

The Implementation of Policies Used to Strengthen Family Planning Institution In Indonesia

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Abstract- This study is aimed to investigate the organization relation on the implementation of family planning program in Indonesia; street-level bureaucracy behavior in the implementation of family program in Indonesia; target group behavior in the implementation of family planning program in Indonesia; and institutional model in the implementation of family planning program in Indonesia.

This study used qualitative method. To gain the data needed, the respondents were purposively chosen. Regarding the data collection techniques, observation and in-depth interview was employed. The data was then reduced, presented, and verified.

The result of the study showed that the public policy model of family planning program needed institutional strengthening; independent resources development policy; public socialization and welfare improvement; reproductive health; and sustainability of population quality. The formulation of public policies had to reflect the representative formulation of problem developing stage in order to make the simple, general, and integrated policy that was applied to support the objective of family planning program. Moreover, the public policy had to be multi-purpose so that it could be policy that was easily organized, monitored, and applied into all family planning program policy units.

Index Terms— public policy, institutional strengthening

I. INTRODUCTION

National family planning (FP) program is one of important social programs for the nation progress. This program significantly contributes to the population development in the present and future, which is the prerequisite for nations' progress and independence. Its vision is to create the qualified family that builds new Indonesia' generations in the future and results strong and independent generations who are able to compete with the other nations in the world, especially in this current globalization era (National Family Planning and Coordinating Board (BKKBN), 2010).

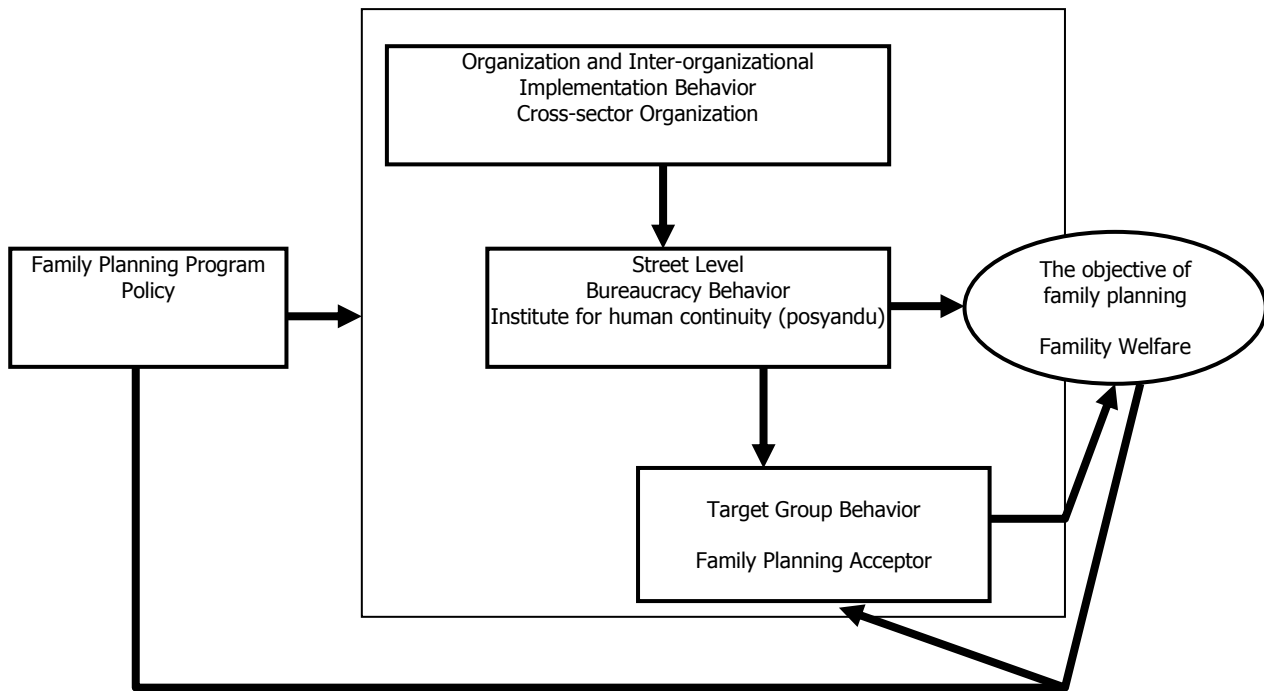
Indonesia currently has sought to improve the population quality by regulating the range of population growth in each year. Responding this, the policy of family planning program is required to strengthen several interrelated government institutions. There is a difference on the implementation of family planning program policy in the New Order and regional autonomy era. In the New Order, the rate of population growth was only 1.7% per year. Meanwhile, in regional autonomy era, it increases 2.4%. This fact indicates the decrease in the institutional strengthening of family planning program.

