

ABSTRACT

The success rate of immunization must be determined by several factors including, immunization status, immunity, method of administration, vaccine quality and quantity. Quality that does not cause vaccines that are not suitable for use and cannot provide protection for themselves. There are several possibilities that cause children who have been immunized are still infected with the disease, one of which is because of the quality of the cold chain (cold chain) and the dose of immunization valid dose so it is very important to monitor the dinging chain at the health center (East Java Health Office, 2017).

This study aims to evaluate the implementation of cold chain and immunization coverage in East Java in urban and rural areas.

The method in this research is quantitative descriptive research with cross sectional type of research. The data used are secondary data from a study entitled Independent Evaluation of MR Immunization Coverage at East Java Province, Indonesia 2017. The sample in this study was 19. Health Offices in East Java were selected by cluster sampling, divided into two strata for urban areas. and rural.

In terms of human resources, the number of workers and training that was ever obtained. Urban and rural health offices are sufficient for the number of available personnel and for training all officers have received training related to immunization (cold chain), assessment of urban and rural areas that have been carried out according to the availability of tools and methods that have been used with results for urban areas 81.7 % and for rural areas 77.6%, the obstacles encountered in urban areas did not encounter any obstacles, but in rural areas there were obstacles, namely regarding the availability and function of the equipment. The conclusion that can be drawn from this study is that there are differences between urban and rural health offices according to the results of the scoring.

Keyword : Puskesmas, urban, rural, Cold Chain, immunization coverage

ABSTRAK

Tingkat keberhasilan Imunisasi tentunya ditentukan dari beberapa faktor diantaranya, status imunisasi, imunitas, metode pemberian, kualitas dan kuantitas vaksin. Kualitas yang tidak menyebabkan vaksin yang tidak layak digunakan dan tidak dapat memberikan perlindungan terhadap diri. Ada beberapa kemungkinan yang menyebabkan anak yang sudah diimunisasi masih terjangkit penyakit, salah satunya karena mutu rantai dingin (*Cold Chain*) dan dosis pemberian imunisasi *valid dose* sehingga sangat penting dilakukan monitoring terhadap rantai dingin di Puskesmas (Dinkes Jatim, 2017).

Penelitian ini bertujuan untuk melakukan evaluasi pelaksanaan *cold chain* dan Cakupan Imunisasi di Jawa Timur pada daerah *urban* dan *rural*.

Metode pada penelitian ini adalah penelitian deskriptif kuantitatif dengan jenis penelitian *cross sectional*. Data yang digunakan adalah data sekunder dari Penelitian yang berjudul *Independent Evaluation MR Immunization Coverage At East Java Province, Indonesia 2017*. Sampel pada penelitian ini adalah 19.Dinas Kesehatan yang ada di Jawa Timur yang dipilih secara *cluster* sampling, yang dibagi dua strata untuk daerah *urban* dan *rural*.

Dari segi SDM jumlah tenaga dan pelatihan yang perna di dapat. Dinkes *urban* dan *rural* sudah cukup untuk jumlah tenaga yang ada dan untuk pelatihan seluruh petugas sudah mendapatkan pelatihan terkait imunisasi (*cold chain*), penilaian daerah *urban* dan *rural* yang telah dilakukan menurut ketersediaan alat dan metode yang telah digunakan dengan hasil untuk daerah *urban* 81,7% dan untuk daerah *rural* 77,6% , hambatan yang temui untuk daerah *urban* tidak menemui hambatan namun jika di daerah *rural* mendapatkan hambatan yaitu mengenai ketersediaan dan fungsi alat.

Kesimpulan yang dapat diambil dari penelitian ini adalah Terdapat perbedaan antara Dinkes *urban* dan *rural* menurut hasil skoring.

Kata Kunci: Puskesmas, *urban*, *rural*, *Cold Chain*, cakupan imunisasi