

ABSTRAK

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Analisis Beberapa Faktor yang Mempengaruhi Implementasi Program Pelayanan Kesehatan Peduli Remaja (PKPR) di Puskesmas Wilayah Kabupaten Kediri

xiii + 106 halaman + 20 tabel + 5 gambar + 7 lampiran

Masalah kesehatan remaja di Kabupaten Kediri terutama HIV / AIDS pada tahun 2008 menunjukkan adanya peningkatan, sedangkan data cakupan pelayanan pada remaja adalah 65% masih rendah dibandingkan Kabupaten / Kota lain yang mencapai 70% dengan standar pelayanan minimal 80%. Hal ini menunjukkan adanya masalah dalam implementasi program PKPR. Keberhasilan implementasi dipengaruhi oleh komunikasi, sumberdaya, disposisi, struktur birokrasi. Tujuan penelitian adalah untuk menganalisis beberapa faktor yang mempengaruhi implementasi program PKPR di Puskesmas wilayah Kabupaten Kediri

Penelitian ini menggunakan rancangan penelitian observasional dengan pendekatan *cross sectional*. Pengumpulan data dilakukan dengan wawancara menggunakan kuesioner terstruktur. Jumlah populasi 185 orang petugas. Pemilihan sampel dengan tehnik *simple random sampling* yang berjumlah 74 petugas pelaksana program PKPR yang tersebar di 37 Puskesmas Kabupaten Kediri. Analisa data dilakukan dengan uji *chi square* dan uji *multiple regresi logistik*. Hasil penelitian menunjukkan bahwa 56,8% petugas melakukan komunikasi dengan baik, 54,1% mempunyai persepsi ketersediaan sumberdaya yang baik, 56,8% mempunyai persepsi disposisi baik, 54,1% mempunyai persepsi terhadap struktur birokrasi baik. Jadi implementasi program PKPR sebagian besar baik 55,4%. Hasil analisis bivariat menunjukkan bahwa ada hubungan yang signifikan antara faktor komunikasi, sumberdaya, disposisi, struktur birokrasi dengan implementasi program PKPR di Puskesmas wilayah Kabupaten Kediri. Hasil analisis multivariat menunjukkan faktor yang paling berpengaruh terhadap keberhasilan implementasi program PKPR adalah komunikasi ($p = 0,001$), sumberdaya ($p = 0,002$) dan disposisi ($p = 0,001$).

Disarankan kepada Dinas Kesehatan agar mengoptimalkan kemampuan petugas PKPR dalam memberikan KIE dan konseling pada remaja, menyediakan sumberdaya yang memadai serta melakukan monitoring dan evaluasi pada program PKPR.

Kata kunci : Program PKPR, Implementasi kebijakan, Petugas pelaksana program PKPR.

Kepustakaan : 38, 1998 - 2009

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ABSTRACT

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Analysis of Factors Affecting the Implementation of Youth Care Health Service Program at Primary Health Centers in the Area of Kediri District, 2010

xiii, 106 pages + 20 tables + 5 figures + 7 enclosures

Youth health problems in Kediri district especially HIV/AIDS in 2008 showed an increase. Data on the youth service coverage read 65% and it was still lower compared to other districts/cities which had reached 70% with the minimum service standard of 80%. This indicated that there were still problems in the implementation of youth care health service program (PKPR). Success of the implementation of PKPR program was influenced by communication, resources, disposition, and bureaucracy structure. The objective of this study was to analyze factors affecting the implementation of PKPR program in the primary health centers (puskesmas) in Kediri district.

This study applied observational design and cross sectional approach. Data collection was done by conducting interview using structured questionnaire. The number of study population was 185 PKPR workers. The number of samples was 74 PKPR workers and they were selected using simple random sampling. They were distributed in 37 puskesmas in Kediri district. Data analysis was done using chi square test and multiple logistic regression test.

Results of the study showed that 56.8% of workers did good communication, 54.1% workers had good perception on the availability of resource, and 54.1% had good perception on bureaucracy structure. Implementation of PKPR program was mostly good (55.4%). Bivariate analysis indicated that there was significant association between communication, resources, disposition, bureaucracy structure factors and the implementation of PKPR program in the primary health centers in Kediri district. Result of multivariate analysis showed that communication (p: 0.001), resources (p: 0.002) and disposition (p: 0.001) were the most influencing factors towards successfulness of PKPR program implementation.

District Health Office is suggested to optimize the ability of PKPR workers in implementing KIE and youth counseling, to provide adequate resources and conduct PKPR program monitoring and evaluation.

Key words : PKPR program, policy implementation, PKPR program workers

Bibliography : 38, 1998 – 2009