

Government Strategy in Increasing Human Development Index through Population Policy in Samarinda

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Abstract

This study examines how the government of Samarinda integrates population policy as a tool to develop the Human Development Index (HDI), particularly in the domains of education, health, and income. Employing a qualitative descriptive approach, the research explores the formulation, implementation, and coordination of population-related strategies across various institutions. Data were collected through in-depth interviews with key actors, analysis of planning documents, and field observations at government offices and community health centers. Findings reveal that population policy in Samarinda is no longer treated as an isolated demographic agenda but integrated into the city's Regional Medium-Term Development Plan (RPJMD). Inter-agency collaboration, particularly the exchange and integration of digital platforms like SIAK and SIPD, has improved the accuracy of planning and the effectiveness of service delivery. Reproductive health and family planning programs have played a vital role in reducing maternal and infant mortality and in enhancing women's access to education and the labor market. Community participation, driven by local cadres and religious leaders, has further strengthened program outreach and acceptance. Despite these gains, the study identifies ongoing challenges, including gaps in coordination, limited human resources, and cultural resistance in some areas. Nonetheless, Samarinda presents a notable example of localized policy innovation in aligning demographic governance with human development goals. The study contributes to the understanding of subnational development strategies and provides insights for other cities in Indonesia.

Keywords: Human Development Index, Population Policy, Local Governance

Introduction

HDI Index has become a very important measure of success of national and local policy on development. HDI embraces three essential dimensions including education, health, and income, which provide combined overview of the ability or well-being of humans. At the Indonesian level, HDI takes the form of not only an indicator that measures statistics but also a reference and policy navigation toward which the national and regional governments are striving in terms of evaluating changes in the effectiveness of the development programs (Lestari & Arumi, 2024).

With the challenges of densification and population trends of cities worldwide coupled with gaps in socioeconomic indicators and inequality, there has been an increased necessity to achieve a

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coherence between government policy decisions and HDI goals. East Kalimantan the capital of East Kalimantan is Samarinda and is facing a considerable demographic change because of urbanization, internal migration and natural increase. The changes create both opportunities and challenges to the further development of humans.

The increasing population is likely to make economic life more dynamic, yet it can lead to inequality, when not properly planned entails pressures on education, health, and infrastructural system (Stevenson, 2021). It is in this regard that population policy has emerged as an important tool in influencing sustainable and fair development outcomes. Population strategies, such as family planning and demographic registration, internal migration, and managing it can be used to increase the success rate of the state policies in improving HDI.

Indonesia has also put an emphasis on population control by instituting nationally recognized family planning in the form of family planning program commonly referred to as KB (Family planning), which was a key tool in lowering fertility across the country since the 1970s. Nevertheless, since the post-decentralization period, local administrations, including the city of Samarinda, acquired the task of adapting those programs to individual sociopolitical and cultural realities of a specific context (Sylviana & Suyanto, 2024). Such a spreading of authority creates a policy innovation arena and an implementation problem.

It requires local planning agencies, health departments and community institutions to cooperate towards establishing integrated approaches which will ensure changes in HDI indicators towards a positive direction. Population issues in Samarinda are enveloped with access to education, quality of healthcare, urban-rural inequality, and employment inequality. Although the level of literacy has risen, together with the enrolment in school settings, the quality of education and the differences in access between urban and peri-urban regions have become the burning issues (Ilie et al., 2021).

The same goes with basic health services; even though the latter has become more accessible, maternal and child health indicators in selected districts of Samarinda remain below those observed across the province. These imbalances point at the importance of population policy beyond demographic control and focusing on working holistically towards the betterment of the lives of people across the dimensions of HDI.

The government of Samarinda has addressed them with a set of initiatives, including the digitization of population information using integrated solutions, including SIAK (Population Administration Information System) and enhance access to reproductive health facilities by means of Puskesmas (community health centers). Furthermore, the city has partnered with the National Population and Family Planning Agency (BKKBN) strategically which has enabled the city to design family planning and the maternal-child health programs according to the needs of the people.

Such endeavors reflect a strategic inclination in acknowledging the pivotal position of population policy to aid achievement of the HDI-related development items (Martins, 2023). In addition, the approach to the population strategy is directly connected with the long-term picture of development of Samarinda as observed in the Regional Medium-Term Development Plan (RPJMD).

