

THE ANALYSIS OF BUREAUCRACY REFORM ON A PUBLIC SERVICE IN THE FIELD OF INDONESIAN COMMUNITY HEALTH

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ABSTRACT

This research aims to analyze and describe issues of bureaucracy reform of health services in Indonesia. By using the literary study, method is through the results of basic health research and the expected results in public service contained in the Grand Design of Bureaucracy Reform. The results of the research have been conducted indicating that the current bureaucracy reform in the field of health services conducted by Indonesia's Government is not optimal. Because there are still many very difficult provinces get easy access to hospitals. From 34 provinces in Indonesia based on the results of basic health, research on 24 provinces are still very difficult to get easy access to hospitals, and

the percentage is still above the national average. Where this condition widely perceived by communities who live or reside in rural areas. These Recombination given in this study are as follows: development of access services of equitable hospital, bureaucracy of Modern health, professionalism and work ethic as well as honest behavior in the management of health bureaucracy system. The application of information technology as a supporting good performance, health bureaucracy organization that has to be started from Low to Middle Community Health Centre (*Puskesmas*), Health Office and Health Department. Modern Health management should be encouraged towards the professionalism strengthening of good attitude-based work, and the presence of control of each system perpetrators so that misuse of authority can be avoided in order the acceleration of health vision objectives can be realized.

Keywords: Bureaucracy Reform, Health Service, Bureaucracy Implementation, Modern Health, and Community Health Centre.

INTRODUCTION

Public services are essentially concerned with the vast aspects of life. In the life of the nation and state, the Government has the function of providing various public services required by the community, ranging from service in the form of arrangements or other services in order to fulfill communities necessity in the field of education, health, utilities, and others. Public services are thus all activities in order to fulfill necessity in accordance with the basic rights of every citizen and resident of any goods, services as well as

administrative services provided by service providers related to the public interest.

The fact that public service in Indonesia has not shown effective performance is often a discussion, both in terms of writing and research. These ineffective public service issues are triggered by some complex things, ranging from the organization culture that is still a paternalistic, working environment that is not conducive to the change of time, the low reward system around the Indonesian bureaucracy, low mechanism of punishment. For bureaucracy officials, lack the ability of bureaucracy apparatus to take actions of disagreements, and scarcity of local leadership commitments to create public services that are responsive, accountable, and transparent. In the period of regional autonomy that gives the freedom for each District/City to run the government based on the necessity and interests of the region itself was also not

able to realize effective public service. The Result in the assessment of the effectiveness of the Indonesian Government's entry are into low category in Asia Pacific, as shown in the figure 1.

Based on the figure 1, it is known that the effectiveness of Indonesia's governance index is still lagging far away with some countries in the Asia-Pacific areas. In 2016, Singapore had the highest value of effective government indices with a value of 100, then Hong Kong with an effective government index value of 98.08, Japan with an effective government index value of 95.67. The next country that has effective government index value is better than Indonesia is Australia with an index value of 92.31, Malaysia with effective Government index value of 75.96, Thailand with effective Government index value of 66.35, and while the value of Government effectiveness index for Indonesia is only 53.37.

