A new decade for social changes
Public Health Policy in Donggala Regency

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Abstract. This study aims to determine how the implementation of Village Fund policies in addressing the problems of community health development in Donggala Regency, Central Sulawesi Province. The technique for determining informants in this area was carried out after determining the sample area by referring to the Village Minister Regulation (Permendesa) Number 2 of 2016 concerning the Developing Village Index (IDM), which maps Villages into the Village category. Donggala Regency has three categories of villages, namely: very disadvantaged villages, underdeveloped villages, and developing villages. And for each Village Category, informants were determined purposively, as was the technique of determining informants at the Health Office and the Community Development and Village Government (DPMD) Office, informants were determined purposively. The results of the study concluded that the implementation of public health development policies in Donggala Regency was not well realized, however, in this study it was found that the Van Meter & Van Horn policy implementation model was very appropriate to be used in assessing the performance of complex policies.

Keywords. public health policy, donggala regency

Introduction
Humans are the true wealth of the nation, human development places humans as the ultimate goal of development, not a tool of development (Syofya 2018). Therefore, humans have always been the target of the development of a nation. The main goal of development is to create an environment that enables humans to enjoy a long, healthy life and lead a productive life (Syofya 2018). Development is often conceptualized as an effort to change from one social condition to another that is considered better by parties (namely development agents) who wish to make changes. In this development, the standards or parameters that must be achieved after the change process is carried out have been determined in advance. To achieve the expected standards, of course, requires planning. Therefore, development is often referred to as planned social change. In the context of government, what is meant by a development agent here is the Government (Muhaimin & Sukmawati, 2020).
One of the goals of independent Indonesia is to promote the general welfare. The mandate is then explained in several articles, at least Article 27 (paragraph 2). The country's constitution and Law No. 40/2004 on the National Social Security system mandate providing protection for the poor, children, and neglected people as well as poor people whose health financing is guaranteed by the Government. Article 28H: Every person has the right to social security which enables his complete development as a dignified human being. Article 34 paragraph 2: The state
develops a social security system for all the people and empowers the weak and underprivileged people according to human dignity.

Law No. 36/2009 concerning Health is the basic right of every individual and all citizens are entitled to health services, including the poor. Indonesia currently has 74,954 villages. The number is very large and will have great potential if it can be managed properly and effectively. The Nawa Cita program to be continued in 2018, which states that it will develop Indonesia from the periphery of regions and villages (the 3rd nawacita program of the president Jokowi). Starting from the outskirts of the village, is a strategic program for the welfare of the Indonesian people. This program started in 2015 (Vernia et al., 2018). This is intended to solve problems of health, poverty, and unemployment that plagued the people as a result of the imbalance of past development strategies.

Health services are still a complaint among the underprivileged in Indonesia. The poor service can be seen from various aspects. Starting from long queues that are not conducive, the complexity of managing administrative requirements, to the existence of brokers in administering free health services for the poor who are often used as business land for several individuals (Mahzaniar, 2017). Therefore, it is necessary to carry out comprehensive and sustainable health development, with the aim of increasing awareness, willingness, and ability to live a healthy life for everyone in order to realize the highest public health status. This regional instability in the health sector will have implications for the equitable distribution of development and its results (Wardhani & Paramita, 2016). Health is an investment to support economic development, and has an important role in poverty reduction efforts. Health also affects the quality of human resources (Maulida & Sari, 2015). Likewise, Law 23/2014 on Regional Government, in which health is one of six concurrent (joint) affairs which is compulsory and related to basic services, covers four areas of affairs, namely: Education; Health; Public Works and Spatial Planning; Public Housing and Settlement Areas; Peace, Public Order and Community Protection; and Social (Aziza, 2016).

Furthermore, Law Number 6 of 2014 concerning Villages. The village in this case has the authority to regulate and manage the fields of Village administration, village development implementation, village community empowerment, and village community development. This means that all sources of Village income, including Village funds sourced from the State Revenue and Expenditure Budget (APBN), are used to fund the entire village authority. Government Regulation No. 60/2014, regarding Village Funds sourced from the State Revenue and Expenditure Budget. Because Village funds come from central government spending, the government is given the authority to set priorities for the use of Village funds to support Village development and the empowerment of Village communities. The description of the aforementioned regulations can be interpreted that health is a form of basic social service, so it is an obligatory affair of the government to overcome it. However, the problem of low village budget allocation for health development is mainly due to the incapacity of the health sector in taking advantage of village budget opportunities Health workers in villages as actors of health development in villages still have limitations in basic managerial terms to identify basic needs and problems, mobilize resources, planning activities and so on (Suarsih et al., 2017).

