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Sea Defense Strategy Strengthening Through Improving The Readiness of Indonesian Naval Vessel Crew (Study: The Health Office of 1st Fleet Command)

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Abstract

One of the sea defense strategies in the scope of deterrence is by presenting the Indonesian Navy force in the sea. This demands the readiness of the Indonesian Naval Vessel includes the platform material readiness and its personnel. The Indonesian Naval Vessel unit is generally different from the land unit makes it difficult the crew and need the health manipulation to avoid health problems or diseases that can interfere with their performance. Research errors regarding the implementation of the Indonesian Naval Vessel crew/soldier medical checks at the 1st Fleet Command Health office for readiness in order to support the defense task, the factors that influence and what is the effort supposed to do. The aim of the study was to analyze the implementation of the Indonesian Naval Vessel crew checks at the 1st Fleet Command Health Office what factors influenced and the best strategies implemented to obtain optimal results of the implementation of the Indonesian Naval Vessel crew soldier medical checks. This study uses a qualitative method. The analysis uses the theory of policy implementation from George Edward III. Data were obtained from informants related to the implementation of medical checks for Indonesian Naval Vessel crew in 1st Fleet Command which were then analyzed using qualitative. The results showed that the implementation of medical checks for Indonesian Naval Vessel crew was not optimal. Efforts are being made to coordinate at the planning stage, it is necessary to make a policy that requires Indonesian Naval Vessel crew to carry out medical checks without exception and provide Covid-19 vaccinations. So that soldiers can serve optimally.

Keywords: Defense Strategy, George Edward III, Indonesian Naval Vessel Readiness, Indonesian Naval Vessel Crew, Medical Checks

1. Introduction

In the Universal Defense System places the Indonesian armed forces as the main component in facing military threats. The Navy is an integral part of the Indonesian armed forces which acts as a major component of state

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defense in the maritime dimension. The Indonesian Navy must have a large and adequate force consisting of a Fleet, Military Sealift Command and a Marine Corps. Robert Art in Supriyatno (2014) states that defense will always refer to the use of military force to stop threats or attacks, or minimize the consequences of an attack that has been planned.

Indonesian Fleet charge of organizing sea defense and security operations other than required to be able to overcome various forms of challenges are increasingly complex and dynamic also must always be present to protect the environment and sea resources, maintain security, ensure the safety and defend the sovereignty of the country in the sea (Margono, 2019). Throughout the year, the 1st Fleet Command held maritime security operations, so in order to maintain maximum military capability, it had to develop operational readiness for each element. These capabilities are the manned main weaponry system, such as Indonesian Naval Vessel or Kapal Republik Indonesia (KRI) and reliable crew or personnel. Indonesian Naval Vessel is always prepared for high combat readiness. Indonesian Naval Vessel's readiness in operate includes technical readiness in the section of platform (material), sewaco (sensor weapons and command) section, readiness of spare parts (On Board Spare) and readiness of Indonesian Naval Vessel crew soldier.

The excellent, tough, and reliable health condition of Navy soldiers determines the ability and high quality of resources in each of the Indonesian Armed Force duties. Soldiers are professional human resources who are always close to the risks that affect their health conditions, such as minor injuries, disabilities, and casualties. (Ma'arif, 2015). Likewise with the Indonesian Naval Vessel crew under the authority of 1st Fleet Command. The health conditions of Indonesian Naval Vessel crew soldiers have a major effect on their productivity and work capacity. Especially personnel who carry out operation of sea security and warfare exercises at sea.

The work environment at Indonesian Naval Vessel is very different compared to the work environment on land. The form of work space and accommodation at ship is limited. In addition, the crew occupies a room adjacent to the ammunition and fuel warehouse. Then coupled with the fluctuating conditions and weather in the sea. As a result, the level of risk and workload is high, because it demands vigilance and vigilance during work to avoid work accidents (Adriyanto & Muchlis, 2017). Meanwhile, working conditions in the middle of the ocean easily cause boredom and quickly make physically tired which makes you lazy to do activities, not alert to dangers and threats (Sutanto, 2018).

