The Effect of the Implementation of Makassar Healthy City Based on Capacity Building and Sustainability

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Abstract

BACKGROUND: This research analyzed the effect of the implementation of healthy city in Makassar City based on the aspects of capacity building and program sustainability.

AIM: This research aimed to analyze the implementation of healthy city in Makassar City based on capacity building and program sustainability aspects.

METHODS: The research was conducted qualitatively in which the data were collected through direct interview, observation, and field note. Thirteen people were involved as informants consisting of vice mayor of Makassar, two organizers of the healthy city of Makassar City, one member from the forum of the healthy center of Makassar City, and nine community members from nine sub-districts including Makassar, Mamajang, Mariso, Panakkukang, and others.

RESULTS: The improvement of the capacity needs to even all forum members of healthy city of Makassar at the level of city, sub-district, and sub-village.

CONCLUSION: The improvement of the capacity needs to even all forum members of healthy city of Makassar at the level of city, sub-district, and sub-village.

Introduction

The healthy city program in Indonesia has been implemented well and effectively since the issuance of the Regulation of Ministry of Home Affairs and Ministry of Health of the Republic of Indonesia of 2005 [1], [2], [3], [4], [5], even though the healthy district/city has been implemented earlier before in several districts/cities through difference concept [6]. Healthy city program has a global purpose which is to create a better physical, social, and health environment quality [7], [8], [9], [10], [11]. There are four aspects in Indonesia that are willing to be achieved regarding the implementation of healthy district/city program; those are clean, safe, comfortable, and healthy district/city [6], [1].

Makassar healthy city has obtained [5] achievements of Swasti Shaba Wistara since the implementation of a healthy district/city. This is the highest district/city appreciation given to the community and regional government, which has met the requirement and criteria determined by the central government.

Swasti Shaba Wistara is an appreciation given to healthy district/city at the level of development with the criteria of first, each district/city chooses orders based on the local resource potential, second, each district/city covers 70% of the sub-district, third, each order implements 70% of all activities including the community participation, fourth, each order is integrated with physical, social/cultural, economy, and health aspects, and fifth, each activity chooses several program indicators (physic, socioeconomic, and culture), the indicator of the public movement from indicator provided [12], [1].

Those five orders can be chosen based on the agreement of healthy city forum with the city government. The five orders include [12]:

- a. Settlement, facility, and infrastructure area
- b. Orderly traffic and transportation service facilities area
- c. Healthy mining area
- d. Healthy forest area
- e. Healthy industrial and office complex area
- f. Healthy tourism area
- g. Food and nutrition security
h. Healthy and independent community life
i. Healthy social life.

It is expected that the implementation of healthy city can give effect. The evaluation of the effects encourages the changes of policy evaluation focus from the past to the future and promotes the use of evaluation for policy learning compared to only for control fee. World Bank (2008) in Morton [13] defines that an impact evaluation assesses changes in the well-being of individuals, households, communities, or firms that can be attributed to a particular project, program, or policy. The central impact evaluation question is what would have happened to those receiving the intervention if they had not in fact received the program. Such an effect evaluation was used by the policymaker and developer [14], [15], [16].

The evaluation of the effect of a healthy city had been done by the WHO to five cities in five different countries in the world in 1995–1999. This evaluation was performed to know the implementation result of healthy city regarding the degree of involvement, municipal change, linkages, capacity building, and sustainability [17]. This research refers to this concept because the principles of the implementation of a healthy city are participation, cross-sector cooperation, capacity building, and sustainability which are used in both developing and developed countries [5]. This research aimed to analyze the implementation of healthy city in Makassar City based on the capacity building and program sustainability aspects.

Materials and Methods

This research was done quantitatively in which the data were collected through direct in-depth interview, observation, and field note. The focus was to obtain information regarding the effect of the implementation of healthy city in Makassar City based on capacity building and program sustainability. The research was performed in Makassar City as one of the several cities which have been implemented the healthy city program. The research was done on March 22–May 1, 2019.

This research involved 13 informants consisting of the vice mayor of Makassar City, two members of the coach team of healthy city of Makassar City, a member of city forum of Makassar City, and the community from nine sub-districts including Makassar, Mamajang, Mariso, Tallo, Tamalate, Tamlanrea, Panakkuang, Rappocini, and Wajo Sub-Districts).

The data collected in this research were primary and secondary data. The primary data were obtained through in-depth interview, while the secondary data were obtained from document review at research location, which is the public health office of Makassar City, Regional Development Planning Agency (Bappeda) of Makassar City, and the City Forum of Makassar healthy city involved in the implementation of healthy city in Makassar. The data obtained were analyzed using thematic analysis. The analysis was done right after collecting them to avoid misinterpretation, forgetting the meaning or code in the field note, and forgetting the concept in the context of the situation.

Results and Discussion

Informants' characteristics

This research involved 13 informants consisting of the vice mayor of Makassar City, two members of the coach team of healthy city of Makassar City, a member of city forum of Makassar City, and the community from nine sub-districts including Makassar, Mamajang, Mariso, Tallo, Tamalate, Tamlanrea, Panakkuang, Rappocini, and Wajo Sub-Districts (Table 1).

