

Participatory Approach in The Development of Lactation Care Training Modules For Posyandu Cadres

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INTRODUCTION

Stunting is a state of chronic malnutrition that can be prevented before pregnancy and managed in the first 1000 days of life through proper parenting. Stunting occurs from the fetus to the early stages of newborns, but usually, only signs of stunting appear when the child is two years old. The causes of stunting are infection, breastfeeding, complementary foods, and family factors. Infection can occur due to the entry of harmful microorganisms through the mouth, which causes diarrhea, or through the nose, which causes respiratory problems. Even though breastfeeding is already high, by 2021, it still has yet to reach 100% due to delays in early initiation of breastfeeding and non-exclusive breastfeeding.

Meanwhile, complementary foods often need to be of better quality. The family factor is caused by how caregivers provide appropriate care and unsupportive family characteristics, such as low income. Beyond all these factors, social and community factors play a role in causing stunting.

According to research, globally, the prevalence of stunting in children under five is around 151 million. The Study on the Nutritional Status of Toddlers in Indonesia (SSGBI) in 2019 shows that the national stunting rate is still high, namely 27.6%. This figure has decreased compared to data from Basic Health Research (Risikesdas) 6 years earlier, which was 37%, but is still higher than the average stunting percentage in Asia, which is 24.7%. Previous studies have shown that the

concise nutritional status rates in Salatiga City are still high. Ananda et al. (2020) reported that 11 out of 98 children (11.2%) in Salatiga City experienced short and very short nutritional status. Regarding the nutritional status of infants and toddlers, stunting can be predicted from birth by measuring the baby's weight at birth.

The Salatiga City Health Office report shows that in 2017 exclusive breastfeeding was still low, with a percentage of 64.8%. The lowest rate of complete breastfeeding coverage was in the Mangunsari Health Center area at 51%, followed by the Cebongan Health Center area at 52.7%. Meanwhile, the highest range was 82.2% in the Sidorejo Lor Health Center area (Dinkes Kota Salatiga, 2017). Exclusive breastfeeding in Salatiga City decreased in 2019, according to the 2019 Central Java Health Office report, by 61.4% (Dinkes Jateng, 2019). These data indicate that the causes of nutritional problems that occur in toddlers in Salatiga City need to be taken seriously.

Abnormal nutritional status, such as stunting, needs to be addressed early on through various programs for pregnant and lactating women and needs to involve the role of many stakeholders, including the community. Posyandu cadres are one element of the community that is an extension of the Health Office in supporting health programs. Posyandu cadres can be empowered to help the community improve their knowledge, attitudes, and behavior in preventing stunting in their respective

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areas. Therefore, posyandu cadres are given training related to lactation care.

The module is one of the media used in providing counseling and education to the public, especially pregnant and breastfeeding women, to increase knowledge, attitudes, and correct practices related to lactation care. The definition of a module in this study is teaching material containing material packaged in a simple manner described to lactation care so that it is easily re-explained by posyandu cadres when educating the community. This article will explain the process of developing the lactation care training module.

RESULT AND DISCUSS

The method used in the development of this training module is a participatory method involving academics, practitioners, and the community, including four lecturers and one nursing laboratory assistant from the Faculty of Medicine and Health Sciences, one nurse, one midwife, and 15 posyandu cadres in the region. from the Cebongan Health Center, Salatiga City. The module writers are lecturers, nurses, and midwives, totaling seven people.

The research starts from July to September 2022 in Salatiga City. The module development methodology is carried out according to the framework prepared by Boonda (2019), as shown in Figure 1. Process evaluation is carried out qualitatively by evaluating each step taken and summative assessment in testing the effectiveness of the resulting modules. The data is then displayed narratively.