When the ship operates, in teamwork, the crew are in their respective positions of duty and function. The working time of one day at Indonesian Naval Vessel is 12 hours or 720 minutes and applies to all Indonesian Naval Vessel crews. Operations and wars at sea that require a firm attitude and do not hesitate to act require a great deal of energy so that it is very tiring. Combat at sea begins with a long observation and patrol, followed by the firing of both missiles and very fast cannons. Likewise, Military Operations other than war at sea also require the same characteristics. On large warships, restrictions on weather and sea conditions also apply. Including when at the port, the ship requires a level of supervision to ensure the safety of material and crew members (Rizanny, n.d.).

These conditions make Indonesian Naval Vessel crew soldiers susceptible to diseases that can interfere with their performance. In addition to requiring regular health checks, it is also important to maintain health in order to obtain excellent physical condition and stamina to support their activities. At the Fleet I Command Base, the Indonesian Navy Ship Crew Health Checkup is carried out at the Health Office as an implementing element who is obliged to support the main tasks of the health sector. The health checks of the Navy crews are carried out regularly at the Health Service of Fleet I Command and at the dr.Mintohardjo Naval Hospital accordance with the Head of Navy Staff regulation number 6 of 2017. The goal is to detect early symptoms of disease or other physical conditions that can result in suboptimal tasks. Diseases and symptoms found by crew will be treated and treated until the soldier is ready to be used again or assigned to land (pendirat). The results of the Health checks of the crew at the Health Service of 1st Fleet Command mentioned a disease disorder suffered by naval crews as in the table below:

Table 1: Table of Diseases found in health checks of the crew in the Health Service 1st Command Fleet

No	Disease Group	2018 (%)	2019 (%)	2020 (%)
1	Less Hygiene-Sanitation and	32	10	12
	unhealthy lifestyle			
2	Degeneratif	30	38	42
3	Trauma / injury	20	13	17
4	Viruses and bacteria	8	6	3
5	Mental health	8	3	4
6	Eye organ disorder	0	3	4
7	Complications	0	20	8
8	Contagious	8	7	10
	Total	100	100	100

The results of the evaluation of therapy and treatment determine the abilities of Indonesian Naval Vessel crew members to continue serving on Indonesian Naval Vessel or on land, as shown in the following table:

Table 2: Recommended Indonesian Naval Vessel crew members serve the courier based on the results of health checks at Fleet I command health office

Medical	Quantity		Recommended for ground service			
status	2018	2019	2020	2018	2019	2020
status	(person)	(person)	(person)	(person)	(person)	(person)
IIIP	43	31	80	43	22	45
IIP	3	3	4	-	-	-

This condition can lead to a shortage of Indonesian Naval Vessel crew soldier while the leadership of the Indonesian Navy insists on meeting the crew members of the Navy at least 90% of the need or from the Personnel Composition List determined by the Indonesian Navy (Margono, 2019). From the description above, an interesting problem to research and analyze is how the efforts of the Health Office of 1st Fleet Command in improving the readiness of the 1st Fleet Command Indonesian Naval Vessel crew soldiers as a strengthening of sea defense strategies. Based on the data extracted from the sources, the theory of public policy implementation from George Edward III was used as a basis for analysis

2. Method

This study uses a qualitative method with a phenomenological approach and an analysis framework of public policy implementation. There is a theory in the analysis of the data obtained so that it is not truly qualitative. This is also called quasi qualitative or quasi-qualitative design. That is, this design is influenced by the quantitative tradition, especially in placing theory on the data it obtained (Bungin, 2008). This research focuses on looking at the efforts in realizing an optimal health examination program for Indonesian Naval Vessel crew soldier in 1st Fleet Command. Medical examination activities in its implementation are also called medical check up tests (urikkes). Data obtained through in-depth interviews, conducting observations and documentary studies. The purpose of the interview is to explore each other's views / thoughts about something that is the object of research and obtain the required data. In this study, researchers used unstructured-planned interviews, namely interviews that were arranged according to a plan (schedule), but did not use a standard format and rules (Yusuf, 2019).

