

# The Effect of Policy Implementation, Leadership, Human Resource Quality, and Community Participation on Family Planning Program Effectiveness in City of Makassar

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**Abstract-** Indonesian population is on the poor state at this moment. Population problem in City of Makassar caused by Family Planning Program (Program Keluarga Berencana – KB) in post local autonomy that tend to be less effective. In that relation, this research aims to study on how far is the partial and together effect of policy implementation, leadership, Human Resources (Sumber Daya Manusia – SDM) quality) and community participation on KB Program effectiveness in City of Makassar. Research method used is explanatory method, quantitative research type with descriptive analytic, with total population of 1566, total sample of 415 and also determination coefficient and linear regression analysis method.

Research result in City of Makassar shows in partially that policy implementation have effect in amount of 59,8% on KB program effectiveness, which determined from program readiness and policy concept, there's leadership effect as of 57,3% on KB program effectiveness, there's effect SDM quality as of 42% on KB program effectiveness, and effect of community participation as of 54,9% in KB program effectiveness, and they're together have effect as of 67,4% on KB program effectiveness.

**Index Terms—** Policy Implementation, Leadership, Human Resource Quality, Community Participation, and Effectiveness.

## I. INTRODUCTION

Population Census (Sensus Penduduk – SP) result on 2010 shows that total of Indonesian population is approximately 237,6 million people, exceed the 234,2 million projection. Indonesia has actually decrease population growth rate from 2,3% per annum on early implementation of KB program in 1970 and become 1,4% at this current year.

Commitment of kabupaten/city government on KB program is still low. This can be reflected from a number of kabupaten government that consider KB program as a burden so that the given budget is also far from adequate, because they still consider KB program don't generate Local Own-Source

Revenue (Pendapatan Asli Daerah – PAD). But on the other side, there are also kabupaten and/or city care with KB program because of strong leadership and also have further envision for their local development. It is mostly seen that kabupaten and/or city government only concern physically development with direct result. While development in form of Human Resource Development are ignored because give no direct result. This is the location of leadership effect of respective kabupaten/city government with state spirited and having further envision for their area development.

The strong reason behind the importance of KB program is in its relation with human resource development effort. Beside that there's also reciprocal relationship between health reproduction including KB and welfare. KB service which is one of Essential Health Reproduction Service package need to be given serious concern, because with high quality KB service it's expected that there will be increase in health and welfare level. With the changed paradigm in managing population and development problem from fertility decrease and population controlling approach into approach with focus on health reproduction and reproduction right, so then KB service must be having more certain quality and concerning the right of community/client in choosing desired contraception method.

KB program achievement so far are so much determined by community participation, in which role of religious leader, community leader, custom leader, youth, woman leader and all component of communities so much determine the success of KB program. In order to generate community potential is not that simple, firm KB field counselor and had been given skill training are need. At present, KB counselor experience drastic decrease as result of decentralization. Many KB counselor with switching function and having structural position beside some of them are retired. On the other side the new KB counselor recruitment is very much limited, making KB program can't effectively run.

City of Makassar government budget fund of Rp 6,5 billion for population growth controlling through KB program. Beside from Local Budget, there's also special allocation budget from central government in amount of Rp 1,1 billion which certainly to give more support the implementation of KB program in City of Makassar. Activity budget plan support in KB program implementation from City of Makassar government from year to year is always increase. In 2012, City government budget raised 13% from the previous year, Rp 6,6 billion. The given fund support from year to year is so much adequate and always increase as of Rp 1 billion every year, with that adequate fund support, BKKBN of City of Makassar in implementing KB program in this city shows quite significant increase. In 2011, total of childbearing age couple raised by BKKBN of City of Makassar to become acceptor is still 51.208 couples or 112% from target of 45.720 couples. While active acceptor achievement of year 2011 reached 127.045 couples, exceeding 120% from established target of 105.645 couples.