The area of population policy in terms of this framework is not a separate sector but a cross-cutting tool to enhance health, education, and economic programs (Alsayari et al., 2024). Such relative location shows that policymakers are increasingly realizing that demographic planning cannot be treated in isolation without any relation to comprehensive social policies. Nevertheless, in spite of the favorable trend, a number of challenges remains. Among the most apparent challenges, there is a scarce degree of coordination between agencies that serve to realize the programs relating to population (Al-Ghaili et al., 2022).

The issue of budgetary restrictions, in addition to the variation of policy implementation between the administrative levels, also negatively affect the proper deployment of the strategy. Moreover, the community engagement is disparate especially in the districts whereby traditional values/beliefs or low literacy impacts negatively on access to family planning and health services (Sheppard, 2021). These aspects justify the necessity of further investigation of how the government strategies are performed, modified, and internalized on the ground concerning the HDI targets. Although trends in indicators of HDI can be numerically quantified as shown by statistical data, it does not capture the contextual detail, decision-making procedures, and the institutional processes at work in determining the trend of the indicator.

Therefore, they deserve a qualitative inquiry on what lies behind government strategy in Samarinda. This work aims at offering such a question, dwelling on the point of contact between the population policy and HDI enhancement. It not only examines existent strategies but how they are established in practice, formulated or challenged. This research is expected to add more insights on a realized meaning of the governance of regional development in Indonesia because it considers the actual experience by those involved in the policy making process and how the whole cooperation operates.

Methods

In this research, the study used qualitative descriptive orientation to investigate the governmental course of action to advance Human Development Index (HDI) using population policy in the city region of Samarinda. Qualitative design was selected to make it possible to understand the qualitative and institution dynamics and dynamics of the policy to explain the strategic decision-making and implementation processes. As opposed to prioritizing numerical facts or statistical relationships, this study is concerned with processes of meaning-making, institutional discourse and having to do with the perspective of stakeholders and is therefore best described by rich investigation and findings through interpretive analysis. The research is taken as a case study where Samarinda becomes the sole bounded case. The strategic reason of the choice of Samarinda is that it is a capital town of the East Kalimantan province which is currently experiencing transformative development since the province is surrounded by the new capital city project of Indonesia. In this regard, Samarinda is a living area in which population increase, city planning, as well as delivery of public services superimpose themselves and hence a lucrative location to study how the local government can strategize and implement their meanings to affect the indicators of the HDI.

The data used in the collection of primary data was concentrated on three larger methods of data collection; that is, in-depth interviews, analysis of documents, and non-participant

observation. A purposive sample of 14 key informants took part in in-depth interviews on the basis of their first-hand engagement in either planning, executing, or monitoring of population and HDI linked policies. Such those informants were the officials in the Regional Development Planning Agency (Bappeda), the Population and Civil Registry Office (Department of Population and Civil Registration), the Health Office (Dinas Kesehatan), and the Education Office (Dinas Pendidikan). Moreover, officials of the National Population and Family Planning Agency (BKKBN), community-based NGOs and local leaders were also interviewed to get various opinions on policy success and activeness by the community. The interviews were held in semi-structured manner and hence, it allowed the researcher sufficient ground in being consistent throughout the interviews but provided the researcher with the freedom to explore further on some issues. The qualitative information was collected in the form of interview questions on different subjects on strategy planning, co-ordination means, policy issues, resource allocation, community participation and HDI effects perceptions.

The interviews were of about 45 to 90 minutes; they were audio-recorded upon consent of the interviewees. The completeness of the transcriptions made was verbatim because this would ensure the validity of the responses used as well as the data under interview were kept anonymous so as to uphold confidentiality. The analysis of documents was applied to supplement the data collected through interviews and to identify the formalities of planning, regulations and performance assessment of HDI and population policy. The most important documents that have been studied are the Regional Medium-Term Development Plan (RPJMD) of Samarinda, strategic reports by Bappeda, the plans on health and education sectors, and the policy brief that have been developed by BKKBN and the population statistics that were provided by the Central Bureau of Statistics (BPS). These records gave valuable information on the policy aims, institutional functions and developmental priorities of the local government. Further, there was non-participant observation in several particular public offices, community health posts (Puskesmas) and village-based forums to find out the indulgent practices of implementation and interaction of the population with its related services.