In observation, direct observation is made on the object of research, namely the medical checks activity and its follow-up at the research location. Meanwhile, the documentation study is analyzing documents related to this research, including the order of the Commander 1st Fleet Command regarding the implementation of health checks, soldiers who carried out medical checks data, follow-up data on medical checks results, chronic disease data, and manual of chronic disease management techniques for naval soldiers.

Testing the validity of the data in this study using triangulation and reference materials. Creswell (2014) said triangulating different data sources by examining the evidence coming from these sources and using them is to build a coherent justification for themes. Themes that are built on a number of data sources or the perspectives of participants will add to the validity of the research. The triangulation used is triangulation of data sources and triangulation of data collection techniques. Meanwhile, reference materials complement the research in the form of photos or authentic documents, so that they become more reliable (Sugiyono, 2007). Interactive data analysis used by researchers is an interactive model consisting of: data condensation, data display, and conclusion drawing / verification (Miles et al., 2018).

3. Results

3.1 General description

The Health Office of 1st Fleet Command is the central implementing element in the organizational structure of 1st Fleet Command which is obliged to support the main tasks of 1st Fleet Command in the health sector. The location is at the Fleet I Command headquarters based on Jalan Gunung Sahari No. 67 Central Jakarta. The Health Office of 1st Fleet Command is tasked with carrying out health coaching which includes health support, services and health support in the 1st Fleet Command environment, as well as technical guidance for the Indonesian Naval Vessel health unit within 1st Fleet Command.

Health office of 1st Fleet Command has the duty to carry out coaching health which includes health support, services and support health within 1st Fleet Command, as well as unit technical guidance Naval Vessel's health within 1st Fleet Command consists of:

- a. Compile and describe and carry out coaching health based on the 1st Fleet Work Program and Budget I and Naval Health Service per fiscal year.
- b. Describe and implement technical instructions from The Indonesian Navy Health Service and 1st Fleet Command.
- c. Prepare a plan for the activities of the 1st Fleet Command and Health Service determine the funds required based on the allocation budget per budget year.
- d. Organizing health technical guidance function activities maritime affairs, public health and health administration which cover:
 - Organizing good health support personnel and health materials in each operation and Exercises
 organized by 1st Fleet Command and coordinating health support in devotional operations health
 service for other Indonesian Armed Force and other health agencies related
 - 2) Organizing medical checks activities, coaching the Health Book (BRK), health counseling and promotion, implementing general health and dental services, improving environmental sanitation hygiene at Base 1st Fleet Command, Pondok Dayung port and naval vessels in the ranks 1st Fleet Command, lists chronic disease sufferers, monitors and reports them periodically (new cases) and quarterly (repeated cases) to relevant leaders, and carries out preventive activities within 1st Fleet Command.
 - 3) Carry out development of health resources includes personnel, materials, facilities and procedures and budgets in a transparent and accountable manner as well as implementing health information in the environment 1st Fleet Command.

The targets of Fleet health development generally are:

- a. The realization of reliable health support
- b. Achieving professional health services
- c. Increasing the pattern of clean and healthy life for soldier 1st Command Fleet and family
- d. The realization of health resource coaching transparent and accountable.
- e. Health checks for soldiers of naval vessels are carried out with the following conditions:

- f. Health checks for crew soldiers are carried out once a year.
- g. Health checks for middle-level officers are carried out at Naval Hospital dr. Mintohardjo Jakarta, while still being coordinated by the Health Service. 1st Fleet Command.
- h. Types of health checks are routine health checks, combat capability and mental health checks

3.2 Implementation of medical checks for Indonesian Naval Vessel crews at the 1st Fleet Command Health Office

The result of the analysis using George Edward III's theory is to find the answer or synthesis of each factor of policy implementation. George Edward III in Subarsono (2011) argues that policy implementation is influenced by four factors. The communication factor, namely the successful implementation of the policy, requires the implementor to know what to do. Resource factors, although the content of the policy has been communicated clearly and consistently, if the implementor lacks the resources to implement it, the effectiveness of the implementation will be hampered. The disposition factor, is if the implementor has a good disposition, then the policy objectives can be achieved. The disposition is in the form of character and characteristics possessed by the implementor, such as commitment, honesty, and democratic character. The bureaucratic structure factor is in charge of implementing policies consisting of aspects of the Standard Operating Procedure (SOP) and fragmentation.

