



Realizing Human Development Improvement In The City Of Pekalongan (Regional Apparatus Assistance Action Study in Drafting Regional Action Plan for Improving Human Development Index)

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Abstract: Pekalongan City's regional development policy prioritizing increasing human development is a mandate of the Pekalongan City Regional Medium Term Development Plan 2021 - 2016, realizing the achievement of the Sustainable Development Goals (SDG's) agenda as spearheaded by the United Nations Development Program (UNDP) directing regional development as an embodiment of long life and be healthy, lead a productive life, be educated and have a decent and dignified standard of living (UNDP, 2020). Assistance is carried out by realizing the Regional Action Plan document for Increasing the Human Development Index for Pekalongan City for 2024 - 2029. This implementation approach involves action studies as a form of facilitation, analysis of strategic issues and preparation of program priorities based on the direction of the Sustainable Development Goals (SDGs), national policy direction and regional authority.

Keywords: human development, regional action plans, programs, tasks and functions.

1. INTRODUCTION

Pekalongan City is one of six cities in Central Java Province strategically located on the main economic route of Java Island and is the center of national economic growth and activity. Administratively, Pekalongan City consists of four sub-districts and 17 villages with a population (2023) of 308,310 people, consisting of 155,701 men and 152,069 women and based on age group, 90,183 people are in the productive age group (15-64 years), the unproductive group (0-14 years) is 72,555 people and the unproductive group is 17,628 people. The problems of unemployment and poverty are strategic issues with an open unemployment rate of 7.47% and a poor population of 23,490 people (BPS, 2023).

Therefore, human development becomes an important priority as stated in the Regional Medium-Term Development Plan (RPJMD), namely: "Realizing a More Prosperous, Independent and Religious City of Pekalongan". The priority of human development is to achieve a long and healthy life (health), educated and skilled (education) and prosperity and dignity (prosperity/economy) through good governance. The priority of human development becomes a commitment, policy direction and governance based on high human development indicators. This is in line with the Sustainable Development Goals (SDG's), especially Agenda 1, Agenda 2, Agenda 4 and Agenda 6 with increasing human resources, both health, education and welfare as the key to national progress with more dignified social life governance. The global development policy pioneered by the United

Nations (UN) leads to the global development policy of 2016-2030 through human development, gender equality, living environment and dignified life order so that the population is healthy, lives a productive life, is educated, lives decently and with dignity (UNDP, 2020).

Strategic issues of human development are measured based on the Human Development Index (HDI). The HDI value of Pekalongan City compared to five (5) other cities in Central Java is the lowest. The HDI value of Pekalongan City (2022) is 75.40, lower than the other five cities, namely Tegal City (75.52), Magelang City (79.43), Surakarta City (82.62), Semarang City (83.55) and Salatiga City (83.60).

The quality of human resources is the key to national progress, one of which is known from the Human Development Index (HDI) a development performance indicator measuring four (4) main dimensions of human development and basic population capabilities, namely: Life Expectancy at birth (health), educational attainment consisting of Average Length of Schooling and Expected Length of Schooling (education) and per capita expenditure/year (economy/welfare) measuring access to resources to achieve a decent standard of living (SHL). Human resource development policy is a long-term investment in national development. Human development policy is not enough HDI alone but realizing a dignified society in the sense of social, economic and political conditions and opportunities to be creative and productive, healthy and recognition of human rights (Revinsor Baswir, 2019).

Three important aspects of human development in the HDI are: (1) health aspects in the form of long and healthy life, (2) education aspects in the form of knowledge and skills and (3) economic aspects in the form of decent living standards/purchasing power are strategic issues for medium-term development. Human development is not only an effort to increase human capabilities but also efforts to utilize capabilities productively and creatively, law enforcement and institutions for the management of dignified life.

