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ABSTRAK

Sokhiyatun

Pelaksanaan Program Perencanaan Persalinan dan Pencegahan Komplikasi (P4K) Ditinjau dari Aspek Bidan Desa sebagai Pelaksana di Kabupaten Jepara Tahun 2012

Kematian ibu di kabupaten Jepara tahun 2011 sebesar 24 orang (AKI 113/100.00 Kelahiran Hidup), terutama pada periode kehamilan dan persalinan yang diakibatkan perdarahan. Program P4K sebagai terobosan untuk mengurangi kematian ibu telah dilaksanakan di kabupaten Jepara sejak tahun 2009. Survey pendahuluan menunjukkan meski cakupan indikator P4K sudah baik, namun tidak semua kolom stiker diisi, bidan hanya memberikan stiker pada ibu hamil dan seringkali tidak mendiskusikan rencana persalinan dengan ibu hamil dan keluarga. Tujuan penelitian yaitu menjelaskan pelaksanaan P4K dari aspek bidan desa sebagai pelaksana di wilayah puskesmas kabupaten Jepara tahun 2012.

Jenis penelitian deskriptif observasional dengan metode kualitatif. Populasi seluruh bidan desa yang ada di kabupaten Jepara, Informan utama 8 bidan desa dari 4 puskesmas terpilih dengan kriteria puskesmas di daerah perkotaan 2 puskesmas dan daerah pedesaan 2 puskesmas. Informan triangulasi yaitu ibu hamil (8), kader kesehatan (8), Bidan Koordinator (4) dan Kasie Kesga Dinas Kesehatan. Pengumpulan data melalui wawancara mendalam serta analisis dengan *content-analysis*.

Berdasarkan hasil penelitian terlihat umur bidan desa 25–36 tahun, pendidikan D3 Kebidanan dan masa kerja 3-15 tahundengan rata-rata kerja 9 tahun. Pengetahuan dan sikap bidan tentang P4K sudah baik karena dari 8 bidan sudah memahami tujuan dari P4K dan mendukung P4K karena dapat membantu pencapaian program KIA, meski pelatihan khusus P4K tidak ada, hanya penunjang dari P4K yaitu APN dan BBLR. Untuk dana tidak tersedia dana khusus program P4K. Sarana prasarana yaitu buku KIA dan stiker P4K tersedia cukup, namun *bidan kit* belum lengkap. Tidak ada SOP khusus P4K, kecuali SOP penapisan awal dan deteksi bumil resti. Indikator keberhasilan yang dipahami bidan bahwa stiker harus terpasang di setiap rumah ibu hamil yang ada di wilayahnya. Bidan desa melakukan aspek perencanaan persalinan cukup baik, serta melakukan koordinasi dan komunikasi melalui sosialisasi dan pertemuan rutin.

Kata kunci : Program P4K, Bidan Desa

Kepustakaan : 24 buku, 1992 – 2011

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ABSTRACT

Sokhiyatun

Implementation on Planning and Complication Prevention Program by Village Midwives in Primary Healthcare Centers Working Area in Jepara District, 2013

The number of maternal death in the district of Jepara in 2011 was 24 people (MMR 113/100.000 live births). It was mainly in pregnancy and delivery periods due to bleeding. Delivery planning and complication prevention program (P4K) as a breakthrough program to reduce maternal mortality had been done in Jepara district since 2009. Preliminary survey showed that although P4K coverage was good, yet not all columns in the stickers were fulfilled. Midwives only gave stickers to pregnant women, and most of midwives did not discuss delivery planning with pregnant women and their family. Objective of this study was to explain the implementation of P4K from midwives aspects as the executors in the area of primary healthcare center (puskesmas) in Jepara district in 2012.

This was a descriptive observational study using qualitative method. Study population was all village midwives in Jepara district. Main informants were 8 village midwives from 4 selected puskesmas. These puskesmas were two puskesmas from urban areas and two puskesmas from rural areas. Triangulation informants were 8 pregnant women, 8 health cadres, 4 coordinator midwives, and a head of family health unit of local district health office. Data were collected through in-depth interview. Content analysis was applied in the data analysis.

Results of the study showed that age of village midwives was 25-36 years old; level of education was D3 in midwifery. Length of working was 3-15 years with the average of 9 years. Knowledge and attitude of midwives regarding P4K were good; 8 midwives had understood the purpose of P4K, and they supported P4K because it could help KIA program accomplishment. No special training on P4K was conducted; however, support of P4K training was conducted such as APN and BBLR trainings. No specific funding for P4K program was provided. Facilities, KIA books and P4K stickers, were sufficient. On the other hand, midwives kit was not complete. No specific standard operating procedure (SOP) was provided except SOP for early screening and for high risk pregnancy detection. Indicator of success understood by midwives was that stickers should be attached in every house of the pregnant women living in the work coverage area of midwives. Village midwives did a good delivery planning aspect, and they conducted coordination and communication through socialization and routine meetings.

Key words : P4K program, village midwives

Bibliography : 24 books, 1992-2011