CAPACITY BUILDING OF LOCAL GOVERNMENT TO CARRY OUT HEALTH SECTOR IN MALANG MUNICIPALITY

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ABSTRACT

Every single decentralization policy implementation include efforts to advance local government capacity in the sense arranging and managing local conduct in accordance with the dynamics and needs of local community, including providing health care. The interesting question is whether recent capacity building efforts have been done by local government is able to create government capacity to increase social welfare at the local region. Research focuses are how the capacity building of local government provide health care in Malang Municipality that consists of human resource development, organizational strengthening and institutional reform. Research finding show that Local Government capacity building in providing health care in Malang Municipality running smoothly. It implies to the whole performance of Malang Municipality in health affairs.

KEY WORDS: government, capacity building, health care.

INTRODUCTION

In the presence of decentralization policy, strengthening the roles of local governments are increasingly required. Strengthening the role of local government is intended to a better implementation of local government functions, where Local Government or Regency/Municipality has closer position to the community than when were handled by the central government. As affirmed by Muluk (2007:14) decentralization gets government closer to the community because it is able to increase freedom, equality and welfare. Reminding the importance of local government institutions, in every implementation of the decentralization policy, basically contained efforts of local government capacity building, in terms of regulating and managing government according to local needs and demands. Capacity building is a way that can be used to deal with changing according with the demands of the times. Capacity building is an essential component of any institutional reform. Capacity building is needed in various institutions for the survival of organization. Without capacity building, the organization would not survive to encounter competition. Capacity building is part of the struggle for organizational life.

The fundamental question that going to be interesting to examine is whether or not capacity development efforts have been undertaken by local governments have been able to realize the ability of local governments in the administration of local autonomy in the effort of improving the welfare for the people or citizen? This question is relevant to ask considering that the current complexity of the problems remain arise, regarding the capacity of local government to apply effective and efficient government (Wijaya, 2007).

By taking case study on the health office in the Local Government of Malang Municipality, this study would like to see further facts regarding the implementation of local government capacity building to carry out healthy affairs. Research problem in this study is how the capacity building of local government in health affairs held in Malang Municipality? This question would be broken down as follows: 1) How is capacity building of Local Government done in Malang Municipality in Human Development dimension?; 2) How is capacity building of Local Government in Malang Municipality in organizational strengthening dimension?; 3) How is capacity building of Local Government in Malang Municipality in institutional reform dimension?; 4) What are the supporting and constraining factors in capacity building of local government to carry out the health affair?; and 5) How is the performance of local government of Malang Municipality to carry out health affair?

MATERIALS AND METHODS

Grindle (1997) argue that “capacity building is intended to encompass a variety of strategies that have to do with increasing the efficiency, effectiveness, and responsivenss of government performance”. Furthermore, Grindle (1997) suggests that capacity building is seen as a variation of a strategy which includes
inside dimensions of capacity building, which includes: first, human resource development, secondly, organizational strengthening dimension, the third, institutional reform dimension.

In reviewing local government’s capacity building to carry out health affair, researchers choose to use three dimensions of capacity building as proposed by Grindle above. This choice with the consideration that empirical problem regarding the capacity of local government in health affairs held in Malang, it shows the three aspects, which are aspects of human resources, organizational strengthening and institutional reform. Those dimensions has been a major discussion in capacity building and developed in the context of health sector problems. Implementation of capacity building in City Health Department of Malang Municipality is classified into three dimensions, Human Resources Development dimension, organizational strengthening dimension and institutional reform dimension.

The focus in this research is capacity building in local government to carry out health affairs in Malang Municipality, with the details: First, Human Resource Development which includes recruitment and training activities. Secondly, Organizational Strengthening, which includes the activities of personnel utilization, managerial aspects, and network cooperation. Third, the Institutional Reform, which includes the institutionalization of vision and mission of local government, as well as policy changes. Fourth, the factors that is inhabiting and supporting capacity building of local government in Malang Municipality in carrying out health affair. Fifth, the performance of health department to carry out health affairs

This research is conducted in the scope of health department of Malang Municipality. The selection of research site based on assumptions and considerations that Malang Municipality has a complex problems related to the operation of health affairs. It is possible, along with the rapid growth of population that have an impact on greater burden for Malang Municipality Government to carry out health affairs, both in terms of quantity and quality.

