

## Determinan unmet need persalinan di Kabupaten Garut Provinsi Jawa Barat Tahun 2007 = The determinan of child birth unmet need in Garut Regency West Java Province the year of 2007

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### Abstrak

Masalah kematian maternal dan neonatal masih merupakan masalah pokok yang dihadapi oleh bangsa Indonesia, dimana AKI di Indonesia tahun 2005 sebesar 262 per seratus ribu kelahiran hidup. Salah satu penyebab kematian tersebut akibat masih rendahnya cakupan persalinan oleh tenaga kesehatan dan masih tingginya persalinan ditolong oleh tenaga non kesehatan (dukun bayi). Proporsi angka cakupan persalinan oleh tenaga kesehatan di Kabupaten Garut tahun 2006 adalah 67,4% sementara sisanya oleh dukun bayi. Pencapaian tersebut tidak sejalan dengan pencapaian hasil cakupan K4 pada tahun yang sama sebesar 85,4%, hal ini menunjukkan adanya kesenjangan antara kedua hasil cakupan tersebut. Idealnya, kenaikan cakupan K4 diikuti pula oleh kenaikan cakupan persalinan. Kesenjangan tersebut telah mengindikasikan telah terjadinya unmet need persalinan, yaitu ketidaksesuaian antara keinginan dengan kenyataan mengenai tenaga penolong persalinan. Tujuan penelitian ini adalah untuk mengetahui determinan unmet need persalinan di Kabupaten Garut tahun 2007. Penelitian menggunakan data sekunder dari hasil survei data dasar pengembangan model pelayanan kesehatan neonatal esensial di Kabupaten Garut tahun 2007 oleh Pusat Penelitian Kesehatan (PPK-UI) dan Pusat Kajian Promosi Kesehatan FKM-UI. Metode penelitian adalah Cross Sectional, dengan populasi adalah ibu-ibu yang mempunyai bayi 0-11 bulan yang tinggal menetap di 10 Kecamatan di Kabupaten Garut. Sampel yang berjumlah 246 orang, diambil menggunakan metode cluster probability proportionate size. Hasil penelitian menunjukkan dari 246 responden yang mempunyai keinginan untuk melahirkan oleh tenaga kesehatan 21,1% terjadi unmet need persalinan dan 78,9% sesuai dengan keinginannya (met need). Paritas merupakan faktor yang berhubungan dengan unmet need persalinan ( $p = 0,049$ ), dimana ibu yang mempunyai paritas tinggi berpeluang 2 kali untuk unmet need persalinan dibandingkan dengan ibu yang mempunyai paritas rendah setelah dikontrol oleh faktor pendidikan ibu, status ANC dan status ekonomi ( $OR = 2, 95\% CI = 1,0 ? 3,8$ ). Berdasarkan hal di atas, disarankan untuk lebih meningkatkan kegiatan KIE pada saat pemeriksaan kehamilan (ANC) sehingga pengetahuan ibu hamil tentang kehamilan, persalinan dan KB dapat lebih meningkat, disamping meningkatkan kegiatan penyuluhan kesehatan secara berkesinambungan kepada masyarakat, terutama tentang tanda bahaya kehamilan dan persalinan.

.....The problem of neonatal and maternal deaths is still the main problem faced by Indonesian people, where the maternal death rate in Indonesia, in the year of 2005 was 262 per one hundred thousand of living birth. One of the mentioned death causes was that the child-birth coverage carried out by medical workers was still low and child-birth performed by non medical workers was still high. The percentage of child-birth coverage rate by medical workers in Garut regency in 2006 was 67,4 % meanwhile the rest was performed by conventional midwives. The mentioned achievement was not in accordance with that of the result of K4 coverage in the same year as much as 85,4 %, this case showed the presence of discrepancy between both mentioned coverage results. Ideally, the raise of K4 coverage should have been followed by the raise of child-birth coverage as well. This discrepancy had indicated that unmet need child-birth had

occured, that is the unconformity between desire and fact concerning medical workers for child- birth. The objectives of this research is to recognize the determinant of unmet need of child- birth in Garut regency in 2007. The kind of the research used secondary data from the result of base data survey for the development of essential neonatal health service model in Garut regency in the year of 2007 performed by Health Research Centre ( PPK-UI ) and Health Promotion Study Centre of FKM-UI. the method of the research is Cross Sectional . Population consists of the women having 0-11 month babies who settle in ten sub-districts with sample selection follows the method of 30 cluster, cluster is the rural-district with dursion criteria based on the number of population (probability proportionate size). by using c-survey, it is obtained 30 rural- districts, later 16 women are selected at random from every rural-district so that it fulfills the sample of 640 people. The number of respondents who fulfill criteria of unmet need child-birth is 246 people. The result of the research shows that from 246 respondents who have desire to give birth to by medical workers, 21.1% is unmed need child-birth and 78,9% is in accordance with their desire (met need) that is medical workers as the helper of child-birth. The result of statistics test shows significant correlation between parity and unmet need child-birth ( $p=0.049$ ). In the meantime, the result of valid final modeling is model without interaction, later the most dominant factor as the determinant of unmet need child-birth is parity with the value of odds ratio as much as 2.0 respectively after being controlled by the factors of mothers education, ANC status and economics status ( $OR = 2, 95\% CI = 1,0 ? 3,8$ ). Based on the case above, it is suggested that the effort of health promotion program raise need to be performed by having health guidance acturties continuously to the community about reproduction health especially in the case of recognition towards child-birth danger signal. One of them is to raise the acturty of KIE at the time of pregnancy examination which along this time it forms education facility to improve mothers knowledge concerning their pregnancies and child-births.