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**ABSTRAK**

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**Evaluasi Pelaksanaan Revitalisasi Posyandu dalam Penurunan Prevalensi Balita Gizi Buruk di Kota Baubau Provinsi Sulawesi Tenggara Tahun 2011**

**xiii + 109 halaman + 18 tabel + 6 gambar**

Tahun 2010 di Kota Baubau kasus gizi buruk mengalami peningkatan dibanding tahun sebelumnya. Posyandu merupakan salah satu upaya untuk mendeteksi awal gizi buruk. Sejak tahun 2001 kegiatan posyandu direvitalisasi agar terjadi peningkatan fungsi dan kinerja posyandu, sehingga status gizi anak dapat dipertahankan atau ditingkatkan. Tujuan penelitian ini adalah untuk mengevaluasi pelaksanaan revitalisasi posyandu dalam penurunan prevalensi balita gizi buruk sebagai upaya peningkatan kinerja posyandu.

Jenis penelitian ini adalah deskriptif kualitatif dengan pendekatan studi kasus. Pemilihan subyek dengan metode *purposive sampling*. Data dikumpulkan dengan wawancara mendalam pada informan utama: ketua kader dan informan triangulasi: petugas puskesmas dan Kabid Pelayanan Medik, Kesehatan Keluarga dan Gizi Masyarakat serta *Focus Group Discussion (FGD)* kepada informan triangulasi ibu balita. Analisa data menggunakan metode *content analysis*.

Hasil penelitian menunjukkan bahwa kegiatan pemenuhan jumlah kader sudah cukup yaitu 4-5 orang, tetapi yang hadir hanya 3-4 orang/posyandu. Kader lama yang sudah dilatih banyak yang *drop out* dan kader baru belum dilatih. Pemberian insentif diberikan kepada semua kader tanpa memperhitungkan kehadiran sehingga tidak efektif mengaktifkan kader. Pemenuhan sarana dan prasarana belum lengkap, tidak tersedia KMS dan buku KIA, sehingga hanya digunakan photocopy KMS, buku atau kertas untuk mencatat berat badan balita. Meja I dan Meja IV belum dilaksanakan dengan baik karena kader tidak mampu melaksanakan penyuluhan. Kegiatan pembinaan dan pengawasan dari petugas puskesmas bersifat insidentil, tidak ada pembinaan dan pengawasan dari pengurus PKK Kelurahan.

Disimpulkan bahwa pelaksanaan revitalisasi posyandu belum berjalan dengan baik karena pelatihan kader terhenti, keterbatasan sarana dan prasarana, pembagian insentif yang tidak tepat, serta kurangnya pembinaan dan pengawasan..

Kata Kunci : Revitalisasi, Posyandu, Gizi, Buruk

## ABSTRACT

**Wa Ode Asmah Isra**

**Evaluation on the Implementation of Integrated Health Service Post in Decreasing Underfive Protein Energy Malnutrition Cases in Baubau, Southeast Sulawesi Province, 2011**

**xiii + 109 pages + 18 tables + 6 figures**

Severe malnutrition cases in Baubau city in 2011 increased compared to the related number in the previous year. Posyandu was one of efforts to detect early severe malnutrition. Posyandu activity had been revitalized since 2001 with the intention of improving function and performance of posyandu, and nutritional status of children could be maintained and improved. Objective of this study was to evaluate the implementation of posyandu revitalization to decrease severe malnutrition prevalence, and this was an effort of improving posyandu performance.

This was a descriptive-qualitative study with case study approach. Data were collected through in-depth interview to the main informant namely head of cadres. Triangulation informants were puskesmas workers, head of medical service unit, head of family health and community nutrition unit. Focus group discussion was conducted to the mothers of under-five children. Content analysis was applied in the data analysis.

Results of the study showed that the number of cadres listed for each posyandu was enough, 4-5 cadres. However, the number of cadres who attended in each posyandu was only 3-4 cadres. Many of old cadres who had been trained did not participate again in posyandu activities (drop out); new cadres had not received training. Incentives were given to all cadres without considering the number of attendance in the posyandu activities; this was not an effective way to activate cadres. Facilities were still inadequate; KMS and KIA book were not provided. Therefore only copy of KMS was used, and a book was used to record the body weight of under-five children. Activities in table 1 and IV were not properly performed due to lack of skilled cadres in giving health education. Supervision activities by puskesmas workers were not done periodically (incidental), and no supervision and assistance from village PKK were done.

In conclusion, the implementation of posyandu revitalization was inadequate due to no training for cadres, facility limitation, unfair incentive distribution, and inadequate assistance and supervision.

**Key words : revitalization, posyandu, severe malnutrition**