

INTISARI

Latar Belakang. Perawatan selama persalinan dan kehamilan yang telah diperbaiki dapat secara potensial mengurangi kematian maternal 50 sampai 80 persen serta kematian perinatal 30 sampai 40 persen. Perbaikan aspek sosial, budaya, ekonomi, dan pendidikan, bisa membantu mengatasi 64 persen penyebab kematian ibu. Perbaikan penanganan klinis, bisa mengatasi 36 persen kematian ibu.

Kesadaran masyarakat akan bahaya dan tanda kehamilan merupakan upaya meminimalkan kegawat daruratan obstetri, namun banyak kepercayaan tradisional dan praktek penundaan pengambilan keputusan untuk mencari perawatan pada fasilitas kesehatan yang masih dijalankan di masyarakat

Tujuan. Menggambarkan proses pengambilan keputusan yang dilakukan suami atau anggota keluarga yang lebih mengetahui proses terjadinya kematian maternal dengan kasus tiga keterlambatan yaitu keterlambatan mengenal tanda bahaya di rumah, keterlambatan pengambilan keputusan dan keterlambatan sarana transportasi serta tradisi yang diyakini masyarakat tentang kehamilan dan persalinan.

Metode. Penelitian kualitatif, kasus penelitian sebanyak empat informan dan tujuh informan kunci. Kasus diambil secara purposive dengan karakteristik kasus kematian maternal yaitu variasi umur, jumlah paritas, pekerjaan, pendidikan, diagnosa saat meninggal, wilayah tempat tinggal, menggunakan rujukan atau tidak, cara persalinan dan tahun kematian. Analisis data adalah menggunakan pendekatan yang dikemukakan oleh McCarthy dan Main.

Hasil. Kematian ibu terjadi karena factor medis dan non medis. Faktor medis adalah suami dan anggota keluarga tidak mengenal adanya tanda bahaya yang terjadi di rumah dan dan keterlambatan pada fasilitas pelayanan kesehatan. Sedangkan factor non medis meliputi pengambilan keputusan pada kasus kegawatdaruratan yang lambat, konsep kehamilan-kematian, pantangan makanan serta tingkat social ekonomi yang rendah. Faktor medis dan non medis saling mempengaruhi atas terjadinya keterlambatan penanganan kegawatdaruratan medis yang berakibat pada kematian ibu.

Kesimpulan: Faktor medis dan non medis saling mempengaruhi atas terjadinya keterlambatan penanganan kegawatdaruratan medis yang berakibat pada kematian ibu.

ABSTRACT

Background. Caring during delivery and pregnancy which have been changed can reduced maternal mortality 50 until 80 percent and also perinatal mortality 30 until 40 percent potentially. The developing of social, cultural, economic, and education aspect, can assist to overcome 64 persen the maternal mortality caused. The change of clinical management can overcome 36 persen of maternal mortality.

The awareness of community about pregnancy danger and pregnancy sign is an effort to minimized emergency obstetric, but a lot of traditional belief and practice of postponement decision making to looking for the treatment in health provaider still have been doing in the community.

Purpose. The purpose of this study was to described of decision making proces by husband or the family who knows the proces of maternal mortality with three delaying cases, there are delay to knowing the sign of the danger in home, delay to decision making and the delaying of transportation fasilitied and also the tradition that believed by community about pregnancy and delivery.

Method. This study used qualitative research. The source of this research are four informans and seven key informan. The case was taken purposive with characteristic of maternal mortality cases, there are variation of age, number of parity, work, education, diagnosa, residence, using reference or not, way of delivery and death year. The data wase analized by approach that has been proposed by McCarthy and Main.

Result. Maternal mortality of pregnan and delivery common caused by the medical and non-medical aspects. The medical aspect is the husband or family member didn't knowing the dangers sign that happened in home during pragnancy and the health facility such as blood bank in hospital is minimal so it influenced the cases. Non medical aspect by the dicision making fully to the husband or senior family members, the existing of some beliefs and tradition besides the socio-economic status also may contribute to the maternal mortality.

Conclusion: The medical and non-medical aspects may influence in the decision-making proces in managing of the obstetric emergency that cause maternal mortality.