ARTICLE

Analysis Of Rural Innovation As An Effort To Improve Community Welfare (Research Studies in Bangka Regency, Banyuwangi Regency, and East Belitung Regency)

Adibah Sayyidati
Research and Development Agency of East Java Province | Gayung Kebonsari Street no. 56 Surabaya  
✉ adibah_sayyidati@yahoo.com

Abstract: In Government Regulation No. 38 of 2017 concerning Regional Innovation, regional innovation aims to improve the performance of local government administration. In order to achieve the objectives as intended, the target of regional innovation is directed at accelerating the realization of public welfare through improving public services, empowerment and community participation and increasing regional competitiveness. The purpose of this study is to describe and explain how innovation in rural areas is carried out and to analyze the factors and impacts of these innovations for each region with various phenomena. This research uses a qualitative approach. The data collection technique used by researchers is to conduct literature studies related to research in order to obtain relevant concepts. Can create something better, more functional, easier and such. Where, the innovations carried out by the three districts have distinctive characteristics, are new ideas that have never been published before, carried out in a planned manner, and the various innovations carried out have a purpose, namely to improve quality in various phenomena in accordance with regional characteristics.

Keywords: Innovation, Community Welfare, Rural

1. Introduction

The Central Statistics Agency (BPS) reported that data on the number of poor people in March 2017 in Indonesia reached 27.77 million people, an increase from September 2016 which was only 27.76 million. During the period September 2016 - March 2017, the number of poor people in urban areas increased by 188.19 thousand people from 10.49 million in September 2016 to 10.67 million people in March 2017. Meanwhile, in rural areas it decreased by 181.29 thousand people from 17.28 million in September 2016 to 17.10 million in March 2017 (Tempo.co 2017). However, from the same data, the socio-economic disparities of urban and rural communities are still said to be lame. It is recorded from the data released by BPS (2017) that the number of poor people in rural areas is greater than the number of people in urban areas, recorded as much as 13.47% of poverty reside in rural areas and as much as 7.26% poverty in urban areas. This is what drives the flow of urbanization to continue. If left unchecked, there is a concern that the village will be abandoned by its inhabitants. In the end the village is no longer independent and continues to depend on the city. (Suhendra, 2019)

According to Law Number 6 of 2014 concerning Villages, Article 1 paragraph (1) states that a Village is a village and customary village or what is referred to by other names, hereinafter referred to as Village is a legal community unit which has territorial
Innovation is one of the important keys for rural communities to face these challenges. In accordance with the provisions of Law No. 11 of 2019 concerning Science and Technology Sinas that “Innovation is the result of thought, research, development, study, and / or application, which contains elements of novelty and has been applied and provides economic and / or social benefits (Rustiadi et al., 2011, pp. 125–126), gave an example that at first people used natural resources but because they were getting scarce, humans developed technology, or what is called the “induced innovation model". Innovation has now become a new movement in rural areas in the context of optimizing potential, in
which the people themselves are the actors, by utilizing natural, human and social resources in new ways. Hidayah’s research results (2018, p. 153) found that initially the community did not realize they owned the assets and why it should be mapped, when the assets can be mapped, then it gave rise to the community’s idea. Awareness of assets and utilization of skills plays an important role in empowering innovation in rural communities, and this step requires the role of a facilitator. (Sofianto, 2020)

As with the emergence of innovations carried out by Bangka Regency "Bang Muda" (Bangka Easily Obtain Deeds), which is supported by the considerable distance from the regency capital, causing the community’s reluctance to process deeds. Although the issuance of deeds is actually free, residents are still reluctant to take care of it because they are burdened with transportation and accommodation costs due to geographical factors, namely living in an area that is far from the Office of Population and Civil Registry of Bangka Regency which is located in the district capital. The time and money they spend; causing them to be unable to work on document processing days is clearly a difficult dilemma for residents.

Apart from Bangka Regency, Banyuwangi Regency has also made an innovation called "Bumil Risti Hunters" (High Risk Pregnant Women). This innovation emerged because Banyuwangi Regency was included in the Red Zone category in terms of maternal, infant and under-five mortality. Of the 38 districts / cities in East Java, until now they are still in the top ten circles. Even though various attempts have been made, incident after incident is still continuing. Of the high mortality rate, Public health center Sempu is the biggest contributor.

Not only these two districts, the Rural Innovation was also carried out by the East Belitung Regency which was named “Movement of the Sekampong Ngenjage Anak Towards a Child-Friendly Village”. The innovation that is carried out aims to solve the problem focus areas of child protection that have not been implemented optimally, through the optimization of all potential OPDs and vertical agencies related to the Sekampong Ngenjage Child Movement Towards a Child-Friendly Village. The Sekampong Ngenjage Child Movement Towards a Child-Friendly Village is aimed at improving the performance of child protection in a synergistic and integrated manner through optimizing child protection facilitation efforts carried out from the environment of the child, by people closest to the child, with services that are faster, more precise, and serviceability can be achieved.

The purpose of this study is to describe and explain how innovation in rural areas is carried out and to analyze the factors and impacts of these innovations for each region with various phenomena.

