

phase is formulating and has been done by government that include the concept formulation, harmonization and public test.

The government makes serious effort to increase the regulation effectiveness and policy in social security sector with considers the data and information. One of information that needed is comprehensive and region readiness and the stakeholders in region to implementation of SJSN.

The regional government of central java (health service in central java province) cooperates with Public Health - Diponegoro University and Germany government (GTZ- Social Health Insurance Project) mapping and studies with critically the readiness and capability the stakeholders in region in implementation of SJSN.

Attention of realization regulation in the law of SJSN are mapping and studies all main stakeholders to the power level, interest and attitude. From this mapping and studies to all main stakeholders in region can be focused in evaluated based on the perception from each stakeholder to the power level, interest level and attitude level. The information about various that gaps was a valuable input to arrange various alternative of strengthening capacity strategy suitable the required priority and or group or individual that can influence or can be influenced by target from the aim of organization.

METHOD

Classification of stakeholders in program/innovation project there are *Decision maker* determine the requisite that related with innovation and appraise what that the innovation is suitable with requisite that is determined. *Designer/provider* : Activity implementer slightly distorted their capability in innovation process and responsible to disappear them. *Client* : Client is a side that mean serviced through innovation. *Passively involved*; *Representative* : The side who not related directly is side that struck the output from innovation project without can influence that output. *Representative* is one man who is choice to do representation the other people. (Janita F.J. Vos and Marjolein C. Achterkamp B, 2006)

**STAKEHOLDERS AND INSTITUTION MAPPING IN DISTRICT / CITY
AT CENTRAL JAVA IN THE FRAMEWORK OF THE SJSN – JK
IMPLEMENTATION PREPARATION**

**PEMETAAN STAKEHOLDERS DAN INSTITUSI DI JAWA TENGAH DALAM
KERANGKA PERSIAPAN IMPLEMENTASI SJSN-JK**

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ABSTRACT

Diundangkannya UU SJSN pada tanggal 19 Oktober 2004, seluruh peraturan pelaksanaan yang didelegasikan dari pasal-pasal UU No. 40 / 2004 masih dalam proses penyusunan. Tujuan penelitian ini adalah melakukan pemetaan dan telaah terhadap semua pemangku kepentingan utama di daerah terkait implementasi SJSN sesuai dengan peran masing-masing (decision maker, provider, client, representative). Studi pemetaan pemangku kepentingan dilakukan dengan melakukan indepth interview terhadap stakeholder baik pemerintah maupun non pemerintah yang terkait dengan pelaksanaan SJSN. Penelitian ini meliputi Propinsi Jawa Tengah. Fokus penilaian berdasarkan persepsi dari masing-masing pemangku kepentingan terhadap tingkat pengaruh (*power*), tingkat keterlibatan (*interest*) dan sikap (*attitude*) terhadap 9 prinsip sesuai UU No. 40 tahun 2004. Selanjutnya dipetakan berdasarkan label dari para stakeholder yang meliputi : Penyelamat, Raksasa Tidur, Kawan, Pemerhati, Jebakan, Pengganggu, Bom Waktu, Penyabotase. Hasil dari penelitian ini antara lain Pada pemetaan pemangku kepentingan, sebagian besar kelompok pemangku kepentingan tingkat Propinsi Jawa Tengah cenderung berada pada posisi sebagai kawan dalam implementasi SJSN. Pemangku kepentingan yang kemungkinan paling siap adalah Bappeda Jateng karena hasil identifikasi posisinya adalah 100% sebagai Penyelamat. Kesimpulan yang dapat ditarik dari penelitian ini adalah semua prinsip SJSN-JK mendapatkan dukungan dari pemangku kepentingan di Jawa Tengah, selain prinsip nirlaba.

