

Implementation of the Family Welfare Empowerment Program in the Health Sector in the Sula Islands District, Indonesia

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ABSTRACT: *This study aims to determine the implementation of the Family Empowerment and Welfare Program (FEWP) in the Health Sector in the Sula Islands District, Indonesia. In this study data were obtained through in-depth interviews with 22 informants who were randomly selected from management and members of the FEWP Village level Mobilization Team in Sanana District. The informant is a person who is considered to have adequate knowledge on the issue of implementing the community empowerment program in the health sector by the FEWP Sula Islands. The results showed that the implementation of FEWP in the Sula Islands District had been going well. Supporting the implementation of these factors is the bureaucratic structure, behavior and communication. While the inhibiting factor is the resources associated with physical buildings for posyandu activities.*

KEYWORDS-*Program Implementation, Empowerment, Welfare, Health*

I. INTRODUCTION

In the Preamble to the 1945 Constitution of the Republic of Indonesia paragraph IV, it was stated that the objective of national development is to protect all Indonesians, improve the welfare of the people, educate the life of the nation and participate in carrying out world peace, based on freedom, lasting peace and social justice. To accelerate the achievement of national development goals in order to create a prosperous community life, a comprehensive community empowerment program is needed and is directly related to the family. The family is the smallest community that inhabits a household consisting of several people as family members. The number of family members shows the population of an area or region. One of the drivers of community empowerment programs in Indonesia is the Family Welfare Empowerment Program, or abbreviated FEWP.

The FEWP movement was born in 1950 through household economic efforts taught by the family welfare training center of the Ministry of Education and Culture. In 1999, the reform era was born with the spirit of a new government in accordance with Law Number 22 of 1999 concerning Regional Government. The Central FEWP Mobilization Team held an FEWP Extraordinary National Working Meeting on October 31, 2000 in Bandung which resulted in an agreement that the understanding and nomenclature of the FEWP Movement changed from Family Welfare Development to Empowerment and Family Welfare.

Efforts towards public welfare cannot be separated from one of the inhibiting factors known as poverty. The number of poor people in the Sula Islands District experienced an up and down trend during the period

2010 - 2017. According to data from the Central Statistics Agency, in 2017 the number of poor people in the Sula Islands District was 8,790 people.

The Family Empowerment and Welfare Movement, which is managed and implemented by the Family Empowerment Team and Welfare Motivation at every level is the spearhead of direct family development with the aim of creating prosperous and independent families. There are 10 main FEWP programs that basically are basic human needs, namely the appreciation and practice of Pancasila, cooperation, education and skills, the development of cooperative life, housing and household governance, health, food, clothing, healthy planning and environmental sustainability. In carrying out its work program, four working groups or working groups are formed to coordinate and control the activities of each work group. The source of funding for the FEWP program comes from mutually beneficial cooperation between members and the community.

The results of Supriyadi's research (2016), on Efforts to Empower Family Welfare in Pakis, Magelang Regency, show that there are factors that hamper the program, which come from FEWP members and from the environment. While the supporting factors are the strong encouragement from the council and the support from outside the group.

The Sula Islands FEWP Mobilization Team has been formed since 2003. The formation of the Sula Islands Regency is in accordance with Law No. 1 of 2003 concerning the Establishment of North Halmahera Regency, South Halmahera Regency, Sula Islands Regency, East Halmahera Regency, and Tidore Islands City in North Maluku Province. The Sula Islands Regency Family FEWP Team has carried out various activities as an implementation of the 10 FEWP Basic Programs. Sanana is the capital of the Sula Islands District which has top priority for the implementation of the 10 FEWP Basic Programs when compared to 11 other regions in the Sula Islands District. Sanana's selection as a research location is based on aspects of population heterogeneity, education level, type of work, income level, and easily accessible geographical location. The FEWP Mobilization Team in Sanana Regency consisted of 11 villages between Mangon Village, Waibau Village, Fagudu Village, Falahu Village, Fatce Village, Fogi Village, Waihama Village, Wai Ipa Village, Umaloaya Village, Pastina Village, and Wailau Village.

