



Conference Full Papers

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On

*“Information, Open Government,
Democratic Governance,
and Public Administration”*

10-11 August, 2016 (Wednesday & Thursday)
Thammasat University, Tha Prachan Campus,
Bangkok, Thailand



Preface

It was seven years ago when University of Muhammadiyah Yogyakarta (UMY) and our Faculty of Political Science, Thammasat University first started a small collaboration, initiated by Associate Professor Dr. Achmad Nurmandi, who at that time was Dean of Faculty of Political Science, UMY. We first had an opportunity to welcome colleagues and students from UMY to present their research of interests at Thammasat University organized by Associate Professor Soparat Jarusombat in collaboration with Associate Professor Dr. Nurmandi in year 2010.

The following year, the First International Conference on Public Organization (ICONPO) was organized by UMY in Indonesia, then in Korea, and back to Bali, Indonesia, before moving to Malaysia in 2014. The fifth ICONPO was organized in Davao City, Philippines last year.

This year, it is my great pleasure and honor to host this event at Thammasat University where it all started. The theme is set on “Information, Open Government, Democratic Governance, and Public Administration” for two days during August 10-11, 2016. There are about 189 proposals submitted this year. The participants come from various countries, namely Philippines (84), Indonesia (80), Malaysia (3), United Kingdom (2), Russia (1), Nigeria (1), China (1) and Thailand (17). All papers were blindly reviewed and will be selected for publication in Journal of Government and Politics. Some would be selected for book chapters. We have about 34 panels in all with topics covering every aspects and issues in Public Administration from Social Media, Network Governance and Open Government to Politics, Conflict, and Corruption in Public Affairs.

As a host of this special academic event, I would like to thank the Executive Committee of Asia Pacific Society of Public Affairs (APSPA) for entrusting us with the honorable mission of organizing this international academic conference this year. My great appreciations also go to all partners and supporters, namely Faculty of Political Science and Law, Burapha University, Faculty of Political Science and Public Administration, Chiang Mai University, Faculty of Humanities and Social Science, Khon Kaen University, Human Resources Institute, Thammasat University, College of Politics and Governance, Mahasarakham University, Sripatum University, EPA Foundation and Alumni, Thammasat University, and Faculty of Political Science, Thammasat University. Special thanks go to all staff for their time, tireless efforts, and dedications in organizing this Conference.

Last, but not least, I wish everyone all the bests and fruitful discussions. Till we meet again next year in Jakarta, Indonesia. Thank you.



Amporn Tamronglak
Your Host,
Professor of Public Administration Faculty of Political Science,
Thammasat University, Tha Prachan Campus
August 14, 2016

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2. Information Technology and Innovation Public Governance
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4. Culture, Migration, and Community in Public Affairs
5. Communication Technology and Electoral Administration
6. Current Issues in Public Administration
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9. Politics, Conflict, and Corruption in Public Affairs
10. Evaluation, Effect, and Influence in Public Issues
11. E-Government, Transparency, and Transformation
12. Public Administration Issues
13. Good Governance and Leadership
14. Public Administration and Political Power
15. Issues in Public Administration
16. New Challenges and Global Issues in Public Affairs I
17. New Challenges and Global Issues in Public Affairs II
18. New Challenges for Disaster Management

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(Full papers are in the conference's thumb drive that follow each session)

19. Leadership and Human Resource Development
20. Fiscal, Finance, and Budgetary Administration
21. Current Issues in Public Policy
22. Public Policy and Policy Implementation

23. Policy Enforcement and Health Policy Issues	
24. Organizational Effectiveness and Human Resource Management	
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The Struggle of Midwife Temporary Contract toward the Government Policy in Indonesia

Mia Rosmiati¹, Eko Priyo Purnomo²

ABSTRACT

This paper aims to describe to what extent the effort of Midwife Temporary Contract (MTC) in Indonesia can influence the government policy. The background of this paper is about there is a gap between the expectations and capabilities of MTC and government policy. This study is an explanatory descriptive, describing the efforts of MTC in Indonesia in influencing government policy on the demands removal of Midwife Temporary Contract into the Civil Servant. Using secondary data, which is data obtained from books and articles on the internet. There are several process already done to verify the proportions of some relationships aspect among instruments, objectives, and the policy process. Data collection techniques from the research literature or references sourced from books and the internet that are relevant to this paper. Meanwhile the technique of data analysis in this study is a qualitative technique by analyzing secondary data and then using that theory can be used to explain the case being studied. Relative Deprivation theory proposed by Ted Robert Gurr in his book *Why Men Rebel* became the theoretical foundation of the focus in this paper. Relative deprivation theory can be simply explained that the social upheaval appears and takes the form of socio-political movements when there is a gap between the expectations and the capabilities within the community.