Kata Kunci : SJSN-JK, stakeholders, pemetaan, prinsip, label

BACKGROUND

Appropriate with law of the 1st verse no.40/2004 about SJSN/JK, social security is one of the social protections to secure all of society in order to fulfill their proper basic necessities. Whereas, the definition of national social security system is a manner of social security program realization by several social security realization board. Thus, National social security system is one of government policy to realize society prosperity through social insurance fund mobilization, which is not indirect effort to save the national saving to public health payment. After 36 months, the law of SJSN published in 19th October 2004, all realization regulation that delegated from verses of law No.40/2004 still in arrange process. Suitable with determine of the law No.10/2004 about constitution formulation and the realization regulation, various process

Table 1 Relevance Matrix of Stakeholder Role and the Nine of SJSN-JK realization principles

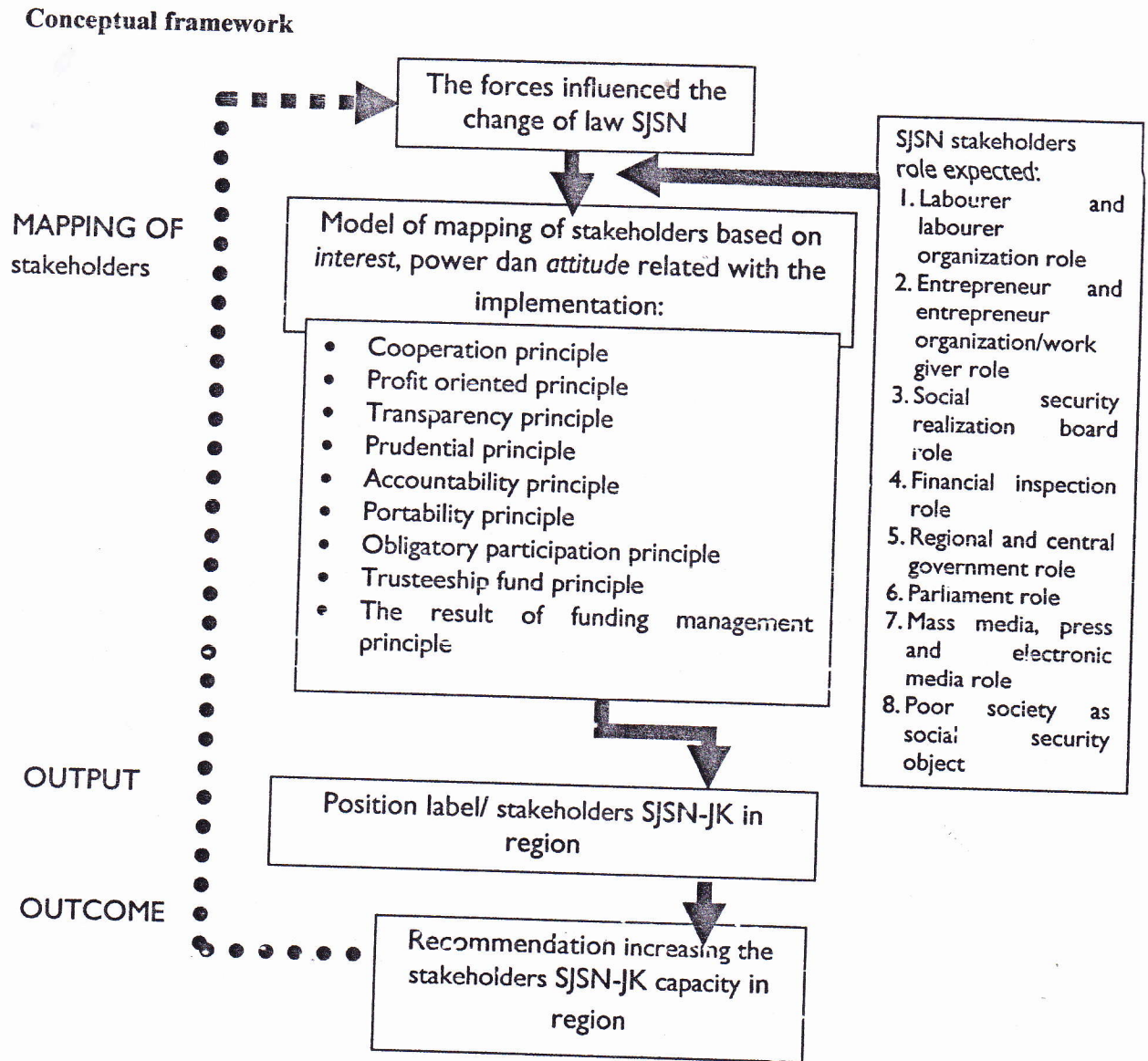
stakeholder principle	<i>Decision maker</i> (government and parliament element)	<i>Designer/provider</i> (hospital, health operational, drugstore element)	<i>Client</i> (public center, board, work giver, work , society element)	<i>Representatives</i> (NGO, mass media element)
Cooperation	+	-	+	+
Profit Oriented	+	+	-	+
Transparency	+	+	-	+
Prudential	+	+	-	+
Accountability	+	+	-	+
Portability	+	+	-	+
Obligatory participation	+	-	+	+
Trusteeship fund	+	+	-	+
Fund management result	+	+	-	+

