



## RESEARCH ARTICLE

# Implementation Of The Mobile Service Program For Electronic ID Card Issuance For Persons With Disabilities In Lhokseumawe City

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### Abstract

The Mobile Service Program (Program Jemput Bola) represents an innovative public service initiative implemented by the Department of Population and Civil Registration of Lhokseumawe City to improve access to civil registration services for persons with disabilities. This study examines the implementation of this program for Electronic Identity Card (KTP-el) issuance and identifies the obstacles encountered. Utilizing a qualitative descriptive approach with case study design, data were collected through observation, in-depth interviews with nine purposively and accidentally selected informants, and documentation. Data validity was ensured through source and technique triangulation. Analysis followed Robert K. Yin's case study framework. The findings reveal that while the program has been implemented, it has not yet achieved optimal performance. Communication aspects remain inadequate, with socialization failing to reach all target groups and limited inter-agency coordination. Resources are constrained by insufficient human resources for field coverage, inadequate facilities (limited recording equipment and operational vehicles), and unstable internet connectivity. Disposition demonstrates strong commitment among implementers despite heavy workloads. Bureaucratic structure shows established procedures but suboptimal, inconsistent inter-agency coordination, with conflicting accounts between department and sub-district officials regarding coordination. Four categories of obstacles were identified: limited data on target beneficiaries, ineffective socialization and coordination, inadequate human resources, and insufficient supporting infrastructure. These constraints result in uneven service coverage, preventing full realization of the program's inclusive service objectives. Strengthening program implementation requires enhanced inter-agency coordination, expanded community outreach through village-level engagement, improved facilities, increased competent personnel, and consistent cross-sectoral collaboration.

### Keywords

Mobile Service Program; Electronic ID Card; Disability; Policy Implementation; Inclusive Public Service.

## 1 | INTRODUCTION

Public service delivery constitutes a fundamental state responsibility aimed at fulfilling citizens' basic rights and promoting social welfare. Within the context of Indonesia's civil registration system, the Electronic Identity Card (KTP-el) serves as an official identification document essential for accessing various public services, including healthcare, education, social assistance, and political rights (Destiyaningrum, 2022). The issuance of KTP-el represents not merely an administrative procedure but a gateway to full citizenship participation and enjoyment of constitutional rights. The Indonesian government has established a comprehensive legal framework to ensure equitable access to civil registration services. Law Number 24 of 2013 concerning Amendments to Law Number 23 of 2006 on Population Administration mandates the provision of accessible and non-discriminatory services. Minister of Home Affairs Regulation Number 9 of 2011 provides guidelines for the issuance of Electronic Identity Cards based on the National Population Identification Number, while Minister of Home Affairs Regulation Number 19 of 2018 on Improving the Quality of Population Administration Services, particularly Article 2 paragraph (2), explicitly permits service delivery through integrated services and/or mobile services (*jemput bola*). These regulations underscore the government's obligation to provide services that are efficient, valid, and equitable. Despite these regulatory frameworks, significant challenges persist in ensuring that all citizens can access civil registration services, particularly persons with disabilities. Defined under Law Number 8 of 2016 concerning Persons with Disabilities, persons with disabilities are individuals who experience long-term physical, intellectual, mental, and/or sensory limitations that, when interacting with the environment, may face barriers and difficulties in participating fully and effectively with other citizens on the basis of equal rights. The World Health Organization's International Classification of Functioning, Disability, and Health (ICF) framework conceptualizes disability as the interaction between health conditions and environmental factors, emphasizing that barriers to participation often arise from inaccessible environments rather than impairments themselves (Armasito *et al.*, 2021). Persons with disabilities frequently encounter significant obstacles in accessing civil registration services, including mobility limitations, inaccessible physical infrastructure, complex administrative procedures, and insufficiently responsive service delivery (Hairia & Sakawati, 2024). According to Dwiyanto (2018), accessibility constitutes a critical indicator of successful public service delivery, particularly for individuals with special needs. Sinambela (2016) further emphasizes that quality public services must provide ease of access for all citizens without exception, encompassing physical accessibility, information availability, responsive and empathetic officers, and simplified procedures. The Mobile Service Program (*Program Jemput Bola*) emerged as an innovative response to these access barriers. This program, implemented by the Department of Population and Civil Registration (Disdukcapil), involves proactive service delivery where officers directly visit community locations to provide civil registration services, rather than waiting for citizens to visit service offices. The program targets vulnerable groups including persons with disabilities, the elderly, students, and residents in remote areas (Ilhamsyah, 2025). According to Mei (2023), the program aims to: (1) facilitate access to civil registration services for community members without requiring visits to Disdukcapil offices; (2) raise awareness about the importance of official identity documents; (3) realize efficient, effective, and inclusive public services; and (4) increase ownership of civil registration documents.

