



ABSTRAK

Latar belakang: Pelayanan antenatal terpadu yang sesuai standar diharapkan dapat menurunkan angka kematian ibu (AKI), hal ini dikarenakan ibu hamil dapat terdeteksi sejak awal bila memiliki risiko tinggi. Pemantauan cakupan program secara berkelanjutan serta ketersediaan sistem informasi kesehatan yang mampu menyediakan informasi juga penting dilakukan. Hingga saat ini, belum dilakukan evaluasi terkait program pelayanan antenatal terpadu, penggunaan sistem informasi SIPIA maupun kualitas pelayanan antenatal terpadu di Kabupaten Bantul, sehingga perlu dilakukan penilaian hal tersebut.

Metode: Penelitian bunding tesis ini terdiri dari 3 sub-studi. Evaluasi program pelayanan antenatal terpadu dan evaluasi surveilans SIPIA menggunakan studi deskriptif. Sampel pada evaluasi program dan evaluasi surveilans adalah 18 orang petugas dinas kesehatan dan puskesmas, dengan wawancara dan telusur dokumen. Studi analitik kualitas pelayanan antenatal terpadu menggunakan studi *cross sectional*, dengan uji regresi logistik sederhana dan berganda. Sampel studi analitik adalah ibu hamil di 17 puskesmas yang terpilih melalui *cluster random sampling*.

Hasil: Evaluasi program pelayanan antenatal terpadu sudah tersedia pedoman, SOP, dan sumber pendanaan, namun masih didapatkan kurangnya psikolog. Capaian program ini sebesar 79,74%. Kualitas surveilans SIPIA didapatkan akseptabilitas (100%), kesederhanaan (88,30%), ketepatan (66,70%), kelengkapan (44,60%), kegunaan (38,90%), dan fleksibilitas (33,30%). Kualitas pelayanan antenatal terpadu adalah 66%, dengan faktor prediktor adalah waktu kunjungan, kepemilikan asuransi, dan pendidikan.

Kesimpulan: Pelayanan antenatal terpadu di Kabupaten Bantul sudah cukup baik, dengan capaian program di atas standar, namun sistem surveilans yang masih belum optimal. Perlu ditingkatkan capaian tiap pemeriksaan dalam pelayanan antenatal terpadu, kelengkapan dan ketepatan dalam sistem surveilans, serta mendorong ibu hamil untuk melakukan pelayanan antenatal terpadu pertama kalinya di puskesmas agar dapat mendeteksi risiko tinggi sejak dini.

Kata kunci: pelayanan antenatal terpadu, kualitas pelayanan, risiko tinggi



ABSTRACT

Background: Integrated antenatal care that meets standards is expected to reduce maternal mortality (MMR), as pregnant women can be identified early if they are at risk. Continuous program coverage monitoring and a health information system are also essential. It is necessary to evaluate the integrated antenatal care program, the use of the SIPIA information system, and the quality of integrated antenatal care in Bantul Regency, as these concerns have not yet been evaluated.

Methods: There are three sub-studies in this thesis funding research. The integrated antenatal care program and SIPIA surveillance are evaluated descriptively. The program evaluation and surveillance evaluation sample consisted of 18 health office and public health center (PHC) officers, obtained through interviews and document searches. The quality of integrated antenatal care is analyzed using a cross-sectional study with simple logistic regression and multiple logistic regression analysis. The analytical study sample consisted of pregnant women chosen from 17 PHCs using cluster random sampling.

Results: Integrated antenatal care program evaluation has guidelines, SOPs, and funding sources, but psychologists are inadequate. Program achievement was 79.74%. SIPIA surveillance had 100% acceptability, 88% simplicity, 66.70% timeliness, 44.60% completeness, 38.90% usefulness, and 33.30% flexibility. Integrated antenatal care quality is 66%, predicted by visit time, insurance ownership, and education.

Conclusion: Integrated antenatal care in Bantul Regency is quite good, with program achievements that are above average, but the surveillance system is still not optimal. It is essential to improve the performance of each assessment in integrated antenatal care, as well as the completeness and timeliness of the surveillance system. Additionally, pregnant women should be encouraged to attend integrated antenatal care for the first time at PHCs in order to identify high risks early.

Keywords: integrated antenatal care, quality of service, high risk