Table 2 The stakeholders mapping based on three dimensional

Lucidus Consulting Ltd. (Webster & Simon, 2005).

Attitude	Influence	Involving	Label	Rank*)	Adoption level
Support	strong	Active	Savior	I	faster
		Passive	Sleeping giant	II	
	weak	Active	Friend	III	
		Passive	acquaintance	IV	
Not support/refuse	strong	Active	Saboteur	VIII	slower
		Passive	Time bomb	VII	
	weak	Active	Irritant	VI	
		Passive	Trap wire	V	

*) the interpretation of rank result, based on problem risk level which is most minimal (Positive)



Picture 1 The framework of concept the mapping and recommendation in increasing the institution and stakeholder capacity in implementation of SJSN-JK principle in region (Robbin, 1993; ministry of society prosperity coordinator of Indonesia, 2006).

Semarang City

Table 4 Disposition Adoption Level of The SJSN-JK realization Principle Based on Identification result of Stakeholders Position in Semarang City

No	Stakeholders group	Components of stakeholder	Position identification (in 9 principles)	Worst rank (Label)	Disposition of adoption level
1	DECISION MAKER	DPRD	▪ Savior : 9	Savior	FASTER
		Transmigration and Labor Service	▪ Savior : 1 ▪ Friend: 8	Friend	SLOWER
		SEMARANG City Health Service	▪ Friend: 9	Friend	SLOWER
2	PROVIDER	RSUD Semarang City	▪ Friend: 7	Friend	SLOWER
		RS PANTI WILASA	▪ Friend : 5 ▪ Irritant : 2	Irritant	SLOWER
		Health Fund	▪ Savior : 2 ▪ Friend : 4 ▪ Irritant : 1	Irritant	SLOWER
		Public Health Center	▪ Savior : 2 ▪ Friend: 5	Friend	SLOWER
		Drugstore	▪ Friend : 7	Friend	SLOWER
3	CLIENT	APINDO	▪ Acquaintance : 1 ▪ Trap wire: 1	Trap wire	SLOWER
		SPSI	▪ Friend: 2	Friend	SLOWER
		Informal Laborer	▪ Friend: 1 ▪ Irritant : 1	Irritant	SLOWER
4	REPRESENTATIVE	WAWASAN newspaper	▪ Acquaintance : 7 ▪ Trap wire : 2	Trap wire	SLOWER
		KRISIS NGO	▪ Savior : 9	Savior	FASTER

Stakeholder in Semarang city that the number was 13 have classified in decision maker group (DPRD, Dinkes, Disnakertrans), provider (RSUD, Panti Wilasa hospital, Halmahera public health center, Gayamsari Drugstore, the manager of fund health), client (sundries trader, APINDO, SPSI) and representative group (Krisis NGO and Wawasan daily newspaper).

