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**Konsentrasi Administrasi dan Kebijakan Kesehatan**

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**ABSTRAK**

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**Faktor-Faktor yang Mempengaruhi Implementasi Program Desa Siaga oleh Bidan Desa di Kabupaten Banyuwangi**

**xiii + 75 halaman + 20 tabel + 6 gambar + 20 lampiran**

Program desa Siaga merupakan salah satu program untuk membentuk masyarakat memiliki kesiapan sumberdaya dan kemampuan serta kemauan untuk mencegah dan mengatasi masalah-masalah kesehatan secara mandiri, dengan tujuan terwujudnya desa yang sehat, peduli dan tanggap terhadap permasalahan kesehatan di wilayahnya. Program Desa Siaga di Kabupaten Banyuwangi dilakukan sejak tahun 2007, Desa siaga yang tergolong desa siaga paripurna yaitu 1,84% dan yang tergolong desa siaga bina sebesar 16,3%. Desa siaga bina diharapkan bisa menjadi desa siaga yang paripurna. Keberhasilan program ini ditentukan oleh implementasi program desa siaga, salah satunya yaitu implementasi oleh bidan desa.

Metodologi penelitian ini merupakan penelitian observasional dengan pendekatan *cross sectional.* Instrumen penelitian menggunakan kuesioner terstruktur terhadap kegiatan implementasi program desa siaga. Jumlah sampel 72 bidan desa yang berada di 17 Puskesmas Kabupaten Banyuwangi. Analisis univariat dengan distribusi frekuensi, analisis bivariat dengan uji *chi square,* dan analisis multivariat dengan uji *regresi logistik*.

Hasil penelitian menunjukkan pada implementasi program desa siaga baik yang memiliki komunikasi baik 81,58%, sumberdaya baik 78,95%, disposisi baik 94,74%, dan struktur birokrasi 89,74%. Pada implementasi program desa siaga kurang baik yang memiliki komunikasi baik 11,76%, sumberdaya baik 14,71%, disposisi baik 20,59%, dan struktur birokrasi 26,47%. Ke empat faktor mempunyai pengaruh terhadap implementasi program desa siaga. Komunikasi baik mempunyai pengaruh 12 kali terhadap implementasi baik, (ExpB=12,044), sumberdaya baik mempunyai pengaruh 10 kali terhadap implementasi baik (ExpB=10,417), disposisi baik mempunyai pengaruh 21 kali terhadap implementasi baik, (ExpB=20,615), dan struktur birokrasi baik mempunyai pengaruh 14 kali terhadap implementasi baik (ExpB=13,580).

Dalam rangka meningkatkan implementasi program desa siaga disarankan kepada bidan desa yang implementasinya kurang baik, meningkatkan penentuan sasaran program, peningkatan pengunaan SOP yang tepat oleh bidan desa, peningkaatan sosialisasi tentang program desa siaga kepada tokoh masyarakat; kepada organisasi kemasyarakatan; kepada masyarakat; dan kepada ibu hamil, meningkatkan keaktifan untuk mengikuti kegiatan seminar atau pelatihan terkait dengan program desa siaga.

Kata Kunci : Implementasi, Program Desa Siaga

Kepustakaan : 33 (1998-2012)

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**ABSTRACT**

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**Factors influencing the Implementation of the Alert Village Program by Village Midwives in District of Banyuwangi**

**xiii + 75 pages + 20 tables + 6 figures + 20 enclosures**

The alert village is one of the programs to develop community in order to have resources preparedness, ability and willingness to prevent and solve health problems independently to realize a healthy, caring, and responsive village. The alert village program in District of Banyuwangi has been done since 2007. The percentage of active alert villages and initiate alert villages consecutively was 1.84% and 16.3%. An initiate alert village was hoped to be an active alert village. The implementation of the program by village midwives was one of the success indicators of the alert village program.

This was observational research with cross-sectional approach. A research instrument used a structured questionnaire. Number of samples was 72 village midwives selected from 17 health centers in District of Banyuwangi. Data were analyzed using the methods of univariate (frequency distribution), bivariate (chi-square test), and multivariate (Logistic Regression test).

The results of this research revealed that among good alert villages, mostly respondents had good communication (81.58%), good resources (78.95%), good disposition (94.74%), and a bureaucracy structure (89.74%). In contrast, among bad alert villages, the proportion of respondents who had good communication was only 11.76%, good resources (14.71%), good disposition (20.59%), and a bureaucracy structure (26.47%). These four factors influenced the implementation of the alert village program. Good communication influenced as many as 12 times towards good implementation (ExpB=12.044), good resources influenced as many as 10 times towards good implementation (ExpB=10.417), good disposition influenced as many as 21 times towards good implementation (ExpB=20.615), and good bureaucracy structure influenced as many as 14 times towards good implementation (ExpB=13.580).

As a suggestion, to improve the implementation of the alert village program, midwives with bad implementation need to be more precise in determining program goals, increase the use of Standard Operating Procedure properly, and socialize the alert village program to community leaders, community organizations, community, and pregnant women. In addition, they also need to attend a seminar or training related to the alert village program.

Key Words : Implementation, the Alert Village Program

Bibliography : 33 (1998-2012)