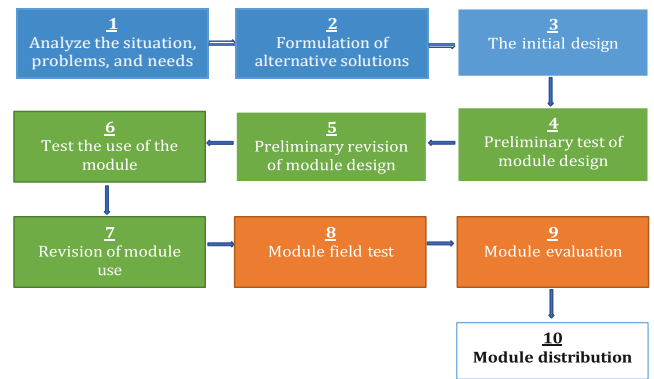


Figure 1. Research framework

There are five primary activities in the development of lactation care training modules in the City of Salatiga, as follows:

1. Initial design of the module

a. Situation analysis

Researchers first underwent situation analysis in developing the lactation care training module. A literature search was carried out to look for lactation care modules or breastfeeding modules that can be used as learning media in the community. Several modules were found, but they were not specifically modules that posyandu cadres could use but modules used by health workers or in formal educational settings. Several modules aimed at posyandu cadres also cover broad topics and are not explicitly related to lactation care.

The writer's team also identified the needs of posyandu cadres based on discussions with health workers at the Cebongan Health Center, Salatiga City. It was found that posyandu cadres only sometimes assist in outreach in the community; one of the reasons is that they still need a handbook that discusses lactation care in detail. One of the goals of forming posyandu cadres is to act as an extension of health workers in providing health information to

pregnant and breastfeeding women in their service areas.

b. Formulate alternative solutions

An alternative to the situation posyandu cadres face in providing education related to lactation care to pregnant and breastfeeding women is to develop a simple but complete lactation care training module as a guide in learning in the community. Modules must be easily understood and compiled by parties who understand the situation and background of the intended target.

c. Development of the initial design of the module

The module development team determines learning outcomes. The compiler also designs methods and time durations that can be used to convey material well using modules as learning media. The material presented in the module is as follows:

- 1) Anatomy and physiology of lactation.
- 2) Components, benefits, and content of breast milk.
- 3) Breastfeeding.
- 4) Breastfeeding related to pathological conditions.
- 5) Overcoming problems related to breastfeeding.
- 6) Practices of breast care and oxytocin massage.
- 7) Education techniques in the community.

d. Test the initial design of the module

This stage is carried out by presenting the curriculum design and material in the module at an internal seminar at Faculty and Health Sciences, Universitas Kristen Satya Wacana, on August 2, 2022. This initial draft test aims to ensure the module design is feasible for continued development. The examiners of this module are lecturers who provide qualitative assessments.

2. Development of the use of modules

a. Preliminary revision of module design

The input results during the preliminary module development test were used and revised. At this stage, the authors include test questions as part of the module developed to evaluate changes in posyandu cadres before and after being given training on lactation care.

b. Test the use of the module

Module usage tests are carried out internally by the module development team by compiling educational materials using existing modules. The module usage test determines whether everyone can collect educational materials from the developed modules. Several inputs are related to this module, including that in the seventh material related to outreach techniques in the community, some additional material must be added related to extension methods and extension media. In addition, in material three, related to breastfeeding, it was found that there was an overlap in the material's content with material five regarding strategies for overcoming breastfeeding-related problems. Therefore, the contents of the module need to be revised.

c. Revision of module use

At this stage, the revision is focused on the module's contents. The module is repaired according to the input and notes given during the test using the module.

3. Field test

The compilers then piloted the completed modules in training on September 22-23, 2022. The development team provided material based on the designed training modules to 15 posyandu cadres. The results of statistical tests on the average values of the participants before and after being given the intervention on the first material related to the anatomy and physiology of lactation show that there is a significant difference between the values of posyandu cadres before and after being

given the intervention in the form of training using the lactation care module with a two-way significance value of 0.048 <0.05 at the 95% confidence level with a correlation value of 0.785. Posyandu cadres experienced an increase in average scores, from 75.3 to 84.

wish to facilitate education related to lactation care. However, some deficiencies in the module were overlooked when the revision of the use of the module was carried out, namely inaccuracy in correcting the grammar, so some parts of the module had grammatical errors. However, this module could be used, so it was decided to finalize it by submitting it to become a book with an ISBN.