Stakeholder group of decision maker in Semarang city supported fully the SJSN principles and ready to involve actively in implementation all of SJSN-JK principles. But, this group felt less of influenced the implementation that principles. The implementation of activity group in Semarang city have strong support and desire to involve actively in implementation the all of SJSN-JK principle, except cooperation principle and obligatory participation because they felt not have role in this principle.

FINDING AND ANALYSIS

Level of Central Java Province

Table 3 Disposition Adoption Level of The SJSN-JK realization Principle Based on Identification result of Stakeholders Position in Central Java Province Level

No	Stakeholders group	Components of stakeholder	Position identification (in 9 principles)	Worst rank (Label)	Disposition of adoption level
1	DECISION MAKER	BAPPEDA	<ul style="list-style-type: none"> ▪ Savior: 9 	Savior	FASTER
		Health Service	<ul style="list-style-type: none"> ▪ Savior: 1 ▪ Friend 1 ▪ Sleep giant : 2 ▪ Acquaintance: 5 	Acquaintance	SLOWER
		Transmigration an Labor Service	<ul style="list-style-type: none"> ▪ Friend : 8 ▪ Irritant : 1 	Irritant	SLOWER
		Social Prosperity Service	<ul style="list-style-type: none"> ▪ Savior : 4 ▪ Friend : 5 	Friend	SLOWER
2	PROVIDER	RSUP Kariadi Dr.	<ul style="list-style-type: none"> ▪ Savior: 1 ▪ Friend : 3 ▪ Acquaintance : 1 ▪ Sleep giant : 1 ▪ Trap wire : 1 	Trap wire	SLOWER
		PT. Jamsostek (persero)	<ul style="list-style-type: none"> ▪ friend: 6 ▪ Irritant: 1 	Irritant	SLOWER
3	REPRESENTATIVE	YPKKI	<ul style="list-style-type: none"> ▪ Savior : 3 ▪ Friend : 5 ▪ Saboteur : 1 	Saboteur	SLOWER

Seven of stakeholders in Central Java province level were classified to four groups, they were decision groups (Bappeda, Dinkes, Dinkesos and Disnakertrans), the implementer of activity (RSUP Dr. Kariadi and PT Jamsostek) representative group (YPKKI). Stakeholder group of decision maker gave the strong support to implementation of SJSN-JK principles. Majority of stakeholder looked still have a weak influenced, but wanted to take part actively in implementation of nine SJSN-JK principles. The representative group has strong support and wanted to involve actively in implementation of nine SJSN-JK principles, but still weak in for influencing the way of nine SJSN-JK principles. In stakeholder mapping, majority of stakeholder in central java region inclined in position as friend in implementation of SJSN. The stakeholder that probably more ready was Bappeda Jateng because the identification result of position was 100% as savior.

Table 5 Disposition Adoption Level of The SJSN-JK realization Principle Based on Identification result of Stakeholders Position in Klaten District