2. METHODS

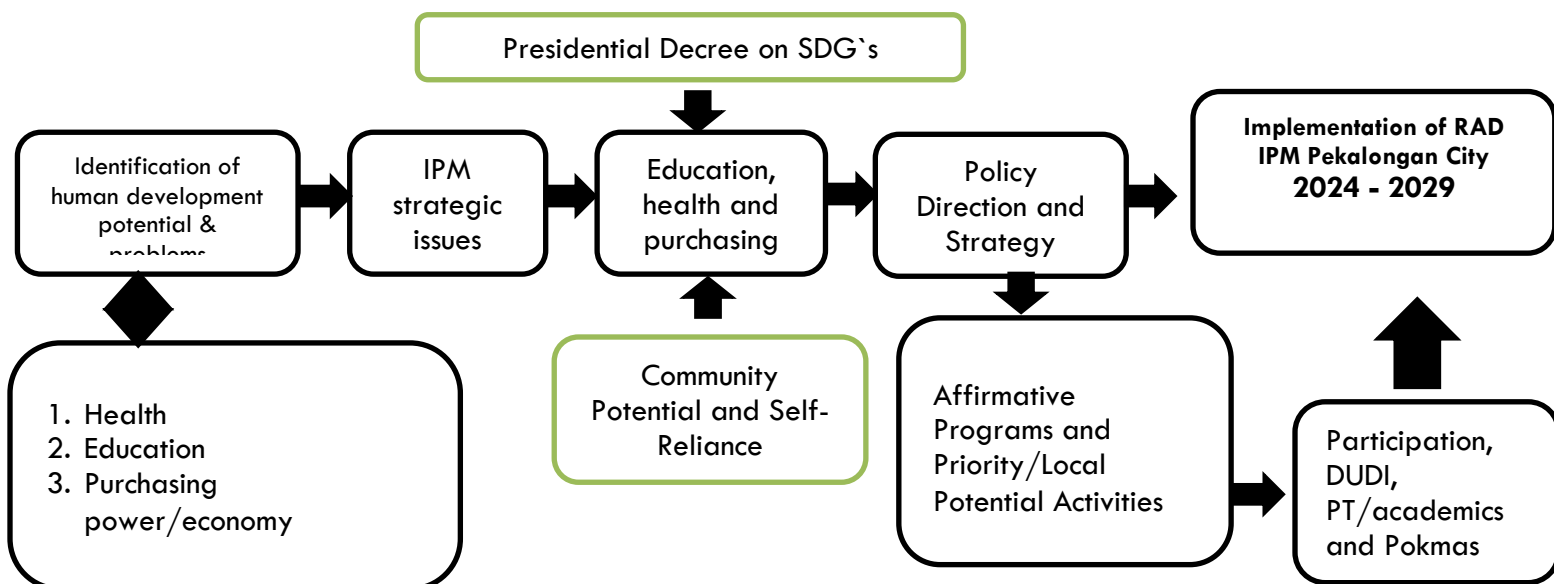
The research method used in compiling the study on improving the Human Development Index is the action research method (action research) conducted in a participatory manner and facilitation in compiling regional development planning documents (Kemmis, S., & McTaggart, R. (1988)). In this process, researchers work together and establish partnerships with the regional apparatus of Pekalongan City to collect data, identify strategic issues, formulate policy directions and priority programs based on calculations of the Human Development Index projection for 2025 - 2029. The reflection cycle and stages of

development planning activities are based on a technocratic approach and regional development planning guidelines. This is in accordance with the opinion that development planning is a conscious, organized and continuous effort to choose the best alternative from a number of alternatives to achieve certain goals (D. Conyer & Hild (1994).

The scope of the preparation of the Human Development Index (HDI) Improvement document for Pekalongan City consists of: (1) Identification of problems, strategic issues; (2) formulation of strategies, policy directions and priority programs for improving the HDI. The types of data, collection techniques and in the preparation of this research are presented as follows:

No	Data Types	Collection Techniques	Data and Sources	Analysis
1	Primary Data	Focus group discussion (FGD)	Related OPD apparatus (population, health, education, trade, industry, youth and sports, gender and community empowerment and others.	Descriptive
2	Secondary data	Documentation	Central Java BPS data, Pekalongan City BPS and OPD data (series)	Table and graph analysis and trends with a comparison of 5 cities, Central Java and national.
			Relevant regional development planning documents	Descriptive

The framework of thought in the study of the act of preparing the RAD for Increasing HDI is stated as follows:



The Flow of Thought for the Study of Action to Increase the Human Development Index of Pekalongan City

3. FINDINGS AND DISCUSSION

Description of IPM Conditions

The development of the Human Development Index in Pekalongan City from 2017-2021 has increased quite well. In 2017, the Human Development Index of Pekalongan City was 73.77 and until 2021 it was 75.40. The increase in the Human Development Index of Pekalongan City is in line with Central Java and National. When compared with the Human Development Index in Central Java and National, it is known that the Human Development Index of Pekalongan City is higher than the average of Central Java (2021) of 72.16, and National of 72.29. However, when compared with 6 other cities in Central Java, the Human Development Index of Pekalongan City is in the lowest position. The highest Human Development Index is Salatiga City at 83.60 (very high category). The development of the Human Development Index of Pekalongan City is presented as follows.