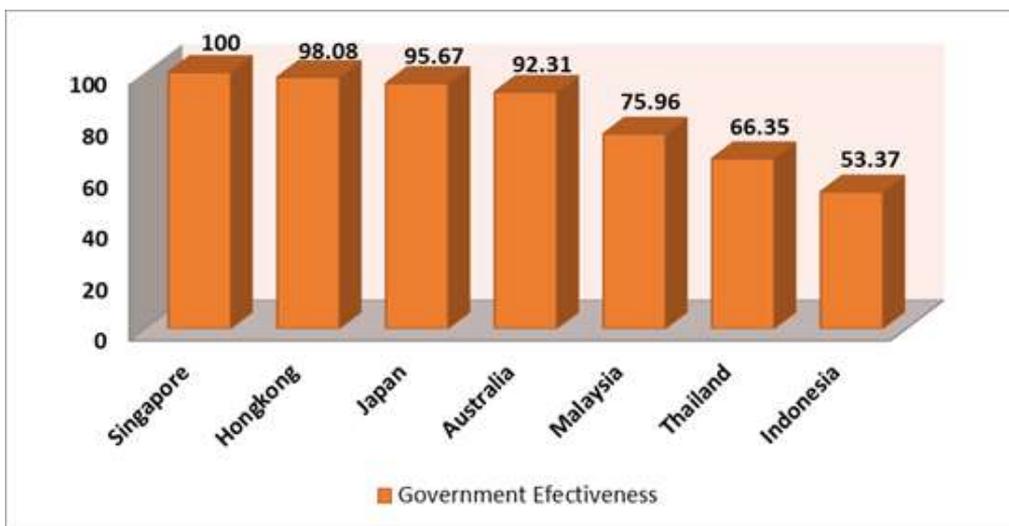


Figure 1. Government Effectiveness Index in Area of Asia Pacific Country (*The Worldwide Governance Indicators* [WGI], 2016)

The failure of government bureaucracy in organizing public service that respects the rights and dignity of citizens as a service user not only weakens the legitimacy of the government in its public eyes. However, it also affects the wider, the disbelief of

private parties and foreigners to invest in an area because of uncertainty in the provision of public services. The Ombudsman noted in recent years reporting on the public service issues in Indonesia is still high. That can be seen in the figure 2.



Figure 3. Accepted Report Gotten by Ombudsman Relate to Public Service Issue in Indonesia (Ombudsman, 2018)

Based on the figure 2, it can be known that the record of Indonesia Republic's Ombudsman acceptance of the report on the public ministry was 2014 received 6,678 reports, 2015 received 6,859 reports, and 2016 received 9,030 reports. Whereas in March 2017, the Ombudsman said that during the first three months of the year 2017 there were recorded 3,000 reports related to public service. The most widely reported fields are land, regional governance (education and health) and in the third and fourth sequences are police and judicial. In the previous year (2016), the Ombudsman stated that the three most widely reported in public service areas were police, national Land agency, and personnel.

Based on the condition and answering the challenges of the Times that move toward globalization, it is necessary to take an action that can break the system that has been implemented in Indonesia, the need for reform efforts in public service. It aims to change and improve the bureaucratic order of service that feels sluggish, convoluted and discriminatory, heading towards *good governance*.

Bureaucratic reform is a consequence of the rapid political, economic and social change. The organizational representation is sluggish, rigid, convoluted and centralized, and the command hierarchy chain has become a hallmark of bureaucracy in Indonesia. Therefore, the bureaucracies

become swollen, wasteful, and ineffective. For that reason, it takes an awareness to improve the bureaucracy as a public organization, Health service problems according to the deputy field of Public Service Ministry of Administrative and Bureaucratic Reform of the Republic of Indonesia named Diah Natalisa (2018) as a speaker in the *United Nations Public Service (UNPS) Forum and Awards* in Marrakesh, Morocco. She states that the main challenge of public health services in Indonesia is the issue of distribution, could be on medical personnel and health facilities, and again with the geographical condition of Indonesia, which an archipelago country is.

LITERATURE REVIEW

Reformation Understanding

Reform is changing or creating things better than existing ones. This reform was directed at the change of society, which included the bureaucracy of society, in the sense of change towards progress. In this sense, the community changes directed at development (Susanto, 2017). Mannheim, 2009, as referred by Susanto, 2017, explained that the change of society was related to the norm. Development is a development that is focused on the progress of the situation and life of the community, where the community finally also enjoys the progress of life. Thus, the change of

society is used as an increase in human dignity, so that the essence of change is closely related to the progress of society. Judging from the aspect of the development of the community, there is a balance between economic, political, social and legal demands, balance between rights and obligations, and consensus between the Principles in society (Susanto, 2017).

Bureaucracy Understanding

The bureaucracy comes from the word "bureau" meaning desk or office; and the word "Kratia" (Cratein) which means government. Initially, this term was used to refer to a system of work activities organized or ruled by an office through administrative activities (Nawawi, 2016). In the general English concept, bureaucracy is called "civil service". It is also commonly referred to as public sector, public service or public administration. Bureaucracy based on definitions expressed by some experts is a control system in organizations designed based on rational and systematic rules, and aims to coordinate and direct individual work activities in order to resolve large-scale administrative tasks (adopted from (Saueressig, 1973; Turner & Mouzelis, 1968; Wolff, Coser, & Rosenberg, 1958) in Adnan, 2014.

