



Toward Innovative Governance: Developing Policy Instrument for an Effective Management of Nursing Home in Java, Indonesia

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Abstract

Elderly people are those who have reached the age of sixty years and above. Based on data from the Central Statistics Agency (BPS) in 2021, the number of elderly in Indonesia is 29.3 million, which makes up to 10.82 percent of the total population. This number will continue to increase, leading to one of the world's most emerging problems, namely aging society. The issue of elderly people is an issue that must be paid attention to. Facts show that many elderly still have to work to meet their living needs. The increasing need for formal elder care provisions puts intensive pressure on providing elderly services and paying attention to social protection systems and service delivery in government-owned nursing homes. This research presents and develops what policy instruments are used in effective nursing home management in East Java. Using qualitative observation and in-depth interviews, this research aims to determine what instruments the Provincial Government uses to manage nursing homes in East Java and what policy instruments can be developed to effectively manage nursing homes in East Java, Indonesia. This research finds that the sort of policy instruments employed by the Government to manage nursing homes effectively encompass family and community, voluntary organization, regulations, information and appeal, and subsidies—next is the development of policy instruments that should be carried out in a public enterprise.

Keywords: Policy Instruments, Policy Instrument Development, Nursing Homes, Elderly, Elderly Welfare

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Article history: Received, 22 February 2024; Revised, 27 April 2024; Accepted, 3 May 2024.

To cite this article: Asmorowati, S., Supeno, E., Schubert, V., Nurfillaili, I. M., Nasution, P. I., & Nikmah, S. (2024). Toward Innovative Governance: Developing Policy Instrument for Effective Management of Nursing Home in East Java. *JPSI (Journal of Public Sector Innovations)*, 8(2), 61–67. <https://doi.org/https://doi.org/10.26740/jpsi.v8n2.p61-67>

INTRODUCTION

From a broader perspective, the population of elderly is predominantly spread in low- and middle-income countries (WHO, 2022), with almost 60% concentrated in the Asian continent (APRU, 2022). Indonesia, a densely populated country in Southeast Asia, covers 40 percent of the total population in the Southeast Asia region and 38 percent of the elderly aging society in the Southeast Asia region (UNFPA 2014: 51). This demographic trend underscores the urgent need for attention and support for elderly people in Indonesia.

Based on Law Number 13 of 1998 concerning the Welfare of the Elderly, the elderly population is defined as those who have reached the age of 60 (sixty) years and above. According to data from the Central Statistics Agency (BPS) in 2021, the number of elderly in Indonesia is 29.3 million, constituting 10.82 percent of the total population. As the workforce begins to shrink and the number of elderly people grows, Indonesia is likely to face new challenges in terms of fiscal sustainability and policy design (Kudrna et al., 2022: 7). Elderly people also face various problems such as health, discrimination, as well as economic issues. BPS states that 4 out of 5 elderly still work in the informal sector to make ends meet. With demographic shifts, mobility (especially rural-urban migration), and changes in kinship patterns and values, there are complex and interrelated factors that shape the experience of aging in countries like Indonesia.

Based on BPS (2021), elderly in low economic conditions make up 43.29% of the population, whereas these elderly live in the bottom 40% of the expenditure group. Furthermore, 37.40% of elderly live in the middle 40% expenditure group, and 19.31% live in the top 20% expenditure group (BPS, 2021). It can be said that approximately 80% of elderly have vulnerable economic conditions.

In addition, the most common physical vulnerabilities in the elderly are non-communicable diseases, such as diabetes, high blood pressure and heart disease, which are caused by lack of physical activity (Basrowi et al., 2021; Juanita et al., 2022; Noda et al., 2021). Furthermore, there is increasing concern about the mental health problems experienced by many elderly, especially depression, insomnia, stress, and/or fatigue (Basrowi et al., 2021; Hanum et al., 2018). These mental health problems that require special care needs are most likely beyond their capabilities. More and more families may be unable to take good care of their elders, and the health problems are worse for the elderly who live in their own homes without proper care (Kadar et al., 2013).