The government is responsible for regulating and protecting the right to optimal public health. The government's responsibility in fulfilling the right to health is manifested in the provision of proper health facilities and facilities that are easily accessible to the public (Isriawaty, 2015). Health is one of the basic human needs to live a decent and productive life. For this reason, it is necessary to carry out controlled health in terms of cost and quality, because everyone, both rich and poor, living in developed and developing countries is always faced with risks that threaten life at any time.
Social Security is an institutional intervention designed by the government and the private sector to protect people from various risks that arise from them (accidents, illness, death), as well as from their environment (layoffs, social disasters) (Sumadi 2017). The community development program policies implemented by the government so far are in effect an effort to improve the quality of life of the Indonesian people, including health development. Public policies are understood as policies made by government agencies and political actors that aim to solve public problems which are crucial issues to study. The scope of policy in this study focuses on the public health sector.

The importance of this research is that it can provide a basic understanding both to academics, practitioners, and the public or to the community, about public health development policies in Donggala Regency. The Village Fund is relatively large, but the villagers are actually sick and have a high risk of health problems. Each sub-district has health facilitation, namely the Puskesmas and in the village there is a Posyandu. However, the problem that occurs is the lack of financial support and affordability of health services. Geographical factors are also an obstacle so that health facilities are not fully accessible to the village community, especially those related to costs and distance. This condition requires quite high costs in the implementation of health development in order to improve the standard of living and welfare of the people in the Donggala district. One of the government policies in overcoming problems plagued by the Village community is Village funds, which can be used to finance the implementation of Village authority based on rights of origin and Village scale local authority. The Village Fund is one of the sources of Village income that must be included in the Village Income and Expenditure Budget (APBDesa) document. Each year the Village will receive Village funds from the central government, which is distributed through the Regency / City.

Based on these problems, this study aims to determine how the realization of the Village Fund policy in overcoming the problems of community health development in Donggala Regency which consists of 16 Districts with 158 villages, 9 wards.

**Literature Review**

Health is one of the basic needs for individual, family, and community life which is achieved through various efforts (Sugyati et al., 2017). Health service policy for the poor is still one of the fundamental problems, especially in Indonesia. Policies related to health services for the poor are still one of the fundamental problems, especially in Indonesia. The problem of poverty which is a problem that always exists in every country, even though the era has entered the era of globalization, it cannot be denied that the problem of poverty has always been an obstacle to the progress of each country. (Tobari et al., 2019).

Indonesia in the mandate of its Law stipulates that: The definition of health is a healthy condition, whether physically, mentally or psychologically, spiritually or socially which allows everyone to live productively socially and economically which allows everyone to live productively socially and economically (Naftali, Ranimpi, and Anwar 2017). Health is a basic right of every individual and all citizens are entitled to health services. The increasing public awareness of their rights in terms of health services is one positive indicator of increasing legal awareness in society (S et al. 2015). Health is a fundamental right of every citizen, therefore every individual, family, and community has the right to receive protection for their health, and the state is responsible for regulating the fulfillment of the right to a healthy life for its inhabitants, including for the poor and underprivileged. (Sudjadi et al. 2018).

The development programs carried out by the government so far are essentially an effort to improve the quality of life of the Indonesian people, including health development. Health development which aims to improve the health status of the community, this is an effort to
create quality human beings who have high work productivity, so that it will become a formidable development capital (Tobari et al. 2019). As in Article 25 of the Universal Declaration of Human Rights. The United Nations in 1948 states that: "Everyone, as a member of society, has the right to security for everyone, as a member of society has the right to social security: in terms of unemployment, illness, disability, being unable to work, widowed, old age. (Haqiqie, 2020). Therefore, health development is an integral and most important part of national development, the objective of carrying out health development is to increase awareness, willingness and ability to live a healthy life for everyone in order to achieve an optimal degree of public health. The success of health development plays an important role in improving the quality and competitiveness of Indonesia's human resources (Makatumpias et al., 2017).

