
Measuring The Implementation Of Regulation Of The Minister Of Health Number 97 Of 2014 Concerning Delivery In Health Facilities

Andris Isa¹

¹ Faculty of Law, Gorontalo State University, Indonesia. E-mail: andrisisa876@gmail.com

ARTICLE INFO	ABSTRACT
<p>Keywords :</p> <p><i>Delivery; Facility; Health.</i></p> <p>How To Cite :</p> <p>Isa, A. (2020). Measuring The Implementation Of Regulation Of The Minister Of Health Number 97 Of 2014 Concerning Delivery In Health Facilities. <i>Estudiante Law Journal</i>. Vol. 2 (1): 20-35</p> <p>DOI :</p>	<p>This study aims to find out the implementation of Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 regarding delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency. The type of research used in this study was empirical legal research, in this study, the sampling used purposive sampling and the data analysis used by researchers in legal research used descriptive analysis. The results showed that policy implementation failed because the content of the policy was still unclear, meaning that the objectives were not detailed enough, the means and application of priorities, or the policy programs were too general or did not exist at all. Second, because of the lack of internal and external provisions of the policies to be implemented. Third, the policies to be implemented may also show significant deficiencies. Fourth, other causes of failure to implement a public policy can occur due to deficiencies concerning auxiliary resources, for example, those concerning time, cost/funds, and human labor. Legal awareness of the local community, especially pregnant women, so that they can take advantage of the facilities provided by the government in the form of Public Health Center and Auxiliary Health Center and even the nearest hospital, this is to ensure the safety of mothers and children as well as reduce the risk of maternal and child mortality..</p>

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1. Introduction

A. Background

One indicator of public health status is the Maternal Mortality Rate (MMR).

Maternal Mortality Rate is the number of women who die due to pregnancy disorders or their management (excluding accident or incidental case) during pregnancy, childbirth and in the postpartum period (42 days after delivery) without taking into account the length of gestation per 100,000 live births.¹ Health according to WHO (World Health Organization) (1992) is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.²

According to Zainal Fatoni, Indonesia is still facing various population and health problems to this day. Maternal Mortality Rate (MMR), early marriage, and total fertility rate (TFR) are some of the indicators that show the important role of reproductive health policies.³ At the preamble of the 1945 Constitution of the Republic of Indonesia, it is explained that one of them is to create a government that guards and protects all Indonesian people.⁴ So that in modern times is an era where humans are required to develop themselves.⁵ Norms that develop in society and are flexible as well as encourage creativity in providing public services.⁶ Indonesia is one of the countries that put forward the constitution in every aspect of the life of the nation and state.⁷ The existence of human rights (HAM) would not have any meaning if it is not followed up with the law that regulates the relationship of these rights,⁸ meaning that it is the law that formalizes human rights into a set of rules to guard and protect so that they do not become clashes in social and state life.⁹

¹ Fiara Kusumawati, *Analisis Hukum Pelaksanaan kelas Ibu Hamil sebagai upaya menurunkan angka kematian ditinjau dari Peraturan Menteri Kesehatan No 97 tahun 2014.*, 1.

² Ibid.

³ Zainal Fatoni dkk, 2015, *Implementasi Kebijakan Kesehatan Reproduksi di Indonesia: Sebelum dan Sesudah Reformasi* : Jurnal Kependudukan Indonesia, vol. 10 No 1 Juni, 1.

⁴ Novendri M. Nggilu dan Ahmad (2020). Denyut Nadi Amandemen Kelima Undang-Undang Dasar 1945 melalui Pelibatan Mahkamah Konstitusi sebagai Prinsip the Guardian of the Constitution. *Jurnal Konstitusi*, 202016(4), 785-808

⁵ Bakung, Dolot Alhasni. (2020) Determinasi Perlindungan Hukum Pemegang Hak Atas Neighboring Right. *JALREV 2 (1)*, 67

⁶ Norma L.P. Wemben. (2010). "Kinerja Pelayanan Pada Kantor Badan Pertanahan Nasional Kabupaten Gorontalo." *Jurnal Legalitas 3 (2)*, 131

⁷ Fakhris Lutfianto Hapsoro. (July, 2020). Interpretasi Konstitusi dalam Pengujian Konstitusionalitas untuk Mewujudkan The Living Constitution. *JALREV 2 (2)*, 145

⁸ Wantu, F. M. (2019). Mekanisme Koordinasi dan Singkronisasi Lembaga Kementerian Negara: Suatu Praksis Menuju Kabinet Yang Efektif. *Al Ahkam*, 15(2), 76.

