



RESEARCH ARTICLE

## Analysis of Smart City Policy Implementation on Informal Sector Workers in Makassar City

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ARTICLE INFO	ABSTRACT
Received: Sep 16, 2024 Accepted: Nov 22, 2024	Smart city implementation is an infrastructure development innovation that integrates information and communication technology and internet of things technology to manage cities to increase service efficiency.
<b>Keywords</b> Smart City Informal Sector Workers Telemedicine and Home Care	Analyzing the impact of smart city policy implementation on informal sector workers in Makassar City.  This research method uses a quantitative method with observational analytical techniques with a cross-sectional design. The population of traders in the Senggol Makassar market, with a sample of 97 respondents. The theory used is a modification of the implementation theory of Nakamura and Smallwood.
<b>*Corresponding Author:</b> afiiifahfifaas@gmail.com	The results of this study indicate that there is an influence on the variables of goal achievement results, target group satisfaction, maintenance systems, as well as telemedicine and home care on the implementation of smart cities, but the variables of goal achievement and results are the most dominant with the most influence at 74%.  The recommendation for the Makassar city government is to be more active in providing information and socializing the smart city program, and to be able to maintain the digital service maintenance system so that it can continue to be sustainable in improving infrastructure.

## INTRODUCTION

Makassar City is one of the city governments in the South Sulawesi Province which was formed based on Law Number 29 of 1959 concerning the formation of level II regions in Sulawesi, which is stated in the State Gazette of the Republic of Indonesia 1959 Number 74 and the supplement to the State Gazette of the Republic of Indonesia Number 1822. Based on (Law Number 23 of 2014 concerning Regional Government) that the central government gives broad authority to regions to independently regulate and manage government affairs and the interests of their communities, starting from planning, implementation, supervision to the evaluation stage (1).

Based on data from the Central Statistics Agency of Makassar City in 2023, the population of Makassar City was 1,474,393 people and is estimated to continue to increase to 6.66% in 2035. Along with the development of the times, the world has experienced changes, where it is now entering the era of the

industrial revolution 4.0 where information technology is the basis of human life, everything becomes borderless, unlimited data and is influenced by the development of the internet and digital technology which is very massive (2).

Smart city is a vision of urban development to integrate information and communication technology (ICT) and Internet of things (IoT) technologies in a secure way to manage city assets. These assets include local government information systems, schools, libraries, transportation systems, hospitals, power plants, water supply networks, waste management, law enforcement, and other public services. Smart city is aimed at using informatics and urban technology to improve the efficiency of services (3). Smart city development generally includes six dimensions, namely smart government, smart economy, smart society, smart branding, smart mobility, smart environment, and smart living (4).

The smart city development program in Makassar combines two major concepts, namely the smart city concept and the local wisdom concept. This is because the government does not want to forget the local wisdom that lives in the Makassar community and is deeply rooted. *Sombere* is a local wisdom that means friendliness, kindness, and concern for others. With the *sombere* value, the government hopes that the relationship between the government as a service provider and policy maker with the community as service recipients and policy recipients can run side by side and create good harmony, especially in realizing the development of Makassar's smart city into a world-class city (5).

Digital transformation of health is one of the most important aspects in the evolution of the healthcare industry today. The benefits offered by digital transformation include better access, better care, efficiency, and collaboration between healthcare teams as a step to anticipate the impact of future healthcare services (6). In a smart city, health is included in the Smart Living dimension which guarantees the adequacy of people's standard of living based on three elements, namely the adequacy of lifestyle, the adequacy of health quality, and the adequacy of transportation modes to support mobility (7).

Research in Africa conducted with countries that have adopted mHealth, eHealth, and other electronic health records shows that one of the digital transformations of health, namely telemedicine, can increase access to health services and improve the quality and outcomes of services. A study in India using telehealth also shows that digital technology can facilitate the diagnosis and treatment of diseases (8). The Home Care *Dottoro'ta* and Telemedicine programs were then born as health services for Makassar City residents which were launched in 2015 based on Makassar Mayor Regulation Number 6 of 2016, an innovation program in health services from the Makassar City Government. This program provides 48 Home Care cars complete with medical equipment placed in 46 Public Health Centers (PUSKESMAS) and health offices in Makassar City. This program also utilizes Artificial Intelligence which can help and facilitate the service process, as well as Big Data which is used to collect public information from every transaction that occurs (9).