Bureaucracy Reform

Essentially bureaucracy reform is a significant change in bureaucratic elements such as institutional, human resources apparatus, governance, accountability, apparatus, supervision and public services, which are done consciously to the position themselves (bureaucracy) back, in order to conform to dynamic environment. Bureaucracy reform is one way to build people's beliefs. The scope of bureaucracy reform is not only limited to the processes and procedures, but also associates changes in structure and attitudes as well as behavior. This relates to the problems that intersect with authority and power. Bureaucracy reform is a community's expectation for the government to be able to fight Corruption, Collusion and Nepotism as well as form a clean government and the

desire of the community to enjoy an efficient, responsive so do accountably public service.

Therefore, the community needs to know the government also in position as the judge and the party serves the bureaucracy reform that is done today so that the life of the state goes well, around the community. Bureaucratic reform aims to 1. Improve bureaucratic performance to be more effective and efficient. 2. The creation of a professional, neutral, open, democratic, independent bureaucracy, integrity, and competence in carrying out its duties and responsibilities as a public servant and state servant; 3. Clean government; 4. Improving the quality of service to the community; 5. Free from Corruption, Collusion and Nepotism.

Public Service

According to Kotler, & Keller, 2011 services are any actions or activities that a Party may offer to another party, which is essentially intangible and did not result in any ownership. While (Grönroos, 2000; Tjiptono, 2007) stated that service was a process consisting of a series of intangible activities that are common (but not necessarily) to occur in interactions between customers and employees, services and resources, physical or goods, and service provider systems, which are provided as solutions to customer problems.

Public service according to (Indonesia, 2009) was about public service is an activity or series of activities in order to fulfill these services necessity in accordance with the legislation for every citizen and resident of goods, services, and or administrative services provided by public service providers. According to the Department of Home Affairs (one door Integrated services institutional development) that public service is a process of assistance to others in certain ways that require an agreement and an interpersonal to create satisfaction and success, every service produces products either in the form of goods or services.

From some sense of public service that has been outlined above can be

concluded that public services as a service delivery or serve communities necessity as well as other organizations that have an interest in the organization, in accordance with the basic rules and procedures prescribed and intended to provide satisfaction to the recipient of service.

Public Service Reformation

According to (Kurniawan, 2007; Pollit & Bouckaert, 2000) defining public service reform was a systematic, thorough and ongoing change in order to better the public sector performance. Public sector reforms include not only organizational and management elements, but also human resources. Changes are not only focused on the quantity change, but also the quality. According to Ali, Islamy, Supriyono, & Muluk, 2013; Sinambela, 2011, explained some basic principles that can be used as guidelines in optimizing the bureaucracy performance at the local level, closely related to the improvement of internal state of the organization. These principles include as follows:

- a. Accessibility principle: This means that all services must be easily accessible by every user of the service; this is related to the problem of place, distance and service procedure.
- b. Continuity principle: means that efforts to promote the type of service must be continuously available to the community, with certain certainty and clarity that apply to the service process.
- c. Technical principles: This principle relates to the process of service that should be handled by the apparatus that really understand technically the service is based on the clarity, determination, and stability of the system, procedures as well as services.
- d. Principle of profitability: services as much as possible can be performed effectively and efficiently, provide economic and social benefits for both the government and the wider community.

- e. Accountability principle: meaning the process of product and service quality that has been given must be accountable to the community because the government officials in essence have the task of giving the service as good as possible.

RESEARCH METHOD

Analysis of the study conducted through a review of the literature related to health care problems in Indonesia studied from various literature and results of previous studies compiled from various surveys. Literature Review is conducted from various points of view; Theories and journals to learn the determinants and factors of health care provided by Indonesia's Government. The study of data analysis results from (Kementerian Kesehatan RI Badan Penelitian dan Pengembangan, 2018) is one of the community-based information used in analyzing determinants related to health service events in every province in Indonesia. Information regarding policies and programs is obtained from related sectors, such as Ministry of National Development Planning of the Republic of Indonesia (Bappenas) and Ministry of Health. The global policy on nutrition is obtained by downloading from the world's websites (WHO, UNICEF, World Governance Index, etc.) through Internet technology.