⁹ Tijow, Lusiana. Perlindungan Hak Asasi Manusia Terhadap Hak Hidup Anak Dalam Kandungan Di Luar Pbrkawinan Yang Sah. *Jurnal Legalitas 3 (2)*, 80

In 2014, the government through the Minister of Health of the Republic of Indonesia issued a regulation, one of which is expected to reduce mortality. The regulation is the Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 concerning Health Services for the Pre-pregnancy, Pregnancy, Childbirth, and Postnatal Periods, Implementation of Contraceptive Services, as well as Sexual Health Services. The government through the law has provided a starting point for justice, which is carried out for justice based on God Almighty¹⁰ provide protection for basic rights or human dignity, especially for justice seekers.¹¹

he provisions of Article 14 paragraph 1 of the Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 states that "delivery must be carried out in health service facilities". However, in reality, there were still many pregnant women who gave birth at home and were not facilitated by health workers from the health department or the nearest public health center, including what happened in Tolangohula Sub-district, Gorontalo Regency.

Most deliveries occurred at home for religious, cultural, and economic reasons. In their delivery are generally assisted by untrained personnel who cause complications of bleeding, infection and generally if a case occurs it is not handled immediately. As the results of observations made by prospective researchers in Tolangohula Sub-district, precisely at the Public Health Center Tolangohula, the following data were obtained:

Table 1.

Local Area Monitoring of Maternal and Child Health (PWS-KIA) Report in Public Health Center Tolangohula 2015 to 2020

No	Year	Delivery	Column1
		Health workers	Tradition al Birth Attendants
1	2018	42	1
2	2019	37	1
3	2020	28	2
Total		205	18

Source: Empirical Data of Public Health Center Tolangohula in 2020

Looking at the data from observations made by prospective researchers based on table 1 above, it was clear that the delivery process facilitated by health institutions in this case the Public Health Center in the Tolongohula Sub-district, Gorontalo Regency from 2015

¹⁰ Fenty Puluhulawa, Lusiana M, Tujow, Sutrisno. (2020). "Penerapan Asas Keadilan, Kepastian Hukum Dan Kemanfaatan Dalam Putusan Hakim." Jurnal Gorontalo Law Riview. 3, (2) Oktober, 184

¹¹ Dian Ekawaty Ismail. (2009). "Upaya Perlindungan Hak-Hak Tersangka/Terdakwa Melalui Mekanisme Praperadilan di Kota Gorontalo." Jurnal Mimbar Hukum. 21 (1) Februari, 85

to 2020 there were at least 205 cases of delivery. Meanwhile, for deliveries facilitated by traditional birth attendants from 2015 to 2020, there were 18 cases of delivery in the Tolangohula Sub-district. The Public Health Center Tolangohula itself has 14 State Civil Apparatus (ASN) staff and 3 contract workers and 33 servants.

B. Problem Formulation

How is the implementation of Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 regarding delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency.

C. Research Method

The type of research used in this research was empirical legal research with a sociological juridical research model that has an object of study on community behavior.¹² This research also used a sample through a purposive sampling approach, which is a non-random sampling technique where the researcher determines the sampling by determining specific characteristics under the research objectives so that it is expected to be able to answer research problems.¹³ In this study, the sampling used purposive sampling and the data analysis used by researchers in legal research used descriptive analysis.

II. DISCUSSION

Measuring the Implementation of the Regulation of the Minister of Health Number 97 of 2014 Regarding Delivery in Health Facilities.

According to Zainal Fatoni, Indonesia is still facing various population and health problems to this day. Maternal Mortality Rate (MMR), early marriage, and Total Fertility Rate or TFR are some of the indicators that show the important role of reproductive health policies.¹⁴ The results of policies issued by the Government are solely derived from the wishes of the people.¹⁵ This can happen if the village government realizes that the inherited conditions are internalized into development programs (endogenous development) and will result in¹⁶ social welfare¹⁷. This pressure is a little more likely to

¹² Bambang Sunggono. *Metodologi Penelitian Hukum*. (Jakarta: Penerbit Rajawali Pers, 2012), 42.

¹³ Mukti Fajar dan Yulianto Achmad. *Dualisme Penelitian Hukum Normatif & Empiris..* (Yogyakarta: Pustaka Pelajar, 2010), 51.

