THE IMPLEMENTATION OF THE SOCIAL SAFETY NET PROGRAM (SSN) IN SUGADARAN VILLAGE, CENTRAL JAVA
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ABSTRAK


Kata Kunci: Dampak Krisis, Program JPS.

INTRODUCTION

With every boom, the apologists for capitalism claim that the tendency towards crisis that has plagued the capitalist system since its very beginning has finally been overcome. When the boom breaks, economists fall over one another to provide particularistic explanations of the crash. The crisis of the early nineties was as a result of the incursions tending of the eighties. The crisis of the early eighties was as a result of excessive state spending in the late seventies. The crisis of the seventies was as a result of the oil price hike and the inflationary financing of the Vietnam war...the crisis of the thirties was as a result of inappropriate...
banking policies...Every crisis has a different cause, all of which boil down to human failure, none of which are attributed to the capitalist system itself. And yet the crisis has recurred periodically for the past two hundred years (Clarke 1994: p1).

The above description can be found again when the economic crisis hit Asian countries in the mid of 1997. Experts say that the Asian crisis was caused by different conditions compared with that in Latin American countries, which was due to bad macroeconomic policies and foreign borrowing by their governments. Prior to the crisis, the macroeconomic "fundamentals" of Asian Countries looked fine. The countries in trouble had low inflation, low budget deficits and, foreign reserves. They had been growing fast. East and South East Asia accounted for a quarter of the world output, but half of the world's growth over the 1990 and almost two-third of the world's capital spending. Unfortunately, huge debts (high debt/GDP ratio) that have become a feature of Asian corporations since Asian government undertook radical financial deregulation played a major role in accelerating the crisis. The Asian governments' policy to remove, or to loosen controls on companies and foreign borrowings, but without adequate bank supervision has violated one of the stable conditions of the Asian high-debt model. In turn, it led to an economic crisis (INFID 1999).

However, regardless of the causes of the crisis and whatever theoretical explanation that can be given to that incidence, the same effect always turn out, that is, the severity of the livelihood of the population of the country, particularly the poor ones.

Among the Asian countries hit by the economic crisis, Indonesia was identified as the most severely hit by the crisis. As the 1998 annual World Bank (1998) observed:

Indonesia is in deep crisis. A country that achieved decades of rapid growth, stability, and poverty reduction, is now near economic collapse...No country in recent history, let alone one the size of Indonesia, has ever suffered such a dramatic reversal of fortune.

What has made Indonesia in such a condition as described by the World Bank above? The combination of external and internal factors is the answer to the question. The contagion effect of the free fall of the Thai Bath combined with the internal factors such external debt and capital mobility, poor macroeconomic management, poor financial regulation, the KKN (corruption, collusion, and nepotism), among others, have to be blamed as the causes of the crisis (Hill, 1999).

Immediate effects of the crisis were macro economic indicators. Currency depreciation, from Rp 2,682 to the US$ in August to the lowest ever level almost Rp 15,000/US $ 1, has caused continuing capital flight especially from the private sector, banking crisis and the deterioration of capital markets. In December 1997 the inflation rate started to rise. In 1998, the inflation rate reached 77%, the highest inflation level during the Orde

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Baru. Another economic indicator, such as the economic growth for the whole year was 14%, doubled than that of Malaysia and Thailand. This was due to the decrease in government revenue, especially from export of non-oil sectors (INFID 1999; Hill 1999).

As a consequence of the above indicators, hundreds of companies (particularly those which had debts in US $ 5 went bankrupt). Millions of people (APS estimated around 13.8 million) lost their jobs, and at the same time, the price of basic necessities rose dramatically during 1998 due to scarcity of imported goods. Therefore, the increasing disparity between income on one hand and the price of basic necessities on the other, has weakened the purchasing power parity of the people towards their household needs such as food, clothing, housing, education, health, among others. Another impact of the crisis is that the total number of poor people have risen to more than 80 million in 1998 as compared to only 27 million in 1996.

The Government of Indonesia (GOI), with the support of the International Monetary Fund (IMF) and the World Bank (WB), has done all efforts to prevent the economic crisis go deeper by intervening in the market through sets of policy packages. One of those policy packages, besides restructuring of the financial sector and structural reform, is the implementation of the Social Safety Net (SSN) program. This program is aimed to overcome the impact of the economic crisis, particularly the most vulnerable groups of the society, by providing them basic needs (goods and services) i.e. food, health service, education.

Unfortunately, the good will of the GOI is not always meeting the objectives as determined before. The results of monitoring and rapid assessments of the implementation of SSN program, which have been conducted by the Non Government Organizations (NGOs) and other research institutions, show that there are a lot of deviations in the implementation of SSN program. For example, INFID, in its briefing paper for the annual lobby 1999, reports several evidences of the deviation of the implementation of SSN program as follows:

Golkar party was indicated to have misused the SSN program in the form of POM-BKE fund, a part of the Employment Creation Program, to be implemented by Bappenas and the Farming Credit (KUT) fund. The domination of the Indonesian bureaucracy by members of Golkar Party, from the president, ministers down to village heads, gave rise to a claim is different levels of the bureaucracy on government programs and funds as being owned by Golkar. Besides Golkar party, PDRM party, where the Minister of Cooperatives was one of the initiators, was also indicated to have misused KUT funds. The Urban Poor Consortium (one of the NGOs in

In 1999, the

KUT (Kehilusan Uang)  
PDRM (Partai Demokrat Rakyat)
Indonesia) found out that PDR misused the KUT fund in 12 various regions in Indonesia such as in Ponorogo, Malang, Jombang (East Java), Yogyakarta, Klaster (Central Java), and several districts in South Sulawesi. The SSN program has failed to reach its rightful targets as a result of poor planning, corruption, poor design, poor implementation, and poor monitoring (SNIKID 1999).

From a rapid assessment in 13 kelurahan or desa in 16 districts of 4 provinces SMERU also found some deviations in the implementation of PDM-DRE. Those deviations were:

1. The Project selection at village level was done by the Village Activity Implementation Teams (TPKG/k) that generally consisted only of village officials; little input was solicited or received from poor communities in the village.

2. Projects selected usually did not directly target the poor: economic projects usually targeted established entrepreneurs, while infrastructure projects were not targeted to poor neighborhoods, and usually contained only a small amount of funds for unskilled labor input where they might participate (SNERU March-April 1999).

Those monitoring results also corroborate with other findings found by the society, which have been published widely in the (local or national) newspapers. For example Suara Merdeka (April 12, 2000), reported that a school principal in Tegal District, Central Java, misused the IPS fund for Program Makanan Tambahan Anak Sekolah (PMTAS). Food Supplement for Student program the amount of Rp. 6 millions to fund the wedding party of his daughter.

The survey conducted by Indonesia’s Central Bureau of Statistics also comes to the same conclusion that there were a lot of deviations in the implementation of SSN programs, especially during the fiscal year 1998/1999 (Monitoring dan Evaluasi oleh Tim Pengendali Jaring Pengamanan Social 1999). Table-1 below shows that, from various SSN programs, due to poor socialization, only Cheap Food Stuffs or Operasi Pasar Kinus (OPK, Special Market Operation) are widely known by the poor community. The rest of the programs are only known by a limited number of the poor community, therefore, most of the poor community did not receive the benefit of the implementation of SSN in their villages.