Keywords—Midwife Temporary Contract, Interest Group, Government's Policy, Civil Servant.

¹ Student of Bachelor Degree at International Program of Governmental Studies in Universitas Muhammadiyah Yogyakarta, Indonesia miarosmia8@gmail.com

² Senior Lecturer of International Program of Governmental Studies in Universitas Muhammadiyah Yogyakarta, Indonesia eko@umy.ac.id

1. Introduction

Distribution of midwives in Indonesia has not evenly spread becoming the background of government's regulation to put the midwife in the village. Since 1989 this regulation exist in order to improve health care in Indonesia, also to decrease Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR). Based on data of Ministry of State for Administrative and Bureaucracy Reform (MENPANRB) ,there are 44.108 Midwife Temporary Contract are scattered in almost rural areas in Indonesia. (www.menpan.go.id accessed on August 3rd,2016).

On the other hand, there are several problems of implementation this regulation such as; they should work in the village which has difficult demographic. Therefore, the facilities of the Midwife that has been given by the local government its not effective and less minimum. For example, they solemnly struggling reach the place they are working at and the safety has not established well. Moreover, there is a problem with their occupation, where their salary often bonded by local government. For example the amount salary of MTC is Rp. 1.700.000, but they just received Rp. 1.452.450.,and the salary always being rejected lately. They should get the occupation in the earlier of month which due on 2th.

In addition, the status of the midwife still Non-Permanent Employee or we call it Midwife Temporary Contract (MTC). Meanwhile, there is a regulation; **Government Regulation (PP) No.98 year 2000 junto PP No.11 in 2002 about the procurement of civil servants, that medical personnel in 35years old should appoint as civil servant. Meanwhile,**

for the age of 35 years old above should appointed as government employees in the agreement (P3K). It's means that the government can not ensure the safety and prosperity of the midwife itself. There is a gap between the expectations and the capabilities of MTC and government regulation became an interesting issue. It became necessary to know how far their effort to improve their life as a midwife, especially Midwife Temporary Contract to change the regulation on placement village midwife in Indonesia. This research study by the title "The Struggle of Midwife Temporary Contract toward the Government Regulation on Placement Village Midwife in Indonesia"

2. Objective of the Study

To explain the efforts made by the Midwife Temporary Contract (MTC) who works in the village to influence the government regulation.

3. Research Methodology

This study is an explanatory descriptive, describing the efforts of MTC in Indonesia in influencing government regulation on the demands removal of Midwife Temporary Contract into the Civil Servant. Using secondary data, which is data obtained from books and articles on the internet. There are several processes already done to verify the proportions of some relationships aspect among instruments, objectives, and the regulation process. Data collection techniques from the research literature or references sourced from books and the internet that are relevant to this paper.

Meanwhile the technique of data analysis in this study is a qualitative technique by analyzing secondary data and then using that theory can be used to explain the case being studied. Relative Deprivation theory proposed by Ted Robert Gurr in his book *Why Men Rebel* became the theoretical foundation of the focus in this paper. Relative deprivation theory can be simply explained that the social upheaval appears and takes the form of socio-political movements when there is a gap between the expectations and the capabilities within the community.

4. Discussion

4.1 Government Regulation on Placement Village Midwife

Since 1989 the government's regulation of the Indonesian Ministry of Health (MOH) exist to put the midwife in the villages, in order to decrease the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) (Handbook Midwife Coordinator, 2010). Based on the data of Ministry of State for Administrative and Bureaucracy Reform (MENPANRB), until 2016 had approximately 44.108 midwives who works in the village are scattered in almost all parts of Indonesia (www.menpan.go.id). The purpose of this regulation as the effort of the government to improve the health services especially in maternal, neonatal, infant and toddler.

