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**ABSTRAK**

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**Implementasi Manajemen Terpadu Bayi Muda dalam Program Pelayanan Kesehatan Neonatal Esensial (0-28 hari) di Kabupaten Cilacap**

**xv + 95 halaman + 10 tabel + 3 gambar + 9 lampiran**

 Pada tahun 2013, cakupan neonatus komplikasi yang tertangani di Kabupaten Cilacap lebih rendah dari pada target Jawa Tengah, padahal cakupan kunjungan neonatal (KN) lebih tinggi dari pada target Jawa Tengah. Pelaksanaan KN yang seharusnya berpedoman pada MTBM di Kabupaten Cilacap belum dilaksanakan dengan baik. Tujuan penelitian ini menjelaskan implementasi MTBM dalam program pelayanan kesehatan neonatal esensial (0-28 hari) di Kabupaten Cilacap.

 Penelitian ini menggunakan metode kualitatif. Pengumpulan data dilakukan dengan wawancara mendalam. Informan utama penelitian ini 4 bidan desa di puskesmas yang mempunyai angka kematian neonatal rendah dan 4 bidan desa di puskesmas yang mempunyai angka kematian neonatal tinggi. Informan triangulasi penelitian ini 4 bidan koordinator anak, 4 kepala puskesmas, 1 Kasie Dinas Kesehatan Kabupaten Cilacap dan 16 ibu dari bayi muda. Analisis data dengan *content analisis.*

 Hasil penelitian ini menunjukan bahwa di semua puskesmas, belum ada surat edaran pelaksanaan MTBM dan target cakupan pelaksanaan MTBM. Bidan desa mendapatkan informasi tentang MTBM dari bidan koordinator hanya melalui sosialisasi.Kompetensi bidan desa masih kurang karena belum pernah mengikuti pelatihan. Di Puskesmas dengan angka kematian neonatal yang rendah, semua formulir MTBM di fasilitasi oleh puskesmas sedangkan di salah satu puskesmas dengan angka kematian neonatal yang tinggi, formulir MTBM dari puskesmas tidak mencukupi untuk semua sasaran. Masih ditemukan bidan belum melaksanakan MTBM sesuai dengan ketentuan karena membutuhkan waktu yang terlalu lama.

 Disarankan kepada DKK Cilacap untuk mengadakan pelatihan MTBM bagi bidan desa serta menentukan target cakupan MTBM.

Kata kunci : Manajemen Terpadu Bayi Muda (MTBM), kunjungan

 Neonatal

Jumlah Pustaka : 38

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**ABSTRACT**

**Norif Didik Nur Imanah**

**The Implementation of Integrated Management of Young Infant in the Program of Essential Newborn Health Services (0-28 days) in Cilacap District**

**xv + 95 pages + 10 tables + 3 figures + 9 enclosures**

 In 2003, coverage of handled neonatal complications in Cilacap District was lower than a target of Central Java Province although coverage of neonatal visits was higher than a target of the province. In Cilacap District, the implementation of neonatal visit had not referred to the guideline of MTBM. This study aimed to explain the implementation of MTBM in the program of essential newborn health services (0-28 days) in Cilacap District.

 This was qualitative research. Data were collected by conducting indepth interview. Main informants consisted of 4 village midwives working at health centers which had low infant mortality rate and 4 village midwives working at health centers which had high infant mortality rate. Informants for triangulation purpose encompassed 4 coordinator midwives for children, 4 heads of health centers, 1 head of section at Cilacap District Health Office (DHO), and 16 mother of young infants. Data were analyzed using content analysis.

 The result of this research showed that all had centers had not received an official letter of MTBM implementation and target of MTBM implementation coverage. Village midwives just obtained information of MTBM from socialization conducted by coordinator midwives. The village midwives had lack of competency regarding MTBM because they had not been trained. In health center with low infant mortality rate, all forms of MTBM were provided by the health centers. In contrast, in one of the health centers with high infant mortality rate, the number of MTBM forms were not sufficient for all targets. Some village midwives also had not implemented MTBM in accordance with the procedures because it took very long time.

 As suggestions, Cilacap DHO needs to conduct training of MTBM for village midwives and determine a target of MTBM coverage.

Key Words : Integrated Management of Newborn, Neonatal Visit

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