3. TPKG/k Tim Pelaksana Kerjanya (TPK) tingkat desa/kelurahan

*To see only part of the news of the deviation of the implementation of SSN program please visit http://www.jsp.or.id/inforezasi or http://www.smeru.or.id.

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The general picture of the implementation of the SSN program at the national level as described above attracts me to conduct a case study to see a little bit deeper the implementation of the SSN program at the village level. This paper is intended to describe the implementation of SSN programs in Subangram village. Particular concern will be paid towards looking at some issues such as the sense of injustice, conflict, ignorance, and social jealousy among others as the impact of the implementation of the SSN program in that village.

THE SOCIAL SAFETY NET PROGRAM

As it is mentioned in the document of the program, the SSN program is intended to overcome the impact of the economic crisis by giving protection to the most vulnerable groups in the society such as the poor people, unemployed, and other people who are identified by the Pokmas as an ineligible person (households) to receive the aids. Furthermore, the SSN program will be targeted into the Seluruh (urban village) or the desa (rural village), which are the most hit by the crisis as characterized by the following indicators: (1) has a number of poor people or household categorized as Keluarga Paa Sejahtera (Pee welfare

Table 1. The effectiveness of the implementation of the SSN program based on information level concerning SSN and their benefits in particular for the poor

<table>
<thead>
<tr>
<th>Program</th>
<th>Information of SSN (%)</th>
<th>Benefit of SSN (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic education</td>
<td>0.78-14.01</td>
<td>1.26-17.30</td>
</tr>
<tr>
<td>Cheap food stuff</td>
<td>7.57-45.47</td>
<td>7.83-90.65</td>
</tr>
<tr>
<td>Free Medical Care</td>
<td>0.26-07.56</td>
<td>0.26-08.37</td>
</tr>
<tr>
<td>Pregnancy Care</td>
<td>2.10-03.49</td>
<td>0.69-0.70</td>
</tr>
<tr>
<td>Food Supplement for mothers</td>
<td>0.84-02.77</td>
<td>0.56-0.65</td>
</tr>
<tr>
<td>Food Supplement for Babies</td>
<td>2.09-05.46</td>
<td>0.2-2.23</td>
</tr>
<tr>
<td>Working Capital for Small-Scale</td>
<td>2.10-20.64</td>
<td>0.26-7.67</td>
</tr>
<tr>
<td>Labor Intensive Works</td>
<td>0.34-29.57</td>
<td>0.84-26.64</td>
</tr>
</tbody>
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N=1200 households
The food security program is designed to ensure the availability of basic food necessities for the poor people. This program is implemented by GOI through Operasi Pasar Husus (OPK, Special Market Operation). This operation is better known by the recipients as the “Cheap Rice program”. Through monthly OPK, the less well-off households are eligible to buy 20 kg of rice priced at Rp 1000/Kg. The Kepala Desa (the village head), with the support of the Perangkat Desa (the village apparatus) and the neighborhood organizations (RT and RW), is the person responsible for the implementation of the OPK in his/her village. Every month the Kepala Desa gives a report and hands in the amount of money that he collected from the OPK to the Perangkat Desa (the village apparatus) and the neighborhood organizations (RT and RW).

The employment creation program, and small and medium size enterprise support are achieved through the implementation of the Program Pemberdayaan Dalam Menguatkan Dampak Krisis Ekonomi (PDMEKE, Empowering Regions to Overcome the Impact of the Economic Crisis). The objectives of this program are to provide grants and involving credit funds for the poor and unemployed groups in order to: (1)
improve social and economic infrastructure, while generating temporary employment; (2) finance income generating business. The intended recipients of this program are the rural and urban poor who have lost their jobs and sources of income, and who have insufficient income to meet their daily needs, especially food, education and health expenses (SMERU March-April 1999; Panduan PDM-DKE 1998/1999).

The PDM-DKE was planned by the Badan Perencanaan Pembangunan Nasional (Bappenas: National Planning Body) and was started since mid-March 1998. This program covered all areas of Indonesia, allocating funds to nearly every kecamatan and desa. Funds allocated ranged from less than Rp. 10 million for a small or relatively wealthy village to over Rp. 1 billion for a large with a high number of registered poor and unemployed (SMERU March-April 1999). As mentioned in the PDM-DKE guidelines, the funds that were allocated to each village should be spent into two kinds of activities: (1) the maintenance of social and economic infrastructure, (2) activities of economic development. The first activity is intended to provide job opportunities for the unemployed people by conducting the program pada karya (labor intensive program) i.e. maintaining irrigation canals and improving village roads. And the second activity is to provide cheap credit capital for small-scale economic activity in the targeted village (Panduan PDM-Dke 1998/1999).

The social protection program is aimed at maintaining the accessibility of the poor people towards basic public services, especially health and education (Tim Pengendali JPS 1998). The JPS for health (JPS-BK, Jaring Pengaman Sosial Bidang Kesekatan) is realized by giving aid to the poor households to obtain free primary health services from Puskesmas and hospitals as well. Besides that, to prevent the worsening incidence of malnutrition, the GOI also implements the program Pembernian Masyarakat Tambuliten (the Food Supplement Program) to the children under the age of five, pregnant woman, and breastfeeding mothers. The Puskesmas doctor, together with the PLKB and the Bida Desa (the village midwife) under the coordination of the Camat, is the most responsible person as the implementers of the JPS of health program in the kecamatan level. At the village level, the village head and the kepala dusun (the hamlet head) take the responsibility to distribute the Ikat Sehat (Health Card, as identity card to obtain free health Service) to the poor households in their villages. Meanwhile, the Kader Sehat (health volunteers) and the village midwife take the responsibility to distribute the makassar tambuliten (food supplement) i.e. milk, eggs, dried fish or other foods to the target groups every month during the Pusunyana.¹ (Integrated

¹ In case one of the policies needs specific treatment, which cannot be given by a Puskesmas, the recipients of JPS-BK also have an opportunity to obtain free health treatment in hospital including the transportation cost to go to hospital.

Pusunyana (Integrated Neighborhood Health Services) is unfortified monthly by health volunteers in the neighborhood. Usually this activity is held in the house of the Kefa B/T (neighborhood head) and led by the village midwife. The main activity of Pusunyana is weighing the infants and the

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Neighborhood Health Service) meeting.

The main objectives of the SSN for education, which was initiated since July 1998, are (1) to protect the drop out ratio of students coming from poor households and (2) to give the dana bantuan operasional (DBO, the operational fund aid) to the poor schools to maintain kegiatan belajar-mengajar (teaching activity). The first objective of the SSN for education or locally called program Aku Anak Sekolah(8) (I am a student program) is achieved by giving out scholarships to students from poor families (KS, Keluarga Pra Sejahtera) who have been studying in elementary schools (SD/MI, SLTP/MTS)(9) and secondary school (SM/MA)(10). After selection by their schools(11), those students receive monthly scholarships amounting to Rp. 10,000, Rp. 20,000, and Rp. 25,000 for students in SD, SLTP, and SM respectively. This scholarship is sent directly to the beneficiaries via post office (PT, Pos Indonesia).

