

ABSTRAK

Astuti Setiyani

Analisis Faktor yang Mempengaruhi Kinerja Bidan dalam Pelaksanaan Stimulasi, Deteksi dan Intervensi Dini Tumbuh Kembang Anak di Puskesmas Kabupaten Magetan Tahun 2012 (Studi pada Bidan yang Mengikuti Pelatihan SDIDTK)

xv + 127 halaman + 24 tabel + 2 gambar

Program SDIDTK yang bertujuan untuk memantau pertumbuhan dan perkembangan anak, melibatkan bidan sebagai pelaksana program. Dinas Kesehatan Kabupaten Magetan telah melatih SDIDTK pada sebagian bidan di puskesmas, tetapi cakupan dari tahun ke tahun belum mencapai target. Bidan yang dilatih belum semua melaksanakan program sesuai ketentuan. Tujuan penelitian adalah menganalisis faktor yang mempengaruhi kinerja bidan dalam pelaksanaan SDIDTK di puskesmas.

Jenis penelitian analitik observasional dengan pendekatan waktu *Cross Sectional*. Cara pengambilan data dengan angket menggunakan kuesioner terstruktur untuk variabel bebas yaitu persepsi pelatihan, beban kerja, supervisi dan penghargaan dan observasi untuk mengukur kinerja bidan. Teknik pemilihan sampel dilakukan dengan total populasi meliputi 40 bidan yang telah mengikuti pelatihan SDIDTK. Analisis dilakukan dengan uji analitik regresi logistik untuk mengetahui pengaruh terhadap kinerja bidan.

Hasil penelitian menunjukkan persepsi pelatihan, beban kerja, supervisi dan penghargaan secara umum baik, tetapi kinerja bidan masih kurang dalam hal pengukuran lingkaran kepala, penggunaan Kuesioner Pra Skrining Perkembangan (KPSP), Kuesioner Masalah Mental Emosional (KMME), *Checlist for Autism in Toddler (CHAT)*. Pada pelatihan metode ceramah kurang tepat. Pada beban kerja didapatkan pembagian tugas belum merata. Supervisi belum dilakukan berkala dan belum terencana serta kepala puskesmas kurang memberi perhatian. Faktor yang mempengaruhi kinerja adalah persepsi pelatihan ($p\text{ value} = 0,0001$), persepsi supervisi ($p\text{ value} = 0,001$) dan persepsi penghargaan ($p\text{ value} = 0,0001$). Faktor yang berpengaruh bersama-sama terhadap kinerja bidan adalah persepsi pelatihan ($p\text{ value} = 0,004$) dan persepsi supervisi ($p\text{ value} = 0,007$).

Disarankan pada pelatihan perlu ditingkatkan persepsi pengukuran lingkaran kepala, penggunaan KPSP, KMME, *CHAT* serta metode ceramah dikurangi ditingkatkan (simulasi, bermain peran dan praktik). Ditinjau dari beban kerja perlu ditambah bidan yang dilatih, pembagian tugas merata. Ditinjau dari supervisi sebaiknya dilakukan berkala dan terencana serta kepala puskesmas memberikan perhatian dalam pelaksanaan SDIDTK.

Kata Kunci : Kinerja bidan, Program SDIDTK, Bidan Puskesmas, Tumbuh Kembang Anak

ABSTRACT

Astuti Setiyani

**Analysis on Factors Affecting the Performance of Midwives in the Implementation of Stimulation, Detection and Early Intervention on Child Growth and Development Program at Primary Healthcare Center in Magetan, 2012 (Study on Trained Midwives)
xv + 127 pages + 24 tables + 2 figures**

Program of SDIDTK with objective to monitor child growth and development involved midwives as program executors. Magetan district health office had trained some of midwives in the primary healthcare centers on SDIDTK; however program coverage had not reached the target. Not all trained midwives implemented the program according to the guidelines. Objective of the study was to analyze factors affecting work performance of midwives in the implementation of SDIDTK in the primary healthcare center.

This was an analytic observational study with cross sectional approach. Data were collected through survey using structured questionnaire. Independent variables were training perception, workload, supervision, rewards, and observation to measure midwives work performance. Study population was 40 midwives who had attended in SDIDTK training, and all of them were included in the study (total population). Logistic regression analytical test was applied to know the influence of independent variables on the midwives work performance.

Results of the study showed that training perception, workload, supervision and rewards were generally good. However, midwives work performance was still insufficient in the measurement of head circumference, usage of pre-screening development questionnaire (KPSP), a mental emotional problem questionnaire (KMME), a checklist for autism in toddler (CHAT). Lecture method was not an appropriate method for training. Job division was not evenly distributed. Supervision was not planned and done regularly; and lack of attention from the head of primary healthcare center. Factors affecting work performance of midwives were training perception (p: 0.0001), supervision perception (p: 0.001), and rewards perception (p: 0.0001). Factors that jointly influenced midwives work performance were training perception (p: 0.004) and supervision perception (p: 0.007).

It is suggested to improve perception on head circumference measurement; utilization of KPSP, KMME, CHAT; to reduce the number of lecture method; to increase the number of simulation, role play and practice methods. More trained midwives are needed, and task has to be distributed evenly. Supervision should be planned and done routinely. The head of primary healthcare center is suggested to give attention on the implementation of SDIDTK.

Key words : midwives work performance, SDIDTK program, primary healthcare center midwives, child growth and development