

Kinerja Program Kesehatan Ibu di Indonesia: Pemodelan Multievel Capaian Indikator Program Kesehatan Ibu (K4 dan PN) di Tingkat Puskesmas = Maternal Health Program Performance in Indonesia: Multilevel Model of Maternal Health Program Indicator (4th antenatal visite and delivery) in health center

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Abstrak

Kematian ibu yang tinggi di Indonesia dapat dicegah antara lain dengan pelayanan antenatal adekuat dan proses persalinan yang aman. Fakta menunjukkan belum semua ibu hamil dan bersalin mendapatkan pelayanan optimal, walaupun pencatatan dan pelaporan pemerintah menunjukkan capaian yang hampir memenuhi target. Hal ini merupakan cerminan kinerja institusi penyelenggara pelayanan kesehatan ibu (dalam hal ini puskesmas). Penelitian ini bertujuan mengetahui pemodelan multievel determinan kinerja program kesehatan ibu (capaian indikator K4 dan PN) pada tingkat puskesmas di Indonesia, dan opsi kebijakan yang dapat diterapkan sebagai upaya meningkatkan capaian program tersebut. Penelitian ini menggunakan metoda kombinasi, cross-sectional pada tahap pengembangan model konfirmatif, dan kualitatif-explanatory pada tahap eksplorasi masalah. Sampel berjumlah 2002 ibu batita, diperoleh dari data sekunder hasil Studi Analisis Capaian Indikator Renstra Program Gizi dan KIA 2012 di 8 provinsi, 16 kabupaten/kota, 64 puskesmas, 128 desa terpilih di Indonesia. Selain itu juga digunakan data set puskesmas dan desa. Informan pada tahap dua adalah pemangku kepentingan terkait program kesehatan ibu baik di tingkat puskesmas, kabupaten/kota, maupun tingkat pusat. Hasil penelitian menunjukkan, bahwa kepuasan ibu terhadap pelayanan antenatal sebelumnya mempunyai kontribusi paling besar terhadap kinerja K4, sementara perencanaan mempunyai kontribusi paling besar pada kinerja PN, dan kemampuan sistem informasi berkontribusi paling besar terhadap kinerja PNFaskes, setelah dikontrol variabel lainnya. Oleh karena itu perlu menjadi perhatian serius oleh jajaran Kementerian Kesehatan RI dan pemangku kepentingan lainnya. Disarankan kepada Kementerian Kesehatan RI, dinas kesehatan kabupaten/kota, dan puskesmas untuk melakukan intensifikasi promosi kesehatan, menjadikan upaya fokus pada pelanggan sebagai upaya kesehatan masyarakat pengembangan di puskesmas, pemenuhan kebutuhan tenaga dan sarana pelayanan antenatal dan persalinan di daerah terpencil, meningkatkan kapasitas perencanaan dan penguatan kemampuan sistem informasi program kesehatan ibu.

.....Maternal deaths can be prevented with adequate antenatal and delivery care. Evidence suggests that not all women received optimal services during her pregnancy and delivery, although based on recording and reporting system, its shows that government achieved the performance's targets. This is a reflection of the health care provider performance (in this case is Puskesmas/ health center). The study aimed to seek a multilevel model of maternal health program performance determinants (performance indicators K4 and PN) at the primary care level in Indonesia, and the policy options that can be implemented as an effort to improve the performance of the program. The study used Mix Methods with cross sectional design; a quantitative approach was used to develop confirmatory model, and qualitative exploratory (to explore the problems). The sample was obtained from secondary data from "Indicators Achievement of Program Nutrition and MCH Strategic Plan 2012 in 8 provinces" survey, which has 2002 toddler's mother as a

sample from 16 districts/cities, 64 health centers, and 128 selected villages in Indonesia. The analysis also includes dataset from Puskesmas and villages. Informant for qualitative study was from relevant stakeholders of maternal health programs both at the health centers, district/city, as well as the central level. The results showed that satisfaction on previous antenatal care have contributed most to the performance of K4, while planning has contributed most to the performance of PN, and the ability of information systems contribute most to the performance of PN-faskes, after controlling other variables. Recommendation for Ministry of Health, District Health Office, and Puskesmas is to intensify health promotion, focus on customer as a public health efforts in the health centers, making sure availability of health workers and services for prenatal and delivery care in remote areas, improve planning capacity and strenghtent capability of maternal health information systems.