ARTIKEL PENELITIAN

PENGEMBANGAN STRATEGI DALAM UPAYA PENANGGULANGAN HIV/AIDS MELALUI PENDEKATAN SOSIAL BUDAYA DI KOTA BUKITTINGGI, SUMATERA BARAT

KESIAPAN RUMAH SAKIT RUJUKAN HIV-AIDS DI PROVINSI JAWA BARAT DALAM IMPLEMENTASI LAYANAN PENCEGAHAN PENULARAN HIV DARI IBU KE ANAK (PPIA)

GAMBARAN KECELAKAAN LALU LINTAS DI INDONESIA, TAHUN 2010-2014

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IMPLEMENTASI PROGRAM PELAYANAN KESEHATAN PEDULI REMAJA (PKPR) DI TINGKAT PUSKESMAS DKI JAKARTA
Yulira Media

PENGEMBANGAN STRATEGI DALAM UPAYA PENANGGULANGAN HIV/AIDS MELALUI PENDEKATAN SOSIAL BUDAYA DI KOTA BUKITTINGGI, SUMATERA BARAT

West Sumatra province is one province in Indonesia which increased HIV and AIDS cases every year, and Bukittinggi is the case with the highest AIDS rate in west sumatra. The purpose of research is to describe about the strategy that can be developed in response to hiv based on social and cultural approach. This study is a qualitative research. Data collection techniques through in-depth interviews with the HIV and AIDS risk group, and informants derived from the relevant agencies. Data processing and analysis were conducted qualitatively. The results showed that there are several steps that may be developed in an effort to combat HIV/AIDS approach that is based on an increase in social and cultural strategy information and community awareness of HIV/AIDS in a comprehensive manner, and institution strengthening community empowerment, improving the access of regulations coverage in and support the strengthened efforts to combat HIV/AIDS.

Keywords: The strategy, hiv/aids, social and cultural

Heny Lestary, Sugiharti, Andi Leny Susyanty

KESIAPAN RUMAH SAKIT RUJUKAN HIV/AIDS DI PROVINSI JAWA BARAT DALAM IMPLEMENTASI LAYANAN PENCEGAHAN PENGULARAN HIV DARI IBU KE ANAK (PPIA)

Transmission of HIV-AIDS from mothers to their children are of increasingly concern and it remains an iceberg phenomenon. West Java is one of five provinces in Indonesia with highest cases of HIV-AIDS as well as maternal and infant mortality rates. Prevention of mother to child HIV transmission (PMTCT) program has been implemented in Indonesia since 2004. Ministry of Health has appointed several hospitals as centers of referral of PMTCT in the same area, however, its implementation has not been known yet. The aim of this research is to find out the preparedness of PMTCT services in four referral hospitals in West Java Province, namely HS Hospital, Kbd Hospital, Kbk Hospital, and MM Hospital. The preparedness of PMTCT services can be assessed from preparedness of medical staff and supporting staff in providing such services, the preparedness of facilities and infrastructures, and constraints of service as well. The study carried out in 2014 with qualitative approach. The result shows that there are some differences of preparedness amongst four hospitals in PMTCT service implementation, mostly because of unpreparedness in terms of facilities and infrastructures (reagents, medicines, medical equipment, rooms, laboratories), lack of training, stigma from medical staff, and there is no guarantee for occupational safety and health of medical staff in providing PMTCT services. The conclusion of the results is that HS Hospital is the most well-prepared in PMTCT service implementation, whereas Kbd Hospital needs medicine equipment and laboratories for HIV-AIDS examination. Similarly, Kbk Hospital needs awareness campaign and training to reduce negative stigma from medical staff. Lastly, MM Hospital needs awareness campaign, training, completeness of personal protective equipment, leadership commitment and other supports for birth delivery services for HIV positive mothers.

