IMPLEMENTATION OF CHILD PROTECTION SERVICES THROUGH INTEGRATIVE SERVICE UNIT INTEGRATIVE CHILD SOCIAL PROTECTION

a Anang Sugeng Cahyono, b Soesilo Zauhar, c Tjahjanulin Domai, d Suryadi

ABSTRACT

Objective: Children are valuable assets for the nation, but their traumatic patterns affect character formation. The government must address social problems to build a respected future generation. Tulungagung Regency, East Java Province, is the first district in Indonesia that is serious about advocating for children's social issues by inaugurating the Integrative Child Social Protection Integrated Service Unit (ULT PSAI). The research aims to investigate the role of the local government in developing an integrative service model to handle cases of social problems of children in Tulungagung Regency, the model of the child advocacy system carried out by ULT PSAI, and the effectiveness of ULT PSAI Tulungagung Regency activities in advocating for children's social problems.

Method: The method used in this research is Participatory Action Research (PAR) through (FGD) with ULT PSAI, victims, and related Regional Apparatus Organizations to obtain data. The data obtained were then processed and analyzed descriptively and qualitatively.

Result: This article discusses the local government in advocating social problems for children through ULT PSAI by involving all Regional Apparatus Organizations in Tulungagung Regency, primary, secondary (outreach to at-risk groups), tertiary (response to child victims) services, and the effectiveness of PSAI ULT can be identified based on handled cases. Seeing the significance, this service model can be used as a pilot model for other regions in Indonesia.

Suggestions: It is hoped that the efforts made by the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) of Tulungagung Regency in carrying out advocacy and handling system-based social problems with the services of the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) for vulnerable children can run more optimally by synergizing with related parties.

Keywords: public service, child protection, collaborative governance, Tulungagung.
IMPLEMENTAÇÃO DE SERVIÇOS DE PROTEÇÃO DA CRIANÇA ATRAVÉS DA UNIDADE DE SERVIÇOS INTEGRATIVOS PROTEÇÃO SOCIAL INTEGRATIVA DA CRIANÇA

RESUMO

Objetivo: As crianças são ativos valiosos para a nação, mas seus padrões traumáticos afetam a formação do caráter. O governo deve enfrentar os problemas sociais para construir uma geração futura respeitada. A Regência de Tulungagung, província de Java Oriental, é o primeiro distrito da Indonésia que está seriamente empenhado em defender questões sociais das crianças, inaugurando a Unidade Integrada de Proteção Social Integrada para Crianças (ULT PSAI). A pesquisa visa investigar o papel do governo local no desenvolvimento de um modelo de serviço integrativo para lidar com casos de problemas sociais de crianças na Regência Tulungagung, o modelo do sistema de defesa infantil realizado pela ULT PSAI, e a eficácia das atividades da ULT PSAI Tulungagung Regency na defesa dos problemas sociais das crianças.

Método: O método utilizado nesta pesquisa é a Pesquisa de Ação Participativa (PAR) através (FGD) com ULT PSAI, vítimas e organizações regionais de aparelhos relacionados para obter dados. Os dados obtidos foram então processados e analisados descritiva e qualitativamente.

Resultado: Este artigo discute o governo local na defesa de problemas sociais para crianças através do ULT PSAI, envolvendo todas as Organizações Regionais de Aparelhos na Regência de Tulungagung, serviços primários, secundários (divulgação a grupos de risco), terciários (resposta a vítimas infantis) e a eficácia do ULT PSAI pode ser identificada com base em casos tratados. Visto o significado, este modelo de serviço pode ser usado como um modelo piloto para outras regiões na Indonésia.

Sugestões: Espera-se que os esforços feitos pela Unidade Integrativa de Proteção Social Integrativa da Criança (ULT PSAI) da Regência Tulungagung na realização de advocacia e tratamento de problemas sociais baseados em sistemas com os serviços da Unidade Integrada de Proteção Social Integrativa da Criança (ULT PSAI) para crianças vulneráveis possam funcionar de forma mais otimizada através da sinergia com partes relacionadas.