The activities that are considered successful in all FEWP programs are as follows:

1. Food Socialization (consisting of: Diverse, Nutritious, Balanced, and Safe)
2. Promote, about healthy food, 4 healthy 5 perfect
3. Create a competition to make a healthy and nutritious Food Menu
4. Training on making household waste recycling products
5. One village one Early Childhood Education program
6. Sports and health promotion
7. Gymnastics competition
8. Counseling about family planning
9. Dissemination of the dangers of snack additives for elementary school children

The success of the activities carried out by the Sula Islands FEWP Movers Team is inseparable from a number of supporting factors including:

- Support from the Sula Islands Regency Government, in this case the Sula Islands Regent as Chairperson of the Sula Islands FEWP Movers Team
- Positive response from the community and members of the District and Village FEWP Mobilization Team
- Support from relevant agencies as Members of the Board of Trustees of the Sula Islands Regency FEWP Mobilization Team
- Enthusiasm for the work of the Sula Islands Regency FEWP Mobilization Team

The implementation of the above program is manifested in routine activities by the Sula Islands FEWP Activator Team as a program implementation planned by each FEWP working group. Program Working Groups I to Working Group IV are divided into several activities that will be evaluated to determine the level of success of the program that has been determined. The program that was considered a failure was the socialization of the FEWP program called HATIN (a beautiful, shady and comfortable page). This is due to the infertile soil

structure in Sanana District where the land is filled with gravel and stones. Public awareness is still low which still allows pets to roam free so that livestock can damage protective plants.

Based on the explanation above, the researcher wants to conduct a study entitled "Implementation of the Family Welfare Empowerment Program in the Health Sector in the Sula Islands District, Indonesia". This research is focused on one of KDP's main programs, namely activities in the health sector and factors that constrain and support the success of this activity.

II. LITERATURE REVIEW

A. Implementation of Public Policy

Dwijowijoto (2008) states that to understand the implementation of a policy, there are nine models of policy implementation that can be used as a theoretical basis, namely the Edward Model, Van Mater and Van Horn, Mazmania and Sabatier, Hogwood and Gunn, Grindle, Elmore and the Network Model. In this study, only three models were described that have closeness and similarity with the design of this study.

1. Model Edwards

This model was proposed by George C. Edwards (in Dwijowijoto, 2009) by asking four variables that oppose and support policy implementation. These four factors are communication, resources, disposition, and bureaucratic structure. These four factors support one another to help or support the implementation of public policies.

a. Communication

Edwards discusses three important things in the policy communication process, namely transmission, consistency, and clarity. Transmission deals with how to change policy decisions for everyone before they implement them. If the policy must be implemented correctly, the implementation instructions must be clear and understandable by the implementor. There are several obstacles in the transmission process, namely differences of opinion when implementing instructions issued by policy makers, information must pass through a hierarchy, and there are differences in perceptions about the actual content of communication.

Consistency in policy implementation. A consistent order will avoid errors in applying the policy because of an error in interpreting the policy implementation. The aspect of implementation clarity is related to policy instructions so that message ambiguity in communication will result in wrong interpretations and even conflict with the true meaning of the message.

b. Resources

These resources include staff who have the expertise and ability to carry out public service tasks. Staff who have adequate skills will encourage the implementation of public policies to run well. The next resource is information in the form of guidelines for implementing public policies and compliance with applicable regulations. Another important resource is the availability of supporting facilities in the form of physical buildings and equipment that support policy implementation.

c. Disposition

Behavior is defined as good attitude and support for implementing policies to implement a policy. Policies will be effective if they have the support of policy implementers. One way to get support from policy implementers is to provide incentives for policy implementers.

d. Bureaucratic Structure

Bureaucracy is an organization that implements policies. Bureaucracy according to Edwards (in Dwijowijoto, 2009) has two characters, namely Standard Operating Procedure (SOP) and bureaucratic division. Work procedures become the main guidelines for action.