¹⁴ *Ibid.*

¹⁵ Putri Handayani Nurdin. (2019). Politik Hukum Pengaturan Pendidikan Politik oleh Partai Politik. *JALREV* 1 (2) Juli, 146

¹⁶ Zamroni, S. (2016). Desa Membangun Tanpa Meninggalkan Kelompok Pinggiran. *Institute for Research and Empowerment (IRE)*, 2, 6

¹⁷ Ariefulloh. (2019). Dilema Penerapan Sanksi Pelanggaran Lalu Lintas Terhadap Anak. *JALREV* 1 (2), 199

cause a significant reaction to the existence of the community, so the government is careful in solving a problem that has to do with the community.¹⁸ Talking about the implementation of the law means talking regarding the implementation of the law itself, where the law was created to be implemented. The law can no longer be called a law, if it has never been implemented. The implementation of the law always involves humans and their behavior. The police agency is given the task of dealing with violations of the law, the attorney is prepared with the aim of preparing for the examination of cases before a court session

In 2014, the government through the Minister of Health of the Republic of Indonesia issued a regulation, one of which is expected to reduce mortality. The regulation is the Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 concerning Health Services for the Pre-pregnancy, Pregnancy, Childbirth, and Postnatal Periods, Implementation of Contraceptive Services, and Sexual Health Services. The provisions of Article 14 paragraph 1 of the Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 states that "delivery must be carried out in health service facilities". However, in reality, there were still many pregnant women who gave birth at home and were not facilitated by health workers from the health department or the nearest public health center, including what happened in Tolangohula Sub-district, Gorontalo Regency. Most deliveries occurred at home for religious, cultural, and economic reasons. In childbirth, they are generally assisted by untrained personnel who cause complications of bleeding, infection and generally if a case occurs it is not handled immediately.

Based on the results of interviews with the head of the Public Health Center Tolongohula Sub-district, Gorontalo Regency, it was revealed that the socialization of the use of maternity insurance for maternal and child health services is one of the strategies conducted to reduce the number of deliveries that are not in health facilities.¹⁹ In this socialization, the government tried various things, including the provision of Childbirth Insurance (Jampersal) assistance, but there were still many socio-cultural obstacles in the selection of birth attendants. Obstacles come from both the mother's side, from the community as well as from facilities or health workers. The social obstacle is the main topic of discussion. The community as recipients of services needs to get the main attention to be able to reach the services provided with the support of Childbirth Insurance (Jampersal).

The interview also confirmed that the Indonesian people, especially those living in Tolangohula Sub-district with various socio-economic levels, various cultures, and living in areas with different natural conditions, perceived that they still needed the support of

¹⁸Fitriyadi, Ahmad Adi. (2020). Diferensiasi Pengungsi dan Pencari Suaka dalam Hukum Pengungsi Internasional dan Hubungannya dengan Prinsip Non-Refoulement. JALREV 2 (2), 127

¹⁹ Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

the Gorontalo Regency Regional Government to reach medical services.

The Childbirth Insurance Program (Jampersal) was launched in 2011 based on Regulation of Minister of Health Number 631/Menkes/PER/III/2011 concerning Technical Guidelines for Childbirth Insurance and Circular Letter of the Minister of Health of the Republic of Indonesia Number TU/Menkes/391/II/2011 concerning Childbirth Insurance (Ministry of Health, 2011) and later revised with the issuance of Regulation of the Minister of Health of the Republic of Indonesia Number 2562/ Minister of Health/PER/XII/2011 concerning the same thing.²⁰

Childbirth insurance, according to the head of the Public Health Center, aims to provide cost guarantees for mothers giving birth at health facilities and health facilities with terms and conditions. In the implementation of these regulations, there have been several obstacles in the field due to the variety of situations and conditions. The application of the Jampersal Regulation is adjusted to the support of the Gorontalo Regency Regional Government in this case the Health Department in the era of regional autonomy with different abilities. This is related to, among other things, the provision of maternal and child health service facilities (KIA) and the placement of midwives in the village.²¹

The use of Jampersal related to health care behavior is also influenced by socio-economic and cultural factors. The factor from the community side is a separate obstacle considering that the community is spread across the Indonesian archipelago, which varies in natural and socio-economic conditions.²²

Based on the recognition of the head of the Public Health Center, the funds funded by Jampersal were quite large (about 60%).²³ The lack of information about Jampersal was one of the reasons for the low utilization of Jampersal according to the results of the author's interviews with the community. The community did not understand the requirements of Jampersal, who is entitled to it, the services that can be obtained, and some of them have never even heard of Jampersal. The existence of acknowledgments of "not understanding about Jampersal" by husbands and community leaders indicated that Jampersal socialization was not optimal. People knew that there were free health services and thought of it as Jamkesmas (Community Social Security) funds. In this case, there is a confusion of understanding between Jamkesmas (Community Social Insurance), Jamkesda (Regional Health Insurance), and Jampersal (Childbirth insurance).