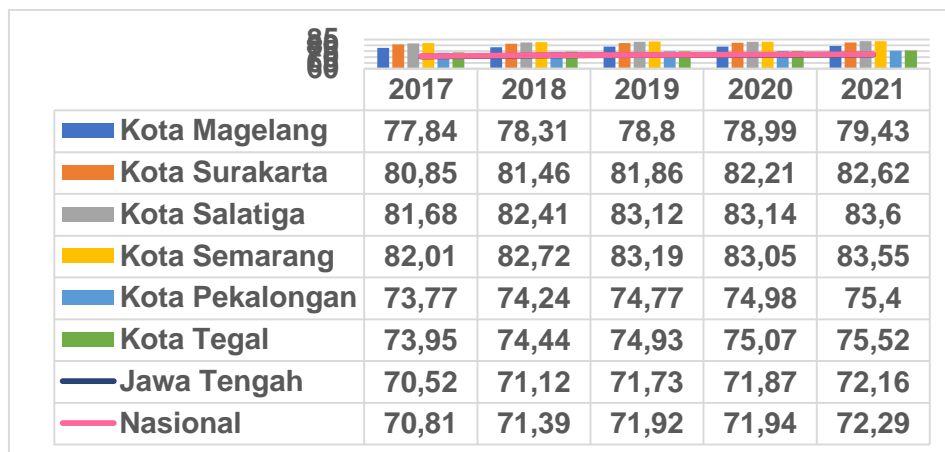


Figure 1 Development of Human Development Index (HDI) in Pekalongan City and Surrounding Cities, Central Java, and National 2017-2021

Source: BPS Pekalongan City, BPS Central Java 2023

The calculation of the Human Development Index (HDI) since 2017 has changed to: Life Expectancy (fixed), Expected Years of Schooling (new), Average Years of Schooling (fixed), and Expenditure per Capita per month (new). Both in terms of value and ranking, this calculation has shifted the position of the national HDI ranking and the ranking for Pekalongan City. In this new approach, serious attention is paid to the component of Expected Years of Schooling. Although the expected years of schooling have a tendency to increase, it is still not as expected, which of course has implications for increasing the HDI of Pekalongan City.

a. Life Expectancy (AHH)

According to Mills and Gibson (2014), health development policies are about resource allocation, the amount of resources allocated for health services, the reach of service systems and prevention efforts, treatment and health recovery for the community and environmental health. AHH is an instrument to determine the impact of health development performance with increasing health quality (longevity and health) and increasing population productivity and community welfare due to increased productivity. The results of Arofah's (2019) study stated that increasing AHH has a positive effect on increasing the HDI, especially with increasing population productivity and an average improvement in meeting decent living needs (KHL).

Life Expectancy (AHH) is a measure of the increase in the welfare of the population in general and the level of health in particular. The development of Life Expectancy in Pekalongan City over the past five years (2017-2021) has continued to increase. Life Expectancy was 17.94 years in 2017, increasing to 74.44 years in 2021. This means that if life expectancy increases, the health of the population will also increase and extend their life expectancy (long life and healthy life).

Life expectancy in Pekalongan City is still below the average of Central Java (74.47 years), and higher when compared to the national average of 71.57 years. However, when compared to the five surrounding cities, namely Magelang City, Salatiga City, Tegal City, Surakarta City and Semarang City, the Life Expectancy of Pekalongan City is much lower. More details can be seen in the following image.