THE IMPLEMENTATION OF SSN PROGRAM IN SUDAGARAN VILLAGE

1. The General Impression

One day, at the beginning of May 1999, I met with Pak Lulah Sudagaran in his office. It was not my first meeting with him. But during that time it was my first time to have an opportunity to ask him something about the implementation of SSN in his village. Surprisingly, Pak Lulah seemed not quite interested with my question. He only said that he has delegated his authority to manage the implementation of the JPS program in his village to his staffs (the perangkat desa or the village apparatus). Since he delegated all of his authority, he said that he knows nothing about the details of the implementation of the JPS program(12). He only mentioned that the JPS program, which falls directly under his responsibility, consist of two kinds of activities, namely the POM-DKE and the "beras murah" operation. For other programs (SSN for health and SSN for

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8 SD is the abbreviation of Sekolah Dasar, MI- Madrasah Ibatul, SLTP: Sekolah Lanjutan Tingkat Pertama, MTS is Madrasah Tsanawiyah. SM is Sekolah Menengah, MAd: Madrasah Aliyah.
9 The school committee has the task to select eligible candidates to receive the scholarship. This committee consists of the school principal, the representative of the student's parents and, the representative from village office. Students who were eligible to receive the scholarship have to fulfill these requirements: (1) Students from poor families, (2) graduate students from SD/MI, (3) not a student from an expensive school.
10 May be also because Pak Lulah was not actively in charge at that time. He had been struggling for his second term position when the SSN program was initiated.

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education), his office only provides some help to the institutions that have been given the authority to implement those programs i.e. Pakkusmas and Selolah Desar. His apparatus, in this case, only helps to distribute Kariu Sehat, provide the data Pra KS and KSI.

Pak Larah told me that the PDM-DKE in Sugadara was used to build the kolam ikan (fishpond) that is located nearby the village (the place is called Setuman).

..., but I have delegated everything about that program (the PDM-DKE) to Pak Trisno 19, if Mas (brother) Erwan wants to know more about it please ask Pak Trisno. Also if Mas Erwan wants to know more details about the distribution of beras maras, please ask Pak Kadiru (the hazelte head). I am sorry, I can not give you more information about IPS.

For the Javanese, the response of Pak Larah above is a "sign" that he does not want to be bothered with more questions about that topic.

I can understand why Pak Larah seemed reluctant to discuss about JPS program. It is because for Pak Larah and the Perangkat Desar to implement the JPS program is the era reformasi (the reformation era) is not an enjoyable task. Different from the Ondal Baru era (the New Order era) 19, now, to carry out development programs like JPS for instance, only invites difficulties than benefits to the Perangkat Desar. Since the village community has become more critical, there is no more room for the Perangkat Desar to engineer the development projects for their own benefit on one occasion. One Perangkat Desa complained to me about the changing situation:

"Nowadays, our community has become much more critical Mas (brother), even if we only make small mistakes, they will challenge us by holding demonstrations, whereas we are only carrying out orders from above."

Later, I was informed that several people in Sugadara village often threatened Pak Larah to hold demonstrations due to their dissatisfaction with the implementation of the PDM-DKE program. The Only thing that saves Pak Larah is that he is backed by a strong Muslim leader 20 in that village and also because of his reputation as a bad guy 20 during his good old days, his challengers have to reconsider their actions against him.

19 The Dolbl is well known as a kingmaker in Sugadara village. He is a successful gencar businessman and the leader of the Pengayap in Sugadara village. It was the Dolbl who supported Pak Larah to win the election for his second term. In the beginning of the campaign, he actively supported a certain candidate to become larah, but later he knows the new contest has a different political affiliation with his. so, several weeks before election the suddenly change his mind to shift his support to the present Larah.

20 Pak Larah comes from one rich family in Sugadara village. His husbrother, Pak Juaya is one of the richest gencar owners in Sugadara. Pak Larah is respected among the young generation in Sugadara because he is good in building relationship with the youngsters. He plays gambling and enjoys to stay until late in the night chatting with people in Sugadara in the neighborhood's bar which pops in every corner of his village.
2. The PDM-DKE Program

It was interesting when I finally met with Pak Triono as the in-charge of PDM-DKE's implementation. Pak Triono is about 65 years old. He was a teacher, but after retiring he actively participates in various social activities including his current position as the head of LKMD. Some of my informants said that Pak Triono was chosen as the head of LKMD because of his conduct. He is not only a public figure but also a teacher, and also because he has a respectable family since three of his children graduated from well-known universities in Indonesia and now all of them have good jobs in Jakarta and Bandung. Although Pak Lumbad told me that Pak Triono is better informed on PDM-DKE compared to him, however, it seems that Pak Triono is not any better. Even he looked nervous when I asked him about the PM-DKE. He started sweating while trying to find the documents of PDM-DKE in his diary. Finally, he could not find the documents he was looking for, he only explained to me the general picture of the implementation of PDM-DKE in Sudadakan village. In the end, he told me that it is better to look for Mas Wardono, the village facilitator, if I want to know more about PDM-DKE in Sudadakan.

36 Teachers are respected people in the village of Java. They are always chosen as a member of a committee that sets up various problems in the village community.

37 PDM-DKE was a sensitive issue at that time. Although I and him both only a student, but he still thought that I see an NGO member who supervises the implementation of PDM-DKE.

Finally I got a lot of information about the implementation of PDM-DKE program from Mas Budi Wardojoy. 36 From him I knew that Pak Triono is only used as an official stamp in this project. 37 The main actors who make important decisions in this project are Pak Harto and Pak Khasananto. 38 Mas Budi Wardono said that in the beginning the implementation of PDM-DKE was ignored by people in Sudadakan. This was because every body was busy with campaigns for village head elections at

36 Budi Wardojoy is about 35 years old. He graduated from Gadjah Mada University, but because of some reasons he only stays at home to help his mother who now lives alone. He is also a son of the former village head of Sudadakan, the late Pak Manansarde. Mas Wardono told me that at the beginning he rejected his appointment as a village facilitator in the LKMD meetings. He left Surabaya with the procedure of his appointment. He opines that, besides him, there are several others unemployed university graduates who are also eligible to become village facilitators. Moreover, the amount of his honorarium is Rp 750,000 for five months to serve as a village facilitator is not equal to the contribution from the community that he gets a lot of money from the project. But because of the pressure from Pak Triono (the head of LKMD and Pak Lumbad (both of them are his distant relatives) finally gave his appointment.

37 Mas Wardono complains a lot about Pak Triono who is in charge of the head of the LKMD and the PDM-DKE program. According to Mas Wardono, Pak Triono is too old as the head of LKMD. He should be replaced by younger people.

38 Both of them are public figures in Sudadakan village. Pak Harto is a successful geriatric businessman. And he has a relationship with former head of Klaten district. He also used to serve as the chairman of the branch of trade chamber in Klaten district. Pak Khasananto is a teacher at Senior High School (SMU) and social activist. He also has a wholesale shop (toko seribu unit) in Sudadakan which is run by his wife. Unfortunately I could not meet with those two persons during my fieldwork. Pak Harto was trouble at that time whereas one of his shops in Klaten was robbed. And Pak Khasananto was busy with his political activity during the general election campaigns.
information of PDM- Mas Budi said that Pak is an official. The main decision made to and Pak andono said nothing the DKE was paramount. This is busy with elections in the village.

