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From the Editorial Committee

We are giving you the next Vol. 26, No. 2(2021) issue of the Quarterly of the Faculty of Management of the Rzeszow University of Technology entitled "Modern Management Review".

The primary objective of the Quarterly is to promote publishing of the results of scientific research within economic and social issues in economics, law, finance, management, marketing, logistics, as well as politics, corporate history and social sciences.

Our aim is also to raise the merits and the international position of the Quarterly published by our Faculty. That is why we provided foreign Scientific Council, as well as an international team of Reviewers to increase the value of the scientific publications.

The works placed in this issue include many assumptions and decisions, theoretical solutions as well as research results, analyses, comparisons and reflections of the Authors.

We would like to thank all those who contributed to the issue of the Quarterly and we hope that you will enjoy reading this issue.

With compliments Editorial Committee

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April-June

Toufan AKBAR¹ Susanto TIRTOPROJO²

AN ANALYSIS OF THE INFLUENCE OF TRANSFORMATIONAL LEADERSHIP AND ORGANIZATIONAL COMMITMENTS ON CHANGE READINESS

Organizations that cannot adapt to changes will be eliminated by competitors and unable to maintain their existence. Organizational changes require organizational readiness, for example, from a human resources perspective. An important factor affecting the readiness for change is transformational leadership, in which the role of the leader is to direct, guide and motivate the team to implement changes, and build the trust on facing or implementing organizational changes. Moreover, due to the high organizational commitment of employees, it can help to implement further company strategies to respond to the changes. This study aims to review various previous research that discuss transformational leadership, organizational commitment, and change preparation. Literature studies is previous findings related to transformational leadership, organizational commitment, and change readiness that used as research methodology and a coherent analysis. The results indicated that: 1) there is a positive influence between transformational leadership and change readiness; 2) there is positive influences between organizational commitment and change readiness.

Keywords: Transformational Leadership, Organization Commitment, Change readiness.

1. INTRODUCTION

Under the rapid global development, there are new business risks found, the exciting opportunity, innovation and new leadership system which can cause the changes that continuously experienced by organization (Madsen et al., 2005). In facts, an organization continues to face other challenges and new problem appears, therefore it is needed to implement a development or a change in order to survive during the competition. There is none of organization located on stable environment, even in a bigger company, which has a big impact of market domination, should experience a change. Continuous implementation of changes can quickly improve the performance of senior organizations, therefore it is able to reach success in an organization and vice versa. The organization or the company that cannot adapt to the changes will be defeated by a competitor in order to maintain their existences. Organizational change requires organizational change readiness

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in terms of Human Resources. Organizational change demands human resources to change, therefore employee change readiness is one of the important things to achieve the success of organizational or company development. Eby et al. (2000) explains that the change is needed as a support of a company or an organization, and employee's support is also needed to prepare change readiness. According to Desplaces (2005), positive factors that lead to the changes is the readiness of individual changes, individual readiness will have an impact on focus, feeling and mind set of the attitude and behaviour, if an individual is ready they will be able to adjust himself to the changes. It can decrease the influence on the successful of change. Holt et al. (2007) argues that change readiness is a multidimensional form that influenced by beliefs of employees which are able to implement the change specific efficacy, the proposed change is related to the appropriateness, the leader commitment to the changes which proposes a benefit for organization (*personal valence*). The readiness of an individual to change is an important factor of organizational success to implement the changes (Bernerth, 2004).

Under the conditions of organizational change, employee demand to leave their previous comfort zone, however, not every employee is ready to change. Furthermore, the organizational commitment has an important role to provide change readiness of workers. According to Meyer & Allen (1991), organizational commitments have 3 dimensions that consist of affective, sustainable and normative commitment. The affective commitment is an employee's emotional attachment, identification, and participation in organization. The sustainable commitment is a commitment based on the company disadvantage regarding the employee resignation. While, the meaning of normative commitment is the individual feelings obliged to stay loyal to their organization. In the research by Durkin and Bennett (1999) it was revealed that high organizational commitment of employees can help the implementation of company strategy to deal with change. The organizational commitment is a strong will of individual to become an organization member, the willingness to work related to the organizational expectations, certain belief by accepting value and purpose of organization (Luthans, 2012).

