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IMPLEMENTATION OF REGIONAL PERATURAH NUMBER 8 2015 ON HIV/AIDS PREVENTION AND CONTROL (CASE STUDY AT KARIMUN DISTRICT AIDS COMMISSION OFFICE)

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ABSTRACT

This research was based on data from the health Office that there was still transmission of HIV/AIDS cases in Karimun Regency. The implementation of Regional Regulation Number 8 of 2015 concerning the Prevention and Control of HIV/AIDS has not been optimal. This study aims to find out the implementation of Regional Regulation Number 8 of 2015 concerning the Prevention and Control of HIV/AIDS (Case Study at the Office of the Karimun Regency AIDS Commission) and to find out what are the supporting and inhibiting factors in implementing the policy. The data collection method in this study used field observation, unstructured interviews, and documentation. The data analysis used in this study is a qualitative data analysis method. This research uses theories developed by George Edward III regarding Communication (Transmission, Clarity, and Consistency), Resources (Human Resources, Budget Resources, Equipment Resources, and Authority Resources), Disposition (Bureaucratic and Incentive Appointment), and Bureaucratic Structure (SOP (Standard *Operating Procedure)* and Fragmentation). The results of this study show that the Karimun Regency AIDS Mitigation Commission has not succeeded in reducing or eliminating the number of HIV/AIDS spread in Karimun Regency from 66 HIV cases, 19 AIDS cases with 1 AIDS death in 2020 to 69 HIV cases, 5 AIDS cases with zero AIDS deaths in 2021, and from 52 HIV cases, 3 cases of AIDS with the number of deaths due to AIDS 2 cases in 2022. The implementation of HIV/AIDS prevention and control programs in Karimun Regency has not run optimally due to the lack of public knowledge related to the Regional Regulation, limited human resources and budget, and the lack of awareness of policy implementers in implementing.

INTRODUCTION

In the Sumatra Island region, Riau Islands is one of the top 10 Provinces in terms of the level of HIV/AIDS pandemic. All districts or cities within the Riau Islands Province have found cases of HIV/AIDS. In several districts, one of them is the Karimun Regency. Prevention and treatment in the fight against HIV / AIDS in general is still far from the expectations of handling HIV / AIDS, so it still has an impact on infected people from year to year. The total number of HIV cases in Riau Islands in 2018 until now has reached 12,923 people, while people living with AIDS are 1,572 people. It does not rule out the possibility that the level of transmission of HIV / AIDS in Karimun Regency makes this area included as one of the contributors in the case of transmission of HIV/AIDS in the Riau Islands (Naim, 2022).

HIV infection turns out to be more common at a young age than in old age. This is because young people are more likely to engage in sexual behavior at risk of HIV transmission. However, in some cases, old age can also cause risky sex. HIV transmission does not lie in sex differences. However, it can be seen that the frequency of sexual relations with multiple partners in Karimun Regency shows a significant difference between men and women; namely, the largest proportion is in men, and the minor proportion is in women. The high prevalence of HIV/AIDS cases in men is more caused by risky sexual behavior that is more susceptible to men than women.

HIV / AIDS disease is still spreading in various parts of Karimun Regency, namely attacking a number of vulnerable groups, including Women Sex Workers (WPS), Pregnant Women (BUMIL), Waria, Men Sex with Men (MSM), *Injecting Drug Users (*IDU), Correctional Assisted Citizens (WBP), High-Risk Couples (RISTI), Sex Hawker Customers (PPS), TB Patients, Sexually Transmitted Infections (STIs) and others.

The objectives contained in the Regional Regulation contain why it is necessary to have Regional Regulation Number 8 of 2015. The content means that Regional Regulation Number 8 of 2015 has a deep urgency to be implemented. Based on the objectives that have been set, if thought logically, it can be said that, in reality, some of the points contained in Chapter II Article 3 are not found in natural conditions *(actual).* As point a, in chapter II, article 3 of Regional Regulation Number 8 of 2015, which reads "reduce and eliminate new cases of HIV infection," it Identifies that in actual circumstances, *there is* still transmission of new cases in Karimun Regency. This can be proven by a number of data obtained at the health Office every year experiencing the addition of new infection cases.