1. He explained to the because of his fly fishery also a site of the lake and not far from the village to fish and pasture. He epees several others who are also there. Moreover, 50,000 for five or is not equal to the land because of the village of ULOT and the rain is a village to fish and pasture.

2. Pak Tritono, the Warolono, and Pak Kromo, the LONING. He said that in the village of Sudagaran the government is also used to seek the use of state tenancy is a 1/17 and social 30 kbp. It is also by his wife. Those two Pak Hasto was in law and the intervention into the general development of the village.

3. From the above, it is the bottom up process to choose and then implement the PDM-DKE program as an example in the document of the program simply does not work at all. Mas Wardono also admitted these weaknesses. "Only to tell you the truth, the implementation of this program (the PDM-DKE) did not involve the K150 and Pra K5 poor family, community groups that were the main target of this program. For example we did not use labor intensive work (padat karya), but we preferred to hire professional labor that could work more quickly than amateur labor (Pra K5 and K5)."

(Mesi 2000)

That a why Pak Suhart does not know more details about the program, because he is too busy with his campaign to win his second term position as a village head.

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the PDM-DKE fund. But at that time he just ignored him because he believed that without his help the fund would be disbursed. But after that, the Kasi Bungker successfully cheated him by asking some money to buy ten rolls of photo films, but later he only realized one roll, to make the documentation of the PDM-DKE activity in Sudagaran. Not only that, there were some other deviations that happened during the implementation of PDM-DKE in his village, including the misuse of the operational fund. But Pak Trisno always forbade him to play by the book to check every stage of the program implementation if he wanted to do so.

Due to the poor socialization of the program, therefore, only very few people in Sudagaran knew about PDM-DKE programs in their village. Some younger people, particularly from the southern part of the village, who know the program, complain about the unfairness of the implementation of PDM-DKE. On one occasion one of my respondent who has just been laid off from the Pabrik Tembakau (Tobacco Processing Fabric) in that village complained with a bit of anger to Pak Lurah like this:

"Why do only orang utara25 (people from the north) benefit from the PDM-DKE program? We (orang selatan) get nothing although we are poorer compared to them. We have the same right to use that fund. Actually I want to hold a demonstration against Pak Lurah with my friends, but my wife always discourages me to do so".

In contrast to the youth, the older inhabitants though know more about the program, they just tend to ignore that problem. They think that the benefit that they will gain from PDM-DKE program is not as equal to the cost that they have to spend by conducting protests against Pak Lurah.

But after waiting for months in that village, I have never witnessed any demonstrations against Pak Lurah. Even one day I got an invitation from Mrs Wardono to come and witness the first fish harvesting ceremony at the Seteman. "Pak Bupati will also attend the ceremony because our program was chosen as "the best" PDM-DKE program in Klaten District," Mrs Wardono gave me the information while delivering the invitation.

But the harvesting ceremony did not mark the beginning of the success story of the implementation of PDM-DKE in Sudagaran. Only witnessed by a small crowd, Pak Bupati was present for no more than five minutes in the fishpond to open the first fish harvesting ceremony. The result of the first harvesting was far from successful. From about 4,000 cat fish fry, which were raised in the pond, only half of them were harvested. Although the remaining fish in the pond can give quite good results, but still the Pokmas faced difficulties in continuing with the PDM-DKE mission.

Because of Pak Hanu's lobbying therefore, Pak Bupati was willing to come to Sudagaran.

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25 Orang utara means people who live in the northern part of the village. They are mostly richer (garment bosses, cloth traders, civil servants etc.) compared with the people who live in the southern part of the village.
the program. Pak Lurah himself did nothing to settle that problem. Meanwhile Pak Harto tried to ask Pak. Buyang if he could provide some funds to buy fry for the next season. But up to the present there is no certainty about it, so the fishpond is still untapped until funds are secured to buy more fry.

3. The SSN for Health

The implementation of SSN for health in Kecamatan Wedi is under the responsibility of the Puskesmas Wedi. Since Kecamatan Wedi consists of 19 villages, therefore, the implementation of SSN for health in Kecamatan Wedi covers 19 villages, including Saduguran. To provide free health service for 3,976 Pak KS (poor households), the Puskesmas Wedi is given a block grant fund by the Central Government amounting to Rp 10,190,000 for every three months during the fiscal year 1998/1999. This program commenced in October 1998. The funds are purposely meant to give three kinds of free health services to the poor families: (1) basic health service, (2) midwife services and, (3) nutrition improvement.

3.1. Basic Health Services

The implementation of SSN program in Saduguran was started by collecting the data of Puk-KS as target groups of the program. From the survey it was found that there were around 128 Puk-KS families in Saduguran (Rekapitulasi Pendataan 1998/1999).

39 There is no certainty from Sukanto whether this program will continue in the fiscal year 1999/2000 when I asked the head of the Desa Kecamatan (the Health Service Division of Local Government) Kohapuran Khatu.

Kaluarga di Kecamatan Wedi 1999/1999. This number is much higher compared to only 52 families before the crisis (1997/1998). But unfortunately, the quota of Kuru Sekal was to be given to Saduguran was only for 68 Puk-KS, therefore the PLKB and Pak Kudas had to make the second round of selection to determine the most eligible families from the 128 families selected during the first round. After going through these steps, they can then determine the families that qualify to be granted the Kuru Sekal. Although the judgment was based on the wisdom of Pak Kudas, still the method is quite reliable.

39 It was interesting when I clarified why the number of Puk-KS in Saduguran increased so dramatically during 1998/1999. One doctor in one of the Puskesmas gave me an interesting classification to this matter. He said that it is not the crisis is one important cause that has made the number of Puk-KS to increase so rapidly during 1998/1999, but besides that, the badura and badurah among (ABS, just to make poor boys happy) is also another important aspect to consider. During the Ordin Fara (the New Order), the PLKB official tended to reduce the number of Puk-KS in the village under his responsibility based on the percentage target that was determined in order to make the data look good (the target was increased). But now they are practicing the reverse. When the Central Government is willing to give some funds to Puk-KS they tend to increase the number of Puk-KS in order to get more money from the Central Government.

40 After the Central Government realized that there were a lot of rotten data (data expropriation) at the village level in order to get more money from it, finally they made a decision that the number of Puk-KS in every village should be around 70% from the total families.

41 This was the case to show us since 68 out of 128 families that will be granted the Kuru Sekal. Pak Rupar Kuswanto said me this he knows everybody in his hamlet. He knows who is rich and who is poor, so he is quite simple to determine who is more eligible to receive the Kuru Sekal.

I had an opportunity to make two kinds of cross checking the data at Puk-KS that granted the Kuru Sekal above. First with my honest hold survey data.

(Book 2000)
Families that were chosen as recipients of the program were mostly widows, widowers, and big families that have a lot of children (more than 3 children).

In my opinion, the problem of the implementation of SSN for health does not only deal with how to pick the targeted group fairly, but is much more complicated as a result of the impact of a combination of several factors such as (1) the ignorance of the Perangkat Desa, (2) the lack of information possessed by the beneficiaries due to poor socialization, (3) bureaucratic procedures that are applied to obtain the services.