2. Research Methods
This research uses Qualitative approach. The qualitative method is more based on the phenomenological nature that prioritizes appreciation (verstehen). Qualitative methods seek to understand and interpret the meaning of an event of human behavior interaction in a particular situation according to the researcher’s own perspective. Research using qualitative research aims to understand the object under study in depth. Aims to develop the concept of sensitivity to the problem at hand, explain the reality related to grounded theory and develop an understanding of one or more of the phenomena at hand. (Gunawan, 2013)

The data used in this research are such as journals and previous research related to research in order to obtain relevant concepts for the study of public policy innovation. Data collection is also carried out through tracing various sources, both from government documents and news media in print and electronic media as secondary data which is then processed and described in narrative form according to data needs. Then the data analysis is carried out based on the theory and concept of public policy and then the data interpretation process is carried out. The population in this study are districts that have made innovations in their area, while the sample in this study is the innovations made by Bangka Regency, Banyuwangi Regency,

3. Results and Discussion
3.1. Bangka Regency Rural Innovation "BANG MUDA" (BANGKA EASY TO GET AKTA)
Bangka Regency, one of the districts in the Bangka Belitung Islands Province, consists of 8 (eight) districts, 60 (sixty) villages and 9 (nine) sub-districts, with an area of 2,950.68 km2 or 295,068 ha with a population in 2014 based on Administrative Information System data Population (SIAK) of 305,158 inhabitants. The 2014 budget for the Bangka Regency budget was Rp. 889,985,616,150.00.

Commissioner for the Protection of Children and Mother (KPAI) for Civil Rights and Child Participation, Rita Pranawati, (30-11-2014) stated that distance is an
important factor in making deeds. For residents in remote areas to obtain deeds is also an obstacle. The same problem is also experienced by the majority of the people of Bangka Regency, with a population distribution of 68.49% in 7 (seven) sub-districts other than Sungailiat District as the capital of Bangka Regency.

The distance is quite far from the district capital causing reluctance of the community to process deeds. Although the issuance of deeds is actually free, residents are still reluctant to take care of it because they are burdened with transportation and accommodation costs due to geographical factors, namely living in an area that is far from the Office of Population and Civil Registry of Bangka Regency which is located in the district capital. The time and money they spend; causing them to be unable to work on document processing days is clearly a difficult dilemma for residents. This has led to the emergence of the practice of brokers in obtaining certificates and triggered a high-cost economy, especially in educated and low-income people, as well as the low coverage of birth and death certificate ownership.

Citizens' reluctance to apply for certificates is also influenced by low awareness of the importance of birth and death certificates, even though the absence of certificates makes it difficult for them to access services in various fields such as health, education, banking, insurance, and others and are vulnerable to legal problems and crime. The slower and more difficult it is for residents to obtain certificates, the slower and more difficult their chances of life will be better. On the other hand, the sooner you get the deed; It is also quick for citizens to get their rights, easy access and validation of data owned by dukcapil, regional government, province and even affect the accuracy of the national data. In addition, the place where civil registration services are only served at the Dukcapil Office is felt to be inefficient and makes it difficult for the population. The absence of an Implementing Agency UPT that functions as an office branch or counter at the sub-district level has resulted in residents being obliged to come to the head office to be served. Services that rely on one point cause piled up services, long queues so that residents feel that the services of the officers at the Dukcapil Office are slow, long, crowded and convoluted.

To overcome the problems described above, the Dukcapil Office has formulated a strategy to overcome problems regarding geographical distance, low awareness and the absence of an UPT Service, namely by implementing the Active Stelsel Principle according to the mandate of Law Number 24 of 2013, namely Proactive Government through the Dukcapil Office providing services in the form of community coverage (pick up ball) at the place of the event of birth, death or residence. The method applied is an active system integrated between the Dukcapil Office and related agencies. So that the innovation of BANG MUDA (Bangka Easy to Get Deed), which is a service based on a combination of Information Technology (IT), a proactive web service, reaches residents in issuing birth certificates, death certificates and family cards in synergy with village / sub-district midwives.

The BANG MUDA initiative originated from a discussion or meeting at the Dukcapil Office, with the theme of finding a solution: Forms of service that can make it easier for residents to obtain birth certificates and death certificates in accordance with the geographic distance of the area, population distribution and the capabilities of the offices or local governments. The discussion resulted in an initiative needing to change the deed service strategy, which is based on a community-based approach that is easily accessible to residents or places of births and deaths by opening new service centers or counters other than the head office and involving relevant stakeholders. The more and more counters are close to the community, the easier it is for the community to get a certificate.

The form of BANG MUDA service is the service for issuing birth certificates for babies (0 - 60 days) at village / sub-district midwives, Public health center and Hospitals throughout Bangka Regency. In addition, there are also issuance services consisting of birth certificates whose reports are more than 60 (sixty) days late, and also death certificates, both those who have recently died (0 - 30 days) or those who are late for more than 30 (thirty) days. at the counters for Integrated District Administration Services (PATEN), Sub-district Offices in Bangka Regency. Then, the Proactive Service Officer picks up files and distributes documents (barter) synergies through Village / Sub-District Midwives, Public health center, Hospitals and Sub-District Offices with zone and route arrangements, namely the district is divided into 2 (two) zones, including the Sungailiat Zone, 1 (one) sub-district as the district capital (service points; 3 health centers, 3 hospitals and 1 sub-district office), as well as the Sungailiat outer zone, which consists of 7 (seven) sub-districts divided by 2 file pick-up routes and document distribution routes. Route A has a route from Pemali District - Riausilip - Belinyu, while Route B is Merawang.
District - Mendobarat - Bakam - Puding Besar for the Sungailiat zone, 1 (one) service officer picks up files and distributes documents every working day. As for the outer zone of Sungailiat, 2 (two) teams were formed according to the route, each consisting of 2 (two) officers who regularly pick up files and distribute documents every Monday and Thursday. consisting of 7 (seven) districts divided by 2 routes of file pick-up routes and document distribution. Route A has a route from Pemali District - Riausilip - Belinyu, while Route B is Merawang District - Mendobarat - Bakam - Puding Besar for the Sungailiat zone, 1 (one) service officer picks up files and distributes documents every working day. As for the outer zone of Sungailiat, 2 (two) teams were formed according to the route, each consisting of 2 (two) officers who regularly pick up files and distribute documents every Monday and Thursday. consisting of 7 (seven) districts divided by 2 routes of file pick-up routes and document distribution. Route A has a route from Pemali District - Riausilip - Belinyu, while Route B is Merawang District - Mendobarat - Bakam - Puding Besar for the Sungailiat zone, 1 (one) service officer picks up files and distributes documents every working day. As for the outer zone of Sungailiat, 2 (two) teams were formed according to the route, each consisting of 2 (two) officers who regularly pick up files and distribute documents every Monday and Thursday.