5. Distribution

Distribution was made directly to 15 posyandu cadre representatives in Salatiga

Table 1. Paired t-test results before and after using the module

		Paired Samples Test					t	Df	Sig. (2-tailed)
		Paired Differences			95% Confidence Interval of the Difference				
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper			
Pair 1	Score before intervention - Score after intervention	-8.667	15.523	4.008	-17.263	-.071	-2.162	14	.048

Source: Primary data, 2022

4. Evaluation of the module

Based on the training conducted at the Cebongan Health Center using the lactation care module, it was concluded that this module could be disseminated to posyandu cadres and other parties who

Figure 2. A. Module's cover; B. Identity page of module



A



B

City. In addition, the development team also distributes modules electronically via Google Books.

CONCLUSION

The lactation care training module developed through a participatory approach was distributed to posyandu cadres. The participatory stages are not enough up to this stage, but posyandu cadres still have to use this module to educate pregnant and breastfeeding women in their respective target areas. As a recommendation, training modules related to lactation care need to be tested on different posyandu cadre populations and further developed based on the trial results.

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INTRODUCTION

Service to the public is one of the tasks of the government bureaucracy for the welfare of society. Good public service is considered as a measure of community welfare. The implications arising from public services are determining the quality of life of a community (Akinboade et al (2013). The services provided by government officials are a series of activities carried out based on statutory provisions on the service of goods, services, and administrative services, so that public services are the main task of the government in realizing welfare for the public.

Service to the public is successful if the community gets service facilities according to procedures that are short, fast, precise and satisfying. Currently there are several problems in public services, namely there are still a few agencies that provide services with standard operating procedures (SOP); In addition, the specified duration of service has not been consistently carried out, causing public dissatisfaction. The public services provided should meet the basic needs of citizens, therefore the state must guarantee access or passage for citizens to get these services.

So that public services can be further improved and overcome various service problems, the government then innovates by implementing integrated services with the one stop-shop concept. In reality innovation is a necessity that must be carried out, even though there are many challenges that must be faced, so that in the end it can produce changes to better services (Julnes and Gibson, 2016). According to Hartley (2016), these public organizations must find ways to use dwindling resources, improve their

performance, and achieve the results that society wants. The lack of innovation in the public sector is fueled by the fact that innovation often requires changes and adaptations in the relationship between service providers and their users.

One of the innovations so that the quality of public services can be improved is by holding a one-stop-shop public service. This is in line with the Decree of the Ministry of Administrative Reform and Bureaucratic Reform (Kemenpan RB) Number 23 of 2017 concerning public service malls (PSM). Public Service Mall is a place for service activities to the community to serve the needs of goods and services as well as quality administrative needs. This PSM is an expansion of integrated service functions, both from government and private agencies. The purpose of PSM's presence is to provide convenience, speed, affordability, safety and comfort to the public in obtaining services. In addition to increasing global competitiveness in providing ease of doing business in Indonesia. The principles adopted by PSM are integration, efficiency, coordination, accountability, accessibility and convenience. The implementation of PSM must certainly be in line with the spirit of implementing public services, namely providing legal certainty in the relationship between the public and administrators in public services.

In the Belu regency of Nusa Tenggara Timur Province there is also a PSM called the Timor-Atambua public service mall. Established and operating since 2019, it has handled 63 types of permits from various agencies in Belu regency. Some of the agencies in PSM include; (a) Local government apparatus

organizations include Public Works and Spatial Planning Services, Environment, Health Services, Manpower and Transmigration Services, Population Services, Transportation, Bappeda and PTSP itself; (b) Vertical agencies include Customs, Immigration, Police, Land Affairs. BUMN agencies namely, BPJS, Pratama Tax Office, PT Pos Sindo while BUMDs are PDAM and Bank NTT.

