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**Fakultas Kesehatan Masyarakat**

**Program Studi Magister Ilmu Kesehatan Masyarakat**

**Konsentrasi Kesehatan Ibu dan Anak**

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**ABSTRAK**

**Yana Eka Mildiana**

**Evaluasi Pelaksanaan Program Pelayanan Kesehatan Peduli Remaja (PKPR) di Puskesmas Wilayah Kabupaten Jombang**

**xv + 120 halaman + 4 tabel + 3 gambar + 10 lampiran**

Kasus kenakalan remaja terus meningkat di Kabupaten Jombang, pada tahun 2013 mengalami peningkatan kasus 20%. Oleh karena itu diperlukan program Puskesmas dengan Pelayanan Kesehatan Peduli Remaja (PKPR), untuk menurunkan angka kenakalan remaja yang akan berdampak pada penurunan AKI dan AKB akibat kehamilan remaja. Tujuan Penelitian ini adalah Mengevaluasi pelaksanaan program pelayanan kesehatan peduli remaja di Puskesmas wilayah Kabupaten Jombang. Jenis penelitian ini kualitatif.

Subjek penelitian dari informan utama adalah koordinator PKPR yang dipilih dari Puskesmas PKPR dengan cakupan rendah dan informan triangulasi terdiri dari Kepala Puskesmas, tenaga pelaksana dan remaja. Data dikumpulkan dengan teknik wawancara mendalam dan observasi. Pengolahan dan analisis data menggunakan analisis isi.

Hasil penelitian menunjukkan pelaksanaan program Puskesmas PKPR di Kabupaten Jombang sudah berjalan tapi masih belum sesuai dengan standart/pedoman yang ada, seperti pada komponen input yang dilatarbelakangi oleh : 1) Tenaga pelaksana memiliki beban kerja yang banyak dan belum mendapatkan pelatihan khusus PKPR; 2) Alokasi dana belum memadai sehingga program belum dilaksanakan sesuai pedoman, seperti tidak adanya insentif, pelatihan PKPR, sosialisasi eksternal; 3) Sarana prasarana program sebagian besar belum tersedia. Sedangkan pada komponen proses dilatarbelakangi oleh 1) Perencanaan program belum dilakukan sesuai pedoman; 2) Pengorganisasian pembagian tupoksi belum jelas; 3) Pelaksanaan KIE tidak dilakukan di dalam gedung karena dianggap sama dengan konseling dan konseling sebatas keluhan dari penyakit yang diderita; 4) Monitoring evaluasi belum ada umpan balik.

Disarankan agar DKK mengalokasikan anggaran ke Dinkes Propinsi untuk peningkatan kualitas tenaga pelaksana dan sarana prasarana, bagi Puskesmas perlu adanya uraian pekerjaan dan SOP yang jelas sehingga pekerjaan lebih terarah,pelaksanaan kegiatan dan monitoring evaluasi sesuai pedoman agar dapat dilaksanakan dengan memberikan umpan balik.

Kata kunci :Evaluasi Program, Pelayanan Kesehatan, Peduli, Remaja,

Kepustakaan: 46 (1992-2013)

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**ABSTRACT**

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**Implementation Evaluation of Adolescent Health Care Service (PKPR) Program at Health Centres in Jombang District**

**xv + 120 pages + 4 tables + 3 figures + 10 appendices**

Juvenile delinquency cases in Jombang District increased about 20% in 2013. Therefore, a program of adolescent health care service (PKPR) needs to be implemented at a health centre to decrease a juvenile delinquency rate that would decrease maternal and infant mortality rates due to adolescent pregnancy. The aim of this study was to evaluate implementation of the PKPR program at health centres in Jombang District.

This was a qualitative study. Main informants consisted of coordinators of the PKPR program selected from health centres with low coverage of PKPR. Informants for triangulation purpose consisted of heads of health centres, health workers, and adolescents. Data were collected by conducting interview and observation. Furthermore, data were analysed using a method of content analysis.

The results of this research showed that the implementation of the PKPR program in Jombang District had been implemented even though it was not in accordance with an available standard/a guideline like in the following input component: 1) health workers had overload work burden and had not been trained PKPR; 2) budget allocation was not sufficient by which the program could not been well implemented, like no incentive, no training of PKPR, and no external socialisation; and 3) most of facilities to implement the program were not available. A process component demonstrated that: 1) a plan of the program was not in accordance with the guidance; 2) sharing tasks and functions was not clearly organised; 3) communication, information, and education were not conducted in a room because it was assumed similar with counselling. Type of counselling was limited for complaints of a disease; and 4) there was no feedback for aspects of monitoring and evaluating.

District Health Office needs to propose budget to Province Health Office to improve a quality of health workers and facilities. Health centres need to arrange job descriptions and SOP clearly to guide health workers in implementing the program. Monitoring and evaluating aspects needs to be conducted in accordance with the guidance by providing feedback.

Keywords : Program Evaluation, Health Service, Care, Adolescent

Bibliography: 46 (1992-2013)