Smart City Health Innovation is designed to cover all levels of society and all sectors, including informal sector workers. Based on general studies, the number of informal sector workers in a city can reach 30% to 70% of the total workforce population (10). Traders are one of the informal sector workers found in traditional markets. Where traders make sales or provide services to consumers or buyers with the motivation of workers is to earn enough income to simply survive (11). *Pasar senggol Cendrawasih* is a traditional market in Makassar City which initially had 60 active traders, but has increased day by day due to the emergence of street vendors who have begun to settle down. This market is also a market that is close to the Mamajang Health Center, so traders often use the health services there.

Mamajang Health Center is one of the health services with the Primary Health Service Integration (ILP) standard which aims to overcome public health problems and create a healthy society by improving the standardization of health services, institutions and organizational structures, as well as massive digitalization in the service system.(12). In addition, Mamajang Health Center also has telemedicine services and dottorota home care services, both of which are smart city innovations. However, there has been no research and measuring tools to determine whether these innovation services have been utilized properly or not by the community, especially senggol market traders. Based on the data and facts that have been described, the aim is to analyze the implementation of smart city policies on informal sector workers in Makassar City.

## PARTICIPANTS AND METHODS

This study is a study that uses quantitative methods and uses observational analytical techniques with a cross-sectional design. This study was conducted at the Senggol Cendrawasih Market, Makassar City in September-October 2024. Determination of informants in this study using the Accidental sampling technique. Data collection using instruments in this case questionnaires with observation, interviews and documentation. Then the data is processed using the SPSS and Stata applications with univariate, bivariate, and multivariate model analysis, then the data is presented in the form of tables and narratives for interpretation and discussion of the research results. In this study, researchers will pay attention to the principles of research ethics, to minimize the possibility of risks that can harm informants, so that informants do not refuse and are willing to participate.

## FINDINGS

### General Characteristics of Respondents

The characteristics of respondents include age group, gender, and last education of respondents which can be seen in the following table.

**Table 1: Distribution of Respondents Based on Age, Gender, and Education of Informal Sector Workers at Senggol Cendrawasih Market, Makassar City in 2024**

Characteristics	Frequency (n=97)	Percent (%)
Age Group		
21-30 years	27	27.8
31-40 years	46	47.4
41-50 years	24	24.7
Gender		
Man	34	35.1
Woman	63	64.9
Last education		
Didn't Finish Elementary School	12	12.4
Graduated from elementary school/equivalent	12	12.4
Graduated from junior high school/equivalent	27	27.8
Graduated from high school/vocational school/equivalent	37	38.1
Graduated from College	9	9.3
Total	97	100.0

Source: Primary Data, 2024

The results of the analysis of respondent characteristics in Table 1 show that the distribution of respondent characteristics based on the largest age group is the 31-40 year age group with 46 respondents (47.4%). While the distribution of respondent characteristics with the least is the 41-50

year age group with 24 respondents (24.7%). The distribution of respondent characteristics based on gender shows that 63 respondents (64.9%) are female and 34 respondents (35.1%) are male. Meanwhile, the highest frequency based on the last level of education taken is graduating from high school/vocational school/equivalent with 37 respondents (38.1%) and the lowest frequency is graduating from college with 9 respondents (9.3%).

### Description of the variables studied

The distribution of respondents based on research variables can be seen in the following table.

**Table 2: Distribution of Respondents Based on the Variable of Smart City Policy Implementation on Informal Sector Workers at Senggol Cendrawasih Market, Makassar City in 2024**

Variables	Frequency (n)	Percent (%)
Smart City Policy Implementation		
Enough	29	29.9
Not enough	68	70.1
Achievement of Goals and Results		
Good	35	36.1
Not good	62	63.9
Target Group Satisfaction		
Good	58	59.8
Not good	39	40.2
Maintenance System		
Good	30	39.2
Not good	59	60.8
Telemedicine and Home Care		
Enough	36	37.1
Not enough	61	62.9
Total	97	100.0

Source: Primary Data, 2024

Based on Table 2, it can be seen that from a total of 97 respondents, as many as 68 respondents (70.1%) respondents stated that the implementation of the smart city policy was still lacking and as many as 29 respondents (29.9%) stated that it was sufficient. While as many as 62 respondents (63.9%) respondents stated that it was not good in achieving goals and results and as many as 35 respondents (36.1%) stated that it was good. As many as 58 respondents (59.8%) respondents felt that it was good and as many as 39 respondents (40.2%) still felt that it was not good. Then as many as 59 respondents (60.8%) respondents stated that it was not good and as many as 30 respondents (39.2%) stated that the maintenance system was good. And as many as 61 respondents (62.9%) respondents stated that the provision of telemedicine and home care was sufficient and as many as 36 respondents (37.1%) stated that it was still lacking.