The other important factor that influences the change readiness is transformational leader, whose role is to direct, guide and motivate the team to implement the change and built the trust on facing the organizational change. According to Hughes et al. (2012), transformational leadership has a vision, rhetoric and management skills to develop the strong emotional relationship between leaders and their team. The initial idea related to transformational leadership goes along with the concept of transactional leadership which implies in political context. Transformational leadership is believed to be more successful in obtaining organizational change because of the development of followers' emotions and the workers willingness to manifesting the leader's vision, while transactional leadership does not reflect the characteristics of leader, which is able to develop strong emotional relationship with the team and inspires the team to done their job beyond what they should be done.

Walumbwa et al. (2008) stated that transformational leadership is one of leadership styles that support the change readiness because transformational leadership can help to improve the effectiveness of employees and provide encouragement "can definitely do!" Transformational leadership is the leadership style that inspires and motivate the employees to implements the job beyond the expectation and their own interests for the benefit of organization, the empirical proof was found in the research that implemented by Kartika (2016) which proofed that transformational leadership influenced the readiness for change.

Based on the explanation above, this research aims to review the problem of transformational leadership and organizational commitment concerning the change readiness in an organization. Several research that examines the influence of transformational leadership and organizational commitment on the change readiness has been done many times in different way. Researchers' interests to review the study about the change readiness of worker which influenced by transformational leadership and organizational commitment, then resume it in order to give the recommendation in order to improve the change readiness until the resistance of the changes can decrease and the influenced on the possibility of changes is getting bigger.

2. LITERATURE REVIEW

2.1. Transformational Leadership

Transformative leader is a leader who creates trust, loyalty, admiration, and respect for his followers and among adherents and leaders. The transformational leadership's supporters believe that they are voluntarily ready to achieve the goals, objectives and vision of the organization. Robbins (2001) stated that transformative leader is a person who inspires the followers to changes their life and affirms that transformational leadership is able to aspire to bigger targets and visions. Transformative leader is willing to do anything best to achieve the organizational targets, to motivate, and to raise his followers morale (Sari, 2018).

2.2. Organizational Commitment

A worker can show different levels of commitment based on what he believes. By studying the level of commitment can predict how a worker is involved in organizational commitment and the factors and the relationship between the factors. Commitment is part of the responsibility for the job given. Workers believe that they are required to devote themselves to achieving organizational goals, their existence in the organization. Therefore, they intend to stay in order to fulfill the obligations or contracts that they have signed. Where researchers believe that certain factors have a big impact on each component of commitment and different components of commitment show different levels of service (Novitasari et al., 2020).

2.3. Readiness to Change

Readiness to change is a necessity that must be experienced by an organization in order to be able to continue to adapt to a dynamic environment. Organizational change is defined as the act of shifting an organization from current conditions to the desired future conditions due to increase creativity. While, operational change is defined as a planned and unplanned transformation in the organizational structure, technology and/or the people within (Santhidran et al., 2013).

2.4. The Influence of Transformational Leadership on Readiness to Change

Change is often associated with leadership. Transformational and individual leadership are the perceptions of the readiness to change context, including; communication, organizational support, and alignment of organizational values (Sari, 2018). Transformational leadership is a changing process that will encourage employees to take

initiatives change and reduce employees' reluctance to be more communicative and participative.

2.5. The Influence of Organizational Commitment to Change Readiness

Nordin (2011, as cited in Sari, 2018) added that affective commitment has a positive effect on change readiness through employee involvement through the change process and building the value that employees feel about the benefits of change can encourage employees to be ready to change. However, there are some studies that have found that affective commitment has a negative effect. Battisteli et al. (2014, cited in Sari, 2018) stated that one of the characteristics of affective commitment is high employee loyalty. When employees do not have a sense of loyalty, the intention to leave the organization is high, even though they are involved in the change process. An employee concerns about the costs that will arise if they do not provide support for company changes, and perceptions of the benefits that obtained if they participate in changes (Sari, 2018).

3. RESEARCH METHODOLOGY

This research used a qualitative approach. The method used is literature study which implemented by recording previous findings related to the variable of transformational leadership, organizational commitment, and change readiness. Then, combine the findings, analyzing the finding coherently and clearly.

This article used secondary data which was obtained from the several previous literatures. The supporting literature in this research comes from books and previous journal. The data analysis method used in this research is descriptive-qualitative analysis technique, the technique was chosen to illustrate the problems related to the change readiness then reviewed it back in order to produce relevant input and improve the change readiness until the resistance of changes can decreases and causes a great impact on the variable.