Nevertheless, those acceptor achievement effectiveness rate in suppressing population growth rate in City of Makassar, is not quite adequate. It's because City of Makassar position as city of education, trade, and economy centre become special

attraction for urban communities to move to city, so that population growth rate in City of Makassar is always increase every year.

The reason of the unestablished Local KB and Population Agency (Badan Kependudukan dan KB Daerah – BKKBD) in respective province is there isn't yet any issued Government Regulation as the implementation of Act Number 32 Year 2004 (Government Regulation Number 38 and 41 Year 2007) and the limited authority of BKKBN situated as Non-Ministerial Government Institution. The Weak Local Government Commitment has also caused the shrinkage of KB field staff force (Petugas Lapangan KB – PLKB) and KB counselor (Penyuluh KB – PKB). PLKB presence is the spearhead of KB counseling directly connected with community in village/kelurahan that become their founding. According to Minimal Service Standard (Standar Pelayanan Minimal – SPM), ratio of KB counselor/KB field staff force (PKLB) are 1 PKB/PLKB for each 2 village/kelurahan in 2014. Whereas at present the national ratio are 1 PKB/PLKB for 4-5 village/kelurahan. These condition in each province are vary dan show quite high discrepancy (See Table 1.1).

TABLE I. PLKB AND PKB SITUATION IN INDONESIA

Province	Kabupate n/ City	Sub- district	Keluraha n/ Village	PLKB/PKB (Honorary Civil Servant/Contract/ Volunteer)	Village per PLKB Ratio
National	497	6.566	29.075	21.501	3,7
DI Aceh	23	276	6.491	513	12,7
North Sumatera	33	444	5.876	1.250	4,7
West Sumatera	19	168	1.033	415	2,5
Riau	12	156	1.736	402	4,3
Jambi	11	127	1.484	999	1,5
South Sumatera	15	218	3.205	611	5,2
Bengkulu	10	116	1.508	293	5,1
Lampung	14	214	2.511	554	4,5
Bangka Belitung	7	46	380	101	3,8
Kepulauan Riau	7	59	371	294	1,3
DKI Jakarta	6	44	267	463	0,6
West Java	26	628	5.941	2.778	2,1
Central Java	35	585	8.541	2.403	3,6
DI Yogyakarta	5	78	438	263	1,7
East Java	38	662	8.505	2.936	2,9
Banten	8	187	1.545	264	5,9
Bali	9	57	716	503	1,4
NTB	10	111	1.122	620	1,8
NTT	21	264	3.052	538	5,7
West Kalimantan	14	175	1.970	313	6,3
Central Kalimantan	14	119	1.528	452	3,4
South Kalimantan	13	139	2.000	595	3,4
East Kalimantan	14	136	1.469	301	4,9
North Sulawesi	15	160	1.733	1.003	1,7
Central Sulawesi	11	161	1.903	364	5,2
South Sulawesi	24	304	3.015	847	3,6
South-East Sulawesi	12	191	2.159	501	4,3
Gorontalo	6	65	732	232	3,2

