Evaluation Study of Human Development Index (Policy Learned from Salatiga City and Semarang City)

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Abstract: The objective of the research is to analyze the success story of the Salatiga City and Semarang City in the best three achievements and position in Human Development Index in the Central Java Province 2013-2015, what kinds of policy learned can be taken. The research uses qualitative model with several informants as sources of primary data. The data is taken by interviewing with some informants, such as: Local Government Health Service of Salatiga City and Semarang City, Local Government Educational Service of Salatiga City and Semarang City, Regional body for planning and development (Bappeda) of Salatiga City and Semarang City. Triangulation method is the best way to eliminate the fact construction differences in the context of a certain study when collecting the data about the events and relationships of the various views. Through this technique the researchers also compared the findings with a variety of sources. The study found, firstly, in the health sector, Salatiga City have mainly program, that is improve and practice OSOC (One Student One Client) program, the program focuses in pregnant women with highly risk, OSOC program involve the local government, the obsgins doctor and student of university (especially health academy student), after recoding the pregnant women with highly risk and then become the student client. Meanwhile Semarang City improves and practice EMAS (Emerging Maternal and Neonatal Survival) program based on cooperation with USAID. As we know that the maternal and neonatal mortality is important aspect of Human Development Index. Secondly: in education sector, Salatiga City and Semarang City improve and practice Local Student Operational Aid (BOSDA) and Poor Student Aid for basic and junior school student, that program can increase the educational partisipation rate.

Keywords: Public Policy Evaluation, Human Development Index

1 Introduction

The studies on the Evaluation of Human Development Index and the quality of the population in Central Java Province conducted six times by Taufiq et al., Since 2004 [1], 2007 [2], 2010 [3], and 2013 [4] examine the aspects of the policy evaluation theory in those years, therefore it is interesting to examine as well as learn about the success stories of several cities always at the top of the Human Development Index (in this case the study will focus on the city success story Semarang City and Salatiga City for three consecutive years occupied the top three highest IPM in Central Java Province.

2 Methodology

Human Development Index (HDI) should look at three dimensions, namely the dimensions or indicator of health, education and economy (Societies purchasing power). These HDI indicators have been introduced since 1999 by UNDIP by reviewing local government policies on education, health and economics. Based on the data of Central Java IPM 2013-2014 there is evidence that there are some areas that always achieve the best three rankings, therefore this study will focus on lessons learned. In the perspective of William N Dunn (2004) there are three approaches to the evaluation of policy implementation: pseudo evaluation,
formal evaluation and evaluation of theoretical decision [5]. Pseudo evaluation measures the achievement of policy objectives, and takes for granted that the policy objective is self-evident. Formal evaluation measures the achievement of goals that have been announced formally. The decision theoretic evolution measures the achievement of the objectives as desired by the various actors of hidden target or objectives. Evaluation can be summative (done at the time) or formative (done continuously).

According to Badjuri and Yuwono the policy evaluation indicators consist of input indicators, focusing on assessments on resources (both natural and human) supporting and supporting infrastructure [6]. Process indicators focus on assessing how policy is transformed, how effectively and efficiently the methods of public policy are. Output indicators, focusing on the assessment of the results or products produced, about the number of people who successfully participate in the program. While outcomes indicators focus on assessing the impacts received by the wider community or affected parties/public policy objects, about the magnitude of the positive impact or the resulting negative impacts.

This research uses qualitative approach with descriptive qualitative research type. The descriptive qualitative study studies the problems in society as well as the prevailing procedures in society and particular situations, including the relationships of activities, attitudes, views, and ongoing processes and influences of a phenomenon [7]. The location of this research is in Semarang City and Salatiga City with sampling technique which is purposive sampling. The sample in this research is the source from the Organization of Regional Device (OPD) consisting of Education Office, Health Office, and Regional Development Planning Board of each city. In addition to in-depth interviews, this study uses secondary data derived from the Central Bureau of Statistics (BPS) as well as secondary data from each of these agencies. The data that has been collected is then analyzed by data analysis techniques consisting of data analysis, data reduction, compilation into units, categorization, investigation of data validity, and then in the analysis and interpretation of data based on theories and concepts used.