Sources of data that used in this study are: 1) The informant; 2) The events relating to local government capacity building to carry out health affairs in Malang Municipality, and 3) Document/written source. Then, data collection techniques used in those studies are: 1) Interview; 2) Observation and 3) Documentation. The techniques of data analysis in this study followed the steps of data analysis according to Strauss and Corbin (1990) which is called as a coding process, which includes open coding, axial coding and selective coding.

RESULTS AND DISCUSSION

Human Resource Development Dimension

Human resource development is a systematic process in fulfilling the needs of qualified manpower as needed. This process usually include the supply of manpower (recruitment) and coaching (training, supervision, on the job training), which is done continuously. The purpose of Human Resource Development (HRD) is the availability of executive power that has the skill, knowledge and attitude required in carrying out its duties and functions. Human Resource Development in health department of Malang Municipality actually covers two important aspects, they are recruitment and training.

1. Recruitment

Each year the health department of Malang municipality government asks the formation of an employee that required by the Public Health Department of Malang Municipality, both regarding the quantity, specification or required competencies, and educational background that matched with the need. Formally, the procedure of staff recruitment in public health department during their formation is always derived from public Health Department and then submitted to the Local Government. However, the reality public health department has always faced the problem of the shortage in human resources, both in terms of quantity and quality.

In the recruitment process, Public Health department of Malang Municipality Government only act as a watchdog, because the institutions that play a role in recruitment is the Local Personnel Agency (Badan Kepegawaian Daerah (BKD)), is presumably as one cause in lack of human resources or personnel in terms of both quantity and quality in the scope of the Public Health Department. Local Personnel Agency (Badan Kepegawaian Daerah (BKD)) suspected recruit the personnel only based on estimation.

2. Training

Public Health Department has always held staff training, and it is on the agenda every year. For 2009, one of the Public Health department goal is to increase the number and quality of health personnel, with details about the activities of the training consists of three activities, which are: 1) Training about how to care the community, 2) Training to improve the ability of Clinic staff, 3) Training to improve the ability of medical/paramedical in handling patients. Total for year 2009, the target of training is 150 people, with details of 30 people following the public health care training, 40 person clinical staff training, and 80 people attended training to improve the ability of medical/paramedical in handling patients.
The problem then arise, every employee in the training will lead to vacant positions in the field of work, which means it is the lack of workers in serving the community, so it causes duplicate work among employees. Because basically the initial problems experienced by Public Health Service of Malang Municipality is the lack of manpower, coupled with training held for some employees that caused many works load carried by the employees who does not follow the training. Because of this condition, the training is always carried out on limited technical training for a few days. But the interesting is there are showed that even with the limited resources they have, the integrity and professionalism of Public Health Department workers or employees of Malang Municipality are extraordinary.

Based on the overall discussions conducted by human resource development of Public Health Department of Malang Municipality includes recruitment and training activities, even they face obstacles mismatch between the needs of employees with the real conditions, they provide professional personnel to give prime services. This is consistent with the primary mission of human resource development that was proposed by Grindle, the supply of professional and technical personnel.

**Organizational Strengthening Dimension**

One of dimension in capacity building is organizational strengthening, which is in this context includes three aspects, such as utilization of personnel, managerial aspect, and network cooperation.

1. **Personnel utilization**
   Generally, civil servants and employees in Public Health Department of Malang Municipality objected when they are placed to fill the structural positions, they prefer a functional position. There are many various reasons from the employees in Public Health Department of Malang Municipality that prefer functional position, such as:
   1) In the functional position, getting a higher position is quicker \( \pm 2-3 \) years than structural position; 2) Allowances on functional position higher than the structural position and; 3) the works and responsibilities of structural position are more severe than the functional position. The fundamental problem that arises in the field is about unbalance between work and reward. This condition makes workers more interested in functional position than to structural position, which they felt to be more profitable.