From the household surveys and observations, I found out that a lot of people simply do not know that they are the recipients of the SSN-for-health program due to the ignorance of the Perangkat Desa. For instance, one day I had a conversation with one of the Kepala Desa in Wayang hamlet as follows:

"King Pundi Mas Erwan (Where are you coming from brother Erwan)". Pak Bayan Kaliis asked me when I was walking down the Wayang alley one day. I told him that I was visiting Pak Parono. "Pak Parono...yes I know him. I agree if you want to give aid to him"33, because he has a big family. He has five children if I am not mistaken. He was registered to receive the Kartu Sehat to get free health services from the Puskesmas, but "I'm still keeping his card. I do not have the opportunity yet to give it to him. But I think he does not need the Kartu Sehat as yet". Whenever he will need it, I will not hesitate to give it to him immediately."

Pak Bayun told me without any signs of regret in his face.

The bureaucratic procedures, that are needed before the Kartu Sehat holders can use it to obtain free health service from the Puskesmas, also become the source of the problem. For instance, a requirement to attach photos of the family members on the Kartu Sehat before it can be used is felt as something difficult to be fulfilled by the Kartu Sehat holders who are mostly old and poor people. For example one of my informants, Pak Sarman, just keeps his card under his pillow because of this problem. The head of the Puskesmas, doctor Rianil, admits this. She said that actually she allows them (the Kartu Sehat holders) to use their card without photos attached on the Kartu Sehat to obtain free services from the Puskesmas. But since the Rumah Sakit Tegal Yoso (the district hospital in Klaten) is very strict with this regulation, she therefore suggested that it would be better for them to complete their cards with photo identifications. It is also for their own convenience if someday they will need a health

33 Later I know that Pak Parono actually needed that card when one day he told me a story that he had to send his begging to find his two sons medical treatment at the hospital when they got an accident.

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treatment from the district hospital. But unfortunately not every Pra-KS family knows about the discretion that is made by the head of the Puksemas, hence still a lot of them never get the benefits out from their cards.

Another implementation problem is the reluctance of the Kartu Sehat holders to use the card. Some of the Pra-KS families feel ashamed to use the Kartu Sehat to obtain free health services from the Puksemas. In spite of being labeled as poor people while using the card, they prefer to go to other Puksemas' that does not use the Kartu Sehat. It means that they have to pay Rp. 1,000 to obtain health treatment 25. Doctor Rianti told me on one occasion that:

"Selain masalah foto, masalah lain adalah adanya pemikiran kartu sehat yang mudah menggunakan kartu tersebut karena dianggap sebagai orang miskin. Akibatnya dia malah harus pergi ke".

25 "literally several wealthier people have asked doctor Rianti to be the Karu Sehat. It is to convince me to understand this phenomenon why wealthier people did not feel ashamed in using for free services from the Puksemas. May be it is related with the relative security of the social status position of wealthy persons in the society compared to the poor ones. As a rich person you are always given respect by the community despite whatever you do. It reminds one of an inhabitant's remark on one occasion: "although Pak Girsu (one of the richest person in Sidoarjo always rides a bicycle wherever he goes, but everybody gives him respect and admiration (wahai, sayang, wajah, ibu, bapa) since they know that he is a rich man he has car, moto, bike, etc in his house). But if everybody knows that you are poor whatever you do people will never respect you. Even if you drive a car people will think that you just borrowed it from your friend". Therefore to some extent it is important not to let anybody knows that we are poor to maintain the security of our social status in the community."

Table 2. The Visiting frequency of the poor family members who use free health services in the Puksemas Wledi since the Implementation of ssn for health program 1998-1999

<table>
<thead>
<tr>
<th>Year</th>
<th>Month</th>
<th>Number of visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998</td>
<td>November</td>
<td>90</td>
</tr>
<tr>
<td></td>
<td>December</td>
<td>725</td>
</tr>
<tr>
<td>1999</td>
<td>January</td>
<td>1092</td>
</tr>
<tr>
<td></td>
<td>February</td>
<td>1270</td>
</tr>
<tr>
<td></td>
<td>March</td>
<td>1300</td>
</tr>
<tr>
<td></td>
<td>April</td>
<td>1402</td>
</tr>
</tbody>
</table>


The progress report of the implementation of SSN for health after March was not yet available during my preliminary research.

PSK sawas iyang lebih jauh apabila berbakti". (Besides the photo problems, another problem is that several people who posses the Kartu Sehat feel ashamed to use their cards. They do not want to be called as poor people while using the card. I feel quite sorry that they have to move to other far Puksemas).

These problems affect quite significantly the visiting frequency of the members of poor families who go to the Puksemas to obtain free health services. For instance although the frequency of patients from poor families who use free service facilities from the Puksemas has dramatically gone up after the implementation of SSN for health (see table-2), still, the percentage is very small compared to the number of poor family members who are eligible to use the facility.

1 (Mel 2000)

JKAP Volume 4, Nomor 1 (Mel 2000)
Since the numbers of the numbers of poor families who are eligible to use free health service facilities are 13,955 persons (Puskesmas Wadi 1999), only around 7% used this facility when they suffered from illnesses.

3.2. Food Supplement Program

The effectiveness of the implementation of SSN for health program also can be seen from the nutrition improvement program. The nutrition improvement program is carried out by giving food supplements, for example milk, eggs, dried fish among others to the most vulnerable groups of people who have a high possibility of suffering from undernourishment i.e. infants, children under the age of five, and pregnant women.

In Sugagaarun, the implementation of the food supplement program has become the responsibility of the village midwife (Ibu Yani) and the officials of PLKB (Ibu Jujuk). Both of them, with the help of the wife of the village head, the hamlet head, and health volunteer activists, lead the monthly Poyanda gatherings in each hamlet of Sugagaarun. The meeting commences with weighing of infants and children under the age of five in a hamlet that was scheduled. The village midwife then checks the development of the infant and the children based on their weight development, if the weight of an infant does not correspond to his age, the infant is diagnosed as suffering from under-nourishment problem. Therefore the village midwife will give out 0.5 Kg milk to the mother of the infant as food supplement in order to increase the quality of the milk of the infant’s mother. If this case happens to a child under the age of five, the food supplement is given directly to the child. Separately, the village midwife will give out vaccinations to the infants and the children, as scheduled basing on the age development of the infants and the children. An interesting even happened when one day I attended the Poyanda meeting in Ngargano hamlet. At that time the village midwife had just given out a packet of 0.5 Kg milk to Ibu Wartini (a breast feeding mother who was reported by health volunteer activists as suffering from inadequate protein intake). Interestingly, the milk was only wrapped in a silver paper; Ibu Yani took off the outer side of the wrapping pack. When I asked why she did it, she explained as follows:

“This is only my strategy to prevent the milk from being sold by the recipients. Before that when I gave out a package of milk to a mother from a poor family, she sold it again in the market to get cash to buy other essential goods for her family. So if I do not devise something to stop the habit, the program to improve the nutrition condition will never meet its intended objectives”.

While the official of PLKB has a responsibility of distributing free contraceptives to the Pusaran Usia Subur (PUS, fertile couple) who cannot afford them on their own, She also engages in consultations with new
couples who plan to use contraceptives or if someone has a problem with her contraception. Although contraceptives are given out free of charge to everybody who needs it, but sometimes bureaucratic procedures in the Pakseenas makes some PLKB volunteers reluctant to perform their duties. In one Pasunday meeting in Sadanggar hamlet, Jua Slamet complained to the village midwife about this problem.

