

## ABSTRAK

### **Pengembangan Kompetensi Tenaga Pendamping 1000 Hari Pertama Kehidupan di Puskesmas Kota Surabaya**

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Latar belakang pendidikan TP SHPK berbeda – beda yaitu kesehatan masyarakat, gizi, keperawatan dan kebidanan. Pada pelaksanaannya, TP SHPK mengalami kesulitan dan ada TP SHPK yang memiliki capaian dibawah target. Tujuan dari penelitian ini adalah untuk mengetahui pengembangan kompetensi tenaga pendamping 1000 hari pertama kehidupan di Puskesmas Kota Surabaya. Metode penelitian ini adalah metode kualitatif. Penelitian ini dilaksanakan di 7 Puskesmas Kota Surabaya. Teknik pengumpulan data yang digunakan pada penelitian ini adalah observasi langsung, wawancara dan analisa dokumen. Informan penelitian ini adalah tenaga pendamping 1000 HPK, PIC TP SHPK dan kepala seksi kesehatan keluarga dan gizi masyarakat Dinas Kesehatan Kota Surabaya. Peneliti menggunakan triangulasi untuk mengecek keabsahan data/uji kredibilitas data. Hasil penelitian dianalisis dengan tahapan yaitu merangkum data yang didapatkan sesuai sub tema yang diteliti, menyajikan data yang ada dalam bentuk narasi dan tabel, dan menginterpretasikan data sesuai dengan teori kompetensi menurut *Spencer and Spencer*.

Hasil penelitian ini adalah *motive* TP SHPK yaitu motif pribadi dan motif kelompok yang mendorong mereka bertahan melaksanakan tugasnya sampai dengan sekarang. *Traits* dan *self concept* telah dimiliki dengan baik yang mendukung pelaksanaan tugasnya. *Knowledge* dari tenaga pendamping 1000 Hari Pertama Kehidupan hanya terbatas pada kompetensi bidangnya. Keterbatasan *knowledge* tersebut berdampak pula pada *skill* yang dimiliki TP SHPK.

Kesimpulan penelitian ini adalah kompetensi tenaga pendamping 1000 hari pertama kehidupan di Kota Surabaya masih memerlukan pengembangan. Proses pengembangan kompetensi diarahkan melalui workshop, seminar dan pelatihan serta peningkatan fungsi dan peran para staf Puskesmas lainnya yaitu dokter, dokter gigi, bidan, perawat, ahli gizi, kesehatan masyarakat yang berasal dari latar belakang profesi dan disiplin ilmu yang berbeda-beda untuk bekerja berkolaborasi, saling berbagi, bertukar informasi, serta selalu meningkatkan kerja sama dalam memberikan pelayanan 1000 hari pertama kehidupan (*Integration Role of Health Care Provider*).

**Kata kunci** : Pengembangan Kompetensi, Tenaga Pendamping, 1000 Hari Pertama Kehidupan.

***ABSTRACT*****The Competency Development of Facilitators of the First 1000 Days of Life in the Community Health Centers of Surabaya**

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The facilitators of the first 1000 days of life have different educational background namely from public health, nutrition, nursing, and midwifery. Besides, the facilitators experienced difficulties during program implementation and some of them did not achieve the target. The study aimed to know the competency development of the facilitators of the first 1000 days of life in the community health centers of Surabaya. The research was a qualitative study and conducted in seven community health centers in Surabaya. The data collection used direct observation, interview, and literature. The informants were the facilitators, the person in charge of the program, and section head of family health and nutrition community of Surabaya District Health Office. The researcher used triangulation to check the credibility and validity of the data. The steps of data analysis were summarizing according to sub-theme, presented the data in descriptive and table, and interpreting the data based on competency theory by Spencer and Spencer.

The findings showed the motive of the facilitators was personal motive and group motive which pushing them to work their tasks up to today. The facilitators have good traits and good self-concept in order to support their job in the program. However, their knowledge has limitation up to each competence of each expertise. The knowledge limitation gave impact to their skills while working in the program.

The study concluded the competence of facilitators of the first 1000 days of life program in Surabaya needed a development. The process of competency development could be done via workshop, seminar, and training. Besides, the activity could be held in form of the enhancement of role and functions for other staffs of the community health center such as physicians, dentists, midwives, nurses, nutritionist, and public health practitioners. It was expected the collaboration among inter-professions, sharing between each other, exchanging information, and improving the partnership for implementing the program of the first 1000 days of live (integration role of health care provider).

**Keywords:** competency development, facilitators, the first 1000 days of life.