Based on that, according to the author, it was not easy to change the choice of birth attendant even though free fees through Jampersal have been prepared. Obstacles can

²⁰ Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

²¹ Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

²² Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

²³ Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

hinder the transition of birth attendants as reflected by research that showed that the behavior of choosing birth attendants is based on culture. Obstacles to asking for help from health workers are partly due to the culture that considers it taboo to open the genitals (thighs) in front of strangers, and believes that the blood and excrement of childbirth can cause terrible disease in men and children. Therefore they give birth through support assistance or traditional birth attendants.

Health is a human right and one of the elements of welfare that must be realized under the ideals of the Indonesian nation as referred to in Pancasila and the 1945 Constitution of the Republic of Indonesia.²⁴ Based on Article 28 H Paragraph (1) of the Constitution of the Republic of Indonesia Year 1945 affirms that "Everyone has the right to prosper physically and mentally, to live and to have a good and healthy living environment as well as the right to get health services".²⁵ State involvement is also one of the characters of the conflict phenomenon.²⁶ So you can make sure this will affect the work environment of each.²⁷

One aspect of the success of public health services can be measured from reproductive health services which consist of health services for the period before pregnancy, during pregnancy, childbirth, and the post-natal period, the implementation of contraceptive services, and sexual health services. Maternal and infant health is a priority effort in reproductive health services, these efforts are carried out to achieve optimal health degrees in health services.

Guaranteeing health services for mothers is very necessary because the role of mothers in the family is very important in the growth and development of children as the next generation of the nation. Therefore, the Ministry of Health implements a policy that deliveries must be assisted by health workers and are encouraged to be carried out in health care facilities. This is regulated in the Regulation of the Minister of Health Number 97 of 2014 Article 14 Paragraph (1) Regarding Delivery, it is stated that "delivery must be carried out in health service facilities".²⁸

The DAK (Special Allocation Fund) policy in the health sector outlines that the construction of the Public Health Center must be in the same package as the official

²⁴ Ahmad, A., & Nggilu, N. M. (2020). Denyut Nadi Amandemen Kelima UUD 1945 melalui Pelibatan Mahkamah Konstitusi sebagai Prinsip the Guardian of the Constitution. *Jurnal Konstitusi*, 16(4), 785-808.

²⁵ Undang-undang Dasar Negara Republik Indonesia Tahun 1945, Bab XA, Pasal 28 H, ayat 1.

²⁶ Yudha Chandra Arwana. "Jalur Mediasi dalam Penyelesaian Sengketa Pertanahan Sebagai Dorongan Pemenuhan Hak Asasi Manusia." *JALREV* 1 (2) 2019, 216

²⁷ Iriyanto Tiranda. (July, 2019). Konsep Ideal Penanganan Perkara Tindak Pidana Korupsi Pungutan Liar Berdasarkan Asas Peradilan. *JALREV* 1 (2), 132

²⁸ Peraturan Menteri Kesehatan Republik Indonesia Nomor 97 Tahun 2014 Tentang Pelayanan Kesehatan Masa Sebelum Hamil, Masa Hamil, Persalinan dan Masa Sesudah Melahirkan, Penyelenggaraan Pelayanan Kontrasepsi, serta Pelayanan Kesehatan Seksual, Bab II, Pasal 14, Ayat 1.

housing for health workers. The ideal place of delivery for pregnant women is in health facilities such as public health centers, or hospitals because if emergency treatment is needed, it can be handled immediately, on the other hand, if giving birth at home and at any time needing emergency medical services, it cannot be handled immediately. However, the Regulation of the Minister of Health does not mean that there is a prohibition for midwives or other health workers to assist with deliveries outside health facilities. Midwives can assist deliveries outside health facilities that are difficult for residents to reach. This provision arises against the background of the geographical conditions in Indonesia, both in terms of nature and transportation, which do not allow health services to be carried out the same in every region in Indonesia. Development is a strategic step to realize these national goals.²⁹