In New Order, Indonesia family planning program has shown a good result. The success was recognized not only nationally, but also internationally. United Nation for Population Fund has appointed Indonesia as center of excellent in the population field, family planning, and reproductive health. This achievement was inseparable from the success of family planning movement as an excellent development in three decades, in which there was the role of family planning fieldworker and counselor in attracting new acceptors.

This study is aimed to investigate the organization relation of family planning policy in Indonesia, the street-level bureaucracy behavior in family planning program in Indonesia, the target group behavior in family planning program in Indonesia, and institutional model in family planning program in Indonesia.

II. MATERIAL AND METHODOLOGY

The material used was suited with the objectives of this study. These objectives are to discover: the organization relation on the implementation of family planning program in Indonesia; street-level bureaucracy behavior in the implementation of family planning program in Indonesia; target group behavior in the implementation of family planning program in Indonesia; and institutional model in the implementation of family planning program in Indonesia. The framework of thinking used is showed below:



The above framework was made based on the Soren C Winter's theory, a model of integrative implementation. This model was chosen since it integrated all factors influencing the implementation on the other implementation models. In addition, this model was suitable with the implementation of policy used to strengthen family planning institution in Indonesia, in which there was the cooperation of related institution, street level fieldworkers who were directly interacted with family planning institution and policy implementation, and target group being a focus of policy.

Qualitative was phenomenology study describing the model of family planning program policy in Indonesia. The main point of phenomenology study, according to Satori and Komariah(2005), was the availability of the investigated problem. The phase of study started from observation, design development, preparation, implementation, data collection technique, data processing, data analysis, and data presentation.

The main characteristic of qualitative method was the instrument used, in which the researcher determined the scenario of the study either in participant observation or interview (Sumarsono, 2008). In other words, the researcher acted as the instrument of the study.

In qualitative study, the researcher position was quite complicated, in which he conducted a research, made a planning, analyzed and interpreted the data, and reported the result of the study. Therefore, the position of researcher as instrument above was correct considering his role in the whole research process (Nasution, 2007:5).

The observation and interview was used in integrated way by which it concerned on the formulation, implementation, and evaluation of policy models. Meanwhile, several steps were conducted in analyzing the data. Those were:

- a. Reducing the data, which meant making the conclusion from the interview result that were arranged to gain the important point and help the coding process of certain aspects of the study.
- b. Presenting the data, which meant taking the important points of the study to describe the finding of the study as well as make some matrixes, charts, and

graphics. The researcher then presented the data in the simple and practical form.

- c. Verifying the data, this meant drawing the tentative conclusion. At the beginning of the study, the researcher attempted to find the meaning of the collected data. From the collected data, tentative conclusion was made. The conclusion made was varied in order to obtain the reliability.

III. FINDINGS AND DISCUSSION

In Indonesia, the implementation of family planning program policy showed the increase of population growth, fertility/mortality rate, marital age, and migration in the last five years. In contrary, business area was limited. The detail depiction of this condition can be seen in the following table:

Table 1
The Data of Population Growth, Fertility/Mortality Rate, Marital Age, Migration, and the Condition of Business Area in Indonesia

Years	Population Growth (%)	Fertility Rate (%)	Mortality Rate (%)	Marriage (%)	Migration Number (%)	Business Area Condition (%)
2009	1.43	1.54	1.36	1.82	0.00	30.42
2010	1.51	1.50	1.38	1.76	0.00	29.55
2011	1.68	2.21	0.83	1.64	0.08	28.67
2012	1.70	2.11	0.79	1.80	0.09	27.55
2013	1.76	2.07	0.81	1.53	0.04	26.09

Source: Central Bureau of Statistic (BPS), 2014

The above table shows the increase of population growth corresponded with the increase of fertility rate, the decrease of mortality rate, and inconstant marriage percentage in each year. Meanwhile, the migration percentage did not significantly influence the population growth. Regarding the business area, it decreased every year. Responding this, family planning program could be used to improve the society life and welfare.

The increase of population growth also was demonstrated from the number of population in each era. The population growth in the old era until 1969, in which the family planning program had not become a policy, was only 0.96%. In New Order, it reached 1.54%. The program had been run at that time. Meanwhile, in autonomy era, it increased into 1.76% though the program was handled by regional government.

Moreover, in this new era, the family planning program management was no longer similar as in the past. The last program had been evaluated and, thus it caused the formulation and implementation of new policy. The policy change corroborated with the change in the implementation of regional autonomy. Winter (1990) states, the change are dealt with socio-economic context, including policy formulation, implementation process, and implementation result. Policy formulation contained both symbolic policy and conflict that were formed into policy design for the implementation process. Implementation process contained the implementation of institutional and cross-institutional behavior that was developed into bureaucracy behavior to gain working performance and outcome, which was supported by target group behavior. Working performance and outcome supported the policy formulation and implementation process. This was called the integration of implementation model.

