

Study of Child-Worth Program Development at East Kutai Regency of Indonesia

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ABSTRACT

The City or District Appropriate Program is a district or city with a development system based on the children's rights platform through an integrated commitment and energy base of the authorities, citizens, and efforts, which are planned in a comprehensive and sustainable manner in policies, programs, and activities to ensure the fulfillment of children's rights. One of the districts that perform the children's friendly city program is East Kutai Regency. The 2019 East Kutai explained that the indicators for Child-Friendly Districts had been fulfilled 61% in East Kutai District. However, the implementation is still not running optimally. East Kutai Regency, especially North Sangatta Subdistrict, has not been able to get the Child-friendly Regency/City predicate because it has not been able to achieve a minimum score of 500 points for the Primary Child-friendly Regency/City target. In addition, there are other problems, such as not running a mother's class, lack of guidance in premarital counselling and low immunization achievement. This study used a survey method with 44 respondents, which are children who are in the North Sangatta District as the target of this program. The results of this study indicate that based on the community's response, the program development is categorized as "Good Enough", with a percentage of 58.43%. The reaction with the highest percentage is the availability of clean water networks, which is 85.47% in the "Very Good" category. The lowest rate is public knowledge about the community's existence at 40.5%. Then the dominant factors that occur during this research are individual, technical and resource.

Key words: Child-Worth Program, East Kutai.

1. INTRODUCTION

More than a one third of Indonesia's population is less than 18 years old, and the population of that age is categorized as a child. Children are the next generation of the nation who deserve to be protected. By the constitutional mandate, "Every child has the right to survive, grow and develop and has the right to protection from violence and discrimination". According to the Child Protection Act, it is stated that "A child is someone who is not yet 18 years old, including children who are still in the womb". Considering that Indonesia, as a state party to the Convention on the Rights of the Child (Convention On The Rights Of the child), which regulates the principle of legal protection for children, must provide special protection for children who conflict with the law.

Children have the right to special protection and must obtain opportunities and facilities guaranteed by law and other means so that physically, mentally, morally, spiritually and socially, they can develop healthily and naturally in conditions of freedom and dignity [1].

VB Reported via www.kpai.go.id, explained that the condition of violence experienced by children in Indonesia is quite alarming. In 2014 there were 5,066 cases, and in 2015, there were 6,006 cases. From these facts, we can underline that to prioritize the best interests of children, it is essential to protect children. The minor organization in society, namely the family, plays a vital role in fulfilling children's rights. Other rights include the right to life, the right to education, the right to health, and the right to love. Violence will readily occur if the family ignores the children's rights above. Abandonmentrights rights of children can be caused by poor economic conditions, which causes in create emotions advent to the child.

A child is someone who is not yet 18 (eighteen) years old, including a child who is still in the womb. The beginning of the Child-Friendly District/City (KLA) initiative was developed by UNICEF, which refers to the results of Kevin Lynch's research

on "Children's Perception of the Environment" in Melbourne, Warsaw, Salta and Mexico City in 1971-1975. The results showed that the best environment for children is one that has a solid physical and social community, has clear and firm rules and gives children the opportunity to study and investigate their background [2]. Various indicators were then developed based on this research to measure a child-friendly area/area.

Child-Friendly Cities were introduced by UNICEF and the UN habitat the UN-GASS (United Nations General Assembly Special Session) on Children in 2002, which was declared World Fit For Children. Paragraph 13 of the opening of the Habitat Agenda at the Habitat Conference II or City Summit emphasized that the decision-making process, both at the city and community levels, must involve children, as well as the fulfilment of children's rights to get adequate housing and the satisfaction of children's needs and roles in the play. Then in Indonesia, the term child-friendly began to appear, inviting the community to pay attention to and accommodate children's rights jointly.

In Indonesia's early and intense involvement in fulfilling children's rights through Convention Children's Rights (KHA), and considering that a Child-friendly World is a global commitment, the Government of Indonesia gave a positive response to the recommendations of the United Nations General Assembly in 2002. After preparing and strengthening institutions, Indonesia moved to start the foundation to develop Child-friendly Districts/Cities (KLA) since 2006. The emergence of the Child-Friendly City program is sad because this country hears about cases of violence against children every day. Based on East Kutai Regional Action Plan 2014-2019 explained that the birth of a Child-Friendly City is expected to create families who love children, harmonious neighbours or an environment that cares for children. Districts/cities suitable for children as a measure that children grow and develop well are protected by their rights, physical needs, and psychological.