RESULT AND DISCUSSION

In an effort to increase the degree of public health in addition to the promote and preventive efforts, it is also necessary to curative and rehabilitative efforts. Curative and rehabilitative health efforts can be obtained through hospitals that also serve as referral healthcare providers. Based on Depkes 2014, on hospital classification and licensing, the grouping of hospitals based on the implementation, namely government hospitals, local government hospitals, and private hospitals. Government hospitals are technical implementing units of

Government agencies (Ministry of Health, Police, Indonesian National Army Forces, and other State-Owned Enterprise/Ministries). The regional hospital is the technical executor of the area (provincial government, district government and municipal government). While the private hospital as a legal entity whose business activity is not only engaged in the

field of self-government but also the exception of public hospitals organized by legal entities that are nonprofit.

Bureaucracy reform in the field of healthcare services that focus on the construction of hospitals during the period 2015-2018 in the provincial government, regencies and cities the percentage increased annually (Figure 3).

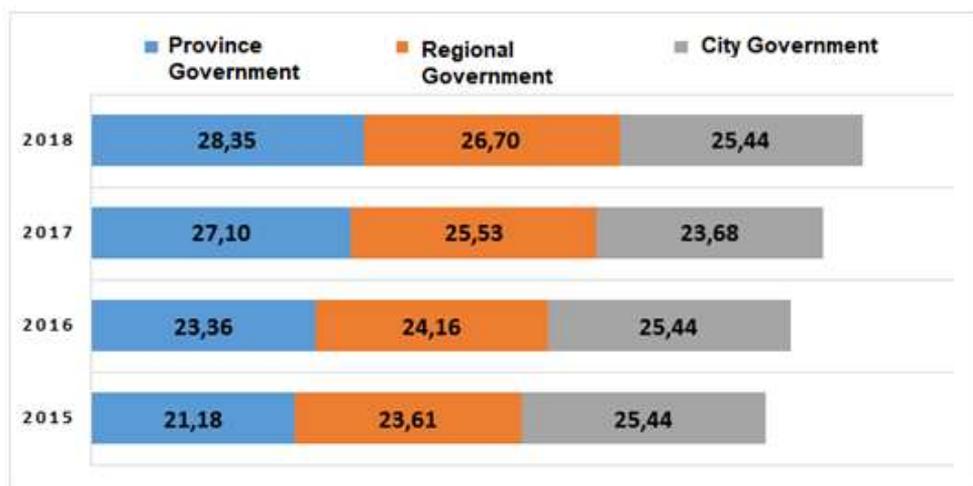


Figure 3. The Percentage of Regional Hospital Development in Indonesia (Directorate of Ministry of Health of Indonesia Republic, 2019)

Based on the graphic on figure 3, it can be noted that the percentage of the provincial hospital development in 2015-2018 has increased with the largest jump in 2016-2017. The percentage increase in this year was informed by 3.74% from the previous year. While the District/City level in Indonesia for 2015-2018 percentage of hospital development showed a relatively stable increase annually. However, the process of building the hospital in fulfilling the implementation of bureaucracy reform program during the year 2015-2018 felt not optimal. It can be found from the diagram on figure 4.

Based on the diagram (Figure 4), it is known that nowadays in Indonesia there are still many households in every province

who have difficulties when they need medical service to the hospital in their region. The highest percentage of the province that has difficulty in conducting health services to hospitals is in Papua Province with a percentage of 59.3%. After that the highest percentage of the province that has difficulty in doing health services to the next hospital is East Nusa Tenggara with a percentage of 54.6% and the Sulawesi Province is the third highest province above the national average that has difficulty to get health services hospital in this area of 50.6%. While the least percentage of the province has, the difficulty level of access to the hospital is in Yogyakarta (7.6%).

