

## GAMBARAN PERENCANAAN PERSALINAN PADA IBU HAMIL TRIMESTER III DI PUSKESMAS BANTUL II

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### INTISARI

**Latar belakang:** Penyebab tingginya Angka Kematian Ibu (AKI) dan Angka Kematian Bayi (AKB) adalah adanya 3 terlambat dan 4 terlalu. Hasil Audit Maternal Perinatal (AMP) penyebab AKI terbesar pada tahun 2013 adalah perdarahan sebanyak 46%. AKI Daerah Istimewa Yogyakarta pada tahun 2013 meningkat sebesar 44,63% yaitu pada tahun 2012 sebesar 52,2/100.000 dan pada tahun 2013 sebesar 96,83/100.000 KH. Program Perencanaan Persalinan dan Pencegahan Komplikasi (P4K) termasuk dalam program *Safe motherhood* yang tujuan utamanya untuk mengantisipasi terjadinya komplikasi pada saat persalinan.

**Tujuan:** Untuk mengetahui gambaran perencanaan persalinan pada ibu hamil trimester III di Puskesmas Bantul II.

**Metode penelitian:** Metode deskriptif dengan desain penelitian *survey*, populasi seluruh ibu hamil trimester III yang memeriksakan diri di Puskesmas Bantul II sebanyak 36 orang. Teknik sampel *total sampling* dan pengumpulan dengan data primer. Data dikumpulkan dari wawancara langsung dengan responden menggunakan daftar wawancara. Analisis data menggunakan *univariat* sebaran prosentase.

**Hasil:** Hasil penelitian ini menunjukkan bahwa ibu hamil trimester III yang merencanakan persalinan yaitu perencanaan tempat bersalin terbanyak 72,2% di BPM terendah 0% di dukun, perencanaan penolong persalinan terbanyak 72,2% bidan terendah 0% yaitu dukun, perencanaan dana terbanyak 55,6% jaminan terendah 2,8% belum merencanakan, perencanaan pendamping persalinan terbanyak 88,9% didampingi suami terendah 0% belum merencanakan, perencanaan donor darah terbanyak 69,4% belum merencanakan terendah 13,9% oleh suami, perencanaan transportasi terbanyak 50% menggunakan motor terendah 0% ambulan desa, perencanaan metode KB terbanyak 41,7% menggunakan KB suntik terendah 8,3% menggunakan sederhana.

**Kesimpulan:** perencanaan tempat persalinan, penolong persalinan, pendamping persalinan, dana, transportasi, metode KB sudah baik namun pada perencanaan pendonor darah masih banyak ibu hamil yang belum merencanakan karena ibu hamil belum mengetahui pentingnya persiapan pendonor darah.

**Saran:** agar dapat memberikan informasi kepada ibu hamil tentang perencanaan persalinan, agar bidan lebih meningkatkan penyuluhan dan KIE, agar masyarakat dapat membentuk ambulan desa dan bank darah.

Kata kunci: Perencanaan Persalinan, Ibu Hamil.

**THE DESCRIPTION OF LABOR PLANNING IN PREGNANT  
MOTHERS OF THIRD THREE-MESTER IN COMMUNITY  
HEALTH CENTER BANTUL II**

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**ABSTRACT**

**Background:** The high maternal mortality rate (AKI) and fetal mortality rate (AKB) are resulted from 3 late or 4 too much. Perinatal Maternal Audit (AMP) identified that most of maternal mortality cases in 2013 were due to hemorrhage as many as 46%. Maternal mortality rate in Yogyakarta in 2013 escalated as many as 44,63% of which there were 52.2/100.000 KH in 2012 and 96,83/100.000 KH. Labor planning and complication prevention (P4K) program are included in Safe Motherhood program which is aimed at anticipating any complication during labor.

**Objective:** To fine our the description of labor planning in pregnant mothers of third three-mester in community health center Bantul II.

**Methods:** Descriptive method with survey study design. Population was all pregnant mothers of third three-mester who had examination in community health center Bantul II as many as 36 respondent. Sampling technique was total sampling and collected by using primary data. Data were documented from direct interview with respondents by using interview list. Data analysis with percentage coverage.

**Results:** The results of this study indicate that the third trimester pregnant women who are planning a birth plan maternity highest 72.2% in the lowest BPM 0% in the shaman, the highest birth attendant planning to 72,2% 0% is the lowest midwives herbalists, most fund planning 55 , 6% lowest guaranteed 2.8% has not been planned, the planning labor companion highest lowest husband accompanied 88.9% 0% has not been planned, the largest blood donor planning 69.4% 13.9% lowest not planned by the husband, the largest transportation planning 50 % 0% lowest motorbike ambulance village, planning, most family planning methods using injections 41.7% 8.3% using a simple low.

**Conclusion:** planning where labor, birth attendance, labor companion, funds, transport, methods of birth control is good but the planning of blood donors are still many pregnant women who have not planned because pregnant women do not know the importance of preparation of blood donors.

**Suggestion:** in order to provide information to pregnant women about planning childbirth, in order to further improve the midwife counseling and KIE, so that people can form a village ambulance and blood bank.

Keywords: Planning Maternity, Maternity