However, these services cannot be provided optimally when the mother gives birth outside of health care facilities. A mother's knowledge of the risk of giving birth is the reason for the formation of a mother's behavior in terms of choosing a place of delivery. Mothers choose to give birth at home because do not know that at the time of delivery complications can occur that cannot be handled properly. Mother's knowledge of safe delivery includes mother's understanding of the selection of birth attendants, mother's understanding of the availability of medical devices that support a healthy and safe delivery as well as mother's knowledge of the right place to give birth. In line with the progress and the rapid pace of science and technology today.³⁰

The reason for choosing the place of delivery by the mother is influenced by the knowledge possessed by the mother, as well as knowledge based on the experience and level of education of the mother. Experience-based knowledge comes from the habits carried out by the local community and the experience of the mother during previous deliveries. Increased knowledge of maternity mothers can be done in various ways including increasing access to information through classes for pregnant women, Integrated Service Post, mass media, and health workers where it is very important to get closer access to information for mothers about the importance of childbirth in health facilities. The better the mother's knowledge of pregnancy and childbirth, the more likely she is to take advantage of health services. This would indirectly contribute to a reduction in maternal and infant mortality.

The non-implementation of Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 regarding delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency could at least be studied from several aspects, including:

1. Aspects of Delivery Costs

²⁹Ahmad Rustan Syamsuddin. (July, 2020) Pembuktian Penyalahgunaan Wewenang Dalam Perkara Tindak Pidana Korupsi Pengadaan Barang dan Jasa. *JALREV* 2 (2), 163

³⁰Lakoro, A., Badu, L. W., Achir N. (2020). Lemahnya Kepolisian Dalam Penanganan Tindak Pidana Perjudian Togel Online, *JURNAL LEGALITAS*, Vol 13, No. 01(2020), 32

Family income is important in meeting basic needs and secondary needs, families with good economic status will be easier to meet their needs than families with low economic status. This also implements Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 regarding delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency not performed as ideally.

Financial preparation is very necessary for preparation for the process of pregnancy, childbirth, and the postpartum period and complications that may occur during the delivery process. Family income influences the utilization of health services in this case the choice of place of delivery. The cost of delivery affects the mother's readiness to give birth, this is related to her income concerning the costs incurred during delivery, the number of costs that must be incurred, the suitability of costs with expectations, and the facilities provided.

The cost of delivery is one factor in access to health services. This is the reason for mothers to prefer a home as a place of delivery because delivery at home costs less than delivery in a health facility. They think that giving birth at home can save money on delivery costs and the money for delivery can be diverted to pay for the services of health workers. On the other hand, the cost of delivery outside the facility is greater than delivery in a health care facility. The cost of delivery outside of a health care facility is twice the cost of delivery in a health care facility. When giving birth in a health care facility and having a health insurance card, the patient does not pay the cost of the facilities and services. This is also the reason why mothers prefer to give birth in health care facilities because they do not require a fee if they use a health insurance card. Family income affects the family in paying for needed health services such as a birth attendant, buying medicine, paying service fees, paying transportation costs to health service providers, and so on. Therefore, the cost of delivery is one of the reasons mothers choose a place to give birth.

2. A mother's Knowledge of Safe Delivery

Safe delivery is delivery with less risk of complications, delivery in the right place of delivery, and with the right birth attendant. Delivery services by health workers include 5 aspects, namely clinical decision making, maternal and child care, infection prevention, recording of delivery care, referrals for maternal and newborn complications. However, these services cannot be provided optimally when the mother gives birth outside of health care facilities. A mother's knowledge of the risk of giving birth is the reason for the formation of a mother's behavior in terms of choosing a place of delivery.

Mothers choose to give birth at home because do not know that at the time of delivery complications can occur that cannot be handled properly. Mother's knowledge of safe delivery includes mother's understanding of the selection of birth attendants, mother's understanding of the availability of medical devices that support a healthy and safe delivery as well as mother's knowledge of the right place to give birth. The reason for

choosing the place of delivery by the mother is influenced by the knowledge possessed by the mother, as well as knowledge based on the experience and level of education of the mother.