By the problems above, the objectives of this research can be formulated as follows: Knowing and analyzing the development of the Child Eligibility Program based on the Regent's Regulation no. 12 of 2014 in North Sangatta District; Knowing the dominant factors in developing a Child-Friendly Program based on the Regent's Regulation no. 12 of 2014 in North Sangatta District. Children's rights are affirmed in Law Number 23 of 2002 concerning Child Protection, one of Indonesia's commitments to respect and fulfil children's human rights. Children are individuals who must be cared for, and guarded by families, parents and the state. Child protection is part of the fulfilment of human rights (HAM) [3].

Research is expected to have benefits that can be developed and later expected to provide benefits. The benefits of this research can be grouped into two, namely theoretical benefits and practical benefits, each of which is as described below: Theoretical benefits, namely the results of this study, are expected to provide a conceptual contribution to East Kutai Regency [4], especially the city of Sangatta regarding strategies or efforts to uphold human rights. Child through. Practical benefits, namely being input for the Office of Women's Empowerment & Child Protection in East Kutai in developing a Child-Friendly City strategy and this research is expected to provide an overview of the Child-Friendly City program so that the community can participate in supporting the embodiment of environment-friendly and safe in the process of child development in East Kutai.

2. LITERATURE REVIEW

Public policies are made with the specific purpose of regulating everyday life to achieve the agreed-upon common goals. The public policy includes everything that is stated and done or not done by the government. In addition, public policies are also policies developed or made by government agencies and officials.

Dunn, William N, provides a basic understanding of public policy as what the government does or does not do. At the same time, Easton delivers an understanding of public policy as the allocation of power values for the whole society's existence binding so that it is enough that the government can take action to the community and that action is a form of something chosen by the government which is a form of allocating values to the community [5].

Indiahono, Dwiyanto, states that policy is a direction of action proposed by a person, group or government in a particular environment that provides obstacles and opportunities for implemented policies—proposed to use and overcome to achieve or realize a goal or a specific purpose [6]. According to Suharto et al., the policy has two main aspects in a broad sense. Namely, the procedure is practice social, isn't it single or isolated [7]. The guidelines produced by the government come from all events in society and are also used for the benefit of the community. Social practice is a community problem or problem; this problem is then an issue. This issue can then become a policy. Therefore, policy grows from an event that occurs in society.

3. RESEARCH METHODOLOGY

3.1 Research Sites

This research is located in Sangatta City, East Kutai Regency, with the following considerations, namely based on the Population Data of East Kutai Regency Based on Age Structure published by the Disduk Capil Kab. East Kutai. North Sangatta District is the sub-district with the highest population of children category among other districts. That is as many as 36,807.

Sampling was conducted at a confidence level of 85% or a critical value of 15%. Since the research location that the author will examine is Sangatta District north, with a population of 44,710 years in the child category in 2021, so the population in this study is 44,710. By the formula, the number of samples in this study is as follows:

$$n = \frac{44,710}{44,710 (0.15)^2 + 1}$$

$$n = 44.4$$

Based on this calculation, the samples taken were rounded up to 44 people. Data analysis technique activities in data analysis are grouping data based on variables and respondents, tabulating data based on variables and types of respondents, presenting data for each variable studied, performing calculations to answer the problem formulation, and performing analyses to test hypotheses that have been proposed.

4. RESEARCH RESULTS AND DISCUSSION

East Kutai Regency is one of the regencies in the province of East Kalimantan, Indonesia. The district capital is located in Sangatta. The name comes from very muchorSingaporewho was an influential leader around 1812. He was so-called because Kerta (the leader's name) was strong, big, tall, and stocky. His strength is seen as exceeding the average human and is described as rivalling the power of wild beasts such as lions. This district has an area of 35,747.50 km, or 17% of the total area of East Kalimantan province. The total population by age in North Sangatta District can be seen in the table.