Furthermore, Indonesia was became the highest one in MMR and IMR of several countries in the world. According to Indonesia Demographic Health Survey (IDHS) in 2012, the Maternal Mortality rate (MMR) in

Indonesia reached 359/100,000 live births and the Infant mortality rate (IMR) was 32/1,000 live births. In addition, the data received by the Ministry of Health shows that the number of women who die from pregnancy and child birth in 2013 was as many as 5019 people. Meanwhile, the number of infants who died in Indonesia based on the estimated IDHS 2012 reached 160,681 children.

In order to decrease the MMR and IMR in Indonesia, the Indonesian Ministry of Health (MOH) puts midwife in the village. According to Circular Director General Constructor of Public Health (Surat Edaran Jendral Pembina Kesehatan Masyarakat) No.429/Binkesmas/Dj.III/1990 dated March 29, 1999 about the placement of midwife in the village.

4.2 Issues Midwife Temporary Contract (MTC) in Indonesia

There are several demands of MTC by using the articulation of public interest channels or we call it intervention. They were writing a petition on the website www.change.org. Based on www.change.org there are 10 systematic problems faced by MTC in Indonesia :

1. The period of work already 9 years. And the contract extension is 10th years, but in the report of government still zero (0) year.
2. Every contract extension, they often cheated by the Health Service.
3. The right to maternity leaves just 40 working days (Permenkes No. 7 in 2013). Many midwives who experienced miscarriage, due to health conditions that are not prime, natural or refer the patient sat workplace accidents. Entitlement is the worst in the world.

4. Most studies diploma I. But the minimum required to graduate Diploma III (Law No.36 in 2014 on Workers Health and Law No.5 in 2014 on State Civil Apparatus).
 5. Do not given the opportunity to pursue higher education. Because they have to stay at the work site 24 hours a day. Village Polyclinic (Polindes), Puskesmas (sub).
 6. Although higher education up to degree S3, still labeled Non-Permanent Employee and will have no effecton improving the group, careers and salaries.
 7. About salary: *First*, the salary of the state budget that is not air-slip / receipt salary. *Second*, the account transfer always change (PosGiro, now through Bank Mandiri BRI). *Third*, the salary criteria Ordinary village, there are two different salary SK. From the Ministry of Health and the health office. The figure Rp. 1.700.000, -. The other is Rp. 1.452.450 million, - *Fourth*, the salary is given every second month running (different from the words of Health Minister Nila F Moeloek, 5 November 2014), and in fact up to date 10 of the current month, then usually accepted. And many whose salary postponed, even not paid many months. This happened in Karawang, OKU Sumsel, Bombana Sultra, Deli Serdang, North Sumatra and Lebak Banten. *Fifth*, the salary under the terms of taxable (Village Fair) made TIN, filling SPT. Sixth, indicated bumping rules with the income tax cuts Rp. 221 638, - / month / person, salaries under the provisions of the taxable (Law No. 36/2008 on Income Tax), in the village of Common Criteria. *Seventh*, the tax deduction is not in accordance with the amount of monthly salary of Rp. 1.45245 million. *Eighth*, since five years of no pay increases (Minister of Health Decision No. 1307 / Menkes / SK / IX / 2010 on Principal Income and Special Incentive Doctor Employees not fixed and Midwife Employees Variable, in 2010). *Ninth*, do not get 'thirteenth wages' as civil servants. *Tenth*, do not get severance, or even retirement as civil servants.
 8. The cost of labor claims since Jampersal and BPJS often not paid. Often late for months
 9. Referring patients in remote rural areas and very remote still much to walk away on a stretcher, traditional boats, or pick up. And it is not uncommon that eventually gave birth in the streets. Rescuing two only, while risking her life village midwife.
 10. The condition of the health infrastructure is still low. Frequent electricity out ages, crimes-prone, face difficult field conditions, mountainous areas, coastal, border, and prone to conflict. Discrimination work load between Non-Permanent Employee village midwife and Civil Servant reflected from the above problems.
- According to the petition above we can get several points of their problems while they work as village midwife in Indonesia;
- There is a gap between the expectations and capabilities of MTC (Midwife Temporary Contract) and government regulation. **Government Regulation (PP) No.98 year 2000 junto PP No.11 in 2002 about the procurement of civil servants, that medical personnel in 35years old should appoint as civil servant. Meanwhile, for the age of 35 years old above should appointed as government employees in the agreement (P3K).** But they didn't appointed yet, especially for the age 35y.o.