<table>
<thead>
<tr>
<th>Informants' Code</th>
<th>Gender</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>BR</td>
<td>√</td>
<td>Vice Mayor</td>
</tr>
<tr>
<td>AA</td>
<td>√</td>
<td>Head of Social Division of Bappeda of Makassar City</td>
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<tr>
<td>SK</td>
<td>√</td>
<td>Head of Environmental Health Division of the Public Health Agency of Makassar City</td>
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<tr>
<td>NB</td>
<td>√</td>
<td>Head of Healthy City Forum of Makassar City Sub-District</td>
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<tr>
<td>RW</td>
<td>√</td>
<td>Head of Healthy Sub-District Forum of Makassar Sub-District</td>
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<tr>
<td>IK</td>
<td>√</td>
<td>Head of PMK Section of Mamajang Sub-District</td>
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<tr>
<td>AN</td>
<td>√</td>
<td>Head of PMK Section of Mariso Sub-District</td>
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<tr>
<td>AH</td>
<td>√</td>
<td>Head of PMK Section of Panakkuang Sub-District</td>
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<tr>
<td>HW</td>
<td>√</td>
<td>Head of PMK Section of Rappocini Sub-District</td>
</tr>
<tr>
<td>AP</td>
<td>√</td>
<td>Secretary of Tallo Sub-District</td>
</tr>
<tr>
<td>AM</td>
<td>√</td>
<td>Head of PMK Section of Tamalate Sub-District</td>
</tr>
<tr>
<td>DR</td>
<td>√</td>
<td>Secretary of Health District Forum of Tamalate Sub-District</td>
</tr>
<tr>
<td>AI</td>
<td>√</td>
<td>Head of PMK Section of Wajo Sub-District</td>
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Capacity building

In-depth interview was done with all informants by asking questions regarding the educational or training activities concerning the healthy city program in Makassar City, obtaining the following information:

“Yes, there was. The training activities were usually held by the members of Family Welfare Movement (PKK) in Mariso Sub-District. There was also training which was held by the public health office of the city ad province to access the healthy city program.” (AN, Mariso Sub-District, April 2019).
“Yes, there was. It was usually in the form of socialization about health, BULO, and Healthy Hallway. There was also training about 3R of waste management. Furthermore, mothers’ gathering was also held at the level of sub-village to sub-district in every month. There was also gymnastics at the level of sub-district at the level of sub-village to sub-district in every third week. Finally, there was also innovation named cleans with, where there was supervision unit officer if there was someone who throws waste to the environment of Panakkukang Sub-District and it will be fined for 50 million.” (AH, Panakkukang Sub-District, April 2019).

“There was from the Municipal Public Health Office, Bappeda and Persakmi. Socialization was held about nutritional counseling, eye examination training in Kodingareng Island, health promotional officer training, and healthy city training conducted by Persakmi." (SK, Public Health Office of Makassar, April 2019).

Informants said that training and socialization regarding the healthy city in Makassar City were often held and participated by the community and various related offices. The training was usually conducted by the Public Health Office, Bappeda and Persakmi of Makassar City. This is supported by the opinion given by the head of socialization and culture division of Bappeda of Makassar City and the head of healthy city forum of Makassar City as followed:

“It was often held. The first one is about how we fill the form regarding the indicator of the healthy city report. It was taught by the public health office in the form of workshops or trainings. One of the others was healthy city training held by Persakmi, which is also a cooperation with people from the public health office.” (AA, Bappeda of Makassar, April 2019).

“There were so many trainings held regarding the healthy city in Makassar. I also often became the speaker in those activities. There were healthy cities training and verification system of healthy district held by Persakmi in February 2019, there was also national healthy city training in September 2018, and if I am not mistaken, the newest one was the healthy city training in Lombok.” (NB, Head of KKS Forum Makassar, April 2019).

Based on all information obtained from the informants interviewed, it was known that various training and socialization regarding the healthy city program in Makassar have been conducted. The activities that often held were healthy city training by Persakmi then waste management training, nutrition counseling, and others.

Milen defined the improvement of capacity as a process where individual, group, organization, institution, and community improve their ability to (a) perform the implementation of main duty and core functions, solve problem, formulate, and achieve the target established, and (b) understand and meet the needs of development in a wider context of sustainability [18]. Capacity building refers to the process where individual, group, institution, and community develop their individual or collective ability to perform their function, solve problem, and achieve their targets independently [18].

Consideration that must be taken care in capacity building is in terms of the capacity of institution and individual. Based on the research result, there were efforts regarding the capacity building in the forms of training and socialization about healthy city. The training was usually held by the Public Health Office of Makassar, Bappeda of Makassar City, and Persakmi. Activities that often held were healthy city training by Persakmi and training concerning waste management, nutrition counseling, and others.

However, the training and socialization sometimes were not effective. This is because the training and socialization held only based on the coordinators in the healthy city itself. So that training which is not only based on the coordinator but also on the people involved in the implementation of a healthy city needs to be done.