In Lhokseumawe City, the Mobile Service Program was initiated as a commitment to inclusive public service delivery. The program involves coordination with sub-district offices, village governments, and social institutions to identify and reach persons with disabilities requiring services. However, preliminary observations reveal that program implementation has not yet achieved optimal performance, with services not reaching all target groups equitably. Data from the Lhokseumawe City Central Bureau of Statistics (BPS) indicates 622 persons with disabilities recorded in 2024. It should be noted that this figure represents the total registered population with disabilities, not necessarily all requiring KTP-el services, as some may already possess identity documents. However, program data shows only 10 individuals served in 2025 across four sub-districts (Muara Dua, Muara Satu, Blang Mangat, and Banda Sakti). While the 622 figure may include individuals already holding KTP-el, the significant gap between recorded persons with disabilities and program beneficiaries suggests substantial unmet needs among the target population, particularly for those requiring new issuance or data updates. Previous research has examined various aspects of mobile service programs. Destiyaningrum (2022) found that the mobile service program in Purbalingga Regency had been implemented effectively, facilitating community access and increasing document ownership despite internet connectivity challenges. Nur (2022) identified that Banda Aceh's mobile program had improved service accessibility and document ownership, though implementation aspects required improvement. Ilhamsyah (2025) found that Bandar Lampung's program helped facilitate ID card activation but faced technical constraints. Alfianah (2021) demonstrated that Cilegon's program for persons with disabilities was implemented according to legal foundations but faced obstacles affecting effectiveness. Gho (2024) found that Aceh Tengah's service innovation for persons with disabilities had been implemented but faced challenges in socialization and resources. However, limited research specifically analyzes mobile service program implementation using George Edward III's comprehensive policy implementation model, particularly regarding services for persons with disabilities at the municipal level. Edward III's model identifies four critical factors determining implementation success: communication, resources, disposition (implementer commitment), and bureaucratic structure

(Syahrudin, 2020). This framework provides a systematic approach to analyzing program implementation effectiveness, addressing not only procedural aspects but also the behavioral and structural factors influencing service delivery. This study addresses this research gap by examining the implementation of the Mobile Service Program for Electronic ID Card issuance for persons with disabilities in Lhokseumawe City. Specifically, it analyzes program implementation across the four dimensions of Edward III's model and identifies the obstacles encountered. The novelty of this research lies in its application of the comprehensive Edward III framework to analyze disability-inclusive mobile services at the municipal level, examining how communication, resources, implementer disposition, and bureaucratic structure interact to influence service accessibility for persons with disabilities. By focusing on a vulnerable population and employing a systematic implementation framework, this research provides nuanced insights into the operational challenges of translating inclusive service policies into effective practice, contributing both theoretical understanding and practical recommendations for more equitable civil registration services. The research objectives are: (1) to analyze the implementation of the Mobile Service Program for KTP-el issuance for persons with disabilities in Lhokseumawe City based on George Edward III's four implementation factors; and (2) to identify the obstacles encountered in program implementation.

## 2 | BACKGROUND THEORY

### 2.1 Public Policy and Implementation

Public policy can be understood as a series of decisions and actions taken by government to address problems faced by society. According to Carl J. Frederick (in Rantung, 2021), policy is defined as a proposed series of actions by individuals, groups, or governments within a specific environment where obstacles and opportunities exist for implementing policy proposals to achieve particular objectives. Abdul Wahab (in Kurniati *et al.*, 2015) emphasizes that public policy constitutes binding actions (carrying sanctions) designed to achieve specific goals, targeted at addressing complex problems whose impacts affect most community members. Implementation represents the critical stage where policy intentions are translated into concrete action. According to Grindle (in Dewi, 2019), implementation is a series of administrative actions that can be examined within the context of specific programs. The process begins after goals and targets are established, activities planned, and funds allocated. Abdoellah (2016) notes that without implementation, policies that have been formulated cannot provide any benefit. Van Meter and Van Horn (in Agus, 2020) define implementation as actions taken by individuals or groups from government or private sectors to execute policy decisions to achieve established goals, with success determined by alignment between formulated policies and field implementation.

