

ABSTRAK

Latar Belakang : Penumpukan tenaga dokter gigi di kota-kota besar ataupun di wilayah perkotaan menunjukkan kecenderungan tenaga dokter gigi menghindari penempatan di daerah pinggiran. Puskesmas tanpa keberadaan dokter gigi masih dominan di wilayah Indonesia Timur.

Tujuan Penelitian : Tujuan penelitian ini adalah untuk menganalisis determinan ketersediaan dokter gigi puskesmas di Indonesia berdasarkan status ketenagaan.

Metode Penelitian : Penelitian ini adalah penelitian kuantitatif dengan desain *cross sectional*, menggunakan data dari Riset Fasilitas Kesehatan (Rifaskes) pada tahun 2011. Pengumpulan data survei dilakukan di 33 provinsi di Indonesia. Populasi penelitian adalah semua responden yang mengikuti Rifaskes 2011, yaitu 8.981 puskesmas. Analisis univariabel menggambarkan distribusi frekuensi untuk masing-masing variabel, analisis bivariabel menggunakan uji *chi square* dan analisis multivariabel menggunakan regresi logistik, dengan tingkat kepercayaan (CI) 95% dan tingkat signifikansi $p < 0,05$. Hasil analisis data ditampilkan dalam bentuk tabel dan gambar.

Hasil Penelitian : Hasil penelitian ini menemukan bahwa karakteristik puskesmas mempunyai pengaruh yang signifikan terhadap ketersediaan dokter gigi di puskesmas ($p < 0,05$). Analisis regresi logistik menunjukkan bahwa karakteristik puskesmas yang mempunyai pengaruh paling besar adalah sarana prasarana puskesmas (OR: 5,89 ; CI: 5,33-6,52) dan topografi puskesmas (OR: 2,82 ; CI: 2,53-3,15).

Kesimpulan : Topografi, jenis, insentif dan sarana prasaran puskesmas memiliki korelasi positif terhadap ketersediaan dokter gigi puskesmas. Sedangkan geografi puskesmas memiliki korelasi negatif terhadap ketersediaan dokter gigi puskesmas.

Kata Kunci : ketersediaan, distribusi, dokter gigi, status ketenagaan, puskesmas

ABSTRACT

Background: Surplusage of dentists in big cities or in urban areas shows that dentists have a tendency to avoid placement in a suburb. The distribution of dentists is not evenly distributed across the regions, and health centers without the existence of dentists are still dominant in Eastern Indonesia.

Objective: The aim of this study was to investigate the determinants of dentist availability for health centers in Indonesia based on workforce status.

Methods: The study was a quantitative research with cross sectional design, using the data of Health Facilities Research (Rifaskes) in 2011. Survey data collection was carried out in 33 provinces in Indonesia. The study population was all respondents in Rifaskes 2011, namely 8,981 health centers. Univariable analysis included data analysis to describe the frequency distribution for each variable, bivariable analysis using chi square test and multivariable analysis using logistic regression, with a confidence interval (CI) of 95% and a significance level of $p < 0.05$. The results of the data analysis were presented in tables and pictures.

Results: The results of this study found that the characteristics of health centers have a significant impact on the availability of dentists in health centers ($p < 0.05$). Logistic regression analysis showed that the characteristics of the health centers that have the most impact are infrastructures of health centers (OR: 5.89; CI: 5.33 - 6.52) and topographic of health centers (OR: 2.82; CI: 2.53 - 3,15).

Conclusion: Topography, type, incentives and infrastructures of health center have a positive correlation to the availability of dentist in health centers. While geography of health center has a negative correlation with the availability of dentist in health centers.

Keywords: availability, distribution, dentists, workforce status, health centers