2. Model Van Mater dan Van Horn

This model describes the process of implementing public policy which is influenced by two variables that shape the relationship between policy and its implementation. The first variable, the main variable, consists of: the basis of policy making, policy objectives, and the resources that implement them. The second variable is

an intermediate variable which includes: communication between the organization and its implementing activities, characteristics of the implementing agency, socio-economic and political conditions and the attitude of the implementing officer.

3. Model Sabatier

According to Sabatier, there are two models that race in the policy implementation stage, namely the top down model and the bottom up model. Both of these models are present in every policy making process. The elite model, the process model and the incremental model are considered as a picture of policy making based on the top down model. The bottom up model can be seen in the group and institutional models.

Based on the three models of public implementation above, the researcher decides to use the Edwards III Model public policy implementation model as a guide in research. This study will focus the study on four indicators of success or failure of public policy implementation which include aspects of communication, resources, disposition and bureaucratic structure.

B. Empowerment and Family Welfare Program

In social life, family is a way of life supported by the community. According to Suharto (2005) the main priority in social welfare is, disadvantaged groups, especially poor families. Social welfare basically includes the concept, inter alia, living conditions or welfare conditions, namely the fulfillment of physical, spiritual and social needs. Thus, the term social welfare is often interpreted as a condition of well-being, namely the state of fulfilling all forms of necessities of life, especially those of a basic nature such as food, clothing, housing, education and health care. Understanding like this, placing social welfare as the ultimate goal of a development activity. Thus, the first priority for social welfare development is disadvantaged groups, especially those related to poverty.

The FEWP movement aims to empower families to improve well-being towards the realization of families of faith, noble, and virtuous, healthy, prosperous, advanced and independent, gender equality and justice, legal awareness and the environment.

The targets of the FEWP movement are families, both in rural and urban areas that need to be improved and develop their personalities in the fields of:

- 1) Mental spirituality includes attitudes and behavior as God's creatures, community members and citizens who are dynamic and useful based on Pancasila and the 1945 Constitution.
- 2) Physical material includes food, clothing, housing, health and decent work opportunities and a healthy and sustainable life through increased education, knowledge and skills.

The ten main FEWP programs are Pancasila appreciation, mutual cooperation, education and skills, cooperative life development, food, clothing, housing and household management, health, healthy planning, and environmental sustainability. The working group as the executor of the FEWP program is guided by 10 main programs which are divided into each working group as follows:

1) Working Group I implements the program

a) Appreciation and practice of Pancasila

The Pancasila appreciation and practice program is carried out through Legal Awareness activities to foster family resilience through public, national and state awareness. Legal Awareness is an effort to increase understanding of laws and regulations with priority to prevent domestic violence, child protection and drugs. Adolescent parenting is directed to foster and build virtuous children's behavior, have good behavior in the family, and efforts to prevent drug abuse.

Fostering Awareness Defending the State includes five elements, namely love for the motherland, national and state awareness, belief in Pancasila, willingness to sacrifice for the nation and state, and have the basic ability to defend the country. The form of activities is to form legal awareness groups and socialization related to laws and regulations.

b) Work together

The reciprocal assistance program is carried out by building good cooperation among members to increase awareness of social solidarity, tolerance, mutual respect between religious communities, fellow citizens and families so as to create a spirit of national unity and unity. The elderly are also empowered to take care of their physical and mental health, so that they can become role models and motivation for their families and the surrounding environment. The community also cooperates as a form of support for the implementation of community service activities and the involvement of the Army in building village infrastructure.

2) Working Group II implements the program

a) Education and Skills

Education and skills programs have priority to increase the ability of FEWP members through optimally increasing knowledge about the growth and development of children under five. The activities carried out in the form of Toddler Family Development activities are integrated with Early Childhood Education activities, and Posyandu activities every month. Counseling activities on compulsory education for nine years and the elimination of illiteracy are carried out through a culture of reading interest in the form of Community Reading Gardens activities. Collaboration with related institutions is carried out to improve education through the pursuit of packages A, B and C for community members who have dropped out of school. Vocational education is carried out with small-scale industrial training activities with household scale adjusted to local wisdom in accordance with the local level.

b) Development of Cooperative Life

The priority of the cooperative life development program is carried out through the Family Income Improvement Business Unit. This activity is expected to foster entrepreneurial awareness in every household to create and expand employment. This activity utilizes cooperatives as an institution formed to increase the economic capacity of families and encourage the formation of cooperatives managed by the FEWP.