Even though there is a PSM in Atambua City which was built with a commitment to provide excellent service and bring services closer to the community, the quality of services provided is not optimal. Convolved system of service procedures, low professionalism of Human Resources, uncertainty of time and cost.

Service Innovation Concept

Innovation is defined as a form of intentional, or managed, social change aimed at achieving something, by exploiting the possibility to do new and different things, to do the same things in new ways, or to allow new meanings to be assigned to things (Ongaro et al, 2021). Innovation is the action of public managers to create new value so that innovation needs to be managed as well as possible so that it can be ensured that the innovation is useful in solving organizational problems. The resulting values eventually become benchmarks and can be accepted as new ways. (Stewart-Weeks and Kastle, 2015). Public sector innovation is seen as an effort to improve public management, bearing in mind that innovation is normative in nature which in its implementation may differ from established norms.

A successful organization is an organization that can carry out a process of internal consolidation and external adaptation, its capacity to make adjustments is influenced by innovation

assistance so that it gains legitimacy (Osborne and Brown, 2011). In the organizational context Seelos and Mair (2012) show that awareness of the importance of innovation as a quick fix for performance.

Currently, the public sector faces many challenges such as; the need for them to provide services in a responsive, accountable, efficient, and empathetic manner towards citizens. This demand is absolute so that they get public support in administering government. This challenge requires changes in patterns and methods of service to citizens so that they feel satisfied with the services provided by public servants. According to Osborne and Brown (2011) innovation is the main factor in dealing with these challenges. The scholars recognize that innovation is fundamental to organizational capabilities so that it has the potential to increase effectiveness and problem solving in organizations (de Vries et al, 2016).

In addition, innovation can improve organizational performance; increase organizational legitimacy and trust (Arundel et al, 2015; Lægheid et al, 2011). Innovation for public sector organizations is a key word in facing various challenges, both coming from internal organizations and from developments in the strategic environment in strengthening their capabilities. Innovation capability is an internal organizational ability to generate new and useful knowledge. Organizations with better developed innovation capabilities are not only successful in the innovation process, but also successful in seeking external resources, thereby positively influencing organizational performance (Clausen et al, 2019). Knowledge about innovation in public organizations continues to grow, however, various literature on innovation is still limited, so it becomes one of the obstacles to the development of innovation (Jules and Gibson, 2016).

The relationship between innovation and public organizations can be divided into 4 areas (Ongaro et al, 2021), namely: (a) innovation in the public sector as a whole, innovation in government related to changes in processes and routines, an example is administrative reform; (b) innovation at the micro level, namely the idea of strategic change at the individual level in the organization; (c) innovation in the economic sector that allows it to be facilitated by public organizations and; (d) innovation in society that may be facilitated by public organizations. Political and institutional commitments have driven innovation forward without introducing fundamental structural changes from government. Avoiding structural barriers or working through political channels to reduce their impact may be more constructive strategies than creating specialized institutions to develop innovative measures (Scott, 2021).

RESULT AND DISCUSSIONS

The method used in this research is qualitative qualitative, with a focus on service innovation consisting of dimensions namely; service concept and service value system. Research informants consist of; One-Stop Integrated Investment and Services Agency (DPMPTSP) officials; people who receive services from the Atambua city public service mall; public service expert. Data collection techniques were carried out through interviews, observation and documentation and were analyzed descriptively (Miles et al, 2014).

The Timor-Atambua public service mall is the only public service institution on the island of Timor using the one stop shop concept. Its presence is a form of good governance by innovating in the field of public services. There are several service agencies in the Timor-Atambua public service mall, as shown in table 1.

