

## Research Article

## Evaluation of Mother and Children Health Program in the Health Office of Pasangkayu Regency

A. Mar'atul Mutmainnah<sup>1</sup>, Amran Razak<sup>1</sup>, Syamsiar S. Russeng<sup>2</sup><sup>1</sup>Department of Health and Policy Administration, Faculty of Public Health, Hasanuddin University Indonesia<sup>2</sup>Department of Safety and Health Faculty of Public Health, Universitas Hasanuddin Indonesia

\*Corresponding Author

A. Mar'atul Mutmainnah

**Abstract:** The Maternal and Child Health Program (MCH) is one of the main priorities for health development in Indonesia. This program is responsible for pregnant health services, childbirth, and neonatal babies. This study aimed to analyze the evaluation of maternal and child health program in the health office of Pasangkayu Regency based on Input, Process, and Output. This research method used a qualitative design. Informants based on the initial survey that are 14 people. Data collection techniques are depth interviews and document review. The results showed that the input stage from the finance aspect of the MCH program in the Department and Community Health Center (Puskesmas) is still not enough for some health workers. Those who feel less Puskesmas have a large work area and in areas where there are tribes difficult to help with childbirth and especially about maternal health checks. Besides the late disbursement program, it constrained by verification by the BPJS, which can affect the pattern of absorption of funds into the field. In the aspect of human resources, where labor for the MCH program is still insufficient in the amount of power that is lacking because they overwhelmed in carrying out activities in the field or in the health center but hampered by uneven distribution. Basically, it is good because compliance achieved gradually and would be fulfilled later. Management functions such as planning are still planning in previous years, lack of innovation to make plans different from last year's planning.

**Keywords:** Evaluation, Program, Maternal, and Child Health, Health.

### INTRODUCTION

Health is an important part of human life, it is undeniable because basically everyone craves a healthy life in order to support all activities carried out. Indonesia has become one of the countries in the Association of Southeast Asian Nations (ASEAN), which has a high maternal mortality rate. According to data from Indonesia the Demographic and Health Survey (IDHS) in 2012 the maternal mortality rate in Indonesia reached 100.0 per 00 359 live births, while the number of AKB from 32 per 1,000 live births. With an Indonesian population of 225,642,000, 9774 women die per year or 1 mother dies per hour and 17 babies die per hour related to pregnancy, childbirth and postpartum. Mothers and Infant Mortality Rates in Pasangkayu Regency 2017 amounted to 129 per 100. Health promotion is a comprehensive program of changing behavior in the community, in the context of

society, not only changes in behavior, but also changes in the environment (Tiraihati, 2018).

Pasangkayu Regency Government to follow up and welcome regional autonomy to pursue the potential of regional development, one of which is to improve health services in all Community Health Center (Puskesmas) in the regency. Pasangkayu in order to improve public health. Improvements also need to be made on the Recording and Reporting of the Integrated Health Center System (SP2TP) in achieving the MSS target. Based on the description above, how to determine program implementation issues can be done by evaluating the program, application process or at the end of the application (Agusti, 2012), Evaluation in the Indonesian language dictionary is defined as the determination of value, while according to Al-Hijrah evaluation is a source of information used to improve the program of ongoing activities or to plan a better

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future (Al Hijrah, 2015). Evaluation not only draws conclusions about how far the problem has been resolved, but also contributes to clarification and criticism of values which underlies the policy, assists in the adjustment and re-formulation of the problem (Dunn, 2000). It aims to determine the relevance, impact, effectiveness, efficiency and sustainability of the intervention and contribution of the UN system organization (Paluttur, 2017). It is hoped that the Midwife Coordinator and village midwife will jointly reinforce the commitment to improve and maintain the quality of antenatal care for each pregnant woman they serve (Wulandari *et al.*, 2017).

