

Evaluasi Manajemen Pelaksanaan Program Gizi di Puskesmas Kota Bogor Tahun 1999 = Evaluation on management of nutrition program implementation on health center in Bogor, 1999

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Abstrak

Evaluation on Management of Nutrition Program Implementation on Health Center in Bogor, 1999 Health Center gives health service to whole people in Indonesia. Its aim to prevent nutrition problems and to improve nutrition status. In Health Center, there are several employee like nutritionist, nurse, midwife, and others. Bogor was located on West Java and near Capital of Indonesia. Total population on 1999 approximately 680.541 people. Bogor has 23 Health Centers, 31 sub districts, and 37 villages. All of Health Centers implement nutrition program, but it was low targets for DIS, NIS, and PEM, except in 1999/2000. At the present time, management is one of important instrument on health development So, it has to efficient and effective. The study was aimed to get information about evaluation on input (human resource, cost, and facility), process (planning, leadership, and controlling), and output (D/S, NIS, PEM) in implementation of nutrition program. The study was conducted at 6 Health Centers. Data collecting was got from in depth interview and focus group discussion by questionnaire to input and process variable, where as output use secondary data from annual report at Dinkes, 1999. Data analysis use triangulation and was compared between interview result and theory.

The result of this study show that input (human resource, cost, and facility) was less and process (planning, organization, leadership, controlling) always exist. The target (NIS, KIS) was increased. Organization gives support to achieve the program. Leader is determinant to moving his staff on implement the program. On the other hand, report monthly was needed to do controlling. Result of under five years (balita) weighing in Bogor show that poor nutrition (medium PEM) are 3,3% (2047 children) and children that weighing are 100%. To intervention poor nutrition, there are fund from APBD II and other from Social Safety Network for Health. Where, it implementation by giving adding food to recovery. On this study, community involvement is necessary and we need one policy about Pozi (Pojok Gizi) Program.