1 INTRODUCTION

The Indonesian Child Protection Commission (KPAI) stated that there were 4,309 cases of complaints coming to KPAI in 2015, then in 2016, it reached 4,622 cases; in 2017, there were 4,579 cases, and in 2018, it reached 4,885 cases. From the record of violations of children's rights in 2018, KPAI found two cases at the top. Case. Furthermore, pornography and cyber cases reached 679 cases (Setyawan, 2019). Based on KPAI records in 2018, there were at least four cases that they highlighted as lessons related to child protection: Pornography, Divorce, Cyber-Based Crime, and Bullying (Prasasti 2019). Law Number 35 of 2014 concerning Amendments to Law Number 23 of 2002 concerning Child Protection is a basic policy that is the main guideline in protecting against child problems that are expected to be able to shape children who
are thought to be at a productive age to become the driving force of national development. The law contains efforts to improve coordination and cooperation of various networks from all parties in terms of implementation, law enforcement, harmonization of existing regulations, increasing the quality of safeguards, and protecting women and children from various violations of violence and other offenses. Other. For this reason, the role of policy in achieving gender equality is an essential part of a correction tool that the State can use to reduce gender tensions in various aspects of development.

Children in social life are in large numbers children who experience human rights obstacles to spiritual, physical, social, and economic welfare because the maintenance of child welfare cannot be carried out by the child himself. (Development Mappong et al., 2023)

Action Research in Sierra Leone represents a new community-driven approach to action that is driven by community ownership, builds on community assets and resources, and highlights the role of children and youth as agents of change. When the community itself goes through the process of connecting with formal stakeholders, local people develop a new sense of ownership for legal services and a strong sense of partnership with legal stakeholders (Michael G. Wessells, 2015)

Various child protection problems that occur in Indonesia can be seen from multiple fields of child protection, including:

1. Field of Civil Rights and Freedoms

A birth certificate is the basic right of every child, namely the right to legal recognition by a state for its existence. According to the 1945 Constitution, Article 28B paragraph (2): "Every child has the right to restore life, grow and develop and is entitled to protection from violence and violations."

2. Field of Family and Alternative Care

The main problem of child protection in the family and alternative caregivers is dominated by cases stemming from the vulnerability of economically, socially, and religiously vulnerable families.

3. Basic Health and Welfare Sector

Some of the problems that occur are malnutrition, health services, child victims of HIV/AIDS, the number of child smokers increasing, breastfeeding, and formula milk.
4. **Education, Recreation, and Cultural Activities Sector**

Several phenomena include education warnings, violence in the school environment, inadequate facilities and infrastructure, student brawls, uneven access to education and quality of human resources, and low parental awareness.

5. **Special Protection Field**

Children Against the Law (ABH), pornography, human trafficking, and sexual violence against children (Setyawan 2014).

Health services are any efforts that are carried out individually or jointly in an organization to maintain and improve health, prevent and cure disease, and restore the health of individuals, families, groups and communities (WHO, 2016). The requirements for good health services can at least be divided into 13 types, namely available, comprehensive, integrated, continuous, equitable, independent, appropriate, acceptable, accessible, affordable, effective, efficient, and quality (Hayati et al., 2023).

Governance—Government that uses the principle of collaboration—Collaborative governance has recently emerged as an alternative concept in administering governance at the local level when the problems faced by local governments are increasingly complex (O'Leary, 2008), while the bureaucracy is the only executor executors are increasingly stumbling and shackled with all the limitations and pathologies that descend on them. Collaboration in governance is defined as facilitating and implementing multi-organizational role arrangements for problems that a single organization cannot explain.

2 **THEORETICAL FRAMEWORK**

2.1 **CHILD PROTECTION SERVICES**

God has given meaning to children where their presence must receive protection from many parties. Law Number 35 of 2014 defines a child as eighteen years old, including the child in the womb (Ayuandani and Puspitosari 2021). The media, government leaders, and civil society organizations play an important role at the community level. Because issues such as trafficking in children bridge international boundaries, international actors can also contribute to or support national child protection systems.

The child protection system is basically multidisciplinary and cross-sectoral. Although child protection has traditionally been seen as a winner and social welfare...
actors such as the police and judges, other sectors play an important role in child protection (Child Protection Working Group, 2012). For example, participation in education often protects children from exposure to other harms, such as being sexually exploited or stealing drugs (Wessells, 2011; Wessells, Kostelny, & Ondoro, 2014).