In addition, in the context of equal distribution of health services, the Government has begun to promote programs aimed at the underprivileged so that all people can enjoy health services fairly and equally. One of the health service programs that can be enjoyed by the poor. Law Number 24 Year 2011 also stipulates, National Social Security will be administered by BPJS, which consists of BPJS Health and BPJS Ketenagakerjaan. (Moniung et al., 2017). Health development is a government effort to fulfill the basic rights of the community in obtaining health services that are carried out professionally, effectively and provide maximum benefits for the improvement of the optimal degree of public health. For this reason, the achievement of health status which is basically influenced by environmental factors, behavior, service, and heredity, needs to involve all elements of the nation. In a sense, public health services are not only the responsibility of the government alone but are also carried out by the community independently (Tobari et al. 2019).

Health according to the Law of the Republic of Indonesia No. 36 of 2009 is a healthy condition, physically, mentally, spiritually, and socially, which enables everyone to live productively socially and economically. According to WHO, health is a dynamic condition covering physical, spiritual, social health, and not only free from diseases, disabilities and weaknesses. (Adliyani 2015). From this explanation, it is clear that health does not only include physical condition, but also the mental condition and social condition of a person (Taheri & Biriya, 2013).

**Village Fund Policy**

Government Regulation Number 60 of 2014 concerning Village Funds sourced from the State Revenue and Expenditure Budget (APBN), Article 1, paragraph 2: Village Funds are funds sourced from the State Revenue and Expenditure Budget intended for Villages which are transferred through the Revenue and Expenditure Budget District / City areas and are used to finance governance, development, community development and community empowerment (Mustanir, 2016). The Village Fund is one of the sources of Village income that must be included in the Village Income and Expenditure Budget (APBDesa) document. Each year the Village will receive Village Funds from the central government, which is distributed through the Regency/City (Ridwan & Ibty, 2020).

The Village Fund is the main income. The allocation of village funds is to increase the financial capacity of the village to finance village government programs in carrying out activities in the field of village governance, implementing village development, fostering village communities, and empowering village communities. (Rahayu, 2017). Village funds can be used to finance priority programs and activities that have been agreed upon and determined in the Village development planning deliberation (Musrenbang Desa). The Village Fund is expected to provide additional energy for the Village in carrying out Village development and
empowerment, towards a village that is strong, advanced, and independent (Kamaruddin, 2018).

**Policy Implementation**

Policy implementation is one of the stages in the entire policy process, namely the formulation stage, the implementation stage, and the evaluation stage which takes place in a complex and dynamic policy system and will determine the success or failure of a policy. (Sabdaniningtyas 2018) Furthermore, according to Van Metter and Van Horn, policy implementation is actions taken by individuals or officials or government or private groups that are directed at achieving the goals outlined in policy decisions. Then, according to Bambang Sunggono, policy implementation is an effort to achieve certain goals with certain facilities and in a certain time sequence. (Imami, 2019).

The policy implementation process can only begin when policy objectives have been set, implementation programs have been created, and funds have been allocated for the achievement of these policy objectives (Herman, 2017). Implementation is one of the stages in the public policy process, usually, implementation is carried out after a policy is formulated with clear objectives (Wahyudi, 2016). Furthermore, Afgan Gaffar stated that implementation is a series of activities in order to deliver policies to the community so that these policies can bring the expected results (Reidha, 2018).

The policies that have been set are useless if they are not implemented. This is as expressed by William Dunn that the policy will have no impact and cannot achieve the goals of the policy itself if the policy is not implemented (Wijayanti & Jannah, 2019). According to Dunn, the policy implementation process is more important than the whole series of policy processes. This is because the level of success of a policy will be determined by the ability to implement it, although in the process there are various complex problems that often have political implications and interventions from various interests (Massi, 2016). Therefore, the success or failure of a predetermined policy is determined by its implementation with the assumption that implementation is a chain that connects policy formulation with the expected policy results.

According to Mazmanian and Sebastien, implementation is the implementation of basic policies in the form of laws as well as in the form of orders or important decisions or such as judicial decisions. This implementation process takes place after going through a number of certain stages such as the stages of passing a law, then policy output in the form of implementing decisions, and so on until the improvement of the policy concerned (Mandala et al., 2016). It is correct to say by Mazmanian, policy implementation is a series of public policies in addition to the formulation and evaluation of policies established by the government through the political process, and is carried out continuously in implementing simultaneous and objective actions. Public policymakers can make changes or adjust the objectives and modified programs to minimize obstacles in order to change the situation, even though they are considered an illegal attempt by implementing officials in pursuing basic goals and strategies.