### 2.2 George Edward III's Policy Implementation Model

George Edward III's model provides a comprehensive framework for analyzing policy implementation success. According to Edwards III (in Syahrudin, 2020), implementation is the stage in the policy process between policy formulation and its subsequent impacts. A policy may fail even with good implementation if not properly designed, while well-formulated policies may fail if poorly implemented. Four critical factors influence implementation success:

#### 1) Communication

Communication concerns how policy information is transmitted to organizations and communities. Effective communication requires clarity, consistency, and accurate transmission. Information must be delivered clearly, precisely, and consistently so all parties understand policy objectives and directions. Communication should also be well-coordinated to ensure information reaches all stakeholders, including implementers and target groups. This dimension is particularly critical for reaching vulnerable populations like persons with disabilities, who may require accessible information formats and targeted outreach.

#### 2) Resources

Resources encompass the availability of supporting elements, especially implementing personnel. If policy implementers lack sufficient resources, implementation cannot proceed optimally. Resources include human resources (quantity and competence of personnel) and material resources (facilities, infrastructure, equipment, and budget). The adequacy and management of resources significantly determine program effectiveness. For mobile services, adequate resources specifically include portable recording equipment, operational vehicles, and personnel with disability-inclusive service competence.

#### 3) Disposition

Disposition refers to the attitudes, commitment, and willingness of policy implementers to execute policies optimally and effectively. Implementer commitment and motivation are crucial determinants of implementation success. High commitment encourages consistent, dedicated implementation despite field constraints, while limited commitment can hinder achievement of policy objectives. Disposition encompasses implementers'

understanding of policy objectives, acceptance of their roles, and responsiveness to target group needs.

#### 4) Bureaucratic Structure

Bureaucratic structure concerns organizational suitability for implementing public policies. Implementation requires clear division of tasks and authority, established Standard Operating Procedures (SOPs), and effective coordination among implementing institutions. Bureaucratic fragmentation can impede policy implementation processes. Clear structures and coordination mechanisms are essential for efficient, directed program execution. For cross-sectoral programs serving persons with disabilities, coordination among multiple agencies and levels of government is particularly critical.

### 2.3 Mobile Service Program

The Mobile Service Program represents a proactive service delivery innovation where officers directly visit community locations without waiting for citizens to visit service offices (Ilhamsyah, 2025). This program aims to facilitate and expand access to civil registration services, particularly for vulnerable groups including students, persons with disabilities, the elderly, hospital patients, and residents facing time, distance, or physical limitations. According to Minister of Home Affairs Regulation Number 19 of 2018, the program aims to bring civil registration services closer, more accessible, and more equitable across community segments. Factors influencing program implementation include: (1) human resources, including officer competence and availability; (2) facilities and infrastructure, including portable recording equipment and operational vehicles; (3) inter-agency coordination and communication; (4) program socialization; (5) geographic conditions and accessibility; and (6) community participation and awareness (Alief, 2021). These factors align with Edward III's framework, demonstrating its relevance for analyzing mobile service programs.

### 2.4 Persons with Disabilities and Access to Civil Registration Services

Law Number 8 of 2016 defines persons with disabilities as individuals experiencing long-term physical, intellectual, mental, and/or sensory limitations who, when interacting with the environment, may face barriers to full and effective participation with other citizens on the basis of equal rights. This definition recognizes that disability arises from the interaction between individual limitations and environmental barriers, emphasizing society's responsibility to remove access barriers. Access to civil registration services represents a fundamental right of every citizen, including persons with disabilities. According to Sinambela (2016), quality public services must provide easy access for all citizens without exception, including vulnerable groups with physical and non-physical limitations. Dwiyanto (2018) emphasizes that accessibility constitutes a critical indicator of successful public service delivery, particularly for individuals with special needs. Barriers faced by persons with disabilities include mobility limitations, inaccessible physical infrastructure, complex procedures, and insufficient responsive service (Rukayat, 2017). For effective service delivery to persons with disabilities, the four dimensions of Edward III's model must specifically address disability-related barriers. Communication must reach families and caregivers through accessible formats. Resources must include disability-aware personnel and accessible equipment. Disposition must reflect commitment to inclusive service principles. Bureaucratic structure must ensure coordination with social services and disability organizations. This study uses this framework to analyze whether the Mobile Service Program addresses these specific requirements.

