THE MALARIA PROGRAM IN A DECENTRALIZED GOVERNANCE PERSPECTIVE:
EVALUATION OF THE MINISTRY OF HEALTH DECREES NO. 293/MENKES/SK/IV/2009 ON
MALARIA ERADICATION IN CENTRAL MALUKU DISTRICT, MALUKU PROVINCE

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ABSTRACT
Malaria is an infectious disease that is still a serious health problem, both in developing and developed
countries. Malaria is considered dangerous because it can cause death, especially in high-risk groups, for
example in infants, toddlers, and pregnant women. The result of the World Malaria Report reports malaria
attacks 106 countries and islands in the world. The Minister of Health of the Republic of Indonesia issued
a Decree of the Minister of Health of the Republic of Indonesia Number 293/MENKES/IV/2009 concerning
the Elimination of Malaria. The current national malaria control program is implemented with a focus on
achieving malaria elimination throughout Indonesia as an effort to create healthy living communities.
Therefore, the researcher took a study related to the evaluation of the malaria elimination program in the
perspective of decentralized governance to find out how to analyze and find out the results of the evaluation
of the malaria elimination program related to the stages of malaria elimination (eradication, pre-
eliminination, elimination, and maintenance) based on the Decree of the Minister of Health of the Republic
of Indonesia Number 293/ MENKES/IV/2009 In Central Maluku District, Maluku Province in 2018 in the
Perspective of Decentralized Governance, the informants in this study used purposive sampling and
snowball sampling. This research was conducted in the district of Central Maluku. The data used in this
study are primary and secondary data, for primary data collection using the observation method that goes
directly and participates in the activities carried out by the subject under study, while for secondary data
obtained from books and official publications, especially those related to the Evaluation Study of the
Ministry of Health No.293/Menkes/SK/IV/2009) on the Elimination of Malaria in Central Maluku District,
Maluku Province.

Keywords: Malaria, Decentralized Governance, Malaria Elimination Program

INTRODUCTION
Malaria is an infectious disease that is still a serious health problem, both in developing and developed
countries. Malaria is considered dangerous because it can cause death, especially in high-risk groups, such
as infants, toddlers, and pregnant women. Marasabessy, et al (2019) found that the result of the World
Malaria Report (2014) shows malaria attacks 106 countries and islands in the world. However, the WHO
(World Health Organization) in 2014 recorded 198 million cases of malaria occurred globally where
malaria had also been the cause of 584,000 deaths in the previous year. Malaria infections occur in many
parts of the world, especially tropical and sub-tropical areas including Indonesia (Alfanzaki, 2019).

Yuliyanti (2020) explained that the incidence of malaria in 2018 in Maluku province was 1,964 cases of
malaria with the category of inpatients and included in 3 groups of diseases with the highest incidence of
disease and malaria ranked third after cases of ARI and diarrhea. From the number of malaria cases in 2018,
1,950 malaria patients or 99% of malaria patients had received ACT (Artemisin base Combination Therapy)
treatment from the Ministry of Health of the Republic of Indonesia (2019).

Based on data and information on the 2018 Indonesian Health Profile, Maluku province is in the position
of a Moderate Malaria Epidemic with an API value of 1.1 per 1,000 populations. The API value of Maluku
province continues to decline. In 2015, Maluku province was still included in the High Epidemic with an
Province has made efforts to control malaria, namely a malaria elimination program in accordance with the
Decree of the Minister of Health of the Republic of Indonesia No. 293/MENKES/IV/2009 concerning

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Malaria Elimination. Malaria elimination itself is an effort to stop local malaria transmission in a certain geographic area, and it does not mean that there are no imported malaria cases and no malaria vectors in the area, so precautions are still needed to prevent re-infection, Ministry of Health (2009).

Based on the Maluku Governor Decree Number 151 of 2017 concerning the Establishment of the Maluku Province Malaria Elimination Team and the Maluku Governor's Instruction Number 3 of 2017 concerning the Implementation of the Accelerated Malaria Elimination in Maluku Province, the policy strategy for malaria elimination in Central Maluku is to expand the use of RDT, treatment with Artemisin base Combination Therapy (ACT), use of mosquito nets, spraying, Mass Blood Survey, and Mass Fever Survey, which are also explained in the Ntuku research (2016). Another strategy is to empower and mobilize the community to actively support malaria elimination efforts, ensure access to quality services for people at risk, communicate, advocate, motivate and disseminate information to the Government and Local Governments to actively support malaria elimination (Kemenkes RI, 2012).

Innovation towards Malaria Elimination Policy in the form of a Memorandum of Understanding with PKK for disease control related to the achievement of the MDGs through larval inspection (Roosihermiatie et al, 2015). In addition, the Central Maluku District Government also allocates funds for Jamkesda in financing for the poor. Although the Central Maluku government had made several efforts to eliminate malaria by accelerating the overall acceleration strategy in high malaria endemic areas, the activities carried out are mass anti-mosquito net campaigns, spraying of house walls in all villages with API > 40%, and early detection of treatment. The intensification strategy is a control effort outside eastern Indonesia such as in mining, agriculture, forestry, transmigration, and Porres refugee areas (2015).