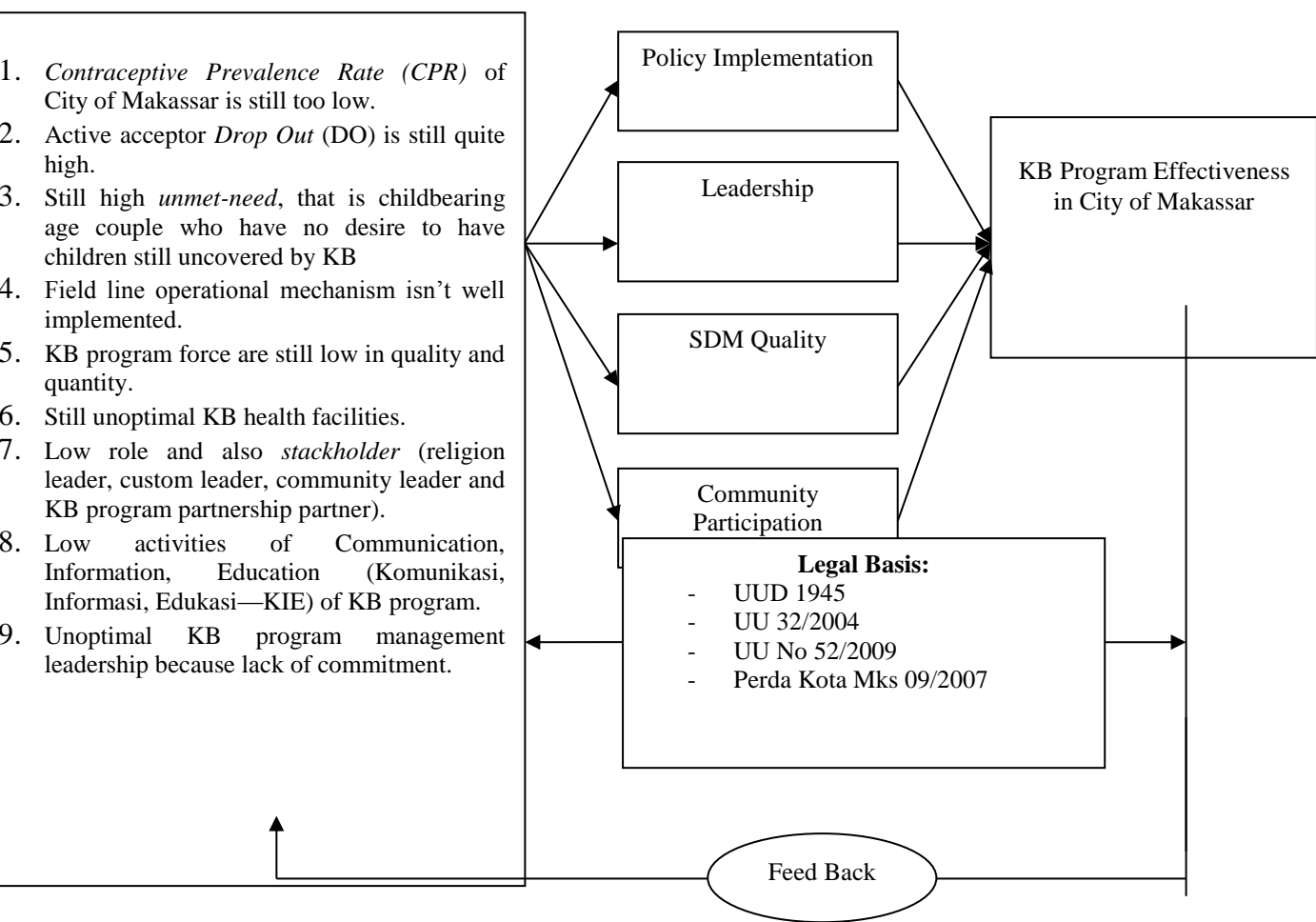
West Sulawesi	5	66	645	212	3
Maluku	11	76	1.027	156	6,6
North Maluku	9	99	1.075	87	12,4
West Papua	11	157	1.441	152	9,5
Papua	29	278	3.619	86	42,1

Source : Direktorat Bina Lini Lapangan, BKKBN, 2012

The ineffective KB program after post- local autonomy are because the low commitment of kabupaten/city government. Beside that, it is also caused by policy implementation that isn't yet implemented as it is expected. The cause amongst them are weak supervision, low quality of SDM, inadequate budget support and low community participation due to lack of driving force from KB counselor and cadre.

Based on above description, researcher conduct research entitled "Effect of Policy Implementation, Leadership and Human Resource Quality, and Community Participation on Family Planning Program Effectiveness in City of Makassar."

Fig. 1. Research Framework of Thinking



## II. RESEARCH METHOD

This is an explanatory quantitative research design. Research variables are classified into four parts, that are independent variables of education policy implementation ( $X_1$ ), Leadership ( $X_2$ ), SDM Quality ( $X_3$ ) and Community Participation ( $X_4$ ) and dependent variable of KB Program Effectiveness in City of Makassar ( $Y$ ).