## 3 | METHOD

### 3.1 Research Design and Location

This study employed a qualitative approach with descriptive methods, selected to enable comprehensive understanding of the phenomenon as it occurs naturally in the research context. According to Moleong (in Abdul, 2023), qualitative research aims to understand phenomena experienced by research subjects holistically, then explain them through words in natural situations using various scientific methods. The descriptive case study design was chosen to provide an in-depth understanding of program implementation by examining the phenomenon within its real-world context, consistent with Yin's (2018) case study approach. The research was conducted at the Department of Population and Civil Registration of Lhokseumawe City, selected because the agency implements the Mobile Service Program but implementation has not yet reached optimal performance, particularly for persons with disabilities. The location was also chosen because of the significant gap between recorded persons with disabilities and program beneficiaries, providing a compelling case for implementation analysis.

### 3.2 Informants

Informants were selected using a combination of purposive and accidental sampling techniques (Sugiyono, 2021). Purposive sampling involves intentional selection based on specific considerations to ensure relevance to research

objectives, while accidental sampling includes individuals encountered who are considered suitable information sources. The combined approach was chosen to ensure inclusion of key institutional informants (purposive) while also capturing perspectives from community members and academics who happened to be available (accidental), providing a more comprehensive understanding of program implementation. Nine informants participated:

Table 1. Research Informants

| No | Name                                  | Position                                             | Data Needed                                                                    | Sampling   |
|----|---------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------|------------|
| 1  | Munir, S.Sos.,<br>M.S.M               | Head of Department                                   | Program direction, objectives, monitoring,<br>internal coordination            | Purposive  |
| 2  | Fakhrurrazi, S.T.,<br>MSM             | Database Administrator                               | Target service data, data collection system,<br>program information management | Purposive  |
| 3  | Muliya Fika, S.STP<br>MSM             | Program Implementer                                  | Implementation procedures, implementer<br>attitudes, technical constraints     | Purposive  |
| 4  | Mustazir Ramli,<br>S.IP., <u>M.Si</u> | Muara Satu District Head                             | Sub-district and department coordination                                       | Purposive  |
| 5  | Yusreida, S.STP                       | Government Affairs Head,<br>Banda Sakti Sub-district | Sub-district and department coordination                                       | Purposive  |
| 6  | Dr. Ferizaldi,<br>S.E., <u>M.Si</u>   | Academician                                          | Objective policy implementation perspective                                    | Accidental |
| 7  | Andri Purwanto,<br>S.H                | Community Leader                                     | Community program reception                                                    | Accidental |
| 8  | Yuli Yanti                            | Parent of Person with<br>Disability                  | Service experience, access ease, service<br>obstacles                          | Purposive  |
| 9  | Zulkifli                              | Community Member                                     | Service satisfaction and program benefits                                      | Accidental |

Justification for Limited Direct Informants with Disabilities: The selection of a parent of a person with disabilities rather than a person with disabilities as a direct informant reflects both practical and methodological considerations. Practically, some persons with disabilities face communication barriers that may limit their ability to participate in in-depth interviews. Additionally, in many cases, families of persons with disabilities (particularly parents) serve as primary caregivers managing administrative affairs, making them key informants regarding service access experiences. This approach is consistent with previous research on service access for persons with disabilities (Gho, 2024; Alfianah, 2021). To address this limitation, the research complemented parental perspectives with data from program implementers, village officials, and advocacy organizations, enabling triangulation of findings regarding service accessibility for persons with disabilities.

### 3.3 Data Sources and Collection Techniques

Data sources included primary data obtained directly from informants through interviews and observations, and secondary data from documents, reports, and official publications. Data collection employed:

#### 1) Observation

Direct observation of service implementation at the Department office and field visits, documenting actual conditions without direct involvement.