- There is a problem with their occupation, where their salary often bonded by local government. For example the amount salary of MTC is Rp. 1.700.000, but they just received Rp. 1.452.450.
- Therefore, the salary always being rejected lately. They should get the occupation in the earlier of month which due on 2th.
- The facilities of the Midwife that has been given by the local government its not effective and less minimum. For example, they solemnly struggling reach the place they are working at. The safety has not established well.

Based on the problems faced by MTC Indonesia that can be studied with the theory of relative deprivation. Relative deprivation theory can be simply explained that the social upheaval appears and takes the form of social movement politics when there is a gap between expectation value (value expectations) and the ability (value capabilities) within the community (Robert Ted Gurr, 1970). In this theory-which emphasized the gap between *das sein* and *dassollen* and in turn will bring on a feeling of 'seizure'. It deprived is classified as a value or a fundamental requirement for the community. It starts from the value of wealth, power, and interpersonal (Munafrizal Manan, 2005) where the expectation of MTC to get the secure of the prosperity and safety as long as they serve the country in the field of health care. Negative psychological experienced by MTC as long as they work in the village with the difficult demographic and the facilities in the village has not adequate enough.

In addition, the problem of wages received by the Midwife Temporary Contract (MTC) has not

enough for fulfill their needs. This relates to that presented by Thomas Aquinas(in Faturochman, 1998:4) that the wages received by workers should be able to meet their needs so that they can survive in society.

5. Demonstration

According to Etheridge and Howard Handelman defined interest group is an organization that seeks to influence public regulation in an important area for members. (Marcus Ethridge and Howard Hadelman, 1994.Page150).In this case, the Midwife Temporary Contract in Indonesia created an interest group known as Forum Midwife Temporary Contract (bahasa:Forum Bidan Pegawai Tidak Tetap). This group aims to influence government regulation to ensure the welfare and safety of MTC, such as appointment of the Temporary Contract into Civil Servant.

Demonstration by Forum MTC in Indonesia and cooperation with the Confederation of Indonesian Trade Union Alliance (CITUA) is the effort to influence government regulation. According to Gabriel A. Almond and G.Bingham Powell in their book, *Comparative Politics Today: A World View*(Gabriel A. Almond and G.Bingham Powel.1992. Page 62-65),mentions some ways of interest group to articulate their interest, one of them is demonstration. It is motivated by the disappointment of the society of government regulation on their devotion to the country. According to Robin William(in Faturochman, 1998:6) said that disappointment caused there is no realization of their hope(desire), will become the social protest.

On September 14, 2015 the demonstrations has occurred on Street Medan Merdeka Barat, Central Jakarta conducted by thousands of midwives who are members of the Forum MTC in Indonesia. As stated by the Chairman of the Forum MTC in Indonesia Lilik Dian Ekasari:

“There are 10 thousand midwives, who resigned today are thousands. Our target is to the Palace and the Office Ministry of State Administrative and Bureaucracy Reform(Kemenpan-RB)”(www.KendariNews.com , accessed on 29th November 2015)

In this demonstration led by Lilik Dian Ekasari demanded the government to immediately to appoint the Midwife Temporary Contract into the Civil servant.

"Now is the time of human resources management system reform , especially midwife who was served since 2005 to get the right job security guaranteed by the state," (www.KedariNews.com , accessed on 29th November 2015)

Moreover, in this demonstration the MTC demanded of their rights. As quoted from sources <http://news.okezone.com/read/2015/09/28/338/1221896/lima-tuntutan-bidan-kepada-jokowi> as follows :

1. President Jokowi (this is your midwife) save the village as a permanent employee of Non-Permanent Employee midwife.
2. Publish decree about Midwife Temporary Contract to appointas a permanent employee.
3. Stop the appointment of the non-permanent employee midwife.
4. The State must ensure the welfare and safety of the midwife who works in the

village, because village need a midwife.