"I prefer to go directly to the Kecamatan than to the Pakseenas. If I go to the Kecamatan I can met Dr. Juyak (the PLKB official) directly. Without any comments. She will hand me a box of contraceptives pills, she even gives me a box of condoms without me asking for them. But nobody sees condoms in Sadanggar hamlet."

Generally speaking, the implementation of food supplementation program gives a positive impact to prevent the health conditions of children in Sadanggar from becoming worse at a result of the crisis. For instance, from the monthly report of the nutrition condition of the infants who suffered from Kekurangan Energi Protein Berat (KEP Berat, Chronic Inadequate Intake of Protein Energy) in Kecamatan Widi, no single case was found in Sadanggar. But there are a lot of children36 (children under age of five) who suffered from Kekurangan Energi Protein Rendah (KEP Rendah, Mild Inadequate Intake of Protein energy). From the monthly report made by the Pakseenas (table-3), in average, there were about 27 children under the age of five in Sadanggar suffering from mild KEP during the last three years. While I asked Miss Parwanto, the nutritionist is the Pakseenas, why there are still a lot of children who are under nourished while the Pakseenas has implemented SNN for health, he explained as follows: "The economic crisis that started in the mid-of 1997 contributed to our difficulties (the Pakseenas team) to cope with the problem of malnutrition. We only have very limited funds to give out food supplements to the children under the age of five. If their parents do not pay contributions to overcome this problem, it will be a difficult task for us to solve because children under the age of five are most vulnerable considering the quality of food they take. For example a child, who recovered from KEP-R this month after giving him food supplements, automatically fell back to the same previous condition in the following month when we stopped giving out the food supplement to him. Unfortunately during the crisis, the quality of food given to the children has significantly decreased. Therefore without adequate funds from the Government, it seems impossible to solve the problem of malnutrition. Without adequate funds, my program will only fall into the vicious circle". (Field work notes).

36 Fildan Erawati Liza Timur.
37 The Pakseenas cooperated then to Budi Bambang, Chair THF-TKRI (HCTU, Under De Law) to describe the children under certain age who do not have adoptive weight based on WHC standard.
<table>
<thead>
<tr>
<th>Months</th>
<th>KEP-R</th>
<th>KEP-B</th>
<th>KEP-R</th>
<th>KEP-B</th>
<th>KEP-R</th>
<th>KEP-B</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
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<td>23</td>
<td>25</td>
<td></td>
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<tr>
<td>February</td>
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<td>24</td>
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<tr>
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<td>NA</td>
<td>23</td>
<td>24</td>
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<td>April</td>
<td>59</td>
<td>23</td>
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<tr>
<td>November</td>
<td>32</td>
<td>3</td>
<td>NA</td>
<td></td>
<td></td>
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<tr>
<td>December</td>
<td>30</td>
<td>0</td>
<td>NA</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>


NA = data not available

KEP-R = Mild inadequate Intake of Protein Energy
KEP-B = Chronic inadequate Intake of Protein Energy

The difficulty to cope with the problem of malnutrition among the children under the age of five in Sudagaran is not only an economic factor. It also relates to the lack of awareness among the parents who have to know the importance of giving good quality food to their children.

Let alone the crisis, even during the pre-crisis period, the people in Sudagaran, whether rich or poor families, did not always serve good quality nutritious food to their children. Responding to this case, the village midwife (as also supported by Ibu Lurah) told me that the quality of food given to the children is not of concern to the people of Sudagaran. They are much more concerned with their physical appearance i.e. clothes, housing, gold and jewelry, ears, among others 38, rather than to think about the quality of food. This is because in their opinion people do not measure you (success or position in the community etc.) on what kind of food you have eaten, but with what kind of material things you have.

"Because of this culture, therefore, there are only about 30% of the children under the age of five in Sudagaran who can be categorized as ‘normal’," the village midwife told me (Fieldwork notes).

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38 This point of view is strongly affected with the stigma project to show the image of godliness of the family in front of the public culture of leverage community.
4. SSN for Education

4.1. The Schools and the students in Sadagaragan during the crisis

In Sudagaragan village there are four elementary schools (SD, Sekolah Dasar) where around 891 students study. These schools are (1) SD Sadagaragan I (80 students), (2) SD Sadagaragan II (85 students), SD Kanisius Murah (371 students) and, SD Mohammadiyah (445 students).

Did the economic crisis affect the school activities there? It is a difficult question to answer. If the impact of the crisis is only to be measured by the number of the students who drop out from the school, then the answer to that question is No, considering the statement of the head of SD Sudagaragan I below:

"Only one of my students dropped out from school during the crisis. But that one student dropped not because of the economic crisis. He did not want to continue school because he failed his exams. I have convinced him to go back to school but he prefers fishing to education. May he also because his parents do not pay attention to him, which makes him reluctant to go back to school. I also once asked his parents to do something bring their son back to school, but his parents seem so busy with their own work that they do not have time to discuss that problem".

With the exception of SD Sudagaragan I, there is no other drop out cases found in other SDs. This data also corroborates with the data from household surveys. The data from household survey shows that during the economic crisis there were only 2 cases of dropouts in Sudagaragan from all school categories. But if we used broader indicators i.e. the physical condition of the students, the delay in payment of the tuition fees, the academic achievement of the students, the capability to buy scholastic materials among others, then we can come to the conclusion that the economic crisis has greatly affected the school activities in Sudagaragan.

For instance the head of the SD Sudagaragan I said that her students looked weaker now compared to the pre-crisis period:

"My students look lorry (weak) after the first break (at 9 am) during the school session. Actually, even before the economic crisis the physical appearance of my students was very poor. It is because most of my students come from poor families who cannot provide breakfast for their children before their go to the school. In this case they (students' parents) will only give some money (uang jajan) to their children around Rp. 100-250 to buy snacks at the school. But the calorie from the cheap snacks,

99 Most of the students in Sudagaragan I come from poor families that stay in Pardeng, Bumuran, Wadi, Ngakano, Tangan, The head of the family who lives in these hamlets usually works as a casual laborer, loading and unloading, the sunken out (laundry labor), among others.
which is bought at the school, is not quite good enough to provide enough energy for my students to be active in class from 7-12 am. The students normally look sleepy after the first break” (Fieldwork notes).

Furthermore, the poor condition of the calorie intake among the students then affected their academic achievement. The school principal says that the scores of the national final exam (the Ebranas) that was achieved by her students were not as good as that before the crisis.

The same condition also happened in SD Sudagaran II, which also has students from the same family background as SD Sudagaran I. When I visited those two SDs, most of the students there did not put on shoes to go to school. Let alone school uniforms. The head of SD Sudagaran II told me that she allows her students not to put on school uniform if their parents cannot afford one. Due to the difficulties in getting school uniforms, the head of SD Sudagaran I has made it a policy to give free school uniform to the new students in order to attract a big number of school going children.

Another problem in SD Sudagaran I and II is the delay in the payment of the BP3. The amount of BP3, which has to be paid, is different from one school to another. For instance in SD Sudagaran I the amount of BP3 is Rp. 1,000 per month, and in Sudagaran II the amount is Rp. 1,500. Both heads of the schools said that during the economic crisis, several parents delayed the payment of BP3 until the end of the school year. Besides, several parents also delayed to pay the usage albangan umum (UBU), the examination fee that amounts to Rp. 2,000 per four months and the final examination fee of Rp 25,000.