Based on the existing problems, the author conducted research at the Office of the AIDS Commission of Karimun Regency and did a thesis entitled **"Implementation of Regional Regulation Number 8 of 2015 concerning the Prevention and Control of HIV/AIDS (Case Study at the Office of the AIDS Commission of Karimun Regency)."**

Experts put forward many models of policy implementation. Models of public policy implementation include the Van Meter and Van Horn models, the Mazmanian and Sabatier models, the Grindle model, and the George Edward III model. A top-down approach that has received much attention from scientists and practitioners in Indonesia, including George Edward III (1980), the main problem of public administration is low attention to implementation. George Edward III saw four main issues that needed attention for effective policy implementation, namely communication, resources, disposition, and bureaucratic structure.

1. Communication

   According to George Edward III (Astuti, 2018), communication is defined as "The process of delivering communicator information to communicants." Information about public policy, according to George Edward III (Astuti, 2018), needs to be conveyed to policy actors so that policy actors can know what they must prepare and do to implement the policy so that policy goals and objectives can be achieved as expected. Communication largely determines the achievement of the objectives of policy implementation. That is, a policy decision or implementation regulation must be transmitted to the appropriate implementor. Policy communication has several dimensions, including transmission dimensions, clarity, and consistency.

   a. The transmission dimension requires that public policies be conveyed not only to *policy implementors* but also to policy target groups and other interested parties, either directly or indirectly.
   b. The clarity dimension requires that the policy transmitted to implementers, target groups, and other interested parties is transparent so that they know the purpose, target, and substance of the public policy so that each will know what must be prepared and implemented to succeed the policy effectively and efficiently.
   c. The consistency dimension *is* needed so that the policies taken are not confused so that they are confusing the consistency dimension *is* needed so that the policies taken are not confused so that they are confusing

1. Resources

   George Edward III (Astuti, 2018) suggests that resource factors have a vital role in policy implementation. According to George Edward III (Astuti, 2018), these resources include human resources, budget resources, equipment resources, and authority resources.

   a. Human Resources

      Human resources are one of the variables that affect the success of policy implementers. George Edward III (Astuti, 2018) states that human resources are policy implementers, where these human resources have sufficient numbers and meet the qualifications to implement policies. What is meant by human resources having a sufficient number and meeting the qualifications is policy implementers who are sufficient in number and have the necessary abilities and skills to implement the established policies. A large number of implementers does not automatically drive successful implementation if they do not have sufficient skills. On the other hand, the lack of skilled personnel will also hinder the implementation of the policy.

   b. Budget Resources

      George Edward III (Astuti, 2018) stated in the conclusion of his study that the limited budget available causes the quality of services that should be provided to the community to be limited. The limited

incentives given to implementors are the leading cause of the failure of program implementation. George Edward III (Astuti, 2018) concluded that limited budget resources will affect the success of policy implementers. While the program cannot be implemented optimally, budget constraints cause low disposition from policy actors.

c. Equipment Resources
George Edward III (Astuti, 2018) stated that equipment resources are a means used to operationalize the implementation of a policy, which includes buildings, land, and facilities, which will all facilitate in providing services in policy implementation.

d. Authority Resources
Another resource that is quite important in determining the success of a policy implementation is authority. George Edward III (Astuti, 2018) states that sufficient *authority to* make decisions on their own owned by an institution will influence the institution in implementing a policy. This authority becomes essential when they are faced with a problem and require it to be resolved immediately with a decision.
Therefore, George Edward III states that the main actors of her policy are given sufficient authority to implement the policies under their authority.

2. Disposition

The definition of disposition, according to George Edward III (Astuti, 2018), is said to be "the will, desire, and tendency of policy actors to implement the policy seriously so that what the policy objective can be realized." George Edward III (Astuti, 2018) said that if the implementation of a policy is to be effective and efficient, then policy implementors *must not only know what will be done but also must have the ability to implement it so that, in practice, there is no bias.* Factors of concern to George Edward III (Astuti, 2018) regarding disposition in policy implementation consist of:

a. Appointment of bureaucracy. The disposition or attitude of the executor will give rise to Obvious obstacles to policy implementation if existing personnel do not implement the policies desired by higher officials. Therefore, the appointment and selection of policy-implementing personnel must be people who are dedicated to the policies that have been set, more specifically to the interests of the citizens of the community.

b. Incentives are one technique suggested to overcome the problem of the attitude of policy implementers by cognitively manipulating. Basically, people move based on their interests, so manipulating incentives by policymakers affects the actions of policy implementers. Adding sure profits or costs may be a motivating factor that makes executors execute orders well.

