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**ABSTRAK**

**Aisa Nirmala Setyani**

**Analisis Implementasi Manajemen Program Usaha Kesehatan Gigi Sekolah (UKGS) terhadap Status Kesehatan Gigi dan Mulut Siswa Sekolah Dasar di Kota Semarang**

**xii + 113 halaman + 8 tabel + 10 lampiran**

Program UKGS berjalan sejak tahun 1951 namun status kesehatan gigi anak usia 12 tahun belum memuaskan. Hasil Riskesdas 2013, menunjukkan prevalensi karies gigi dalam 12 bulan terakhir anak umur 12 tahun di Indonesia adalah 24,8%. Penelitian ini bertujuan untuk menganalisis implementasi program UKGS meliputi ukuran dan tujuan kebijakan, sumberdaya, komunikasi antara organisasi, karakteristik badan pelaksana, dan disposisi pelaksana.

Penelitian ini menggunakan pendekatan kualitatif. Pengumpulan data dilakukan dengan wawancara mendalam dan observasi. Informan utama berjumlah 10 orang yaitu dokter gigi dan perawat gigi. Informan triangulasi terdiri dari informan triangulasi subjek dan obyek. Informan Triangulasi subjek berjumlah 13 orang yaitu Kepala Puskesmas, Seksi Kesga DKK, Kepala Sekolah, Guru UKS. Informan Triangulasi objek berjumlah 441 orang yaitu siswa Kelas VI. Teknik analisis data menggunakan analisis isi.

Hasil penelitian ini menunjukkan implementasi program UKGS belum mencapai target walaupun status kesehatan gigi dan mulut berdasar OHI-S dan DMF-T dalam kategori baik. Ukuran dan tujuan kebijakan program pemahamannya bervariasi antar pelaksana. Dukungan sumberdaya terpenuhi yaitu sumber daya manusia, materi, serta sarana dan prasarana. Komunikasi antar organisasi DKK dan Depdikbud masih kurang. Karakteristik agen pelaksana yang didukung dengan SOP, hanya terdapat di beberapa Puskesmas. Disposisi pelaksana program UKGS sebagian besar mendukung namun tidak semua pelaksana program berkomitmen dan bertanggungjawab dalam pelaksanaan program UKGS dikarenakan ada pelaksana yang ditempatkan tidak sesuai kompetensinya. Kelima aspek ini terkait dengan implementasi program UKGS. Depdikbud dan DKK Semarang sebaiknya melakukan pelatihan kepada guru dengan dokter gigi sebagai fasilitatornya. DKK Semarang perlu melakukan monitoring dan evaluasi program UKGS rutin dan berkala.

Kata kunci : Implementasi, UKGS, Semarang

Kepustakaan : 64 (1992-2015)

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**ABSTRACT**

**Aisa Nirmala Setyani**

**Management Implementation Analysis of School Dental Health Program towards Status of Oral Health among Elementary School Students in Semarang City**

**xii + 113 pages + 8 tables + 10 appendices**

A School Dental Health Program has been conducted since 1951. Notwithstanding, status of oral health among children aged 12 years old has not been satisfied yet. The results of Basic Health Research in 2013 demonstrated that a prevalence rate of dental caries in the last 12 months on children aged 12 years old in Indonesia was 24.8%. The aim of this study was to analyse the implementation of the School Dental Health Program consisted of indicators and objectives of a policy, resource, inter-organisational communication, characteristics of implementing agencies, and disposition of implementers.

This was a qualitative study. Data were collected by conducting indepth interview and observation. Main informants were 10 persons consisted of dentist and dental hygienist. Informants for triangulation purpose consisted of subject and object. Informants for triangulation of subject were 13 persons consisted of heads of health centres, section of family health at District Health Office (DHO), heads of schools, teachers of School Health Effort. Meanwhile, informants for triangulation of object were 441 elementary school students at Grade VI. Data were analysed using a method of content analysis.

The results of this research showed that the implementation of the program had not reached the target even though status of oral health based on OHI-S and DMF-T was categorised as good. The implementers had various understanding about indicators and objectives of the program policy. There was sufficient resource like human resource, materials, and facilities. There was a lack of inter-organisational communication between DHO and Culture and Education Department. Characteristics of implementing agencies supported by SOP were only available at some health centres. Disposition of the program implementers mostly supported but not all program implementers had commitment and was responsible in implementing the program. It was due to incompetence. These five aspects related to the program implementation. The Culture and Education Department and DHO need to conduct a training for teachers by involving a dentist as a facilitator. In addition, DHO needs to monitor and evaluate the program periodically.

Keywords : Implementation, School Dental Health Effort, Semarang

Bibliography: 64 (1992-2015)