

BUDIMAN : Kualitas Pelayanan Keluarga Berencana Di Kecamatan Unaaha Kabupaten Konawe. Tesis, Pascasarjana Studi Ilmu Kependudukan. Universitas Gadjah Mada.

Salah satu upaya yang telah dan terus dilakukan oleh pemerintah dalam pembangunan kependudukan dan keluarga kecil berkualitas adalah mengendalikan jumlah penduduk dan meningkatkan kualitas penduduk melalui program keluarga berencana. Kecamatan Unaaha sebagai pusat ibu kota Kabupaten Konawe memiliki jumlah pasangan usia subur (PUS) tahun 2007 sebanyak 3.511 dengan jumlah peserta KB aktif sebanyak 2.363 (67,30%) sedangkan tahun 2008 PUS berjumlah 3.624 dengan jumlah peserta KB aktif 2.688 (74,17%). Data tersebut menunjukkan jumlah peserta KB aktif di Kecamatan Unaaha cukup tinggi. Namun, secara empiris belum diketahui apakah tingginya kepesertaan KB aktif di Kecamatan ini diikuti pula dengan peningkatan kualitas pelayanan yang diberikan oleh *provider*.

Untuk mengkaji Kualitas Pelayanan Keluarga Berencana Di Kecamatan Unaaha Kabupaten Konawe, sebagaimana tujuan yang ingin dicapai dalam penelitian ini, maka penulis menggunakan jenis penelitian kuantitatif dengan tehnik penelitian survey. Selanjutnya untuk menjawab rumusan masalah dalam penelitian ini, maka dalam analisis data menggunakan teknik statistik deskriptif dengan program SPSS 12.0 *for windows*.

Kesimpulan dari penelitian ini menunjukkan bahwa karakteristik demografis akseptor seperti umur, pendidikan dan pekerjaan mempengaruhi penilaian akseptor terhadap kualitas pelayanan di Kecamatan Unaaha. Adapun gambaran utuh pandangan akseptor tentang kualitas pelayanan Keluarga Berencana di Kecamatan Unaaha berdasarkan enam elemen pengukuran menunjukkan bahwa *pertama*, pilihan terhadap metode kontrasepsi umumnya merupakan keputusan yang diambil sendiri oleh akseptor, baik berkaitan dengan unsur-unsur pilihan pribadi, metode yang disediakan dan ditawarkan oleh petugas, kecocokan metode dan tujuan pemakaiannya. *Kedua*, kualitas informasi yang diberikan oleh *provider* masih sangat rendah, hal ini ditandai banyaknya keluhan dari akseptor menyangkut informasi KB terutama menyangkut jenis kontrasepsi yang akan mereka gunakan. *Ketiga*, kemampuan teknis *provider* masih sangat rendah, hal ini ditandai masih banyaknya keluhan dari akseptor menyangkut pelayanan Keluarga Berencana. *Keempat*, hubungan interpersonal antara provider dan akseptor menurut pandangan akseptor belum terjalin secara baik. Hal ini dibuktikan masih adanya akseptor yang memilih berkonsultasi tentang alat kontrasepsi yang akan digunakan kepada dukun ketimbang kepada petugas kesehatan. *Kelima*, kunjungan tindak lanjut (kontrol) meskipun dirasakan penting oleh akseptor, namun umumnya mereka tidak menganggap sebagai kebutuhan yang rutin untuk dilakukan, kontrol dilakukan apabila dirasakan ada keluhan-keluhan serius yang timbul selama memakai kontrasepsi. *Keenam*. Ketepatan pemberian layanan menurut pandangan akseptor masih kurang baik, hal ini disebabkan karena walaupun ratio jumlah petugas dan akseptor sudah mencukupi, namun seringkali ada petugas yang tidak masuk, sehingga menyebabkan pelayanan tidak berjalan lancar dan tepat waktu.

Kata kunci : *Kualitas Pelayanan, Keluarga Berencana (KB).*



ABSTRACT

BUDIMAN: The Quality of Family Planning Service in Unaaha Subdistrict, Konawe District. Thesis. Postgraduate Study in Demography. Gadjah Mada University.

One of the efforts continuously sought by government in the development of demography and quality small family is to control the number of population and improve the quality of life through the Family Planning Program. Unaaha Subdistrict as the capital of Konawe District has significant numbers of spouse with sexually productive age in 2007 (3,511) and of active acceptors in the Family Planning 2,363 (67.30%), while in 2008 the former was 3,624 and the latter was 2,688 (74.17%). The data indicates that the number of acceptors in the Family Planning in Unaaha Subdistrict was relatively high. However, it is not empirically recognized whether or not the high level of active participation in the program is necessarily followed also by the increased quality of the Family Planning service delivered by health providers.

This study is to find out the quality of Family Planning Service in Unaaha Subdistrict, Konawe District. It uses a quantitative method with data collected by applying a survey technique. Data collected are then analyzed using a descriptive technique assisted by the SPSS software for Windows version 12.0.

Result of the study indicates that geographical characteristics of acceptors, such as age, education, and occupation influenced their assessment on the quality of Family Planning service in Unaaha Subdistrict. Moreover, the comprehensive picture of the acceptors' view on the quality of Family Planning service in Unaaha Subdistrict could be known also based on six measuring elements. These were, *first*, contraception selection method was generally a private decision taken by the acceptors with respect to personal choice, methods provided and offered by health personnel, the match of method and objective of use. *Second*, information quality provided by health provider was still very low indicated by the fact that there were still many complaints from acceptors related to information on Family Planning, particularly on the kinds of contraception they will use. *Third*, technical capacity of health provider was still very low, marked by the fact that there were still many complaints from acceptors related to Family Planning services. *Forth*, according to acceptors, interpersonal relationship between provider and acceptors was not established well. It could be seen from the fact that there were many acceptors that chosen to consult with local traditional healer than with health personnel on the contraception they will use. *Fifth*, although acceptors felt follow-up visit as very important, they did not generally considered it as a routine something need to do. In this case, control should be done if serious complaints resulted from the use of contraception was found. And, *sixth*, according to acceptors, the availability of the health provider was low due to the fact that despite sufficient number of the health personnel they did frequently not attend the office and it in turn caused the Family Planning Program unable to be performed well and timely.

Keywords: Service Quality, Family Planning