Almost all countries have special institutions or divisions that focus on handling the social problems of children. The international community with UNICEF always supports providing services to children who experience problems. UNICEF (see UNICEF et al., 2013) has defined child protection systems as "the defining formal and informal structures, functions and capacities that have been put together to prevent and contain violence, retardation, neglect, and exploitation of children. The main components of a child protection system include law and policy, human and financial resources, governance, data collection tools, and monitoring systems, child protection and response services, and non-formal family and community support. Various actors make up the child protection system. Government actors at various levels bear primary responsibility for protecting children within national boundaries. Formal actors such as social welfare officials, police, government social workers, and judges lead the child protection system at the national and local levels. At the grassroots level, the role of non-formal actors is very visible. At the community level, the media, government leaders, and civil society organizations play an important role. Because issues such as the trafficking of children construct international boundaries, international actors can also contribute to or support national child protection systems (Michael G. Wessells, 2015).

2.2 EFFORTS MADE TO PROTECT CHILDREN USE A COLLABORATIVE APPROACH

Michael G. Wessells (2015), in a journal entitled "Bottom-up Approach to Strengthening the child protection system: Putting Children, families and Communities at the Center," believes what is needed is a new approach to strengthening Community-Based Child Protection Mechanisms (CBCPM) and enabling collaboration and alignment with the formal aspects of the child protection system. Action research in Sierra Leone represents a new approach to community-driven action driven by community ownership, builds on community assets and resources, and features the role of children and youth as agents of change. As the community drives the process of
connecting with formal stakeholders, local people develop a new sense of ownership for formal services and a strong partnership with formal stakeholders. This bottom-up approach to system strengthening supports the alignment of non-formal and formal elements and enables the uptake and use of formal services. Such a bottom-up approach not only complements the widely used top-down approach but also helps to unlock the extraordinary creative and practical capacities of people. Collectively, we will do a better job of protecting children if we step outside our role of expert and facilitate community-driven action and related social transformations that support vulnerable children.

Eleanor Bindman (2016), in the Democratic Journal: The Journal of Post-Soviet Democratization entitled NGO, Policy Entrepreneurship and Child Protection in Russia: Pitfalls and Prospects for Civil Society, discusses how non-governmental organizations (NGOs) involved in protecting children resident in state institutions interact with state actors in their policy networks and the extent to which such networks might offer scope for these NGOs to act as "policy entrepreneurs" with some influence over the direction of policy development and practice in their areas of expertise. It presents the results of empirical research on NGO activities working with vulnerable children in St. Petersburg and Samara, which reveal the interactions between the two organizations and authorities to be complex, multi-layered processes which, however, allow them some scope for autonomy and the development of policy choices. The main problem in developing policy options is caused by the "force vertical," which remains very strong in Russia. Policy solutions for political decision-makers require extensive efforts, and this is a common predicament for NGOs and lower-level officials. The best solution to this problem is for NGOs operating at the federal level or the Subsidiary Ombudsman to assist NGOs in improving policy options.

3 METHODOLOGY

The research location for this Social Humanities Education is the Integrated Child Social Protection Integrated Services Unit (ULT PSAI) on Jalan Pahlawan Number 1, Tulungagung Regency, East Java Province - Indonesia. By using Participatory Action Research (PAR), the location can develop according to the involvement of researchers in the activities of the ULT PSAI program in Tulungagung.
Regency, where there are cases of social problems in children in the Tulungagung Regency area.

4 RESULTS AND DISCUSSION

4.1 INTEGRATED SERVICES UNIT FOR INTEGRATIVE CHILD SOCIAL PROTECTION (ULT PSAI) TULUNGAGUNG REGENCY.

The child social protection system in Tulungagung has been implemented at the P2TP2A Integrated Service Center for the Protection of Women and Children. Even though the provision of services has not been carried out under one roof network, services have been provided by the services owned, including:

1) Medical and medicolegal services are carried out in all health centers, Dr. Iskak Hospital and Bhayangkara Hospital;
2) Legal services carried out at the Police Women and Children Protection Unit (UPPA Polres) to the realm of State Services and District Courts. For legal assistance carried out at the Kartini Legal Consultation Bureau and also the Muhammadiyah Legal Aid Institute;
3) Psychosocial services are carried out on;
   ● The Child Research Institute (LPA) and Social Workers from the Ministry of Social Affairs offer assistance to clients.
   ● The shelter is managed by Asyiyah in Tulungagung Regency.
   ● Psychology therapy is conducted by the Center for Gender and Child Studies IAIN. For severe cases, Psychiatrists at Dr. Iskak Hospital provide the therapy.
   ● The PKK provides financial support to clients for both incidental and sustainable child financing. This support is integrated with the Child Social Welfare Program from the Ministry of Social Affairs.