### Bivariate Analysis

The influence of variables on the implementation of smart city policies can be seen in the following table.

**Table 3: The Influence of Goal Achievement and Results on the Implementation of Smart City Policies at Senggol Cendrawasih Market, Makassar City in 2024**

Variables	Smart City Policy Implementation				Total		Sig.
	Good		Not good		n	%	
	n	%	n	%	n	%	
Achievement of Goals and Results							
Good	29	82.86	6	17.14	35	36.08	0.000
Not good	0	0.00	62	100.00	62	63.92	
Target Group Satisfaction							
Good	29	50.00	29	50.00	58	59.79	0.000
Not good	0	0.00	39	100.00	39	40.21	
Maintenance System							
Good	29	76.32	9	23.68	38	39.18	0.000
Not good	0	0.00	59	100.00	59	60.82	
Telemedicine and Home Care							
Enough	29	80.56	7	19.44	36	37.11	0.000
Not enough	0	0.00	61	100.00	61	62.89	
Total	29	29.90	68	70.10	97	100.0	

Source: Primary Data, 2024

Table 3 shows that of the 29 respondents who stated that they were sufficient in implementing the smart city policy, 29 respondents (82.86%) were...statethat the achievement of goals and results is good Meanwhile, from 68 respondents who are lacking in the implementation of smart city policies, there are 62 respondents (100.00%) who stated that the achievement of goals and results is still not good, while those who stated that the achievement of goals and results is good in the implementation of smart city policies are 6 respondents (17.14%). The results of the Chi square statistical test obtained a p value = 0.000, so H0 is rejected. This shows that there is an influence on the achievement of goals and results in the implementation of smart city policies.

Then, from 29 respondents who stated that they were sufficient in implementing the smart city policy, 29 respondents (50.00%) felt that the satisfaction of the target group was good and also 29 respondents (50.00%) stated that it was still lacking. While from 68 respondents who were lacking in implementing the smart city policy, felt that the satisfaction of the target group was still lacking, this was seen from 39 respondents (100.00%). The results of the Chi square statistical test obtained a value of p = 0.000, so H0 was rejected. This shows that there is an influence of target group satisfaction in implementing the smart city policy. As for the 29 respondents who stated that they were sufficient in implementing the smart city policy, among them 29 respondents (76.32%) stated that the maintenance system was running well and 9 respondents (23.68%) stated that it was still lacking. While 59 respondents (100.00%) of the 68 respondents who were lacking in implementing the smart city policy, stated that the maintenance system was still lacking. The results of the Chi square statistical test obtained a value of p = 0.000, so H0 was rejected. This shows that there is an influence of the maintenance system in the implementation of smart city policies.

Furthermore, of the 29 respondents who stated that they were sufficient in implementing the smart city policy, 29 respondents (80.56%) stated that the existence of telemedicine and home care as smart city innovations was sufficient and 7 respondents (19.44%) stated that it was still lacking. Meanwhile, 61 respondents (100.00%) of the 68 respondents who were lacking in implementing the smart city policy stated that the existence of telemedicine and home care was still lacking. The results

of the Chi square statistical test obtained a p value = 0.000, so H0 was rejected. This shows that there is an influence of the maintenance system in the implementation of the smart city policy.

### Multivariate Analysis

The results of the multivariate analysis of the implementation of smart city policies can be seen in the following table.

**Table 4: Analysis of Smart City Policy Implementation on Informal Sector Workers in Makassar City**

Variables	Sig.	Exp(B)	CI 95%
Achievement of Goals and Results	0.000	5.833333	2.815791-12.08463
Maintenance System	0.000	4.222222	2.386021-7.471501
Telemedicine and Home Care	0.000	5.142857	2.645138-9.999091