The strategies implemented so that BANG MUDA achieve its goals are: First, making BANG MUDA the only form of service for issuing birth certificates and death certificates in the form of building counters, setting up web application systems, setting zones and routes, preparing personnel and products to be served. The Dukcapil office does not serve birth certificates and death certificates except for changes or corrections to certificates as well as marriage certificate services.

Second, institutional support consisting of collaboration with the District Health Office. Bangka through its network, namely village / sub-district midwives, Public health center and local government hospitals as well as 2 private hospitals namely Arsani Hospital and Medika Stannia Hospital. In addition, there is the use of PATEN counters at the sub-district office. Together with the Public Welfare Section of the Bangka Regional Secretariat, and the Bangka Regency PPKAD Office regarding the use of death certificates as the main condition for providing death compensation.

Third, Regulatory and budgetary support, including the Regulation of the Republic of Indonesia No: 29 of 2016 concerning Guidelines for Providing Services for Birth and Death Certificates through proactive services to PATEN in Bangka Regency, Regent Regulation No: 30 of 2016 concerning Guidelines for the implementation of pro-active birth certificate services at Public health center and hospitals in Bangka Regency, Bangka Regent Letter No: 800/0825 / III / 2015 concerning death certificates for the requirements for disbursement of death benefits, Cooperation Agreement (PKS) with Arsani Hospital and Medika Stannia Hospital, and APBD at the 2016 Dukcapil Service in the form of proactive birth certificate service activities in Public health center and Hospital of Rp. 336,198,500, -..

This initiative aims to make it easier for the public to obtain birth and death certificate services in the form of ease of access to locations, procedures, and costs by making village / sub-district midwives, health centers and hospitals and the subdistrict head office a place for certificate services.

Some of the positive impacts felt by this innovation are first, an increase in the percentage of ownership of birth certificates and death certificates, where the percentage of ownership of birth certificates increased by 28.86% from 26,917 (2015) to 34,687 (2016), and the percentage of ownership of death certificates increased by 42.07% from 4,502 (2015) to 6,396 (2016). BANG MUDA brought about a fundamental change in the ownership of death certificates in Bangka Regency. The percentage of direct death certificate ownership experienced a jump of 42.07%, with 1,894 new and late death certificates printed during 2016. The BANG MUDA 'show of force' turned out to be able to introduce the existence of death certificates, especially residents in rural areas.

Second, Simplification of requirements and procedures, requirements for birth certificates are no longer required for application letters and cover letters from the head of village / headman and sub-district head.

Third, reduction in the practice of brokers and illegal levies. The easier and closer to the community's access to service centers, the less opportunities for brokers and extortionists.

Fourth, harmonious and collaborative synergy between work units (SKPD). For the Health Office, this initiative is in line with the “Smart Mother SMS” program, which contains education and information for pregnant, postpartum and breastfeeding mothers in an effort to reduce maternal mortality and infant mortality rates. Likewise, the Public health center can improve the performance of services at the Public health center and village / subdistrict midwife. For the sub-district
head, BANG MUDA can empower the District Integrated Administration Service (PATEN) program which previously only served cover letters for the management of population documents and served a small part of certain permits.

Fifth, The building of public trust in public services for midwives, health centers, hospitals, sub-district head, and the Dukcapil Office as well as other agencies in the form of increased achievement of the IKM version of Kepmenpan No. Kep / 25 / MPAN / 2/2004 with Very Good Value (81.75), Green Zone or High Compliance Predicate to Public Service Standards from the Indonesian Ombudsman Commission in 2016, and Winner of 2016 Adminduk Implementation Performance Assessment at Provincial Level Kep. Bangka Belitung.

Sixth, The residents feel the ease of service because they do not need to come to the head office and experience long queues, residents only need to come to the Village / Sub-district Midwife, Public health center, Hospital or the local sub-district head office. A concrete example: a birth certificate.

