

## Analisis pengembangan kebijakan Keluarga Berencana di Jawa Timur, Bali dan Kalimantan Tengah

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### Abstrak

The family of plan program were represent one of the effort protection problem of society where The family of plan program also is shares the in wrought in national development program and aim to to have a share to create economic prosperity, spiritual and cultural social resident of Indonesia, that the reachable good balance which ably the national produce. The national family of plan program in this time, just one from effort family of plan, namely the pregnancy separation with [gift/giving] intrauterine contraception device. The SDKI data 2002-2003 depict that 57% woman of status marry in this time hence contraception way of KB modern, 4% in traditional. Percentage of woman hence contraception storey; level from 50% in year 1991 become 57% in year 1997. Intrauterine device of which at most wear is injection 28%, pill 13%, intrauterine device the Gracious 6%. According to SDKI 1997 proportion drop out participant family of plan discontinuation rate is 24% reason of stop is 10% because side effects/reason of health, 6% because wish the pregnancy again, 3% because failure Intention of analysis. This analysis to descriptive of 1) to know the execution of serviceThe family of plan program in storey; level sub-province/town era decentralization with the possibility the happening of change of organization chart according to PP 8 year 2003, 2) to know influence of change organization chart BKKBN to service The family of plan program in storey; level province and sub-province. 3) to know the role and function stakeholder in execution policy of service The family of plan program method of research: represent the research eksploratif, which execute [at] 3 province: East Java, bali and Kalimantan Middle. Result of research is execution and influence of service. The family of plan program in storey; level sub-province/town in province East Java, bali and kalimantan Middle, [at] era decentralization with the happening of change organization chart according to PP 8 year 2003, the policy family of plan which formerly is from center BKKBN, now policy the change depended from area sub-province/town) each. Matter this visible from result research concerning analysis the policy family of plan year 2006, where [among/between] one subprovince/town of which one the other different .The importance of analysis policy family of plan which more circumstantial for the policy to be the family of plan ambulatory better and can gave contribution at degradation mortalityof mother and baby, especially for pregnancy undesirable. The provider of center of primary health require to trained to improve ability in communication, information and Education and also give the information, the acceptor candidate such as have to do by the field officer family of plan, require to careful the policy family of plan [whether/what] still need BKB sub-province/town) or family of plan program deliver to Ministry of Health and center of primary health (puskesmas), but, the center of primary health have to ready either through communication, Information, Education. (KIE), even human resources [so that/to be) apat range of acceptor and candidate of acceptor (so that/to be) can followed the family of plan program according to each requirement.