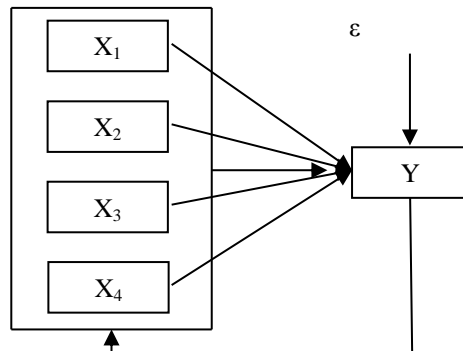


Fig. 2. Research Design

Research population are related institutions in City of Makassar and various parties considered as having relation with the problems studied, in amount of 1.566 people. By using Slovin formula 415 sample respondents were obtained. Data collection method are using literature study and field research with observation, questionnaire and interview. While data analysis method are using the following formulas: (1) descriptive statistics, (2) Validity and Reliability Test, (3) Classic Assumption Test (data normality test and multicollinearity), (4) Determination Analysis, (5) Simple and Multiple Linear Regression and Hypothesis test with t Test and F hitting Test. Research conducted in City of Makassar.

## III. DISCUSSION AND RESEARCH RESULT

Before discussing the study finding, the following section highlights the test results to examine the data.

### 1.1. Reliability Test

To obtain the reliability coefficient of the questionnaires, Alpha Cronbach was calculated using SPSS, and the test reliability results for all variables were significant (0,727 – 0,773). Education policy implementation ( $X_1$ ) has  $\alpha = 0,773$ , Leadership ( $X_2$ ) with  $\alpha = 0,750$ , SDM quality ( $X_3$ ) with  $\alpha = 0,727$  and Community Participation ( $X_4$ ) with  $\alpha = 0,767$  and also dependent variable of KB Program Effectiveness in City of Makassar ( $Y$ ) with  $\alpha = 0,910$ . From this result, we can see that the questionnaire used for each variable is reliable, as they have reliability coefficient higher than 0.6.

### 1.2. Validity Test

Validity of each item in the questionnaire calculated using “product moment” correlation technique. From 15 questionnaires responded by 415 subjects ( $n = 415$ ),  $\alpha$  value was 0,05. If we compare this result with  $r_{table}$  of 0,098, it can be concluded that each item in the instrument of all variables were valid (0,443 – 0,566). Policy Implementation ( $X_1$ ) had value of

0,486, Leadership ( $X_2$ ) with value of 0,433, SDM Quality ( $X_3$ ) with value of 0,566 and Community Participation ( $X_4$ ) with value 0,521 and also dependent variable of KB Program Effectiveness in City of Makassar with value of 0,473.

### 1.3. Hypothesis Test

Based on hypothesis test result using SPSS 16 for Windows program, the following are calculation result from those five hypothesis:

- $\hat{Y} = 1,783 + 0,585X_1$
- $\hat{Y} = 1,765 + 0,643X_2$
- $\hat{Y} = 1,300 + 0,567X_3$
- $\hat{Y} = 2,002 + 0,588X_4$
- $\hat{Y} = 0,880 + 0,374X_1 + 0,368X_2 + 0,181X_3 + 0,227X_4$

### 1.4. Discussion

From research result, all hypothesis in this research were significant. From 4 independent variables examined, policy implementation variable ( $X_1$ ) was the most influential on KB Program Effectiveness in City of Makassar, followed by Leadership ( $X_2$ ), Community Participation ( $X_4$ ), and finally SDM Quality ( $X_3$ )

#### 1.4.1. The Effect of Policy Implementation on KB Program Effectiveness in City of Makassar

Policy implementation ( $X_1$ ) gave significant and positive effect in amount of 59,8% on KB program effectiveness in City of Makassar. Thus, in order to increase KB program effectiveness can be performed by increasing KB Policy Implementation Effectiveness in City of Makassar by paying attention on program and policy concept readiness of KB program, especially on the following indicators:

- Work force
- Understanding
- Activity Type
- Target

In term of policy concept, it can be seen that City of Makassar government has issued local regulation Number 09 year 2007 on Formation of Working Procedure Organization Structure of City of Makassar KB Agency, City of Makassar Major Regulation Number 46 Year 2009 on Duty Description of Structural Position of City of Makassar KB Agency, and City of Makassar Major Regulation Number 77 Year 2009 on Organization Structure and Working Procedure Formation of Technical Implementation Control Unit of KB Program in Sub-district Level on City of Makassar KB Agency. In order to regulate, control, promote, and serve the community for the need of KB program, then a number of policies in form of local regulations and City of Makassar Major regulations conducted as logic consequences of decentralization from central government to local government (local autonomy) in terms of KB program. Those policies are also as mean of strategies taken to solve population problems and KB in City of Makassar in regard to raise SDM quality to realize happy and prosperous small families.

In order to streamline KB program implementation after the issuance of Act Number 53 Year 2009 on population development and family development, national KB program has new vision and mission listed in The National Medium

Term Development (Rencana Pembangunan Jangka Menengah Nasional – RPJMN) year 2010-2014, with vision of “equal population growth year 2015” and mission of “realizing population insightful development and realizing happy and prosperous small family.” Purposes intended with that vision and mission are as follows: First, realizing congeniality, harmony and stability of population policy to stimulate the practice of population insightful national and local development. Second: realizing stable population growth through institutionalization of happy and prosperous small family.

For policy program indicator dimension, City of Makassar government has established clear target as description of long term development, medium term development, and annual plan. City of Makassar KB program local working meeting held after national working meeting, province KB program working meeting. It was agreed on that working meeting several points either in form of new KB program participant target, active KB participant, kinds of activity and budget available and force that expected to involve in the program implementation and other agreement that expected can achieve the established target.

For implementation stage dimension, City of Makassar government through KB agency has designed program and clear task and objective formulation and has been described to the respective component in KB agency until KB counselors in form of performance contract in which size of achievement, cost and time has been established. Thus, periodic monitoring and evaluation conducted to ensure whether target and objective are achievable, and also whether program implementation run according to correct procedure and method. The fact shows that the implementation still need to be more optimized.

#### **1.4.2. The Effect of Leadership on KB Program Effectiveness in City of Makassar**

Leadership gave significant and positive effect in amount of 57,2% on KB program effectiveness. Thus, to increase KB program effectiveness can be conducted by increasing Leadership Effectiveness in City of Makassar by paying attention to the following 4 (four) leadership variable dimensions ( $X_2$ ): guidance, direction, support and maturity, especially on the following indicators:

- Performing task
- Determining goal
- Area mastery
- Work completion

From those four dimensions, direction dimension covering indicators of together goal, work quality, policy taking and work completion is the most influential on KB program effectiveness. Leader has succeed to socialize KB program vision and mission as something to realize and gave motivation to a number of program administrator to achieve it. Beside that, work quality especially all administrator and executor of KB program in field become factor determining KB program effectiveness, because it is so influential for KB participation. Policy taking and work completion are also becoming factors determining KB effectiveness. It is because when there's mistake in established policy or target and goal taking occur, it's so much influence on the KB program effectiveness. According to available data, from the targeted new acceptor of

42.993, 52.351 has been achieved in 2012 or 121,77% from target. Whereas in 2013 there's decrease although still able to exceed the target, 54.043 acceptor from 46.820 targeted acceptor or 115,43% from target. Indicator dimension that becomes the weak point in leadership is maturity indicator dimension which include knowledge, discipline, area mastery, and exemplary. This can be reflected from attitude and practice knowledge of all KB program management/executor, that is not proportional with the KB program vision and mission. It's frequently encountered in field that a number of KB staff, who should actually persuade community to follow KB, but they persuade the opposite thing. Thus, discipline, consistency, and integrity of KB program management/executors are charged. Beside, there's need to always promote education and training (pendidikan dan pelatihan – diklat) for all staff, so that they're always follow the current KB program development, and the raise of community demand.

