



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET, DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN

Jalan Perintis Kemerdekaan Km. 10 Makassar 90245lepon (0411) 586200, 589895
Faximili (0411) 585188

SURAT PERNYATAAN
Nomor 31275/UN4.1.3/KP.09.02/2022

Yang bertanda tangan di bawah ini :

Nama : Prof. Dr. Farida Patittingi, S.S., M.Hum.
NIP : 196712311991032002
Pangkat/Golongan : Pembina Utama Madya, IV/d
Jabatan : Wakil Rektor Bidang Sumber Daya Manusia, Alumni dan Sistem Informasi
Unit Kerja : Universitas Hasanuddin

Dengan ini menyatakan bahwa :

Nama : Dr. dr. Andi Indahwaty As, MHSM.
NIP : 197301042000121001
Pangkat/Golongan : Pembina Tk. I, IV/b
Unit Kerja : Fakultas Kesehatan Masyarakat Universitas Hasanuddin

benar memiliki karya ilmiah yang diajukan untuk kenaikan jabatan akademik profesor dan terdapat perbedaan penulisan nama Sdr. Dr. dr. Andi Indahwaty As, MHSM. dengan nama yang tertera pada karya ilmiah yang bersangkutan, sebagai berikut :

No	Judul Karya Ilmiah	Hasil Pemeriksaan Dikti	Klarifikasi
1	The role of Bugis cultural value to leader-member exchange and organizational citizenship behavior of Bugis nurses in Makassar	Klarifikasi Nama Penulis Pertama Indahwaty Sidin Sedangkan Nama Pengusul Tertulis Andi Indahwaty As	Pada karya ilmiah tercantum penulis-1 Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
2	Description of Organizational Citizenship Behavior dimension in nurses at Labuang Baji Hospital	Klarifikasi Nama Penulis Pertama A.Indahwaty Sidin Sedangkan Nama Pengusul Tertulis Andi Indahwaty As	Pada karya ilmiah tercantum penulis-1 A.Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul

No	Judul Karya Ilmiah	Hasil Pemeriksaan Dikti	Keterangan
3	Can Buginese values foster the organizational citizenship behavior (OCB) of civil servants in local hospital in Makassar, South Sulawesi, Indonesia	Klarifikasi Nama Penulis Pertama Andi Indahwaty Sidin Sedangkan Nama Pengusul Tertulis Andi Indahwaty As	Pada karya ilmiah tercantum penulis-1 Andi Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
4	Organizational climate enhance service quality through enhancing OCB in public hospital	Klarifikasi Nama Penulis Pertama Indahwaty Sidin Sedangkan Nama Pengusul Tertulis Andi Indahwaty As	Pada karya ilmiah tercantum penulis-1 A.Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
5	Creating Value Bugis-Based Filosive Ada Na Gauk in South Sulawesi Regional General Hospital	Penulis-3 Indahwaty Sidin, Pengusul tercatat Andi Indahwati AS Perlu klarifikasi untuk kesesuaian nama	Pada karya ilmiah tercantum penulis-3 Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
6	The Relationship Between Leadership Style And Nurse's Work Motivation With The Application Of Patient Safety Culture Of The Inpatient Installation In The C Class Hospital, Boneâ	Penulis-2 Andi Indahwaty Sidin, Pengusul tercatat Andi Indahwaty AS Perlu klarifikasi untuk kesesuaian nama	Pada karya ilmiah tercantum penulis-2 Andi Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
7	Do Ethical Climate Have Impact on Job Satisfaction of Staff in West Sulawesi Hospital, Indonesia?,	Penulis-1 Andi Indahwaty Sidin, Pengusul tercatat Andi Indahwaty AS Perlu klarifikasi untuk kesesuaian nama	Pada karya ilmiah tercantum penulis-1 Andi Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
8	Pengaruh Lama Kerja terhadap Tingkat Organizational Citizenship Behavior (OCB) Perawat Suku Bugis di Instalasi Rawat Inap Rumah Sakit Labuang Baji	Penulis-1 Andi Indahwaty Sidin, Pengusul tercatat Andi Indahwaty AS Perlu klarifikasi untuk kesesuaian nama	Pada karya ilmiah tercantum penulis-1 Andi Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul
9	Organizational Citizenship Behavior Perawat Etnis Bugis di Sulawesi Selatan	Penulis-1 Indahwaty Sidin, Pengusul tercatat Andi Indahwaty AS Perlu klarifikasi untuk kesesuaian nama	Pada karya ilmiah tercantum penulis-1 Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul

No	Judul Karya Ilmiah	Hasil Pemeriksaan Dikti	Keterangan
10	Bagaimana implementasi akuntabilitas rumah sakit pada era sistem jaminan sosial nasional : apa-siapa yang harus akuntabel, dimensi dan pengukuran	Penulis buku tercantum Andi Indahwaty Sidin Pengusul tercatat Andi Indahwaty AS Perlu klarifikasi nama	Pada buku tercantum penulis Andi Indahwaty Sidin, adalah dosen yang sama dengan Andi Indahwaty AS sebagai pengusul

Setelah dipenuhi, kami mohon kiranya penilaian penetapan angka kredit untuk kenaikan jabatan dosen yang bersangkutan dapat diproses lanjut.

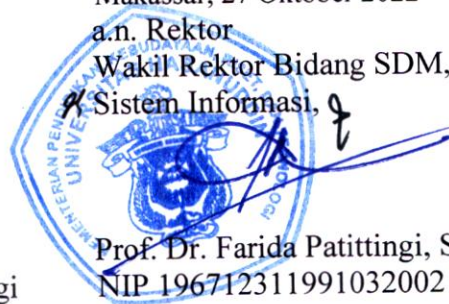
Atas perhatian dan kerjasamanya disampaikan terima kasih.

Makassar, 27 Oktober 2022

a.n. Rektor

Wakil Rektor Bidang SDM, Alumni dan

Sistem Informasi,



Prof. Dr. Farida Patittingi, S.H., M.Hum.
NIP 196712311991032002

Tembusan :

1. Dirjen Pendidikan Tinggi, Riset, dan Teknologi
Kemendikbudristek di Jakarta;
2. Dekan Fakultas Kesehatan Masyarakat Unhas;
3. Kepala Biro Sumber Daya Manusia Kemendikbudristek
di Jakarta;
4. Kepala Bagian Tata Usaha Fakultas Kesehatan Masyarakat Unhas;
5. Sdr. Dr. dr. Andi Indahwaty As, S.Ked., MHSM.

Creating Value Bugis-Based Filosive Ada Na Gauk in South Sulawesi Regional General Hospital

Armin¹, Alimin Maidin², Indahwati Sidin², Fridawaty Rivai²,
Muhammad Safar³, Burhanuddin Bahar³, Indrianty Sudirman²

¹Doctoral Program Science of Public Health, Hasanuddin University, Indonesia, ²Departemen of Hospital Management, Faculty of public Health, Hasanuddin University, Makassar, Indonesia, ³Faculty of Public Health, Hasanuddin University, Makassar, Indonesia

Abstract

Context: Modern hospital management systems must provide customer-focused services, which means that hospitals must be able to understand the needs, desires and expectations of customers and create value in providing services in order to realize satisfaction and be able to survive in competition. Quality of service such as polite, empathetic and helpful has different understandings and perceptions from several similar studies and tends to vary greatly from culture to culture, because culture provides a framework for social interaction in society. Many writers have noted the influence of external variables on cultural expectations and recognition as a major determinant of consumer behavior.

This study aims to examine creating value based on bugis philosophical Ada Na Gauk in the Regional General Hospital (RSUD) of South Sulawesi.

The research locations chosen were Andi Makkasau Pare Pare Regional Hospital, Siwa Regional Hospital, Wajo Regency, Lamadukelleng Regional Hospital, Wajo Regency, and Tenriwaru Regional Hospital, Bone Regency. This type of research is quantitative and the respondents in this study were patients from the hospitals mentioned above.