2. **Managerial Aspect**
   Based on observations indicate that the public Health department in managerial aspects has done activities and programs with reference to the general management principle: POAC (Planning, Organizing, Actuating and Controlling). Based on the vision and mission, Public Health Department of Malang have made the division of functions in detail and systematic. Operational activities for one year always begins with the preparation of planning activities and programs which is followed by planning and implementation of the program afterwards.

   In the program implementation, Public Health department also coordinate both internally, as well as cross-sector coordination are usually done in a cross-sector coordination forum. However, based on observations showed that the application of management principle done minimally. While at the clinic level, the application of the principle - the principle of management is carried out optimally. For example, for this year, Dinoyo Health Center has been certified ISO 9001: 2008 which can be said as a symbol that represents a good managerial system.

3. **Cooperation Network**
   In practice, the partnership conducted by the Public Health department perform steps: 1) identification, 2) socialization, 3) Submission of Perception, 4) Establishment of Commitment, 5) Setting Role, 6) Intensive Communications, 7) Conducting Activities & 8) Consolidation and Valuation. Based on the data obtained, showed that cross-sector collaboration involving the Department and related agencies within Malang Municipality Government has been done. For example, to handle avian flu outbreak, there has been division of tasks and coordination to clear where the problems associated with poultry department.

   But in another hand, Based on observations and interviews, show that the Public Health department has not been cooperating with foreign parties. Thus, viewed from the aspect of cooperation networks, increasing cooperation with foreign parties should be earnest attention to the capacity building of local governments in organizational strengthening.

**Institutional Reform Dimension**

For each organization, including in this case is Public Health Department, the values of the most strategic institutions represented in the form of policies concerning the vision and mission. Thus, the institutionalization of policies is relating to the institutionalization of the vision and mission, which in this case is the institutionalization of the vision and mission of the Public Health Department. Based on the above elaboration, the discussion on institutional reform is focused on two aspects which include; institutionalization of the vision and mission, as well as policy changes.
1. Vision and Mission Institutionalization

Vision of public Health department of Malang Municipality is "Creating Malang as Healthy Municipalities (Mewujudkan Malang sebagai Kota Sehat)". The missions of Public Health Department that has been established to realize the vision are: 1) Improving health care quality, equitable, and affordable, 2) Encouraging people to create healthy life by their self, 3) Improving the prevention and eradication of disease, 4) Improving services pharmaceuticals, monitoring, controlling of drugs, cosmetics, medical devices and drinks. With the variety of missions, it is expected to be able to realize the vision in the future.

The results showed that the institutionalization at the level of the actor involved in the administration of health affairs in Malang Municipality has understood the vision and mission of the Public Health Service of Malang well. Meanwhile, at the institutional level decision-making process related to the elaboration of the vision and mission in the form of program activities have been carried out through a process that is bottom-up. This conclusion is consistent with the concept put forward by the institutionalization of Supriyono (2007). With the support of this bottom-up process, resulting in a very good understanding of all levels of management, including responsibility for all programs toward work programs have been compiled together.

2. Policy Change

Capacity building of health sector conducted by the Public Health department, in fact, still related to a higher authority, such as policies regarding the budget allocation to support the service activities, and regulations pertaining to health services. A serious problem that always experienced by the Health Department in conducting their duties is still a lack of health personnel or human resources that can support the health service. Upon further examination, the source problem is the limited funds that are owned by the Public Health department to perform the addition of personnel. This has an impact on the numbers of staff recruited in accordance with the needs remain. Then in the other hand, the amount of funds allocated by the Local Government of Malang for the health service was very disappointing number, for 2010 is only about 3 percent of the total budget of Malang, while for 2011 the funds allocated by 4.4 percent, up only 1, 4 percent. Whereas national regulations set forth in the Act No. 36 Year 2009 on Health, stated that minimal local government budgets for health are allocated minimum 10 percent of the budget. So the priority of Malang City Government to health care becomes questionable. It is very ironic regarding to the vision of Malang to be Healthy City, while the budget allocated doesn’t meet even the minimum threshold.