Renrawin et al (2014), explained that related to the problem of malaria, the analysis of the implementation of the malaria program in the City of Tomohon found that the discovery and management of malaria sufferers had been carried out in all health services in the city of Tomohon, also, human resource improvement has been carried out for nurses, doctors, and laboratory personnel. Furthermore, Roosihermiatie, et al (2015) explained that districts having not issued policies on malaria elimination, implementation with a commitment, especially that the Puskesmas (Community Health Center) in the study area carry out diagnostics with laboratory examinations and malaria treatment with Artemisin Combined Therapy (ACT), although, there are still those who do clinical malaria treatment, innovation activities are specific local area, and awarding the Village Malaria Interpreter (JMD) in increasing the discovery of suspected malaria cases, while the malaria program budget in the study districts is between 0.95-5.6%.

Based on the description, the author is interested in conducting research on the provision of health services to eliminate malaria as outlined in the form of a Doctoral dissertation in Administrative Sciences at the Faculty of Administrative Sciences, Universitas Brawijaya entitled: “Evaluation of Malaria Elimination Programs in the Perspective of Decentralized Governance (Policy Evaluation Study of Minister of Health Decree No.293/ Minister of Health/SK/IV/2009 concerning the Elimination of Malaria in Central Maluku Regency, Maluku Province in 2018)”.

**THEORY BASIC STUDY**

**Decentralized Governance**

Decentralization is the transfer of authority from the central government to local governments to take care of their own household affairs based on the initiatives and aspirations of the people within the framework of the unitary state of the Republic of Indonesia (Simandjuntak, 2016). The governance cannot be separated from the basic principles of good governance, namely transparency, participation, and accountability as the main elements. The terminology of good governance is not standardized, but many definitions have tried to dissect the meaning of good governance (Anders 2005). However, it cannot be denied that good governance has been considered an important element to ensure national prosperity.

Based on its nature, Cohen and Peterson (1997) divide decentralization into 3 principles, which are: 1) deconcentration, 2) distributed institutional monopoly of administrative decentralization, 3) delegation...
(delegation or institutional pluralism). Decentralized Governance (from hierarchy to participation and teamwork). Decentralized Government is a hierarchy towards participatory and teamwork. A government leaves the hierarchical paradigm and applies the empowerment paradigm by generating participation and improving work ethics.

Rodden (2019) also divides decentralization into three parts, namely fiscal, administrative, and political decentralization. In fiscal decentralization, local government is given power over taxes and business, increase local revenues through domestic and foreign debt, and decide for themselves on how to spend local budgets. Meanwhile, administrative decentralization gives local governments the opportunity to recruit staff and the freedom to create new staff units according to local government needs. Political decentralization provides an opportunity for regional legislative council elections (Rodden and Wibbens, 2019).

Malaria Disease Control Program

Malaria Control Program is one of the programs of the Infectious Disease Control Program. Efforts to control malaria include basic data collection activities through surveys and secondary data analysis, preparation of annual plans, and research in preparing skilled human resources (Ministry of Health, 2007). The aim of the Malaria Disease Control Program is to prevent death and reduce morbidity and socio-economic losses caused by malaria based on local capacity that is increasingly being improved by Lokollo (1993).

Outside Java-Bali suppress transmission in priority areas, reduce morbidity in other areas, and free Balerang-Bintan from malaria. One of the policies for implementing the Malaria P2 program is to improve managerial skills at the Community Health Center, District, Provincial and Central levels (Depkes, 2007). The P2 Malaria program activities outside Java-Bali are in accordance with the guidelines for implementing P2 Malaria (MOH, 2007), including passive case detection (PCD), Malariometric Survey (MS), patient treatment, and disease prevention.

METHODS

This research is a qualitative research with a case study approach. In this case the researcher conducts an in-depth exploration of the program, process, activity, against one or more people, or deepens one case related to time and activity and the researcher collects detailed data using various data collection procedures and in a continuous time. The case study studied in this research is the Provision of Health Affairs in the Perspective of Decentralized Governance (Evaluation Study of the Ministry of Health No.293/Menkes/SK/IV/2009) Regarding the Elimination of Malaria Disease "in Central Maluku Regency, Maluku Province in 2018.

RESULTS

Strategic policies for the provision of health affairs in terms of Decentralized Governance in Central Maluku District, Maluku Province

The policy for the implementation of health affairs has been running quite well, the policies implemented support the acceleration of the achievement of the MDGs and are implemented in collaboration with various sectors where the policies and measures are determined by the Central Maluku Regency government. Tjoe (2016) explained that the Central Maluku Regency Government has optimized the service for administering health affairs so that it can provide the best service for the community. The results of this study are in accordance with the research of Kepel and Umboh (2019) which explains if the research conducted by researchers in the Talaud Islands Regency, that the implementation of the malaria elimination program in the Talaud Islands Regency has been carried out quite well, but there are still some obstacles encountered in its implementation.