Table 1 North Sangatta District Population Age

No.	Age	Amount
1.	0-4	9,456
2.	5-9	12,737
3.	10-14	12,498
4.	15-19	10,019
5.	20-24	10,388
6.	25-29	12,116
7.	30-34	12,849
8.	35-39	12,479
9.	40-44	10,142
10.	45-49	8,350
11.	50-54	5,861
12.	55-59	3,451
13.	60-64	1,951
14.	65-69	966
15.	70-74	444
16.	>74	476
Total		124.183

Source: Age Structure Data Kec. North Sangatta SMT I-2021 (Disdukcapil)

Based on data on the age structure of North Sangatta District in semesters 1-2021, which was published by the Population and Civil Registry Office of East Kutai Regency, it was explained that the percentage of the number of children to the total population of the North Sangatta sub-district was 36.03%. This indicates that the presence of children reaches almost half of the total population. The data on the number of children are described in the table.

Table 2 Number of Children by Age Group in North Sangatta District in 2021

No	Child Age Group	Gender		Amount Child (Soul)
		Man	Woman	
1.	0-4	4,320	5,136	9,456
2.	5-9	6,359	6,387	12,737
3.	10-14	6,816	5,682	12,498
4.	15-19	5,039	4,980	10,019
Total Number of Children in 2021				44,710
Total Population in 2021				124.183
Percentage of Number of Children/ Total Population in 2021				36.03%

Source: Smt-I Age Structure in 2021 – Disdukcapil Kab. Kutai East.

5. DISCUSSION

The implementation of the Child-Friendly District Program in East Kutai Regency has been running for eight years since the ratification of the East Kutai Regent's Regulation No. 12 of 2014 concerning Child-Friendly District Policies in 2014. This program is implemented in 18 sub-districts in the East Kutai Regency, one of which is the North Sangatta District. The development of child-friendly districts is divided into five characteristics with each cluster. One of which is Cluster III: Characteristics of Basic Health and Welfare. This cluster is run through 8 sub-programs to realize Basic Health and Welfare by Child-friendly District standards.

Then, this program is executed under the coordination of the Office of Women's Empowerment and Child Protection with the Department of Health. The indicator "Infant Mortality Rate" indicates the general health quality of the community. The leading cause of infant mortality is still a big challenge that must be addressed. Infant mortality is generally caused by several diseases such as acute respiratory infections perinatal complications and diarrhoea. The high child mortality rate up to one year illustrates the low-quality status of maternal and newborn health; poor access and quality of maternal and child health services.

Of the total health centres in North Sangatta District, the infant mortality rate in 2020 decreased compared to 2019. This indicates that the efforts made by the local government have reduced the percentage figure compared to the previous year.

Then, on the indicators of infant and toddler nutrition. There is still a lack of enthusiasm for the community to check his health at the health centre. Although it is still a low percentage, some toddlers are malnourished and short in height. This is caused by a lack of quality and balanced nutritional intake, where a lack of nutrition in children can hinder their cognitive development and affect their health status, especially when they move into adolescence or adulthood.

The third indicator is Information exclusive breastfeeding and breastfeeding corner. ASI is a source of nutritional intake for newborns, and the nature of breast milk is whole because it is given to infants aged 0 months to 6 months. In this phase, it is necessary to properly pay attention to the provision and quality of breast milk so that it interferes with the child's developmental stage during the first six months from the first day of birth (HPL), considering that period is the golden period of child development until the age of 2 years as it is known that, to support the achievement of exclusive breastfeeding. As a form of government attention to breastfeeding mothers, the government urges establishing breastfeeding corners in every public place, including offices and public service providers. During its implementation, the percentage of early breastfeeding initiation has reached the excellent category. However, the provision of breastfeeding corners has not run optimally. Because optimally, most public places that provide breastfeeding corners are only hospitals and clinics. There are still public places that have not facilitated breastfeeding corners, such as markets, places of worship and several other public service places. In addition, the dissemination of information regarding the location of the ASI corner is also not optimal because there are still people who don't know the site and don't even use the ASI corner.

Then. Primary immunization in children is essential to strengthening the body's defence system, so it is immune to disease germs. Parents and local health workers must protect babies from various disease risks through vaccination. Insufficient knowledge and understanding of parents regarding the importance of vaccination and the impact if children are not immunized can cause infants or children not to get immunizations optimally. The immunization achievement rate in the North Sangatta sub-district has been running quite well. However, some parents did not immunize at the puskesmas or posyandu. The immunization achievement rate has decreased from the previous year due to the COVID-19 pandemic.