Mr. Yadi is a resident of Petaling village, Mendo Barat sub-district, before getting to know BANG MUDA, to obtain a birth certificate for his child who was born at a midwife, he must complete a photocopy of his Ktp, KK, marriage book, cover letter for the village head and a cover letter for the sub-district head and then taken to the dukcapil office with a distance of 50 km and incur transportation and accommodation costs of Rp. 120,000, with a waiting time of 4 (four) days. After the existence of BANG MUDA, Pak Yadi simply submitted a photocopy of his ID card, family card, marriage book to the midwife where he was born and the midwife immediately entered the deed application data via the Dukcapil website. The printed deeds are distributed to the Public health center, then Pak Yadi only needs to take the Deed and KK at the Public health center which is 300 meter from his house. In addition, Mr. Joni, who is a resident of Kuto Panji Village, Belinyu District, Before the existence of BANG MUDA to take care of the death certificate, Pak Joni must complete a number of requirements at the village head office, the sub-district office then go to the office which is 59 km from his house, the cost of transportation and accommodation incurred is Rp. 140,000, - and a waiting time of 4 (four) days. After BANG MUDA arrived, Pak Joni only needed to register and take a death certificate at the sub-district office which was only 1 km from his house.

3.2. Banyuwangi Rural Innovation "Bumil Risti Hunter" (High Risk Pregnant Women)

Banyuwangi Regency is included in the Red Zone category in terms of maternal, infant and under-five mortality. Of the 38 districts / cities in East Java, until now they are still in the top ten circles. Even though various efforts have been made, incident after incident is still continuing. Of the high mortality rate, Public health center Sempu the biggest contributor.

In 2014, Banyuwangi District had 22 maternal deaths and 144 infant deaths. Meanwhile, in 2015, 23 maternal deaths and 163 infants died. From this figure, Public health center Sempu became the biggest contributor for two consecutive years. Below is data on maternal and infant mortality rates in Banyuwangi Regency in 2014-2015:

| No. | INDICATOR               | 2014       | 2015       |
|-----|-------------------------|------------|------------|
| 1   | Maternal Mortality Rate |          |            |
|     | Banyuwangi              | 22         | 23         |
|     | Sempu                   | 4          | 5          |
| 2   | Infant Mortality Rate   | 144        | 163        |
|     | Banyuwangi              | 11         | 9          |

Source: Public health center Sempu.

The high mortality rate is caused by several factors, among others: First, the lack of data on high risk pregnant women (pregnant women) in the working area of Public health center Sempu. This is due to the limited number of midwives who can reach all existing areas. Geographical conditions also exacerbated the situation. Given that most of the area is at the foot of Mount Raung, with road access that is difficult to reach. So that Posyandu activities are often hampered.

Second, so far, midwives have a very heavy workload. Apart from being responsible for the safety of the lives of mothers and babies, they are also burdened by administrative work that takes up a lot of time and energy. Never mind to look for pregnant women in remote areas of the village, even to serve pregnancy examinations at health facilities where the time is very limited. Jobs outside the main tasks and functions include treasurer, program coordinator, JKN administration and even as a drug manager and supporting health centers. With this additional task, midwives often leave the service because they have to attend meetings that are far away in the city center. So, the main function seems to be a side job. As a result, interaction with residents is very limited. This fact,
happened in Puskemas which until now has not been resolved.

Third, awareness of mothers to actively check their pregnancies in health facilities is still very low. In fact, many of them do not know if their pregnancy is classified as high risk. They only come to the midwife when they feel signs of labor. So that there is not much that can be done by midwives to prepare safe delivery assistance. To overcome the problem of late early detection of high-risk pregnancies, it takes proactive efforts from the Public health center to obtain earlier data on the existence of Bumil Risti. This can be done by recruiting communities who have high mobility in the midst of society every day. To overcome the above problems, the Head of the Sempu Community Health Center formed an innovation program "Bumil Risti Hunters", which is an activity that collaborates with residents, in administering public services. The Hunters, of course, were selected from individuals who had high mobility every day. Their existence is well known by society, especially women.

