

ABSTRAK

Latar Belakang: Tantangan yang dihadapi Indonesia terkait dengan hygiene dan sanitasi masih sangat besar. Sanitasi Total Berbasis Masyarakat yang selanjutnya disebut STBM merupakan pendekatan dan paradigma baru pembangunan sanitasi di Indonesia yang mengedepankan pemberdayaan masyarakat dan perubahan perilaku. Hasil Riskesdas Tahun 2013, bahwa Proporsi RT di Indonesia menggunakan fasilitas BAB milik sendiri adalah 76,2 persen, milik bersama sebanyak 6,7 persen, dan fasilitas umum adalah 4,2 persen. Rumah tangga yang tidak memiliki fasilitas BAB/BAB sembarangan, yaitu sebesar 12,9 persen. Lima provinsi tertinggi rumah tangga yang tidak memiliki fasilitas BAB/BAB sembarangan adalah Sulawesi Barat (34,4%), NTB (29,3%), Sulawesi Tengah (28,2%), Papua (27,9%), dan Gorontalo (24,1%).

Metode: Penelitian ini deskriptif berupa penelitian evaluasi dengan rancangan sumatif untuk menjelaskan bagaimana proses Pilar Stop BABS dalam program STBM dengan pendekatan CIPP Evaluation Model. Informan diambil secara *purposive sampling* yaitu informan di puskesmas ialah pelaksana Pilar Stop BABS dalam program STBM dan di desa. Analisis data melalui mereduksi data dan penilaian metode kriteria dengan cara mengurutkan indikator dan pertimbangan pembobotan. Selanjutnya dilakukan inter pretasi dan pengambilan kesimpulan.

Hasil: context, input, process dan product Pilar Stop BABS dalam Program STBM belum berjalan secara optimal masih terdapat beberapa hambatan dalam pelaksanaan berupa, tujuan, sasaran, SDM, dokumen teknis, pra pemicuan, pemicuan, pasca pemicuan pemantauan dan pendampingan.

Kesimpulan: Context, input, process dan prooduct pelaksanaan stop BABS dalam program STBM di Kabupaten Gorontalo masih belum maksimal, efisien, dan efektif serta perlu peningkatan beberapa hal untuk menunjang kegiatan tersebut.

Kata Kunci: Stop BABS, STBM, CIPP Evaluation Model

ABSTRACT

Background: The challenges faced by Indonesia related to hygiene and sanitation are still very large. Community-based Total Sanitation, hereinafter referred to as STBM, is a new approach and paradigm of sanitation development in Indonesia that promotes community empowerment and behavior change. The results of Riskesdas in 2013, that the proportion of RT in Indonesia using their own defecation facility was 76.2 percent, shared property was 6.7 percent, and public facilities were 4.2 percent. Households that do not have open defecation / defecation facilities, amounting to 12.9 percent. The five highest provinces of households that do not have open defecation / BAB facilities are West Sulawesi (34.4%), NTB (29.3%), Central Sulawesi (28.2%), Papua (27.9%), and Gorontalo (24.1%).

Method: This research is descriptive in the form of evaluation research with a summative design to explain how the BABS Stop Pillar process in the STBM program with the CIPP Evaluation Model approach. Informants were taken by purposive sampling, that is, informants at the puskesmas were the implementers of BABS Stop Pillars in the STBM program and in the villages. Data analysis through reducing data and evaluating the criteria method by sorting indicators and weighting considerations. Furthermore, the interpretation is carried out and conclusions are drawn.

Result: context, input, process and product BABS Pillar Stop in the STBM Program has not run optimally there are still some obstacles in the implementation of, in the form of, objectives, targets, HR, technical documents, triggering, triggering, post triggering monitoring and mentoring.

Conclusion: Context, input, process and method of implementing BABS stop in the STBM program in Gorontalo Regency are still not optimal, efficient, and effective and need to improve a number of things to support these activities.

Keywords: Stop BABS, STBM, CIPP Evaluation Model