

RINGKASAN

RESPONSIVENESS IBU TERHADAP PERKEMBANGAN ANAK USIA DI BAWAH DUA TAHUN DI KOTA BLITAR

Orang tua mempunyai peran sangat tinggi terhadap pertumbuhan dan perkembangan anaknya. Salah satu peran orang tua adalah peran pengasuhan yang responsif dapat menyebabkan peningkatan kelangsungan hidup anak. *Responsiveness* ibu sangat mempengaruhi perkembangan anak dimana saat anak-anak membutuhkan makanan, sanitasi dan akses ke pelayanan kesehatan untuk bertahan hidup dan berkembang secara optimal, hubungan yang hangat dan penuh kasih sayang dengan pengasuh dewasa yang responsif terhadap kebutuhan anak merupakan faktor yang penting (Eshel, 2006). Gangguan perkembangan pada anak-anak di Kota Tetheran dengan *Denver Development Screening Test II* sebanyak 34% dan *Age and Stage Questionnaire* sebanyak 12% (Shahshahani, 2010).

Anak-anak mengalami gangguan perkembangan pada pemeriksaan uji tapis Denver II sebesar 25%. Terdapat hubungan yang bermakna antara kualitas dan kuantitas stimulasi dengan hasil uji tapis perkembangan Denver II (Sinto, 2008). Anak-anak yang dilakukan skrining dengan Kuesioner Pra Skrining Perkembangan (KPSP) sebesar 25% anak-anak memiliki skor 7-8 dan 10% anak-anak dengan skor kurang dari 7 atau suspek gangguan perkembangan (Prawira, 2011). Diduga 15% anak-anak mengalami gangguan perkembangan menurut KPSP (Kuesioner Pra Skrining Perkembangan), dan sebanyak 12% menurut Denver (Dhamayanti, 2006). Pada tahun 2010 dinyatakan bahwa deteksi tumbuh kembang anak balita di Propinsi Jawa Timur sebesar 59,22%. Deteksi tumbuh kembang anak balita di Kota Blitar sebesar 93,56% (Profil Dinas Kesehatan Propinsi Jawa Timur, 2010). Deteksi dini Tumbuh Kembang Anak yang dilakukan secara massal di Kota Blitar pada tanggal 13 April 2008 dari 5545 anak yang dilakukan pemeriksaan ditemukan ada sebanyak 404 anak atau sekitar 7,2% yang diduga mengalami masalah perkembangan anak (Laporan Dinas Kesehatan Kota Blitar tahun 2008). Perhitungan dengan menggunakan standard klasifikasi DDST II (*Denver Developmental Screening Test*) ada keterlambatan pada anak Paud Kartikasari Kecamatan Gandusari Kabupaten Blitar, Hasil penelitian menunjukkan bahwa dari 16 responden, sejumlah 7 responden (43,75%) mengalami abnormalitas, sejumlah 6 anak (37,50%) mengalami perkembangan normal dan sebanyak 3 anak (18,75%) mengalami perkembangan yang meragukan (As'ari, 2010).

Penelitian *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun yang merupakan integrasi konsep teori *maternal role attainment*, teori ekologi dan menguatkan faktor emosi dan perkembangan anak. Model *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun ini akan diklarifikasi dengan konsep teori *maternal role attainment*, teori ekologi dan faktor yang mempengaruhi status kesehatan.

Hipotesis yang akan dijawab melalui penelitian antara lain pengaruh faktor ibu (empati, harga diri, kepercayaan, kematangan, pengalaman kehamilan dan melahirkan, depresi, konflik peran, dan ketegangan) terhadap *responsiveness* ibu (kontingen *responsiveness*, dukungan emosi, respon terhadap fokus perhatian anak, penggunaan bahasa sesuai kemampuan anak), pengaruh faktor anak (status kesehatan, temperamen, dan *responsiveness*) terhadap *responsiveness* ibu, pengaruh dukungan Ayah (emosional, informasi, instrumen, dan penghargaan) terhadap *responsiveness* ibu, pengaruh dukungan pelayanan kesehatan (Puskesmas dan Posyandu) terhadap *responsiveness* ibu, pengaruh faktor ibu terhadap perkembangan anak usia di bawah dua tahun (motorik kasar, motorik halus, sosialisasi dan bahasa), pengaruh dukungan ayah terhadap perkembangan anak (motorik kasar, motorik halus, sosialisasi dan bahasa), faktor anak terhadap perkembangan anak usia di bawah dua tahun (baduta), pengaruh *responsiveness* ibu terhadap emosi anak usia di bawah dua tahun (baduta), pengaruh *responsiveness* ibu terhadap perkembangan anak, pengaruh emosi anak terhadap perkembangan anak, pengaruh faktor dukungan pelayanan kesehatan terhadap perkembangan anak.