In terms of malaria center health facilities as a follow-up plan, Central Maluku Regency does not yet have a single malaria center, but there are many health institutions that can become malaria health facilities, especially health centers in villages. In accordance with Purnama's research (2019) which research
conducted in Lubuk Liggan City also improves access to quality services starting from the Community Health Center, Sub-Community Health Center and Village Health Centers, empowering and organizing communities, improving communication, information and education, building partnerships, improving systems surveillance, improve monitoring and evaluation systems and improve the quality of human resources. However, the integrated service model implemented by the Central Maluku Regency Government is a service that is combined with antenatal care and integrated with child health programs through the development of the ICC (Integrated Management of Sick Toddlers) Pardosi, JF, Parr, N., & Muhidin, S. (2017).

The policy for the elimination of Malaria is reviewed from Decentralized Governance in Central Maluku Regency, Maluku Province

At the eradication stage, the government of Central Maluku Regency has carried out screening with a fairly wide scope, only screening examinations that are focused on are not microscope tests. The constraints in this research were also experienced by the research of Epel and Umboh (2019) which explained that the research carried out also experienced problems in the absence of microscopic tools and untrained personnel. In the pre-elimination stage, a diagnosis is made in the form of microscopic tests. At this pre-elimination stage, every health center can use and perform microscopic confirmation. At this stage, surveillance activities have been carried out using a Geographic Information System (GIS) application.

The achievement of the target for assessing the status of malaria elimination in terms of Decentralized Governance in Central Maluku Regency, Maluku Province

Based on the interview, it is known that the Central Maluku Government has met all the assessment targets well so that it has obtained Malaria elimination certification. The government conducts good surveillance, especially migration surveillance and disease surveillance. This effort is also described in the research of Puja Kesuma, & et al (2018) which examined in Tetel Village, Pengadegan District, Purbalingga District, migration surveillance, and disease surveillance. In terms of registering malaria cases, the government of Central Maluku Regency has a complete case register and is registered in the Geographic Information System (GIS). The government has also succeeded in optimizing the health service unit; thus, it can run well, especially in the performance of the Community Health Center as the smallest health service unit that is close to the residents. The results of this study are in accordance with the research of Wicaksono & Fikri in a study entitled Advocacy Steps to Maximize Health Promotion at PT. Community Medicine News, it is known that the Government has also succeeded in optimizing the health service unit so that it can run well.

Supporting and inhibiting factors in the effort to meet the target achievement of the assessment of the status of the elimination of Malaria are reviewed by Decentralized Government in Central Maluku Regency, Maluku Province

There are internal and external factors that support or hinder the implementation of the malaria elimination program. From the results of interviews conducted by researchers, it is known that several supporting factors include support from the central government and local governments, the quality of qualified human resources for implementing employees with the development and training of human resources, the availability of adequate budget and infrastructure facilities, this has also been fulfilled which is conducted on research of Tietje, et al (2014). However, some of the inhibiting factors include the lack of awareness of the community in supporting the malaria elimination program, cross-sectorial cooperation that has not been well coordinated, and the quality of program planning that is still not in accordance with the standards and recommendations of the Health Office, this is similar to the Bassat & Mayor's researches. (2016). It is because the local government has better knowledge and a stronger sensitivity to the various needs and desires of the local community than the central government, which has implications for more effective projects and program designs (Munafatunnisa, 2019).
Efforts and follow-ups carried out by local governments based on the results of the assessment and factors supporting and inhibiting the elimination of Malaria were reviewed by Decentralized Government in Central Maluku Regency, Maluku Province

Some of the efforts and follow-ups carried out by the local government of Central Maluku Regency include monitoring and supervision activities, evaluation and supervision of each health unit in the region continuously and sustainably, in accordance with the research of Nugraheni, et al (2012). Besides, efforts have also been planned in the form of a malaria control program that focuses on the environment, increasing the role of the community through education, increasing coordination between sectors and collaboration with the private sector in an effort to develop facilities to take innovative approaches in controlling malaria cases.

CONCLUSION

The results of the research on the evaluation of the malaria elimination program in the perspective of decentralized governance carried out in Central Maluku Regency, Maluku Province, it can be concluded that the Central Maluku Regency Government has optimized health services so that it can provide the best service for the community. In terms of malaria center health facilities as a follow-up plan, Central Maluku Regency does not yet have a single malaria center, but there are many health institutions that can be malaria health facilities, especially health centers in villages.

There are several factors that support the elimination of Malaria including the support from the central government and local governments, the quality of human resources for qualified implementing employees with the development and training of human resources, the availability of sufficient budget and infrastructure facilities. Besides, there are also inhibiting factors including lack of awareness owned by the community in supporting the malaria elimination program, cross-sectorial cooperation that has not been well coordinated, and the quality of program planning that is still not in accordance with the standards and recommendations of the Health Service.

The Central Maluku government has met all the assessment targets well, thus, it has obtained Malaria elimination certification. The Central Maluku District Government has also carried out screening with a fairly broad scope, only screening examinations focused on are not microscope tests. Efforts and follow-up carried out by the local government of Central Maluku Regency include monitoring and supervision activities in which the evaluation and supervision of each health unit in the region continuously and sustainably.

REFERENCES


