

Intervensi untuk menurunkan risiko AIDS/HIV dan hepatitis B di kalangan ibu berpenghasilan rendah pengunjung BP/KIA/KB Puskesmas di DKI Jaya dan Jabar, 1994-1997

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Abstrak

ABSTRAK

Permasalahan penelitian: HIV/AIDS dan Hepatitis B merupakan masalah kesehatan masyarakat yang sangat penting karena belum ditemukan obatnya sampai saat ini. Wanita usia subur, khususnya yang berpenghasilan rendah pengunjung Puskesmas semakin rentan terhadap risiko penularan kedua penyakit tersebut. Sampai saat ini belum ada model upaya promotif dan preventif di Puskesmas yang mengintegrasikan pelayanan penyakit menular seksual (PMS) ke dalam pelayanan BP/KIA/KB di Puskesmas.

Tujuan penelitian: Mengembangkan model intervensi guna menurunkan risiko infeksi PMS termasuk HIV/AIDS dan Hepatitis B bagi wanita usia reproduksi, wanita hamil dan peserta KB berpenghasilan rendah melalui keterpaduan program PMS dengan program kesehatan reproduksi di klinik KIA/KB dan BP di Puskesmas daerah perkotaan dan pedesaan.

Kegiatan dan hasil intervensi yang telah dilakukan: Desain penelitian adalah Kuasi eksperimen, yaitu one group pre dan post test tanpa kelompok kontrol. Dalam intervensi ini dilakukan observasi awal, intervensi dan observasi akhir tanpa menggunakan kelompok kontrol. Hasil penelitian tahun I dapat diperoleh informasi bahwa infeksi saluran reproduksi pada wanita usia subur pengunjung BP/KIA/KB di Puskesmas perkotaan maupun pedesaan di daerah penelitian cukup tinggi. Dari pemeriksaan oleh staf lab Puskesmas sendiri diperoleh angka infeksi sebesar 2-29%., sesudah di periksa ulang oleh Lab. Bagian Ilmu Penyakit Kulit dan Kelamin, FKUIIRSCM diperoleh angka lebih tinggi yaitu 30-40%. Di lain pihak pengetahuan mengenai PMS termasuk HIV/AIDS dan Hepatitis B di kalangan mereka masih sangat terbatas. Bahkan pengetahuan dan kemampuan petugas kesehatan sendiri yang berkaitan dengan PMS termasuk HIV/AIDS dan Hepatitis B juga masih kurang.

Pada tahun ke II telah dan sedang dilakukan intervensi di Puskesmas terpilih. Telah dilakukan persiapan intervensi berupa telaah hasil temuan, penyusunan silabus pelatihan petugas Puskesmas, penyusunan draft materi & media penyuluhan, lokakarya penyusunan jadwal dan model intervensi bersama Puskesmas daerah penelitian, uji coba dan penyempurnaan materi penyuluhan serta perbaikan dan penggandaan materi penyuluhan. Selanjutnya pelaksanaan intervensi dilakukan berupa: pelatihan petugas Puskesmas (dokter, bidan, perawat, tenaga laboratorium) mengenai manajemen dan pencegahan PMS, HIV/AIDS dan Hepatitis B, cara sterilisasi alat kesehatan termasuk jarum suntik, penyuluhan (pendidikan dan motivasi) ibu pengunjung BP/KIA/KB (beserta suaminya) oleh petugas Puskesmas yang telah dilatih; serta pemantauan kegiatan penyuluhan oleh tim peneliti.

Kesimpulan dan Saran: Telah dikembangkan model intervensi berupa pelatihan petugas Puskesmas mengenai manajemen dan pencegahan PMS termasuk HIV/AIDS dan Hepatitis B serta materi baku yang terdiri dari silabus dan bahan serta penunjang pelatihan. Selain itu juga dikembangkan model serupa bagi ibu pengunjung BP/KIA/KB di Puskesmas (berserta suaminya) termasuk materi dan penunjang penyuluhan. Kegiatan intervensi penyuluhan langsung bagi pengunjung BP/KIA/KB di Puskesmas sedang dilaksanakan oleh petugas Puskesmas terlatih.

Disarankan untuk dilakukan evaluasi akhir mengenai dampak dan hasil akhir model intervensi ini di Puskesmas sehingga diperoleh hasil yang dapat merupakan masukan bagi pembuat kebijakan pelayanan khususnya dalam upaya penanganan dan pencegahan PMS termasuk HIV/AIDS dan Hepatitis B melalui jajaran pelayanan primer di tingkat Puskesmas di Indonesia.

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ABSTRACT

In Indonesia, HIV/AIDS and Hepatitis B have become major and critical public health problems. At present there is no cure for these two diseases. The low income married women of reproductive age (MWRA) are becoming more and more susceptible to the risk of infection of sexually transmitted diseases (STDs) including HIV/ AIDS. Currently a model of integrating STD services into the existing ambulatory/ mother & child health (MCH)/ family planning (FP) services in the Puskesmas is nonexistent.

The research objectives:

To develop an intervention model in reducing the risk of STDs including HIV/AIDS and Hepatitis B infection for low income MWRA through integrating STD services into MCH/FP services in the Puskesmas both for urban as well as rural areas.

Methodology and results of the study:

The design of the study is one group pre and post test without a control group (a Quasi-experimental design). A measurement was conducted at the beginning of the study then followed by intervention and evaluation/ measurement after the intervention.

Three different measurements were conducted prior to the intervention period namely both qualitative and quantitative study (survey) and STD screening.

Results of the first year study are as follows: there is a significantly high proportion of STD among the MWRA visiting the ambulatory, MCH and FP clinic both in the urban and rural public health centers (Puskesmas). Screening test by lab technician of the Puskesmas indicated infection proportion of 2-29%. The results of the screening were rechecked by the Dept. of Dermatovenereology of the Cipto Mangunkusumo Hospital, Jakarta and showed higher infection proportion i.e. 30-40%. On the other hand, knowledge on STD including HIV/AIDS and Hepatitis B among the women visiting the Puskesmas was very limited. Besides that, the knowledge and skills of the health personnel of the Puskesmas concerning the same subject was also relatively low.

During the second year of the study (1995/1996) an intervention was conducted and still taking place in the

four Puskesmas under the study. Preparation of the intervention was completed such as review of the study results, development of syllabus of training for the Puskesmas staff, development of draft of materials and media for health education, workshop on the scheduling and model of intervention with the participating Puskesmas, pre test and revision and reproduction of information, education & communication (IEC) materials. Furthermore, the following intervention was conducted in each Puskesmas namely training for Puskesmas staff (doctor, midwives, nurses and lab technicians) concerning management and prevention of STD including HIV/AIDS and Hepatitis B, methods of sterilization of medical instruments, education and motivation (health education) for women attending ambulatory, MCH and FP clinic of the Puskesmas by trained health personnel and monitoring of the activity at the Puskesmas by selected trained personnel as well as research team members.

Conclusions and recommendations:

A model of intervention to prevent risk of STD including HIV/AIDS and Hepatitis B infection has been developed. It consists of syllabus and training materials including visual aids for STD including HIV/AIDS and Hepatitis B management and prevention for the health personnel of the Puskesmas, and training materials of the same subject for women (including their spouses) attending ambulatory, MCH and FP clinics at the Puskesmas.

It is strongly recommended to evaluate both the impact and outcome of the above intervention. Hopefully, the results will be useful for advocating policy concerning prevention and management of STD including HIV/AIDS and Hepatitis B at the primary care level namely at the Puskesmas in Indonesia.