In the communication factor has been carried out by each party related to the implementation of the 1st Fleet Command Indonesian Naval Vessel crew soldier medical checks. Both in the form of delivery of information and coordination between work units that support the Health Service in organizing medical checks. There were problems coordinating when vessel was sailing.

In the resource factor 4 (four) things that support the implementation of medical checks for Indonesian Naval Vessel crew soldiers, namely:

- i. The staff of the 1st Fleet Command Health Service are 79% of the Personnel List, so that causing they lack resources at the time of the medical checks along with health support for other 1st Fleet Command activities.
- ii. Information, consisting of information about:
 - 1. How to administer medical checks to Indonesian Naval Vessel crew soldiers. This information refers to the regulation of head of Navy staff Number 6 of 2017, it has been disseminated but has not been thoroughly implemented. Another information guide, namely The Manual of Chronic disease management techniques for naval soldiers published in 2007, needs to be updated.
 - 2. The compliance of the Indonesian Naval Vessel crew soldier with orders to carry out medical checks has been carried out but there are some who avoid it for various reasons besides being on duty. The soldier's compliance is the responsibility of the section head on a Navy Ship. The unit leader must provide solutions to existing obstacles, and also avoid ignoring undisciplined subordinates.
- iii. The highest authority rests with Commander 1st Fleet Command as the highest leader of the organization. while the authority to organize medical checks the 1st Fleet Command Naval Vessel crew soldier rests with the 1st Fleet Command Health Office.
- iv. Infrastructure

Medical checks are carried out at the Fleet 1 Commando health Service building and also available medical equipment. The checks are carried out for the first Officer level to the enlisted level. Meanwhile, the middle officer level, the medical checks was carried out at the Mintohardjo Naval Hospital. Medical equipment is adequate for a certain capacity so that new medical devices are needed as rejuvenation.

Resources in both Liddel Harts' and Lykke's strategic theory are a means to achieve goals. So it is necessary to always strive to be fulfilled so that implementation is successful optimally. In organizing health checks, resources in the form of a budget are crucial support that must be available and sufficient. The budget is submitted by the Health Service Command Fleet I in stages for the needs of the following year. In general, implementation means

providing resources to do something. This means that to implement a policy must be accompanied by means that support the achievement of goals (Wahab, 2004).

As in the implementation of health checks for Naval vessel crew soldiers in 1st Fleet Command Health service which aims to support national defense at sea. Staff resources, namely personnel health and infrastructure such as buildings and equipment health can be said as a priority in implementation which when insufficient can hinder implementation of health checks. In the concept of strategy according to Clausewitz and Liddell Harts, resources are means that are deployed to achieve goals (ends). So that it is in line with the implementation of health checks for Navy crews as a method and then to mobilize the available resources (means) to achieve the desired goal (ends) in the form of healthy soldiers so that they are ready to be in charge of defense operations.

The leadership disposition factor for the implementation of medical checks for the crew soldier of the Indonesian Naval Vessel consists of:

- 1. The appointment of the bureaucracy according to Edward III's policy implementation theory is to select personnel / staff who are capable and dedicate to the policy. Based on this, what can be done is to provide suggestions to the leadership of 1st Fleet Command, for existing personnel (staff), both the Health Service and the side units must have the same vision. Namely realizing sea defense that is able to protect the sovereignty of the country through the readiness of Naval Vessel crew soldiers who are responded to with medical checks
- 2. Incentives, considered as driving the implementation of medical checks. Incentives or compensation as one of the driving techniques in order to trigger the executors to carry out orders well (Winarno, 2005). So far, there has not been any special incentive provision and is deemed unnecessary because it is considered sufficient with a salary from the government. Not giving incentives to health examiners does not automatically result in the failure of the purpose of carrying out medical examinations.