According to Tafal & Poerbonegoro (1989), evaluation as part of the management process is also a process. In general, the steps-taking steps in evaluation are as follows: (a) Determine what will be evaluated, (b) Develop framework and boundaries, (c) Designing the design (method), (d) Developing instruments and implementation plans, (f) Observation, measurement and analysis, and (g) Making conclusions and reporting Wijono (2000), says that evaluation of health services is a formal decision on effectiveness, and acceptability Efficiency of planned interventions in achieving the objectives (objectives) set. Thus evaluation is multi-dimensional and complex. To be able to evaluate, the health care target (goal) program must be clear, in general, to improve health or reduce suffering (Razak, 2015).

Problems in health financing in Indonesia are not effective and efficient in optimal use. This is closely related to the amount of losses, improper allocation priorities, and expenditure patterns tend to investment goods and indirect activities. This problem is compounded by delays in disbursing funds that generally affect program achievements (Ahmad, 2010).

Analysis of health financing in Indonesia reveals a number of problems, namely: the amount is small, the cost is less for promotion and prevention programs, less operating costs, end of realization, not related to performance, fragmented, and inefficient (Gani, 2001). Planning with McKenzie, *et al.*, (2009), general planning of the process of determining the objectives of the organization (company) which then presents or clearly articulates program strategies, tactics - tactics or procedures for program implementation and operations (actions) needed to achieve the overall objectives of the company. According to (Salla, *et al.*, 2018) said that one of the important aspects of the regional government that must be regulated carefully is the problem of financial management and regional budgets.

Eldredge *et al.*, (2016), says that there are 4 basic elements of the plan: Plan means choosing, planning is a means of allocation of resources, planning is a tool to achieve planning goals for the future.

Supervisors must have sufficient time, patience and always try to improve the knowledge, skills and behavior of supervised subordinates (Bradley, 2013). Explained in solving health problems in the input box is filled with problems that must be solved, while the boxes are filled with organizational resource processes such as personnel, funds, facilities and for full output with the completion of the problem at hand.

According to Adisasmito (2007), to increase coverage of health services and achievement of MSS, input boxes are filled with administrative tools such as human resources, funds and facilities needed Good planning will provide opportunities for maximum achievement of organizational goals (Bryson, 2018). The performance of the KIA program financing between 2012 and 2013 has an equal level of efficiency, there is no more efficient one, among others, and ineffective in achieving program activities (Suratno, 2015). Competent officers can also be seen from their services at the Family Planning Services Post-Integrated Health (Posyandu). Where midwives are expected to be able to attract interest from mothers to take advantage of services at the Posyandu, health care professionals and professional organizations have a major role to play in a position in the process of improving KIA (Bharoto, 2015). In line with this, research (Aswadi, 2018). Good infrastructure is very important in creating customer satisfaction. Health infrastructure facilities can affect patient satisfaction (Yunari, 2017). The purpose of this study was to analyze the evaluation of maternal and child health programs at the Pasangkayu Regency Health Office.

## **METHODOLOGY**

### **Research Design**

Qualitative research design, design chosen for two reasons: first, if this research is to be directed to find out "why" in order to provide a solution to the question "how" two, because there is no research on the same topic conducted in Pasangkayu Regency, so it is expected can provide a starting point for further research. This research was conducted at the Health Office and 6 (Six) community health centers in Pasangkayu Regency, March 2019.

### **Population and Samples**

In this study, the number of research informants was in accordance with the initial survey, namely 14 people, Head of Health Office, head of KIA, Head of Puskesmas Non Inpatient 3 people, KIA PKM business Non Inpatient 3, Head of Puskesmas 3 Inpatient and business PKM KIA Program Inpatient 3. Sources of informants are determined intentionally (purposive).

### **Data Collection**

Data collection techniques in this study are in-depth interviews (depth interviews) and document reviews (Moleong, 2014), where researchers are key

instruments in the qualitative research function setting the focus of research, selecting key informants as sources of data and notes, and stationery.

### Data Analysis

Data is analyzed qualitatively. Qualitative research data are not in the form of numbers, but rather in the form of narratives, descriptions, stories, written and not documents (images, photos) or other forms of non-other numbers. The analysis begins to formulate and explain the problem, before plunging into the field, and continues until the writing of the research results (Sugiyono, 2014).