The availability of reproductive and mental health service institutions is also part of the program, including the Child-Friendly District. This program aims to ensure that everyone can achieve a good quality of life and provide integrated, comprehensive and sustainable health services through promotive, preventive, curative and rehabilitative efforts. Then also provide comprehensive reproductive health services to women in particular, including sexual life and women's reproductive rights, to increase women's independence in regulating their reproductive functions and processes, which in turn can lead to an increase in the quality of their lives. This program has not run optimally. Even though the Puskesmas has provided testing for HIV-AIDs and *pap smear*, the provision of mental health services do not work. Apart from not running Mental health services at the Puskesmas, counselling rooms at the Office of Women's Empowerment and Child Protection have also been converted into old storage rooms. Currently, mental health services are provided in private schools and privately managed psychologists' practices.

Furthermore, indicators of improving the welfare of children and low-income families. This program has been running but is not yet optimal. Some programs are no longer running due to a lack of data on program targets—Unsung scholarships and responsibility for educators and the future of children from low-income families who excel. In addition, there is a lack of information regarding the provision of assistance. So many people miss this information.

Then household achievements Access Clean water. The arena of water quality can affect health and everyday life. Water used daily, such as for drinking, cooking, bathing and others, must be in a clean condition to avoid diseases caused by poor water quality. Using pure water can avoid diseases such as diarrhoea, cholera, dysentery, typhoid, intestinal worms, and skin diseases to poisoning. For this reason, all family members must use clean water daily and maintain pristine water quality in their environment. In this case, the availability of clean water in the North Sangatta Sub-district is good where most people have used PDAM.

And the next indicator relates to a smoke-free area. The Non-Smoking Area is designated to protect the community from the risk of health problems because the environment is polluted with cigarette smoke. The application of this smoke-free area is an effort to realize healthy and clean air quality, free from cigarette smoke, reduce the number of smokers and prevent novice smokers. Realize healthy young generation. In its implementation in North Sangatta District, the area of cigarette smoke has not run optimally. Some places still do not have smoke-free areas, such as supermarkets, restaurants and parks. In addition, the lack of supervision and the lack of firmness of officers to reprimand participants give penalties for smokers who smoke in crowds; in this case, the Satpol PP and Linmas are in charge. Furthermore, there is a lack of public awareness about the dangers of smoking and the importance of keeping a distance from other people when smoking.

In every implementation of a policy, of course, some factors influence the running of the performance. Likewise, the development of Child-Friendly Districts in North Sangatta District has been running for eight years. This factor can be an obstacle or a supporter in the process program. However, after knowing the challenges and barriers experienced, it is hoped that they will be able to provide solutions to overcome them. The following are the dominant factors encountered:

a. Individual, in the development of Child-friendly districts in North Sangatta District, of course, there are specific challenges that the community members are trying to overcome implementation their way. An individual challenge or obstacle must be faced and can only be solved through personal self-implementation. The success of the implementer in dealing with the challenges will affect the accuracy in-implementation policy.

The first factor is the inadequate quantity of human resources, so some programs are not running in their implementation. The lack of adequate human resources causes a lack of socialization, training and supervision. In addition, mutations often occur randomly, so trained experts cannot continue their duties. This causes some programs to be uneven and do not reach the targets. As happened in the breastfeeding counsellor program and mother class.

b. Technical, next up are technical factors that are beyond expectations of implementation. Regarding the technical performance, it has been contained in the East Kutai Regent's ^[8] concerning Child-Friendly District Policies and RAD for Child-Friendly Districts of East Kutai 2014-2019. With the existence of this implementation guideline can prevent deviations or things that are contrary to the original objectives of the Child-Friendly District policy. By referring to the regulations that have been set, the implementer tries to make this Child-Friendly District policy able to solve problems related to children's rights.

c. Resources, can be necessary for the running of a company. Well resource people, funds and infrastructure. The availability of resource cues influences the effectiveness and efficiency of a policy. In this case, implementing the Child-Friendly District policy is still experiencing problems with the availability of human resources and funds. The lack of funding resources was caused by the diversion of funding posts, especially during the covid-19 pandemic, which was focused on controlling COVID-

19. Then the lack of availability of human resources in quantity and quality competence makes some programs not run, especially the formation of posyandu cadres and breastfeeding counsellors. In addition, limited funds and the diversion of funds from the centre have caused several program developments to be ineffective.