Experience-based knowledge comes from the habits carried out by the local community and the experience of the mother during previous deliveries. Increased knowledge of maternity mothers can be done in various ways including increasing access to information through classes for pregnant women, Integrated Service Post, mass media, and health workers where it is very important to get closer access to information for mothers about the importance of childbirth in health facilities. The better the mother's knowledge of pregnancy and childbirth, the more likely she is to take advantage of health services. This would indirectly contribute to a reduction in maternal and infant mortality.

3. Family support factor

The structure of Indonesian society still adheres to paternalistic understanding, including in research locations where the husband's role as the head of the household is very dominant and will determine the selection of birth attendants. Psychological support from husband and family provides a feeling of security in undergoing the process of pregnancy and childbirth. Pregnant women and maternity must get the maximum support from their families.

This support can be shown in various ways, including providing comfort to the mother, accompanying her to consult with health workers, helping with some of the mother's work, and even supporting her to get a safe delivery by choosing a place to give birth. Social and material support has a big influence in determining the choice of birth attendant and place of delivery. Maternal who received family support tended to choose health workers and facilities for birth attendants compared to those who did not receive family support. s for part of the function of the constitution, namely how human rights are protected and this is guaranteed in law. So that this becomes the constitutional right of every Indonesian citizen.³¹ This is because human rights are part of the implementation of justice within the framework of an independent judiciary.³² The right to life must be protected by the state, especially the rule of law.³³ Efforts that can be made for this are to bring legal decisions closer to the sense of justice experienced by the community so that the implementation of the law creates more order in the community itself.³⁴ What's more

³¹Nggilu, N., & Wantu, F. M. (2020). Menapaki Jalan Konstitusional Menuju Zaken Cabinet: Ikhtiar Mewujudkan Pemerintah Berkualitas Konstitusi. *Jurnal Hukum Samudra Keadilan*, 15(1), 128

³²Nabih Amer. (2020). "Analisis Pembubaran Organisasi Kemasyarakatan Dalam Perspektif Negara Hukum." *Jurnal Legalitas*. 13 (1), 12

³³Lisnawaty Badu. (2012). Euthanasia Dan Hak Asasi Manusia. *Jurnal Legalitas*. 5 (1), 1

³⁴Ibrahim Ahmad. (2010). "Prinsip Keadilan Dalam Penyelesaian Sengketa Tanah Untuk Kepentingan Pembangunan." *Jurnal Legalitas* 3 (2), 21

important is that it's now one of the most efficient steps in doing business.³⁵ To cited as said by Fence M. Wantu in his Journal that the essence of justice is an assessment from one person to another, which is generally seen from the party receiving the treatment only.³⁶

However, with the empowerment and independence of a woman and increasing knowledge of a mother in childbirth regarding the dangers and complications of delivery, a woman can independently make good decisions for her health, especially in choosing a place of delivery.

4. Access to Health Service Facilities

Access to health care facilities with very diverse geographical situations and conditions is a big challenge in providing health services evenly throughout Indonesia. Without easy and cheap access to reach, it will certainly make it difficult for people, especially people with low incomes, to obtain health services. For those who live in urban areas who have complete health facilities, both hospitals, and clinics, it is easy to get health services, but for those who live in rural areas with limited facilities, not all people can reach health care facilities, including when they want to give birth. Faster travel time will make it easier to reach health services, because judging from the time required, it will be shorter even if the distance is very close, of course, it does not require transportation.

Transportation is required when accessing health care facilities. The limited amount of transportation can result in mothers not being able to reach health care facilities when they want to give birth. In addition to the limitations of transportation facilities, transportation costs are also a factor that affects the non-implementation of Article 14 Paragraph 1 of the Minister of Health Number 97 of 2014 regarding childbirth in health care facilities in Tolangohula Sub-district, Gorontalo Regency. Transportation costs depend on the distance traveled on the way to health care facilities. The factors of means and transportation are factors that enable and support health services. Transportation facilities will make it easier for people to reach health facilities. If these health facilities are easily accessible using available transportation, then these health facilities will be widely used by the community.

5. Maternal Age at Childbirth

The term age is the length of life. In general, women who give birth at an age that is too young or too old have a high risk of complications during childbirth. The age factor is one of the considerations that influence the reasons for choosing a place of delivery by mothers in the village who are afraid of the risks that occur during childbirth. There were

³⁵Mohamad Rivaldi Moha. (July, 2020). Urgensi Pendaftaran Penyelenggara Sistem Elektronik Bagi Pelaku Usaha E-Commerce. JALREV 2 (2), 115

³⁶Fence M. Wantu. (Juni, 2013). Kendala Hakim Dalam Menciptakan Kepastian Hukum, Keadilan, Dan Kemanfaatan Di Peradilan Perdata. Jurnal Mimbar Hukum. 25 (2), 206

2 (two) out of 10 (ten) people in this study who chose to give birth in a health care facility because of the risk factors for delivery complications, namely being too old and too young at the time of delivery.