3 Discussion

There are three main indicators in the Human Development Index; those are education, health and economics. In this study, it's focused on education and health indicators. In the policy on the education sector of Semarang City has the learning system called Semarang Digital Class both at the Elementary School level (SD) and at Junior High School level (SMP). Semarang Digital Class is the utilization of instructional media through online and offline base, with utilization of Edmodo, e-book, CD, VCD and DVD learning. With the visualization learning system such as sound and picture (film), students are easier to absorb the essence of the lesson. Looking at the quality improvement aspects of educators, both those who are civil servants and non-civil servants have the same opportunity to follow the coaching and training of e-journal. Semarang City Government has budgeted all Non-Permanent Teachers (GTT) and Non-Permanent Employees (PTT) to have Minimum Wage Minimum Regional (UMR) wage. In 2017 the government allocates Rp 16 billion of Regional School Operational Support (BOSDA) from Semarang City Revenue and Expenditure Budget (APBD) with the allocation of each student at public and private school level every year with SD details of Rp 600,000 and SMP Rp 900,000, while at the SMA / SMK level is budgeted Rp 1,200,000 per year for those who have Poor Identity Card (KIM). Semarang City also has an Information disclosure system and online registration system that are used as a pilot for other regions. Then the system of School Revenue and Expenditure Budget Plan (RAPBS / APBS) Online Semarang City are pilot projects of Principal's performance for the national pilot project by the Corruption Eradication Commission (KPK).

In the field of education in Salatiga City has a BOSDA Program that is intended for underprivileged students, as well as the existence of educational scholarships to reduce dropout rates. Assistance is intended for educators and education personnel both civil servants and non-civil servants with the aim of improving excellent service. In addition, the improvement of educational facilities and infrastructure based on online information technology makes it easier for students to absorb the lessons and especially the parents can control their teaching and learning activities. Other research findings are the dropout rates in Salatiga City which is more dominated by the social pressure of the students not because of economic pressure (lack of education cost). Salatiga City is also as a City of three functions; a city for education, sports city and transit of tourism city. In the three functions of the city of education, Salatiga City is declared as a literacy city with the support of good local library as well as a city of vocation and inclusion. In addition there is an online information system associated with the corner of inclusion with the aim that people can access, view and access their potential. The allocation of education budget in Salatiga City is 20% in accordance with the mandate of the law.

In the health sector Semarang City has several policies, such as the Village Health Forum (FKK), the Elderly Commission (Komda Lanssia), Gasugas, Posyandu Forum, Nutrition Recovery
House, and Maternal and Neonatal Survival Program (EMAS) with the cooperation of USAID. Forms of government support through APBD of Semarang Budget 2017 amounting to Rp 50,000,000 per village to run programs and FKK activities. The form of activity is to conduct a self-conscious survey on environmental health. In addition there are also mentoring activities in pregnant women, monitoring mosquito larvae. In addition there is also a Healthy City chaired by the Mayor with members of community leaders and FKK. The Health surveyor personnel in each village have two surveyor officers. There is the existence of an EMAS program that success in reducing maternal and child mortality by establishing cooperation between PKK and Basic Essential Neonatal Obstetric Services Hospital (PONED) and Comprehensive Neonatal Emergency Obstetric Services (PONEK). In addition to community-based policies, Semarang City has a regulatory policy as stipulated in the Regional Regulation (Perda), namely Regulation no. 5 Year 2010 on Dengue Hemorrhagic Disease Control and Regional Regulation No. 3 of 2013 on Non Smoking Areas.

In the health sector, Salatiga City has one student one client (OSOC) program. OSOC is a program that focuses on pregnant women with high risk (risti). This program involves health students, obstetricians and the government together to record the number of pregnant women with high risk, then students accompanying the pregnant woman giving a birth by the help and consultation of obstetricians. In addition there is an Integrated Emergency Management System (SPGDT) program. SPGDT is a public health office program that is tangible service to Societies who need ambulance service. The vehicle is provided free of charge and without any charges. Ambulances which are available consist of ambulance car and motorcycle. Ambulance motor is used to reach areas in Salatiga City that is difficult to pass by a car, which can be reached for 24 hours.

4 Conclusion

In the field of education, Semarang City and Salatiga City have the desire to improve and train in order to improve the quality of students, educators and education personnel through local budget (APBD) and also Bosda both for elementary and for junior high school, so that the participation of education can be improved. In the field of health, Salatiga City has OSOC program that focuses on high risk pregnant women and SPGDT program. Besides Semarang City has a GOLD program and combines PKK with CED and PONEK to reduce maternal and infant mortality which is an important aspect of HDI.

References and Notes

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