The results of this study indicate that the visit variable, the value of bugis philosophical of Ada Na Gauk mostly is in good category with a visit variable ≥ 4 times that is equal to 82.1% and the least is in the experience of Ada Na Gauk with the category of less with visitation category ≥ 4 times as much as 17.9%.

Keywords: *Creating value, Ada Na Gauk, RSUD (Regional General Hospital). Bugis.*

Introduction

The Bugis community is an ethnic group that occupies the middle partsouth of Jasirah South Sulawesi as the area of origin and place of residence according to Lontarak Attoriolongnge ri Pammana.¹³ Increased competition is increasingly competitive in the global economy, profitability, requires more than just good products and services, a business must provide unforgettable satisfaction for customers.¹

Modern hospital management systems must provide customer-focused services, which means that hospitals must be able to understand the needs, desires and expectations of customers and create value in providing

services in order to realize satisfaction and be able to survive in competition². Based on previous research, around 90% of death rates can be prevented by improving the quality of health care. This shows the importance of quality of care³.

Quality of service such as polite, empathetic and helpful has different understandings and perceptions from several similar studies and tends to vary greatly from culture to culture, because culture provides a framework for social interaction in society⁵. The existence of cultural characteristics, affect the values and perceptions of customers / consumers. Customer values have long been considered a source of competitive advantage for service organizations^{6,7}. So the hospital

also needs to create value to its customers in providing service experience.

Hospitals in Indonesia continuously improve the quality of service to reach national and even international standard hospitals, with recognition through hospital accreditation that must implement the elements specified in Hospital Accreditation Standards (SNARS) edition 1. One of the standards of accreditation hospital, namely the Patient and Family Rights (HPK), illustrates that the hospital builds trust and open communication with patients to understand and protect the cultural, psychosocial, and spiritual values of each patient. Patients and their families are unique individuals with different characteristics, attitudes, behaviors, personal needs, religion, beliefs and values. The results of service to patients will increase if the patient and family have the right to make decisions, be included in decision making services and processes in accordance with expectations, values, and culture⁸.

Sulawesi Island itself, especially South Sulawesi, has a very fast growth of hospitals, and to improve the quality of its services all hospitals must be accredited with SNARS edition 1. Hospitals in South Sulawesi must maintain the quality of their services in providing services to their customers consisting of several ethnic groups, namely Bugis, Makassar, Mandar, Toraja. One of the most dominant tribes in the South Sulawesi area is the Bugis tribe. The Bugis community is an ethnic group that occupies the central and southern parts of South Sulawesi as their place of origin and residence. Among the 24 districts and municipalities there are several districts which are Bugis areas, each of which are: Bone, Wajo, Sinjai, Bulukumba, Soppeng, Sidenreng - Rappang, Luwu, Pinrang, Kotamadya Pare Pare, Barru, Pangkajene Islands and Maros.

The perception of service desired by consumers in the development of the hospital is polite, empathetic and helpful, almost all of which are included in the Bugis ideology. The Bugis ideology is understood and applied in the Bugis community. This is considered a strong character for them hereditary. Their ability is to move to start a new life by upholding the ideology of sirik na pessẽ. This Bugis ideology consists of four phrases; the first phrase is Ada Na Gauk (in line between words and deeds/honest/consistent/firm/independent), the second is Sipakatau (humanity/mutual attention/benefactors), the third is enumeration (unity/ fair/mutual help/cooperation), the fourth is teppe (trust/mutual trust).

This research focuses on cultural issues by examining regional public hospital services and Bugis ideology as a socio-cultural product. Bugis ideology contained in paseng or pappangngajatomatoa embodied in Lontarak and surekugik as well as other Bugis stories that allegedly created cultural phenomena in the form of local wisdom. This research tries to understand certain ethnic groups in South Sulawesi in producing cultural products in the form of community ideology.