3) Working Group III implements the program

a) Food

Food program priority is to realize family food security through food diversification with a variety of balanced, nutritious food patterns, in accordance with regional potential. Another activity is optimizing the Beautiful, Organized and Comfortable Pages, by growing food crops and other productive plants to meet family needs. Utilization of the yard is also carried out with Family Medicinal Plants and the use of Appropriate Technology to support agribusiness, horticulture, fisheries and animal husbandry businesses to improve the quality and quality of production to increase income so that families become prosperous.

b) Clothing

The priority of the clothing program is to patent clothing designs made by citizens and participate in exhibitions and competitions at the local, national and international levels. The socialization activity is directed to increase public awareness of the love of domestic production, especially batik and Indonesian woven fabrics. Also the dress behavior campaign is in accordance with the morals of the Indonesian nation and culture.

c) Provision of Housing and household management

The housing provision program for residents is encouraged to build Integrated Housing and improve the Village Environment, through renovation of livable homes aimed at the poor with the principle of tri-building namely business development, human and community development, cooperation and seeking assistance from donors.

4) Working Group IV implements the program

a) Health

Health is a top priority for families by strengthening Nutrition Conscious Family activities as an effort to reduce the prevalence of undernourished children under five, provide balanced nutrition for

pregnant women, provide nutritional supplements for nursing mothers, exclusive breastfeeding for babies for six months, provide complementary foods in addition breast milk and supplementary food for toddlers at posyandu. Other activities include efforts to improve clean and healthy living habits as daily habits by washing hands with soap, cutting nails, and optimizing posyandu.

b) Environmental preservation

The environmental sustainability program is realized in the form of a clean and healthy environment by instilling awareness about the cleanliness of the management of family bathrooms and latrines, as well as the availability of sewerage. The program also instills awareness of organic and non-organic waste management and hazardous and toxic material waste to be placed in the right place or recycled. Flood prevention activities are carried out by not cutting down trees in the forest carelessly and replanting replacement trees if they have already been cut down.

c) Health planning

Activities in a healthy planning program include counseling about the importance of community participation in family planning programs to regulate the number and distance of births and reproductive health for adolescents and brides. Sound planning is also directed by how to balance family income and financial expenses so that a portion of income can be saved for the family's future.

III. METHOD

This type of research is a qualitative research with a descriptive approach. Bogdan and Taylor (1990) state that qualitative research is research that produces descriptive data in the form of written or oral words and observed people's behavior. Information or data used in this study is sourced from primary data and secondary data.

In this study data were obtained through in-depth interviews with 22 informants chosen at random from management and members of the FEWP Village-level Mobilization Team in Sanana District. The informant is a person who is considered to have adequate knowledge about the problem of implementing the community empowerment program in the health sector by the Sula Islands FEWP. The selection of informants is based on research subjects who master the problem, have data and are willing to provide data. Data is given in the form of factual information about the tasks and functions of the informants as FEWP cadres. If at the data collection stage, variations of information are no longer found, the research can be said to have concluded.

IV. RESULTS AND DISCUSSION

A. Supporting Factors for the Implementation of the FEWP Program in the Health Sector

1. Bureaucratic Structure Factors

The health sector FEWP program is structurally implemented by the village-level FEWP Mobilization Team that is incorporated in Working Group IV. The basic principle of bureaucracy implies that community empowerment will be effective if it is able to involve the lowest community organization, namely the family. Housewives as the main figures in family coaching are required to be the spearhead of the implementation of FEWP programs and activities in the village. The selection of housewives as members of the village FEWP in the FEWP management structure was done through consensus in the FEWP Mobilization Team meeting at the village level.