The above observations were useful in contextualizing the interviews and document data since it has given a practical appreciation of the manner in which policies are put into use in actual governance processes. The sampling technique of this study was purposive and the informants were chosen on the grounds of their level of expertise, their position within an institution and their relevance in the achievement of research objectives. In a few instances (where preliminary informants have suggested relevant stakeholders especially those under the civil society/sub-district), snow ball sampling has also been employed. Such a method enabled the study to provide top-down (policy-level) and bottom-up (community-level) voices. Data analysis was conducted based on the thematic analysis model formulated which comprises three steps namely data reduction, data display, and conclusion drawing. In the data reduction stage, data of the interviews, field notes, and documents summaries were coded manually to determine frequently occurring themes and patterns. The codes were subsequently grouped into thematic classification regarding strategy making, implementation process, institutional cooperation, and results of HDI.

Statistics were presented in matrices in order to be able to cross-compares the data between the

sources and the stakeholder views. Last but not least, conclusions were made through the interpretation of the connections between thematic categories and the connection of those on the goals of the research and the literature available. A number of validation methods were used to ensure that the findings had enough credibility and trustworthiness. Triangulation was used in comparing the information gained through use of interviews, documents, and observations, to yield consistency and reliability. Member checking was done by providing important summaries to the selected members in order to validate them on whether others were accurate. In addition, there would be peer debriefing meetings with academic supervisors and colleagues to share understandings and address the biases of the researcher.

Results and Discussion

Being the capital of East Kalimantan province and the rapidly expanding urban center, being situated next to the future new national capital site in Indonesia, Samarinda is experiencing the rising population pressures and the growing set of public services requests. The local government has reacted by matching their population strategies with the larger scheme of the Regional Medium-Term Development Plan (RPJMD) to get the Human Development Index (HDI) to improve in a multi and cross-sectoral intervention. This section shows the empirical findings related to the study, performed by interviewing, analyzing documents, and observation of the field. The findings are organized in accordance with thematic lines of the population policy implementation into the performance of the institutions, programs, and communities, as well as with the implementation of those strategies into the enhancement of the Samarinda educational, health, and economic prosperity.

Strategic Integration of Population Policy into Regional Development Planning

A centralized conclusion of the research is that there is a very good matching between the population policy and the overall process of regional development planning context in Samarinda. The city government, especially Regional Development Planning Agency (Bappeda) has ceased to look at population dynamics as a mere input to statistics. Rather, such dynamics are more presently being considered as critical determinants of the direction in which the development interventions are to be taken in the areas of education, health, and economic welfare. The strategic shift is a more holistic and looking strategic approach to governance.

The population data managed by the Civil Registry Office (Dukcapil) and related demographic projections are now routinely used in determining infrastructure and service planning. For example, the number of school-age children is projected based on birth registration data, which then informs school construction and teacher allocation targets. Similarly, health programs are designed with attention to fertility trends and household compositions. This integration ensures that demographic patterns are not treated in isolation but as fundamental variables influencing human development outcomes. A planning officer at Bappeda explained this approach:

"Population data is no longer something we review after the fact. It's used at the beginning, during the formulation of development priorities. For example, we use population projections to determine where new health centers or schools are needed."

The Regional Medium-Term Development Plan (RPJMD) for Samarinda 2021–2026 explicitly

incorporates population management as a strategic objective. In addition to setting targets for the reduction of fertility rates and increasing civil registration coverage, the RPJMD links these targets to HDI indicators such as life expectancy, mean years of schooling, and per capita expenditure. The document further outlines how the development of urban infrastructure and service delivery must be tailored to the demographic realities of each district and sub-district. An official from the Health Office emphasized this interconnectedness:

"When population policy is included in the RPJMD, it becomes a cross-sector mandate. So, the health office, the education office, and others must align their programs accordingly. It creates a shared responsibility model."

This integration model promotes not only administrative efficiency but also a holistic understanding of development challenges. For example, population mobility patterns including rural-to-urban migration and informal settlements are factored into spatial planning and public service delivery models. Bappeda has worked in coordination with the Department of Public Works to ensure that basic service infrastructure, such as sanitation and clean water, is expanded to high-density areas identified through population mapping.

Moreover, the use of technology has been instrumental in supporting this integration. The development and application of information systems such as SIAK (Population Administration Information System) and SIPD (Sistem Informasi Pembangunan Daerah) have enabled real-time access to population data, which can be directly utilized by planning units at the district and city levels. According to a staff member from the Dukcapil office:

"SIAK allows each department to access the population database. This means when the education office wants to plan school seats, they don't need to collect data manually—they can see it live, categorized by age, address, and school level."

