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Implementation of health services policy related to treating the problems of mental disorders in the city of Padang Panjang, Indonesia

Aris Tristanto

Faculty of Social and Political Sciences· Universitas Bengkulu, Indonesia

Yunilisiah

Faculty of Social and Political Sciences· Universitas Bengkulu, Indonesia

Tamrin Bangsu

Faculty of Social and Political Sciences· Universitas Bengkulu, Indonesia

Sakroni

Politeknik Kesejahteraan Sosial, Bandung, Indonesia

Correspondence author email: sakroni2@gmail.com

Abstract--This researcher uses the perspective of implementing the problems approach introduced by Edwards III in 1984. The data analysis method in this study is qualitative with a descriptive analytic approach. This study uses primary data and secondary data where data collection is carried out through field studies and literature studies. As for taking samples using a purposive technique. Based on the results of the study, it is known that the communication carried out by the Padang Panjang City Health Office is effective. When viewed from the human resources in terms of quality and quantity is still not sufficient. On the aspect of disposition, it can be said that all of them are positive without any resistance. In doing services in the health sector related to handling mental disorders, the Padang Panjang City Health Office does not yet have a standard operating procedure. In this study, researchers provide suggestions that Padang Panjang City Health Office to improve human resources and budget resources. In addition, the researchers also suggested that the Padang Panjang City Health Office immediately make standard operating procedures in giving health services related to the handling of mental disorders.

Keywords---Policy Implementation, Mental Disorders, Padang Panjang.

Introduction

Since the reform era, government affairs have been gradually handed over from the central government to local governments and this is in accordance with Article 18 paragraph (6) of the 1945 Constitution which states that regional governments carry out the widest possible autonomy (Christia & Ispriyarso, 2019; Santoso, 2009). The last regulation that regulates the division of affairs between the Central Government and Regional Governments is Law Number 23 of 2014 which is a substitute for Law Number 32 of 2004. In Law 23 of 2014 concerning Regional Government, health is one of the six affairs mandatory and related to basic services (Sanjaya, 2015; Wijayanti, 2016).

Because the condition of the capacity of local government resources throughout Indonesia is not the same in carrying out these affairs, the implementation of these affairs is regulated with minimum service standards to ensure the availability of these services for all citizens (Aprilla, 2020; Santoso, 2009; Zudi et al., 2021). Minimum service standards are provisions regarding the type and quality of basic services which are mandatory government affairs which are at least entitled to be obtained by every citizen (Aprilla, 2020; Umar, 2017; Zudi et al., 2021). Minimum Service Standards have two functions, namely 1) facilitating local governments to provide decent public services for the community; 2) as an instrument for the community in controlling government performance in the field of public services (Kadarisman & Gemiharto, 2017; Umar, 2017).

Minimum service standards with this new concept underwent a fairly basic change from the previous concept. Previously, the minimum service standard achieving the minimum service standard target was more a health program performance, at this minimum service standard the achievement of the target is more directed at the performance of the local government. (Kadarisman & Gemiharto, 2017; Kuzairi et al., 2017; Yanti, 2020). The achievement of the minimum service standard target, together with other priority programs, is an indicator of the good or bad performance of regional heads and as stipulated in Law 23 of 2014 there are certain consequences for these achievements or failures. indicator.

In the context of implementing minimum service standards in the health sector, technical instructions are needed that explain the operational steps for achieving them in the Regency/City as a reference for local governments by taking into account the potential and capabilities of the region. Therefore, the Ministry of Health as the ministry that carries out government affairs in the health sector is obliged to prepare technical guidelines and instructions in the preparation of plans for the fulfillment of basic services and procedures for implementing the fulfillment of basic services. This was carried out by the Ministry of Health through Minister of Health Regulation Number 4 of 2019 concerning Technical Standards for Fulfilling Basic Service Quality in Minimum Service Standards in the Health Sector. (Aprilla, 2020; Syahputra, 2021; Yanti, 2020).

The minister of health regulation contains two types of services and the quality of provincial minimum health service standards as well as twelve types of services and the quality of district/city minimum health service standards (Aprilla, 2020; Kuzairi et al., 2017). Two types of services and the quality of minimum service standards in the health sector for the province include health services for residents affected by health crises due to disasters or potential disasters in the province, and health services for residents in extraordinary circumstances (Bakhtiar, 2021; Rizki, 2020)

Meanwhile, there are twelve types of minimum district/city health service quality standards, namely: 1) the health of pregnant women; 2) maternal health services, 3) newborn health services; 4) toddler health services; 5) health services at the age of basic education; 6) health services for productive age, 7) health services for the elderly; 8) health services for people with hypertension; 9) health services for people with diabetes mellitus; 10) health services for people with severe mental disorders; 11) health services for people suspected of having tuberculosis and; 12) health services for people at risk of HIV infection (Aprilla, 2020; Bakhtiar, 2021; Zudi et al., 2021).