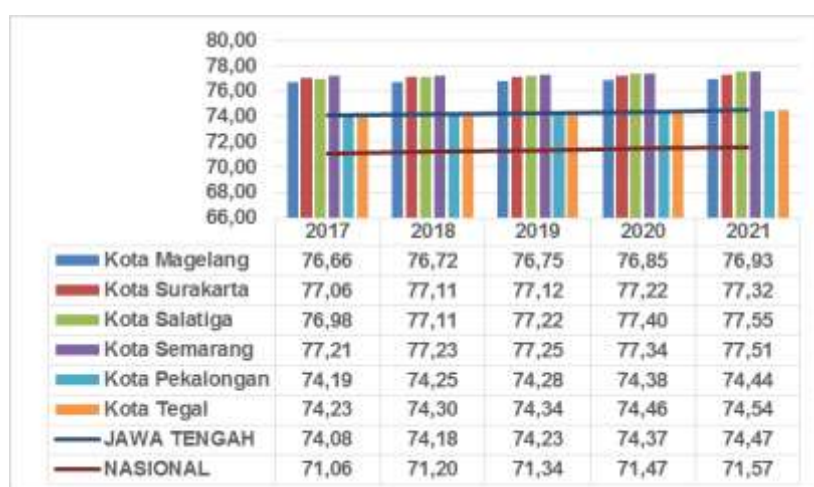


Figure 2. Development of Life Expectancy in Pekalongan City with Surrounding Cities, Central Java, and Nationally 2017-2021

Source: BPS Pekalongan City, BPS Central Java 2022

There are several factors that affect AHH and are complex, namely economic aspects, health aspects, social aspects and environmental aspects. The dominant factor that affects AHH is the health aspect which aims to improve the health of the community which needs to be considered in improving the quality of human resources and becoming an investment in the future.

In order to realize the improvement of public health, various efforts are needed through promotive and preventive activities as the basis for health development. Supporting factors are community empowerment and the involvement of all stakeholders through the Germas Program, the Family Health Index and the realization of the Healthy Pekalongan City. The realization of the increase in AHH is greatly influenced by the health factors of mothers, babies and toddlers; nutritional improvement; behavioral changes; prevention of infectious and non-infectious diseases; environmental health and health service factors with a continuum of care approach or comprehensive continuous health care throughout the human life cycle. The cycle starts from pregnancy, babies, children, adolescents, adults to the elderly (elderly) which involves the role of the family and community. Primary health care facilities (Puskesmas) and referral health facilities (Hospitals) also play a role in improving the quality of health.

b. Average Length of Schooling (years)

State investment in education through the allocation of 20% of the budget as a concrete manifestation of strategic human resource investment. The 12-Year Compulsory Education Program supports education nationally by increasing the number of students completing higher education (Ministry of Education and Culture, 2019).

The average length of schooling can be used to determine the quality of education in the community in Pekalongan City. The average length of schooling continues to increase from 2017-2021. This condition shows that the quality of people in Pekalongan City is increasing, the higher the average length of schooling. The development of the average length of schooling is seen in the following figure.



Figure 3. Development of Average Length of Schooling in Pekalongan City with Surrounding Cities, Central Java, and Nationally 2017-2021

Source: BPS Pekalongan City, BPS Central Java 2023

Based on the data above, it can be seen that the average length of schooling in Pekalongan City in 2021 (9.18 years) is higher when compared to the average length of schooling in Central Java, which is 7.75 years, and nationally, which is only 8.54 years.

c. Expected Years of Schooling (years)

The expected length of schooling in Pekalongan City in the five-year period (2017-2021) continued to increase from 2017 by 12.78 years, and increased in 2021 to 12.85 years or equivalent to Senior High School (SMA) education. The development of the expected length of schooling in full can be seen in the following figure.



Figure 4 Development of Expected Years of Schooling in Pekalongan City with Surrounding Cities, Central Java, and Nationally in 2017-2021

Source: BPS Pekalongan City, BPS Central Java 2023

Based on the data presented in the image above, it can be seen that the expected length of schooling in Pekalongan City in 2021 (12.85 years) is higher than Central Java Province which is only 12.77 years and below the national expected length of schooling figure of 13.08 years.

d. Welfare/ Purchasing Power

In a broader scope, a decent standard of living describes the level of community welfare in line with the increasing regional economy. The purchasing power of the population towards the level of per capita consumption per month or per year. The level of population welfare is said to increase if there is an increase in real consumption per capita, namely an increase in household expenditure nominals higher than the inflation rate in the same period (Haryanto, 2018). BPS calculates per capita expenditure based on expenditure on food and non-food expenditures which can describe how the population spends their household needs. According to Haryanto (2018), household consumption provides income to national income of 60% - 75% and secondly, household consumption has an impact on determining fluctuations in economic activity in a region. The average per capita expenditure indicator according to BPS shows the spending capacity for 52 commodities to meet food and non-food needs (including housing, taxes/levies, social needs and durable goods).

