

Perbedaan Pengetahuan Kader Tentang Desa Siaga di Desa Siaga dan Desa yang Berstatus Belum Siaga di Kabupaten Katingan Tahun 2011= In the year 2015, The Ministry of Health of Indonesia targeted that 80% of villages have become the active Alert Village. Recorded in the year 2009 the number of Alert villages in Central Kalimantan Province is 136 (9.67%) of 1406 villages in there. While in Kabupaten Katingan a number of Alert Village is 28 villages (17.3%) of 161 villages. The implementation of Alert Village program that launched by the Ministry of Health is not working. Cadre is one of the community activator that directly assist health workers in managing alert village health.

The study was conducted in Kabupaten Katingan to know the differences of cadre knowledge about Alert Village in Alert village and non Alert Villages. The study design was cross sectional study. Population and the sample was a cadre in the Posyandu. The sample consisted of 68 cadre from Alert Villages and 68 cadres from non Alert Villages. The variables that's been studied were the characteristics of cadre (age, education, occupation, and length of service), Exposure information about the alert village through Mass Media (electronic and print media), training and socializing about alert village. Samples obtained by cluster random sampling technique. Data were collected through interviews using a questionnaire and analyzed by univariate analysis and bivariate. The results showed that most of cadre in the alert village and non alert villages in the age of 32 year. Most of cadre in non Alert Villages not graduated from high school, while in Alert Village the cadre graduated from Junior High School. Cadre in both villages do not have jobs (housewife) and serve more than 4 years in the Alert village, while in non alert villages serve less than 4 years. Information obtained by the cadre of alert village is from the print

media while the cadre in non alert villages get it from electronic media. Cadre of alert get more training and socialization about Alert Village compared to non Alert Villages Cadre. The results of the bivariate analysis found that cadre who receive training and socialization of the Alert Villages have a better knowledge than those who does not. There is a knowledge differences about Alert Villages between cadre in the Alert village and non Alert Villages. So that it is necessary to enhance the effort of cadre knowledge through training and socialization of about alert village in the implementation and developmet of Alert Village / Sri Lestari Ningsih

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Abstrak

ABSTRAK

Pada tahun 2015 Kemenkes RI menargetkan bahwa 80% desa telah menjadi Desa Siaga aktif. Tercatat pada tahun 2009 jumlah Desa Siaga yang ada Propinsi Kalimantan Tengah sebanyak 136 (9,67%) dari 1.406 desa dan kelurahan yang ada. Sedangkan di Kabupaten Katingan jumlah Desa Siaga sebanyak 28 (17,3%) dari 161 jumlah desa/kelurahan. Program Desa Siaga yang digulirkan oleh Depkes yang pada pelaksanaannya tidak berjalan. Dimana kader ini merupakan salah satu penggerak masyarakat yang terlibat secara langsung untuk membantu petugas kesehatan dalam mengelola Desa Siaga.

Penelitian ini dilakukan di Kabupaten Katingan untuk mengetahui perbedaan pengetahuan kader tentang Desa Siaga di Desa Siaga dan desa yang berstatus belum siaga. Disain penelitian yang digunakan adalah cross sectional. Populasi dan sampel adalah kader di Posyandu 68 orang kader di Desa Siaga dan 68 orang di desa yang berstatus belum siaga. Variabel-variabel yang diteliti adalah karakteristik kader (umur, pendidikan, pekerjaan, dan lama mengabdikan), Pajanan informasi tentang Desa Siaga melalui media mssa (media elektronik dan cetak), Pelatihan dan sosialisasi tentang Desa Siaga. Sampel didapatkan dengan tehnik clusster random sampling. Data dikumpulkan dengan wawancara menggunakan kuesioner dan dianalisa dengan analisa univariat dan bivariat.

Hasil menunjukkan bahwa rata-rata umur kader di Desa Siaga dan desa yang berstatus belum siaga sebagian besar berumur ≥ 32 tahun. tingkat pendidikan kader di desa yang berstatus belum siaga tamat SLTA, sedangkan di Desa Siaga tamat SLTP. kader di kedua status desa tersebut tidak memiliki pekerjaan (IRT) dengan lama mengabdikan jadi kader ≥ 4 tahun di desa siaga sedangkan kader di

desa yang berstatus belum siaga lama mengabdikan < 4 tahun. Informasi yang didapatkan oleh kader di Desa Siaga melalui media cetak sedangkan di desa yang berstatus belum siaga melalui media elektronik. Kader di Desa Siaga lebih banyak mendapatkan pelatihan dan sosialisasi tentang Desa Siaga dibandingkan dengan kader di desa yang berstatus belum siaga. Hasil analisa bivariat didapatkan bahwa kader yang mendapatkan pelatihan dan sosialisasi tentang Desa Siaga pengetahuannya lebih baik dari pada yang tidak mendapatkan pelatihan dan sosialisasi tentang Desa Siaga dan didapatkan ada perbedaan pengetahuan kader tentang Desa Siaga di Desa Siaga dan desa yang berstatus belum siaga. Sehingga diperlukan upaya-upaya untuk meningkatkan pengetahuan kader melalui pelatihan dan sosialisasi tentang desa siaga dalam pelaksanaan pengembangan desa siaga

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ABSTRACT

In the year 2015, The Ministry of Health of Indonesia targeted that 80% of villages have become the active Alert Village. Recorded in the year 2009 the number of Alert villages in Central Kalimantan Province is 136 (9.67%) of 1406 villages in there. While in Kabupaten Katingan a number of Alert Village is 28 villages (17.3%) of 161 villages. The implementation of Alert Village program that launched by the Ministry of Health is not working. Cadre is one of the community activator that directly assist health workers in managing alert village health.

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