#### 2) Interview

Structured and unstructured interviews with selected informants to obtain in-depth information regarding program implementation.

#### 3) Documentation

Collection of photographs, videos, and official records related to the research object.

### 3.4 Data Validity

Data validity was ensured through triangulation techniques:

#### 1) Source Triangulation

Cross-checking information from different informants (government officials, sub-district officials, community members, academicians, advocacy organizations) to verify consistency and identify potential biases. This was particularly important given the conflicting accounts of coordination between department and sub-district officials.

#### 2) Technique Triangulation

Cross-checking data obtained through different collection methods (observation, interviews, documentation) to ensure consistency across data sources.

### 3.5 Data Analysis

Data analysis followed Robert K. Yin's case study framework (Yin, 2018), encompassing three stages:

- 1) **Compiling**  
Systematic collection, organization, and arrangement of all research data. Data were organized and grouped according to research focus areas (communication, resources, disposition, and bureaucratic structure).
- 2) **Interpreting**  
Meaning-making by connecting data to the theoretical framework. Findings were interpreted based on Edward III's implementation theory, analyzing factors influencing program implementation. Pattern matching was used to compare field patterns with theoretical predictions, while explanation building helped construct in-depth explanations of findings.
- 3) **Concluding**  
Objective conclusion drawing based on findings to answer research questions regarding program implementation and obstacles encountered.

## 4 | RESULTS AND DISCUSSION

### 4.1 Results

#### 4.1.1 Research Setting

Lhokseumawe City, located in Aceh Province, has a strategic position on the eastern route of Sumatra Island. The city comprises four sub-districts (Banda Sakti, Muara Dua, Blang Mangat, and Muara Satu) with 68 villages. The total population in 2024 was 198,705, with 622 persons with disabilities recorded. The Department of Population and Civil Registration, located on Jl. Tengku Chik Ditunong, serves as the primary institution responsible for civil registration services, with a vision of "Achieving Excellent Service in Realizing Orderly Population Administration and Civil Registration."

#### 4.1.2 Mobile Service Program Implementation Analysis

Analysis using George Edward III's implementation framework reveals the following:

- 1) **Communication**  
The research revealed that communication has been implemented through coordination with sub-district offices and the utilization of social media platforms such as TikTok and Instagram for program socialization. The Head of Department stated that coordination with sub-district heads has been effective, contributing to smooth program implementation and increased document ownership. However, several communication challenges persist. The program implementer noted that socialization is not conducted directly in villages, relying primarily on social media without direct involvement from Disdukcapil at the village level, which creates information gaps, particularly for community members who do not actively use social media. The Government Affairs Head of Banda Sakti Sub-district mentioned that while the mobile service program for persons with disabilities exists, the sub-district is not directly involved, and coordination remains limited, differing from general KTP-el services where sub-district involvement is active. This inconsistency suggests varied communication patterns across service types, potentially creating inequalities in program reach. Community perspectives reinforce these findings, as a community leader noted that information often does not reach families of persons with disabilities, expressing that the involvement of community leaders would enhance communication effectiveness. A parent of a person with disabilities stated they had no prior knowledge of the program due to the absence of village-level socialization, leading to direct visits to the department office, while a community member confirmed first learning about the program during the interview, indicating significant information gaps. The disparity between policy intentions and community awareness suggests significant gaps in communication strategies, as reliance on social media alone is insufficient for reaching vulnerable populations with limited digital access or literacy. The inconsistent coordination with sub-districts creates information fragmentation, where different levels of government operate without a shared understanding of program processes. These findings align with Edward III's emphasis on communication as critical to implementation success, indicating that information must be clear, accurate, and reach all target groups to enable effective participation. Ineffective socialization leads to low awareness, limited participation, and reduced program utilization, highlighting that communication effectiveness requires not just transmission but also reception by all target groups, particularly vulnerable populations. Furthermore, these findings echo Gho's (2024) research in Aceh Tengah, which found that socialization for disability services faced significant challenges, and Nur (2022) identified that Banda Aceh's mobile program required improved communication strategies to reach all target groups. The reliance on social media without direct community engagement reflects a common challenge in mobile service programs, where digital platforms alone cannot ensure equitable information access. In terms of good governance assessment, communication in program implementation has been partially implemented but has not achieved optimal effectiveness, as socialization has not

reached all target groups equitably, direct community engagement remains limited, and sub-district involvement is inconsistent. Strengthening communication requires expanded outreach through village-level engagement, collaboration with community leaders, and accessible information formats for persons with disabilities and their families.