Of the twelve types of district/city minimum health service quality standards, health services for people with mental disorders are currently the main concern. The importance of services for people with mental disorders because one in four adults will experience a mental health problem at some point in their life. In fact, every 40 seconds somewhere in the world, someone dies by suicide. WHO data in 2017 shows that about 300 million people are affected by depression, 60 million people are affected by bipolar, 21 million are affected by schizophrenia, and 47.5 million are affected by dementia.

Meanwhile, in Indonesia, based on the results of basic health research in 2018, it showed a significant increase in the prevalence of households with people with mental disorders in Indonesia. There was an increase from 1.7 per mile in 2013 to 7 per household mile in 2018, meaning that per 1000 households there are 7 households with people with mental disorders, so the number is estimated at around 450 thousand people with severe mental disorders with treatment coverage. 84.9% (Ministry of Health, 2018). More clearly can be seen in the following diagram:

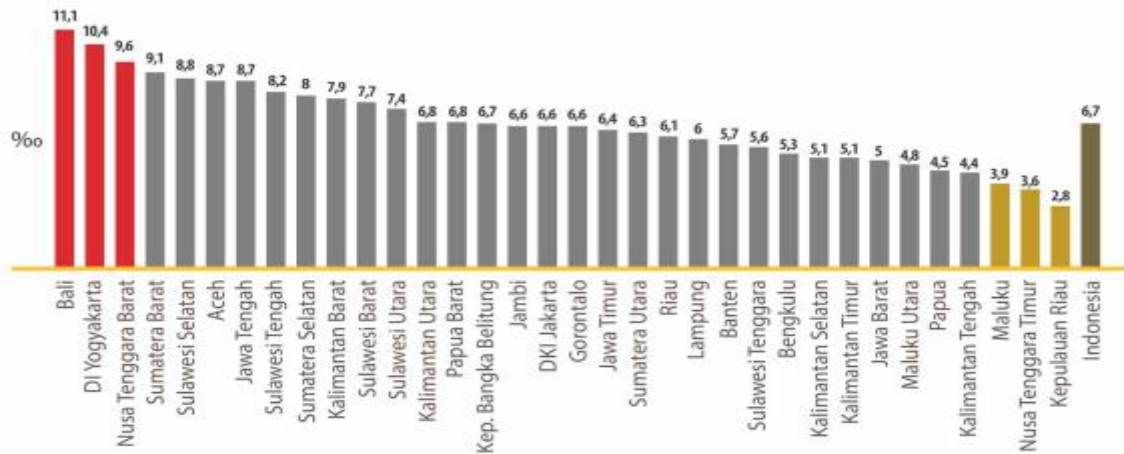


Figure 1: The highest prevalence of mental disorders in Indonesia
Source: Basic Health Research Results (Riskesdas) 2018

The highest prevalence of mental disorders in Indonesia is in Bali Province, which is 11.1 per mile, followed by DI Yogyakarta at 10.4 per mile, West Nusa Tenggara 9.6 per mile, and West Sumatra in fourth place at 9.1 per mile. Based on the prevalence results, researchers are interested in focusing on conducting research in the province of West Sumatra with a study in the city of Padang Panjang. The choice of Sumatra Province was because West Sumatra Province was included in the top five with the highest prevalence of mental disorders in Indonesia.

The researcher's consideration for choosing the city of Padang Panjang as the research location is the city of Padang Panjang, the smallest city in West Sumatra Province with an area of 23 km² or only 0.05% of the area of West Sumatra. However, the number of people with mental disorders continues to grow. Where in 2019 as many as 114 people with mental disorders, in 2020 as many as 116 people with mental disorders, and in 2021 as many as 117 people with mental disorders (Department of Health of the City of Pandang Panjang, 2021).

In this study, researchers wanted to see how the Padang Panjang City government supports health care programs for people with severe mental disorders in accordance with the mandate of the applicable law. To see the extent to which government support can be seen from the policies or regulations that have been set, funds that support the implementation of activities, human resources, and facilities and infrastructure. Based on this, the researcher will see it from the perspective of applying the problem approach. This paper is expected to provide benefits and input, as well as be a consideration for decision makers in the context of reviewing and establishing various policies related to the handling of mental disorders.