The last factor is the bureaucratic structure, there are two main characteristics that can boost the performance of the bureaucratic / organizational structure towards a better direction, namely:

- 1. Standard Operating Procedures, in the medical checks of the Naval Vessel crew soldiers, the SOPs used are routine medical checks SOP, Combat Capability medical checks SOP and mental medical checks SOP. All three have been carried out by health examiners. And the function of that is:
 - a) As a standard that explains the details of inspection standards consistently and firmly, and makes it easy executive personnel to adapt.
 - b) SOP is the legal standing for medical examiners.
 - c) As a control function that shows that the Health Service Command Fleet I has an efficient and well-managed process for implementing health checks
- 2. Fragmentation (spread of responsibility). Fragmentation has not been understood as full responsibility that is borne by a other unit that is not directly involved with the medical examination.

Some units consider medical examinations to be the purely responsibility of the 1st Fleet Command Health Service, the Naval Health Department of the dr. Mintohardjo Naval Hospital and the Naval Health Service. However, in general the process flow that passes through units other than the 1st Fleet Command Health service can be completed completely. Naval Health Service as the health corps supervisor of the Indonesian Navy had a big role in determining the readiness of the 1st Fleet Command Naval Vessel crew soldiers. Especially for the distribution of an adequate medical checks budget, competent health personnel resources and the procurement of medical equipment needed. In line with Wahjosumidjo (Wahjosumidjo, 1992) which states that leadership has a central role in organizational life, where there is collaborative interaction between two or more people in achieving goals.

4. Discussion

Drew and Snow (2002) define military doctrine (military doctrine) as what to believe about the best way in carry out various activities related to the military (Putra & Sholeh Hadi Pramono, 2017). Likewise with the implementation of sea defense strategy based on the doctrine of the armed forces of Tri Dharma Eka Karma (name of the doctrine Indonesian armed force). Where the function of the armed forces is to deter every threat, obstacle and disturbance that disturbs the country, it becomes the act of taking action for any attacks or threats that have entered Indonesian territory.

The conception of the Archipelago's Sea Defense Strategy adopted by Indonesia has based the Navy to move in carrying out defense tasks in Indonesia's maritime territory, both in critical and peacetime times. The development of the navy's strength and capability is to deal with aspects of sea threats, said Admiral Siwi Sukma Adji as Chief of Navy staff for the 2018-2020 period (Hutomo, 2019). For this reason, the strength of the Indonesian Fleet is always present in every situation and challenge faced by the country, said the current Chief of Navy, Admiral TNI Yudo Margono, S.E., M.M (Dispen Koarmada I, 2020).

One of the Sea Defense Strategy in the scope of deterrence by presenting the force of the Indonesian Navy in the sea area. This requires the readiness of Indonesian Naval Vessel which includes the readiness of the platform material and its personnel. There is different conditions between vessel from the conditions on the ground unit (pendirat) generally require adjustment of each personnel and health engineering personnel in order to avoid health problems or diseases that can interfere with their performance.

As one of the elements of the defense force in the sea dimension and guarding the Indonesian sovereign territory at sea, naval vessel crew soldiers who are professional and physically also mentally healthy are the assets to control the sea. This is absolute and cannot be avoided by an archipelago country like the Republic of Indonesia. Defense is carried out continuously / all the time, because defense is a state of alert that is needed at all times.

The crew who are physically and mentally ready to operate cannot be achieved without an effort in readiness. For this reason, through a medical checks of the Indonesian Naval vessel crew soldiers at the 1st Fleet Command Health Service, it will be determined whether ready or not soldiers are on duty on a Naval vessel.