The issue of elderly is complex, so it requires a multi-faceted approach. The fact that many elderly still have to work to meet their living needs has raised the question of who should be responsible for the welfare of elderly. The government has various programs for elderly. Even so, responsibility for elderly not only lies in the hands of the government but also the family and community.

Many cases of physical and psychological violence against the elderly do not surface, such as the neglect of elderly. Fostering a senior-friendly environment by creating integrated and responsive health systems as well as services while ensuring access to long-term care for seniors is just one aspect of the solution.

Vibriyanti's research (2019) shows that the WHO issued guidelines for elderly-friendly cities (Aged Friendly Cities Guideline) to respond to two demographic phenomena, including population aging and high levels of urbanization. Apart from maintaining their health, elderly need a physical and social environment that considers their characteristics and needs and maintains their capacity and their type of activities.

Nurmalasari (2010) stated that mental illness, especially depression and anxiety, is an essential problem for those aged 65 years and over. The prevalence rate for adults with mental illness in the United States is 12.3% living in the community, 70% in-home care, and 50% in acute care in hospitals.

There is a compelling need to reframe the dominant cultural mindset that links elderly care with kinship. When seniors are in nursing homes, there is often an extension of the same logic: that this is the last refuge for the elderly because their family ties are broken. Their families are deemed unable or unwilling to care. Norman (2020) stated that what usually happens in most societies, but in the case of the elderly in Indonesia, is that the need for formal care is considered an indisputable fact that they are vulnerable, abandoned, or neglected. In addition, a demographic dividend, which is essentially a paradigm of economic opportunity where a large proportion of the population is of working age, and elderly in nursing homes do not correspond to this productive potential. It is necessary to know the policy instruments the East Java Provincial Government uses to manage nursing homes. Policy instruments are specific tools the government uses to achieve policy goals (Cejudo & Michel, 2021).

Efforts are conducted to achieve maximum or optimal conditions for elderly through the services provided. These services are not only offered by the government and the community, but as a primary group, the community plays a significant and invaluable role in

meeting community needs. Their involvement is crucial in the overall care of the elderly. However, the increasing need for formal aged care services places significant pressure on providing services and attention to social protection systems and service delivery in government-run nursing homes, highlighting the weight of the issue.

In this research, it is crucial to understand what policy instruments are used in effective nursing home management in East Java and to develop new ones. The urgency and importance of this research lie in the pressing need for effective policy instruments to manage nursing homes in East Java. This research aims to identify the instruments the East Java Provincial Government uses and to develop new ones that can effectively manage nursing homes in East Java. The need for these instruments is immediate and cannot be overstated.

Policy Instrument

Policy instruments are specific tools used by the government to achieve policy objectives. Sometimes, these instruments are combined to address problems requiring multiple interventions. When more than one instrument is used to achieve policy objectives, the literature refers to this set of instruments as “policy packages” (Cejudo & Michel, 2021).

According to Howlett & Ramesh (1995: 80), policy instruments are policy tools that are modified in real time to be put into practice. Policy instruments are becoming increasingly influenced by “new” modes of governance, characterized by a less dominant role for the state and the development of more cooperation-based relationships between governments and non-state actors (Ansell & Torfing, 2016). Peters, K.M., & Nispen (1998:17) explain that an instrument is defined as a tool. Still, the success of using this instrument depends on the implementers, so the instrument will be a variable that determines the working of the implementation system. Policy instruments take into account the public interest and include a series of specific measures to promote social development.

Policy designers need to incorporate into their thinking the precise processes through which policy decisions vary widely by jurisdiction and sector and reflect the vast differences and nuances between different forms of government (Howlett et al., 2009). Howlett & Ramesh (1995) explained that three types of policy instruments can be used, namely voluntary instruments (family and community, voluntary organizations, markets), compulsory instruments (regulations, public enterprises, direct provisions), and mixed instruments (information and exhortation, subsidies, auction of property, tax and

user chargers mixed instrument) which can be seen in the following chart:

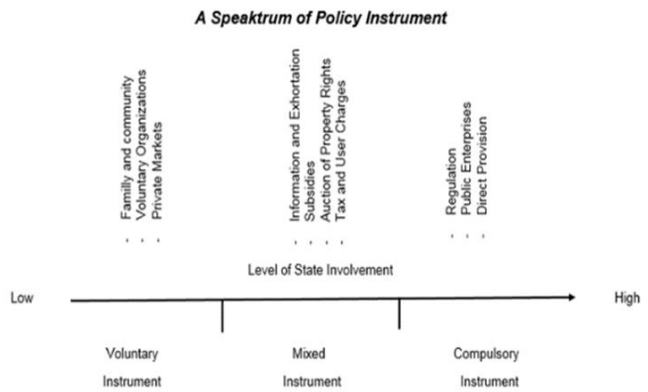


Figure 1. Spectrum of Policy Instruments

Source: M. R. Anggara et al., (2022)

In addition, Capano and Lippi (2017) pointed out various factors, including economic stability, stakeholders’ ideology, technical preferences, or political stance, driving how the policy instruments will be enacted, and no single factor acts as the only determinant. Also, based on historical and socio-organizational institutionalism aspects, policy instruments can be considered either a set of social and political values or lock-in effects contributing towards the construction of reality.

Putting Nursing Homes in the Social Protection System for the Elderly

Various forms of social protection are provided, the general essence of which is to protect against economic and health vulnerability (Rahayu Kusumastuti et al., 2018), and includes mention of elderly—non-financial protection in the form of health services and long-term care. Indonesian policy regarding the welfare of elderly, as explained by Noda et al. (2021), incorporates a non-financial Social Protection System (SPS) in the form of 'Long Term Elderly Care' (LTEC) in nursing homes.

Given the increasing number of elderly as a proportion of the total population, the need for various types of elderly care provisions is increasing, including long-term care (Chu & Chi, 2008; Sumini et al., 2020). Usually, elderly in government-run nursing homes are considered abandoned, neglected, or have no place to live, so nursing homes are the only solution (Do-Le & Raharjo, 2002).

METHODS

This research utilizes a descriptive qualitative method. Descriptive qualitative methods were used to obtain in-depth information on developing policy instruments that can be implemented in services for elderly at Tresna Werdha Social Services in Blitar and Bondowoso Regencies. This study is expected to explore or understand a phenomenon regarding the development of policy instruments that can be used to provide services to elderly.

The location of the research was carried out in Blitar, Bondowoso, and Banyuwangi districts with a target of 30 elderly group informants, namely ten elderly group informants in Blitar District, ten elderly group informants in Bondowoso Regency, and ten elderly group informants in Bondowoso District. Banyuwangi. The technique for determining informants uses a purposive technique, namely determining informants by considering the party as the party who can explain the problem to be studied. Furthermore, data collection in this research was carried out in several stages, namely: 1) Observation, carried out by researchers by going directly to the field to make observations on activities and behavior or problems to be studied at a predetermined location; 2) Interviews, namely data collection by interviewing all informants, either through open interviews or through focus group interviews; 3) Document study, data collection by collecting official qualitative documents to strengthen the analysis in this research; 4) Qualitative audio and visuals in the form of photos, videotapes, or any type that has sounds.

RESULTS AND DISCUSSION

Nursing homes are social services or social protection for elderly. They fulfill their physical, spiritual, and social needs to fill them with happiness and inner and outer peace. They can also develop potential sources of appropriately interacting with the social environment and increase the community's role in handling neglected elderly.

Based on the case study, the three nursing home's facilities will be referred to as Nursing Home 1, Nursing Home 2, and Nursing Home 3 to ensure anonymity. Nursing Home 1 accommodates 185 elderly in its two branches in the area. In the first branch, there were 55 people in the second branch, there were 80 people. There are 28 employees in both branches, each looking after more than five elderly. Staff at both branches work in three shifts. In 2000, Nursing Home 2 shifted to caring for neglected elderly, previously focusing on people

experiencing homelessness. There are three categories of elderly in nursing home 2, namely: elderly without mental disorders, elderly with psychological problems, and elderly with psychological disorders. The number of elderly is 90, and 33 employees manage it. Includes social workers, nurses, instructors, assistants, and administrative staff. Nurses care for five elderly by working in three shifts. To know the effective management of nursing homes, it is necessary to understand the policy instruments the East Java Provincial Government uses and develop what instruments can be used to manage nursing homes in East Java effectively. This can be seen through the results of the following research:

1. *Voluntary Instrument*

a. Family and Community

Communication inside the facility encompasses internal and external communication. Internally, intensive coordination between departments is depicted in providing services for parents. One out of nine daily working hours at Nursing Home 3 is allocated to incidental communications. Even though many nursing home residents lack family support, external communication involves family and relatives. All nursing homes have solid internal communications, with additional attention to daily interactions with seniors and between employees to ensure daily care for them.