4. RESULT AND DISCUSSION

This research combined the result of several previous studies within the variable of X_1 transformational leadership and X_2 organizational commitments to analyze the influences on Variable Y in the context of change readiness. There are the results and discussion related with the research problem.

H1. The Influence of Transformational Leadership on the Change readiness

The initial hypothesis proposed in this research is transformational leadership which has positive influence on the change readiness in the organization. There is several research that support the influence of transformational leadership toward change readiness.

Santhidran et al. (2013) stated that this research concerning the organizational change is not fully understood in the developing countries especially related with the changes of the process and inside this research found the proof that leadership gives the significant influence to the change readiness. The successful implementation of organizational change has become the important management task. The researcher in Taiwan gives addition of mechanism knowledge where the transformation leadership has influenced the behaviour supports to change the organization change (Chou et al., 2015). The finding of this study

confirms the importance of transformational leadership in successful implementation of change.

The result of previous research by Bommer et al. (2005) found leader with transformational leadership style which effectively applie the change in the organization. The leaders have the characteristics of charismatic, visionary thinkers, and brave in taking the risk, out of the box and energize with having the ability to motivate the other people when acts as the role model and mentor for their followers. The other results also concluded that leader with the transformational characteristic is the positive change agency, able to cope the complex work environment and changing rapidly have the positive behavior to apply the evidence-based practice, and the end will positive influenced to the organization culture (Aarons, 2006; Mahalinga Shiva & Suar, 2012; Murphy, 2005; Ward, 2002).

The comparison of the influence can be seen as the following table below:

Table 1. The Influence of Variable X1 toward Variable Y

Research Title	Variable X₁ influence Variable Y	Variable X ₁ has no influence on Variable Y
Enabling Organizational Change Leadership, Commitment to Change and The Mediating Role of Change Readiness (Santhidran et al., 2013)	Leadership positively and significantly affects change readiness but not commitment to change	
Transformational leadership and change readiness and a moderating role of perceived bureaucratic structure: an empirical investigation (Abbasi, 2017)	Transformational Leadership had a positive direct effect on employee change readiness and its dimensions	
Transformational Leadership, Change Management, and Commitment to Change: A Comparison of Academic and Business Organizations (Cementina-Olpoc & Hechanova, 2013)		There were significant differences in transformational leadership between academic and business organizations
Changing Attitudes about Change: Longitudinal Effects of Transformational Leader Behavior on Employee Cynicism about Organizational Change (Bommer et al., 2005)	Transformational leader behaviors (TLB) generally were associated with lower employee Changing Attitude	

Based on the summary table above, three of four research result stated that there is a positive and significant influence of Transformational Leadership toward change readiness within the explanation as stated on the table above. And one of them stated that Transformational leadership did not have any effect on change readiness. Therefore, based on the majority of result, it can be indicated that Transformational Leadership has significant effect on Change readiness. It can be said that Hypothesis 1 is accepted.

H2. The Effect of Organizational Commitment on the Change readiness

The second hypothesis of this study is about the organizational commitment that has a positive influence on the change readiness in an organization. The success of organizational management determined by how organization manages Human Resource. The commitment of employees to the company determines the way of an organization to achieve the purpose. Human resource management presumes the employee commitment on valuable organization. Because, if the employee is committed to the company, the work result might be productive and ready to change on every condition, there are several organization entering the elements of commitment as the condition to hold a position offered in the job vacancy promotion because the role is important.

Table 2. The Influence of Variable X2 toward Variable Y

Research Title	Variable X ₂ influence Variable Y	Variable X ₂ has no influence on Variable Y
Readiness for organizational change: Do organizational commitment and social relationships in the workplace make a difference? (Madsen et al., 2005)	The findings indicate significant relationships between readiness for change and organizational commitment	
Organizational Culture Change and its Effect on Change Readiness through Organizational Commitment (Suwaryo et al., 2015)		SEM analysis find out that organizational commitment negatively affects the readiness to change.
The influence of leadership behavior and organizational commitment on organizational readiness for change in a higher learning institution (Nordin, 2012)	Transformational and transactional leadership behavior could contribute to formulation of organizational readiness for change and subsequently lead to the success of a change program.	
Employee Readiness for Organizational Change: A Case Study in an Export Oriented Manufacturing Firm in Sri Lanka (Samaranayake, 2017)	This article unveiled that organizational commitment and trust in peers and management were significantly and positively correlated to employee readiness for organizational change.	

