

## Pengaruh pelaksanaan perencanaan pulang berfokus perawatan metode Kanguru (PMK) terhadap keterampilan ibu melakukan PMK di rumah

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### Abstrak

#### <b>ABSTRAK</b><br>

Perawatan BBLR biasanya relative lama, apalagi dengan adanya masalah lain yang menyertai. Sehingga perlu adanya persiapan pada BBLR dalam kelanjutan perawatan, bila sampai di rumah. Pelaksanaan perencanaan pulang perlu ada pada BBLR. Penelitian ini bertujuan untuk mengidentifikasi pengaruh pelaksanaan perencanaan pulang berfokus perawatan metode kanguru terhadap ketrampilan ibu melakukan PMK di rumah. Penelitian kuantitatif dengan menggunakan metodologi quasi eksperimen design non equivalent control group post test only. Sampel dalam penelitian berjumlah 30 responden, masing-masing 15 responden pada kelompok kontrol, dan kelompok intervensi. Hasil penelitian dengan uji Chi Square menunjukkan adanya perbedaan yang signifikan ( $p$  value  $< 0,002$ ). Faktor perancu: pendidikan, pengalaman, emosi ibu, kondisi fisik, dukungan suami dan tingkat ekonomi sosial tidak berpengaruh terhadap ketrampilan ibu. Saran penerapan perencanaan pulang PMK dimulai sejak dirawat sampai ke rumah untuk melakukan pemantauan.

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#### <b>Abstract</b><br>

Caring of low birth weight baby usually took relatively long time, especially when the newborn baby experiencing other health problem. Therefore, preparation for home care through discharge planning program should be initiated as soon as possible. This research aimed to identify the influence of discharge planning focused on Kangaroo Mother Care (KMC) to mother's skill in implementing KMC at home. Quasi eksperimen non equivalent control group post test only was used as research design and the data was analyzed with Chi-square test. The sample of this research was 30 respondents. The result showed that discharge planning focused on KMC significantly increasing mother's skill to implement KMC at home ( $p$  value=0.00). Confounding factors such as: level of education, experience, mother's emotional status, physical condition, support from husband, and social economic level was not correlated to mother's skill to implement KMC at home. It was recommended to started KMC from hospital and monitor its implementation at home.