The Integrated Child Integrative Social Services Unit (ULT PSAI) is a non-structural institution that coordinates the implementation of child social welfare protection services in the Regional Government. Development of an Integrated Child Social Protection Integrated Service Unit based on the following matters:

● The existing programs/services are still fragmented and not yet integrated into the “Social Protection System”;
● Limited accessibility to comprehensive, fast, precise, and thorough
services: The effectiveness of service delivery depends on the willingness of service providers to address the needs of the first client.

- Varied data across service sectors: Each service sector has different data sets in terms of numbers and indicators.
- Urgent need for the development of an integrated social service system: The government's future policy aims to reduce poverty through initiatives such as the Smart Indonesia Card (KIP) and the Prosperous Family Card (KKS).

For this reason, the Integrative Child Social Protection Integrated Services Unit (ULT PSAI) will make the existing services in Tulungagung Regency more optimal and comprehensive, not only based on tertiary responses and system-based so that it can guarantee continuity and optimize the responsibilities of all parties towards fulfillment child rights.

The presence of ULT PSAI is motivated by the fact that the existing programs/services are still separate and not yet integrated into the "Social Protection System" Apart from that, the data for each service sector is different in terms of numbers and indicators. With the existence of ULT PSAI in Tulungagung Regency, it presents a one-stop service, namely services from various service providers (related offices or agencies), which are integrated into one container so that it is hoped that it can help overcome social problems of children in Tulungagung Regency to be effective and efficient (More, A., & Kurniawati, D. 2022)

The vision of ULT PSAI:
"The Realization of Child Social Welfare Protection in Tulungagung Regency"

The mission of ULT PSAI:
1. Increasing the availability of the child services database
2. Improving integrated services for preventing social welfare problems for children
3. Increasing the capacity, accessibility, and quality of public complaint services related to child social protection
4. Improving the handling of cases of violence, violations, neglect, and mishandling of children in a comprehensive, coordinated, and professional manner
5. Improving services to fulfill the welfare of children and families
6. Increasing community participation in child social protection
Motto ULT PSAI:

"The Integrative Child Social Protection Service Unit is swift, responsive, and sincere for children's best interests."

In addition to the clear Vision, Mission, and Motto, some basic values and philosophies that must be upheld in carrying out services at the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) are:

1. Upholding human dignity.
2. Transparent and accountable,
4. Respecting professionals, NGO partners, and traditional community settings.
5. Respecting client confidentiality and privacy.
7. Encouraging inclusion and non-treatment approaches in service provision.
8. Upholding justice and equality.

The working principles in providing services at ULT PSAI include:

1. Child-centered
   a. Prioritizing the best interests of the favored child
   b. Involving the participation of children or adolescents (clients) to make decisions related to themselves (as far as possible)
   c. Prioritizing service goals for safety, welfare, and better development
1. Partnership with family
   a. Working collaboratively with families to provide support for children, emphasizing effective relationships beyond mere monitoring and checklist completion.
   b. Recognizing that children and youth should be better off living safely with their families and communities.
   c. Providing appropriate capacity-building services for parents to develop better parenting styles for children.
   d. Recognizing that parents have a major role in making their children and
adolescents safer, more prosperous, and better off.

e. Ensuring that the needs of children and adolescents are not neglected when addressing problems related to parents and families.

2. Responsive to culture
a. Knowing that society consists of various religions and cultures and holds various traditions
b. Acknowledging the importance of sensitivity and respect for the entire community, their families, and their way of educating their children, while not tolerating any form of violence, abuse, or exploitation of children.

3. Knowledge
a. Child violence, exploitation, and neglect.
b. Child growth, development, and family dynamics.
c. Organizational knowledge and experience.
e. Policies related to workers, services, and critical reflection.
f. Local culture.

4. Skills
a. Proven ability to communicate effectively with children and their families.
b. Ability to conduct thorough and individualized assessments
c. Able to do case management and be a good case worker.
d. Accurate and precise documentation.
e. Transparency and accountability in decision-making.

5. Institutional
a. Professionally trained service personnel.
b. Accredited staff and volunteers.
c. Ongoing supervision and learning opportunities for staff and volunteers.
d. Community-based support to foster networks of care and child protection.