No.	Stakeholders group	Stakeholders components	Position identification (in 9 principles)	Worst rank (Label)	Disposition Adoption Level
1	DECISION MAKER	DPRD	<ul style="list-style-type: none"> ▪ Savior : 8 ▪ Friend: 1 	Friend	SLOWER
		Bappeda	<ul style="list-style-type: none"> ▪ Savior: 6 ▪ Friend: 3 	Friend	SLOWER
		Social Division Local Government	<ul style="list-style-type: none"> ▪ Savior: 8 ▪ Saboteur : 1 	Saboteur	SLOWER
		Transmigration and Labor Service	<ul style="list-style-type: none"> ▪ Savior: 3 ▪ Friend: 2 ▪ Acquaintance: 4 	Acquaintance	SLOWER
		City Health Service	<ul style="list-style-type: none"> ▪ Savior: 3 ▪ Sleep Giant: 3 ▪ Friend: 1 ▪ Acquaintance: 1 ▪ Irritant: 1 	Irritant	SLOWER
		RSU Pusat S T	<ul style="list-style-type: none"> ▪ Friend: 2 ▪ Sleep Giant: 1 ▪ Acquaintance: 4 	Acquaintance	SLOWER
		RSI Klaten	<ul style="list-style-type: none"> ▪ Savior : 2 ▪ Friend: 1 ▪ Acquaintance : 3 ▪ Irritant : 1 	Irritant	SLOWER
2	PROVIDER	JPKM operational Institution	<ul style="list-style-type: none"> ▪ Savior: 7 	Savior	FASTER
		Health Fund Management	<ul style="list-style-type: none"> ▪ Acquaintance: 4 ▪ Sleep Giant: 1 ▪ Trap wire: 1 ▪ Time Bomb: 1 	Time Bomb	SLOWER
		Public Health Center Rajal	<ul style="list-style-type: none"> ▪ Savior: 5 ▪ Sleep Giant: 1 ▪ Friend: 1 	Friend	SLOWER
		Public Health Center Ranap	<ul style="list-style-type: none"> ▪ Acquaintance: 6 ▪ Trap wire : 1 	Trap wire	SLOWER
		Drugstore	<ul style="list-style-type: none"> ▪ Savior: 1 ▪ Friend: 6 	Friend	SLOWER
		3	CLIENT	SPSI	<ul style="list-style-type: none"> ▪ Savior : 1 ▪ Time Bomb : 1
Informal Laborer	<ul style="list-style-type: none"> ▪ Acquaintance: 2 			Acquaintance	SLOWER
4	REPRESENTATIVE	Mass Media	<ul style="list-style-type: none"> ▪ Savior: 5 ▪ Friend: 2 ▪ Sleep Giant : 1 ▪ Trap wire : 1 	Trap wire	SLOWER
		NGO	<ul style="list-style-type: none"> ▪ Savior : 2 ▪ Acquaintance : 7 	Acquaintance	SLOWER

To two principles that relevant with target stakeholder group was cooperation principle and obligatory principle, majority this stakeholder group gave the strong support and ready to involve actively in implementation of those principles. But, they felt very weak to influence the implementation the cooperation principle and obligatory participation principle. The representative stakeholder group that included from LSM element and mass media supported the implementation of SJSN principles. Generally, majority of stakeholder group in Semarang city inclined in position as friend in implementation of SJSN. The stakeholder that had position as savior was DPRD and NGO only. But, they explained will help in transparency or monitoring of fund management limited or suitable with their position.

Klaten District

The stakeholder in Klaten district was shared in four group, they were the decision maker ((DPRD, Bappeda, social sector in local government, Disnakertrans, DKK), provider (RSUP Soeradji T, Islamic hospital in Klaten, Puskesmas Rajal, Puskesmas Ranap, Drugstore, the manager of fund health, Bapel JPKM), client (SPSI, informal laborer) and representative (mass media, NGO). Stakeholder group of decision maker in Klaten district had strong supported attitude to implementation of SJSN-JK, beside that, they explained too have strong power and had desire to take part actively in implementation all of SJSN-JK principle.

Provider in Klaten district had strong support and desire the strong support that enough to take part actively in implementation all of SJSN-JK principles. But, majority of them have strong power in transparency principle only and weak in six other principles. The majority of client stakeholder group had strong support in implementation of cooperation principle and obligatory participation, but they had weak power and involve passively in implementation of that principle. The representative stakeholder group had strong support in implementation of nine of SJSN-JK in influenced the cooperation principle but weak in implementation other principle. Beside that, in cooperation principle and fund management principle, only where all of stakeholder ready to involve actively. Provider stakeholder group element (Bapel JPKM) precisely the stakeholder that evaluated the most ready based on their position as savior.

actively in implementation all of SJSN-JK principle. Implementation of SJSN-JK principles got the strong support from provider stakeholder group. Beside that, this group evaluated too that they have power in implementation that principles.