These conditions can also be seen at SD Kanisius and SD Muhammadiyah. Both these two SDs are private schools. SD Kanisius belongs to the catholic foundation while SD Muhammadiyah belongs to the Muhammadiyah foundation. The heads of the two private schools said that the economic crisis did not affect their school activities. Based on my observations, the differences (between the public SDs and private SDs above) are caused by several factors. Firstly, to some extent most of the students’ parents in SD Kanisius and Muhammadiyah have better financial capabilities compared to those in SD Sudagaran I and II. Secondly, those

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61 Ebranas is a national exam in Indonesia done in the end of the school year.
62 Muhammadiyah is a modern Indonesian Islamic organization founded in 1913 by KH. Ahmad Dahlan in Yogyakarta.
63 If there are no significant economic differences among the students’ parents in these schools, at least there are differences of the students’ parents’ motivation to send their children to these schools.
64 In both private SDs, the students’ parents have a strong religious affinity (Roman Catholic and Islamic) and strong motivations to send their children to schools compared to the students’ parents in state owned SDs. A large part of the state owned SD’s is said to be sent by the students’ parents in the state schools do not have strong religious commitments (albangan). If they are sent (mostly), they will send their children to SD Muhammadiyah, and if they are Catholic they will send their children to SD Kanisius. Therefore the students in both two private schools not only come from Sudagaran village but from other villages in Kecamatan Welu. 

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two schools get subsidies from both the government and their respective foundations. Thirdly, those two schools have self-assessment methods to determine the amount of the tuition fee and the BPS that will be paid by the students' parents. This policy gives opportunity to the students from the poor families to continue their studies since they are allowed to pay the tuition fee and BPS based on their economic capability.

4.2. The Implementation of SSN for Education in Sabugaran

Although at the national level there are two forms of SSN for education i.e. (1) the Program Bea Siswa (scholarship program) and (2) the Dana Bantuan Operasional (DBO), the operational fund program, it is only the Program Bea Siswa that is implemented in Sabugaran.

The DBO is only given to the schools (can be SD, SLP/MTS, SM/MA) that are categorized as the poorest in use. Kecakatan Sinore since none of the four SDs in Sabugaran meets this category, therefore, these schools were not eligible to receive the DBO program. Based on the data released by the Kecakatan Committee, from 40 SDs in Kecakatan Sinore, all four SDs in Sabugaran were found at better positioned compared to the other SDs. Finally, from 40 SDs in

Kecakatan Widi, there are only 7 SDs that receive the DBO program. These SDs are mostly located in the poorest villages in Kecakatan Widi.

The scholarship program for the students from poor families is implemented in three to four SDs in Sabugaran; these are SD Sabugaran 1, 2, and SD Muhammadiyah. The SD Kusin is the only exception. There is no clear explanation why SD Kusin was not included in the scholarship program. The possible explanation is because the document of the program says that the target groups of the SSN program are SD Negeri (Public School) and Madrasah (Islamic School), while SD Kusin is neither SD Negeri nor Madrasah. That is why SD Kusin was not given the scholarship program. The school principal said that his SD receives operational fund aid from the government in form of school equipment and needs such as paper, chalk, and teaching instruments among others.

The number of students who qualify to be given scholarships in Kecakatan Widi is based on the quota made by the Kepalaan Committee. Meanwhile, the decision to determine the number of the students who are eligible for the scholarship in each SD is made by the Kecakatan.

\(^{40}\) By using the scale factor 1:7 (from the best to the worst each of the SDs in Sabugaran has its score as follows: SD Sabugaran 1 rank no. 1, SD Sabugaran 2 rank no. 2, SD Kusin rank no. 3, and SD Muhammadiyah rank no. 4). The scoring is based on four main valences: (1) the students who come from KS family, (2) BPS per month, (3) school that has a high percentage of students (SD) KS family and other special fee, will be ranked in

low ranking compared to the others. This school is then eligible to receive the DBO. Jurnal Kejakr\textsuperscript{2} Depdiknas dan Kebijakan Pinter Kecakatan Widi, Februari 2000. (Mei 2000)

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Committee. At the lowest level, the head of the school, the chairman of the students’ parents organization, the teachers representative, and the village representative have the responsibility to choose students from each school who qualify for the scholarships. After passing all these procedures, each SD in Sudaagaran is granted 3 scholarships totalling Rp 10,000 per month for each student, except SD Sudaagaran II, which is granted 4 scholarships.

Since there are only 3 scholarships available for each school whereas there are some other students who are eligible to receive the same scholarship, it becomes quite difficult for the head of the school to make a fair decision on who will be granted the scholarship. To solve this problem, the head of SD Sudaagaran II told me that; she uses several steps to choose the most eligible student. Firstly, the preference is given to a student from a poor family, but if there are still several candidates who are eligible, then she gives preference to orphans. With that method, she feels satisfied that there are no protests from the community and the students’ parents with her decision.

4.3. The Deviations

If it can be categorized as deviation, the first deviation is the ignorance of the school principals and the teachers about this program. Although the school principal is the most responsible person in implementing the SSN program at the lowest level, not all of them do understand anything about SSN program for education. For instance the school principal of SD Sudaagaran I cannot even describe clearly what SSN for education is? She only mentions that 3 of her students were given scholarships, but she was not sure whether the scholarships came from the SSN program or not. She cannot even differentiate between SSN for education and a new program launched by the BKKBH, namely the scholarship for Anak Usia Sekolah Keluarga Miskin (Auskin, the program to help the school age children from poor families). On one occasion, she tried to explain to me about SSN for education but actually what she meant was the Auskin program.

“The registration for application of the scholarship from the SSN was closed on July the 10th [she was referring to the Auskin program instead of the SSN], unfortunately, we were late in registering our students. Most of them were registered in July the 19th 1999. Therefore, they cannot be included in the SSN program (field notes)”. Note: In the brackets is the author’s addition.

This confusing situation is not surprising, because there are several scholarships that are given to the students in Sudaagaran that come from official (i.e. the Pemda Bandung). On one occasion I asked Pak Sup whether he knows who has ever received the scholarship in his village. For Pak Sup simply did not know whether there is a scholarship program in his village let alone children who receive them.

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several different sources for instances the Gerakan National Orang Asal (GNOTA, the surrogate parents national movement for education) and the village head association in Kecamatan Wodi.

The second deviation is the reduction in the amount of the scholarship that is received by the students. For example one of the head of the schools in Sadagarang told me that every four months each student who qualifies for the scholarship is given an amount of Rp. 30,000. From that amount, Rp. 5,000 is deducted by the school for administrative costs i.e. paper, photo copy etc. The reduction of the amount of the scholarship that is given to the student is a serious deviation, since the program document says that it is prohibited to reduce the amount of the scholarship that is given to the student for any reasons.

5. The Cheap Rice Program (OPK, Operasi Khusus or Special Operation)

The OPK in Sadagarang village is implemented by the village officers. To make the operation easier, Pak Lurah appointed the hamlet heads (Sadagarang consist of 4 hamlets) to coordinate the distribution of the cheap rice packages to each hamlet. As the coordinator, the hamlet head has the responsibility to select a number of poor families (KS families) that are eligible to buy the cheap rice in his hamlet. After the target group is selected, then each month the hamlet head distributes a coupon to each KS family targeted. The coupon is used as an identity to buy the cheap rice in the Balai Desa (Village office building).

