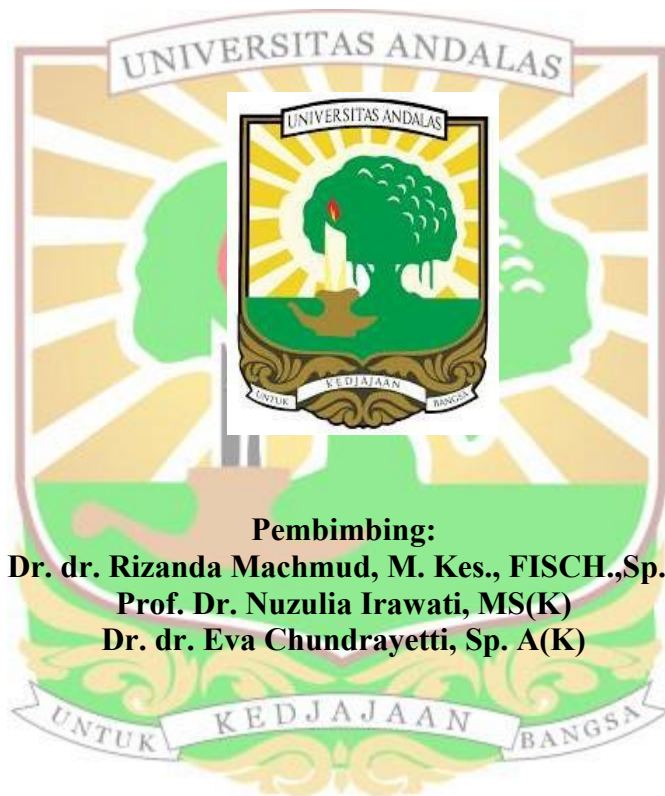


**PEMBERDAYAAN ORANG TUA OLEH BIDAN DALAM MENGENALI
PERKEMBANGAN BAHASA DAN BICARA PADA ANAK BALITA
MELALUI MODEL ADELIA**

Disertasi

RENNY ADELIA BR TARIGAN

2030322015



Pembimbing:

Prof. Dr. dr. Rizanda Machmud, M. Kes., FISCH.,Sp.KKLP

Prof. Dr. Nuzulia Irawati, MS(K)

Dr. dr. Eva Chundrayetti, Sp. A(K)

PROGRAM STUDI

KESEHATAN MASYARAKAT PROGRAM DOKTOR

FAKULTAS KEDOKTERAN UNIVERSITAS ANDALAS

PADANG, 2026

PEMBERDAYAAN ORANG TUA OLEH BIDAN DALAM MENGENALI PERKEMBANGAN BAHASA DAN BICARA PADA ANAK BALITA MELALUI MODEL ADELIA

Oleh: Renny Adelia Br Tarigan

Di bawah Bimbingan: Prof. Dr. dr. Rizanda Machmud, M. Kes., FISCH, SpKKLP

Prof. Dr. Nuzulia Irawati, MS,

Dr. dr. Eva Chundrayetti, Sp. A(K)