Despite this progress, the study also found that the success of this strategic integration relies heavily on political will and inter-agency collaboration. In the past, population data were managed in a fragmented manner, leading to mismatched development priorities. However, under the current RPJMD period, a more coherent framework has been enforced through Mayor's regulations and periodic coordination forums. This ensures that demographic concerns are embedded in development discourse and not merely relegated to the technical staff.

Institutional Collaboration and Policy Coordination

The efficiency of strategy of the city of Samarinda in terms of the further enhancement of Human Development Index (HDI) with the help of population policy system largely depends on the degree of collaboration and coordination of government institutions. The observations brought out in this study show that the population issues are all cross sectoral characterized by the fact that they involve several local departments including Regional Development Planning Agency (Bappeda), Department of Population and Civil Registration (Dukcapil), Health office, Education office and the local office of National Population and Family Planning Agency (BKKBN). It is the responsibility of these institutions to collaborate so as to make sure problems concerning population policies are integrated with the goals of HDI and that they are implemented by coherent and unified programs.

One of the strongest illustrations of institutional collaboration is the joint use and development of integrated information systems. The SIAK (Population Administration Information System) system developed by Dukcapil has become a centralized demographic database that is accessible by other agencies for planning and targeting purposes. This collaboration enhances the accuracy of planning interventions. For instance, the Health Office uses population data to identify areas with low immunization rates or high maternal mortality, while the Education Office uses the same data to determine student-age populations and school enrollment forecasts.

"We used to work with our own datasets, but now we have a shared system. Through SIAK, we can coordinate more effectively. It helps us avoid overlapping services and target our programs better."

Explained one official from the Education Office.

The use of such shared platforms has contributed to better synchronization between population policies and service delivery. However, while the intention for integration is clear, the coordination mechanisms still face practical challenges. Interviews with Bappeda and BKKBN officials revealed that although inter-agency meetings are scheduled periodically, communication gaps and bureaucratic silos remain a persistent problem. These issues often lead to fragmented implementation, where each agency continues to operate with partially overlapping agendas.

"There are joint planning forums, yes, but sometimes the follow-up is weak. After meetings, the implementation goes back to siloed routines."

This observation implies that cooperation, although dictated institutionally, requires further reinforcement at the working level through a better establishment of inter-agency responsibilities, better communication between agencies and a common budgeting. Presently, most of the initiatives involving HDI depend largely on the resources or funds provided by both the local and the central governments, sometimes without complete coordination. To give an example, when BKKBN carries out centrally funded family planning campaigns it leaves logistics and community outreach and delivery of services to local governments. This mismatch in the schedule of the programs or allocation of the resources may diminish the overall output of the strategy.

The third level of partnership that was noticed between the local government and the civil society organizations, especially in the area of reproductive health education and civil registration awareness. The Health Office and Dukcapil commonly involve or make use of non-governmental organizations (NGOs) and community-based organizations (CBOs) to reach communities in the low-accessibility or high-resistance regions of the country.

Family Planning and Reproductive Health Programs as Key Drivers

Family planning and reproductive health services have emerged as crucial components in Samarinda's strategy to increase the Human Development Index (HDI), particularly in improving the health and education indicators. Based on the findings of this study, these programs are not only tools for controlling population growth but are also seen as enablers of broader human development. The city government, in collaboration with the National Population and Family

Planning Agency (BKKBN), has placed significant emphasis on making family planning services more accessible, culturally acceptable, and integrated into primary healthcare delivery.

One of the key drivers of this progress is the strengthening of service delivery at the grassroots level. Community Health Centers (Puskesmas) across Samarinda have been equipped to offer family planning consultations, contraceptive services, and reproductive health education. This is supplemented by the deployment of trained community cadres (kader KB), who conduct outreach to educate families, especially in peri-urban and densely populated areas, about the benefits of planned parenting. An officer from BKKBN explained:

"We have moved from a numbers-based approach to a quality-of-life perspective. Family planning is now about giving families the ability to make informed decisions that affect their children's education and health."