Ripley and Franklin argue that implementation is the things that occur after a law (product) is issued to validate a program, policy, profit, or tangible output; the term implementation refers to a series of activities that follow a formal statement of program objectives and desired outcomes by government officials. Implementation includes action (and non-action) by a variety of players, especially bureaucrats; implementation is designed to realize the program in such a way as to achieve its goals (Sofyan, 2017). Grindle explained that the sources involved in implementing policies include people who have sufficient competence both in terms of quantity and quality (able to effectively manage existing resources), access to
clear information, adequate facilities and infrastructure, available and the authority-owned (Lambelanova, 2017).

Edwards III provides a view of policy implementation, so it can be said that policy implementation is the stage of policymaking between policy formation such as part of legislative action, issuing executive orders, submitting down judicial decisions, or issuing regulations and the consequences of policies for those who influence it. These actions include attempts to turn decisions into operational actions over a period of time (Oktamia & Fauziah, 2018).

Van Meter and Van Horn's view that implementation is an action by an individual, official, group of government or private bodies that is directed at achieving the goals outlined in a certain decision. These agencies carry out government jobs that have an impact on their citizens. However, in practice, government agencies often face jobs under the mandate of the law, making it unclear what they should do and what should not be done (Mandala et al., 2016).

The opinion of the experts mentioned above concluded that policy implementation is a dynamic process that includes many interactions and many variables. Therefore, there is no single variable in the policy implementation process, so there is a need for further explanation between one sub variable and another and how these variables affect the policy implementation process (Napir & Junus, 2019).

**Methods**

This research design used a qualitative descriptive approach. The technique of determining the location is carried out by sampling the area based on the status of the Village with the building Village index component (IDM), based on the Village Minister Regulation (Permendesa) Number 2 of 2016 concerning the Developing Village Index (IDM), by classifying the Village as follows: Advanced Village, Independent Village, Developing villages, underdeveloped villages, and very underdeveloped villages. Donggala Regency has three village classifications, namely: very backward village, an underdeveloped village, and a developing village. Based on this, the research location is determined based on the Village classification as follows: (1) Wani II Village, Guntarano District representing the Developing Village. (2) Loli Dondo Village, Banawa District represents a Disadvantaged Village. (3) Labuan Kungguma Village, Labuan District, representing the Very Disadvantaged Village. The technique of determining informants was carried out purposively as follows: (1) Head of the Village Administration and Finance Division of the Community Empowerment and Village Government of Donggala Regency, (2) Three Village Heads, (3) Three Village Health Workers, (4) Health Cadres three people. Then the data collection technique was carried out using the following techniques: Observation, in-depth interviews, and document approaches related to research.

**Results and Discussion**

The results showed that the public health development policy in Donggala Regency has not been implemented properly. This is known from the results of a study using the Van Meter & Van Horn policy implementation model approach. According to Van Mete & Van Horn, what needs to be understood in policy implementation is what is the standard and target of the policy. Therefore every public policy must have policy standards and objectives (Sukino et al., 2019). The clarity of these standards and targets must be specific, so that at the end of a program, it can be seen the success or failure of a policy. Policy standards & objectives have a close relationship with the disposition of implementers. The failure of a policy can occur, if the implementors do not understand and do not understand what the policy standards and objectives
are, so they can refuse to implement it. Likewise, a policy can be implemented properly if it is supported by sufficient resources, namely: human resources, financial, and support for facilities and infrastructure. The reality in the field shows that the ability of village officials is still lacking, it can be seen that the average level of education of middle school or (SMA), lack of expertise in operating computers, making reports often late. Lack of support from the community, so that health programs are not a priority in the preparation of work plans or programs proposed through village meetings.

Next is Van Meter & Van Horn. Whereas when the implementation program is very complex, the reality of policy programs requires good relations between related agencies, namely communication support and coordination between agencies or the bureaucracy (Pasinringi, 2020). Good communication can eliminate the deadlock for information to the public. The public health development policy in Donggala Regency, actually involves three (3) organizations or bureaucracy, namely: the Health Service, the Community Empowerment Service and the Village Government, and the Donggala District Government. In fact, communication between organizations is not carried out well, there is a lack of socialization of policies to the public, so that understanding is still lacking, so the importance of health development is not well responded to, and there tends to be resistance from the community (Arifin, 2020). Therefore, the Village community has not prioritized health development, the Village community, in general, has prioritized activities on physical development.