#### **1.4.3. The Effect of Human Resource (SDM) quality on KB Program Effectiveness in City of Makassar**

SDM quality had significant and positive effect in amount of 42% on KB program effectiveness. Thus, to increase KB Program effectiveness can be conducted by increasing SDM quality in City of Makassar by considering Skill and Development of SDM Quality, especially on these following factors:

- Competency
- Professionalism formation
- Participation
- Training

Description from 3 (three) SDM Quality variable ( $X_3$ ) are Coaching, Development and skills. From those indicator dimensions, it seems that skill dimension covers five indicators, Competence, Knowledge, Work description, participation and training have most influence compared with other SDM quality dimension.

As we have already known, KB program need staff that meet special qualifications, either for KB counselor or service staff. Specifically for contraception service staff, they need skill and knowledge competencies. Thus, technical training become priority to increase SDM quality. On each year has been conducted training for KB counselor or medical staff and will performed by KB Agency of City of Makassar or BKKBN of South City of Makassar Province. Fact in fields show that many *Drop Out* KB acceptor, because of low quality KB contraception services, so failures and complications occur. Beside the factor of KB instructor or counselor that not according to the established standard, has caused KB acceptor have doubt to take action when side effect of KB occur. Thus, skill dimension of SDM quality so much determine to realize KB program effectiveness.

Coaching dimension is the least influential dimension on SDM quality variable on KB program effectiveness. Coaching dimension consists of 5 (five) of the following indicators: Responsibility, Discipline, Encourage, Ability and Self-Development. One of the influential factor is the low level of prosperity, especially for KB counselor, whose functional allowance is lower than other functional such as farming counselor, etc. On the other side, they are obliged to perform various activities as their main duty and need big sacrifices, either force, mind and even materials.

#### 1.4.4. The Effect of community participation ( $X_4$ ) on KB program effectiveness in City of Makassar

Community participation had significant and positive effect in amount of 54,9% on KB program effectiveness. Thus, to increase KB program effectiveness can be conducted by increasing Community Participation in City of Makassar by considering Stimulant and also Community Ability and Partnership Factors, especially on the following indicators:

- Process
- Skill
- Evaluating and modifying response
- Determining resource allocation

Community participation variable ( $X_4$ ) has 4 (four) of the following dimensions: Ability, Partnership, Stimulant Factor, and Benefit. From those four dimensions, it's stimulant factor dimension that most influence the community participation toward the KB program effectiveness. Stimulant factor dimension has 4 (four) of the following indicators, Process, Goal, Negotiation, and Action. That can be understandable as community will be able to participate optimally if they are involved from the initial planning (process), activity, and evaluation and also monitoring stages. Community will have sense of belonging toward KB program if they are optimally involved, which in turn will give huge contribution on the triumph of KB program.

On each local working meeting of KB program, always involved community element that is represented by Religion Leader, Community Leader, Custom Leader, Youth Leader, Woman Leader, and many others. Those community leader involvement are in form of taking part in formulation programs will be implemented and on the middle of the year KB program reviewing program will be held in order to evaluate program and activity had been implemented, formulate the problem and its solution. Thus, stimulant factor in community participation is so much determine the KB program effectiveness.

Dimension with the least influence in community participation is ability dimension. Ability dimension has 4 (four) of the following indicators: Thought, Force, Skill, and Result achievement. It seems that, SDM quality in field are still low. This can be reflected from the low average education level of the community, in which so much influence the quality of KB program achievement result. Childbearing age couple with low education level tend to have more children compared to high education level childbearing age couple. According to the result of various research show that the higher individual education level, the tendency to have children are lower (small family).

City of Makassar Government since 2007 had launched KB program implementation through City of Makassar Bebas Program, with the purpose to fasten birth rate decrease, solve population explosion problem which finally will lessen economic development burden through KB service access on government KB service facilities for free.