The innovation "Bumil Risti Hunters" is here to be an alternative solution. By utilizing the potential of mobile vegetable sellers, or those in Banyuwangi who are familiar with the title Mlijo as an early detection of high risk pregnant women (Bumil Risti). The main goal is to reduce the mortality rate for mothers, babies and children under five. With the target group "Vulnerable" (pregnant women, childbirth and postpartum). With three strategic steps: (1). Early detection of high risk pregnancies, carried out by mobile vegetable sellers. They are specially trained to recognize the characteristics of a High Risk pregnancy. So that they are able to become a reliable and accurate Bumil Risti Hunter. When they find Bumil Risti in between, they immediately report through the WhatsApp Group application. (2). Within hours, Bumil Risti, which was found by Hunters, immediately received assistance from the Laskar. The main task of the Laskar, which consists of these female leaders, together with the midwife, is to provide assistance from the first time they are discovered until the postpartum period. (3). Collaborating with a third party, to overcome budget constraints. By way, sending the concept of Risti Pregnant Women Hunters to an idea gathering event. After being awarded as the best concept to reduce mortality rates for mothers, babies and toddlers, the prizes are used to fund this innovation. Meanwhile, the incentives for Hunters and Warriors come from the APBDes. After running for almost two years, the Hunters were able to detect 49 pregnant women. Of these, 37 have given birth to safe mothers and 2 babies died due to factors of low birth weight (LBW 1.1 kg). The community satisfaction index increased from 87.2% to 92%. consisting of these female leaders, together with the midwife, provided assistance from the first time they were discovered until the postpartum period. (3). Collaborating with a third party, to overcome budget constraints. By way, sending the concept of Risti Pregnant Women Hunters to an idea gathering event. After being awarded as the best concept to reduce mortality rates for mothers, babies and toddlers, the prizes are used to fund this innovation. Meanwhile, the incentives for Hunters and Warriors come from the APBDes. After running for almost two years, the Hunters were able to detect 49 pregnant women. Of these, 37 have given birth to safe mothers and 2 babies died due to factors of low birth weight (LBW 1.1 kg). The community satisfaction index increased from 87.2% to 92%. consisting of these female leaders, together with the midwife, provided assistance from the first time they were discovered until the postpartum period. (3). Collaborating with a third party, to overcome budget constraints. By way, sending the concept of Risti Pregnant Women Hunters to an idea gathering event. After being awarded as the best concept to reduce mortality rates for mothers, babies and toddlers, the prizes are used to fund this innovation. Meanwhile, the incentives for Hunters and Warriors come from the APBDes. After running for almost two years, the Hunters were able to detect 49 pregnant women. Of these, 37 have given birth to safe mothers and 2 babies died due to factors of low birth weight (LBW 1.1 kg). The community satisfaction index increased from 87.2% to 92%. consisting of these female leaders, together with the midwife, provided assistance from the first time they were discovered until the postpartum period. (3). Collaborating with a third party, to overcome budget constraints.
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The main objective of this innovation is to reduce mortality rates for mothers, babies and children under five. With the target "Vulnerable groups" (pregnant women, childbirth and postpartum). Activities with the Collaboration for: Early detection of High Risk Pregnancy. From the examination conducted by the Hunting Team, 3/10 vegetable builders around or in Banyuwangi who are familiarly known as Mlijo were selected as the best community to become Bumil Risti Hunters. They are active every day, from morning to noon, with routes that are passed evenly to remote corners. So that with the presence of Hunters, it can help improve pregnancy data and replace midwives' time for early detection of high risk pregnancies. The vegetable artisan's main customers are housewives. Every day interacting, so that information outside the buying and selling of vegetables often just flows. Including news about which residents are pregnant and how they are. Equipped with training on the characteristics of a high risk pregnancy, it is proven that they are capable of being reliable and accurate Hunters. All Hunters are equipped with a smartphone and a special red vest with the words Hunters of Bumil Risti. In addition, it is also equipped with a helmet and boots. As a means of education, the Team compared a special vegetable container (Javanese: Tobos) so that Banner could be occupied with the signs of pregnancy classified as High risk. If you find a pregnant woman with the characteristics that have been taught, then with the smartphone facility the Hunter takes a picture, name, age, husband's name, address and Risti indicators. Furthermore, uploading on the WhatsApp Group application whose members consist of the Head of the Public health center, midwives and hunters. At that time, the Head of the Public health center assigned a Team to check the area.

In addition, this innovation aims to provide assistance for pregnant women with Risti. Within hours, Bumil Risti’s findings received assistance from Laskar.
They consist of Perempun figures who are coordinated by a midwife and spread throughout the existing hamlets. The number of members is 43 people, consisting of 23 Posyandu cadres wearing pink uniforms. 10 Breastfeeding Motivators in yellow Vests and 10 Nutrition Motivators in Blue Vests. The main task of the Laskar is, together with the midwife, to accompany Bumil Risti from the first time she is found until the postpartum period. Including making referrals, improving nutrition and ensuring the baby gets breast milk intake. In addition, they also held Sweeping K 1 (pregnancy less than 12 weeks) for early detection of pregnancy.

The next objective is Cooperation with Third Parties. To maintain the sustainability of the performance of the Hunters and Warriors, the Team engaged the village government to provide incentives through the APBDes. This is due to the active participation of the Head of the Public health center in participating in the MusrenBangDes. As for transport and credit, it comes from the Health Operational Assistance (BOK) budget. Deutsche Gesellschaft Internationale Zusammenarbeit (GIZ). Disbursing funds for training and procurement of Smartphones, Tobos, Vests and Boots. The funds were given, after the vegetable seller as a Bumil Risti Hunter, was in Nobatan as the best concept to reduce mortality rates for mothers, babies and toddlers in the 2016 East Java Urun Ideas event.

The utilization of this vegetable craftsman as a Bumil Risti Hunter is very effective and innovative. Because with a little training on the characteristics of High Risk pregnancy, it is proven that they are able to become reliable and accurate Hunters. This Unusual and Unique Collaboration Model is still relatively new and Original. Because there has never been found any references or news so far, about the utilization of Vegetable Builders of the Age of Nowadays as a Risti Pregnant Woman Hunter. How to raise funds for this innovation is very creative. For example, before the concept is implemented, it must first be included in an idea gathering event. By achieving the Predicate as the best concept to reduce mortality rates for mothers, babies and toddlers, it will automatically receive a Reward which can be used as an innovation budget.

While the incentive funds for Hunters and Warriors, For educational facilities, the Team compared Tobos to the vegetable container with red paint. So that it looks different from vegetable craftsmen in general. Each Tobos, is given a special place to put up a banner with the signs of pregnancy classified as High risk. This education method is creative and innovative, so that every day people while shopping can read and understand.