## 2) Resources

The findings reveal that, regarding human resources, the Head of Department indicated that personnel availability is sufficient without significant shortages, and the Database Administrator confirmed that existing staff adequately manage program data. However, the program implementer highlighted significant workload challenges, noting concurrent responsibilities as both the Head of the Electronic ID Division and program implementer, which creates difficulties in time management. This dual role suggests uneven task distribution and limited specialized personnel for field implementation. The Muara Satu District Head pointed out that Disdukcapil likely faces personnel limitations that prevent equitable program reach across all areas, while community leaders indicated that limited human resources hinder comprehensive coverage of all persons with disabilities. These findings imply that although administrative personnel may seem adequate, the capacity for field implementation remains constrained, adversely affecting service reach and consistency. Facility constraints also emerged as significant challenges. The program implementer reported using personal vehicles for field visits due to a lack of operational vehicles, covering fuel and consumption costs personally when budget allocations are insufficient, indicating inadequate institutional support for field operations that could affect implementer motivation and program sustainability. Additionally, the Database Administrator identified unstable internet connectivity as a frequent constraint, particularly during data recording in areas distant from the city center, leading to delays, interruptions in data processing, and reduced efficiency. Combined with limited operational vehicles, this uneven coverage particularly affects persons with disabilities in hard-to-access locations. Budget limitations further constrain both facility provision and field operations, impacting vehicle availability, equipment maintenance, and operational expenses. This reliance on individual implementer resources is unsustainable and inequitable. The interpretation of these resource constraints reveals a fundamental gap between policy commitment and resource allocation. While policy documents express intentions for inclusive service, inadequate resource provision prevents full implementation. The reliance on personal resources for field operations is particularly concerning, suggesting systematic underinvestment in program infrastructure. The theoretical connection to Edward III's framework emphasizes that both human and material resources are essential for successful implementation; insufficient resources hinder optimal implementation, regardless of the quality of policy design. The Indonesian context illustrates how resource constraints affect service quality and reach, as noted in previous research by Nur (2022) and Alfianah (2021). Comparative analysis with previous research shows that Ilhamsyah (2025) in Bandar Lampung similarly found that technical constraints, including unstable internet connectivity, affected the effectiveness of mobile services, while Destiyaningrum (2022) identified internet connectivity as a challenge in Purbalingga. The reliance on personal vehicles aligns with findings from Gho (2024), where operational vehicles were limited. In terms of good governance assessment, the program resources appear mixed: personnel availability seems adequate for administrative tasks but insufficient for comprehensive field coverage. Facilities and infrastructure, including recording equipment, operational vehicles, and internet connectivity, remain inadequate, negatively impacting service quality and reach. Addressing these resource limitations requires additional personnel allocation, improved facilities, increased budget support, and systematic maintenance of existing equipment.

## 3) Disposition

The research revealed a positive implementer disposition, with the Head of Department confirming that the program specifically targets vulnerable groups, including persons with disabilities, through direct home visits, demonstrating a commitment to inclusive service delivery. Despite resource constraints, the program implementer reported a strong commitment to field visits, continuing to provide recording services directly to persons with disabilities, which reflects responsibility and dedication to ensuring continued service delivery. The Database Administrator also expressed commitment to program implementation, despite facing incomplete data from village officials, and conducted additional field verification to ensure that unregistered persons with disabilities receive services. Sub-district officials demonstrated their commitment to supporting the program, with the Muara Satu District Head stating readiness to assist despite the absence of formal socialization, emphasizing the need for more intensive coordination to help persons with disabilities obtain ID cards. Similarly, the Banda Sakti Government Affairs Head expressed commitment, particularly through community socialization. Community perspectives underscored the importance of this implementer commitment, as a parent of a person with disabilities expressed hope for full government commitment to program implementation, noting that direct home services would significantly aid families with mobility limitations. An academician emphasized that commitment should also be viewed through the lens of policy sustainability, highlighting the necessity for village and sub-district officials to maintain consistent attitudes in data updating and technology utilization. The generally positive implementer disposition reflects individual dedication that compensates for systemic resource constraints; however, this commitment remains somewhat dependent on individual initiative rather than systematic support, which could affect program consistency and sustainability. The willingness of