Based on the table of comparison above, three of four research stated that Organizational change positive and significantly influence change readiness. Only one research stated that organizational commitment negatively affect change readiness within the explanation as what it stated on the table above. Therefore, it can be said that Hypothesis 2 is accepted.

Furthermore, Allen and Meyer (1990) stated that organizational commitment reflected of three general components which affective commitment, continuance commitment, and normative commitment. According to Iverson (1996) the organizational commitment is the best predictor in the change than with the job satisfaction, the employee who has the high organizational commitment will put more effort into change projects to build positive attitudes toward change. Madsen et al. (2005) serves the finding in this research about the job satisfaction factor and change readiness, where the results show the organizational commitment has positive relationship for readiness that felt to change the organization. Al-Hussami et al. (2018) also deliver the research result to the nurse in the hospital there are three component of organizational commitment which accounts for a low to moderate amount of the readiness for change variant, this is shows that the organizational commitment has influenced on the change readiness.

5. CONCLUSION

Based on the result and the literature review that has been implemented through this research, it can be concluded that:

- Transformational leadership has a positive influence on preparation for change. The
 positive relationship between each variable shows that transformational leaders can
 help to direct, guide, and motivate the team to implement changes and build trust in
 implementing organizational changes.
- 2) Organizational commitments have the positive impact on change readiness. Positive correlation between the variables indicates that if the employee's organizational commitment at a higher level, then the employee's readiness for change will be at a higher level too. Employees with a higher degree of organizational commitment will consistently show enthusiasm and positive attitude towards personal development, others or company

6. SUGGESTION

- The leader needs to improve the communication with an employee, especially in delivering vision, mission, aim and purpose of the organization. Thus, the employee can be involved and be ready in the changing process. Besides, the leader is also needed to create comfortable and conducive work atmosphere in order to motivate the employees and improve employees' creativity.
- 2) In implementing the change, an organization needs to consider the employees' commitment as one of the important factors. Employees are the element of the company that must experience change to make the organization running well and success. Moreover, employees who are more prepared will see change not as a burden but as a challenge.

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April-June

Firman BACHTIAR¹

ALTERNATIVE STRATEGY TO EMPOWER AND DEVELOP BATIK BUSINESS AS COMMUNITY WELFARE SUPPORT IN PURWOREJO – INDONESIA

This research aimed to find facts on weaknesses and constraints that occurred in the field, and tried to prepare an alternative strategy model for supervising and empowering batik business to boost Purworejo's community economic welfare. The research was held in a number of sub-regions which it was known as batik culture area in the past time. This research applied qualitative methods to obtain in-depth illustration on real situation and condition in the field. The result concluded that to develop and to empower Purworejo's Batik, it was needed an alternative strategy, which included the comprehensive planning and supervising on batik industries in Purworejo. Batik craftsmen and business players were necessary to be empowered on business location, physical equipment, supporting goods, raw materials, products design, energy, manpower and time. Beside from the Government side, it was necessary such a strong political willingness on general policy and specially that aim for empowering and increase batik industry to become master in its own country.

Keywords: Batik Business, Batik Craftman, Purworejo, Batik.

1. INTRODUCTION

Nowadays, batik has been officially recognized by Indonesia as the original intangible heritage of a country. Not long time ago, other country claimed that batik was the original culture of its own country. Now that the situation has subsided, the country no more continues to claim batik. In this case, the united nations represented by UNESCO made official statement as described above (Ricklefs, 2005).

Batik was officially recognized as one of Indonesia's cultural heritage by UNESCO on October 2, 2009. The word batik comes from the word "ba" and "tik", which means "the dots". Furthermore, UNESCO's recognition also had positive impact on batik sales, especially in terms of promotion, from having a role as a cultural heritage, batik also has an economic function (Sari et al., 2020).

Batik in the Java concept contains more tangible spirit, which is a philosophical symbol closely related to the meaning. The name of batik comes from the combination of the two meaningful words "amba" in Javanese means writing and of "tik" means point. Central Java batik is characterized by its motives derived from Javanese culture. It is closely related to Hindu culture, Islamic culture and Chinese, Dutch, Arab, Indian, Japanese and other mixtures with philosophical and artistic values. The development of batik has become more

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and more extensive and become one of professional knowledge that can be continuously developed. Batik is also cultural heritage of society and should be maintained and preserved to ensure the environmental safety from chemical pollution. It indicates that the basic theoretical research methods based on constructivism have expanded the complexity of social life. (Hastuti and Sihombing, 2020).