The nursing home's employees emphasized that no resources or activities were planned to improve poor interactions and communication between seniors and their families. Addressing this gap and enhancing more activities to improve communication is crucial. All nursing homes maintain good relations with the community and receive financial assistance from the community. However, the families of the elderly are rarely exist.

b. Voluntary Organization

Communication in nursing homes is categorized by twofold: internal and external. The three nursing homes engage in external communication with various parties. They regularly communicate with government agencies, community health centers, regional hospitals, psychiatric hospitals, vision clinics, NGOs, universities, civil society, and religious groups.

Nursing Home 1 has the advantage of monthly coordination meetings discussing future programs and opportunities, which include evaluations with community representatives and provincial government agencies. However, it is concerning to note that Nursing Home 2 has experienced a decline in coordination with local agencies, organizations, and communities. This decline requires immediate attention and action. The three homes have established numerous local relationships, crucial in supplementing their government funding. These relationships, which often involve shared resources, joint initiatives, and community support, demonstrate their resourcefulness and adaptability in managing their operations.

Those three centers rely on government funding and have established numerous local relationships. These relationships with local institutions, organizations, and communities are not just supplementary but instrumental in the functioning of the three nursing homes. They underscore the collaborative nature of their operations, in which everyone's contribution is valued and essential.

2. *Compulsary Instrument*

a. Regulations

The welfare of elderly is regulated in Law (UU) Number 13 of 1998 concerning the Welfare of the Elderly and Law No. 40 of 2004 concerning National Social Security. Furthermore, there is Minister of Social Affairs Regulation Number 19 of 2012 concerning Guidelines for Social Services for the Elderly, which helps in knowing the services that must be provided for elderly. The 2020–2024 National Medium Term Development Plan, stipulated by Presidential Regulation Number 18 of 2020, aims to create an independent, advanced, prosperous Indonesian society. This plan involves empowerment and inclusion initiatives. Furthermore, the East Java Provincial Government also has regulations to guide the welfare of elderly, namely Governor's Regulation Number 6 of 2008 concerning Guidelines for the Implementation of East Java Provincial Regulation Number 5 of 2007 concerning the Welfare of the Elderly.

b. Public Enterprise

One funding source is assistance from donors and the community, though it was in a small amount. CSR (Corporate Social Responsibility) programs from private companies are less numbered. The nursing home has no initiative to collaborate with the private sector to access CSR funding and help them meet the needs of the elderly community. Apart from that, there still needs to be a connection with local private business entities, so the ability to meet the needs of nursing homes is less optimal. More resources, facilities, and infrastructure are needed in all nursing homes. Nursing Home 1 faced problems with old operating vehicles and distance from the primary healthcare. Nursing Home 2 had the most outdated facilities, and Nursing Home 3 needed more total care facilities and an exclusive cemetery.

3. *Mixed Instrument*

a. Information and Exhortation

Nursing homes focus on meeting basic needs, implementing guidance, outreach programs, and palliative and bereavement care. Guidance implementation includes physical, mental, social, skills, and recreational activities (such as walking and singing accompanied by music).

The health department and local village officials work hand in hand to conduct outreach programs that include health checks, counselling, and motivational guidance. This collaborative effort is a testament to our commitment to providing the best possible care and support to the residents, instilling confidence in their families and the community.

