

INTISARI

Latar belakang: MP-ASI *blended food* telah dibagikan secara gratis di seluruh propinsi Indonesia dengan sasaran bayi 6 -11 bulan dari keluarga miskin untuk meningkatkan status gizi mereka. Hasil analisis data (Susenas, 1989 -2000) menunjukkan bahwa prevalensi balita gizi kurang maupun balita pendek semakin meningkat sejak anak berumur 6 bulan. Di propinsi Sumatera Utara, MP-ASI *blended food* diberikan sejak tahun 2002, akan tetapi belum pernah dilakukan evaluasi tingkat keberhasilan pemberian *blended food* tersebut.

Tujuan: untuk memperoleh informasi tentang pelaksanaan program MP-ASI di Kota Medan.

Metode: Penelitian ini merupakan penelitian observasional dengan rancangan *cross sectional* (potong lintang) dengan pendekatan metode deskriptif kualitatif dan kuantitatif untuk menilai *input* (masukan), proses dan *output* program MP-ASI. Subjek penelitian adalah petugas gizi di tingkat propinsi, kota, puskesmas, dan kelurahan. Jumlah puskesmas yang diteliti ditentukan sebanyak 4 puskesmas yang dipilih secara purposif dan seluruh kelurahan yang ada di empat puskesmas terpilih menjadi lokasi penelitian yaitu 23 kelurahan. Data tentang *input*, proses dan *output* program diperoleh secara langsung dengan alat bantu kuesioner dan pertanyaan terbuka untuk wawancara mendalam. Analisa data secara deskriptif.

Hasil : *Input* ; tersedia dana yang cukup untuk pengadaan MP-ASI dan dana pendistribusian sampai ke kelurahan/posyandu tetapi tidak tersedia dana untuk pendistribusian kesasaran dan untuk pemantauan, tenaga pelaksana program jumlahnya cukup tetapi hanya 39% yang memahami tujuan program, sarana program berupa buku petunjuk teknis hanya terdapat di tingkat propinsi dan formulir pelaporan tidak tersedia, bahan berupa MP-ASI *blended food* tersedia cukup, metode pemberian MP-ASI tidak sesuai dengan buku petunjuk teknis. Proses ; perencanaan jumlah sasaran yang harus mendapat MP-ASI tidak sesuai dengan jumlah bayi gakin yang ada di kota Medan dan tidak ada jadwal pendistribusian khusus, pelaksanaan pendistribusian tidak sama disetiap puskesmas disebabkan ketidak tepatan waktu penyediaan MP-ASI dari produsen dan MP-ASI dibagi di posyandu sesuai jadwal imunisasi dengan jumlah yang bervariasi antara 2 s/d 8 bungkus. Pemantauan tidak dilakukan karena tidak tersedia dana dan formulir pencatatan dan pelaporan. *Output* ; jumlah anak yang mendapat MP-ASI lebih dari target tetapi yang tepat sasaran hanya 66,9 %, daya terima anak hanya 23,89 % berarti rata-rata anak hanya mengkonsumsi 1 bungkus MP-ASI selama program berlangsung, efisiensi program berdasarkan kegiatan yang dilakukan hanya 55,5 % dan jika berdasarkan keaktifan petugas hanya 21,4%.

Kata Kunci : Evaluasi program, *Input*, Proses, *Output*, bayi usia 6 – 11 bulan gakin dan pemberian MP-ASI.

ABSTRACT

Background: Blended complementary breast feeding has been given all over Indonesian provinces for free to infants from poor families aging 6-11 months old to improve their nutritional status. Result of data analysis (Susenas 1989-2000) shows that the prevalence of children under five who are both lacking nutrition and having abnormal growth rate is increasing since they are 6 months old. In the province of Sumatera Utara, blended complementary breast feeding has been given since 2002. However, an evaluation has never been conducted to measure the success of such a program.

Objectives: The study was meant to get information about the implementation of complementary breast feeding program at Medan City.

Methods: The study was an observational type which used a cross-sectional design with both descriptive qualitative and quantitative method approaches to examine input, process and output of complementary breast feeding program. The subject of the study were nutrition officials in the province, city, community health center and village levels. There were four purposively selected health centers and all 23 villages within these centers. Data about program input, process and output were collected directly through questionnaires and open questions for indepth interview. Analysis was done descriptively.

Result: Input; there was sufficient fund for the acquisition of complementary breast feeding and for its distribution to villages/integrated service posts (posyandu), but not for its distribution to the end target and for monitoring, there were adequate number of operational staff but only 39% of them understood the program's objective, program facilities such as technical guide books were only available at provincial level and there was no report/ evaluation form available, stock of complementary breast feeding was sufficiently provided, method of complementary breast feeding supply was not conducted according to technical guideline. Process; planning of target number of complementary breast feeding recipients did not match with the number of poor family infants at Medan City and there was no scheduled distribution between one health center to another because the producer did not always provide complementary breast feeding on time and complementary breast feeding was distributed to posyandu according to immunization schedule with varied number of supply (between 2 to 8 packages), there was no monitoring because there was no fund for it and there was no evaluation/report form. Output; the number of infants receiving complementary breast feeding were more than the target but only 66.9% was right to the intended object, level of supply was only 23.89% which meant that at average each infant consumed only one complementary breast feeding package during the program, program efficiency based on activities conducted was only 55.5% and based on staff response was only 21,4%.

Conclusion: Input, process and output of the program implemented had not yet complied with the guideline and the objective of the program.

Keywords: program evaluation, input, process, output, poor family infants, complementary breast feeding