This research shows that there is a lack of intense communication between the Donggala Regency Government organizations, so coordination does not materialize, sectoral egoism occurs, so that they work individually, such as the village, in this case, the use of Village funds in a self-managed or labor-intensive manner is to absorb labor. in the village, especially the poor, as well as the provision of basic village facilities and infrastructure, such as environmental roads, farm roads, bridges, sports facilities, village-owned enterprises, and irrigation canals (Samad & Hardi, 2018). The Village Fund functions to improve community welfare, basic services, community capacity and capability, village economic progress, address gaps between villages, and at the same time to carry out equitable development. Likewise, the Health Office carries out its programs based on the available budget. The health development budget at the Donggala District Health Office, in 2016 amounted to IDR 50,590,329,500 but the amount of the budget distributed was IDR 22,508,925,439, in 2017 the proposed budget was IDR 66,210,312,000, but the budget that was disbursed was IDR. 40 593,917,996. The budget submission in 2018 is IDR 65,670,720,500. but Rp. 9. 023,567,101 from budget submissions. These funds are included in those managed by 18 Puskesmas in 16 sub-districts in Donggala Regency, and to meet the lack of funds, it is hoped that funds will be obtained from the Village Fund Policy which is regulated by the Health Development Policy as stipulated in the Decree of the Minister of Health of the Republic of Indonesia No: HK.02.02 / Menkes / 52/2015 regarding the strategic plan of the Ministry of Health, where activities have been arranged to encourage villages to allocate and utilize Village funds at least 10% for Community-Based Health Enterprises (UKBM). If the funds are realized properly, namely 10% Village funds, will not materialize.

The researcher's view is that if 10% of the Village Fund is taken per village, it can solve health problems in Donggala Regency, however, due to the lack of public understanding of the importance of health, it makes health problems less important. This can be seen from the realization of the Village fund policy of 10% which is intended for the development of village community health in Donggala Regency, only a part of it is budgeted and implemented independently without coordination with the Health Office through an integrated program. The Village development activity program is carried out based on suggestions from the community,
and the determination of the Village government work plan [RKP Desa], is determined through the Village Development Planning Conference (Musyawarah) and the Village Development Planning Consultation (Musrenbangdes), taking into account the capabilities, potentials and assets of the Village (Muhiddin and Khaerah, 2019). Village communities, both developing and underdeveloped villages, as well as underdeveloped villages generally consider that health problems have not been considered a serious problem.

Limited funds managed by the Donggala District Health Office, for health development causing health problems are still high, it can be seen that in 2016 there were 11 maternal deaths and 8 child deaths, 30 malnutrition, 32% pneumonia 2017 Maternal mortality as many as 14 people and child mortality as many as 7 people, malnutrition as many as 42 people, pneumonia by 29%. Lack of financial support as a policy resource can affect policy targets that cannot be properly realized. This is confirmed by the viewpoint of George Edward III, arguing that the resources of a policy must be available so that policy implementation can be realized properly. Although the implementation order must be carried out accurately, clearly, and consistently, if the implementers do not have sufficient resources to implement the policy, the implementation will not materialize effectively.

The process of implementing public policies can basically only begin when the objectives of public policies have been set, programs have been made, and funds have been allocated for the achievement of these policy objectives, so that it can be said that policy implementation is in principle away for a policy to achieve its objectives (Samad, & Aisyah, 2019). In principle, the policy implication is a way for a policy to achieve its goals.

The definition of implementation above when associated with policy is that in fact the policy is not only formulated and then made in a positive form such as law and then silenced and not implemented or implemented, but a policy must be implemented or implemented to realize the desired impact or goal (Sofyan & Meldi, 2019). In other words, policy implementation is an effort to achieve certain goals with certain means and in a certain time sequence, and the funds that have been allocated for the achievement of policy objectives.

Based on this, it proves that the Van Meter & Van Horn policy implementation model in measuring the performance of the Donggala Regency government bureaucracy in public health development policies is very relevant to this theory.