Source: Primary Data, 2024

Based on Table 4 shows that the variables of goal achievement and results have the most influence on the implementation of smart city policies on informal sector workers in Makassar City with Exp(B) = 5.833333; CI 95% (2.815791-12.08463). In accordance with the results of the study on multivariate analysis, the achievement of goals and results, maintenance systems, and telemedicine and home care are the most significant factors in the implementation of smart city policies. So the regression equation is:

$$y = \text{const} + \text{coef}(\text{goal achievement and results}) + \text{coef}(\text{maintenance system}) + \text{coef}(\text{telemedicine home care})$$

$$y = .0697131 + .3304223 + .2702157 + .4192449$$

$$y = 1.0677027$$

After to obtain multivariate results, the next step is to calculate the subject's probability using the following equation:

$$P = 1 / (1 + \exp(-y))$$

$$P = 1 / (1 + \exp(-1.0677027))$$

$$P = .74415979$$

Results calculations shows that the lack of achievement of goals and results, poor maintenance systems, and telemedicine and home care have a 74% chance of influencing the poor implementation of smart cities.

## DISCUSSION

### The Influence of Goal Achievement and Results on the Implementation of Smart City Policy Implementation on Informal Sector Workers in Makassar City

Achieving the target results is an absolute must for the success of an implementation that has a goal by using planning, directing, organizing and controlling resources to achieve targets effectively and efficiently. (Akbar et al., 2023). The results of this study show that the achievement of the objectives greatly affects the implementation of the smart city policy, where respondents feel that the program is still lacking. This is because many people are still unaware of the smart city program, so that the concept that has been planned by the government has not been conveyed properly by the community, as the utilization of the program has not been maximized.

The findings are in line with research Saptadi et al. (2019) that there are still many people who do not know what is actually meant by smart city and how the concept of its implementation is, so that the

existence of the program is seen as not having a clear policy basis, it is feared that it will not be realized optimally because there is an unsustainable process in formulating government programs for the community. Especially not maximally utilizing the green technology approach (13).

Although informal sector workers in Senggol Cedrawasih Market do not know more clearly about the implementation of smart city, some of them know about the existence of a digitalized complaint service (Call Center) which is one of the strategic smart city programs in Makassar City, they know this from social media where they only know the existence of the service but have never used it. So the role of the government in disseminating or socializing the complaint service is not evenly distributed, in contrast to research conducted by Wahyudi et al., (2022) stated that with the existence of a technology-based public complaint service system, the City of Bandung can monitor the condition of the city in real time and is able to solve public problems effectively and efficiently by coordinating at the local government level in disseminating information on these services (14).

In addition, based on the bivariate results, it was found that the achievement of goals and results influenced the implementation of smart cities on informal sector workers in Pasar Senggol Cendrawasih ( $p < 0.000$ ). The multivariate results found that the achievement of goals and results can be a risk factor with the highest OR = 5.833333 (CI 95% = 2.815791-12.08463;  $p < 0.000$ ), where informal sector workers who stated that the achievement of goals and results was still not good, 5.8 times more influential on the implementation of smart city policies. These results are in line with Nurdiassa et al., (2021) that the level of success of implementing smart city policies can be seen from the influence of achieving the goals of a program in accordance with the previously designed vision and mission (15).

### **The Influence of Target Group Satisfaction on the Implementation of Smart City Policy Implementation on Informal Sector Workers in Makassar City**

Target group satisfaction is an aspect that examines the direct impact of the program being implemented. This aspect is very important for the participation and response of community members in implementing and managing the results of the program. Without satisfaction from the target group of the policy, the program is considered unsuccessful (16). This study shows that the satisfaction of the target group is good in the implementation of the smart city policy at Pasar Senggol Cendrawasih, Makassar City, although it is still not optimal because the community who utilizes smart city services is still small. This is indicated by the statements of several respondents who are aware of the smart city program that digitalization services such as queues at the Health Center make it easier for traders to get health services, considering that traders at Pasar Senggol Cendrawasih do not have the right time to directly take a queue at the Health Center. However, the use of these services has not been maximized because sometimes the feedback or response from the Health Center is slow, the application is not supportive, and the knowledge of traders is still lacking.

The results of this study are the same as the research Beteng et al., (2022) in Manado City, which stated that the smart city policy was not running well because some groups in society understood that it existed, but there were still many who did not know and did not know clearly about the Manado Smart policy, especially traders at the Pinasungkulan traditional market (17). Then it was clarified by research Ramadhan et al., (2019) which states that application-based smart cities to accelerate public services are running well, but in terms of implementation of the smart city program, it has not run well due to several problems such as slow service handling, the absence of a legal basis governing the application, and the lack of public understanding of the smart city service program (18).