Materials and Method

- a. **Location and Research Type:** This research was conducted in 3 regencies in South Sulawesi, which are centered within the scope of 4 government hospitals, namely Andi Makkasau Hospital Pare Pare City, Siwa Hospita Wajo Regency, Lamadukelleng Hospital, Wajo Regency, and Tenriawaru Hospital, Bone Regency. This study uses quantitative research with the test used is the Confirmatory Factor Analysis Test.
- b. **Population and Sample:** The study population was all new inpatients with a minimum of 3 days inpatient and recurrent inpatients / their families who had received services at the Hospital in the Regional General Hospital in South Sulawesi. The sampling method used was purposive sampling with the requirements of the respondent being inpatients who had been treated more than twice or in other words repeated patients who at the time of the study were at least 3 days in hospital. The total sample were 400 inpatients at the Regional General Hospital in South Sulawesi.
- c. **Data Analysis:** Analysis of the data used in this study is univariate analysis, bivariate analysis and also multivariate analysis. Univariate analysis is used to determine the distribution of the characteristics of respondents obtained.

Results

Hospitals have become a growing industry globally to provide patient care. Modern hospital management systems must provide customer-focused services, meaning that hospitals must understand the needs, desires, and expectations of customers and create value in providing services in order to realize satisfaction and be able to survive in global competition.

Customer experience is a differentiating element from traditional concepts of business strategy. This

paradigm shift from brand to service-based, then shifted to focus on service-based marketing relationships and towards managing customer experience⁹. Satisfaction and focus on customers is the focus of service companies this decade, they focus on finding ways to satisfy customers and find out what can make customers want to return, and tell friends and family about the service experience they get¹⁰

The application of customer experience will have an impact on increasing customer loyalty.. Patients prioritize the utilization of health care services and services regardless of the name of the hospital and other marketing aspects¹¹.

Hospital service evaluation refers to the attributes that can be understood. Attributes that can be understood by patients include buildings, equipment, number and competence of doctors, waiting time, procedures, staff friendliness, and so on. Patients generally evaluate attributes that appear to be relatively small in relation to the actual benefits they seek from the hospital¹². Hospital patients make the actual behavior of doctors and nurses an indicator in evaluating hospitals. Doctors and nurses are expected to be polite, empathetic, and able to help^{13,14,15}.

Hospital value creation initiatives can be used to generate revenue and to build market share for businesses, thus it becomes an important part of management strategies that deal with patients without denying services such as courtesy, empathy, compliance with rules and helping to have cultural-based understanding and perception, because culture provides a framework for social interaction in society. Patient expectations based on Bugis Philosophical Ada Na Gauk in South Sulawesi Hospital Expectations on Bugis philosophical value of Ada Na Gauk is the expectation of patients given by hospital staff namely doctors and nurses in the form of integrity, one word and deed, what is conveyed is applied in everyday life. The results of the data analysis showed the Bugis philosophical value of Ada Na Gauk, patients have the expectation that doctors and nurses provide health services in accordance with standard operating procedures that must be obeyed in hospitals. What is delivered will be his action, according to the words of the deeds of the Bugis as Ada Na Gauk.

Table 1: Characteristics of Patients Based on Sex in South Sulawesi Hospital Year 2019

Sex	Frequency (n)	Percentage (%)
Male	158	39,5
Female	242	60,5
Total	400	100,0

Source: Primary Data Based on table 1 above for female is more than male in total of 242 people (60.5%) compared to the male gender that is equal to 158 people (39,5%).

Table 2: Characteristics of Patients Based on Age in South Sulawesi Hospital Year 2019

Age (yr)	Frquency (n)	Percentage (%)
<10	2	0,5
11-15	4	1,0
16-20	27	6,8
21-25	25	6,3
26-30	40	10,0
31-35	32	8,0
36-40	41	10,3
41-45	24	6,0
46-50	51	12,8
51-55	46	11,5
>56	108	27,0
Total	400	100,0

Source: Primary Data Based on table 2 above, the age group of the most patients is the age group > 56 years which is 108 patients (27%), while the least is in the age group <10 years in total of 2 patients (0.5%).