6. CONCLUSION

Based on the results of research on "Evaluation of the Child-Friendly City Program Based on the Regulation of the East Kutai^[8] concerning Child-Friendly District Policies in Sangatta Utara District, East Kutai Regency", the program development is categorized as "Good Enough" with a percentage of 58.43%. Here's the rating former each-each indicator:

Infant Mortality Rate, This indicator is categorized as "Good enough", with a percentage of 45.5%. The decline in infant mortality in the past year illustrates that there have been efforts to improve maternal and newborn health quality through health service programs in each puskesmas in North Sangatta District. However, due to uneven implementation, the implementation does not run optimally.

Baby and Toddler Nutrition, This indicator is categorized as "Good enough", with 52.1%. Although health activities to improve nutrition and toddlers have been carried out, there are still toddlers who experience malnutrition and are short in height. In addition, the mother's enthusiasm for checking the child's health condition is still low, either through the puskesmas or posyandu.

Breastfeeding Information Exclusive and the Asian Corner, This indicator is categorized as "Good", with a percentage of 65.4%. The provision of breastfeeding corners has been implemented in several public facilities. In addition, several public facilities also provide separate toilets for men and women. In the health centre, there are many appeals and information on the importance of exclusive breastfeeding through pamphlets and posters.

Access Basic Immunization, this indicator calories "Good enough" with a rating percentage of 60.9%. There has been a decline in immunization rates due to the COVID-19 pandemic. Access to information immunization at the health centre is relatively easy to obtain. There is still a lack of enthusiasm for the community to carry out immunizations at the North Sangatta Health Center and Posyandu around the North Sangatta District.

Availability of Reproductive and Mental Health Service Institutions, This indicator is categorized as "Good enough", with 60.9%. The provision of reproductive and mental consultation has been provided by the Health Service and the Office of Women's Empowerment and Child Protection. At North Sangatta Health Center, routine pap-smears are held and many voices about the dangers of HIV-AIDS through pamphlets. But for implementation, the counselling provided by the Office of Women's Empowerment and Child Protection is no longer running.

Access to Improve the Welfare of Children and Poor Families, This indicator is categorized as "Good enough", with 56.8%. Programs on hands have been executed; however, implementation is not optimal. Due to the lack of data related to program targets and the lack of information dissemination. So that the performance of programs is not evenly distributed.

Household Access to Clean Water, This indicator is categorized as "Very Good", with 85.47%. The availability of clean water in the North Sangatta District is well available. The majority of people have use PDAM. Most people already have water reservoirs. Non-Smoking Area, This indicator is categorized as "Good", with a percentage of 65%. Efforts to provide a smoking area in a few public places have been implemented. It's just that the supervision is still lacking.

Then some of the dominant factors that influence the implementation of child-friendly programs in North Sangatta District; the first is individual. Lack of adequate human resources adequate cause a lack of socialization, training and supervision. So that some programs are uneven and do not touch the targets; the second is technical. One of them is influenced by the availability of implementation guidelines to solve problems related to the development of Child-friendly Districts. Namely, East Kutai^[8] concerning Child-Friendly District Policies and RAD for Child-Friendly Districts of East Kutai 2014-2019. And the third is that resource availability influences a policy's effectiveness and efficiency. In this case, implementing the Child-Friendly District policy is still experiencing problems with the availability of human resources and funds.

With the results of the conclusions above, the following suggestions can be given by the author: Dissemination of Information on the Existence of Child-Friendly District Programs, There is a need for socialization in the community. In the current pandemic conditions, the Office of Women's Empowerment and Child Protection in East Kutai should disseminate through social media and collaborate with online discussion forums that have many followers so that socialization can be conveyed wisely.

Availability of information on Exclusive Breastfeeding and the Breastfeeding Corner, it is recommended that the East Kutai Health Service also broadcast on social media the information on Exclusive Breastfeeding so that mothers can access it. Then the provision of corner asi facilities is not only focused on hospitals and offices. But also in public places such as shopping places and other public service providers. Quantity and Competence of Human Resources, For the Office of Women's Empowerment and Child Protection and the Health Office of East Kutai, it is necessary to recruit competent human resources to become cadres for developing child-friendly district programs so that the implementation of programs can run optimally.

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