The reference in formulating efforts to strengthen sea defense strategies to improve the readiness of Indonesian Naval vessel crew soldiers is from the concept of military strategy Arthur F. Lykke (1989). Lykke developed a strategic framework from a concept previously introduced by Clausewitz and Liddell Harts, so that strategy is a coherent and balanced decision-making process for the main elements of strategy. These elements include ends (goals, objectives, or targets), ways (ways of acting, course of actions, concepts, and methods) and means (strengths, resources, and potential). So the goal related to the sea defense strategy is the realization of the 1st Fleet Command Indonesian Naval Vessel crew soldiers who are ready to support Indonesia's sea defense. Based on the analysis of the implementation of health checks, the ends determine as follows:

- 1. Fulfilment of medical personnel resources to optimize the results of medical examinations in order to reach the readiness of the Indonesian Navy vessels.
- 2. In order to increase the readiness of Indonesian Navy soldiers, efforts can be made to maintain health, prevent or minimize disease and overcome injuries by establishing a special centralized health service center for Navy crew. The location is near the dock to make the distance between the crews of the Navy ships docking. The unit is able to use science to conduct research in the areas of performance optimization for naval crew members, physical endurance, fatigue management, injury prevention and recovery from injury, and can develop medical and logistical planning. The results can serve as a reference for decision making to keep naval crew healthy and improve operational readiness. These efforts are supported by legal standing in the form of policies which then the implementation process meets the principles of integrative, interactive, transparent, controlling and accountability (Prakoso, 2016)

- 3. Indonesian Naval Vessel crew soldiers who are fully motivated to carry out health checks. At least the naval crew members realize the importance of their own self-readiness is to support the operational readiness of naval ships. The way that the 1st Fleet Command Health Service is trying is to provide knowledge about how to maintain health and recommend a healthy lifestyle on board for Naval Vessel crew soldiers.
- 4. Other units understand and share the responsibility of carrying out medical checks for naval vessel crew soldiers

Based on the explanation from the informant, the method (Ways) is:

- 1. Conduct special recruitment for health professionals and submit recommendations for the procurement of medical devices.
- 2. Establishment of a naval health center for naval crew soldiers located near the base / dock
- 3. Provide education / socialization of health material for naval crew soldiers
- 4. a. The Commander's policy emphasizes that the head of the work unit in the 1st Fleet command who is involved in the implementation of health checks is responsible for providing support in accordance with his function
 - b. The Indonesian Navy's first school curriculum, both enlisted and officers, contains material for medical examinations for Indonesian Navy soldiers generally and specially for Indonesian Navy crew soldiers is an effort to build Indonesian armed force posture in the defense sector and also the responsibilities of heads / officers in work units or supporting units.

The above efforts must be accommodated with legal protection in the form of policies from the leadership as legal standing and means of affirmation. The health check policy for Navy crew members is a top down policy, so it requires the role and function of the leader to achieve policy objectives. However, it requires suggestions from the proposing units, namely from the Health Service of 1st Fleet Command as the spearhead of conducting health checks for Navy crew.

5. Conclusions

Fleet I command as the coaching city that carries out fostering sea and base power and being responsible directly to the Chief of Navy staff. In enforcing the rules and safeguarding the country's sovereignty, the implication is the optimal contribution of Navy crews in an effort to ensure the achievement of the main tasks assigned to the warship fleet. Both in maritime security operations and marine combat operations. Indeed, the readiness of the Navy ships is part of the marine power to support the marine defense system. In carrying out state defense operations at sea, Navy Vessel crews need physical and mental readiness. Health checks of Navy Vessel crew members are a measure of whether they can serve on a Naval vessel or not. The need for efforts in realizing the success of the implementation of the health check of the Naval vessel crews at the Fleet I Command Health Service, in the form of determining the ends, means and ways needed to achieve the goal, namely the Health Service 1st Command Fleet optimally implementing health checks to get the crew of the Navy who are physically and mentally ready to be in charge of state defense operations at sea.

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