implementers to use personal resources indicates commitment but also suggests inadequate institutional support. Edward III identifies disposition as crucial for implementation success, noting that high implementer commitment encourages consistent and dedicated implementation despite constraints. Nevertheless, commitment without systematic support may not be sustainable. The findings demonstrate that while a positive disposition can partially compensate for resource limitations, it cannot fully overcome structural barriers. These findings align with Gho's (2024) research, where implementers showed commitment despite challenges, and with Alfianah (2021), who found that implementer dedication contributed to the effectiveness of Cilegon's program. However, Nur (2022) noted that such commitment must be supported by adequate resources for sustainable implementation. In terms of good governance assessment, the implementer disposition is generally positive, showcasing commitment, initiative, and responsibility despite field challenges. Nevertheless, this commitment is not yet fully supported by optimal inter-agency coordination and systematic support structures. Strengthening this disposition requires enhanced coordination mechanisms, recognition of implementer efforts, and systematic support for ongoing commitment.

#### 4) Bureaucratic Structure

The research indicates that some coordination mechanisms exist, with the Head of Department confirming that coordination between the department and sub-district heads has been established, contributing to effective implementation. The Database Administrator reported successful coordination with all four sub-districts (Muara Dua, Muara Satu, Blang Mangat, and Banda Sakti) without significant obstacles. However, significant coordination gaps persist. The Government Affairs Head of Banda Sakti Sub-district noted that program services had previously been implemented at the sub-district office but are no longer operational due to discontinued coordination. Similarly, the Muara Satu District Head reported a lack of coordination from Disdukcapil regarding program implementation during his tenure. The interpretation of this coordination discrepancy reveals conflicting accounts between department officials, who report coordination, and sub-district officials, who indicate its absence. This discrepancy suggests several possibilities: (1) coordination may occur only with certain sub-districts while others are excluded; (2) communication regarding coordination may differ from actual implementation; or (3) coordination may be inconsistent and not sustained. Regardless of the specific explanation, these conflicting accounts highlight fundamental communication and coordination failures within the bureaucratic structure. The theoretical connection to Edward III's framework emphasizes that bureaucratic fragmentation can impede policy implementation. Inconsistent coordination undermines program effectiveness, as sub-districts and villages cannot effectively support service delivery without systematic engagement. The coordination discrepancy identified in this study exemplifies bureaucratic fragmentation, where different organizational units operate without a shared understanding of implementation processes, directly affecting the program's ability to identify and reach all persons with disabilities. This finding echoes challenges identified by Gho (2024), where limitations in inter-agency coordination affected program effectiveness, and Nur (2022), who noted coordination gaps between department and sub-district levels in Banda Aceh. The discrepancy between department and sub-district accounts represents a particularly significant finding, underscoring the need for documented coordination mechanisms. In terms of good governance assessment, the bureaucratic structure shows mixed implementation. While coordination mechanisms exist with some sub-districts, the coordination is inconsistent and not sustained, characterized by conflicting accounts of engagement. Sub-districts are not systematically involved in program planning or implementation for persons with disabilities. Therefore, Standard Operating Procedures require clarification, task division needs strengthening, and coordination must involve systematic, documented mechanisms to ensure consistent inter-agency collaboration.

The research identified four categories of obstacles affecting program implementation. First, there is limited data on target beneficiaries, as data on persons with disabilities remains incomplete, with village officials often providing insufficient information. This results in some persons with disabilities not being identified or served, creating planning challenges for implementers who lack accurate information on target numbers and locations, which ultimately reduces program reach. The reliance on general population data without disaggregated identification of those needing services creates significant barriers to implementation. Second, ineffective socialization and coordination have hindered the program, as socialization efforts have not reached all target groups, leaving many families of persons with disabilities unaware of the program. Inconsistent inter-agency coordination between Disdukcapil, sub-districts, and villages affects community awareness and service coverage, while the absence of systematic, sustained engagement limits community knowledge of available services. The discrepancy in coordination between department and sub-district officials exemplifies this obstacle. Third, limited human resources pose a challenge, as personnel capacity and distribution are constrained, with a shortage of specialized staff for program implementation. Heavy workloads due to dual responsibilities negatively affect field service quality and consistency, and the lack of dedicated personnel for mobile services limits service frequency and reach, preventing comprehensive coverage across all four sub-districts. Finally, insufficient supporting infrastructure presents significant challenges, with inadequate facilities including limited recording equipment (only one portable unit), unreliable internet connectivity, and a lack of operational vehicles constraining field operations.