The benefits that can be felt with this innovation include, among others, a very significant reduction in maternal and infant mortality. Until March 2018, the death of the mother from 5 people to Zero, and the infant mortality rate from 9 to 2 people due to LBW cases. In addition, all pregnant women with Risti get free access to services until they are complete. Starting from mentoring, referral, specialist consultation and childbirth. Because all Bumil Risti have become BPJS participants, with the facilitation of the midwives. The information system is more complete. There is a map of the distribution of Bumil Risti. Complete data, starting from the cohort of pregnancy, childbirth, childbirth and the cohort of infants and toddlers. Includes data on Bumil Risti, which contains complete photos, name, age, husband's name, address and Risti indicators. As of March 2018, 49 pregnant women with Risti have been identified. This step is the beginning of saving the lives of mothers and babies. Of these, 37 people have given birth and the rest are still waiting for delivery. Then, increasing public knowledge about the benefits of pregnancy checkups. It is proven that K1 coverage (gestation less than 12 weeks) reaches 100% from previously only 92%. Then, increasing public participation in development in the health sector. The collaboration between midwives, 10 vegetable sellers and 43 Laskar is clear evidence. Not only that, the husband’s concern for his wife who is pregnant has increased dramatically. Data until February 2018, pregnancy examinations with the assistance of their husbands reached 90%. Whereas previously only 36%. The social groups that are directly affected by the innovation of the Bumil Risti Hunter are women. Because all activities are in favor of Vulnerable groups, especially high-risk pregnancies. The emergence of innovation has an impact on increasing public trust in Public health center Sempu. The survey results in December 2017 show, the community satisfaction index reached 92% from the previous 87.2%.

The results of the innovations that have been implemented include the health aspect, maternal mortality has decreased sharply to Zero. And the death of 2 babies due to LBW factor. In the service aspect, all Bumil Risti get optimal service access. Starting to look for, accompanied, referrals, shuttle to the ambulance to delivery and postpartum 100% free. On the budget aspect: Many budget sources support the sustainability of innovation activities. Apart from the BOK, there are
other sources from the Village Fund and the Coaching Fund from Giz. In terms of infrastructure: A map of the distribution of pregnant women with Risti is formed, and a complete cohort of pregnancy, childbirth, postpartum and infant and toddler cohorts. On human resources, there is empowerment of Vegetable Sellers as Bumil Risti Hunters and women leaders as Laskar companions for Bumil Risti.

| No. | Description                          | Before 2014 | Before 2015 | Before 2016 | Before March | After 2018 |
|-----|-------------------------------------|-------------|-------------|-------------|--------------|------------|
| 1.  | Mother’s death                       | 6           | 5           | 0           | 0            | 0          |
| 2.  | Infant death                         | 11          | 9           | 2           | 2            | 0          |
| 3.  | Maternal and child health data       | Not complete| Not complete| complete    | a map of pregnant women risti | | | | | |
| 4.  | K1 visit                             | 87%         | 92%         | 100%        | 100%         | 0%         |
| 5.  | Participation                        | Not available| Not available| Hunters and lascars | | | |
| 6.  | Accompaniment                       | Not available| Not available| Warriors | | | |
| 7.  | Budget                               | BOK         | BOK         | BOK, GIZ, APBDes | | | |
| 8.  | JKM                                  | 84.3%       | 87.2%       | 92%         |              | 0%         |

Source: Public health center Sempu

Not only that, this innovation provides very meaningful results where a shared commitment is realized, from all elements involved in innovation. To work together to reduce mortality rates for mothers, babies and toddlers. This commitment, manifested in the form of signatures ranging from internal Public health center to Sub-district head, Village Heads, hunters and Laskar. Then, 10 mobile vegetable sellers are trained, which are able to identify the characteristics of a high-risk pregnancy. So that it can become a reliable and accurate Bumil Risti Hunter. Not only that, this innovation also encouraged the formation of 43 Laskar, as companions of Bumil Risti. Starting from the first found to the puerperium including Reference. In addition, it also ensures that the baby is getting breast milk and sweeping K1 for early detection of pregnancy. With the innovation of Bumil Risti Hunters, making the availability of a simple reporting system in the form of the WhatsApp Group application as a means of reporting the findings of Bumil Risti. The application is also used as a discussion media for members about the development of innovation in the field. As well as the issuance of a Village Head Decree Number: 188/25 / Kep / 429.519.02 / 2017 concerning the provision of incentives for Bumil Risti and Laskar Hunters.

3.3. East Belitung Regency Rural Innovation "Movement of Sekampong Ngenjage Children Towards Child-Friendly Villages"

More than 30% (thirty percent) of the 119,261 total population of East Belitung Regency who are entitled to services are in the age structure group of children (data source: 2016 Semester II Report of the Ministry of Home Affairs RI Dukcapil); age structure 10-14 years with a total of 10,454 people (the second largest number of age groups), 5-9 years with a total of 10,192 people (the fourth largest number of age groups), and 15-19 years with a total of 9,683 people (the fifth largest number of age groups). This condition implies that the quality of local government intervention in the Children's age group determines the quality of human resources in the region as well as the future of the region.

Based on the results of data/information analysis of the OPD sector reports related to the fields of Education, Health, Family Planning and Population Control, National and Political Unity, and the Civil Service Police Unit, focused discussions with stakeholders of Community Social Workers, Social Workers / Child Assistants, Institutions and The forums that handle women, children and families, and direct observations in the field, found that the number of cases that were concerning with children was increasing both in terms of the number of cases and emergency interventions.