Posyandu cadres are members of the village FEWP who are structurally members of four working groups. Good awareness and understanding of the purpose of FEWP activities in the health sector makes some FEWP members who are structurally integrated with other work groups, but are willing to become Posyandu cadres. When FEWP activities in several villages are not running as it should, FEWP management at the village level actively always encourages posyandu activities to remain active and run every month. This shows the high level of community awareness about the importance of posyandu activities for the health of mothers and children under five.

Posyandu cadre working procedures are obtained through training conducted by the Health Office in collaboration with the district level FEWP Mobilization Team. Work procedures are part of bureaucratic

procedures as a mechanism for elaborating public decisions involving various interested parties. Posyandu cadre working procedures are divided into five tables with details of table one as a place for registration, table two as a weighing place, table three as a place to fill in the Health Card, table four as a place for counseling and table five as a place for family planning services. Each of the five tables is occupied by one or two posyandu cadres with monthly rotating assignments.

The monthly posyandu activity is a FEWP program carried out through individual and group actions in the village to achieve the goals of a prosperous, advanced and independent family. A healthy planning program in the form of counseling about the importance of maternal and child health and the participation of villagers in the Family Planning program with the aim of regulating the number and distance of births and reproductive health for adolescents.

The involvement of housewives in posyandu activities as posyandu cadres and family planning acceptors is a clear manifestation of the successful implementation of the FEWP program in health at the village level in Sanana Regency, Sula Islands District.

2. Dispositional Factors

Behavior is a good attitude and support from villagers who are members of the village level FEWP Mobilization Team. A good attitude is shown by feeling happy and liking towards various activities carried out by FEWP Mobilizers at the village level. Feelings of happiness among FEWP members who are motivated by activities in their neighborhood have become a place to meet and socialize with other FEWP members. Feelings of joy also encourage FEWP members to always be active in every other activity that is carried out routinely.

FEWP activities most often followed by FEWP village members were reading the Koran and Posyandu. In addition there are also other activities such as the promotion of Diverse, Nutritious, Balanced and Safe food; gymnastics; childcare simulations and skills education. FEWP members as executors of activities became a supporting factor for the successful implementation of the FEWP program by feeling happy and good. However, there are a number of village FEWP members who do not actively participate in FEWP activities because there are replacements for some village heads who do not support village FEWP activities.

In addition, FEWP members who are posyandu cadres are routinely given incentives from village funds and puskesmas to support posyandu activities every month. Attention to posyandu activities and operations will encourage posyandu cadres to always actively carry out posyandu activities. Posyandu cadres are also active as family planning acceptors who use injection contraception and implants. This is an example for other housewives to join and become a Family Planning acceptor. There are some cadres who are not family planning acceptors because they are carrying out a pregnancy program.

The support of village-level FEWP members in the form of good behavior and happy feelings to participate in posyandu activities is evidence of the success of the FEWP health program in Sanana, Sula Islands District. The incentives given to posyandu cadres as implementers of FEWP activities in the health sector are expected to increase support so that the implementation of FEWP policies at the village level becomes effective and sustainable.

The results of this determination are in line with the results of research conducted by Laili Maftuchah (2018) on the role of the FEWP Mobilization Team in developing clean and healthy living awareness in Lanji Village, Patebon, Kendal Regency. Research shows that the supporting factors that make this program successful in developing awareness of clean and healthy living by the FEWP in Lanji Village include community participation and the seriousness of FEWP officials.

3. Communication Factors

Rodiah S. et al's (2016) research on FEWP Cadre Empowerment through Health Information Dissemination Efforts in Jatinangor, shows that good communication in implementing FEWP empowerment policies is through FEWP cadres themselves. Where FEWP cadres can share experiences and socialize to exchange information about health problems in their respective villages.

FEWP program communication in the health sector is related to efforts to convey posyandu activities so that citizens can participate. The communication process consists of transmission, consistency and clarity of

the programs implemented. The socialization schedule for posyandu activities was announced at places of worship. In addition, socialization to posyandu cadres to understand the FEWP program and be able to convey information about family planning and healthy lifestyles to the people around them.