In addition, there is no measuring tool for target group satisfaction in the smart city program, making it difficult to know the extent of the success of the implementation of the policy. This is reinforced by the statement Maluwu et al., (2021) in his research that the smart city program has generally been

running well but there are still some aspects that are not optimal, such as public satisfaction which has never been measured and is not yet available. Based on the results of the bivariate analysis, it was found that target group satisfaction has an effect on the implementation of smart city policies on informal sector workers in Pasar Senggol Makassar ( $p < 0.000$ ). According to The Last Supper (2024), this level of citizen satisfaction is an indicator of the success of implementing government programs.

### **The Influence of Maintenance System on the Implementation of Smart City Policy Implementation on Informal Sector Workers in Makassar City**

The maintenance system is an aspect that looks at the stability and sustainability of managing a program to provide maximum results. Without this aspect, the program becomes unmanaged so that the program can stop and the key to the maintenance system is the government's consistency in stable and sustainable maintenance so that the program continues to be implemented (16). The findings of this study indicate that the maintenance system is still lacking in the implementation of smart city policies for Senggol Market traders, this is indicated by the results of interviews with respondents who stated that although in the past year there have been many improvements in the quality of life in terms of education, health, or other facilities, it still has not been running inclusively.

The government only coordinates with fellow stakeholders or only involves certain communities without looking at small traders in traditional markets such as Pasar Senggol Cendrawasih, so that information related to the smart city program is not conveyed optimally to all levels of society. Not only that, respondents also added that several smart city service applications were not updated, so most people chose to do manual services, so the application was the same as not being used. The above is in line with research Wahyudi et al., (2022) that in the implementation of smart cities there are still obstacles in several aspects, such as in terms of uneven communication, lack of supporting resources, and service maintenance systems (14). Added by Affandi et al., (2023) that the existence of smart city service applications that are not updated will be the main inhibiting factor due to the existence of service applications that should be increasingly used day by day but instead appear to be in a coma or are no longer functioning (21).

Based on the bivariate results, it was found that the maintenance system had an effect on the implementation of smart city on informal sector workers at Senggol Cendrawasih Market ( $p < 0.000$ ). The multivariate results found that the maintenance system could be an influencing factor with the highest OR = 4.222222 (CI 95% = 2.386021-7.471501;  $p < 0.000$ ), where traders who stated that the maintenance system was still not good, were 4.2 times more influential on the implementation of smart city policies. These results are in accordance with the theory of Nakamura and Smallwood (1980:146) that policy implementation can be declared successful if there is program sustainability by continuing to improve the maintenance system so that it continues to exist (22).

### **The Influence of Telemedicine and Home Care on the Implementation of Smart City Policy Implementation on Informal Sector Workers in Makassar City**

Telemedicine and Home Care are telehealth programs from smart cities that are connected to the 112 complaint service (Call Center). Telemedicine is the transfer of electronic medical data from one location to another or remote health services, while home care is a continuous and comprehensive health service provided to individuals and families in their homes that aims to improve, maintain, or maximize the level of independence and minimize the effects of disease (23).

Based on the results of this study, telemedicine and home care are still lacking in the implementation of smart city policies because there are still many respondents who have never used these services, so respondents do not know clearly what facilities are provided in these services. But it is good because respondents often hear about these services either from direct health service socialization or from social media. According to Araminta & Sophianingrum (2023), this is because the majority of telemedicine users come from the middle and upper class economies, followed by the lower class



economy. This proves that telemedicine has reached people up to the middle class economy, but it is still not enough to reach people from the lower class economy (24).

However, respondents added that this telehealth innovation is very good and shows interest because the use of this service is free or free of charge, so respondents have an interest in using the service if something happens in the future. Telemedicine and home care themselves have often been used in collaboration between sub-districts and health centers, it's just that information with the term is still foreign to traders at Pasar Senggol Cendrawasih.

As for the bivariate results, it was found that telemedicine and home care had an effect on the implementation of smart cities for informal sector workers at Senggol Cendrawasih Market ( $p < 0.000$ ). The multivariate results found that the maintenance system could be an influencing factor with the highest OR = 5.142867 (CI 95% = 2.645138-9.999091;  $p < 0.000$ ), where traders who stated that telemedicine and home care were still not good, were 5.1 times more influential on the implementation of smart city policies. According to Dwi et al., (2017) home care program from the perspective of practice in the field or the results that can be felt by the community can be seen in real terms, this shows that the role of the community in practice for the community as service users is a part or determinant in assessing the smart city program (25).

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