3. Bureaucratic structure

Although the resources to implement a policy are sufficient, and *implementors* know what and how to do it and have the desire to do it, George Edward III (Astuti, 2018) states that policy implementation may still be ineffective due to the inefficiency of bureaucratic structures. This bureaucratic structure, according to George Edward III (Astuti, 2018), includes aspects such as bureaucratic structure, division of authority, relationships between organizational units, and so on. According to George Edward III, there are two main characteristics of bureaucracy, namely: *"Standard Operational Procedure* (SOP) and fragmentation.

a. *Standard Operational Procedure* (SOP)
According to Winarno (Astuti, 2018), Standard Operational Procedure *(SOP) is a development of internal demands for certainty of time, resources, and uniformity needs in complex and extensive work organizations. George Edward III* (Astuti, 2018) stated that whether or not operating standards are clear, well concerns the mechanism, Policy implementation systems and procedures, the division of primary duties, functions and authorities, and responsibilities among actors, and the disharmony of relations between implementing organizations with one another also determine the success of policy implementation. However, based on the results of George Edward III's research (Astuti, 2018) explained that SOPs are very likely to be an obstacle to the implementation of new policies that require new ways of working or new types of personnel to implement policies. Thus, the greater the policy reinforcement in the practices that are prevalent in an organization, the greater the probability of SOPs hindering implementation.

b. Fragmentation

George Edward III (Astuti, 2018) explains that "fragmentation is the spread of responsibility of a policy to several different bodies so that it requires coordination." George Edward III in) says that a fragmented bureaucratic structure (fragmented or scattered) can increase communication failure because the opportunity for instructions to be distorted is enormous. The more distorted the policy implementation, the more intensive coordination is required.

Table 1. Number of HIV/AIDS Cases in Karimun Regency

		HIV				AIDS				
	Age Group	M	F	M + F	Proportion of Age Groups	M	F	M + F	Proportion of Age Groups	Number of AIDS Deaths
2020	≤ 4 years	1	2	3	4,5	0	0	0	0,0	0
	5–14 years	1	0	1	1,5	2	0	2	10,53	0
	15–19 years	1	1	2	3,0	1	0	1	5,26	0
	20–24 years	1	3	4	6,1	1	0	1	5,26	0
	25–49 years	31	15	46	69,7	11	1	12	63,16	0
	≥ 50 years	8	2	10	15,2	0	0	0	0,0	1
	Unknown	0	0	0	0,0	3	0	3	15,79	0
	Sum	43	23	66		18	1	19		1
	Sex Proportion	65,2	34,8			94,7	5,26			
		HIV				AIDS				
	Age Group	M	F	M + F	Proportion of Age Groups	M	F	M + F	Proportion of Age Groups	Number of AIDS Deaths
2021	≤ 4 years	1	0	1	1,4	0	0	0	0,0	0
	5–14 years	0	0	0	0,0	0	0	0	0,0	0
	15–19 years	1	0	1	1,4	0	0	0	0,0	0
	20–24 years	1	2	3	4,3	0	0	0	0,0	0
	25–49 years	26	24	50	72,5	4	1	5	100,0	0
	≥ 50 years	11	3	14	20,3	0	0	0	0,0	0
	Sum	40	29	69		4	1	5		0
	Sex Proportion	58,0	42,0			80,000	20,00			
		HIV				AIDS				
	Age Group	M	F	M + F	Proportion of Age Groups	M	F	L + P	Proportion of Age Groups	Number of AIDS Deaths
2022	≤ 4 years	0	0	0	0,0	0	0	0	0,0	0
	5–14 years	0	0	0	0,0	0	0	0	0,0	0
	15–19 years	2	0	2	3,8	0	0	0	0,0	0
	20–24 years	6	0	0	11,5	0	0	0	0,0	0
	25–49 years	24	13	37	71,1	2	1	3	100,0	2
	≥ 50 years	6	1	7	13,4	0	0	0	0,0	0
	Sum	38	14	52		2	1	3		2
	Sex Proportion	73,1	26,9			66,6	33,3			

METHODS

The type of data used in this study is qualitative, namely data in the form of sentences, words, images, and schemes (Sugiyono, 2017). The level of explanation (explanation) in this study is descriptive research, research conducted to determine the value of independent variables, either one or more variables (independent), without making comparisons or connecting one variable with another variable, as explained by David Kline (Sugiyono, 2017). The method used is that policy research *(Policy Research)* is started because of a problem, and this problem is generally owned by managers/decision-makers in an organization. Explained by Majchrzak (1984) in (Sugiyono, 2017). The purpose of this research is included in primary or pure research, namely research aimed at finding new knowledge that has never been known before.