Method

The research was conducted in Padang Panjang City, West Sumatra Province. This research uses qualitative data analysis method with analytical descriptive approach. The research design used is in the form of sentences or narrative texts. This study uses primary data and secondary data where data collection is carried out through field studies and literature studies. The sample uses a purposive sampling technique, which is a sampling technique carried out by selecting a sampling unit on the basis of certain considerations or the consideration of a group of experts in the field of science being studied. The samples in this study were regional organizations that handle social and health problems for people with mental disorders, namely the Padang Panjang City Health Office, and the Padang Panjang City Regional General Hospital.

Results and Discussion

Results

Although the government has issued several laws and regulations governing the importance of mental health efforts, in reality the problem of mental disorders continues to increase every year, one of which is in the Province of West Sumatra. This statement was further strengthened by the quote from the Haluan Daily media interview with the Head of the West Sumatra Provincial Social Service which stated that the number of cases of people with mental disorders in West Sumatra was still relatively high, where there were still many people with mental disorders. disorders who are victims of shackles (Tanjung, 2017).

Based on the health profile of West Sumatra Province, it is estimated that there are 10,816 people with mental disorders in West Sumatra spread over 19 districts/cities in West Sumatra, one of which is Padang Panjang City (West Sumatra Provincial Health Office, 2020). Based on the health profile of the Padang Panjang City Health Office, in 2021 the number of people with mental disorders in Padang Panjang City will be 117 people with mental disorders (Padang Panjang City Health Office, 2021). If seen from the distribution of 16 sub-districts in Padang Panjang City, it can be seen in the following table.

Table 1
Distribution Of People With Mental Disordersin in Padang Panjang City

Ward	Gender		Total
	Man	Woman	
Bukit Surungan	2	4	6
Pasar Usang	6	5	11
Silaing Bawah	7	7	14
Silaing Atas	2	5	7
Kampung Manggis	9	5	14
Pasar Baru	2	2	4
Balai-Balai	6	2	8
Tanah Hitam	4	4	8

Koto Panjang	4	7	11
Koto Katiak	0	1	1
Guguk Malintang	7	5	12
Tanah Pak Lambiak	1	4	5
Ganting	3	0	3
Ngalau	5	1	6
Sigando	0	1	1
Ekor Lubuk	3	3	6
Amount	61	56	117

Source: Padang Panjang City Health Office

Based on the data above, it is known that the number of people with male mental disorders in Padang Panjang City is more than people with female mental disorders. The classification of the population based on gender is important so that the government can determine policies and develop gender-based service programs. The three areas with the highest distribution of people with mental disorders in Padang Panjang City are in Silaing Bawah Village, Kampuang Manggis Village, and Guguk Malintang Village. The three areas are classified as elite areas in Padang Panjang City, with the main livelihoods of the residents being state civil servants and businessmen.

When viewed from the productive age measured by the age range according to WHO, the Padang Panjang City Health Service noted that 85% of people with mental disorders in Padang Panjang City are in the productive age, namely between 15 and 64 years, while those who are not productive are aged 64 years and older. over 10%. For the unproductive age, which is under 15 years, it is 5% (Department of Health of the City of Pandang Panjang, 2021).

In providing health to people with mental disorders, the Padang Panjang City Government appointed the Padang Panjang City Health Office as the leading sector for handling mental disorders in Padang Panjang City. In carrying out their duties, they are guided by the Mayor of Padang Panjang Regulation Number 15 of 2018 concerning Minimum Service Standards in the Health Sector in the City of Padang Panjang.

The regulation explains that the duties and authorities of the Health Office in the field of mental health are to provide services and access to correct communication, information, and education to the public about mental health, as well as to organize the development of human resources in the mental health sector. health. In its implementation in the field, which provides services and access to communication, information and education to the public about mental health, is a community health center which is an extension of the Regional Technical Implementation Unit for Health Services. Things such as excerpts of the researcher's interview with the health program holder at the puskesmas:

"In Padang Panjang City, there are four community health centers, each of which accommodates four families. The task and authority of the public health center in mental health services is to provide promotive and preventive services aimed at improving mental health and preventing relapse. Mental health promotive services

include education to families and evaluation of signs and symptoms of mental disorders, medication adherence and other information related to mental health.

Although the provision of services and access to communication, information and education to the public is carried out by the Padang Panjang City Health Office through the community health center, every year the Padang Panjang City Health Service through the Disease Prevention and Control Division conducts socialization related to the supervision of taking medication to the families of patients with mental disorders. This activity is held once a year, with a total of 42 participants.