Constraining and Supporting Factors

There are two things of constraining factors in the implementation of capacity building in Public Health Department: First, budget commitments, there is inconsistency in budget allocation policy. Second is lack of human resources both in quantity and quality. Besides constraining factors, there are several factors in supporting the implementation of capacity building in Health Department of Malang Municipality, first, high integrity from the employees of Health Department. Second, there is good leadership and the third is the high participation of the community.

Local Government Performance on Health Sector

The interesting finding during research in the field is about the enactment of customer satisfaction card systems. This implementation is to measure satisfaction’s level of patients in seeking treatment at health centers and also at the same time can be a tool of introspection and evaluation of service activities performed in the clinic. Customer satisfaction card system is very simple, where every patient who comes for treatment into the clinic gets several cards; each card represents a place, such as poly card dental and pharmacy cards. Then, after completion of treatment the patient should enter the cards into a box that has been provided by the clinic. There are two boxes, and each box marked "satisfied" and "not satisfied", so after getting treatment and medicines the patients required to insert their cards into customer satisfaction box in accordance with the perceived level of patient satisfaction when receiving care at health centers.

The results of evaluation of the health centers showed that nearly 90% of patients expressed satisfaction on health services provided by the clinic. However, from observations and interviews with patients in health centers, indicates that services by health centers are remain not optimal. It because of various complaints raised by the communities, such as, the length time of waiting service and scheduling process of certain types in health services that they can’t get service at all times in accordance with the illnesses suffered by patients. The root of the problems mentioned above, lies in the insufficient numbers of health workers in health centers and also health sector budget owned by the Local Government of Malang Municipality is limited. Based on the foregoing, it can be argued that the performance of Local Government here in conducting the affairs of health needs to be more optimal, especially in efforts to improve public satisfaction in order to obtain quality health services.
Conclusion

Overall, it can be concluded that the capacity building of public health department in Malang Municipalities has an implications for the achievement of performance targets in the health sector. Capacity building in human resource development dimension that includes recruitment and training has been going pretty good. There are obstacles in the recruitment process, where there is a mismatch between the number and quality of employees. This problem resulted in a lack of personnel resources both in terms of quantity and quality. The problem is basically due to limited funding sources or budget provided by the Government in the procurement staff.

In organizational strengthening dimension it includes three aspects, they are the utilization of personnel, managerial aspects, and network cooperation has been running well. There are limited in the utilization aspects of personnel, namely in the fact, structural position is less desirable than the functional position. This is because the functional position more advantageous in terms of benefits and career as well as the workload and responsibility is less, than structural position. In the managerial aspects, Public Health Service of Malang City has been practiced the principles of management in general, so all activities can take place properly. In the networking aspect of cooperation, the City Health Department has conducted various cooperations in Malang. Malang City Health Department has conducted various cooperations with the private sectors and communities, because it was realized that health problems are complex and the limited resources owned by the Public Health Service of Malang City.

Capacity building of local government of Malang Municipality in conducting the affairs of health in the dimensions of institutional reforms, which include the institution's vision and mission, as well as policy changes have been going pretty well. Institutionalization at the level of the actor showed that all the actors involved in the administration of health affairs in the city of Malang have understood the vision and mission of the Public Health Service of Malang well. While at the institutional level, decision-making processes relating to the elaboration of the vision and mission in the form of program activities have been carried out through a process that is bottom-up.

The implementing of capacity building, Public Health Service of Malang Municipality gets some supporting and constraining factors. Factors that become an obstacle in conducting capacity building activities are limited budget allocations, policy inconsistency and lack of human resources. While supporting factors in the implementation of capacity building in the scope of the Public Health Service is a high integrity among employees, leadership, and the high participation in attending various training and extension activities conducted by the Public Health Service of Malang and health centers located in the environment of Malang.

Health Service performance of Malang Municipality in organizing health affairs has shown good results based on the extension of Malang Municipality Health Department can perform tasks and functions. However, when it’s viewed from the achievement of the MDG’s target areas of health and level of community satisfaction, performance of local government in conducting the health affairs of the Malang Municipality is still less than optimal.

REFERENCES