Penelitian ini termasuk penelitian observasional analitik, dilaksanakan melalui dua tahap. Pada tahap awal penelitian ini menggunakan jenis penelitian deskriptif eksploratif. Pada tahap dua penelitian ini adalah penelitian *eksplanatory* yang bertujuan mengeksplorasi *causa effect* dari model *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun di Kota Blitar dengan mengkonfirmasi secara empiris kesesuaian model variabel atau konstruk (*theoretical or hypothetical construct*). Kemudian dilihat menurut faktor yang dikonsepsikan sebagai variabel manifest. Eksplanasi bertujuan untuk menjelaskan hubungan kasual antara variabel laten (Kusnendi, 2008:272). Berdasarkan waktu pengumpulan data, penelitian ini termasuk penelitian *cross sectional* dimana pengambilan data dilakukan pada satu saat. Responden dalam penelitian ini adalah ibu dan anaknya yang berusia 3 bulan sampai 2 tahun di Kota Blitar. Variabel bebas yang diteliti antara lain: faktor ibu, faktor anak, faktor ayah dan dukungan pelayanan kesehatan. Variabel terikatnya adalah *responsiveness* ibu, emosi anak dan perkembangan anak. Instrumen yang digunakan adalah kuesioner serta panduan FGD (*Focus Group Discussion*).

Hasil penelitian ditemukan model *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun yang didukung oleh beberapa faktor yang memberikan pengaruh langsung seperti faktor anak dan faktor ayah. *Responsiveness* ibu adalah penguatan konsep *maternal role attainment* yang dikembangkan oleh Mercer (1991). Faktor ibu, dukungan pelayanan kesehatan, faktor emosi anak memberikan dukungan yang besar pada perkembangan anak. Nilai semua konstruk yang terbentuk dalam model mempunyai nilai skor *communality* lebih besar dari 0,5 berarti bahwasanya semua konstruk variabel laten tersebut mempunyai validitas konvergen yang signifikan.

Responsiveness ibu pada perkembangan anak usia di bawah dua tahun dibentuk oleh faktor Ayah yang meliputi dukungan emosional dan informasi dan faktor anak yang terdiri dari status kesehatan, *responsiveness* anak terhadap rangsangan dan temperamen. Perkembangan anak usia di bawah dua tahun

dipengaruhi oleh faktor emosi anak (sedih, senang, takut), faktor ibu yaitu harga diri / konsep diri (*self-esteem/self-concept*), empati - kepekaan terhadap isyarat (*empathy—sensitivity to cues*), pengasuhan penerimaan kehadiran anaknya (*parenting received as child*) dan pelayanan kesehatan. *Responsiveness* ibu (kecepatan dan ketepatan bertindak, dukungan emosi untuk anaknya, respon ibu terhadap fokus perhatian anak, dan penggunaan bahasa ibu) mempunyai pengaruh terhadap emosi anak (senang, sedih, takut). Model *responsiveness* ibu pada perkembangan anak usia di bawah dua tahun merupakan pengembangan dari konsep *model of Maternal Role Attainment* dengan mensubstitusikan faktor *responsiveness* ibu

Temuan baru: model *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun adalah model baru, didukung oleh rekomendasi isu strategis pada FGD. Diditemukan ada dua faktor yang mempengaruhi *responsiveness* ibu yaitu faktor anak dan faktor ayah, sedangkan yang mempengaruhi perkembangan anak adalah faktor ibu, pelayanan kesehatan dan faktor emosi.

Solusi peningkatan *responsiveness* ibu untuk mendukung perkembangan anak adalah peningkatan peran kader dalam memotivasi ibu dalam pengasuhan pada anaknya, penyuluhan bagi anak remaja tentang kesehatan reproduksi dapat diberikan melalui sekolah, pertemuan terkait pertumbuhan dan perkembangan anak sebaiknya dilakukan kedua orang tua yaitu ibu dan ayah serta peningkatan koordinasi antara Dinas Kesehatan, petugas kesehatan.

SUMMARY

MATERNAL RESPONSIVENESS TOWARD THE DEVELOPMENT OF THE CHILDREN UNDER TWO YEARS IN BLITAR

Parents have a very high role on the growth and development of their children. One of the parents' roles was the role of responsive parenting, it can lead to increase survival and growth, and protect from disease. One of the many health outcomes related to maternal response was cognitive and psychosocial effects. Mother responsiveness was often impacted by infant attachment, relation between baby and nursemaid. Generally, the response of nursemaid which produces good attachment (warmth and trust) may increase the social competence and decrease behavior problems. Bad parenting is going to increase the closeness that was not good (rejection, anxiety, disorientation) which causes an increasing problems to the children. Mother responsiveness greatly influences the development of the child, with or without proximity. When the children need food, sanitation and access to health services in order to survive and develop optimally, warm relationship and full of love with responsive adult nursemaid to the needs of children is an important factor (Eshel, 2006). Developmental disorders in children in Teheran with Denver Development Screening Test II were 34 % and Age and Stage Questionnaire were 12 % (Shahshahani, 2010).

