**Universitas Diponegoro**

**Fakultas Kesehatan Masyarakat**

**Program Studi Magister Ilmu Kesehatan Masyarakat**

**Konsentrasi Kesehatan Ibu dan Anak**

**2015**

**ABSTRAK**

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**Analisis Pelaksanaan Program Stabilisasi Bayi Asfiksia oleh Bidan di Puskesmas Kota Parepare**

**xvii + 136 halaman + 6 tabel + 4 gambar + 15 lampiran**

 Penyebab kematian bayi di Kota Parepare Sulawesi Selatan tahun 2014 disebabkan oleh asfiksia 31%. Kematian bayi dengan asfiksia terjadi pada usia ≤ 48 jam setelah kelahiran, 46 % terjadi di Puskesmas dan 54 % terjadi setelah sampai di tempat rujukan. Hal tersebut dapat disebabkan karena program stabilisasi pada bayi asfiksia belum optimal. Penelitian ini bertujuan untuk menganalisis pelaksanaan program stabilisasi pada bayi asfiksia oleh bidan di Puskesmas Kota Parepare.

 Penelitian ini menggunakan metode kualitatif. Informan utama adalah bidan pelaksana di Puskesmas yang telah mengikuti pelatihan manajemen asfiksia (10 orang). Informan triangulasi bidan koordinator, kepala Puskesmas Kasie KIA Dinas Kesehatan Kota Parepare dan Keluarga Bayi yang telah mengalami asfiksia. Puskesmas yang dipilih adalah 3 Puskesmas dengan kematian bayi asfiksia tertinggi di Kota Parepare. Data dikumpulkan melalui wawancara mendalam. Pengolahan dan analisis data menggunakan analisis isi.

Hasil penelitian menunjukkan bahwa pelaksanaan program stabilisasi bayi asfiksia oleh bidan Puskemas belum melaksanakan enam komponen yaitu komponen stabilisasi gula darah dan pemeriksaan laboratorium. Hal tersebut dilatarbelakangi aspek komunikasi kurangnya kejelasan, konsistensi informasi tentang program stabilisasi bayi asfiksia, dari aspek disposisi/sikap masih kurangnya komitmen bidan pelaksana dalam mengimplementasikan program stabilisasi bayi asfiksia, adanya keterbatasan tenaga terlatih, belum ada dana khusus program stabilisasi bayi asfiksia, masih terbatasnya sarana prasarana, belum ada mekanisme pelaporan dan Standar Operasional Prosedur (SOP) pelaksanaan program stabilisasi bayi asfiksia.

Disarankan kepada Dinas Kesehatan Kota Parepare untuk memberikan pelatihan kepada bidan pelaksana tentang stabilisasi bayi asfiksia, meningkatkan sosialisasi stabilisasi bayi asfiksia kepada bidan pelaksana, menyusun SOP dan format pelaporan.

Kata kunci : Stabilisasi, Bayi Asfiksia, Bidan Puskesmas,

 implementasi

Kepustakaan : 42 (2000-2014)

**Diponegoro University**

**Faculty of Public Health**

**Master’s Study Program in Public Health**

**Majoring in Maternal and Child Health**

**2015**

**ABSTRACT**

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**Implementation Analysis of Stabilisation Program of Asphyxia Babies by Midwives at Health Centres in Parepare City**

**xvii + 136 pages + 6 tables + 4 figures + 15 appendices**

Infant mortalities in Parepare City in South Sulawesi in 2014 were mostly caused by asphyxia (31%). The places of these mortalities with asphyxia occurred among infants aged less than or equal to 48 hours after birth were at health centres (46%) and at referral units (54%). This problem was due to unoptimal stabilisation program for asphyxia babies. The aim of this study was to analyse the implementation of the stabilisation program of asphyxia babies by midwives at health centres in Parepare City.

This was a qualitative study. Main informants consisted of implementer midwives at health centres who had followed training of asphyxia management (10 persons). Informants for triangulation purpose consisted of coordinator midwives, heads of health centres, head of maternal and child health sections at Parepare City Health Office (CHO), and asphyxia babies’ families. Three health centres with the highest asphyxia baby mortality rate in Parepare City were selected. Data were collected by conducting indepth interview and analysed using a method of content analysis.

The results of this research showed that the stabilisation program of asphyxia baby by midwives had not implemented two of six components namely components of blood sugar stabilisation and laboratory analysis. These condictions were due to communication aspects like lack of clarity and lack of information consistency about the program. Meanwhile, viewed from the aspect of disposition/attitude, there were lack of midwives’ commitments in implementing the program, lack of trained health officers, no specific budget, lack of facilities, and no mechanism of reporting and Standard Operating Procedure (SOP) for implementing the program.

Parepare CHO needs to provide training for implementer midwives about stabilisation of asphyxia baby, to increase socialisation of the program to implementer midwives, and to arrange SOP and a report form.

Keywords : Stabilisation, Asphyxia Baby, Midwife at Health Centre,

 Implementation

Bibliography: 42 (2000-2014)