The commitment of the Tulungagung Regency government to building a system of child protection and family support is manifested through:

1. Enforcement of laws and regulations.
2. Procedure policy.
3. Operational guidelines and service standards.
4. Cooperation between Regional Organizations or child development services at all levels of government.
5. Collaboration with the community, NGOs, and the profit sector.
6. Evaluation of internal and external monitoring, as described above, regarding the government's response.

The form of coordination from the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) is to work together with Regional Apparatus Organizations related to policymakers for child development and service providers for children as well as in terms of fulfilling children's rights and development forums or community-based forms of coordination. In addition, all networks at the sub-district level are also doing this. Some of the networks used to support the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) include the District Level Network:

1. RSU Dr. Iskak Tulungagung
2. Bhayangkara Hospital
3. Tulungagung District PKK Mobilization Team
4. Tulungagung Child Protection Agency
5. Kartini Legal Consultation Bureau
6. Muhammadiyah Legal Aid Organization
7. Psychological Assistance Institute PSGA IAIN Tulungagung
8. Aisyiyah Orphanage

While the network at the District level:
1. District Social Worker
2. UPT PPPA and KB District
3. District Child-Friendly Task Force
4. District PATEN team
5. Public health center
6. Polsek
4.2 INTEGRATED INTEGRATIVE CHILD SOCIAL PROTECTION SERVICE (ULT PSAI) TULUNGAGUNG REGENCY.

Services available at the Integrative Child Social Protection Integrated Service Unit:

a. **Primary service (prevention).**

Prevention is prevention in various services to prevent various child problems aimed at all groups, from children, families, and communities to service providers. The Family Planning Service carries out primary services for the Protection of Women and Children, the leading child protection sector in Tulungagung Regency. The various efforts that have been carried out are as follows:

<table>
<thead>
<tr>
<th>NO</th>
<th>Activity</th>
<th>Location</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Unit of Dissemination of Integrated Services for Integrative Child Social Protection in the Framework of the NU Muslumat PC Coordination Meeting</td>
<td>BPPT Sumbergempol</td>
<td>March 3 and 4, 2021</td>
</tr>
<tr>
<td>2</td>
<td>Integrated Social Protection Social Protection Unit for Integrative Children in the context of preventing and dealing with integrative children's social problems</td>
<td>Sumberingin Kidul Village, Ngunut District</td>
<td>August 15, 2021</td>
</tr>
<tr>
<td>3</td>
<td>Integrated Social Protection Social Protection Unit for Integrative Children in the context of preventing and dealing with integrative children's social problems</td>
<td>Boyolangu District</td>
<td>August 25, 2021</td>
</tr>
<tr>
<td>4</td>
<td>Integrated Service Dissemination Unit of Integrative Child Social Protection in the framework of preventing and handling social problems of integrated children</td>
<td>Kaumen District</td>
<td>August 30, 2021</td>
</tr>
<tr>
<td>5</td>
<td>Integrated Social Protection Social Protection Unit for Integrative Children in the context of preventing and dealing with integrative children's social problems</td>
<td>Bandung District</td>
<td>August 31, 2021</td>
</tr>
<tr>
<td>6</td>
<td>Training for the Technical Team for Strengthening Integrated Child Social Protection Integrated Service Capacity</td>
<td>BPPA &amp; KB Tulungagung Regency</td>
<td>September 15 and 16, 2021</td>
</tr>
<tr>
<td>7</td>
<td>Integrated Social Protection Social Protection Unit for Integrative Children in</td>
<td>Sumberingin Kidul Village, Ngunut District</td>
<td>November, 2021</td>
</tr>
</tbody>
</table>
Services available at the Integrative Child Social Protection Integrated Service Unit:

From a series of socializations carried out by the relevant agencies to introduce to the wider community the existence of the Integrative Child Social Protection Integrated Service Unit in Tulungagung Regency, the hope is that when problems occur with children, families, and also the community can report to the unit so that children get their rights and are resolved the problem.

ULT PSAI is the first beginning of the formation of integrated services for children, so many other regions are conducting bundling studies to see the working mechanism of ULT PSAI and also the services provided by the unit. Some of the visits that have been received include:

- Visit from Bappenas, UNICEF, the Indonesian Ministry of Social Affairs, the Ministry of Home Affairs, and the Coordinating Ministry for PMK on 10 November 2021.
- Working visit from BPPPA&KB Mojokerto Regency on 15 November 2021.