Meanwhile, the development of human resources in the field of mental health is carried out by the Health Service through the Division of Disease Prevention and Control to the managers of the Mental Health program at the four existing public health centers. This activity is budgeted three times a year according to a predetermined budget.

Based on the Padang Panjang City Government budget transparency portal related to budget transparency, it is known that the budget allocated for handling mental disorders in 2022 is Rp11,363,000. This budget is the smallest budget compared to health services for other diseases. If you look at the last two years the budget has decreased, where in 2021 the Padang Panjang City Health Office has budgeted a budget for handling mental disorders of Rp. 29.920,000, - While in 2020 it is included in the public health improvement budget with almost the same amount.

In addition, in the field implementation related to handling people with mental disorders, the Padang Panjang City Health Office involves various types of regional organizational activities, through synergy, integration and coordination with various sectors. This is in line with what was conveyed by the Head of the Prevention and Control of Non-Communicable Diseases, Mental Health and Drugs at the Padang Panjang City Health Office through the following interview:

"The handling of people with mental disorders in Padang Panjang City is not only carried out by the Health Office, but also involves various parties." Other regional organizations such as the Padang Panjang City General Hospital, the Social Service, the Health Social Security Administration, the Padang Panjang City Civil Service Police Unit. This was carried out because we, from the health department, of course only carried out tasks related to the health sector, such as patient diagnosis and drug administration. As for rehabilitation, it is no longer the responsibility and authority of the health department" (Interview with the Head of the Prevention and Control of Non-Communicable Diseases, Mental Health and Medicine, Padang Panjang City Health Office).

Furthermore, as described above, in an effort to implement the handling of people with mental disorders in Padang Panjang City, it is carried out by multi actors, each actor involved has duties and responsibilities in accordance with their respective fields of service. As is the case with the Padang Panjang City General Hospital which provides health services to people with mental disorders through a mental polyclinic which opens on Tuesdays every week. The health services provided are in the form of treatment and health restoration in accordance with

hospital service standards. The mental polyclinic of the Padang Panjang City general hospital only maintains and improves the health of people with mental disorders through outpatient services. This was done because of the lack of psychiatrists at the hospital.

In addition to treatment, one of the efforts of the Padang Panjang city general hospital in providing services to patients is through Hospital Health Promotion. Hospital Health Promotion is a hospital effort to improve the ability of patients, clients and community groups. To realize this, the activities carried out are counseling within the scope of the hospital. This is so that patients and their families can make the right decisions in dealing with various health problems.

Meanwhile, the Padang Panjang City Social Service is in charge of formulating and implementing policies, compiling norms, standards, procedures, and criteria, providing technical guidance, and monitoring and evaluating, and reporting in the field of social rehabilitation. In providing social services to people with mental disorders, the Padang Panjang City Health Office implements it through a healing house. According to the Head of the Padang Panjang City Social Service, the healing house aims to be a recovery house for 26 social problems that exist in the community (Irsyad, 2021).

The Padang Panjang City Civil Service Police Unit is tasked with maintaining security and public order, as well as providing protection and services to the community in order to maintain city security, including protection for people with mental disorders. The Health Social Security Administering Body for the Bukittinggi Branch is tasked with managing membership data, receiving participant registration, and providing health service guarantees as well as providing information on the implementation of social security programs to participants administering health social security in the context of preventing and handling problems for people with mental disorders, in accordance with the provisions laid down set applies to the national health insurance program

Discussion

Based on the results of the study, if it is associated with the perspective of applying the problem approach, it is known that the communication carried out by the Padang Panjang City Health Office is quite effective because of the aspects of transmission, clarity and consistency has worked as it should. Communication can be said to be effective if it can achieve common understanding, feelings, attitudes, beliefs, and actions so that communication successfully conveys what is meant (Heath & Bryant, 2013; Moss, 2003).

This can be seen from the service activities for people with mental disorders that involve various regional organizations in the city of Padang Panjang. The involvement of organizations from various regional apparatuses proves that formal and informal communication has been able to be built by the Padang Panjang City Health Office so as to create understanding and trust between leading sectors.

The involvement of various regional organizations is in line with the mandate of Article 3 of the Regulation of the Minister of Health Number 54 of 2017 concerning Handling the Detention of People with Mental Disorders which explains that the implementation of shackle prevention is carried out through coordination and integration with cross programs and across sectors. This proves that the local government has followed up on central regulations in the context of implementing the handling of people with mental disorders.