Batik patterns divided into multiple design groups are related to the certain qualifications and variations. Batik patterns have similarities, thus, it can be recognized. The patterns developed based on high-level features that did not change proportions, rotations, and other. Batik is a traditional cloth with unique patterns that can be applied to fabrics. Wax resistant coloring technology (Mulyani et al., 2019).

An approach to batik pattern recognition using Scale-invariant feature transform (SIFT) as a feature of extraction method. Batik can be divided into several types: written (handmade), printed, and fabric pattern without any process. Hand-made batik tends to be considered having higher quality and demand by most of people and art lovers, however the manufacturing process takes a long time, starting from the process of making pattern, writing (handmade) using specialized equipment tjanting, coloring, removing, and washing. The longest process is hand-drawing which can take up to weeks or months depends on the complexity of patterns (Mulyani et al., 2019).

It makes the price of hand-made batik expensive, and even only a piece of cloth can reach millions of rupees. In the optimization of batik, the use of particle swarm optimization (PSO) method help to save 14.801% of raw materials and 10.345% of production time. This method was introduced to speed up the production process and reduce the price of batik (Mulyani et al., 2019).

The world recognition of batik had an impact on the spread of batik to the world. According to the Ministry of Industry, the value of batik exports in 2015 reached US 156 million. However, batik exports tend to experience a downward trend until 2019. In 2018, batik exports reached US 52.44 million. This value has decreased by 10.3% compared to the previous year. The exports of batik in first semester of 2019 obtained to US 17.9 million. The most significant decline occurred in 2017, where the value of decline reached 61% compared to the previous year. The main export destinations of batik include Japan, United States and Europe (Sari et al., 2020).

The development of batik has grown along with the development of kingdoms era in Indonesia, especially in Java, and dissemination of Islam in XVII Century. Nowadays, batik's culture had spread all over not only in Java, but had reached many areas outside Java Island. A number of cities and areas which were familiarized and has an impact on the development batik such as Surabaya, Gresik, Madura, Solo, Yogya, Banyumas, Cirebon, Padang, Kalimantan, Sumatra (Longenecker, Moore and Petty, 1994).

After several centuries, the growth and development of batik cultures had spread all over Nusantara. It could be mentioned that, the name of batik were connected to the city and region where the batik were made such as, Pekalongan batik, Banyumas batik, Yogyakarta batik, Solo batik, Surabaya batik, Cirebon batik, Jambi batik, Kalimantan batik, and Papua batik. Each and every kind of Indonesian Batik has their own patterns that normally represent the region's characteristics and history (Ricklefs, 2005). Every patterns hold particular meanings of respective regions. It is appropriate that batik becomes one of Indonesia's culture, which is very valuable and worth to preserve by every Indonesian people (Cooper and Schindler, 2000).

Batik Purworejo was famous several years ago due to the unique pattern. However, the development period related to the technology, global competitiveness and communication, taste, a number of cities and region which in the past already had batik culture, and it slowed but sure began to fade (Goldstein, 2007).

Then the research focus was directed to the profile of businessman and batik craftsmen that were spread out over Purworejo. The day-to-day activities they perform in course of conducting business, and the stage of competence in conducting business. They may get the opportunity to grow their business (Levy, Weitz and Grewal, 2001). The restrictions they may face in running a business. They expect government agents to supervise to improve competitiveness. In this study, the purpose is to provide the Purworejo batik process and local governments with opinions on the obstacles and recommendations regarding the sustainability of Purworejo batik. (Nitisusastro, 2010).

2. METHODOLOGY

To find a supervising and developing alternative solution for small and middle scale enterprises and boost the competitive advantage, it had to be found some main elements that fits to the point on statement of problem, research objective, the use of research, qualitative methods was applied in this research (Denzin and Lincoln, 2009).

In this research the things that will be observed were people, those who acted as an actor in the small and middle scale enterprises with their various back ground (Sugiyono, 2016). The players in small and medium scale enterprises run their activity, which were in this case in Purworejo Region. Interaction between business players (actors), their activities (Sigit, 2003), and locations (place) will result such certain situation. As mentioned above, the research sample will be several small and medium scale of enterprises that active in field of batik business.