These programs are closely linked with HDI improvements, particularly in reducing maternal and infant mortality rates and improving female participation in education and the workforce. By enabling families to space births and limit the number of children based on their economic capacity, family planning contributes to reducing dependency ratios and allowing households to invest more in each child's development. A midwife at a Puskesmas in Samarinda Seberang commented:

"Many women now realize that having fewer children means they can focus on their education and start working. We see this every day in our counseling sessions—especially among young couples who come here after attending pre-marriage classes."

The city government has also intensified efforts to target adolescents and newlyweds through reproductive health education programs. These initiatives aim to reduce early marriages and unplanned pregnancies, both of which can have long-term negative impacts on HDI indicators. Interview data revealed that collaboration between the Education Office, the Health Office, and BKKBN has resulted in the introduction of adolescent reproductive health modules in schools and youth community centers.

"We now hold regular sessions in high schools and with youth groups to discuss reproductive health. It's not just about contraception it's about understanding your body, your rights, and your future."

Another important innovation has been the introduction of mobile family planning services (Mobile Family Planning Services), which target remote and underserved areas in Samarinda. These mobile units provide contraceptives, medical checkups, and counseling, significantly reducing access barriers for marginalized populations. Observations during the fieldwork confirmed that such services are welcomed in low-income settlements, particularly those located along rivers and in informal housing zones. A cadre shared:

"The mobile services help a lot. People who can't come to the clinic due to work or distance are still served. This builds trust and changes attitudes toward family planning."

Despite these successes, several implementation challenges remain. Informants noted that cultural and religious beliefs still affect the acceptance of family planning methods in certain

communities. In some districts, resistance persists, especially where male involvement in reproductive decisions is minimal. A health officer mentioned:

"In some areas, husbands still oppose contraceptives because they believe it interferes with divine will. It takes continuous education and dialogue to overcome that mindset."

Additionally, although the government has ensured the availability of free contraceptives and basic services, there are gaps in counseling quality and follow-up visits due to limited human resources. Some Puskesmas are understaffed, and cadres are not always able to visit households regularly. This occasionally leads to discontinuation of contraceptive use or misinformation about side effects

The findings of this study highlight that the government of Samarinda has taken a multi-dimensional and collaborative approach to integrate population policy into its broader development strategy in order to improve the Human Development Index (HDI). Through strategic alignment with the Regional Medium-Term Development Plan (RPJMD), increased inter-agency collaboration, and community-based interventions, Samarinda demonstrates a growing institutional capacity to implement population policies that are closely tied to human development goals. These findings offer several important contributions to the existing literature on local governance, demographic planning, and human development in decentralized settings (Febriandiela et al., 2024).

To begin with, the study supports the view that local governments may be revolutionary in implementing population policy when the demographic data are informed into the planning procedures (Yigitcanlar et al., 2021). It is in line with the studies conducted earlier on the importance of decentralized governance systems to have a data-driven planning. Nonetheless, in contrast to previous studies that primarily dwell on the central government efforts, the paper presents place-based information on the integration of population strategies within the RPJMD of Samarinda. With the capacity to use digital tools in mapping the population and targeting its program, such as SIAK and SIPD, the city has developed a sophisticated form of evidence-based governance (Riau, 2022).

Second, the results support the fact that the institutional cooperation remarkably promotes the efficiency of population policies (Duong & Han, 2021). Earlier researchers demonstrated that the existence of a fragmented framework of governance has been a fundamental obstruction to carrying out integrated development initiatives in Indonesia. This paper confirms this note and adds on it providing evidence of their practical arrangements that Samarinda has built up, including shared information systems and inter-agency forums, as well as those bottlenecks still remaining, including uneven coordination and budget overlap. These observations imply that policy integration schemes might exist, but some structural and political obstacles in implementing them exist, especially across the sub-district level.

Furthermore, the role of family planning and reproductive health programs as key drivers of HDI progress has been well documented in literature, especially in the context of reducing maternal and child mortality and enhancing female participation in the workforce (der et al., 2023). This study contributes to this discourse by demonstrating how Samarinda's localized strategies such as mobile clinics, school-based reproductive education, and cadre-based outreach have adapted

national policies to suit urban and semi-urban realities. Unlike in many previous studies where family planning is evaluated primarily through quantitative metrics (e.g., contraceptive prevalence rates), this study offers a qualitative understanding of how these programs are received by communities and the practical constraints faced by implementers, including cultural resistance and limited human resources.

