**Universitas Diponegoro**

**Fakultas Kesehatan Masyarakat**

**Program Studi Magister Ilmu Kesehatan Masyarakat**

**Konsentrasi Kesehatan Ibu dan Anak**

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**ABSTRAK**

**Shinta Rochmayanti**

**Implementasi Program Kemitraan Bidan dan Dukun oleh Bidan Praktek Swasta di Puskesmas Wilayah Kecamatan Semampir Kota Surabaya**

**xx + 129 halaman + 7 tabel + 5 gambar + 28 lampiran**

 Terbatasnya pemahaman masyarakat tentang pentingnya pertolongan persalinan oleh Nakes terlatih sehingga dukun merupakan alternatif pemilihan penolong persalinan, disamping faktor sosial ekonomi, budaya, dan kinerja bidan. Upaya peningkatan cakupan persalinan belum optimal ditandai masih adanya dukun yang masih menolong persalinan dikota Surabaya yaitu sebesar 4,75% pada tahun 2012. Tujuan Penelitian ini adalah untuk menjelaskan implementasi program kemitraan bidan dan dukun oleh bidan praktek swasta dan faktor yang terkait di Puskesmas wilayah Kecamatan Semampir Kota Surabaya.

Jenis penelitian ini adalah deskriptif kualitatif*.* Pengumpulan data dilakukan dengan teknik wawancara mendalam (*Indepth Interview*) pada 4 bidan praktek Swasta sebagai informan utama. Dukun, bidan koordinator, kepala Puskesmas, Kabid Kesga DKK Surabaya, Toma dan ibu bersalin sebagai informan triangulasi. Analisa data menggunakan metode analisis isi (*content analysis*).

Hasil penelitian menunjukkan belum ada aturan tertulis pelaksanaan program. Diseminasi program hanya bersifat pengenalan, dalam pelaksanaan kemitraan ada beberapa langkah yang belum dilaksanakan oleh pelaksana program, pencatatan khusus kemitraan bidan dan dukun belum tersedia, pelaporan dilakukan setiap bulan tetapi tidak didiskusikan dan SOP belum tersedia. Sosialisasi secara khusus belum pernah dilaksanakan. Sikap pelaksana terhadap kemitraan ada yang menerima dan menolak, penerapan program dengan pedoman belum sesuai. Ketersediaan sumber daya belum mendukung kegiatan program. Kesimpulan yang diperoleh dari penelitian adalah belum optimalnya implementasi Program Kemitraan Bidan dan Dukun di Puskesmas Wilayah kecamatan semampir Kota Surabaya karena cakupan kegiatan Program KIA/KB masih jauh dari target, serta belum ada kebijakan yang mendukung pelaksanaan. Maka diharapkan kepada DKK Surabaya untuk mengupayakan tetap berlangsungnya kemitraan dengan dukungan seluruh aspek diantaranya ketersediaan sumber daya yang memadai, kejelasan ukuran dan tujuan kebijakan, peningkatan pengetahuan masyarakat.

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| Kata kunci | : | Implementasi, Program Kemitraan Bidan dan Dukun  |
| Kepustakaan | : | 65 (1992-2011) |

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Faculty of Public Health

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**ABSTRACT**

**Shinta Rochmayanti**

**Implementation of Partnerships Program between Midwife and Traditional Birth Attendants by Private Practice Midwife at Health Centre at Semampir Subdistrict in Surabaya City**

xx + 129 pages + 7 tables + 5 figures + 28 enclosures

An understanding of communities about the importance of deliveries assisted by trained health workers was limited. As a result, traditional birth attendants (TBAs) were being alternatives to assist deliveries. Besides that, factors of socio-economy, culture, and performance of midwives were being other reasons to choose TBAs. Efforts to increase coverage of deliveries assisted by health workers had not been optimal because as many as 4.75% of TBAs in Surabaya City in 2012 assisted deliveries. The aim of this study was to explain the implementation of the partnerships program between midwife and TBAs by Private Practice Midwives (PPM) and the related factors at health centre at Semampir Subdistrict in Surabaya City.

This was a descriptive-qualitative study. Data were collected using indepth interview towards four PPM as main informants. TBAs, coordinator midwife, head of health centre, head of family health at Surabaya City Health Office (CHO), community leaders, and maternal were as informants for triangulation purpose.

The results of this research showed that there was no written regulation about the program implementation. Dissemination of the program was just introduction. Some steps in the partnerships program had not been implemented by the program implementers. There was no specific record of partnerships between midwives and TBAs. There was any monthly report but it was not discussed. SOP was unavailable. Specific socialisation had not been conducted. Some implementers agreed and some of them disagreed towards partnerships. The program implementation had not been in accordance with a guidance. Availability of resources had not supported activities of the program. In conclusion, the implementation of the partnerships program between midwife and TBAs at Semampir Subdistrict in Surabaya City had not been optimally implemented because coverage of activities of Maternal and Child Health/Family Planning was quite far from the target. In addition, there was no policy to support the program. Surabaya CHO needs to make an effort to maintain partnerships with supports from all aspects like availability of resources, clarity of measurement and policy objective, and improvement of community’s knowledge.

Key Words: implementation; partnerships program between midwife and TBAs

Bibliography: 65 (1992-2011)