Keywords: HIV-AIDS, PMTCT, Hospital, West Java

Sarinawar Djaja, Retno Widiyastuti, Kristina Tobing, Doni Lasut, Joko Irianto

GAMBARAN KECELAKAAN LALU LINTAS DI INDONESIA, TAHUN 2010-2014

The event of traffic accidents become concerning problems within the community, due to significant number of severe injuries and deaths. This paper will describe traffic accident occurrence in Indonesia during 2010 – 2014. The materials came from traffic accidents data collected by Traffic Corporations Republic of Indonesia (Korlantas) and Hospital Information System (SIRS) on 2013. In-depth Interview dan Roundtable Discussion (RTD) were done to elicit information regarding the management of traffic accident cases. The results show that traffic accident cases slightly decrease compared to previous years, however the death proportion remains the same. Provinces with the proportion of deaths due to traffic injuries increased over 50 percent while the fatalities of traffic accidents in the most populated provinces are increased. Events and deaths due to traffic accidents are dominated by age group between 26-30 years old who were riding a motorcycle. The most direct cause of death is head injuries, while the external causes of the accidents are recorded as a traffic accident without detailed description. The study concludes that traffic accidents and deaths are public health issues which should be handled holistically and comprehensively by the related agencies. It is suggested that the implementation of Decade of Action for Road Safety program should be periodically evaluated especially for closing potholes, repair sharp bend, availability of road marking and pedestrian facilities. Underlying cause of death information according to ICD-10 should be included in National SIRS online.

Keywords: Traffic accidents, cedera, Indonesia, year 2010 – 2014

Nurillah Amaliah, Kencana Sari, Indri Yunita Suryaputri

PANJANG BADAN LAHIR PENDEK SEBAGAI SALAH SATU FAKTOR DETERMINAN KETERLAMBATAN TUMBUH KEMBANG ANAK UMUR 6-23 BULAN DI KELURAHAN JATICEMPAKA, KECAMATAN PONDOK GEDE, KOTA BEKASI

Malnutrition early in life will have an impact on the quality of human resources. Malnourished children will experience a failure to achieve optimal growth and development. This study aims to determine factors associated with growth and development of children aged 6-23 months. This study used cross sectional design conducted in the village Jaticempaka, PondokGede, Bekasi. The population is children aged 6-23 months with a total samples of 95. Growth was defined by nutritional status using length for age index. Child development was measured by using Denver Developmental Screening Test II. Data of gender, age, morbidity, birth weight and length and parents characteristics were collected using
questionnaire. The data analysis was performed using univariate, bivariate and multivariate. The results showed that gender, age, birth length, and father's education were significantly associated with child growth and development. Birth length is one of the determinant factors of growth and development of children. Children who shorter in birth length has the opportunity to experience three times more likely to experience stunting and developmental delay (OR adj=3.08; CI 95%: 1.03-9.15) after being controlled by age, gender and level of father’s education. The consumption pattern of balanced nutrition both during pregnancy and early life of the child and father support knowledge about nutrition and health are needed so that children can grow and develop optimally.

**Keywords:** birth length, growth and development, under two children

Indri Yunita Suryaputri, Bunga Ch Rosha

**HUBUNGAN STATUS GIZI, GAYA PENGASUHAN ORANG TUA DENGAN KETERLAMBATAN PERKEMBANGAN ANAK USIA 2-5 TAHUN STUDI KASUS DI KELURAHAN KEBON KALAPA KOTA BOGOR**

The first five years period of children is an important time of growth and development which will be the basis of further development of the child, so often called “golden period”. Child development can be influenced by nutrition, health, and parenting which are related to each other. This article investigate the relationship between nutritional factor, parenting style and other factors to the development of children aged 2-5 years in the Kebon Kalapa, Central Bogor District, Bogor. The article were using the Rishunke research data at 2013. Samples were a hundred pairs of mothers and child. Data were analyzed descriptively, chi-square and multiple logistic regression. Chi-square test results did not show any factors significantly associated with the development of the child. Four variables child's nutritional status, family size, exclusive breastfeeding and maternal parenting style substantially related to child development were analyzed using multiple regression logistic. The main determinant of child development is the maternal parenting style. This means that mother who have undemocratic parenting style has a more than two times higher risk of having children who have developmental delays (OR 2.66; 95% CI=1.09-6.44). Parents especially mothers should receive counseling on parenting that developmental delay can be prevented.