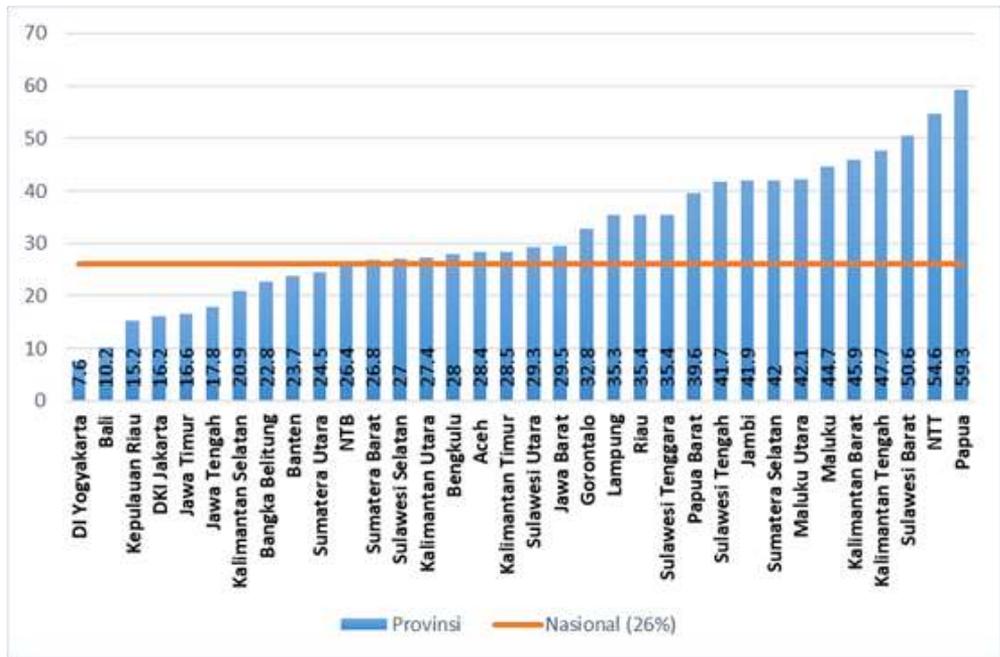


Figure 5. The Percentage of Facilitation Access of Household Activity Complicated to the Hospital (Kementerian Kesehatan RI Badan Penelitian dan Pengembangan, 2018)



Figure 6. The Percentage of Household Complicated Group Access on Hospital Bases on Living Area (Kementerian Kesehatan RI Badan Penelitian dan Pengembangan, 2018)

Based on the diagram on figure 6, it can be noted that based on the Residence/Region in Indonesia. There are many have difficulty to gain access to health services to the hospital in rural areas (43%), and in the urban area the percentage is smaller compared to rural areas with a

joint of 13.3% of people easily get access to health services to the hospital than those in the rural area today. It can access and when viewed from the level of education the household group that is difficult to gain access to hospitals in Indonesia can be seen as the following graphic.

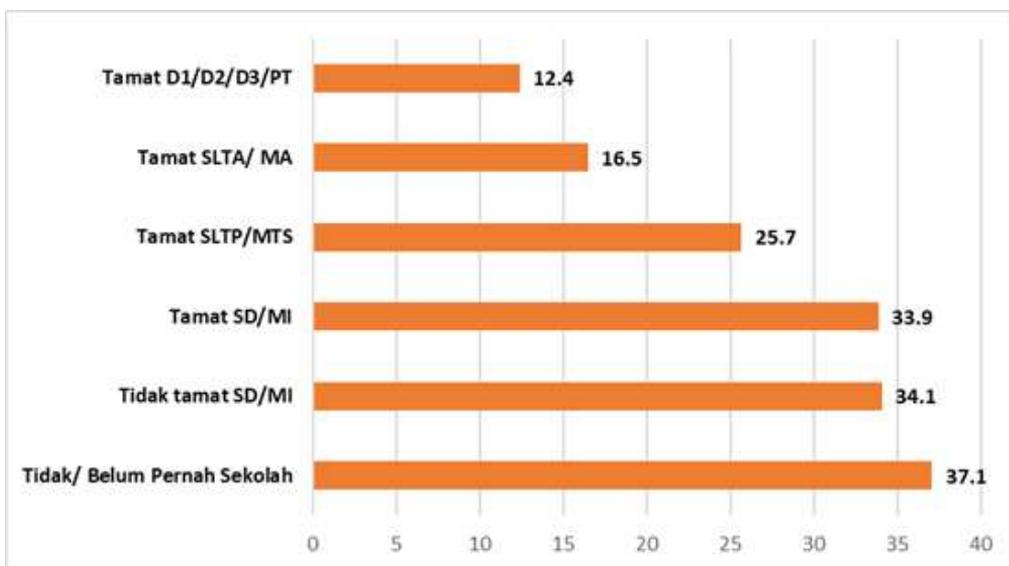


Figure 7. The Percentage of Household Complicated Access to the Hospital Bases on Educational Level (Kementerian Kesehatan RI Badan Penelitian dan Pengembangan, 2018)

Based on the diagram on figure 7, it is known that the community that is very difficult to get access to health care service to the hospital is a group of people who have not/have been school with a percentage of 37.1%. Then the community that does not graduated from Elementary

School (34.1%), and society group that graduated from Elementary School (33.9%). While the easy to get access to health services to the hospital by the level of education that has graduated from Bachelor Degree or University with a percentage of 12.4%.