Ideally, the OPK program that was started in July 1998 allows the KS family to buy 20 Kgs of cheap rice priced at Rp. 1,000/Kg. But because of several reasons the price of cheap rice in Sadagarang was reduced to only 5 Kgs per family. As is the case with other villages, the reasons for the reduction of the package are (1) incapability of the poor families to obtain cash of Rp. 20,000 per month to buy 20 Kg rice; (2) there are other families that claim themselves as also eligible to buy the cheap rice.

It is very clear from the statements of the hamlet heads that the implementation of the OPK program is a very difficult task for them. The implementation problems arise from both the top and below. From the top the village officers have to be obedient to their superiors on whatever decision, they make. And from below, they are pressurized by the community in the name of information movement.

On one occasion when I visited the village office, Pak Riyanto, one of the hamlet leaders in Sadagarang, complained to me about the weighing problem of the rice that has to be distributed.

"The BKKBN always claims that every sack that is delivered to the village office contains 50Kg of rice. But actually not every sack always contains 50 Kg. most of them only contain 49.5 Kg. Because of this weighing problem, every month we have to pay extra money to the tune of Rp. 21,000 to the BKKBN. We have complained about it, but the BKKBN officers do not give positive
responses. We are only asked to sign the delivery form if we reject the rice that is delivered because of weighing problems. If we do so, it can be interpreted that we are against the reformation program. You can imagine what will happen to us by bothering the reformation program."

The weighing problem does not end after the delivery of the rice to the village office. Another problem faced, is how to distribute the rice equally to the target groups. The hamlet heads have to divide every 50Kg sack of rice into smaller packages (5 Kg per package). This is not such an easy job for them since they are not professionals in handling rice i.e. rice traders. Not to mention about the problem of unreliable balance that is used. Therefore to divide 50Kg rice into ten equal parts of 5Kg packages of rice is not always an easy job to be done by the hamlet heads. It often happens that the weight difference becomes the source of gossip amongst the community. For instance when the package, that is supposed to be 5Kg, only has a real weight 4.5Kg, KS families are not ready to pay the Rp 5,000 but only Rp 4,500. The hamlet head usually asks the KS still to pay Rp 5,000 instead of Rp 4,500, because if he allows them to pay Rp 4,500, he has to pay extra money to the BKKB. But this policy then becomes a source of gossip among the community as one Pak Kepala Desa told me:

"They accuse us that we deduct secretly the amount of the rice that should be distributed to the community. They do not know our problem. Therefore not to make the problem worse, we ask them to divide the 50Kg rice themselves. Our duty is only to distribute one sack of 50 Kg rice to every one group of KS families (each group consists of ten families). With our system our job becomes much more easier." Another problem is the envy of the other families that are not given the opportunity to buy the cheap rice who also claim that they have the same right since the rice is from the government. The opinion about the need to be treated equally does not only come from the poor families but also from some quite rich families. Ibu Riyanto, one wife of one of the hamlet head told me how she felt ‘crazy’ when she thought about this problem.

"I really do not know why some of the rich people here have the idea that they are also entitled to have the same right to buy the cheap rice. One of my neighbors here, actually my distant relative, also thinks like that. One day he had asked me to buy the cheap rice, but I had turned down his demand because his family is not so poor. The following day the whole of his family members did not want to speak to my husband and me. I felt very unhappy about it. Rather than making me sick, my husband told me to give him a coupon to buy the cheap rice. After that he wanted to speak to my family again".

Because of the above problems, Pak Larah made a policy to equalize (meratakan) the distribution of the cheap rice. With this policy, not only
the KS families have the opportunity to buy the cheap rice, but also the nearly poorer families (of course based on the hamlet head's judgment) or everybody who wanted to buy the cheap rice was given the opportunity. Therefore, when I asked Ibu Nani, one of KS family in Slenengan hamlet, how many packages of cheap rice she had bought so far? She replied that she only bought two tons. If the OPK program is carried out properly, the KS family, like that of Nani was given the opportunity more than seven times from the beginning of the program until the end of July when I conducted my fieldwork.

When I confirmed about it to Ibu Nani, she only said that she does not know why so suddenly she is no longer given the coupon any more. "May be because the coupon has to be distributed to some body else", she added. But Ibu Nani does not want to ask Pak Kepala Dusun. "I am ashamed to ask Pak Kepala Dusun about it. Only if I have some money, I buy (semplil) the cheap rice from my neighbors who have the chance to buy the cheap rice in the village office. Some times, if the quality of rice is not good, I am then allowed to buying the rice. After that I will mix it with better quality rice before cooking".

The quality of rice is another problem that has to be faced by the village officers. When the quality of rice that is delivered to the village office is good, then there is no such big problem for the village officers to sell it, although when several of the KS families do not want to use their coupons. But when the rice has very bad quality, then the village officer (Pak Lurah) has to pay in advance to the BKKB.

"Last month they delivered very bad quality of rice. After the community knew about it, nobody wanted to buy that rice, although we gave them the cheap rice coupons. It therefore becomes a source of problem for us, because we have to hand in the money to BKKB on time every month. So Pak Lurah has to pay in advance to the BKKB. But sometimes Pak Lurah is also reluctant to do that before the PLKB officers from Kecamatan 'intimidate' him".

To solve that problem, the hamlet head has to offer to everybody in his hamlet one by one to ask whether there is anybody who wants to buy cheap rice. During the general elections campaign, the PDI Perjuangan (the Indonesian Democratic Party of Struggle) cadres who helped the hamlet head to offer cheap rice to the community.

With such complex problems mentioned above, the result of the implementation of OPK program in Sudagaran village is far from successful. The low frequency and the amount of rice, that is received by the poor families every month simply does not contribute to cope up with the problem of fulfilling basic necessities among poor families. Although administratively (on paper) the implementation of the OPK is good, because the village offices can hand over the rice money on time, but in terms of effectiveness the OPK program was not able to achieve the intended objectives.

CONCLUDING REMARKS
From the above description, several points can be drawn from the
implementation of SSN program in Sudagarun village.

1. The implementation of SSN program only produces very little effect to the community as policy instruments to reduce the impact of the economic crisis to the village community. The SSN for health may be the only exception in this case. Although not as good as it is hoped, the SSN for health has given quite significant impact to the community in reducing health services, or at least to protect infants and children under the age of five from malnutrition.

2. The failure of the implementation of SSN program in Sudagarun is caused by several factors: (1) lack of the socialization of the program to the community or target group, (2) the ignorance or incapability of the Perangkat Desa as the implementers of the program, (3) lack of supervision, (4) the existence of a culture of formality approach. By using the formality approach, it is assumed that if formally (as told by the procedure) all the programs have been implemented (can be proven with expenditure receipts and good report), the objectives of the program were achieved without any question whether those programs have reached the target groups or not.

3. In spite of the weaknesses of the perangkat desa, the demand from the part of the community members, who are not eligible as target groups of the SSN program, to obtain the same treatment, has made a lot of tension in the community that force the perangkat desa to make several "policy adjustments" that deviate from the main objective of the policy.

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