

## ABSTRAK

**Latar Belakang:** Persalinan *sectio caesarea* (SC) merupakan salah satu intervensi medis penting yang dapat menyelamatkan ibu dan bayi jika dilakukan atas dasar indikasi klinis yang tepat. Namun, peningkatan angka SC secara global dan nasional menimbulkan kekhawatiran akan terjadinya intervensi medis yang tidak berdasarkan kebutuhan klinis. Organisasi Kesehatan Dunia (WHO) merekomendasikan angka ideal SC sebesar 10–15%, tetapi rata-rata global telah mencapai 18,6%. Di Indonesia, angka SC berdasarkan Survei Kesehatan Indonesia tahun 2023 tercatat sebesar 25,9%, dan di Daerah Istimewa Yogyakarta mencapai 38,1%. Di Kabupaten Sleman, data dari *Health and Demographic Surveillance System* (HDSS) menunjukkan bahwa angka SC meningkat dari 26,11% pada siklus 3 menjadi 34,63% pada siklus 5. Meskipun terjadi sedikit penurunan pada siklus berikutnya, angkanya tetap berada di atas ambang batas WHO. Sementara itu, cakupan kepemilikan asuransi kesehatan di Sleman sangat tinggi, yaitu 99,15%, yang secara teori memungkinkan akses layanan persalinan menjadi lebih luas. Penelitian ini bertujuan untuk menganalisis hubungan antara kepemilikan asuransi kesehatan dan metode persalinan di Kabupaten Sleman menggunakan analisis data *Health and Demographic Surveillance System* (HDSS) Sleman tahun 2015–2021.

**Metode:** Penelitian ini merupakan studi kohort retrospektif menggunakan data sekunder dari *Health and Demographic Surveillance System* (HDSS) Sleman periode 2015–2021. Subjek penelitian adalah ibu yang tercatat pernah bersalin dan memenuhi kriteria inklusi dan eksklusi, dengan total sampel sebanyak 853 responden. Analisis dilakukan secara univariat, bivariat (uji *chi-square*), dan multivariat (regresi logistik berganda), menggunakan perangkat lunak STATA, untuk melihat hubungan antara kepemilikan asuransi dengan peluang menjalani persalinan caesar, dengan mengontrol variabel sosiodemografi seperti usia ibu, tempat tinggal, paritas, usia kehamilan, pendidikan, dan pekerjaan.

**Hasil:** Mayoritas ibu di Kabupaten Sleman melahirkan secara normal (68,58%), sementara 31,42% menjalani persalinan caesar. Kepemilikan asuransi kesehatan tercatat tinggi (73,95%), dengan sebagian besar merupakan peserta BPJS Kesehatan. Namun, kepemilikan asuransi kesehatan tidak berhubungan signifikan dengan metode persalinan (AOR = 1,13; 95% CI: 0,79–1,61). Faktor yang berpengaruh signifikan terhadap peluang menjalani SC adalah usia ibu >31 tahun (AOR = 4,96; 95% CI: 2,05-12,02), tempat tinggal di perkotaan (AOR = 1,75; 95% CI: 1,29-2,38), dan usia kehamilan >43 minggu (AOR = 5,05; 95% CI: 1,22-20,96), sedangkan paritas tinggi menurunkan peluang SC (AOR = 0,38; 95% CI: 0,23-0,61). Tingkat pendidikan dan pekerjaan ibu tidak signifikan.

**Kesimpulan:** Kepemilikan asuransi kesehatan tidak berpengaruh signifikan terhadap peluang menjalani persalinan caesar. Sebaliknya, faktor-faktor seperti usia ibu, tempat tinggal, paritas, dan usia kehamilan berperan penting.

**Kata Kunci:** Persalinan *Caesar*, Kepemilikan Asuransi, *Health and Demographic Surveillance System* (HDSS), Kabupaten Sleman

## ABSTRACT

**Background:** Caesarean section (CS) is a critical medical intervention that can save the lives of both mothers and newborns when performed based on appropriate clinical indications. However, the increasing CS rates globally and nationally have raised concerns regarding the potential for medically unnecessary procedures. The World Health Organization (WHO) recommends an ideal CS rate of 10–15%, yet the global average has reached 18.6%. In Indonesia, data from the 2023 National Health Survey reported a CS rate of 25.9%, and in the Special Region of Yogyakarta, it reached 38.1%. In Sleman Regency, data from the Health and Demographic Surveillance System (HDSS) showed that the CS rate increased from 26.11% in cycle 3 to 34.63% in cycle 5. Although a slight decrease was observed in the subsequent cycles, the rate remained above the WHO threshold. Meanwhile, health insurance coverage in Sleman is very high, at 99.15%, which theoretically allows broader access to delivery services. This study aims to analyze the relationship between health insurance ownership and delivery methods in Sleman Regency using HDSS Sleman data from 2015 to 2021.

**Methods:** This study employed a retrospective cohort design using secondary data from the Health and Demographic Surveillance System (HDSS) Sleman for the 2015–2021 period. The study population consisted of women who had given birth and met the inclusion and exclusion criteria, resulting in a total sample of 853 respondents. Data were analyzed using univariate, bivariate (chi-square test), and multivariate (multiple logistic regression) methods, with the aid of STATA software. The analysis aimed to examine the association between health insurance ownership and the likelihood of undergoing a caesarean section, while controlling for sociodemographic variables such as maternal age, place of residence, parity, gestational age, education level, and employment status.

**Results:** The majority of mothers in Sleman Regency delivered vaginally (68.58%), while 31.42% underwent caesarean section. Health insurance coverage was high (73.95%), with most respondents enrolled in the BPJS Kesehatan program. However, health insurance ownership was not significantly associated with the delivery method (AOR = 1.13; 95% CI: 0.79–1.61). Factors that were significantly associated with a higher likelihood of caesarean delivery included maternal age over 31 years (AOR = 4.96; 95% CI: 2.05–12.02), urban residence (AOR = 1.75; 95% CI: 1.29–2.38), and gestational age over 43 weeks (AOR = 5.05; 95% CI: 1.22–20.96). In contrast, higher parity was associated with a lower likelihood of CS (AOR = 0.38; 95% CI: 0.23–0.61). Education level and employment status were not significantly associated with the method of delivery.

**Conclusion:** Health insurance ownership was not significantly associated with the likelihood of undergoing caesarean section. Conversely, factors such as maternal age, place of residence, parity, and gestational age played a more prominent role in determining the mode of delivery.

**Keywords:** Cesarean Delivery, Health Insurance Ownership, Health and Demographic Surveillance System (HDSS), Sleman Regency