

ABSTRAK

Patemah

Faktor Determinan Pelaksanaan Stimulasi Deteksi dan Intervensi Dini Tumbuh Kembang (SDIDTK) oleh Kader di Wilayah Puskesmas di Kota Malang

v + 121 halaman + 34 tabel + 3 gambar + 13 lampiran

Stimulasi Deteksi dan Intervensi Dini Tumbuh Kembang (SDIDTK), adalah kegiatan merangsang kemampuan dasar anak umur 0-6 tahun agar anak tumbuh dan berkembang secara optimal. Kurangnya stimulasi dapat menyebabkan penyimpangan tumbuh kembang anak bahkan gangguan yang menetap. Cakupan SDIDTK di Kota Malang pada tahun 2010 mencapai 56,13%, tahun 2011 mencapai 69,41% dibawah target 90%. Tujuan penelitian ini adalah menganalisis faktor determinan pelaksanaan SDIDTK oleh kader di Puskesmas Wilayah Kota Malang.

Jenis penelitian ini adalah observasional analitik dengan pendekatan *cross sectional*. Variabel bebas adalah karakteristik kader (umur, pendidikan, pekerjaan, lama menjadi kader), pengetahuan, sikap, fasilitas dan sarana prasarana, dukungan masyarakat, dukungan bidan, dan pelatihan. Variabel terikat adalah pelaksanaan SDIDTK. Subjek penelitian adalah 81 kader yang telah melakukan SDIDTK yang dipilih secara *purposive*. Data dikumpulkan dengan wawancara menggunakan kuesioner terstruktur dan lembar observasi. Analisis bivariat dilakukan dengan uji korelasi *Chi-square* dan *Fisher Exact* dan multivariat dengan regresi logistik.

Hasil penelitian menunjukkan rerata usia responden 45,4 tahun, rerata lama jadi kader 10,6 tahun, pendidikan SMA 49,4%, pekerjaan sebagai ibu rumah tangga 88,9%, pelaksanaan SDIDTK baik 50,6%, pengetahuan baik 95,1%, sikap kader baik 61,7%, fasilitas dan sarana prasarana memadai 23,5%, dukungan masyarakat baik 74,1%, dukungan bidan baik 88,9%. Tidak ada hubungan umur kader ($p=0,311$), pendidikan ($p=0,146$), pekerjaan ($p=0,647$), pengetahuan ($p=0,551$), sikap ($p=0,218$), fasilitas ($p=0,233$), dukungan masyarakat ($p=0,749$), dukungan bidan ($p=0,516$) dengan pelaksanaan SDIDTK. Ada hubungan pelatihan ($p=0,001$), lama menjadi kader ($p=0,035$) dengan pelaksanaan SDIDTK. Ada hubungan bersama-sama lama menjadi kader dan pelatihan dengan pelaksanaan SDIDTK oleh kader.

Faktor determinan pelaksanaan SDIDTK oleh kader adalah pelatihan dan lama menjadi kader. Untuk perbaikan pelaksanaan program SDIDTK perlu diadakan pelatihan SDIDTK pada semua kader Posyandu.

Kata Kunci : Stimulasi Deteksi dan Intervensi Dini Tumbuh Kembang,
Faktor Determinan, Pelaksanaan, Kader.

Jumlah Pustaka : 26(2003 – 2011)

ABSTRACT

Patemah

**Determinant Factors on the Implementation of Stimulation Detection and Early Intervention on Growth and Development (SDIDTK) by Health Cadres in Malang City
v + 121 pages + 34 tables + 3 figures + 13 enclosures**

Growth and development detection and early intervention stimulation (SDIDTK) was activities to stimulate basic skill of children 0-6 years old, hence they grew and developed optimally. Less stimulation could cause deviation in the growth and development of the children, and disorder could be permanent. Coverage of SDIDTK in Malang city in 2010 reached 56.13%, in 2011 was 69.41%, these coverage were still below the target of 90%. Objective of this study was to analyze determinant factors of the implementation of SDIDTK by cadres in primary healthcare centers in Malang city

This was an observational analytical study with cross sectional approach. Independent variables were cadre characteristics (age, education, occupation, length of period as a cadre), knowledge, attitude, facilities, community supports, midwives supports, and training. Dependent variable was implementation of SDIDTK. Study subjects were 81 cadres who conducted SDIDTK, and they were selected purposively. Data were collected through interview guided by structured questionnaire and observation list. Chi square test and Fisher exact test were applied in the bivariate analysis; logistic regression method was applied in the multivariate analysis.

Results of the study showed mean of respondents' age was 45.4 years, average length of period as a cadre was 10.6 years, 49.4% of respondents' level of education were high school, 88.9% of respondents' occupation were housewives, 50.6% of SDIDTK were good, respondents with good knowledge were 95.1%, respondents with good attitude were 61.7%, 23.5% of facilities were adequate, 74.1% of respondents stated that community supports were good, 88.9% of respondents stated that midwives supports were good. No association was found between age of cadres ($p= 0.311$), level of education ($p= 0.146$), occupation ($p= 0.647$), knowledge ($p= 0.551$), attitude ($p= 0.218$), facilities ($p= 0.233$), community supports ($p= 0.749$), midwives supports ($p= 0.516$) and the implementation of SDIDTK. Length of period as a cadre and training together had an association with the implementation of SDIDTK by cadres.

Determinant factors of the implementation of SDIDTK by cadres were training and length of period as a cadre. Improvement of the implementation of SDIDTK is required; it can be done by conducting SDIDTK training to all posyandu (health service post) cadres.

Key words : growth and development detection and early intervention stimulation, determinant factors, implementation, cadre

Bibliography : 26 (2003-2011)