

Hubungan Perubahan Cakupan Program Kesehatan dan Sosial dengan Perubahan Prevalensi Balita Stunting pada Kabupaten / Kota di Indonesia Tahun 2007 ke Tahun 2013

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Abstrak

Disertasi ini adalah menggambarkan perubahan prevalensi balita stunting pada Kabupaten/Kota kategori membaik dan Kabupaten/Kota kategori memburuk di Indonesia dari tahun 2007 ke tahun 2013. Metode cross sectional studi, sampel yaitu 163 Kabupaten/Kota, sumber data sekunder Balitbangkes dan Kementerian Keuangan. Uji statistik t-test dan diskriminan. Hasil: perubahan prevalensi balita stunting pada 49 Kabupaten/Kota kategori membaik 30,1%, dan 114 Kabupaten/kota kategori memburuk 69,9%. Sembilan cakupan program kesehatan dan sosial pada Kabupaten/Kota kategori membaik yang memiliki perubahan lebih besar dari Kabupaten/Kota kategori memburuk yaitu prevalensi BBLR, cakupan penimbangan balita \geq 4 kali, cakupan vitamin A, cakupan imunisasi lengkap, persentase ketersediaan air bersih, persentase pengelolaan sampah diangkut petugas kebersihan, persentase ketersediaan jamban keluarga, persentase cuci tangan pakai sabun, dan persentase KK pegawai negeri sipil. Lima cakupan program kesehatan dan sosial pada Kabupaten/Kota ketegori memburuk yang perubahannya tidak jauh berbeda dari Kabupaten/Kota kategori membaik yaitu cakupan ANC-K4, prevalensi KEK ibu hamil, prevalensi TB-Paru balita, indeks kapasitas fiskal, dan persentase KK pendidikan tinggi. Delapan cakupan program kesehatan dan sosial dengan akurasi perubahan prevalensi balita stunting pada Kabupaten/Kota kategori membaik 83,7% dan Kabupaten kategori memburuk 92,1% yaitu cakupan timbangan balita \geq 4 kali, cakupan imunisasi lengkap, cakupan ANC-K4, persentase sampah diangkut petugas kebersihan, persentase ketersediaan jamban keluarga, persentase cuci tangan pakai sabun, indeks kapasitas fiskal, dan persentase KK PNS

This dissertation is describing changes in the prevalence of stunting toddlers the Regencies/ Cities category improves and deteriorates in Indonesia, from 2007 to 2013. Cross sectional study method, samples are 163 Regencies/Cities, secondary data source Balitbangkes and Ministry of Finance. T-test and discriminant statistical test. Results: changes in the prevalence of stunting toddlers 49 Regencies/Cities category improved 30.1%, and 114 Regencies/Cities category deteriorated 69,9%. Nine coverage of health and social programs the Regencies/Cities category improved which has a change greater than Regencies/Cities category deteriorated namely the prevalence of LBW, toddler weighing coverage \geq 4 times, vitamin A coverage, complete immunization coverage, percentage of availability of clean water, percentage of waste management carried by janitors, percentage of availability of family latrines, percentage of hand washing with soap, and the percentage of family heads of civil servants. Five coverage of health and social programs in the Regencies/Cities category deteriorated, whose changes are not much different from the Regencies/Cities category improved namely ANC-K4 coverage, prevalence of less chronic energy in pregnant women, prevalence of toddler pulmonary TB, fiscal capacity index, and the percentage of family heads of higher education. Eight coverage of health and social programs with accuracy changes in the prevalence of stunting toddlers at the Regencies/ Cities category improved 83,7% and Regencies/Cities category deteriorated 92.1% namely toddler weighing coverage \geq 4 times, complete immunization coverage, ANC-K4 coverage, percentage of waste management carried by janitors,

percentage of availability of family latrines, percentage of hand washing with soap, fiscal capacity index, and the percentage of family heads of civil servants