One of the children's problems is deviant and destructive behavior due to consuming and abusing certain brands of inhalant substances and cough medicine mixtures with energy or alcoholic drinks, and other toxic substances. It was found that 35% (thirty five percent) of the 40 (forty) cases of psychotic patients who sought treatment at the Community Mental Health Center (BKJM) of East Belitung Regency were found to be 35% (thirty five percent) of the cases of teenage pregnancy and child marriage (229 the number of pregnancies in 2016 and 51 the number of pregnancies as of March 2017) due to the free sexual behavior of children in the addictive influence of the consumption of inhalants and adulteration, poisoning, disorientation and adrenaline stimulation after consumption of inhalants and adulterants that trigger death, criminal behavior theft and other cases by Children. Law Number 35 of 2014 concerning Amendments to Law Number 23 of 2002 concerning Child Protection mandates; "The State, Government, Local Government, Community, Family, and Parents or Guardians are Obligatory and Responsible for the..."
Implementation of Child Protection”. Local government has the obligation to: (1) Fulfilling the Rights of the Child regardless of ethnicity, religion, race, class, gender, ethnicity, culture and language, legal status, birth order, and physical / mental conditions; (2) Provide support for facilities, infrastructure, and availability of human resources in the implementation of Child Protection; (3) Ensuring the protection, maintenance and welfare of children by taking into account the rights and obligations of parents, guardians, or other people who are legally responsible for the Children; (4) Oversee the implementation of child protection, guaranteeing children to exercise their rights in expressing opinions, according to the child’s age and level of intelligence.

The innovation that is carried out aims to solve the problem focus areas of child protection that have not been implemented optimally, through the optimization of all potential OPDs and vertical agencies related to the Sekampong Ngenjage Child Movement Towards a Child-Friendly Village. The Sekampong Ngenjage Child Movement Towards a Child Friendly Village is aimed at improving the performance of child protection in a synergistic and integrated manner through optimizing child protection facilitation efforts carried out from the environment of children, by the people closest to the child, with services that are faster, more precise, and serviceability can be achieved, which in the end is expected to provide benefits and ensure the fulfillment of children’s rights.

The results of the innovation of the Sekampong Ngenjage Children’s Movement Toward Child-Friendly Villages are divided into 3 (three) goals, namely the short term, consisting of a Regent Decree for the formation of P2TP2A (the formation of the district P2TP2A institution), a Sub-district Decree on the formation of a sub-district children’s forum (the formation of a sub-district children’s forum in 7 (seven) sub-districts), the Head of the Belitung Timur Police and the Gapo 0414 Belitung Dandim for mobilizing the resources of BABINKAMTIBMAS and Babinsa Friends of the Children (manifesting the commitment to mobilize BABINKAMTIBMAS and BABINSA resources to support the Ngenjage Anak Sekampong Movement Toward Child-Friendly Villages throughout the Village East Belitung District), Regent’s MoU Manuscript, National Commission for Child Protection, and the Village Head for the Sekampong Ngenjage Child Movement Towards Child-Friendly Villages (manifested of the commitment to organize the Sekampong Ngenjage Child Movement Towards Child-Friendly Villages in all Villages in East Belitung Regency), the inauguration of the Children’s Friends task force and a joint declaration to support the Sekampong Ngenjage Child Movement Towards a Proper Village Children (forming an integrated commitment and collective agreement to handle children down to the village level), the Child Friend Task Force Work Team (the formation of a consolidation of support with the Three Pillars of the Village, PSKS and the Community), building 5 (five) models of creative child protection activities (the availability of facilities and services adequate and service oriented child protection), piloting the facilitation of child protection efforts by the Child Friends Task Force in 8 (eight) villages (availability of synergistic and integrated child protection facilitation at the village level), Ngopi with the Child Friends Task Force (availability of communication forums between stakeholders for up to date data & information, maintaining understanding & joint commitment and building change project development initiatives).

Meanwhile, in the medium term, namely the facilitation of child protection efforts by Task Force Friends of Children in all villages (increasing the speed, accuracy and percentage of solving child cases). As well as in the long term, namely the integrated child protection service system based on the android “Hello Anak” (the development of an integrated, child-friendly, attractive, interactive and sustainable child protection facilitation).

3.4. Application of Innovation And Things That Need To Be In Doing Innovation

According to Rogers (in Setiawan, 2018) states that the application of innovation to change a situation is based on thoughts, as follows, first, Relative advantage, which is the relative advantage of an innovation that will be adopted if the benefits are seen to be beneficial based on individual needs. Is it economic value, social prestige, or excellence. The more it looks profitable or has many uses, the more likely it is to be adopted by its adopter. Second, compatibility is the level of speed in adopting an innovation because it is in accordance with previously adopted norms or values. The closer to the values, the greater the speed at which they are received. Whenever it is contrary to the values believed, the slower an innovation is adopted. Third, Complexity is the level of difficulty in understanding an innovation by the adopter, the more complex or complicated the more difficult it is to spread to be accepted, the simpler and easier it is to
understand the faster it will be accepted or adopted. Fourth, Trialability testing is an important part of picking up an innovation. An innovation cannot run immediately and can be carried out by adopters without testing it first. Innovations that can be tested on a smaller scale to find out the process, benefits, results and impacts will be easily accepted, because doubts will be reduced, especially failure and the impact will be predictable in advance, especially if the benefits have been seen. And fifth is Obervability.