## RESULTS

This research is reviewed from the input components, namely financing, human resources and facilities, then evaluates the components of the process: planning, organizing, implementing and monitoring all components designated in the MCH program.

### 1. Financing

From interviews and document reviews it can be concluded that the availability of funds for Maternal and Child Health (KIA) in Pasangkayu Regency will affect the implementation of programs by health workers at a lower level in improving the quality of optimal health services for mothers and children. Fund Planning/Budget is not fully allocated. The use of targeted funds because their utilization is not the right guideline and budgeting still tends to focus more on physical development. In addition, the delay in disbursing funds to the clinic also affected the implementation of the MCH program because the program had to be run from the beginning of the year with the availability of funds, but otherwise it would be hampered if the funds were not timely available.

### 2. Source

The researchers concluded that the strength should be midwives willing and skilled in implementing the MCH program in the Puskesmas in the Pasangkayu Regency work area. In Pasangkayu the regency health personnel are still lacking and the distribution is not evenly distributed, so the word coverage of the KIA program is not achieved due to inadequate human resources.

### 3. Infrastructure

The result is that there are puskesmas still lacking medical supplies to procure medical devices will be phased in according to the guidelines that apply physically to DAK. But most health centers have enough medical equipment to run the accreditation process which results in budgeting for medical supplies. The shortage of medical supplies is felt by the health center in the following medical facilities down the field such as scales and high measuring devices. Basically good because compliance is achieved gradually and will be fulfilled later.

### 4. Plan

Based on the interview concluded that the Strategic Plan has been well socialized. Sector plans containing vision, mission, objectives, strategies and policies and programs and development activities are prepared in accordance with the duties and functions of local work units and guided by the Regional Development Plan. the planned sector plan is valid for 5 years is an absolute benchmark for the annual SKPD work plan (Renja) which contains priority programs / activities, work plans and funding either carried out directly by the government or taken to encourage community participation.

### 5. Organizing

Based on interviews, said the organization in the Puskesmas and the Health Office of Pasangkayu Regency were well characterized by the organizational structure and coordination that occurred in the field.

### 6. Implementation

The results of the study say that the implementation of the MCH program at the Puskesmas and the Health Office runs according to the plans of the POA and DPA SKPD, although sometimes the schedule changes due to melting are slow and because energy is still not enough. the implementation of the MCH program itself was pleasant that the results would be able to improve the coverage so that the MMR and IMR decreased.

### 7. Supervision

The results of the study explained that the supervision in the Pasangkayu Regency Health Office was that there was no special Health Office TEAM to monitor the sub-level, Village maternity cottage (Polindes) and village health post (Poskesdes), only the monitoring team from the sub-health center level, the village health post and the Polindes.

## DISCUSSION

The Maternal and Child Health Program (KIA) is one of the main priorities for health development in Indonesia. This program is responsible for health services for pregnant, childbirth and neonatal mothers. One of the objectives of this program is to reduce mortality and disease incidence in mothers and children through improving the quality of services and maintaining a balance of Maternal and Perinatal Health services at the basic service level and primary referral services. The MCH Program Strategy includes empowering women / husbands and families, empowering communities with cross-sectors / other partners including regional government and legislature and the last is to increase the coverage and quality of health of children and children in an integrated manner with other components of reproductive health.

This research is reviewed from the input components, namely financing, human resources and facilities, then evaluates the components of the process: planning, organizing, implementing and monitoring all components designated in the MCH program.

## CONCLUSION

The input stage from the aspect of financing MCH programs in the Department and Community Health Center there are still some health workers who are still not enough. In the aspect of human resources, where labor for the MCH program is still insufficient in the amount of power that is lacking because they are overwhelmed in carrying out activities in the field or in the health center, but are hampered by uneven distribution. Basically good because compliance is achieved gradually and will be fulfilled later. Management functions such as planning are still planning in previous years, lack of innovation to make plans that are different from last year's planning. It is recommended that the government consider additional budgets based on needs that coincide with the achievement of targets and programs so that programs can run more effectively and efficiently. Apart from distribution, HR personnel will be leveled, and infrastructure equipped.

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