Table 1. Name of Institution at the Timor-Atambua Public Service Mall

1	One Stop Investment and Services Agency (DPMPTSP)
2	Office of Public Works and Public Housing (PUPR)
3	Office of Health
4	Office of Environmental Services
5	Office of Labor and Transmigration
6	Office of Population and civil registration
7	Office of Social
8	Office of Livestock
9	Office of interconnection
10	Regional Revenue Agency
11	Office of Education and Culture
12	Office of Cooperatives, Small and Medium Enterprises
13	Office of Agriculture and Food security
14	Office of Trade and Industry
15	Office of Atambua Primary Tax
16	Office of Atambua Immigration
17	Office Customs
18	National Land Agency
19	Office of Belu Resort Police
20	Quarantine Agency
21	Office of Local Water company
22	Office of Employee Insurance Savings (Taspen Atambua)
23	Health Insurance Agency (BPJS Kesehatan Atambua)
24	Social Security Agency (BPJS Ketenagakerjaan Atambua)
25	Drug and Food Control Agency (BPOM Atambua)
26	Office of Mandiri of Employee Insurance Savings (Taspen Mandiri Atambua)

Source: Timor-Atambua PSM Profile Book, 2022

Flow of Service at PSM Timor-Atambua

Based on the Decree of the Belu Regency Number 231 of 2022, the Service Flow in making business licenses is

through the mechanism shown in figure 1, namely; prepare complete documents such as; business profile, capital, tax identification number, business activity, business location, and then the business activity is validated against predetermined standards.

STANDAR OPERASIONAL PROSEDUR PERIZINAN BERUSAHA BERBASIS RISIKO : NOMOR INDIK BERUSAHA PADA DINAS PENANAMAN MODAL DAN PELAYANAN TERPADU SATU PINTU KABUPATEN SELU

NO	Kegiatan	Pelaksana				Mutu Baku			
		Pelaku Usaha	OSS	SP DPMPTSP	Admin Dinas Teknis	Kadif. PMPTSP	Kelengkapan Waktu	Output	Ket
1	Mempersiapkan berkas-berkas dan melengkapi persyaratan perizinan berusaha	○	○	○	○	○	Keyp dan nomor WA	1 menit	
2	Mendaftarkan dan entri data profil, permodalan usaha, JPPWP, anggaran usaha, KBLI dan lokasi usaha di web OSS	○	○	○	○	○	Internet	5 menit	Akses OSS
3	Validasi Kegiatan Usaha dengan Tingkat Risiko Rendah, Menengah Rendah, Menengah Tinggi dan Tinggi, proses perizinan berusaha	○	○	○	○	○	Internet	5 menit	
4	Nomor Induk Berusaha (NIB) Terbit	○	○	○	○	○	Internet	1 menit	Dokumen NIB

Source: Timor-Atambua PSM Profile Book, 2022

The standard procedure established by the licensing office is quite simple so that people who request permits do not experience difficulties. This is evidenced by the results of interviews with them, which stated that the flow or mechanism required for obtaining permits is simple and does not make it difficult for us to process business permits. An example of the main services provided at the PSM office is shown in table 2.

Table 2. Examples of the types of services provided by the Timor-Atambua PSM

Item	Service Types
1	Business Identification Number
2	Estimate of Building Permit Retribution
3	Identity Card
4	provision of Advertising Retribution
5	Recommendation for Permit to Establish a Formal Education Unit
6	International Mobile Equipment Identity Service (IMEI)
7	Vehicle Declaration (VhD)
8	Issuance of Land Certificates
9	Police certificate (SKCK)

Source: Timor-Atambua PSM Profile Book, 2022

Based on the data, it is known that there are 218 types of services provided by 26 agencies in PSM Timor-Atambua (Timor-Atambua PSM Profile Book, 2022).