Moreover, the emphasis on community engagement and localized approaches aligns with global perspectives on participatory governance and inclusive development. Community involvement, especially through neighborhood leaders, women's organizations, and religious figures, has proven to be a critical enabler in overcoming resistance to family planning and increasing uptake of civil registration services. This confirms existing findings that culturally contextualized messaging and trust-building are essential to the success of population programs. However, this study extends the literature by offering concrete examples of how community-based governance works in practice within a medium-sized Indonesian city (Leslie et al., 2025).

A significant contribution of this research lies in addressing the gap between policy formulation and implementation. While national and regional development plans often articulate ambitious targets for HDI improvement, less attention has been paid to how these targets are translated into day-to-day practices at the local level. This study fills that gap by providing empirical evidence of how policies are interpreted, adjusted, and applied by local actors (Gargano, 2021; Baldwin et al., 2024). The evidence that some cadres are responsible for more than three neighborhoods underscores the importance of not only strategic clarity but also administrative feasibility.

In addition, this study offers timely insights relevant to the broader context of Indonesia's ongoing capital relocation project (Hilal et al., 2024). As Samarinda lies near the site of the new national capital (IKN Nusantara), its population is expected to increase rapidly, further stressing infrastructure and public services. The findings presented here can thus inform preemptive policy designs that other local governments may adopt in anticipation of demographic pressures. Future studies could explore how cities like Samarinda prepare for regional integration into the new capital framework, especially concerning HDI stability (Nurlaily et al., 2025; Rachmawati et al., 2024; Mas'ud et al., 2024).

Finally, while the study focuses on a single case, its methodological design and findings have broader implications for other Indonesian cities experiencing similar urbanization trends. The use of qualitative methods particularly interviews, document analysis, and observation has allowed for a rich understanding of the complex interactions among policies, institutions, and communities (Armstrong, 2021; Morgan, 2022). This approach offers a complementary perspective to existing quantitative studies and emphasizes the value of localized, bottom-up insights in understanding development strategies.

Conclusion

This research points out that there is a good implementation of the population policy in the implementation of the development of the region of Samarinda, in order to enhance the Human Development Index (HDI). With the help of data-driven approach, inter-agency collaboration, and tailored family planning initiatives, the city has coupled its demographic management with health, education, and welfare objectives. Locality outreach and community involvement have

also facilitated the provision of reproductive programs. Although it has come with a number of obstacles as in the case of scarce resources and cultural opposition, the tactical application of population policy in Samarinda portrays an upward model in the enhancement of human development in the local setting.

References

- Al-Ghaili, A. M., Kasim, H., Al-Hada, N. M., Hassan, Z. B., Othman, M., Tharik, J. H., ... & Shayea, I. (2022). A review of metaverse's definitions, architecture, applications, challenges, issues, solutions, and future trends. *Ieee Access*, 10, 125835-125866. <https://doi.org/10.1109/ACCESS.2022.3225638>
- Alsayari, F. A. S., Alsaiani, S. S. B., Alzogly, M. A. A., Almothel, M. S. M., Alkorbi, D. N. S., Albalawi, N. F., ... & Alshammry, S. H. (2024). Critical Review of Cross-Cutting Themes in Global Healthcare. *Journal of Ecohumanism*, 3(8), 2532-2540. <https://doi.org/10.62754/joe.v3i8.4984>
- Armstrong, C. (2021). Key methods used in qualitative document analysis. *OSF Preprints*, 1(9). <https://dx.doi.org/10.2139/ssrn.3996213>
- Baldwin, E., Thiel, A., McGinnis, M., & Kellner, E. (2024). Empirical research on polycentric governance: Critical gaps and a framework for studying long-term change. *Policy Studies Journal*, 52(2), 319-348. <https://doi.org/10.1111/psj.12518>
- der Hatcher, V., Williams, M., Dorin, P., & Switzer, K. (2023). Catalyzing sustainable development: assessing the impact of family planning programs on population control, reproductive health, and gender empowerment. *Law and Economics*, 17(2), 111-130. <https://doi.org/10.35335/laweco.v17i2.4>
- Duong, M. H., & Han, T. A. (2021). Cost efficiency of institutional incentives for promoting cooperation in finite populations. *Proceedings of the Royal Society A*, 477(2254), 20210568. <https://doi.org/10.1098/rspa.2021.0568>
- Febriandiela, F., Frinaldi, A., & Magriasti, L. (2024). Critical Analysis of Decentralization Theory in the Context of Local Government: A Literature Review. *Adabi: Journal of Public Administration and Business*, 11(1), 1-13. <https://doi.org/10.62066/jpab.v11i1.13>
- Gargano, G. (2021). The bottom-up development model as a governance instrument for the rural areas. The cases of four local action groups (LAGs) in the United Kingdom and in Italy. *Sustainability*, 13(16), 9123. <https://doi.org/10.3390/su13169123>
- Hilal, N. A. D. M., Komariah, K., & Ramelan, A. H. (2024). The multifaceted implications and challenges of relocating Indonesia's capital city: A comprehensive review of socio-economic, environmental, urban planning, and policy considerations. *Sustinere: Journal of Environment and Sustainability*, 8(3), 375-396. <https://doi.org/10.22515/sustinere.jes.v8i3.403>
- Ilie, S., Rose, P., & Vignoles, A. (2021). Understanding higher education access: Inequalities and early learning in low and lower-middle-income countries. *British Educational Research Journal*, 47(5), 1237-1258. <https://doi.org/10.1002/berj.3723>