While the activities carried out based on the RI-UNICEF collaboration are:

- E-Violence Application TOF Training and e-Violence Application Training for P2TP2A data managers on 8-9 November 2021 at the Weta Hotel Surabaya.
- Field Visits and Coordination Meetings Related to Integrated Monitoring of the 2021 RI-UNICEF Collaboration at ULT PSAI and Its Network
- FGD Data Collection on Diversion and Restoration of Justice Activities on 22 November 2021 at ULT PSAI
- Discussion on Synchronization of Unrecorded and Unrecorded Birth Certificate Data with TKSK and Social Workers on 6 December 2021 at ULT PSAI

The Integrative Child, Social Protection Service Unit, provides services to children to fulfill their rights. The efforts made by the Tulungagung Regency
Government are to get support from several related OPDs in terms of providing services so that children can access them optimally and easily.

b. **Secondary services (outreach to vulnerable groups).**

Outreach services for threatened groups are strengthening and prevention efforts that are carried out based on a database of various development data compiled by the Integrated Child Social Protection Integrated Service Unit associated with data services. From the data supplemented with child service data, several trends in the incidence of child cases will be involved, or a map of child problems can be seen.

ULT PSAI, in collaboration with UNICEF, has an outreach program to several areas in Tulungagung Regency based on the ownership of birth certificates; the survey is carried out by a team consisting of:

a. Social worker
b. LPA Tulungagung
c. TKSK

The results of the sweeping that was carried out in 2021 obtained the following data:

<table>
<thead>
<tr>
<th>NO.</th>
<th>Subdistrict</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Besuki</td>
<td>33</td>
</tr>
<tr>
<td>2.</td>
<td>Waiting</td>
<td>27</td>
</tr>
<tr>
<td>3.</td>
<td>Sumbergempol</td>
<td>8</td>
</tr>
<tr>
<td>4.</td>
<td>Tulungagung</td>
<td>5</td>
</tr>
<tr>
<td>5.</td>
<td>Kalidawir</td>
<td>16</td>
</tr>
<tr>
<td>6.</td>
<td>Pucanglaban</td>
<td>15</td>
</tr>
<tr>
<td>7.</td>
<td>Pagerwojo</td>
<td>10</td>
</tr>
<tr>
<td>8.</td>
<td>sending</td>
<td>12</td>
</tr>
<tr>
<td>9.</td>
<td>Campurdarat</td>
<td>9</td>
</tr>
<tr>
<td>10.</td>
<td>Kauman</td>
<td>9</td>
</tr>
<tr>
<td>11.</td>
<td>Rejotangan</td>
<td>14</td>
</tr>
<tr>
<td>12.</td>
<td>Mountain</td>
<td>6</td>
</tr>
</tbody>
</table>

Source: Secondary Data

The highest number of sweeps conducted of children whose residence documents have not been recorded is in Besuki Subdistrict, namely 33 children, and second place in Ngantru District, while third place is in Kalidawir District. Various problems have caused these children to have their population documents not recorded, including:

a. Children born out of Siri's marriage.
b. Children with incomplete parental documents due to parents having mental disorders (ODGJ).
c. Children brought from abroad with unclear documentation.
d. Children with limited access.
e. Children whose parents are migrant workers and have not had the opportunity to arrange population documents for them as the children are under the care of grandparents or other family members.

Besuki Subdistrict, Ngantru Subdistrict, and also Kalidawir Subdistrict occupy the position with the highest number of cases because these areas are the largest sending of TKI both domestically and abroad in the Tulungagung Regency area, so many of their children do not have residence documents.

Population documents are very important for children. These population documents are a benchmark for children to get health insurance, education, and other social security because all settlement documents are based on SIAK data.

c. Tertiary services for victims or children in certain cases.

The provision of services carried out by the Integrative Child Social Protection Integrated Service Unit using case management, namely by carrying out the process of managing the provision of assistance/support for clients, including planning and organizing the implementation of services to meet the various needs of children (and their families) in an adequate, systematic and timely manner. Case management from child services by considering the following:

a. Focus on the needs of the individual child and his family, and ensure that everything is done by considering the best interests of the child and developing data-based sources of children and their families
b. Follow the flow of management cases, in a series of stages involving children and family support
c. Coordinate all system services and referrals
d. Create a system to ensure accountability of case management across service departments (including referral services made based on understanding)
e. Provide social work that is responsive to the best interests of the child and is able to coordinate all service providers for all planned service processes for children

