posts as a community-based basic health service facility, particularly for providing basic immunization services to infants and children under five. This policy strengthens the role of community-based health services in supporting the success of immunization programs (Kultsum et al., 2025). In addition to regulations, the government has developed several strategic programs, such as the National Child Immunization Month (BIAN) and Complete Routine Immunization (IRL), which are specifically aimed at increasing complete basic immunization coverage. Nevertheless, the success of these programs depends not only on the availability of health services

but also on active community participation, particularly that of health cadres, who serve as a link between health workers and mothers of children under five (Khaeriah, 2024). Community awareness of the importance of immunization remains varied. Some community members have a high level of awareness of the importance of completing their children's immunizations, whereas others remain hesitant or even refuse immunization due to misinformation, personal beliefs, or limited understanding (Triana, 2025).

Health cadres play an important role as community mobilizers and motivators. Their responsibilities include providing education, reminding mothers of immunization schedules, and accompanying mothers during Posyandu services. Activities conducted by cadres, such as health education, home visits, and immunization assistance, can improve maternal knowledge and awareness. Therefore, the involvement of health cadres can significantly influence maternal adherence to providing immunization to their children (Lubis, 2025).

RESEARCH METHOD

This study used a descriptive qualitative design to explore the experiences, roles, and strategies of health cadres in supporting maternal adherence to basic immunization. The study was conducted in the working area of Kasihan II Public Health Center, Bantul, from January 9 to 13, 2026.

The study participants consisted of health cadres, mothers of children under five, and an immunization coordinator midwife. Informants were selected using purposive sampling based on their involvement in childhood immunization services. The key informants consisted of four health cadres and four mothers of children under five, while the supporting informant was one immunization coordinator midwife.

Primary data were collected through semi-structured in-depth interviews and observations. Secondary data were obtained from relevant immunization reports and documents from the public health center. Interviews explored the roles of cadres, maternal experiences with immunization, communication strategies used by cadres, access to immunization services, and barriers to completing immunization schedules.

The interviews were documented and analyzed using thematic analysis. The analysis involved organizing the interview data, identifying meaningful

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statements, coding the data, grouping similar codes, and developing themes representing the main findings. Data from cadres, mothers, and the

immunization coordinator midwife were compared to strengthen the interpretation of the findings.

RESEARCH RESULTS

Table 1. Research Informants

Informant	Code
Health Cadres	KI-K4
Mothers of Children Under Five	IB1-IB4
Public Health Center Midwife	IB1-IB4

Based on the table above, the informants involved in this study consisted of key informants, comprising four health cadres and four mothers of children under five, as well as one supporting informant, namely the immunization coordinator midwife.

Table 2. Research Themes

Theme	Theme Description (Summary of Findings)
The Role of Cadres as Motivators	Cadres played an important role in motivating mothers of children under five to continue immunization despite concerns about side effects. Through a persuasive approach and emotional support, mothers felt more confident and less hesitant to continue immunization. All four mothers of children under five reported feeling more reassured after receiving explanations from the cadres.
The Role of Cadres as Educators	Cadres successfully provided comprehensive education about immunization, including its benefits, schedules, and types. Education was provided regularly through Posyandu, home visits, and digital media such as WhatsApp. All mothers of children under five (IB1-IB4) reported that they had a better understanding of immunization and felt more prepared to bring their children for immunization after receiving explanations from the cadres.
The Role of Cadres as Facilitators	Cadres served as a link between mothers and health facilities, facilitating access to immunization services through WhatsApp reminders and home visits for mothers who had difficulty attending Posyandu. All four mothers of children under five (IB1-IB4) reported that they benefited from the cadres' role in ensuring that their children received immunization despite being busy or unable to attend Integrated Service Post.
The Role of Cadres as Facilitators	Cadres served as a link between mothers and health facilities, facilitating access to immunization services through

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Barriers Faced by Mothers

WhatsApp reminders and home visits for mothers who had difficulty attending Posyandu. All four mothers of children under five (IB1-IB4) reported that they benefited from the cadres' role in ensuring that their children received immunization despite being busy or unable to attend Integrated Service Post.

The main barriers faced by mothers were concerns about immunization side effects, such as fever, as well as time constraints due to work or other factors that prevented them from attending Posyandu. All mothers of children under five (IB1-IB4) reported that they often felt hesitant or were unable to bring their children to Integrated Service Post for these reasons.

DISCUSSION

Based on interviews with informants, it was found that health cadres actively played a role as motivators in efforts to improve mothers' compliance with basic immunization for children under five. This role was demonstrated through routine education and emotional support for mothers. Cadres attempted to reassure mothers not to be afraid to continue immunization despite the occurrence of mild side effects.