- Leslie, A., Woods, E. K., van den Broek-Altenburg, E. M., Stein, G. S., & Carney, J. K. (2025). Lessons learned: enhancing rural risk communication for future health crises through the PHERCC framework. *Frontiers in Public Health*, 13, 1594833. <https://doi.org/10.3389/fpubh.2025.1594833>
- Lestari, D., & Arumi, N. A. (2024). Factors that influence the Islamic Perspective Human Development Index as Evidence of the Development of the Muslim Community. *Journal of Lslamic Economics and Bussines Ethics*, 1(2), 75-93. <https://doi.org/10.24235/jiesbi.v1i2.133>
- Martins, A. S. T. (2023). *Herb-drug interactions: a decision support system with biometric auhtentication* (Master's thesis, Instituto Politecnico do Porto (Portugal)).
- Mas' ud, R., Hasid, Z., Suharto, R. B., & Lestari, D. (2024). The Influence of Human Resource Development on Inclusive Regional Economic Development: A Spatial Economic Assessment Approach. *International Journal of Economics (IJE)*, 3(1). <https://doi.org/10.55299/ijec.v3i1.821>
- Morgan, H. (2022). Conducting a qualitative document analysis. *The qualitative report*, 27(1), 64-77. <https://doi.org/10.46743/2160-3715/2022.5044>
- Nurlaily, D., Hayati, F. N., & Silfiani, M. (2025, January). Cluster analysis of regency/city in East Kalimantan based on the human development index as a preparation for the movement of the national's capital. In *AIP Conference Proceedings* (Vol. 3248, No. 1). AIP Publishing. <https://doi.org/10.1063/5.0237450>
- Rachmawati, R., Haryono, E., Ghiffari, R. A., Reinhart, H., Fathurrahman, R., Rohmah, A. A., ... & Kraas, F. (2024). Achieving Sustainable Urban Development for Indonesia's New Capital City. *International Journal of Sustainable Development & Planning*, 19(2). <https://doi.org/10.18280/ijstdp.190204>
- Riau, D. P. (2022). Improving City Plan Certificate Services Electorally (e KRK) Based on Digital City Spatial Planning. *Megafury Apriandhini, SH, MH Chair of 4th OSC*, 373.
- Sheppard, D. (2021). *Improving community-based natural resource management practice in West Africa: Mapping changing spiritual values within belief-based conservation networks in Ghana and Liberia* (Doctoral dissertation, University of Guelph).
- Stevenson, J. C. (2021). Population and Inequality Dynamics in Simple Economies. *arXiv preprint arXiv:2101.09817*. <https://doi.org/10.48550/arXiv.2101.09817>
- Sylviana, W., & Suyanto, S. (2024). Efficiency of local government expenditure in health sector. *Journal of Economics Research and Policy Studies*, 4(3), 418-445. <https://doi.org/10.53088/jerps.v4i3.1174>
- Yigitcanlar, T., Corchado, J. M., Mehmood, R., Li, R. Y. M., Mossberger, K., & Desouza, K. (2021). Responsible urban innovation with local government artificial intelligence (AI): A conceptual framework and research agenda. *Journal of Open Innovation: Technology, Market, and Complexity*, 7(1), 71. <https://doi.org/10.3390/joitmc7010071>