The integration of implementation model was employed to examine the implementation process in institutional strengthening, which was concerned with the institution and cross-institution behavior to design and implement the policy. Winter (1990) mentions two important factors in the integration of implementation model that are used as the organization main principle: 1) Implementation result, which is

related to the process of policy formulation and design; 2) model focus, which is associated with implementation process influencing the result.

Relating to the family planning program in autonomy era, institutional strengthening played the important key in actualizing the working performance and outcome from the achieved goals—factors, as the result of family planning policy, which could be used as the applied policy process and design. In addition, it also could be a model of implementation process that influenced the result of institutional strengthening policy.

The weakness of institutional strengthening policy in handling family planning program was showed by the mutation of BKKBN (National Family Planning and Coordinating Board) and FP (family planning) officers to the other institution. There were only 60% - 65% officers handling the program, while 30% - 35% officers did not run the program anymore.

In addition, there was also a gap in the executed task, especially in the family planning guidance and counseling at sub-district and village area. One family planning fieldworker (PPLKB), nowadays, coordinated a village fieldworker (PLD) who covered three or four village. As a consequence, the guidance and counseling was not effectively operated (National Family Planning and Coordinating Board, 2010).

The fact also showed that the policy of family planning program was executed by Family Planning and Women's Empowerment Agency (BPP-KB). This program became a part of the family planning and welfare field. Thus, the program did not involve the fieldworker or counselor anymore. As a result, the society participation to this program was reduced. In this case, the program had lost its role in solving the population problem as well as the quality of society health and welfare, considering its existence only as supporting policy.

The above fact implied that family planning program was used only as the institutional strengthening policy. Nevertheless, rationally, the program was hard to be well implemented due to various failures in formulating the policy. As a consequence, maximum result was hardly gained.

Dunn (1999) states that policy is a problem needed to be solved and sustained process from implementation. This meant that a policy would be well implemented if it was supported by effective activity. Hence, the good result in solving the public problem was obtained.

The decision to set family planning program in Family Planning and Women's Empowerment Agency was not a good idea. As previously mentioned, this only dismissed its role of as national program, in which it had to be maintained. In addition, institutional strengthening in organization did not fully support this program as the main program.

Another fact of the weakness of institutional strengthening in family planning program was presented in the following things: the disuse of the old policy assets; the transfer of institutional function (from central government institution to sub-regional government institution); the unemployable trained officers; and the fieldworkers' undeveloped competency in family planning program. This condition was resulted from the ineffective model in strengthening the institution.

According to Pason (1990:221), there are four stages to analyze the institutional strengthening model in public policy: 1) failure analysis model which views implementation as interaction process between goal arrangement and behavior; 2) rational model (top-down) which identify the factor supporting the succeed of implementation; 3) bottom-up model which sees the other significant factors in government and society interaction; and 4) synthesis model, which views implementation as evolution, learning, and policy action continuum.

The result of the study as well as its recommendation was elaborated below:

- a. The proper policy model to promote family planning program was the model of human resources development policy
- b. The model of policy formulation attempted to: define the policy problem issue, determine policy criterion, identify the alternative policy, and collect the relevant data to be formulated in family planning program.
- c. The model of policy implementation consisted of the policy of organization, monitoring, and leadership in implementing family planning program.
- d. The model of policy evaluation, examining the result of policy based on the measured and monitored working performance in supporting the family planning program.

The above explanation constructed the theory called "the model of family planning program policy in institutional strengthening". Meanwhile, from the result of this study, it can be concluded that:

- a. The model of public policy in family planning program needed to strengthen its institution, develop independent resources, socialize with the society in conducting the guidance, and orientate to the welfare improvement, focus on reproductive health and sustainability of population quality.
- b. The formulation of public policy needed to reflect the representative formulation in problem developing stage as well as made simple, general, and integrated policy formulation to support the objective of family planning program.
- c. The implementation of public policy needed to be multi-purpose so that it could be easily organized,

monitored, and headed into all units of family planning program policy.

- d. The evaluation of policy was comprehensive assessment of working performance used as a basis to repair the weaknesses and maintain the gained result.

IV. CONCLUSION, IMPLICATION, AND RECOMMENDATION

1. The public policy is hardly formulated, implemented and evaluated if it is not criticized by the public as a basis for the government to design and apply the public policy model.
2. Organization policy model is a recommended model that can promote the family planning program as the national program, which can improve society welfare through the organized participation and be responsibility of policy implementer.
3. In promoting family planning program, the government policy should show partiality to public. The policy needs to have efficient, effective, and responsive principles in order to get public's support and appreciation.

Based on the above explanation, street-level agency is recommended to conduct intensive and continual effort to socialize the government policy of family planning program, in the case of either contraceptive usage or the alternative ways to avoid fertility. Moreover, the government is suggested to support the strengthening of family planning institution on the target group by facilitating the society to be family planning acceptor, increasing the incentive budget for family planning counselor, providing low-cost contraceptive and improving infrastructure to support the implementation of family planning program.

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