The second aspect in Edward III's theory of policy implementation is that resources consist of human resources, budgetary resources and facility resources. When viewed from human resources in terms of quality and quantity, it is good because the Padang Panjang City Health Office has placed human resources in accordance with the minimum requirements related to certain qualities. According to Hasibuan (2019), job specifications are a description of the minimum quality requirements of people who can be accepted to be able to carry out a position properly and competently, also contain a clear summary and definitive quality required from the holder of the position.

Regarding budget resources and facility resources, it can be said that they are still very lacking. The reason is, every year there is a reduction in the budget related to handling mental disorders. This situation will have an impact on inadequate service facilities.

Low budget resources and facility resources will have an impact on the third aspect in the perspective of the implementation of the problem approach, namely the disposition aspect. Disposition is the attitude possessed by policy implementers. When viewed from the results of the research, it can be said that everything is positive without any rejection. However, the positive attitude of the implementers means nothing without the support of available funds and adequate facilities. This is in line with David (2017), which is supported by available funds and adequate facilities, because they influence each other because policy implementers will be able to move if there is a budget allocated for this.

The last aspect in the perspective of implementing the problem approach is the bureaucratic structure. This is a fundamental factor for reviewing policy implementation. According to Edward, the main characteristic of bureaucracy is work procedures with basic sizes or often called standard operating procedures (Edward III, 1980).

Based on the results of the study, the Padang Panjang City Health Office only has minimum service standards in the health sector through the Padang Panjang Mayor Regulation Number 15 of 2018 concerning Minimum Service Standards in the Health Sector in Padang Panjang City. Meanwhile, standard operating procedures in handling mental disorders are not yet available. This resulted in the implementation of handling cases of people with mental disorders who were abandoned on the road, noisy, shaky cases, and back referrals were not handled comprehensively, as a result many people with mental disorders were received late. treatment and experienced relapse after treatment. In addition, the absence of standard operating procedures as guidelines for the implementation of mental disorders in the city of Padang Panjang also results in a lack of the type and

quality of services provided, resulting in non-uniform mental health services, and the types of services received by people with mental disorders. This is in line with previous research regarding the absence of mutually agreed guidelines at the district/city level to be used by parties involved in handling mental disorders (Esem, 2019; Safitri et al., 2017).

Closing

Padang Panjang City is one of the cities in West Sumatra Province which was formed in 1956 based on Law Number 8 of 1956 and Law Number 1 of 1957. Although it is a small city, Padang Panjang City has a strategic position because it is located at a regional crossroads between the city of Padang and the city of Bukittinggi.

Regarding mental health, based on the health profile of the Padang Panjang City Health Office, it is known that people with mental disorders in Padang Panjang City always increase every year. In providing health services to people with mental disorders in Padang Panjang City, the Padang Panjang City Government appointed the Padang Panjang City Health Office as the leading sector in handling mental disorders in Padang Panjang City. In carrying out its duties, the Padang Panjang City Health Office is guided by the Padang Panjang Mayor Regulation Number 15 of 2018 concerning Minimum Service Standards for the Health Sector in the City of Padang Panjang.

Based on the results of the study, if it is associated with the perspective of applying the problem approach, it is known that the communication carried out by the Padang Panjang City Health Office is quite effective because of the aspects of transmission, clarity and consistency has worked as it should. When viewed from human resources in terms of quality and quantity, they are well prepared. In the aspect of disposition, it can be said that everything is positive without any rejection. However, the positive attitude of the implementers means nothing without the support of available funds and adequate facilities. In addition, clear standard operating procedures are also needed in policy implementation. Based on the results of the research, the Padang Panjang City Health Office does not yet have a standard operating procedure for handling mental disorders. This is handled in the handling of cases of people with mental disorders has not been handled comprehensively.

Suggestion

Referring to the results of the study, the researcher gave suggestions to the Padang Panjang City Health Office to increase budget sources. This is because it is one of the inhibiting factors for implementing policies in the field of social services related to the handling of mental disorders in the city of Padang Panjang. In addition, the researchers also suggested that the Padang Panjang City Health Office immediately make standard operating procedures in providing social services related to the handling of mental disorders. By making standard operating procedures, it is hoped that the handling of mental disorders in Padang Panjang City can be more comprehensive and the handling is not only carried out until the stage of social rehabilitation, but also post-social rehabilitation so that

all rights to health services for people with mental disorders can be fulfilled properly. If the rights to social and health services for people with mental disorders are fulfilled, then people with mental disorders can return to physical, social, and mental health. So that people with mental disorders can live on a par with society in general, and can work to contribute according to their respective abilities in community life. Therefore, the city government as the holder of human rights obligations must carry out its obligations in providing complete protection for people with mental disorders.

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