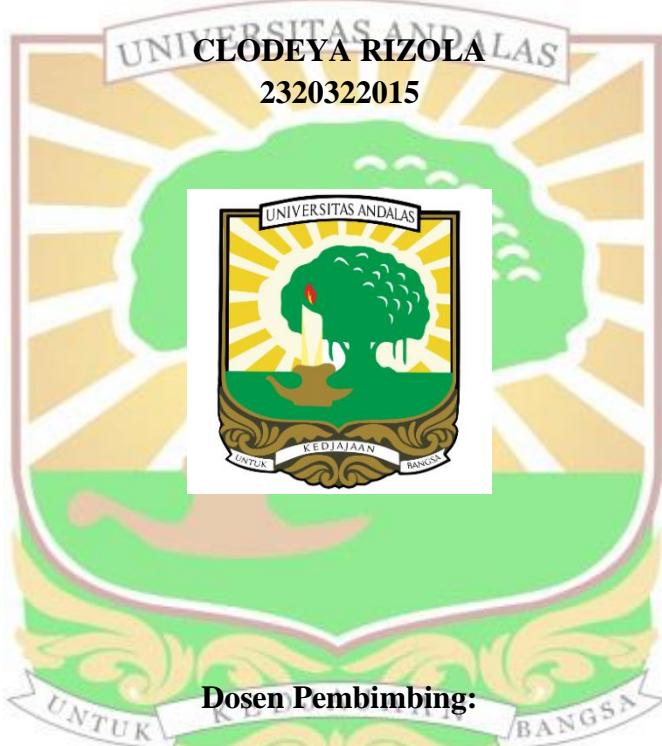


**TESIS**

**EVALUASI PELAKSANAAN PROGRAM ANTENATAL CARE  
(ANC) TERPADU DI KABUPATEN KERINCI**

**Tesis ini diajukan sebagai salah satu syarat untuk memperoleh gelar  
Magister Kesehatan Masyarakat**

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## ABSTRACT

### EVALUATION OF THE IMPLEMENTATION OF THE INTEGRATED ANTENATAL CARE (ANC) PROGRAM IN KERINCI DISTRICT

By

**Clodeya Rizola, Firdawati, Aladin, Roza Sriyanti, Mery Ramadani, Malinda Meinapuri**

The Sustainable Development Goals (SDGs) emphasize the reduction of the maternal mortality rate (MMR) to 70 per 100,000 live births by 2030. Despite various efforts, the MMR in Indonesia, including in Kerinci Regency, remains high. Integrated Antenatal Care (ANC) has become a key strategy in reducing maternal mortality. This study aims to evaluate the implementation of integrated ANC services in Kerinci Regency and to explore the influencing factors, including aspects of policy, input, process, and output.

This research employed a qualitative approach. Informants included the Regent, Head of the District Health Office, and health workers from community health centers (Puskesmas) with the highest and lowest ANC coverage, those contributing to maternal mortality cases, and those with no reported cases. Data were collected through interviews, observations, and document review.

The findings indicate that the implementation of integrated ANC in Kerinci Regency faces several challenges. These include the absence of specific policies on integrated ANC, a shortage of medical personnel and training, and the lack of dedicated funding—all of which are obstacles within the input component. In the process component, although coordination among health workers is relatively good, implementation does not fully adhere to standard operating procedures (SOPs), and planning remains top-down in nature. While supervision is conducted routinely, it has not significantly improved service delivery. In terms of output, the achievement of key ANC indicators (K1 and K5) remains uneven across health centers, although pregnant women generally report a high level of satisfaction with the services received.

In conclusion, the implementation of integrated ANC services in Kerinci Regency remains suboptimal due to various constraints in policy, input, process, and output components. This study suggests the need for short-term interventions such as recruitment, redistribution of doctors, and SOP dissemination; medium-term interventions including structured training and strengthened funding; and long-term interventions through the development of supportive local policies aimed at reducing maternal mortality.

**Keywords:** Antenatal Care, health policy, integrated services, maternal mortality, program evaluation

## ABSTRAK

### EVALUASI PELAKSANAAN PROGRAM ANTENATAL CARE (ANC) TERPADU DI KABUPATEN KERINCI

Oleh

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Tujuan Pembangunan Berkelanjutan (SDGs) menekankan penurunan angka kematian ibu (AKI) 70/100.000 kelahiran hidup pada tahun 2030. Berbagai upaya telah dilakukan, AKI di Indonesia, termasuk di Kabupaten Kerinci, masih tinggi. *Antenatal Care (ANC)* terpadu menjadi salah satu strategi penting dalam penurunan AKI. Penelitian ini bertujuan untuk mengevaluasi pelaksanaan pelayanan ANC terpadu di Kabupaten Kerinci serta mengeksplorasi faktor-faktor yang memengaruhinya, termasuk kebijakan, input, proses, dan output.

Penelitian ini menggunakan pendekatan kualitatif. Informan terdiri dari Bupati, Kepala Dinas Kesehatan, serta petugas dari Puskesmas dengan cakupan ANC tertinggi, terendah, penyumbang AKI, dan tanpa kasus AKI. Data dikumpulkan melalui wawancara, observasi, dan dokumentasi.

Hasil penelitian disimpulkan bahwa pelaksanaan ANC terpadu di Kabupaten Kerinci masih menghadapi berbagai tantangan yaitu belum terdapat kebijakan khusus tentang ANC terpadu, keterbatasan tenaga medis dan pelatihan, serta tidak tersedianya pendanaan khusus menjadi kendala dalam komponen input. Pada aspek proses, meskipun koordinasi antar petugas cukup baik, pelaksanaan belum sepenuhnya sesuai SOP dan perencanaan masih bersifat top-down. Pengawasan dilakukan rutin, namun belum sepenuhnya berdampak pada perbaikan pelaksanaan. Pada aspek output, capaian indikator K1 dan K5 belum merata di seluruh Puskesmas, meskipun tingkat kepuasan ibu hamil terhadap layanan cukup tinggi.

Kesimpulan penelitian ini bahwa pelaksanaan pelayanan ANC terpadu di Kabupaten Kerinci belum optimal dan masih menghadapi berbagai hambatan pada aspek kebijakan, input, proses, maupun output. Implikasi dari penelitian ini menunjukkan perlunya intervensi jangka pendek seperti rekrutmen, redistribusi dokter dan sosialisasi SOP, intervensi jangka menengah berupa pelatihan berjenjang dan penguatan pendanaan, serta intervensi jangka panjang melalui penguatan kebijakan daerah yang mendukung penurunan AKI

**Kata kunci:** Angka kematian ibu, *Antenatal Care* terpadu, evaluasi program, kebijakan kesehatan, kualitas pelayanan