The consistency of the implementation of the FEWP program in the health sector is shown by the continuity of routine Posyandu activities every month. Posyandu cadres have a high awareness to continue doing posyandu activities so that the time for immunization services and family planning is on time. This is motivated by a sense of responsibility for the tasks assigned to posyandu cadres.

Regular meetings held by posyandu cadres aim to foster familiarity through counseling activities. Nutrition-aware family program counseling, family planning programs, and clean and healthy life behavior programs are exceptional programs that require clarity of messages and information. Counseling activities are carried out in conjunction with posyandu activities so that clarity of information and messages can be conveyed directly to the FEWP members present.

Messages delivered through nutrition-conscious family programs include housewives who weigh babies regularly, give milk to babies from birth to age six months, eat a variety of foods, use iodized salt and take nutritional supplements according to the officer's recommendations. Nutrition awareness counseling activities will increase the knowledge and behavior of family members in overcoming nutritional problems and improve the ability and skills of posyandu cadres in empowering the community to prevent and overcome nutrition problems. Based on the results of this study, there were no problems with malnutrition in the Posyandu in Sanana District.

The Family Planning Program is useful for reducing the number of deaths due to various problems including preventing pregnancy too early, preventing pregnancy from occurring in old age, and keeping the distance of pregnancy to restore the strength of a woman's body. Most Posyandu cadres in 11 villages in the Sanana region claimed to be family planning acceptors. Posyandu cadres also actively invite and provide counseling to housewives in their respective villages to become family planning acceptors. The success of communication in the Family Planning program is demonstrated by an understanding of the use of injectable contraceptives and implants to maintain and manage pregnancy spacing.

The FEWP program in the health sector also conveys messages through counseling activities about clean and healthy living behaviors. Information delivered in the form of disease prevention and disease healing behavior when sick, health improvement behaviors and nutritious eating and drinking behaviors. Indicators of clean and healthy behavior can be seen from the awareness of FEWP members to get childbirth assistance by health workers, provide exclusive breastfeeding babies for six months, the availability of clean water and family toilets, as well as the floor where residents live. houses made of cement and tiles or ceramic boards. No more houses owned by land.

B. Factors That Hinder the Implementation of the FEWP Program in the Health Sector

The inhibiting factor for the implementation of the FEWP program in the health sector lies in the aspect of resources. Namely the lack of availability of supporting facilities in the form of posyandu physical buildings and other tools and equipment that support the implementation of the FEWP program in the health sector. Almost every village does not have a permanent posyandu building. Posyandu activities borrow village office space, village halls or posyandu cadre homes. This condition was felt uncomfortable by posyandu cadres as well as mothers and toddlers. The proposal to build a posyandu building has not been realized due to budget constraints.

The limited physical building facilities for the posyandu program are a barrier to the implementation of the FEWP program in the health sector. However, due to good awareness and understanding of the objectives of the posyandu, the posyandu cadres and housewives in the village continue to enthusiastically participate in posyandu activities every month. For this reason, village government officials are demanded to be more sensitive to the provision of facilities and infrastructure in the village health sector, so that health services in the village are more optimal.

The results of this study are in line with research by Kholif et al (2014), which shows that health facilities are one of the factors in the failure of the implementation of the Family of Hope Program in poverty alleviation in Dawarblandong, Mojokerto Regency.

V. CONCLUSION

1. The implementation of the Health Empowerment and Family Welfare (FEWP) program in Sanana, Sula Islands District has been going well. There are 11 villages that have a village-level FEWP Mobilization Team and have a posyandu cadre in each village. Posyandu activities run every month. This shows that the realization of the FEWP program in the health sector is going well. Posyandu activities are carried out in conjunction with Family Planning counseling, Clean and Healthy Behavioral Counseling and Family Counseling for Nutrition Awareness.
2. Factors that support the implementation of the FEWP program in the health sector in 11 villages in the Sanana region are the bureaucratic structure, disposition, and communication. While the inhibiting factor is the aspect of resources, namely the absence of permanent buildings for posyandu activities.

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