According to Rogers (in Hutalagung, 2018) says that innovation has the following attributes: (1). Relative Advantages An innovation must have advantages and more value than previous innovations. There is always a newness inherent in innovation, which differentiates it from others. (2). The suitability of innovation should also be compatible with the innovation it replaces. This is intended so that old innovations are not simply thrown away, other than for reasons of low cost, but also because old innovations are part of the transition process to the latest innovations. In addition, it can also facilitate the adaptation process and the learning process for the innovation more quickly. 3. Complexity With its new nature, then innovation has a level of complexity that may be higher than previous innovations. However, because an innovation offers a newer and better way, this level of complexity is generally not an important issue. 4. The possibility of being tried an innovation can only be accepted if it has been tested and proven to have an advantage or value compared to the old innovation. So that an innovation product must pass the "public test" phase, where each person or party has the opportunity to test the quality of an innovation. 26 5. Ease of observation an innovation must also be observable, in terms of how an innovation works and produces something better. The possibility of being tried an innovation can only be accepted if it has been tested and proven to have an advantage or value compared to the old innovation. So that an innovation product must pass the "public test" phase, where each person or party has the opportunity to test the quality of an innovation. 26 5. Ease of observation An innovation must also be observable, in terms of how an innovation works and produces something better. The possibility of being tried an innovation can only be accepted if it has been tested and proven to have an advantage or value compared to the old innovation. So that an innovation product must pass the "public test" phase, where each person or party has the opportunity to test the quality of an innovation. 26 5. Ease of observation An innovation must also be observable, in terms of how an innovation works and produces something better.

3.5. Driving Factors for Success of Innovation

According to Rogers (in Hutalagung, 2018) there are several factors that determine the success of the diffusion of innovation, namely four factors, namely first, Innovation Characteristics (Products) A new product can be easily accepted by consumers (society) if the product has a relative advantage. This means that a new product will attract consumers if the product has advantages over existing products on the market. For example, cellphones. In a relatively short time it has been widely used by the community because these products have relative advantages compared to the previous means of communication. Another product factor in the form of compatibility also affects the results of innovation. Compatible products are products that are able to consistently fulfill consumer needs, values and desires. The third factor of product characteristics affecting diffusion is complexity. The more complex it is, the more difficult it is to operate, the less attractive it is to consumers. Consumers will choose products that are simple and easy to use. Consumers are more attractive to use products that are simpler than products that are difficult to operate. The fourth factor is the ability to be tried (trialability). A new product if it makes it easy for consumers to try and feel it will be attractive to consumers. And another factor is
the ability to be seen by consumers (observability). Observability refers more to the ability of a product to be communicated to other consumers.

Second, innovation communication channels will spread to consumers in society through existing communication channels. A new product will be able to immediately and widely spread to society (consumers) if the company utilizes many communication channels and a wide reach such as mass media and interpersonal networks.

Third, change efforts from the Company's agents must be able to identify exactly which opinion leaders will be used and be able to involve them as company agents to influence consumers or society in accepting and using new products (innovation).

Fourth, social systems in general, the social systems of modern society are more receptive to innovation than those oriented to traditional social systems because modern societies tend to have positive attitudes towards change, generally respect education and science, have better exit perspectives and are easy to interact with people -people outside the group, thus facilitating the input of acceptance of new ideas in the social system and members can see themselves in different roles.

4. Conclusion

With the innovations made by various regions such as districts, of course can create something better, more functional, easier and such. Where, the innovations carried out by the three districts have distinctive characteristics, are new ideas that have never been published before, carried out in a planned manner, and the various innovations carried out have a purpose, namely to improve quality in various phenomena in accordance with regional characteristics.

The results of the rural innovations carried out by Bangka Regency have had several positive impacts on the community. Among them are: (1). Increased percentage of ownership of birth certificates and death certificates (2). Simplification of requirements and procedures, requirements for birth certificates no longer require application letters and cover letters from the head of village / headman and sub-district head. (3). Decreasing the practice of brokers and illegal levies (4). Harmonious and collaborative synergy between work units (SKPD). (5). Built public trust in public services for midwives, health centers, hospitals, sub-district head, and the Dukcapil Office and other agencies in the form of achievements; (6). The residents feel the ease of service because they do not need to come to the Dinas and experience long queues, residents only need to come to the Village / subdistrict Midwife, Public health center, Hospital and local district office. Concrete example: Birth Certificate.

The results of the innovations that have been carried out by Banyuwangi Regency include: (1). Health Aspect: Maternal mortality decreased sharply to Zero. And the death of 2 babies due to LBW factor. (2). Service Aspects: All Risti Pregnant Women get access to optimal services. Starting to look for, accompanied, referrals, shuttle to the ambulance to delivery and postpartum 100% free. (3). Budget aspect: Many budget sources support the sustainability of innovation activities. Apart from the BOK, there are other sources from the Village Fund and the Coaching Fund from Giz. (4) Infrastructure: A map of the distribution of pregnant women with Risti is formed, and a complete cohort of pregnancy, childbirth, postpartum and infant and toddler cohorts. (5). Human resources: the empowerment of Vegetable Sellers as Bumil Risti Hunters and women figures as Laskar assisting Bumil Risti. (6).

The results of innovations carried out by East Belitung Regency include the Sekampong Ngenjage Child Movement Towards a Child Friendly Village aimed at improving the performance of child protection in a synergetic and integrated manner through optimizing child protection facilitation efforts carried out from the child's environment, by people closest to Children, with services that are faster, more precise, and friendly to service can be achieved, which in the end are expected to provide benefits and ensure the fulfillment of children's rights. In the medium term, this innovation has resulted in the Facilitation of Child Protection Efforts by the Task Force for Child Friends in all Villages (Increasing Speed, Accuracy and Percentage of Child Case Resolution). And in the long term in the form of an Integrated Child Protection Service System Based on Android "HALO ANAK"

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