The key steps for a case management process are:
a. Incoming case data comes from filling, registration, and references

Client dating then carried out several steps, namely:

- The initial assistance and data collection process (filling in child (victim) data forms), perpetrator identity, child assessment data, initial observations, treatment planning
- Recovery crisis-responsive intervention
- Initial assessment screening
- Build closeness with clients
- Explanation of services as well as clarity of obligations and consequences or informed consent
- Case verification
- Family tracing through databases and or home visits

b. Needs and risk assessment

Assessment is the process of collecting and analyzing information that is entered and explored by Service Unit officers regarding the child's situation. Not only are things related to the risks faced by children but also to strengths, resources, and things that can protect children, such as family and the environment. The goal is to identify needs and look for risks faced by clients so that they can formulate plans to provide service needs as long as needed.

The basic steps in carrying out the assessment include:

- Planning: this includes strategizing the sources of information and identifying the involved parties.
- Information gathering: this involves collecting relevant information and determining the method of gathering it.
- Information verification: This stage focuses on cross-checking the gathered information, identifying any discrepancies, examining the reasons behind such differences, and ensuring the completeness of the information.
- The analysis looks at trends, comparisons, and case corrections to determine needs and risks.

c. Make a plan

After the assessment, case planning must be carried out immediately. High-risk cases should not last more than two days, while low-risk ones should not last more than two weeks. Planning is based on the needs of the assessment, who is implementing the
service, and when each service is carried out until monitoring activities or case reviews are carried out according to the level of risk.

d. Carry out case planning.

After planning the case, the caseworkers enter the next stage by carrying out the plans that have been prepared.

e. Conduct regular case reviews.

Case reviews conducted by case workers are important because this needs to be done so that it can be understood to what extent the cases have been handled.

f. Case documentation

Case documentation is very necessary because it is used as material for reports by caseworkers and can be used for learning when cases may be similar.

g. Termination or closing of the case

When the case has been handled, and it is felt that there is nothing that needs to be needed anymore, the case is declared "terminated" or "case closed." However, when the case has been declared terminated, the case workers still must make long-term money to see further developments.

Based on reports that came to ULT PSAI, many of the children experienced problems, namely:

<table>
<thead>
<tr>
<th>NO</th>
<th>Case Type</th>
<th>Gender</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Man</td>
<td>Woman</td>
</tr>
<tr>
<td>1</td>
<td>EDUCATION</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>Abandonment</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>SEXUAL VIOLENCE</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>4</td>
<td>CARE</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>5</td>
<td>ADM. POPULATION</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>ABH</td>
<td>22</td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>FISK VIOLENCE</td>
<td>20</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>PSYCHIC VIOLENCE</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>HEALTH</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>10</td>
<td>HIV/AIDS</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Secondary Data

Cases reported at ULT PSAI from 2021 until now there are 121 cases. Various reasons, namely caused this case:

a. Education of a total of 10 children consisting of 4 boys and six girls

b. Neglect of a number of 5 children consisting of 3 boys and two girls
c. Sexual violence amounted to 17 children consisting of 3 boys and 14 girls
d. Care for a total of 15 children consisting of 4 boys and 11 girls
e. Administration of a population of 10 children consisting of 5 boys and five girls
f. ABH (Children Against the Law) totaled 27 children consisting of 22 boys and five girls
g. Physical violence amounted to 21 children consisting of 20 boys and one girl
h. Psychological violence a number of 3 children experienced by boys
i. The health of 10 children consisting of 7 boys and three girls
j. HIV/AIDS in several three children experienced by boys

From 2021 until now, there have been a total of 121 cases reported at ULT PSAI. These cases can be categorized based on various reasons:

<table>
<thead>
<tr>
<th>Type of Service Required</th>
<th>Gender</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Man</td>
<td>Woman</td>
</tr>
<tr>
<td>EDUCATION</td>
<td>7</td>
<td>10</td>
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<tr>
<td>HEALTH</td>
<td>9</td>
<td>4</td>
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<tr>
<td>FAMILY STRENGTHENING</td>
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<td>20</td>
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<td>PSYCHOLOGIST</td>
<td>4</td>
<td>9</td>
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<tr>
<td>LEGAL ASSISTANCE</td>
<td>36</td>
<td>15</td>
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<tr>
<td>KESRA</td>
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<td>0</td>
</tr>
<tr>
<td>BIRTH CERTIFICATE</td>
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<td>8</td>
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<tr>
<td>TOTAL</td>
<td>154</td>
<td></td>
</tr>
</tbody>
</table>

Source: Secondary Data

The types of services required by clients at ULT PSAI are:
a. Education of 17 children

The educational services needed include:
1. For children who cannot go to school because they lack funds, ULT PSAI will advocate with the school so that children can still go to school. One of the alternatives is by providing education savings assistance to underprivileged students who are included in the TEPAK program from the Ministry of Social Affairs.
2. In cases where children are expelled or exhibit behavioral issues resulting in frequent class absences, ULT PSAI seeks alternative solutions to help these children regain their educational path.