Data and interview also conducting in Rural Development Planning Board (Badan Perencanaan Pembangunan Daerah), small and medium scale enterprises, and cooperative Office (Moleong, 2017). The research was done for more than three months to study people as the object of observation, they are the subject of small and medium-sized enterprises within the various backgrounds (Sugiyono, 2009). There are five samples of small to medium participated enterprise. Three samples from small batik business and the other two are from medium level batik business. It includes the interaction between business participants (actors), their activities (events) and locations (places) which made such situation. Data and interviews were also conducted in Rural Development Planning Committee (Badan Perencanaan Pembangunan Daerah), SMEs and Cooperative Office (Moleong, 2017).

3. RESULTS

Nowadays in Purworejo, only handmade or handwritten batik exists. There is no more printed batik produced and it was a decrease condition since the majority of customer can afford to purchase printed batik for economical consideration. In the past ten years, the amount of business unit of batik craft in Purworejo has been decreased. There is no systematical regeneration planning and new generation has less interest in batik crafting, moreover there is no intention to attract younger generation. The amount of batik craft is reduced because there is no more successor (Griffin and Ebert, 2004).

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The observation indicated several weakness as the problem that needs new strategy to be formulated. The detail of problem can be seen in the table below:

Table 1. Batik Business Problem Categories

No	Cotogomi	Problems			
NO	Category	Promotion	Buyers	Logistic	Innovation
1	Sample 1	~		~	
2	Sample 2	~		~	~
3	Sample 3		~		
4	Sample 4		~		~
5	Sample 5	~	~		

Source: Survey Data.

Based on the table above, most of problems happen on the factor of promotion which cause the decrease on the number of buyer. Furthermore, lack of innovation of Batik has also become an important factor to attract buyers from every kind of class and age.

Therefore, several recommendations of strategies that can be used by batik craftsmen, it was done based on the results of value chain analysis, which includes upstream, midstream, and downstream segments. Business clusters are industrial zones where businesses, various public and private sector industries that were operated by their suppliers and other connections. Therefore, prioritized innovations in inbound logistics, operation, and marketing and sales area, success is not achieved in industries which could not realize their external integration, but in business clusters. Porter in Sari pointed out that it is expected that the craftsmen can increase the productivity of their businesses, thus it will able to compete in the current market. Developing the clusters will increase the speed of obtaining competitive benefit. In the batik industry, every elements that have advantages as an effort to increase the competitive benefit (Sari et al., 2020).

The strong promotion is still required. For batik home industry, the owners that continue to develop batik should always improve the quality of batik production, and develop the shades which are taken from local culture, Indonesian or foreign people should be proud to wear batik as the culture of region. Local government is necessary to support the program and promote batik that contains the values of culture and develop batik as a master of its own areas (Hengky, 2018).

4. DISCUSSION

Sudantoko in Suryani pointed out that the value of national batik industry production in 2010 reached USD 8,4 billion which employ 17.082 people in 326 business units in Indonesia. It stated that Batik has become part of creative industries and business sector has comparatively and competitively able to exploit natural resources or potential areas in Indonesia (Suryani, Anggraeni and Suryadi, 2015).

There are also a number of constraints from the raise of rough material prices, difficulties for the future generation, limited capital and less strategic of production place. In demanded conditions construct, it explains that the high number of buyers and the type of pattern can be supporting factor of business. The availability of rough materials from the

outside of the city can be an industrial obstacle. Furthermore, the existence of stronger market competitor and the existence of batik printing can prevent further income of batik, thus, there are unable to manage the business properly (Sari et al., 2020).

The role of small industry in Indonesia is associated with the government's efforts to reduce the number of unemployment, poverty and raise the distribution of income. The potential prospects of small industries to strengthen the productive capacity of small industries within the higher amount of unit. Small industries which have a strong network will have more important role on its development than those with a weaker network. The ability of small industries would promote the establishment of strong partnership which is conducive for larger corporations and small business (Pudjowati et al., 2019).

The benefit of beng competitive describes an innovation role on creating the company's competitiveness. It is important innovation strategy to increase the competitive benefit as dependent variable, the research results explain positive effect. The innovation activity is a product report card with Enhanced quality enhancement, superior quality service, novel, more efficient, and cleaner production (Za et al., 2019).

One of the important tool in tourism development is the future orientation. In the involvement stage, it focuses on distributing economic benefits and protecting natural resources by providing education to the community, able to provide facilities and amenities, offer local wisdom as a tourist attraction to generate employment and income opportunities. Tourism should also consider the aspects of sustainability, socially, economically and in natural resources and borrowing the term of "sustainable development" (Lubis, Rohmatillah and Rahmatina, 2020).