RESULTS AND DISCUSSION

1. Communication, conveying the purpose of the policy content to the implementor so that the policy implementor can know what they must prepare and do to implement the policy so that the goals and objectives of the policy can be achieved as expected. The submission of Regional Regulation Number 8 of 2015 in Karimun Regency has been going well, which is in accordance with the guidelines, namely the Regent Decree on the Establishment of the Management of the Karimun Regency AIDS Mitigation Commission has involved all parties participating in the entire smooth running of the HIV/AIDS Prevention and Control program in all Regional Apparatus Organizations in Karimun Regency.
    a. Transmission, when public policy is delivered, should be conveyed not only to the implementor but also to the target group of the policy and other parties directly or indirectly. The policy delivery process by the Karimun Regency AIDS Commission has been quite good with various planning strategies so that the content of the policy can be delivered right on the target as it should be. However, in the implementation of the program, there are still several obstacles. The Regional Apparatus Organization experienced obstacles, so the AIDS Commission descended directly to coordinate with each other to help resolve those obstacles.
    b. Clarity: Public policy must be clear so that implementors and other interested parties can know clearly what is the purpose, purpose, objectives, objectives, and substance of the public policy. In implementing the policy to achieve the objectives that have been set, the AIDS Commission has been quite clear in conveying the content of the policy because it is based on Regional Regulation Number 8 of 2013, where all HIV/AIDS prevention and control programs have been stated in Regional Action Plan Books that are made as basic guidelines for the implementation of the program series so that they can understand clearly by following these guidelines.
    c. Consistently, the policies made are not confusing and must be consistent and not change so as not to confuse policy implementers and other interested parties. So far, Regional Regulation Number 8 of 2015, which the AIDS Commission has implemented, has been consistent, meaning that the policy has never changed or caused confusion from the beginning of the establishment of the regulation until now. So that policy implementers understand very well what must be prepared and done from year to year.
2. Resources: Resources have a significant role in policy implementation because resources are very influential on the success of a policy.
    a. Human resources: Human resources are one of the indicators that affect the success of a policy. Human resources are policy implementers who must have sufficient numbers and meet the qualifications to implement policies. The quantity or large number of human resources in the AIDS Mitigation Commission in charge of HIV / AIDS disease is still very lacking to overshadow one Karimun Regency. Based on the organizational structure, the charge of HIV / AIDS only consists of 4 (four) people who are still significantly lacking in implementing policies. The AIDS Commission has recruited policy implementers who match their qualifications and skills in the field. They have understood their duties, principles, and functions in their fields so that it becomes smooth for them to work because it is in accordance with their dedication and makes it easier for an organization to achieve goals. Then, human resources as implementers of a series of programs, the author obtains conclusions that can be drawn in the implementation of the program, including:

a) Health Promotion: Since the last two years, when hit by the pandemic, health promotion activities are no longer running optimally due to limitations in physical interaction where people must maintain distance, better known *as (social distancing)* from each other to prevent transmission. This makes the health promotion program experience obstacles to being implemented, so coordination needs to be carried out again with regional apparatus organizations.
b) Prevention of HIV Transmission, for each health service has implemented the program well. The HIV transmission program that is carried out is the prevention of transmission from mother to baby, which is carried out early when pregnant women check their wombs as well as check their HIV status to carry out prevention efforts.
c) Diagnostic examination: Each health service already has its own VCT clinic for people who immediately want to check themselves directly with the health service or for people who have started experiencing HIV symptoms. Health Services have been quite good in implementing this program because, in addition to VCT clinics from Health services that move to the field to carry out a series of HIV diagnosis examination programs, the community also participates in the examination process.
d) Treatment, care, and support health services are good enough in providing treatment, care, and support to patients with HIV / AIDS. The first step is to provide care and, at the same time, treatment efforts to patients who already have HIV-positive status so that it does not reach the AIDS phase. This is evidenced by data obtained from the health Office that for AIDS patients in the last three years, only one person.
e) Rehabilitation: In Karimun Regency, there is no rehabilitation program for HIV/AIDS patients because those with HIV/AIDS status have received treatment by health services and they have been given treatment efforts, then they take the drug according to a doctor's prescription. Here, fellow ODHIV friends play a role in strengthening each other and providing support for each other's health. So, they do healing by not rehabilitating.