3. Children with special needs receive services through the provision of alternative schools such as Special School (SLB) and motivational support from psychologists.

4. To address the challenge of limited access to schools in certain areas of Tulungagung Regency, ULT PSAI collaborates with the Welfare sector in the Regency, advocating for assistance such as providing bicycles to facilitate children's commute to school.

5. Children lacking proper identification documents, such as birth certificates, are supported by social workers or TKSK (Family Hope Program) to facilitate the process of obtaining necessary documentation through the fast track service at Civil Registry and Vital Statistics Office (Dispendukcapil).

b. The health of 13 children

Health services needed include:

1. Children need health services due to lack of financial means and absence of health insurance.

2. Child victims of sexual and physical violence

3. Child victims of neglect

c. Strengthening a family of 39 children

Children need family strengthening because children at home are in an unsupportive environment, in alternative institutions, and the bad children's environment influences naughty children. ULT PSAI provides counseling to children individually by psychologists and also provides counseling to families so they can support children in their growth and development.

d. Social workers working with psychologists assist children who need guidance and reinforcement in the form of individual counseling to motivate children to progress.

e. Legal assistance for 51 children

Various kinds of cases have caused children to become ABH (Children Against the Law), whether they are perpetrators, victims, or witnesses. In this case,
ULT PSAI cooperates with the Kartini Legal Aid Institute for assistance when children become victims or witnesses and also perpetrators. As well as accompanying children in the judicial process.

f. Kesra number 7 children
g. Birth certificates for 14 children

Another effort made by this Service Unit is in collaboration with existing networks as well as stakeholders and the community, namely by running a program which, in this case, is collaborating with UNICEF to conduct outreach to vulnerable groups, so it is hoped that this Service Unit will not only receive complaints from the public but also carry out "pick up the ball.

The obstacles faced when caseworkers handle cases are:

1) There is no link per the SOP that has been made for each network owned by ULT PSAI, so caseworkers have a little difficulty getting into the network. This is due to the lack of information transfer from knowledgeable staff and leaders who were previously aware of this information.

2) There needs to be informed consent, which ensures parental agreement and explanation that the child willingly receives the provided services.

3) There are still cases that come through the Tulungagung Police UPPA, even though they should be reported to ULT PSAI. It can be assumed that not all people in Tulungagung know about the existence of ULT PSAI.

All stakeholders in Tulungagung Regency have worked hard to provide services to children so that children's rights can be well received and on target.

5 CONCLUSION

The form of activities of the Integrative Child Social Protection Integrated Service Unit (ULT PSAI) in coordination and collaboration with Regional Apparatus Organizations related to policymakers for child development and service providers for children as well as in terms of fulfilling children's rights and development forums or community-based forms of coordination. In addition, all networks at the sub-district level are also doing this. Some of the networks used to support the Integrative Child Social Protection Integrated Services Unit (ULT PSAI) include District Level Networks, namely Dr. Iskak Tulungagung General Hospital, Bhayangkara Hospital, Tulungagung District PKK Mobilization Team, Tulungagung Child Protection
Institute, Kartini Legal Consultation Bureau, Muhammadiyah Legal Aid Organization, Tulungagung IAIN PSGA Psychological Aid Institute, Aisyiyah Orphanage. In contrast, the network at the sub-district level includes sub-district social workers, sub-district UPT PPPA and KB, sub-district child-friendly task force, sub-district PATEN team, health center, and police. Efforts made by the Tulungagung Regency Integrative Child Social Protection Integrated Service Unit (ULT PSAI) in advocating/handling system-based social problems with vulnerable Children Integrative Child Social Protection Integrated Service Unit (ULT PSAI) services consist of prevention services, outreach services for at-risk groups, response to children who become victims or experience certain cases.
REFERENCES


