

INTISARI

Latar Belakang : Angka kematian ibu di Indonesia meningkat pada tahun 2013 sementara cakupan pemeriksaan kehamilan K4 juga meningkat. Unsur penting untuk mengetahui status kesehatan kehamilan sangat bergantung pada implementasi pemeriksaan prenatal oleh Bidan. Bidan memiliki kualitas baik pada implementasi pemeriksaan kehamilan dapat menurunkan angka kesakitan dan kematian ibu hamil.

Tujuan : Untuk mengetahui implementasi pemeriksaan prenatal di Indonesia menurut Bidan di fasilitas puskesmas dan praktek swasta, lama kerja, keikutsertaan pelatihan, lokasi geografis (*urban-rural*), dan wilayah ketertinggalan

Metode : Jenis penelitian ini adalah penelitian kuantitatif. Kami menganalisis 1.433 Bidan dari 13 provinsi di Indonesia yang menjadi responden IFLS 2007. Informasi implementasi pemeriksaan kehamilan oleh Bidan diperoleh dari sembilan prosedur prenatal pada kuisisioner *vignettes*.

Hasil : Uji statistic menunjukkan bahwa persentase implementasi pemeriksaan prenatal masih rendah. Variabel jenis fasilitas paling berpengaruh terhadap implementasi pemeriksaan prenatal tablet fe dan tes hemoglobin. Fasilitas puskesmas cenderung lebih melaksanakan prosedur dengan [OR 1.30 ; CI 1.04-1.61] dan tes hemoglobin [OR 1.62; CI 1.30-2.02] dibandingkan dengan praktek swasta. Variabel keikutsertaan pelatihan terbukti paling berpengaruh terhadap implementasi pemeriksaan urin, konseling tanda bahaya kehamilan, dan menanyakan riwayat darah tinggi, Bidan mengikuti pelatihan lebih cenderung melaksanakan prosedur prenatal pemeriksaan urin [OR 1.95; CI 1.21-3.14], konseling tanda bahaya kehamilan [OR 1.45; CI 0.98-2.15], dan menanyakan riwayat darah tinggi [1.61; CI 1.12-2.33] dibandingkan Bidan tidak mengikuti pelatihan.

Kesimpulan : Implementasi pemeriksaan prenatal oleh Bidan masih rendah. Strategi meningkatkan implementasi pemeriksaan prenatal dengan meningkatkan fungsi regulasi, pelatihan dan pendidikan berkelanjutan, dan supervisi.

Kata Kunci : Bidan, *prenatal care*, puskesmas.

ABSTRACT

Background: Indonesia's maternal mortality rate increased in 2013 while antenatal care coverage K4 also increased. The element is important to know the health status of the pregnancy is highly dependent on the implementation of the prenatal examination by a midwife. Midwives have a good quality in the implementation of prenatal examinations can reduce morbidity and mortality of pregnant women.

Objectives : To investigate implementation prenatal examination in Indonesia by midwives in the health center facilities (public) and private practice, working time, training participation, geographical location (urban-rural), and the regions lagging

Methods : This research is a quantitative research. We analyzed 1,433 midwives from 13 provinces in Indonesia which respondents IFLS 2007. The implementation details of prenatal care by midwives obtained from nine item prenatal procedures on questionnaires vignettes.

Results : Statistical tests showed that the percentage of implementation of prenatal care is still low. Variable types of facilities most influence on the implementation of prenatal examinations and tests hemoglobin fe tablet. Public facilities tend to be carrying out the procedure with [OR 1:30; CI 1.04-1.61] and hemoglobin tests [OR 1.62; 1:30 to 2:02 CI] compared to private practice. Variable training participation proved to be the most influential on the implementation of urine testing, counseling danger signs of pregnancy, and ask a history of high blood, midwife training are more likely to implementing procedures prenatal urine [OR 1.95; 1:21 to 3:14 CI], counseling danger signs of pregnancy [OR 1:45; CI 0.98-2.15], and asking a history of high blood pressure [1.61; 1:12 to 2:33 CI] compared the midwife did not follow the training.

Conclusions : The of prenatal implementation by midwives is still low. Strategies to increase implementation of antenatal care by improving the function of regulation, training and continuing education, and supervision.

Keywords : *Midwives, prenatal care, primary health ceter*