Client stakeholder group gave the support to obligatory participation principle, but majority from them less of support in cooperation principle. In obligatory participation Principle, majority of component explained that they ready to involve actively in implementation that principle, but not in cooperation principle. Stakeholder group that included from society representative as this client evaluated that they have not power in implementation of SJSN-JK principle.

Representative stakeholder group that representative by this one NGO, there were two principles that not have support, those are cooperation principle and transparency principle. In cooperation principle, transparency and fund management principle, the stakeholder evaluate that they have not power. Although, this representative stakeholder ready to involve actively in implementation of SJSN-JK principle.

Stakeholder group in Purbalingga district although various, but have inclined in dominant position that same relative, especially from decision group and provider with dominant position as savior.

CONCLUSION

Generally, the all SJSN-JK principles gave the support from stakeholder in four regions. Support came from majority of stakeholder both from decision maker, provider, client and representative. But, one principle was profit oriented that less of giving the support because the stakeholder thinking about the operational cost if really not allow took the data. From the power side, majority the stakeholder evaluated that they have not power in SJSN-JK principle. Based on the attitude, they power and involve in implementation of SJSN-JK principle, the stakeholder were intoxicated in their position in mapping of stakeholder. Position of stakeholder in four regions was various started from the most positive, there was as savior to the most negative, and there was as saboteur.

Purbalingga District

Table 6 Disposition adoption Level of SJSN-JK principle implementation Based On Result of stakeholders Position Identification in Purbalingga district

No	Components of Stakeholder	Stakeholders	Position identification (to 9 principles)	Worst (Label)	Rank Disposition Adoption Level
1	DECISION MAKER	DPRD	▪ Savior : 9	Savior	FASTER
		SETDA	▪ Savior: 9	Savior	FASTER
		Planning family and Social Health	▪ Savior: 2	Irritant	SLOWER
			▪ Friend: 3		
			▪ Acquaintance : 2		
		Transmigration and Labor Service	▪ Irritant: 1	Irritant	SLOWER
▪ Trap wire: 1					
City Health Service	▪ Savior: 9	Savior	FASTER		
2	PROVIDER	RSUD (region general hospital)	▪ Savior : 2	Irritant	SLOWER
		Private Hospital	▪ Friend : 4		
			▪ Irritant : 1		
		PT ASKES PURBALINGGA	▪ Acquaintance: 7	Acquaintance	SLOWER
		PT ASKES BANYUMAS Branch	▪ Friend : 6	Acquaintance	SLOWER
			▪ Acquaintance: 1		
		JPKM operational Institution	▪ Sleep Giant : 6	Acquaintance	SLOWER
		▪ Acquaintance: 1			
		Public Health Center RAJAL	▪ Savior: 7	Savior	SLOWER
			▪ Friend: 6	Friend	SLOWER
▪ Friend: 1					
Public Health Center RANAP	▪ Sleep Giant : 7		Sleep Giant	SLOWER	
Drugstore	▪ Sleep Giant: 7	Sleep Giant	SLOWER		
3	CLIENT	GAPEKNAS	▪ Trap wire :1	Saboteur	SLOWER
		SPSI	▪ Saboteur : 1		
			▪ Acquaintance: 2	Acquaintance	SLOWER
INFORMAL Laborer	▪ Friend: 7	Friend	SLOWER		
4	REPRESENTATIVE	NGO	▪ Savior: 3	Irritant	SLOWER
			▪ Friend: 1		
			▪ Irritant: 5		

The stakeholder in Purbalingga was classified in four groups, they are the decision maker ((DPRD, Setda, DKKS, Disnakertrans, DKK), provider ((RSUD, Private hospital, Bapel JPKM, PT Askes, Puskesmas Rajal, Puskesmas Ranap, Drugstore), client (GAPEKNAS, SPSI, Informal laborer) and representative (NGO).

The decision stakeholder group in Purbalingga district have strong support and strong enough power in implementation all of SJSN-JK principles. Beside that, they desired too to involve

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