The development of per capita expenditure in Pekalongan City from 2017-2021 is fluctuating. The average per capita expenditure shows the average level of welfare in six cities in Central Java, as follows:

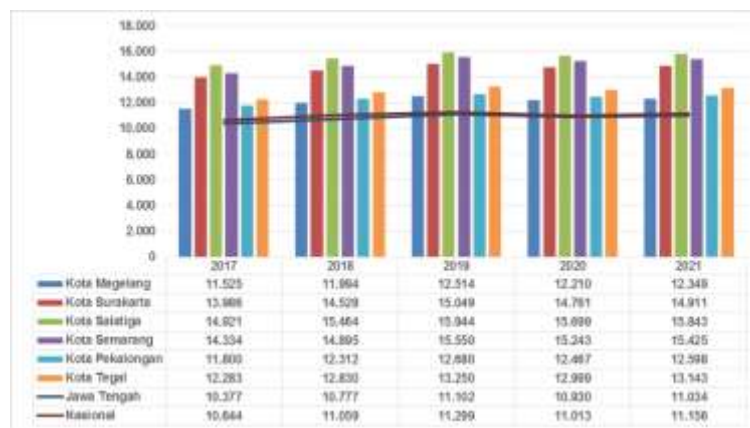


Figure 5. Development of Per Capita Expenditure in Pekalongan City with Surrounding Cities, Central Java, and Nationally 2017-2021

Source: BPS Pekalongan City, BPS Central Java 2023

Per capita/annual expenditure in Pekalongan City (2021) is higher than the National average (Rp. 11,156,000) and Central Java (Rp. 11,034,000). The average expenditure of Pekalongan City residents (BPS, 2021) is largest for food expenditure at 46.83%, housing at 26.96% and goods and services expenditure at 13.93% and durable goods at 4.61%.

Progress in Improving Human Development Index

a. Human Development Index Target Plan for Pekalongan City for 2024-2029

The preparation of the target achievement of the Human Development Index of Pekalongan City in 2024-2029 is based on the calculation of growth and the average growth of the Human Development Index composite over the past five years. The average growth of the Human Development Index composite of Pekalongan City in 2017-2021 is as follows.

Table 1 Growth and Average Growth of Composite HDI
2017-2021

2017	2018	2019	2020	2021	2018	2019	2020	2021	average
Expected Years of Schooling (Years)					HLS growth (%)				
12.78	12.79	12.83	12.84	12.85	0.08	0.31	0.08	0.08	0.14
Average Length of Schooling (Years)					RLS growth (%)				
8.56	8.57	8.71	8.96	9.18	0.12	1.63	2.87	2.46	1.77
Life Expectancy (Years)					AHH growth 9%)				
74.19	74.25	74.28	74.38	74.44	0.08	0.04	0.13	0.08	0.08
Per Capita Expenditure (Rp.)					growth in Per Capita Expenditure (%)				
11,800,000	12,312,000	12,680,000	12,467,000	12,598,000	4.34	2.99	-1.68	1.05	1.67

Source: 2023 Analysis Results

The results of the calculation of growth and average growth of the HDI composite which are used as the basis for the 2024-2029 projections for each composite are as follows:

- 1) The HLS projection uses the highest achievement over the past five years, namely the achievement in 2019 of 0.31%.
- 2) RLS projections use an average growth of 1.77%
- 3) The AHH projection uses the highest achievement over the past five years, namely the achievement in 2020 of 0.13%.
- 4) The per capita expenditure projection uses an average growth rate of 1.67%.

The results of the calculation of the Human Development Index projection for Pekalongan City for 2024-2029 are presented as follows:

Table 2 Composite Projection of Human Development Index of Pekalongan City
2024-2029