"We always tell mothers not to be afraid if their children develop a fever after immunization because it is a normal reaction and will resolve on its own. We also routinely remind them through WhatsApp, and if someone cannot attend, we conduct home visits to ensure that the child still receives immunization. In addition, we try to reassure mothers, especially those bringing their children for immunization for the first time, and provide further explanations so that they feel confident that immunization is very important for their children's health." (K)

"I felt calmer after the cadre explained the mild side effects to me." (IB)

"We always accompany mothers who are worried, especially at the Integrated Health Service Post, by providing clear information." (BP)

The findings of this study indicate that health cadres play a crucial role as motivators in improving mothers' compliance with basic immunization for children under five. This role is implemented through two main approaches: routine education and intensive emotional support. Cadres actively address these barriers through persuasive communication,

both directly at the Integrated Health Service Post, during home visits, and through digital media such as WhatsApp.

Consistent with these findings, the success of cadres as motivators largely depends on their ability to reduce mothers' concerns, particularly those related to immunization side effects. Some mothers remain anxious even after receiving clear explanations regarding temporary side effects. This is often influenced by mothers' previous personal experiences or misinformation circulating within the community.

Previous research has shown that the role of cadres in providing reassuring motivation has a significant impact on improving mothers' compliance with immunization (Safriana et al., 2024). Although the approaches implemented by cadres have been effective, some mothers remain hesitant to continue immunization because of concerns about side effects that they perceive as dangerous (Sriatmi & Kusumastuti, 2019). One of the major barriers is mothers' limited understanding of the importance of immunization, which is often caused by limited or inadequate information. Cadres also play an important role in ensuring that mothers continue to attend the Integrated Health Service Post despite difficulties in attending due to work or other factors (Muathe et al., 2020). Family support, particularly from husbands, is also an important factor in strengthening mothers' decisions to follow the immunization schedule on time (Bakkabulindi et al., 2023).

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The role of cadres as educators can be seen in their efforts to provide mothers with an understanding of the importance of complete basic immunization for children under five. The education provided is not limited to immunization schedules but also includes the benefits of immunization, types of immunization, and the risks associated with incomplete immunization. Cadres attempt to deliver information using simple language so that it can be easily understood by mothers. Education is usually provided during activities at the Integrated Health Service Post, home visits, and through communication media such as WhatsApp. In addition, cadres prepare leaflets containing important information about immunization that mothers can take home. These leaflets serve as reminders for mothers not to miss the next immunization schedule and to understand the benefits and importance of immunization. This is reflected in the following statements from informants:

"At the Integrated Health Service Post, we explain everything one by one, including which immunization is given that day, its purpose, and when the next schedule is. We also provide leaflets as a guide so that mothers can read them again at home." (K)

"I came to understand that immunization is important after the cadres repeatedly explained it to me. Previously, I thought that if my child was healthy, it would be okay to delay immunization. The leaflet provided was also very helpful because I could take it home and read it again." (IB)

"The cadres help us explain things to mothers, so before immunization, they already understand its benefits and side effects. We also prepare leaflets to remind mothers after the Integrated Health Service Post activities." (BP)

The interview findings indicate that the role of cadres in providing education is very important for improving mothers' understanding of complete basic immunization for children under five. Cadres provide comprehensive information, ranging from the types and benefits of immunization to schedules and potential health risks if immunization is not completed. The information is delivered using language that is easy for mothers to understand, accompanied by leaflets that can be taken home for further reading. Education is provided consistently through direct interactions at the Integrated Health Service Post and home visits, as well as through digital media, allowing mothers to access information at any time. This approach has been effective in improving mothers'

understanding of the importance of immunization and reducing the possibility of miscommunication.

Consistent with these findings, the role of cadres as educators is not limited to verbal counseling but also involves the use of leaflets as educational materials containing clear and easy-to-understand information. These leaflets serve as an effective means of reminding mothers about immunization schedules, its benefits, and ways to manage possible side effects following immunization. Providing leaflets enables mothers to better understand the information received and refer back to it when necessary.

Research has shown that take-home educational materials, such as leaflets, can improve mothers' understanding and compliance with immunization programs because mothers can reread the information whenever needed (Ramanayake et al., 2025). Through the use of simple yet effective printed media, cadres can communicate more detailed information, increase mothers' awareness, and support the application of this information in daily life (Gbeminiyi & Oyeneye, 2025). This approach demonstrates that the role of cadres as educators is essential in ensuring that mothers receive accurate information that can be properly understood and accepted (Wulandari et al., 2025).

The role of Integrated Health Service Post cadres as facilitators in immunization implementation is to ensure that mothers of children under five can easily access immunization services. Cadres do not only perform administrative duties at the Integrated Health Service Post but also ensure that mothers have direct access to the health services they need, such as immunization. Cadres function as a link between mothers and health facilities, facilitating the immunization process by conducting home visits when necessary.

"We also send reminders through WhatsApp and encourage mothers who have not yet come to attend the Integrated Health Service Post so that they do not miss their immunization schedule." (K)

Support also came from mothers who felt that the cadres' role helped facilitate access to immunization services.