Table 3: Characteristics of Patients Based on Nursing Class in South Sulawesi Hospital Year 2019

Nursing Class	Frekuensi (n)	Percentage (%)
Class1	112	28,0
Class2	86	21,5
Class3	144	36,0
VIP	58	14,5
Total	400	100,0

Source: Primary Data Based on table 3 above, the type of treatment class, class 3 is the class with the most number of patients in total of 144 patients (36%).

Table 4: Characteristics of Patients Based on Occupation in South Sulawesi Hospital Year 2019

Occupation	Frequency (n)	Percentage (%)
Student	34	8,5
Private	37	9,3
Housewife	165	41,3
Civil Servant	46	11,5
Farmers	57	14,3
Nelayan/labor	58	14,5
Soldier/ police	3	0,8
Total	400	100,0

Source: Primary Data Based on table 4 above, the most types of patient work are housewives as many as 165 patients (41.3%), while the least is the work of TNI / Polri as many as 3 patients (0,8%).

Table 5: Patient Characteristics Based on the Bugis Philosophical Value of Ada Na Gauk inpatient at South Sulawesi Hospital in 2019

EAdanagau	Frequency (n)	Percentage (%)
Less	139	34,8
Good	261	65,3
Total	400	100,0

Source: Primary Data Based on table 5 above, it can be seen that from 400 respondents, Ada Na Gauk experience in the good category became a domain with a total of 261 patients (65.3%) and adanagau experience with a less category as many as 139 patients (34.8%).

Table 6: Cross Tabulation of Patients with Bugis Philosophical Values Experience inpatient at South Sulawesi Hospital in 2019

Variable	Experience of Adanagau					
	Less		Good		Total	
	n	%	n	%	n	%
Sex						
Male	59	37,3	99	62,7	158	100
Female	80	33,1	162	66,9	242	100
Age						
Old	84	36,7	145	63,3	229	100
Young	55	32,2	116	67,8	171	100
Education Level						
Low Education	138	34,7	260	65,3	398	100
High Education	1	50	1	50	2	100
Occupation						
Unemployed	73	36,7	126	63,3	199	100
Employed	66	32,8	135	67,2	201	100
Income						
Below Regional Minimum Wage	103	36,3	181	63,7	284	100
Above Regional Minimum Wage	36	31,0	80	69,0	116	100
Type of Patient						
New	69	46,6	79	53,4	148	100
Old	70	27,8	182	72,7	252	100
Class						
Class 1-3	129	37,7	213	62,3	342	100
VIP	10	17,2	48	82,8	58	100
Visits						
<4 times	134	36,0	238	64,0	372	100
≥4 times	5	17,9	23	82,1	28	100

Source: Primary Data The table above shows that in the sex variable, the value of the philosophical experience of Ada Na Gauk is mostly in the good category with the sex variable in the female category of 162 patients (66.9%) and the least is in the category of less by female sex equal to 80 patients (33,1%).

In the age variable, the value of Bugis philosophy of Ada Na Gauk experience is in the good category with the age variable in the young category of 116 patients (67.8%) and the least is in less category with young age category namely by 55 patients (32,2%).

At the education level variable, the value of Ada Na Gauk bugis philosophy is in the good category with the low education level variable in total of 260 patients (65.3%) and the lowest is in less and good category, namely respectively one patient (50%) in highly educated category.

For occupation variable, the value of Bugis philosophy of Ada Na Gauk experience is in the good category with occupation variable of working category in total of 135 patients (67.2%) while the least is in less category with the occupation of working category in total of 66 patients (32.8%).

In the income variable, the value of Ada Na Gauk's bugis philosophy is in good category with the income variable above Regional Minimum Wage of 80 patients (69%) and the least is in less category with the income category above Regional Minimum Wage in total of 36 patients (31%).

In the patient type variable, the value of Ada Na Gauk's bugis philosophy is in good category with old type of patient variable in total of 182 patients (72.7%) and the least is in less category with the type of patient of old category in total of 70 patients (27,8%).