## 4.2 Discussion

The implementation of the Mobile Service Program for the issuance of Electronic Identity Cards (KTP-el) for persons with disabilities in Lhokseumawe City has revealed significant challenges and opportunities. Despite the government's commitment to inclusive public services, the actual delivery of these services often falls short of expectations. As highlighted by Destiyaningrum (2022), effective public service delivery must be accessible and responsive to the needs of all citizens, particularly vulnerable groups. The findings indicate that while the program aims to facilitate access for persons with disabilities, barriers such as inadequate communication strategies and insufficient resources hinder its effectiveness. For instance, the reliance on social media for program promotion, as noted by Nur (2022), fails to reach those who are not digitally connected, thus creating gaps in awareness among the target population. Furthermore, the limited availability of operational resources, including personnel and vehicles, echoes the challenges identified by Alfianah (2021) in similar programs, where resource constraints significantly impact service delivery. This study underscores the importance of addressing these barriers through enhanced inter-agency coordination and community engagement, aligning with the recommendations of Gh0 (2024), who emphasized the need for systematic approaches to ensure that public services meet the needs of all citizens, especially those with disabilities.

## 5 | CONCLUSIONS AND FUTURE WORK

This study examined the implementation of the Mobile Service Program for Electronic Identity Card issuance for persons with disabilities at the Department of Population and Civil Registration of Lhokseumawe City, utilizing George Edward III's policy implementation framework. The research reveals that while the program implementation has been initiated, it has not yet achieved optimal performance across the four dimensions. Communication has been partially implemented through inter-agency coordination and social media utilization; however, socialization has not reached all target groups, direct community engagement remains limited, and sub-district involvement is inconsistent, resulting in limited community awareness and reduced program utilization. Resources show mixed adequacy, with personnel availability appearing sufficient for administrative functions but inadequate for comprehensive field coverage. Facilities, including recording equipment, operational vehicles, and internet connectivity, remain inadequate, affecting service quality and reach, while budget limitations constrain facility provision and field operations. Disposition demonstrates generally positive implementer commitment, with dedication and initiative evident despite challenges, but this commitment is not yet fully supported by optimal coordination and systematic support structures, potentially affecting program consistency and sustainability. The bureaucratic structure shows inconsistent coordination; while mechanisms exist with some sub-districts, coordination is not sustained and is characterized by conflicting engagement accounts, indicating that sub-districts are not systematically involved in program planning or implementation, which affects service reach and sustainability. The significant discrepancy between department and sub-district accounts of coordination represents a critical implementation failure. Four obstacle categories were identified: limited data on target beneficiaries, ineffective socialization and coordination, limited human resources, and insufficient supporting infrastructure. These constraints lead to uneven service coverage, preventing the full realization of inclusive service objectives, as evidenced by the gap between 622 recorded persons with disabilities and only 10 program beneficiaries, suggesting significant unmet needs requiring targeted intervention. Based on these findings, several recommendations are proposed: for the Department of Population and Civil Registration, enhance communication and socialization through comprehensive, accessible strategies; strengthen inter-agency coordination with systematic mechanisms; improve resources by securing additional personnel and facilities; strengthen data management through collaboration with village officials; and develop clear Standard Operating Procedures (SOPs) for effective implementation. For local government, it is crucial to provide budget support for necessary facilities and equipment, strengthen inter-sectoral coordination, and develop inclusive service policies. For communities, actively seeking information about available services, supporting program implementation, and providing feedback are essential. Future research should focus on examining program effectiveness across multiple cities for comparative analysis, conducting longitudinal studies to track implementation improvements, exploring factors influencing implementer commitment, and investigating the perspectives of persons with disabilities directly using accessible research methods to gain a comprehensive understanding of service accessibility barriers. Comparative research on coordination mechanisms between different institutional levels could also identify effective collaboration models for disability-inclusive services.

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