ABSTRAK

Latar Belakang: Perkembangan bahasa dan bicara merupakan aspek penting dalam tumbuh kembang anak yang memengaruhi kemampuan kognitif, sosial, dan komunikasi. Kemampuan orang tua dalam mengenali perkembangan bahasa dan bicara masih rendah, terutama di wilayah pesisir yang memiliki keterbatasan akses layanan kesehatan dan rendahnya pemanfaatan program Stimulasi, Deteksi, dan Intervensi Dini Tumbuh Kembang (SDIDTK). Kondisi tersebut berpotensi menyebabkan keterlambatan deteksi dini dan penanganan gangguan perkembangan anak. Penelitian ini bertujuan mengembangkan Model ADELIA sebagai model pemberdayaan orang tua oleh bidan dalam mengenali perkembangan bahasa dan bicara pada anak balita di Kota Batam. Metode: Penelitian menggunakan pendekatan *Research and Development* (R&D) dengan desain *mixed methods* berbasis ADDIE (*Analysis, Design, Development, Implementation, Evaluation*). Tahap analisis dilakukan melalui wawancara mendalam terhadap orang tua, bidan, kader, dan kepala puskesmas serta survei pada 304 orang tua balita. Tahap desain dan pengembangan menghasilkan Model ADELIA beserta modul edukasi yang divalidasi oleh para ahli. Implementasi menggunakan desain *one group pretest-posttest* pada 50 orang tua balita. Hasil: Pendidikan, pengetahuan, sikap, budaya, dan pemanfaatan layanan SDIDTK berhubungan dengan kemampuan orang tua mengenali perkembangan bahasa dan bicara anak. Sikap merupakan faktor paling dominan (OR=81,587; 95%CI=9,504–700,388; $p<0,001$). Berdasarkan temuan tersebut dikembangkan Model ADELIA yang terdiri atas komponen *Assessment, Discussion, Education, Learning by Doing, Integrasi Budaya*, dan *Akses Layanan*. Implementasi model meningkatkan skor pengetahuan dari 9,76 menjadi 17,04 dan skor sikap dari 49,8 menjadi 71,6 ($p<0,001$).

Kesimpulan: Model ADELIA efektif meningkatkan pengetahuan dan sikap orang tua dalam mengenali perkembangan bahasa dan bicara pada anak balita serta layak digunakan sebagai strategi pendukung pelaksanaan SDIDTK, khususnya di wilayah pesisir dan daerah dengan keterbatasan akses layanan kesehatan.

Kata Kunci: Model ADELIA, pemberdayaan orang tua, perkembangan bahasa dan bicara, balita, SDIDTK, bidan.

PARENT EMPOWERMENT BY MIDWIVES IN RECOGNIZING LANGUAGE AND SPEECH DEVELOPMENT IN CHILDREN UNDER FIVE THROUGH THE ADELIA MODEL

Renny Adelia Br Tarigan

Di bawah Bimbingan: Prof. Dr. dr. Rizanda Machmud, M. Kes., FISCH, SpKKLP

Prof. Dr. Nuzulia Irawati, MS,

Dr. dr. Eva Chundrayetti, Sp. A(K)

ABSTRACT

Background: Language and speech development are essential aspects of child growth that influence cognitive, social, and communication abilities. Parents' ability to recognize language and speech development remains limited, particularly in coastal areas where access to health services is restricted and the utilization of the Stimulation, Early Detection, and Early Intervention of Growth and Development (SDIDTK) program is low. This condition may lead to delays in the early detection and management of developmental disorders. This study aimed to develop the ADELIA Model as a parent empowerment model led by midwives to improve parents' ability to recognize language and speech development in toddlers in Batam City. **Methods:** This study employed a Research and Development (R&D) approach using a mixed-methods design based on the ADDIE framework (Analysis, Design, Development, Implementation, and Evaluation). The analysis phase involved in-depth interviews with parents, midwives, community health volunteers, and primary healthcare center heads, as well as a survey of 304 parents of toddlers. The design and development phases produced the ADELIA Model and educational modules, which were validated by experts. The implementation phase used a one-group pretest–posttest design involving 50 parents of toddlers, followed by an evaluation of model feasibility and applicability. **Results:** Education, knowledge, attitudes, culture, and utilization of SDIDTK services were significantly associated with parents' ability to recognize language and speech development. Attitude was identified as the most dominant factor (OR=81.587; 95% CI=9.504–700.388; $p<0.001$). Based on these findings, the ADELIA Model was developed, consisting of six components: Assessment, Discussion, Education, Learning by Doing, Cultural Integration, and Service Access. Model implementation increased parents' knowledge scores from 9.76 to 17.04 and attitude scores from 49.8 to 71.6 ($p<0.001$). Expert validation and evaluation results indicated that the model and educational modules were feasible and appropriate for implementation. **Conclusion:** The ADELIA Model effectively improves parents' knowledge and attitudes in recognizing language and speech development in toddlers and is feasible as a supporting strategy for SDIDTK implementation, particularly in coastal and underserved areas with limited access to health services.

Keywords: ADELIA Model, parental empowerment, language and speech development, children under five, SDIDTK, midwife