In the treatment class variable, the value of Ada Na Gauk's bugis philosophy is in good category with the VIP nursing class variable in total of 48 patients (82.8%) and the least is less category with VIP category nursing class in total of 10 patients (17.2%).

In the visit variable, the value of Ada Na Gauk's bugis philosophy is in good category with the variabel of ≥ 4 times category visit that is equal to 82.1% and the least is less category with the visitation of ≥ 4 times by 17.9%.

Bugis philosophical values of Ada Na Gauk (according to words and deeds), doctors and nurses according to the code of ethics and work according to policy, SOP. So in conclusion, creating values based on the Bugis philosophy can be a solution offer for regional public hospital services to be the order and basis in the service of Regional General Hospitals in South Sulawesi

in particular and all regional public hospitals in Indonesia in particular.

Conclusion and suggestion

One of the philosophical bugis is Ada Na Gauk which is defined as according to words and deeds, what is becoming the Standard Operating Procedures must be implemented, all policies that are mutually agreed upon must be implemented. . The philosophy value of Ada Na Gauk needs to be applied in hospitals according to one of the standards of hospital accreditation, namely the Rights of Patients and Families (HPK), which illustrates that hospitals build trust and open communication with patients to understand and protect the cultural values of each patient. As a material consideration for further researchers to conduct further research related to other indicators to improve service quality in hospitals.

Conflict of Interest: There is no conflict of interest in this study

Source Of Funding: Domestic Government

Ethical Clearance: This study has obtained information on ethical qualifications number: 0151/PL.09/KEPK FKG-RSGM UNHAS/2019 and registration number UH 17120156 dated 15 May 2019.

References

1. Kim, S., Cha, J., Knutson, B. J., & Beck, J. A. Development and testing of the Consumer Experience Index (CEI). *Managing Service Quality: An International Journal* 2011;21(2):112-132.
2. Cronin Jr, J.J., & Taylor, S. A. Measuring service quality: a reexamination and extension. *the Journal of Marketing*, Bari, P. Are you providing the 'right' customer experience? The case of Banca. 1992.
3. Organization, W. H. World Alliance for Patient Safety Progress Report 2006- 2007. 2008.
4. Shaw, Colin dan Ivens, John "Building Great Customer Experiences", First Published, Palgrave Mac millan, New York. 2002.
5. Zaichkowsky, J.L. Sood, J.H. A global look at consumer involvement and use of products. *International Marketing Review*. 1989.6(1): 20-35.
6. Woodruff, Robert B. Customer Value : The Next Source for Competitive Advantage, *Journal of the Academy of Marketing Science*. 1997;25(2):139-153.

7. Helkkula, A. Characterising the concept of service experience. *Journal of Service Management*. 2011;22(3):367-389.
8. Kars. National hospital accreditation standards edition 1.2017.
9. Bitner, Mary Jo, Zeithaml, Valarie A, *Services Marketing*. Edisi1. Boston. MCGraw-Hill. 996.
10. Otto, J.E., & Ritchie, J.B. The service experience in tourism. *Tourism management*, 1996;17(3).165-174.
11. Cavusgil, S. T. Marketing's promise for hospitals. *Business Horizons*. 1986;29(5):71-76.
12. Corbin, C.L., Kelley, S. W., & Schwartz, R. W. Concepts in service marketing for healthcare professionals. *The American Journal of Surgery*. 2001;181(1);1-7.
13. Parasuraman, A., Zeithaml, V.A., & Berry, L.L. A conceptual model of service quality and its implications for future research. *The Journal of Marketing*. 1985:41- 50.
14. Mardiana Adam, Achmad H. The Relationship of Mineral Fluor Exposure in Water with The Presence of Gingivitis (Study Case in Subdistrict of Tempe, Sengkang City, Wajo District). *Journal of International Dental and Medical Research*. 2018;11(2):470-476
15. Armin, Sidin I, Sudirman I, Achmad H. Exploration of patients value as in accordance with bugis philosophy in public hospital at the Sulawesi Selatan. *IJPHRD*. 2019;20(7)