Indicator	Growth (%)	2024	2025	2026	2027	2028	2029
HLS	0.31%	12.97	13.01	13.05	13.09	13.13	13.17
HLS Index		0.72055	0.72278	0.72502	0.72727	0.72953	0.73179
HLS Max		18	18	18	18	18	18
HLS Min		0	0	0	0	0	0
RLS	1.77%	9.68	9.85	10.02	10.20	10.38	10.56
RLS Index		0.64508	0.65649	0.66811	0.67994	0.69197	0.70422
RLS Max		15	15	15	15	15	15
RLS Min		0	0	0	0	0	0
Dimensions of Education		0.68281	0.68964	0.69657	0.70360	0.71075	0.71800
AHH	0.13%	74.73	74.83	74.92	75.02	75.12	75.22
AHH Max		85	85	85	85	85	85
AHH Min		20	20	20	20	20	20
Health Dimensions		0.8420	0.8435	0.8450	0.8465	0.8480	0.8495
Expenditure	1.67%	13,239,758.84	13,460,862.82	13,685,659.23	13,914,209.73	14,146,577.04	14,382,824.87
Max Expenditure		26,572,352	26,572,352	26,572,352	26,572,352	26,572,352	26,572,352
Min Expenditure		1,007,436	1,007,436	1,007,436	1,007,436	1,007,436	1,007,436
Dimensions of a Decent Life		0.7874	0.7925	0.7977	0.8030	0.8083	0.8136
IPM Projection		76.78	77.25	77.72	78.20	78.68	79.17
IPM RPJMD		75.71	75.88	76.03			

Source: 2023 Analysis Results

Based on the calculation of the composite projection of the HDI formation, the HDI target for Pekalongan City in 2024-2029 has increased better, compared to the HDI target in the RPJMD of Pekalongan City in 2021-2026. Efforts that need to be made to improve HDI achievement require the right policy direction, strategy and program affirmation and support from regional development stakeholders.

b. Strategy for Increasing the Human Development Index of Pekalongan City

Education

a. Average Length of Schooling (RLS)

Priority programs to increase the achievement of average length of schooling are prioritized for the working age population with elementary school education and below, which still number 54,828 people and with junior high school education, which is 31,328 people (table 4.39). The activities to be carried out are providing Package A, Package B and Package C education. In addition, increasing the average length of schooling is prioritized for productive age women who are not working and are housewives. In order to implement this, it is necessary to improve the facilities and infrastructure as well as the operations of PKBM or providers of equivalent education. Affirmative strategies to increase the achievement of RLS, as follows:

- 1) Improving the quality and quantity of equivalency schools in this case are Packages B and C.
- 2) Improving the quality of PKBM (Community Learning Activity Center) teachers.
- 3) Equivalence of religious schools (Islamic boarding schools) with national schools.
- 4) Improving the quality of data on the education level of the population aged over 25 years so that it is known which age group of the population is not in school, and which group has only attended elementary/middle school.
- 5) Operational assistance for providers of equivalency and life skills education.

b. Expected Years of Schooling (HLS)

Priority programs for increasing School Life Expectancy are carried out by providing scholarships up to college, encouraging the community to reduce school dropouts, increasing the achievement of SPM Education to 100%, increasing the foster parent movement for secondary and tertiary education and encouraging the participation of business actors to reduce child labor. Affirmative strategies to achieve these targets through:

- 1) Increased scholarships especially for secondary and tertiary education.
- 2) Cooperation with universities in implementing vocational education.
- 3) Equivalence of Islamic boarding school education into national education.

- 4) Increasing the role of families, communities and DUDI increases school participation.
- 5) Data collection and follow-up of children who do not attend school for school dropouts and the Social Service through DTKS data collection.

Health

The strategy to increase longevity and health by improving the health status of the community with the flagship program is to increase the clean and healthy living movement, increase health care insurance for every citizen, and improve the quality of health services for vulnerable groups (infants, toddlers, pregnant women, the elderly and other vulnerable groups). The program is an implementation of reducing the Maternal Mortality Rate (MMR), Infant Mortality Rate (IMR), Toddler Mortality Rate (TMR), and reducing morbidity with clean and healthy living behavior.

Affirmative strategy in order to improve AHH are:

- a. Increasing AHH in the elderly means increasing maximum AHH by improving healthy lifestyles so that people have long AHH. Healthy lifestyles are adjusted to Presidential Instruction No. 1 of 2017 concerning the Community Healthy Living Movement (GERMAS), healthy food and nutrition and PHBS.
- b. Increasing AHH through the transportation sector with the following strategies; reducing the number of deaths due to accidents, healthy and safe driving campaigns, providing traffic signs, providing mass transportation.
- c. Increasing AHH through the employment sector with a strategy to reduce mortality and disability rates, use of K3 in companies and implementation of K3 SOPs in companies.
- d. Improving emergency services through Mobile Health services.