As for the views of researchers, regarding the ineffectiveness of public health development in Donggala Regency, it can be described as follows: Health development in the measurement of the Human Development Index is one of the main components besides education and income.

The components of the human development index, namely education, health, and income, are one of the requirements for the success of a government, whether in a village, district/city, province, or state. Therefore it is necessary to conduct intensive socialization about the importance of public health development for a government.

The Human Development Index (HDI), which was introduced by the United Nations Development Program (UNDP) in 2007-2008 and has been published regularly in the annual HDR (Human Development Report). The human development index (HDI) is an important indicator to measure success in efforts building the quality of human life that can explain how residents can access development outcomes in terms of income, health, and education (Darwati & Wekke, 2019). Health development is a government effort to fulfill the basic rights of the community in obtaining health services that are carried out professionally, effectively and provide maximum benefits for the improvement of the optimal degree of public health. Furthermore, as an explanation of the HDI, components called the Community Health Development Index (IPKM) are determined which function as tools or indicators in measuring
the Degree of Public Health which generally includes under-five health, reproductive health, health services, health behavior, non-communicable diseases, diseases, infectious and environmental health.

Health development is a government effort to fulfill the basic rights of the community in obtaining health services that are carried out professionally, effectively, and provide maximum benefits for increasing the optimal degree of public health. Health is a form of basic social service. The quality of human development is very important in the national policy strategy for economic development. Emphasis on the importance of the quality of human development is a necessity because superior resources will produce all advanced life arrangements in various fields, both social, economic, and environmental, so that the quality of humans has a big role in determining the success of the processing of regional development. To measure the quality of humans, it can be seen from the HDI score achievements. The HDI figure consists of three components, namely health, education, and a decent quality of life.

Health is one of the basic human needs to be able to live properly and productively. For this reason, controlled health management in terms of cost and quality is needed, because every human being rich or poor, living in developed and developing countries is always faced with risks that threaten life at any time. Social security (social security) is an institutional intervention designed by the government and the private sector to protect people from various risks that arise from them (accidents, illness, death), as well as from their environment (family hope program, natural disasters, social disasters).

Lack of public understanding of health development, resulting in apathy or resistance in the community, and in the end, they do not include it in a Village planning program which is decided through village meetings, because they think that health does not have a direct impact on the community. In general, the villages in Donggala Regency are more focused on physical development programs, namely: in compiling a program that is more oriented towards providing basic village infrastructure, such as environmental roads, farm roads, bridges, sports facilities, village-owned enterprises. and irrigation channels.

Because communication between organizations, or between actors in public health development policies will affect the lack of financial support, as will the attitude of policy actors (Mustainah et al., 2020). This results in a lack of importance for the health program in the village community. The failure of the implementation of health policies in the community can have an effect on the success of a government. The human development index is a measure to assess the success of a government, be it the village government, district/city government, provincial government, or the government of a country. One of the components of the HDI that is the focus of this research, apart from education and income, is health. The results of the policy, after conducting research to assess the performance of health development policies, did not materialize as expected, so because they think it can be in Donggala Regency. It is inevitable that the lack of implementation of health programs can affect the HDI human development index of a government area.

Conclusion

The implementation of public health development policies in Donggala Regency is not well realized. This can be seen from the six (6) aspects of the study that were studied, there are still several aspects that are considered to have not been achieved optimally, including aspects of basic measurements and non-concrete goals. , Van Meter and Van Horn suggest that 6 (six) aspects of the model are related between one factor and another, so that it is an inseparable unit. So if there are one or two factors that are not fulfilled, the assessment of the policy is a failure to realize a hope or goal. In determining the basic measurement and policy objectives, operational and technical guidelines are needed which are used as a basis for assessing policy
achievement. Likewise communication between organizations. That the successful implementation of policies is related to communication between organizations and it is necessary to have accurate understanding and consistency in communicating basic measures and policy objectives, as well as clear mechanisms and procedures. This is not the case with related bureaucracies such as the Health Officer, the Community Development and Village Administration (PMPD), and the Village Government, so that community health development is carried out individually, resulting in a lack of support for resources in managing public health. Social, economic and political factors have become the center of attention of the Village government so that health issues are not a priority assuming that the health aspect does not have a direct impact on people's lives, many villages do not program them, and are more likely to propose programs that are physical in Village deliberations.

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