Sustainability

In-depth interview was conducted to all informants involved in this research, obtaining information regarding the sustainability aspect. In this case, the questions raised were related to the sustainability of the healthy city program in Makassar City and factors affecting the program sustainability as follows:

“I think it is already good proven by the community has started to change their lifestyle. In addition, Makassar also has obtained 4 highest appreciations for healthy city. Thus, it is expected that this year, we will get that again.” (IK, Mamajang Sub-District, April 2019).

“It is expected that the continuity is sustainable. So far, it is very good and we targeted that we will get the fifth Swasti Saba Wistara appreciation.” (AP, Tallo Sub-District, April 2019).

“The sustainability is already good because we have received 4 Wistara appreciations for the healthy city. It is expected that this year we will get the fifth one.” (HW, Rappocini Sub-District, April 2019).

“The sustainability is very good seen from the appreciation Makassar City received related to healthy city.” (AI, Wajo Sub-District, April 2019).

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“The sustainability is very good seen from the appreciation Makassar City received related to healthy city.” (AI, Wajo Sub-District, April 2019).

“I think it is already good proven by the appreciation received by the government of Makassar City in the category of Wistara for four times. There were also Padapa and Wiwerda that were received for so many times. Furthermore, there will also be a further assessment for healthy city, and Makassar
targeted to receive the fifth Wistara appreciation.” (AH, Panakkukang Sub-District, April 2019).

The informants interviewed stated that the sustainability of healthy city program has been implemented well since the implementation of the program in 2007. The highest appreciation received was Wistara Appreciation that was received for four times. This information was delivered by the Head of Healthy City Forum of Makassar City and the Head of Public Health Office of Makassar City:

“For me, so far, the sustainability of the healthy city program in Makassar City is already good. Since its implementation in 2007, Makassar has been consistently changing to achieve the indicators of healthy city. It is expected to be continuously done in the future, regardless of whoever the leader is. The sustainability level is seen based on the appreciation received in every two years starting from Padapa, Wiwerda, to Wistara which already received for four times. We hope and optimistic that we will get the fifth one in the future.” (SK, Public Health Office, Makassar, April 2019).

Furthermore, several information regarding the factors determining the sustainability of healthy city program in Makassar was also obtained as follow:

“Participation from both community and government is the most important thing. It is useless to make a movement if the government does not take any role in the implementation and vice versa. In Makassar, the government has involved the community to continuously cooperate and participate actively in maintaining the implementation of this program.” (SR, Vice Mayor of Makassar, April 2019).

“First, You (Inayyah) need to be involved. All party must take a role, at least by maintaining the city to be clean, healthy, and safe by not littering, do not smoke in public place, and driving orderly.” (AA, Bappeda of Makassar, April 2019).

“The main determining factor is the government, particularly the mayor. Coordination and involvement of all SKPD in Makassar City are also needed because there were seven orders and all sectors must be participated.” (SK, Public Health Office of Makassar, April 2019).

Based on the information above, it is known that the main factor of the sustainability of the healthy city program in Makassar is active involvement and participation from the government, community, offices, and all related stakeholders. This is in line with the information delivered by the Head of Healthy City forum of Makassar City:

“Good involvement and commitment from the government, community, KKS forum, all offices, and all stakeholders were the main factors. In addition, strong cooperation and willingness are also needed.” (NB, Head of KKS Forum Makassar, April 2019).

Information above proved that in addition to participation and involvement, commitment and willingness are also needed in implementing the healthy city program. The commitment and involvement from the healthy city forum of Makassar City are also really needed.

On the other hand, the following information received from the informants in sub-district level:

“At the level of sub-district, we expected that the municipal government will provide funds to conduct activities regarding healthy city because it is difficult for us to coordinate if the party above us are pointing at each other.” (IK, Mamajang Sub-District, April 2019).

“The most important thing is budget must be provided and slums must be cleaned by the municipal government.” (AN, Mariso Sub-District, April 2019).

“Government and community commitment need to be maintained to support the sustainability of healthy city program. Financial support is also expected.” (AP, Tallo Sub-District, April 2019).

“Leader becomes the benchmark. If he has high commitment toward healthy city program implementation, then below him will follow automatically. In addition, financial issue needs to be repaired. It is expected that the municipal government will provide budget.” (DR, Tamalate Sub-District, April 2019).

“As the organizer of the healthy city program, public health office must be more active. Financial aspect is the most important thing because not all community wants it independently and cannot be forced to participate.” (AI, Wajo Sub-District, April 2019).

Recommendation

The level of involvement is one of the impacts in the implementation of a healthy city consisting of two indicators. An evaluation of the two indicators gave satisfactory results. The involvement of stakeholders in this matter is that women have been quite active and participatory. Besides that, the political commitment of the Makassar City government itself has succeeded in bringing satisfactory results to the development of the city. However, it is recommended for each SKPD at the city government level to further improve coordination with each other, because there are still overlapping tasks between each SKPD.

References