Sum of children experiencing developmental disorders in Denver II screening test examination was 25 %. There was a significant relationship between the quality and quantity of stimulation with the results of the development of screening tests Denver II (Sinto, 2008). Children who have screening with Pre-Screening Questionnaire Development (KPSP) were 25 %, those children had a score of 7-8 and 10 % of the children were those with a score of less than 7 or suspected developmental disorders (Prawira, 2011). According to KPSP, 15 % of children experience developmental disorders and according to Denver, it is 12 %. (Dhamayanti, 2006). In 2010 it was stated that the detection of growth and development of children under five in East Java was at 59.22 %. Detection of growth and development of children under five in Blitar is at 93.56 % (Profile East Java Provincial Health Office, 2010)

Early Detection of Child Development carried at Blitar on 13 April 2008 from the 5545 inspection children found that there are 404 children or about 7.2 % were suspected of having problems of child development (Blitar Health Department report in 2008). Calculations using the benchmark standard classification DDST II there were delays in early childhood children Kartikasari Gandusari Blitar. The results showed that from 16 respondents, 7 respondents (43.75%) was having abnormality, 6 children (37.50%) were having growth normally and 3 children (18.75%) were having growth of dubious (As'ari, 2010). With maternal responsiveness research toward the development of children under two years is the integration of the concept of *maternal role attainment* theory, the theory of ecology and strengthen the emotional factors and child development. Model of mother responsiveness toward the development of children under two

years of age will be clarified by the concept of *maternal role attainment* theory, the theory of ecology and the factors affecting health status.

Hypotheses which will be answered through the research are the influence of other factors (empathy, self-esteem, parenting, maturity, experience of pregnancy and giving birth, depression, role conflict, and tension) to maternal responsiveness (contingent responsiveness, emotional support, the response to the focus of child attention, the use of appropriate language to child abilities), the influence of the child factors (health status, temperament, and responsiveness) to maternal responsiveness, the influence of father support (emotional, information, instruments, and reward) to maternal responsiveness, support influences of health service (Puskesmas and Posyandu) to maternal responsiveness, maternal factor influence toward the development of children under two years of age (gross motoric skill, fine motoric skill, socialization and language), the influence of the father support toward the child's development (gross motoric skill, fine motoric skill, socialization and language), the child factors toward the development of children under two years old, the effect of maternal responsiveness to the emotions of children under two years of age, the effect of maternal responsiveness to the development of the children, the influences of child's emotional influence toward child development, the influences of support factors of health services toward the development of children.

This research used observational study, carried out in two stages. In the first stage, this research used explorative descriptive study. In the second, this research used *explanatory* study aimed at exploring the causal effect model of maternal responsiveness toward the development of children under two years old in Blitar by empirically confirming the suitability of variable models or constructs (theoretical or hypothetical construct, 1993). Then the researcher saw based on a conceptual factor as manifest variables, while explanation here aimed to explain the casual relationship between latent variables (Kusnendi, 2008: 272). Based on the time of collecting the data, this study was cross-sectional study in which collecting the data was done at same time. The respondents in this study were mothers and their children whose age 3 months to 2 years in Blitar. The independent variables were maternal factors, child factors, father factors and support of health services. The dependent variables were the other responsiveness, child emotion and child development. The instrument used was a questionnaire as well as FGD guide (Focus Group Discussion).

The result of the research was found model of maternal responsiveness toward the development of the children under two years, supported by a number of factors that directly affect such as the child and the father factors. The supports of other responsiveness were classification and strengthening concept of maternal role attainment developed by Mercer (1991). Maternal factors, health care support, child emotional factors gave great support to the development of the children.

Maternal responsiveness toward the development of children under two years old are formed by father factors includes emotional support and information, child factors consists of healthy status, child responsiveness toward stimulation and temperament. The development of children under two years old are

influenced by child emotional factors (sad, happy, afraid), mother factors consist of self-esteem/self-concept, empathy- sensitivity to cues, parenting of receiving children, and health care/healthy service. Maternal responsiveness as like speed and to do properly, emotional support to the children, mother response to the focus of child attention, and usage of mother language, influences child emotion (happy, sad, afraid). The model of maternal responsiveness toward the development of children under two years old is developing concept of model of Maternal Role Attainment by substituting factors of maternal responsiveness.