"The cadres are very helpful. In my opinion, they make it easier for us to obtain health services by explaining and reminding us about immunization." (IB)

"The cadres help direct mothers who have difficulty coming to the Integrated Health Service

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Post, so that health services become more equitable. Midwives also participate by accompanying mothers and their children to the community health center to receive immunization.” (BP)

The findings of this study indicate that the success of the basic immunization program for children under five is also influenced by the role of cadres as facilitators. The role of cadres as facilitators is key to ensuring accessibility to health services for all levels of the community. Cadres do not merely perform administrative duties but also actively serve as a link between mothers and health facilities. This facilitation is carried out by providing clear guidance to mothers who experience difficulties, sending reminders through digital media, and taking a proactive approach through home visits. The presence of cadres as facilitators ensures that immunization services can reach the target population equitably.

Consistent with these findings, the role of cadres as facilitators has been shown to be effective in facilitating mothers' access to immunization services. Cadres not only remind mothers about immunization schedules but also actively address geographical and time-related barriers that often prevent mothers from attending the Integrated Health Service Post. By using communication media such as WhatsApp and conducting home visits, cadres help ensure that mothers can follow immunization schedules without difficulty.

Previous research has also shown that cadre involvement in facilitating access to health services can increase service coverage, particularly in areas with limited access (Pasambo et al., 2023). In addition, this flexible approach demonstrates the importance of cadres in strengthening the relationship between communities and health facilities, creating a more supportive environment for immunization compliance (Nofia, 2025). The role of cadres in ensuring equitable and accessible health services is important for increasing community participation in community-based health programs (Hananni et al., 2024).

Integrated Health Service Post cadres play an important role in improving mothers' compliance with basic immunization for children under five. However, in carrying out their duties, cadres face various barriers that affect the effectiveness of the immunization program. These barriers originate not only from internal factors among cadres but also from the community targeted by the program. One of the

main barriers frequently encountered by cadres is mothers' low awareness of the importance of immunization and their fear of possible side effects. In addition, limited time, mothers' busy schedules, and shortages of health personnel also affect the timely implementation of immunization.

Based on interviews with informants, including cadres, mothers, and midwives, it was revealed that many mothers feel hesitant or afraid to bring their children to the Integrated Health Service Post for immunization.

“Many mothers are still hesitant to come to the Integrated Health Service Post because they are afraid that their children will develop a fever after immunization. In addition, being busy, especially for working mothers, often causes them to arrive late or not attend at all.” (K)

“Sometimes I am too busy with work and household responsibilities, so I do not have enough time to bring my child to the Integrated Health Service Post, even though I know that immunization is important. I am also worried that my child will develop a fever after immunization, so I often postpone coming.” (IB)

“At the community health center, we sometimes have difficulty accompanying cadres at every Integrated Health Service Post because of the limited number of health personnel available.” (BP)

Consistent with these findings, the barriers faced by cadres in improving mothers' compliance with immunization are associated with various factors. Mothers' low awareness of the importance of immunization often causes them to ignore or postpone immunization despite having received information from cadres. Previous research has shown that fear of side effects, such as fever, is a major factor contributing to delays in immunization (Susanti & Handoko, 2022). In addition, the busy schedules of working mothers constitute a major barrier to following the predetermined immunization schedule. Limited time to attend the Integrated Health Service Post or immunization schedules that overlap with work often prevent mothers from attending. This affects mothers' compliance with basic immunization (Rabiatunnisa et al., 2022). Limited health personnel at community health centers also reduce the effectiveness of support provided by cadres (Pawenrusi & Hatta, 2020). This limitation makes it difficult for cadres to provide further explanations or address mothers' specific concerns regarding

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immunization (Rahayu et al., 2021). A more integrated approach between cadres and health personnel, along with increased community understanding of the importance of immunization, is essential for addressing these barriers and improving mothers' compliance with immunization (Muathe et al., 2020).

CONCLUSION

Health cadres play an important role in supporting maternal adherence to basic immunization through three main functions: motivating mothers, providing education, and facilitating access to immunization services. Cadres use direct communication, WhatsApp reminders, printed educational materials, and home visits to support mothers in following immunization schedules. However, maternal fear of post-immunization reactions, competing work and household responsibilities, misinformation, personal beliefs, and limited availability of health personnel remain important barriers. Strengthening cadre communication skills, improving access to immunization services, and increasing collaboration between cadres and health workers are recommended to support timely and complete childhood immunization.

SUGGESTION

For community health centers, it is recommended to improve communication skills training for Integrated Health Service Post cadres so that they can provide more comprehensive and clear explanations regarding the benefits of immunization and potential side effects, using a more personalized approach that is sensitive to mothers' concerns. Improving the facilities and accessibility of Integrated Health Service Posts, particularly in areas located far from community health centers, is also important to ensure that mothers can easily access immunization services.

For mothers of children under five, it is recommended that they actively seek information about immunization and follow their children's immunization schedules. Mothers are also encouraged to involve family members, particularly their husbands, in immunization-related decision-making to obtain stronger support in maintaining their children's health.

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