

## **ABSTRAK**

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**Analisis Implementasi Program Deteksi Dini Kanker Serviks Melalui Pemeriksaan IVA (Inspeksi Visual Asam Asetat) di Puskesmas Wilayah Kota Surabaya**

**xviii + 89 halaman + 21 tabel + 9 gambar + 9 lampiran**

Program deteksi kanker serviks melalui pemeriksaan IVA sudah diberlakukan di seluruh puskesmas induk di Surabaya sejak tahun 2010. Target sasaran adalah 80% WUS dan target minimal tiap puskesmas di Surabaya 25 orang perbulan, tetapi pencapaian rata-rata puskesmas hanya 3-4 orang perbulan. Tujuan penelitian adalah menganalisis faktor-faktor yang mempengaruhi implementasi program IVA di puskesmas wilayah Kota Surabaya.

Penelitian dilakukan secara observasional analitik dengan pendekatan *cross sectional*. Subyek penelitian adalah penanggungjawab program IVA di seluruh Puskesmas yang sudah melaksanakan program IVA sebanyak 52 orang. Pengumpulan data dilakukan melalui wawancara dan observasi menggunakan kuesioner terstruktur. Analisis data menggunakan analisis jalur dengan uji T pada program VPLS (*Visual Partial Least Square*).

Hasil penelitian menunjukkan pelaksanaan program IVA oleh puskesmas induk di wilayah Kota Surabaya 57,7% kurang dalam pemetaan sasaran, penyuluhan dan cakupan pemeriksaan. Komunikasi sebesar 51,9% kurang khususnya tentang kejelasan. Sikap responden 55,8% positif/mendukung program IVA. Karakter dukungan puskesmas sebesar 53,8% kurang mendukung dalam implementasi program IVA, pemahaman tentang standar dan sasaran 51,9% kurang memahami status dan SPM dari program IVA. Hasil uji struktur model didapatkan bahwa komunikasi, karakteristik dukungan puskesmas dan sikap penanggungjawab berpengaruh secara langsung terhadap implementasi program IVA, sedangkan sumberdaya dan pemahaman tentang standar sasaran berpengaruh secara tidak langsung terhadap implementasi program IVA melainkan melalui komunikasi dan sikap. Secara bersama-sama kelima faktor berpengaruh terhadap implementasi program IVA dengan kontribusi sebesar 82,7% dimana variabel yang paling berpengaruh adalah komunikasi.

Disarankan DKK menetapkan dan menginformasikan secara jelas program bahwa IVA bersifat wajib dan target SPM berlaku untuk seluruh puskesmas induk, serta meningkatkan penyediaan sumberdaya dan supervisi secara berkala. Puskesmas disarankan untuk menyusun rencana strategis dan melakukan monitoring internal tentang pelaksanaan di puskesmas.

Kata Kunci : Deteksi dini kanker servik, Implementasi program, Puskesmas

Pustaka : 41 (2000-2013)

## ABSTRACT

**Fritria Dwi Anggraini**

**Implementation Analysis of Cervical Cancer Early Detection Program using Acetic Acid Visual Inspection at Health Centers in Surabaya City**

**xviii + 89 pages + 21 tables + 9 figures + 9 enclosures**

Early detection of cervical cancer using Acetic Acid Visual Inspection has been done at all main health centers in Surabaya since 2010. The target is 80% of women of childbearing age and the minimum target for each health center is 25 person/month. In fact, average of achievement by health centers is 3-4 person/month. The aim of this research to analyze factors influencing the implementation of Acetic Acid Visual Inspection program at health centers in Surabaya City.

This was an analytical observational study with cross-sectional approach. Number of samples was 52 officers in charge who had implemented the program. Data collection used the methods of interview and observation using a structured questionnaire. Furthermore, data were analyzed by using T test on a program of Visual Partial Least Square.

The results of this research showed that in terms of the program implementation, as many as 57.7% of respondents was bad in mapping a target, providing information, and covering examination. In addition, 51.9% of respondents was bad in clarity when doing communication. On the other hand, 55.8% of respondents supported the program. As many as 53.8% of respondents was bad in supporting the program implementation. Similarly, 51.9% of respondents was bad in terms of understanding of status and minimum service standards of the program. Examining a structural model indicated that communication, supporting characteristics of health centers, and attitude of officers in charge directly influenced the program implementation. Contrarily, resources and understanding of the target standard indirectly influenced the program implementation through communication and attitude. These five factors jointly influenced the program implementation with a contribution equal to 82.7%. Communication was a dominant variable.

As a suggestion, District Health Office needs to determine and clearly inform about a mandatory of the program implementation. The target of minimum service standards needs to be conducted in all main health centers. The District Health Office also needs to increase the availability of resources and to supervise regularly. For health centers, they needs to arrange a strategic plan and do internal monitoring of the program implementation.

Key Words : Cervical Cancer Early Detection, Program Implementation,  
Health Center

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