Model of mother responsiveness toward the development of children under two years old is a new model, supported by recommendation of strategy issue in FGD. It is found that there are two factors influencing maternal responsiveness; those are child factors and father factors, while child development is influenced by mother factors, health service, and emotional factors.

The responsive model purposing development of earlier age children under two years old is a new model, supported by strategy issue recommendation in FGD. It was found that there were responsiveness factors influencing mother, they were children factors and father factors, while development of children were influenced by maternal factors, health service, and emotion.

The solution of increasing maternal responsiveness to support child development by increasing the role of cadres to motivate mothers in caring for their children, counseling for reproductive health adolescents may be provided through the schools, meeting related to child growth and child development should be done both mother and father and increasing coordination between Department of Health and the health officer.

ABSTRAK

Ibu yang memiliki *responsiveness* pada anaknya lebih tinggi menunjukkan tingkat perkembangan anaknya lebih baik (Smith, 2006). Tujuan penelitian ini menyusun model peran *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun. Jenis penelitian ini adalah observasional, dengan dua tahap yaitu penelitian deskriptif eksploratif dan penelitian eksplanatori. Penelitian *cross sectional* ini pada 279 orang ibu dan anaknya yang berusia 3 bulan sampai 2 tahun di kota Blitar. Hasil penelitian: *responsiveness* ibu pada perkembangan anak usia di bawah dua tahun dibentuk oleh faktor ayah yang meliputi dukungan emosional dan informasi dan faktor anak yang terdiri dari status kesehatan, *responsiveness* anak terhadap rangsangan dan temperamen. Model ini merupakan pengembangan dari konsep *model of Maternal Role Attainment*. Perkembangan anak usia di bawah dua tahun dipengaruhi oleh faktor emosi anak (sedih, senang, takut), faktor ibu (harga diri / konsep diri, empati - kepekaan terhadap syarat, pengasuhan penerimaan kehadiran anaknya) dan pelayanan kesehatan. Temuan baru, model *responsiveness* ibu terhadap perkembangan anak usia di bawah dua tahun adalah model baru, dimana faktor yang mempengaruhi *responsiveness* ibu yaitu faktor anak (*responsiveness*, temperamen, dan status kesehatan) dan faktor ayah (dukungan emosional dan informasi), sedangkan yang mempengaruhi perkembangan anak (bahasa, motorik kasar, sosialisasi, motorik halus) adalah faktor ibu ((empati, harga diri, penerimaan anak), pelayanan kesehatan (Puskesmas dan Posyandu) dan faktor emosi anak. Kesimpulan: *Responsiveness* ibu (kecepatan dan ketepatan bertindak, dukungan emosi untuk anaknya, respon ibu terhadap fokus perhatian anak, dan penggunaan bahasa ibu) melalui emosi anak dapat memperbaiki tingkat perkembangan anak (perkembangan bahasa, motorik kasar, sosialisasi dan motorik halus).

Kata kunci: *responsiveness* ibu, perkembangan anak, *maternal role attainment*

ABSTRACT

Background. Mothers who have a higher responsiveness to their children showed a better level of child development. Objectives. To create a model of the role of mother responsiveness to the child under two years development. Method. This was a cross-sectional study on 279 mothers and their children aged 3 months to 2 years in Blitar. Data were collected using a questionnaire containing a researcher developed questionnaire, Home Observation for Measurement of the Environment (HOME) and the Pre-Screening Questionnaire Development (KPSP). Results. The mother responsiveness on the children under two years development affected by factors that include the father's emotional support and information and factors which consist of children's health status, responsiveness to stimuli and the child's temperament. This model was the development of a concept model of Maternal Role Attainment. Development of children aged under two years affected by child's emotions (sad, happy, fearful), maternal factors (self-esteem / self-concept, empathy - sensitivity to cues, acceptance parenting) and health services. The new findings, mother responsiveness on development of children aged under two years is a new model, which factors affecting the responsiveness mother are child factors (responsiveness, temperament, and health status) and father factor (the emotional support and information), while factors affecting the child development (language, gross motor skills, socialization, fine motor) are the mother factors (empathy, self-esteem, acceptance of the child), health service (Public Health Center and Integrated Care Post) and emotional factors of children. Conclusion. Responsiveness mother (speed and accuracy of action, emotional support for the child, mother's response to the child attention focus, and the use of mother tongue) through a child's emotions can improve the child's level of development (the development of language, gross motor skills, socialization and fine motor skills).

Keywords: mother responsiveness, child development, maternal role Attainment