Internal communication in all nursing homes is a cornerstone of the daily care provided. Special attention is given to daily interactions with parents and employees, ensuring that the commitment to quality care is upheld. External communication, on the other hand, presents its own set of challenges, particularly in organizing care for ill residents and communicating with families.

b. Subsidies

Funding stems from the State and Regional Revenue and Expenditure Budget managed by the Department of Social Affairs of East Java Province, along with donations from the community. Furthermore, accountability and

program plans are handed over to the East Java Provincial Government. Nursing homes conduct routine evaluations, while the Provincial Government performs regular assessments or monitoring. The nursing home has similar facilities: an office building, men's and women's dormitories, prayer room or prayer room, hall, kitchen, health room, and special care unit. Variations have additional facilities, such as ambulances, cars, gazebos, counseling rooms, senior parks, and particular parking lots.

The community plays a significant role in supporting the nursing home, mainly through food donations. These donations and funds from other donors are crucial in meeting the immediate residents' necessities. However, support from the private sector, such as CSR programs, is yet to be realized. Clarifying the donation mechanism to the nursing home is essential to ensure that all potential contributors, including the private sector, understand how their support can make a difference.

The nursing home is unwavering in its commitment to meeting the basic needs of the elderly. This includes providing clothing, food (served thrice daily), shelter, and health services. The health services, which include regular examinations by nurses and doctors at the health center every two months, ensure that the elderly residents receive comprehensive care. This commitment is a testament to the nursing home's dedication to the well-being of its residents.

CONCLUSION

The first and foremost policy instrument for the effective management of nursing homes is the crucial role of family and community support. Many nursing home residents need more support, which is an area that demands immediate attention. Planning resources and activities to enhance interactions and communication between seniors and their families is a key aspect of their well-being.

Secondly, voluntary organizations in the retirement centers play a pivotal role in maintaining external communications. Their engagement with various parties, including government institutions, community health centers, regional hospitals, mental hospitals, eye clinics, NGOs, universities, civil society, and religious groups, is of utmost importance. These relationships are not just vital, but they are the lifeblood for the effective

functioning of nursing homes and the well-being of the elderly.

The third policy instrument is the regulation aspect, which provides a legal framework for the welfare of the elderly. This aspect encompasses several laws and regulations, including Law (UU) Number 13 of 1998 concerning the Welfare of the Elderly, Law No. 40 of 2004 concerning National Social Security, Minister of Social Affairs Regulation Number 19 of 2012 concerning Guidelines for Social Services for the Elderly, Presidential Regulation Number 18 of 2020, and Governor's Regulation Number 6 of 2008 concerning Guidelines for Implementing East Java Province Regional Regulation Number 5 of 2007 concerning Welfare Elderly.

Fourth, public enterprises' collaborations with senior homes appear in fewer numbers to help meet the needs of the elderly community. Apart from that, there still needs to be a connection with local private business entities, so the ability to meet the needs of nursing homes is not optimal.

Fifth, information and appeal: The health service and local village officials collaborate in outreach, including health checks, counseling, and motivational guidance. Motivation has its challenges, as seen through communication with elderly. Internal communication between nurses and nursing home employees can still be strong. Still, communication carried out with families can be said to be quite tricky in arranging care for sick residents in nursing homes.

Sixth, subsidies, namely funding, come from the State and Regional Revenue and Expenditure Budget, managed by the East Java Provincial Social Service, and donations from the community. Apart from that, the elderly also have training activities such as making salted eggs, doormats, feather dusters, batik, and herbal concoctions. The skills of elderly are sold when there are visits and events at the nursing home. The proceeds from the sale of these skills are given to elderly

The development of policy instruments that can be used by nursing homes in East Java, particularly in public enterprises, is a significant step. However, the lack of collaboration with the private sector means that the elderly needs are not being met optimally. This collaboration, particularly through the CSR (Corporate Social Responsibility) program, holds immense potential. Cooperation with the private sector can significantly enhance the management of nursing homes and improve the services provided to meet the elderly necessities.

Recommendation

The management of nursing homes carried out by the East Java Provincial Government needs to develop policy instruments, namely collaborating with the private sector through the CSR (Corporate Social Responsibility) program. This can help fulfill the elderly needs more optimally. This can be more complex because they include not only physical health but also psychological factors. Apart from that, there needs to be an approach taken by nursing home staff to elderly families to help provide motivation for the elderly.

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