b. Budget resources: In the implementation of HIV/AIDS programs, of course, some budgets or costs help to launch the entire program so that it can be realized. Limited budget for the smooth running of HIV/AIDS programs in Karimun Regency is still a problem today. This is an obstacle or obstacle to the AIDS Commission, which seeks to implement the program using a modest budget so that the series of programs continue to run, although not entirely. Then, budget resources as a smooth series of programs, the author obtains conclusions that can be drawn in the implementation of the program, including:
    a) Health Promotion and Prevention of HIV Transmission, the AIDS Commission has prepared an annual program budget. One of them is a socialization program or providing education to the public about HIV / AIDS and its prevention. The AIDS Commission has budgeted the need for socialization or education programs such as kits for HIV rapid tests, condoms, and other needs according to estimates or needs of the community in Karimun Regency.
    b) HIV Diagnosis Check, the Health Office has budgeted HIV test kits in the number of thousands per year according to the population in Karimun Regency, and these HIV test kits are available in every health service.
    c) For the treatment of HIV/AIDS patients, the government has guaranteed the availability of drugs by providing free drugs to patients, with a number of how many patients are infected with HIV/AIDS and the number of doses or doses from doctors according to the needs of patients in Karimun Regency.

c. Equipment resources in the implementation of the program certainly require various facilities and infrastructure that can launch the program. The author obtains conclusions

that can be drawn in the implementation of the program, including:

a) Health Promotion and Prevention of HIV Transmission, quite excellent and creative and innovative in socializing or providing education to the public about HIV / AIDS and prevention using IEC (Communication, Information, and Education) media in addition to direct socialization provided to the community.
b) HIV Diagnosis Examination, HIV test kits as a support that aims to detect HIV infection in a person's body. In this case, health services are pretty good at providing HIV test kits for the community. In fact, they provide HIV test kits in vast quantities for the year.
c) Treatment, care, and support for drug needs in the Karimun Regency have been met because the government has provided drugs for HIV/AIDS patients, and they have been guaranteed.

d. Authority resources, in the implementation of public policy, someone who can decide on matters related to all HIV/AIDS prevention and control issues that have been given authority when faced with a problem and require it to be resolved immediately with a decision. At the Karimun District AIDS Commission, the head of the secretariat can directly decide on a decision. However, long before that, it had coordinated first with the Chairman of KPA in Karimun Regency, namely the Regent as chairman of the AIDS Mitigation Commission.

3. Disposition: In carrying out public policy, the attitude of the implementer becomes essential. Because the policy will run if there is a desire from the policy implementer to implement it, the tendency of policy implementers to implement policies is still reasonably unfavorable. This is because there are still some people who are not aware of their responsibilities and functions in the implementation of public policy.
   a. Appointment of bureaucracy, Selection or appointment of policy implementing personnel must be people who have dedication to the policy that has been set. The AIDS Commission has implemented SOPs to obtain and dispatch the best personnel in accordance with its near-good dedication as a policy implementer.
   b. Incentives: Incentives are very influential on the course of policy implementation, which is where this is a driver for policy implementers in implementing policies. The AIDS Commission has received incentives well, and until now, it has been fulfilled in accordance with the contents contained in the policy. The government has fulfilled its obligations to policy implementers.
4. Bureaucratic structure, an efficient and effective bureaucratic structure, affects the success of implementation. Includes such as the division of authority, relations between organizational units, and bureaucratic structures. The AIDS Commission has an organizational structure, namely the Regent Decree, as a reference that has been determined. Each personnel that has been formed has its primary duties and functions. However, in reality, the AIDS Commission has limited human resources so that one can enclose both responsibilities simultaneously. So, the bureaucratic structure formed has not been effective.
   a. SOP (*Standard Operating Procedure*), SOP is useful as a foundation system in implementing policies. The AIDS Commission already has SOPs as a basis for policy implementation, all of which have been regulated in the regent decree so that they can follow the guidelines in accordance with what has been set.
   b. Fragmentation, the spread of responsibility in a policy sphere to several different bodies or organizational units that require coordination, is significant. The AIDS Commission has coordinated well for the dissemination of responsibilities to the Regional Apparatus Organizations. Not only one organizational institution is responsible for a policy, but several other organizational institutions are involved in being responsible.

CONCLUSION

It can be seen that the number of people living with HIV/AIDS in Karimun Regency has decreased in recent years due to the pandemic. It can be seen that related to the implementation of the policy. There are still several obstacles and obstacles in its implementation. In its implementation in Karimun Regency, it is still quite good after the pandemic in the last two years. Because HIV cases in the last three years have decreased below 100 cases. However, at the beginning of this Regional Regulation, by looking at the transmission rate, the AIDS Commission has not

been able to reduce the number of infections below 100 since 2016. However, even if it increases, the number is not too high.

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