

Analisis manajemen distribusi tablet tambah darah di 8 Puskesmas dalam rangka penanggulangan Anemia gizi Ibu hamil di Kabupaten Purwakarta Tahun 2006 = distribution management analysis of tablet for blood supplement at 8 primary health cares in handling nutrition Anaemia for pregnant mother at district of Purwakarta in 2006

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Abstrak

Prevalensi Anemia ibu hamil di Kabupaten Purwakarta adalah 41,43% dikelompokkan ke dalam 22 Kabupaten/Kota di Provinsi Jawa Barat dengan prevalensi anemia Ibu hamil tinggi (prevalensi > 40%). Angka Kematian Ibu di Kabupaten Purwakarta pada tahun 2004 masih tinggi yaitu 243,07 per 100.000 kelahiran hidup. Tingginya prevalensi anemia pada ibu hamil memberi kontribusi yang cukup besar pada jumlah kematian ibu maternal sebanyak 22 orang pada tahun 2006 dengan penyebab utama kematian karena perdarahan 12 orang (54,55%). Belum semua Puskesmas mampu mencapai target distribusi tablet tambah darah. Terdapat 8 Puskesmas (42,11%) dengan cakupan distribusi 90 tablet tambah darah (Fe³) masih dibawah target 80%. Rendahnya cakupan pemberian tablet tambah darah merupakan salah satu faktor penyebab kurang berhasilnya program suplementasi zat besi.

Penelitian ini bertujuan untuk melakukan analisis pelaksanaan manajemen distribusi tablet tambah darah di 8 Puskesmas. Penelitian dilakukan dengan menggunakan metode penelitian kualitatif dengan pendekatan system. Penelitian dilakukan di 8 Puskesmas dengan metode wawancara mendalam dan telaah dokumen. Informan pada penelitian ini adalah Tenaga Pelaksana Gizi Puskesmas, Kepala Puskesmas dan Kepala Seksi Gizi Dinas Kesehatan berjumlah 17 orang. Hasil penelitian menunjukkan pelaksanaan manajemen distribusi tablet tambah darah di 8 Puskesmas belum optimal karena cakupan distribusi masih rendah, adanya ketidakcukupan input (tenaga, dana dan logistik) serta adanya hambatan dalam penerapan fungsi manajemen. Masalah pada kecukupan input dikarenakan terbatasnya tenaga, dana operasional belum bisa dimanfaatkan secara optimal dan adanya gangguan stok tablet tambah darah. Dari sisi proses berupa belum optimalnya perencanaan Puskesmas, pelaksanaan distribusi yang masih terfokus di posyandu dan hari pelayanan posyandu, serta lemahnya pengolahan data dan pembahasan tindak lanjut hasil kegiatan. Hasil penilaian terhadap cakupan menunjukkan 1 Puskesmas dengan nilai tidak baik, 1 Puskesmas dengan nilai kurang dan 6 Puskesmas dengan nilai cukup. Upaya yang dapat dilakukan oleh pengelola program gizi Dinas Kesehatan untuk meningkatkan cakupan distribusi tablet tambah darah di Kabupaten Purwakarta adalah dengan memprioritaskan pembinaan manajemen distribusi tablet tambah darah secara intensif ke Puskesmas Sukasari dan Kiarapedes dan melakukan pembinaan secara berkala ke 6 Puskesmas lainnya. Pembinaan diarahkan kepada upaya-upaya yang dapat memberikan kontribusi besar terhadap peningkatan cakupan distribusi tablet tambah darah 90 tablet (Fe³) sebesar 80% dan telah dibuktikan melalui uji statistik hasil penelitian di tempat lain yaitu; pengelolaan dana operasional, penyusunan POA program gizi dan dokumen perencanaan Puskesmas, dukungan lintas sector melalui Pokja UPGK, serta penyuluhan kepada ibu hamil. Melalui upaya ini diharapkan dapat meningkatkan cakupan distribusi tablet tambah darah sehingga tujuan program tercapai.

<hr>Anemia prevalence of pregnant mother at district of Purwakarta is 41,43%. It is grouped into 22

districts or cities with a high anaemia prevalence of pregnant mother (prevalence > 40%). Mortality rate of mother is still high at district of Purwakarta in 2004. It is 243,07 from 100.000 birth of life. A high anemia prevalence of pregnant mother gave a big contribution for the death of maternal mother. There are 22 people in 2006 with main death because of bleeding are 12 people (54,55%). Not all Primary Health Cares can reach distribution target of tablet for blood supplement. There are 42,1 I% Primary Health Cares with distribution coverage are 90 tablets (Fe 3) it is still under target of 80%. A low giving tablet for blood supplement is one of factors which caused ferrum supplementation program is not success.

This study aim to analyze the distribution management performance of tablet for blood supplement at 8 Primary Health Cares. This study used a qualitative with system method. This study was conducted to 8 Primary Health Cares by in-depth interview and document study method. The informants of this study are a nutritionist of Primary Health Care, head of Primary Health Care head of nutrition section at Health Service, included 17 people. The study indicated that management performance of tablet for blood supplement at 8 Primary Health Cares are not optimally because distribution coverage are still under target, there are not enough on input coverage (walkers, fund and logistic) and there are problems with management performance, The problems on input coverage because of limited worker, operational fund can not be used optimally and there are stock troubles of tablet for blood supplement. In another process. Primary Health Care planning is not optimal yet, distribution implementation is still focused at Posyandu and service day of Posyandu, processing data and follow up discussion of activity result are low. Assessment result of coverage indicated 1 Primary Health Care has not good score, 1 Primary Health Care has less good score, and 6 Primary Health Cares have enough score. The efforts which can be conducted by nutrition program organizer of Health Service to improve distribution coverage of tablet for blood supplement at district of Purwakarta. are prioritizing a distribution management training of tablet for blood supplement intensively to Sukasari and Kiarapedes Primary Health Cares and training into another 6 Primary Health Care!. periodically. Training should be directed into efforts which can give a big contribution on distribution coverage warning of tablet for blood supplement that are 90 tablets (Fe 3) or 80% and they have been proven by statistic test of study result in another place, such as: operational funds management. arrangement of POA nutrition program and planning document of Primary Health Care, supported from all sectors through Pokja UPGK, and counseling for pregnant mother. These efforts were suggested can improve distribution coverage of tablet for blood supplement so that program aim be reached.