Based on the results of research on service innovation at PSM Timor-Atambua, it is known that there are at least 2 dimensions in service innovation, namely; new service concept and new value systems. Each of these dimensions is described as follows;

1. New Service Concept

Refers to Miles (2013), New service concept: the value created by the service provider (or coproduced with the customer). May entail a new way of solving a customer's problem or meeting a customer's need, perhaps by combining existing service elements in a new configuration. The concept of service provided by PSM Timor-Atambua is the One Service-Shop concept. This concept is Citizen Service Centers are government offices where different authorities are colocated and where several public services are offered in the same physical location. The centers typically host a broad range of citizen-accessed services (Fredriksson, 2020). The argument is that one-stop shops become a way to improve client services. Actually the one stop-shop concept has been used previously in line with the new public management approach. This is confirmed by the view Wettenhall and Kimber (1996), One-stop shops have been used for some time for technical services, planning in local government and various other municipal services, but the extension of the form to the welfare sector is a more recent development.

The study conducted by PricewaterhouseCoopers (PWC: 2012) shows one-stop shops enable citizens and customers a single access point to information and service transactions. There are several principles of one stop-shop, including; speed, engagement, responsive, value, integration. A study conducted by Fredriksson (2020) shows that the implementation of one stop-shop

in public services has succeeded in solving the problem of government bureaucracy that is not functioning properly for the delivery of services at the forefront.

2. New Value Systems

The new value that emerges from the one stop-shop service concept is partnership in the production of goods or services, an open service that is developed with platforms and business networks. Sørensen & Torfing (2011) suggests in the conventional view, governance networks are first and foremost functional alternatives to markets and hierarchies for effectively getting things done. New value is generated in the framework of setting collaboration, co-creation, and co-production so that policy goals can be achieved.

The service model through one stop-shop provides a lot of value for the welfare of service recipients (Askim et al, 2011), as shown in table 3, below:

Table 3. The value generated from the One Stop-Shop service concept

Item	Variable	Values
1	Task portfolio	More policy areas: Pensions, welfare benefits, social services.
2	Participant structure	Central/regional and private government agencies, autonomous regions
3	Autonomy	Public participation, Budget Review, Organization Management
4	Proximity to citizen	Bringing services closer to the public, services can be accessed anywhere.
5	Instruments	Inter-agency management, budget partnerships, collaboration in recruitment.

Source: adapted from Askim et al, 2011

Interesting about the one stop-shop concept in the field of public services is that the values produced are pro-public and decentralized. In addition, another advantage is the value of the instrument which is inter-agency management, budget partnerships, collaboration in recruitment.

CONCLUSION

Public service reform is a necessity in improving better services to citizens, they will feel satisfied if the services provided are of higher quality. Reform actions are not enough with only the good will of government administrators, reforms require innovation steps on the grounds that innovation is the key to an organization's ability to meet public demands. Janenova and Kim (2016) argue that innovation and continuous improvement play an important role in government transformation, therefore public organizations can identify public values and gain insights on how best to introduce these initiatives and adapt them to organizational needs.

Innovation in public services is carried out with the aim of creating change, improving the way government is managed, and performing services in an efficient, economical and effective manner. The innovation challenge is global: facing increasingly intricate social and economic problems, public sector organisations all over the world cannot just continue 'business as usual' but have to engage in forms of innovation. This, however, should not lead to embracing 'one-size-fits-all' approaches that overlook local differences (Pollit, 2013).

Public service innovation through a one-stop-shop conducted by the Belu regency government is a breakthrough and an example for local governments around it. This public service model has succeeded in reducing administrative

clutter (Red Tape) and preventing inefficiencies.

The implementation of a one stop-shop at the Timor-Atambua public service mall has succeeded in innovating services to the public, especially in two aspects namely; new service concept and public-oriented service value creation. This new service delivery model provided by the Timor-Atambua public service mall takes into account multiple access points across the service value chain, and takes into account the different needs and channel preferences of different segments of the population. One-stop shops have been used for some time for technical services, planning in local government and various other services, but the extension of the form to the welfare sector is a more recent development (Wiggan, 2007).

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