Strategic target had also experienced change to the more intensive direction and quality. If in RPJMN 2005-2009 *Total Fertility Rate (FRT)* was established in 2,2 with Population Growth Rate (Laju Pertumbuhan Penduduk – LPP) 1,14%, then in RPJMN 2010-2014, TFR are directed to the more controlled population growth rate and total marked with TFR of 2,1 and *Net Reproduction Rate (NRR) = 1*. Those conditions

are the reflection of balance population growth in which there's balance and harmony between LPP with economic growth, social development, and many others.

Another target in national level amongst them the increase of *Contraceptive Prevalence Rate (CPR)* in modern way increase from 57,4% to 65% and the decrease of unmet-need KB toward PUS from 9,1% into 5,0%. There's also target to decrease of *Age Specific Fertility Rate (ASFR)* of 15-19 years from 35 into 30 per 100 women, an increase of first marriage median age of woman from 19,8 into 21 years. The decrease of unwanted pregnancy from 19,7% into 15%. The raise of male KB participant from 3,6% into 5%. Also the raise of KB PUS participatory of underprivileged family and KSI of productive economy business member from 85,7% into 87% and family develop (bina keluarga) into 70%. The formation of Population Agency and KB in 435 Kabupaten/Cities and the raise in total of KB clinic that give KB service according to SOP (*Informed Consent*) from 20% into 85%.

#### IV. CONCLUSION

1. There's significant and positive effect of policy implementation in amount of (59,8%) on KB program effectiveness in City of Makassar. By increasing effectiveness of policy concept, policy program and policy implementation stage can increase KB program effectiveness, and
2. There's significant and positive effect of leadership in amount of (57,2%) on KB program effectiveness in City of Makassar. By increasing leader ability to give guidance, direction, support and maturity in implementing KB program can increase KB program effectiveness.
3. There's significant and positive effect of SDM quality in amount of (42%) on KB program effectiveness in City of Makassar. Increasing SDM quality through coaching, development and skills in implementing KB program can increase KB program effectiveness.
4. There's significant and positive effect of community participation in amount of (54,9%) on KB program effectiveness in City of Makassar. Increasing community participation through increasing attracting factors and benefit in taking part, the presence of ability and partnership in group in implementing KB program can increase KB program effectiveness.
5. There's significant and positive effect of policy implementation, leadership, SDM quality and community participation together in amount of (67,4%) on KB program effectiveness in City of Makassar. In this terms, main factor influencing KB program effectiveness is implementation policy variable, with leadership variable as the supporting factor, and community participation and SDM quality variable as the reinforcing factors.

#### V. REKOMENDATION

1. Policy implementation for KB program effectiveness in City of Makassar still need to be given more attention, especially on the harmony of KB program and field force management. Things related to low quality SDM, either in quantity or quality that impact on the decrease of KB program coaching reach in field line. Thus, addition of KB counselor in KB

Management in City of Makassar are the policy need to conduct, and also the need of increasing KB counselor quality SDM through education and training, either in position or outside position education for KB officer in City of Makassar.

2. In relation with leadership, high commitment from government and city government are needed toward national KB program, beside the need to increase participation of community leader, religion leader, education leader, custom leader and other *stackholder*. Thus, BKKBN need to simultaneously facilitating and coordinating until field line.
3. In terms of KB program effectiveness, need to be take implementation that encourage community participation in KB program, in overall and integrated with all development sectors.
4. In order to ensure program smoothness, then in National KB Program management need to be conducted several approaches, such as incentive approach through the presentation of aid and appreciation related with KB program triumph, such as the presentation of general fund allocation to local area and other fund resources added to success criteria of KB implementation. Thus, Kabupaten City Government can be more enthusiastic in implementing KB program, and there's no overlap policy that can obstruct National KB Program.
5. To achieve the desired KB program effectiveness, then there's need to increase economic standard of living, especially the poor families, so that by increasing family income, and with the willingness to live more happily and prosperous, then the urge to have small family will emerge. Beside that, Free KB service for all community layers which categorized as underprivileged family are need to be consistently implemented.

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