Economic Welfare/ Purchasing Power

Affirmative strategy Increasing purchasing power/welfare is increasing the purchasing power of low-income people, as follows:

- a. Increasing poverty alleviation programs and productive economic efforts through support from the Central Government and the Pekalongan City Government.
- b. Increasing family income through improving skills and starting micro and small businesses for productive age groups (including non-workforce groups).
- c. Increasing the growth of cooperatives and new micro and small businesses through

facilitation of business licensing (NIB, PIRT), grouping of centers and empowerment of micro and small businesses based on local potential.

- d. Improving the skills of business actors and entrepreneurship of micro and small business actors through group empowerment, industrial centers and business incubation.
- e. Facilitate the creation of new business fields to reduce unemployment, especially the development of a creative economy based on local potential and culture.

Policy Direction for Improving Human Development Index

1. Education

The planned policies for accelerating (affirmative) improvement in education for the population of Pekalongan City are:

- a. Improving education services at school age with a focus on improving the quality of education to reduce the number of dropouts and children not attending school.
- b. Increasing continuing education through equivalency education with a focus on the female population.
- c. Optimization of equivalency education with a focus on operational facilities and infrastructure as well as equalizing graduates of Islamic boarding schools with formal education.
- d. Increasing the number of Islamic boarding schools that provide formal education.

2. Health

The policy for accelerating (affirmative) increase in AHH is:

- a. Increasing health-oriented development by prioritizing promotive and preventive aspects in health care.
- b. Improving the quality of transportation and healthy traffic in accordance with the Healthy City concept and reducing the number of accidents and the quality of K3 implementation in companies.

3. Welfare / Purchasing Power

Welfare indicators, especially purchasing power/per capita expenditure, to describe the standard of living of the population. Strategies that can be carried out to further improve the standard of living based on the purchasing power of the population in Pekalongan City.

- a. Increasing poverty alleviation programs (target of 7.79%) and unemployment (in 2022 it will be 6.89%) so that these groups can be productive and have income that supports the household economy.
- b. Reducing the open unemployment rate (TPT) and increasing the labor force participation rate (TPAK) through improving skills and starting micro and small businesses.
- c. Increasing the role of women (not in the workforce) in efforts to increase household income through improving skills, life skills, pioneering micro and small businesses and empowering business groups.
- d. Increasing the growth of cooperatives and new micro and small businesses through facilitating business licensing (NIB, PIRT), empowering micro and small business groups and developing marketing.
- e. Facilitation and empowerment of micro and small businesses in 2021 amounted to 21,166 business units, small businesses amounted to 2,462 business units and cooperatives amounted to 277 business units.

The welfare improvement program is expected to ensure that the population will live a decent life and increase purchasing power, with the strategy:

- 1) Empowerment of local (sub-district) based UMKM with integrated facilitation and empowerment/business assistance from regional apparatus, universities and DUDI. Empowerment of businesses and development of tempeh processing centers, small food processing centers, batik and weaving centers. Population groups (age > 61 years) have skills and sources of income that support the RT economy.
- 2) Completing business legality and licensing, business legality, skills training and business management as well as access to credit in financial institutions/credit programs or capital loans from the business world (or CSR Programs from DUDI).

CONCLUSION

Development policies to improve the Human Development Index of Pekalongan City require cooperation between stakeholders, through the following steps:

1. Pekalongan City is committed to increasing the HDI so that it can be equal to five cities in Central Java Province. Based on the results of the calculation of the Pekalongan City HDI in 2024 - 2029, with the affirmative health, education and economic development programs, the calculation (optimistic) will increase in 2024 (by 76.77), 2025 (to 77.24),

2026 (by 77.71), 2027 (by 78.18), 2028 (by 78.65) and 2029 (by 79.13) higher than the target in the 2021 - 2026 RPJMD.

2. The commitment of the Mayor and DPRD to budget priorities in the fields of health, formal education, equal education and MSME programs.
3. The Pekalongan City Government is building cooperation with various parties (Pentahelic), namely: (1) higher education and vocational education (for research and community service/PPM); (2) non-governmental organizations (NGOs) providing assistance to community groups regarding handling children who do not attend school/drop out of school (education), health and household economic empowerment, (3) DUDI circles through the Corporate Social Responsibility Program.
4. Affirmative programs to improve education about the importance of Healthy Families, Healthy Community Movement (Germas), handling children who do not go to school, holistic PAUD and business skills by utilizing various Pokmas in RW/sub-districts and religious/community leaders and women leaders.

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