5. Budget (APBN) 2016 make sure that will be prepared and ensured to appoint the Midwife Temporary Contract to be the Civil Servant.

Lilik Dian Ekasari added that many villages are still needs the midwife, while the midwife on duty just appointed as contract staff. By appointment of MTC become Civil Servant can improve public health services in Indonesia.

“To appoint a midwife to be a civil servant is a solution to fulfill the necessary of the village itself. This is an essential part of the strategic elements of national security in the field of health,”(www.KendariNews.com accessed on 29th November 2015)

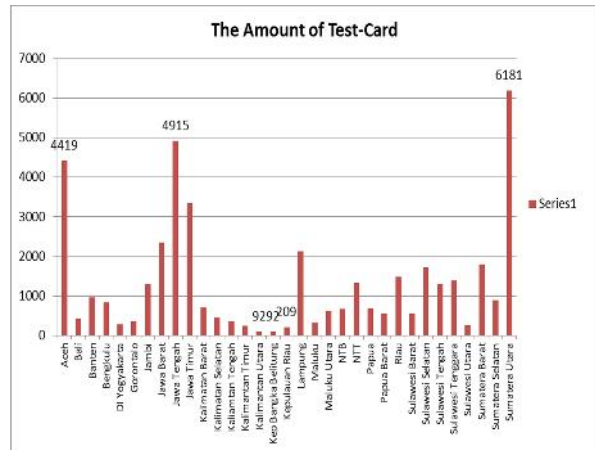
6. Government’s Response towards The Village Midwife Demand

The efforts by the Midwife Temporary Contract (MTC) in Indonesia to influence government regulation has received a positive response from regulation makers. Demonstrations conducted by a midwife of Forum MTC in Indonesia and cooperation with CITUA(Confederation of Indonesian Trade Union Alliance) received a positive response. Conducted a very effective way of making a petition at *change.org* and perform demonstrations continue, proved on 28 September 2015 Ministry of State Administrative and Bureaucracy Reform (MENPANRB) will appoint 16,000 MTC becomes Civil Servant. As reported by (MENPANRB) on its official website.

"In principle, I can accept the aspiration for considering the removal of 16,000, MTC" (www.menpan.go.id, accessed on 29th November 2015)

According to yuddy (the Chairman of MENPANRB 2015), consideration to appoint the MTC become a civil servant because it meets three things. Therefore, they have the Decree of the **Government Regulation (PP) No.98 year 2000** junto PP No.11 in 2002 about the procurement of civil servants, that medical personnel in 35years old should appoint as civil servant. Meanwhile, for the age of 35 years old above should appointed as **government employees in the agreement (P3K)**. Moreover, the struggle of midwife who work 24hours a day, without thinking about the small salary and fight as well as spearhead the implementation of government policies regarding Card Healthy Indonesia (KIS).

Based on data of Ministry of State Administrative and Bureaucracy Reform (MENPANRB) there are 43.268 Midwife Temporary Contract who has already follow the general skill test (TKD) as requirement to appoint as Civil Servant. Its according to MTC who has already registered on June 1th, 2016, and has printed their test card. There are 840 people who are not follow this test, the amount of the original 44.108



source: <http://www.menpan.go.id/berita-terkini/5318-840-bidan-dokter-ptt-tidak-ikut-tes-cpns>

Of that number, most participants from Sumatera Utara i.e 6,181 people. While the two provinces namely Kalimantan Utara and Bangka Belitung, participants are each only 92 people. Another area that has Midwife Temporary Contract with large numbers is Jawa Tengah (4.915), Aceh (4.419), Jawa Timur (3.350), Jawa Barat (2.350) and Lampung (2.122). For other regions, the number of participants under the 2000 people. (www.menpan.go.id accessed on August 3rd, 2016)

For the result of the Civil Servant test will be announced on August 12th, 2016. (www.jpnn.com accessed on August 3rd, 2016)

7. Conclusion

The efforts that have been made by the Midwife Temporary Contract (MTC) through interventions and demonstrations can be an example of other social interest groups. In addition, when we trying to articulate our interest, we should pay attention to ethics, effectiveness and efficiency of our way in order to achieve our goals.

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