The safest maternal age for giving birth is 20-35 years because women at the age of 20 years the uterus and other body parts are ready to accept the pregnancy and at that maternal age are ready to become a mother. A pregnancy that occurs at an age that is too early, namely less than 20 years, and too old, which is more than 35 years, is a high risk. Pregnancy at a young age will be riskier with complications at the time of delivery, the baby to be born later is more difficult to pass through the diameter of the mother's pelvic cavity that has not been maximized. Too old age in pregnancy is also a risk of complications at the time of delivery, such as bleeding. This has resulted in women who are either too young or too old being stressed to give birth in health care facilities and assisted by a midwife or doctor.

Bambang Sunggono's explanation above is clear that the content of the policy is one of the inhibiting factors for the implementation of Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 regarding delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency. This was shown by the results of research conducted by the author where based on the results of interviews with the head of the Public Health Center Tolangohula Sub-district, Gorontalo Regency that one of them was related to the lack of health workers and human resources who were deployed in the field were also not adequate, and this was also exacerbated by the unpreparedness of the community in accepting policies implemented by the Gorontalo Regency Regional Government, in this case, the Health Department.³⁷ Another acknowledgment was also conveyed by one of the mothers who had given birth to a child that so far there have been many policies related to childbirth problems that were not known to pregnant women, so that the choice of giving birth, not in a health facility was the last option, even though the risk of giving birth outside of a health facility was very large. Based on this condition, the ultimate goal is to assist delivery in a systematic, correct, and safe manner, so that the mother and baby are safe with the least possible trauma. Through the hands of midwives, it is hoped that they will be able to carry out these goals by placing them in health facilities that are truly appropriate and close to the community.

In the results of the study, it was revealed that the factors that inhibited the implementation of Article 14 Paragraph 1 of the Regulation of Minister of Health Number 97 of 2014 related to delivery in health care facilities in Tolangohula Sub-district, Gorontalo Regency, as interviewed with respondents, it was known that respondents who did not use health workers as birth attendants had reasons because of their location are far from health facilities that support childbirth. Another reason given by the

³⁷ Wawancara bersama Kepala Puskesmas Kecamatan Tolangohula Kabupaten Gorontalo.

respondents was that they did not have any means of transportation or communication tools to pick up/contact the midwives in the village. The inhibiting factor would be more severe when the respondent gives birth at night. In the working area of the Public Health Center Tolangohula, there were still pregnant women who chose traditional birth attendants because they are their neighbors, their attitude towards the community is better, they are visited every day, their babies are cared for until the age of 40 days, the distance from the traditional birth attendant is closer and the lack of transportation also affected the selection of birth attendant at the shaman.

Most of the respondents with affordable access to health facilities chose a midwife to assist in childbirth, and most of the respondents who had no access to health services chose a traditional birth attendant to assist in their delivery. Respondents who choose delivery assistance by traditional birth attendants are generally people whose houses are closer to the traditional birth attendant, while respondents who choose birth assistance by midwives need more time to get services because of the longer distance. The success of policy implementation requires that the implementer knows what to do, where the goals and objectives of the policy must be transmitted to the target group so that it will reduce implementation distortions.³⁸

III. CLOSING

A. Conclusion

Policy implementation failed because the content of the policy was still unclear, meaning that the objectives were not detailed enough, the means and application of priorities, or the policy programs were too general or did not exist at all. Second, because of the lack of internal and external provisions of the policies to be implemented. Third, the policies to be implemented may also show significant deficiencies. Fourth, other causes of failure to implement a public policy can occur due to deficiencies involving auxiliary resources, for example, those concerning time, cost/funds, and human labor.

B. Suggestion

Legal awareness of the local community, especially pregnant women, so that they could take advantage of the facilities provided by the government in the form of Public Health Center and Auxiliary Health Center and even the nearest hospital, this is to ensure the safety of mothers and children as well as reduce the risk of maternal and child mortality

³⁸ Ismail Nawawi. *Public Policy*. (Jakarta: ITS Press, 2019), 136

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