**Keywords:** Nutritional status, parenting style, child development

Kenti Friskarini, Helper Sahat P Manalu

**IMPLEMENTASI PROGRAM PELAYANAN KESEHATAN PEDULI REMAJA (PKPR) DI TINGKAT PUSKESMAS DKI JAKARTA**

Care for Adolescent Health Services (PKPR) is a health care program aimed for adolescents in the health centers, which are expected to provide services inorder to realize the healthy adolescents. The research method used cross-sectional and qualitative data obtained from the working area of health centers in Jakarta to know the implementation of the program PKPR in 2011. Samples were selected purposively composed of and consisted of informants’ teenagers and health center personnel’s. Primary and secondary data were taken by using in-depth interviews and focus group discussions (FGD) and observation service facilities. The results are PKPR activities still limited to counseling in schools with material adolescent reproductive health, adolescents who came to the health center not get services as shown by flow of PKPR models, adolescent’ access to health centers constrained with learning activities, there were still health centers that have not done the training of peer counselors, there was no allocation of sufficient funds for PKPR activities, educational materials are lacking, limited educational learning tools and transportation as well as room services, also the officials’ understanding of the program is still lacking. Cross-sectoral cooperation has not been used to gain support for the implementation of specific PKPR at schools. The conclusion is the implementation of the PKPR program in the health center not meet the criteria as specified adolescent services because there in sufficient financial support, infra structure, and human resources. PKPR socialization is necessary and the full support of local governments in PKPR program in their respective working area of health centers.

**Keywords:** Service, adolescent, health personnel
# JURNAL EKOLOGI KESEHATAN

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EDITORIAL


Stunting juga sangat berhubungan dengan faktor-faktor di luar masalah gizi. Status gizi lahir dan pengasuhan anak merupakan faktor penting yang berpengaruh terhadap tumbuh kembang anak. Panjang badan lahir merupakan salah satu determinan pertumbuhan dan perkembangan anak. Anak yang panjang badan lahirnya pendek memiliki peluang 3 kali lebih besar mengalami mengalami stunting dan keterlambatan perkembangan (OR adj=3,08 ; CI 95% 1,03-9,15) setelah dikontrol oleh variabel umur anak, jenis kelamin anak dan tingkat pendidikan ayah. Pola konsumsi gizi seimbang baik pada saat kehamilan dan awal kehidupan anak serta dukungan pengetahuan ayah tentang gizi dan kesehatan diperlukan agar anak dapat tumbuh dan berkembang secara optimal. Gaya pengasuhan ibu merupakan faktor dominan dalam perkembangan anak. Ibu dengan gaya pengasuhan tidak demokratis berisiko 2 kali lebih tinggi untuk memiliki anak yang mengalami keterlambatan perkembangan (OR 2,66; 95% CI=1,09-6,44). Perlu dilakukan penyuluhan kepada orang tua tentang pengasuhan anak yang benar agar keterlambatan perkembangan dapat dicegah.

Topik yang tidak kalah menarik dan penting adalah pelayanan kesehatan remaja. Pelaksanaan Pelayanan Kesehatan Peduli Remaja (PKPR) seperti pelayanan remaja di puskesmas, diharapkan mampu mewujudkan upaya tercapainya remaja sehat. Hasil penelitian di DKI Jakarta, menunjukkan bahwa kegiatan PKPR masih terbatas pada penyuluhan di sekolah dengan materi kesehatan reproduksi remaja dan masih terdapat masalah lain baik dari aspek waktu, akses remaja ke puskemas, maupun sarana dan prasarana di Puskesmas.

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