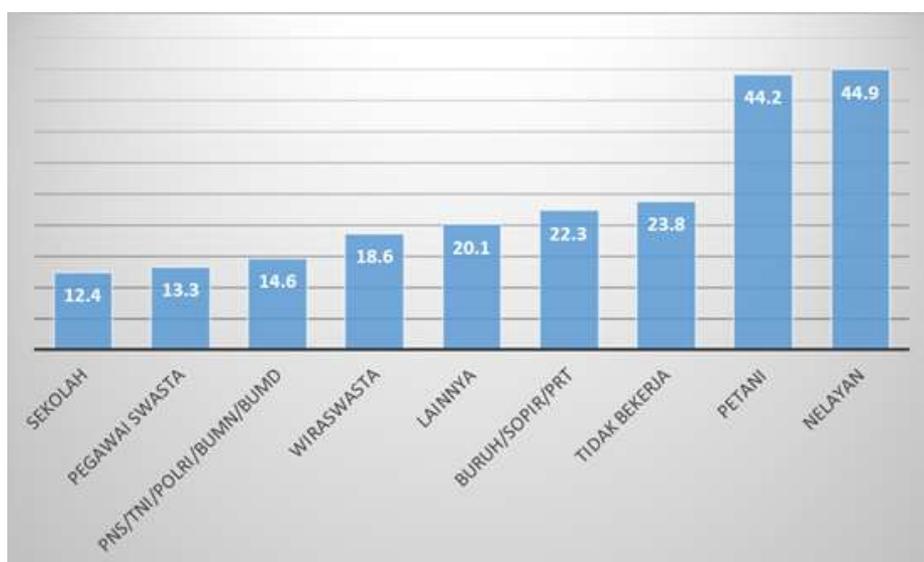


Figure 8. Percentage of Household Groups with Access Difficulties (Kementerian Kesehatan RI Badan Penelitian dan Pengembangan, 2018)

From the graphic on figure 8, it can be seen that the difficult community to get access to health services based on its job level is the highest percentage is a person who worked as an angler for 44.9%. The farmers with a percentage of 44.2% and a community that does not work very difficult to get access to the hospital service today.

CONCLUSION AND SUGGESTION

The results obtained from the use of the data presented by the researchers above become a real illustration that the bureaucracy reform conducted by the Government in the field of health services in Indonesia is not optimal. Because in accordance with the agenda of the Grand Design bureaucracy reform currently in the field of public service Area, which is, expected the change is about excellent service according to the necessity and expectations of society. Still many provinces that have not gained access to hospitals especially in rural areas proved that the bureaucracy reform of the health service sector has not been in accordance with the necessity and expectations of the society today. Because of the total number of 34 provinces in Indonesia that easily conduct health service access to hospitals only amounting to 10 provinces, while 24 other provinces are still very difficult to get access to the hospital and the condition is much enjoyed by the inhabitants in urban areas than in the rural area today.

The recommendations that researchers can provide for the Government are as follows:

The development of access to hospital disposal services that are evenly spread throughout the country, especially in the county area so that there is no inequality with hospitals built in the current urban area.

Organizing the bureaucracy of Modern health professionalism and work ethic and honest behavior in the management of health bureaucracy system is the necessity today. In addition, there must be collective awareness for all healthy human beings as well as other stakeholders.

Application of information technology as supporting good performance need to be empowered such as the reporting of health programs in Community Health Centre (*Puskesmas*). It is reporting recap districts, provinces to the center already have to have the technology of health information system that access quickly, easily in terms of monitoring and input the data of health programs that are actually done, so the validity of data and its validity can be held accountable.

Management system of health bureaucracy organization ranging from low to middle Community Health Centre (*Puskesmas*), Health Office and Health Department to be sought to have an autoclaved organizational system, in the sense of having a standard management implementation procedure, should also have a transparent accountability process both internally and externally organization.

Modern health management should be driven towards strengthening the professionalism of good attitude-based work, work ethic and good monitoring system so that every institution has a balancing power in its own institutional.

There is control on each of the system actors so that misuse of authority can be avoided so that the acceleration Goal of health vision can materialize

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