Hastuti and Sihombing, (2020) stated that the awareness of cultural development of batik by entrepreneurs can be examined based on the three types. Cultural development that was taken by entrepreneurs can be traced within the three aspect: (1) maintain and develop business community (2) keep the relic style and the color of batik (3) keep the family business stable. Meanwhile based on this research, the cultural development begin to decrease in modern era. Thus, this research tried to build alternative strategies to maintain the cultural development of Batik business.

Widiana et al., (2020) stated that the design of gallery or showroom and employees uniform and attributes have been well prepared, a prototype cashier application and dashboard for management have been tested and well implemented. It will certainly runs the activities of mentoring, monitoring and evaluating the implementation that was carried out by partners. The solution provided for partners to compete at national and international level is conveyed through several activities such as preparing to build a gallery or exhibition hall, preparing employee attributes and cashier applications. every solutions that have been offered have a purpose to build the market and increase the sales which have an impact on increasing the partners income.

Textile industry is currently in the 3rd position of national exports and engaging the employment for more than 2.79 million people by obtaining production which is able to meet 70 percent of domestic clothing needs. Furthermore, throughout 2015, the textile sector has contributed 1.22 percent to the National GDP and an export surplus of USD 4.31 billion (Suparno et al., 2019).

Batik crafting is now spread out in 2 sub-region and 6 villages which include Kemanukan, Rejosari, Bakurejo, Dudukulon, Duduwetan and Sumber Agung. The total of business units are 154, producing 1.848 pieces every month.

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Batik is an art, or written art upon a piece of fabric that was made from unbleached plain cloth, by using drawing tool called "canting" and ink that made from resin torch or candles. The pattern is designed from the inspiration of designers or craftsmen, based on their imagination on flora, fauna and their surrounding environmental condition (Sudja, 1979).

Nowadays, the stages of competences have become less or even lost because there is no successor from the younger generation or family, even though normally the crafting ability is passed down for the generations below (Sudja, 1979). "Batik tulis", or written batik consist as a unique art because of the high category. It also takes more time and effort to make, thus the price is relatively more expensive and less people can afford this type of batik (Sudja, 1979).

The materials for batik such as kain mori, blacu, lilin, malam, and pewarna have become difficult to find in Purworejo and it requires a bit more effort to purchase in Yogyakarta. Despite, the fact that batik can be done practically on any media, it is not limited to kain blacu, the skill and knowledge of this are yet to be distributed to the craftsmen and entrepreneurs in Purworejo. Even some Indonesian designers have started to apply batik on silk and leather on bags. It proves that there is information and knowledge gap (Sudja, 1979).

The existence of Balai Batik under the Ministry of Industry that located in Yogyakarta doesn't seem to give any solution to this issue at the moment. The place and association haven't been optimally utilized by the surrounding society. The choice of materials, colors, equipment, the process and maintenance of batik colors still using the conventional methods, despite being the ones that have been passed on through generations, it is also limited (Nitisusastro, 2010).

The human resources of batik is mostly woman and it is not a primary job, which is mainly farming, and the skill to create batik was passed down from mother to daughter. Since it takes a long time to make batik, it has become a secondary job besides farming. Which is to craft batik, it takes time and particular skills that should not be dismissed as a side work (Siropolis, 1994).

Even in Purworejo, it does not familiar that there is Batik with a unique pattern which originally from Purworejo. It has close relation with the vernaculars, social capacity, and the local customs that have been lost in general society. Nowadays, it can be seen that no one needs to wear original Batik because they will be considered as traditional people by society. Besides, teenagers nowadays is about lifestyle (Day, 1999).

The infrastructure such as electricity is often need more support for batik crafting, hence, the instability of lighting to maintain the process of making batik during the night need more precision. Aside from the use of traditional lightning, it also needs improvement. If the deficiency during the process being listed, it would take long list. It seems that every process to made Batik is not following the improvement of technology (Alma, 2010).

5. CONCLUSION AND RECOMMENDATION

Although batik Purworejo had been famous now, there are several issue regarding this problem that need a solution.

Since mostly Batik industries are run by small enterprise, the support is needed from the local government because, batik Purworejo has their unique pattern that can be considered as local heritage according to the UNESCO. UNESCO declared that Batik was as a human Non Physical heritage from Indonesia. The support is also required from the people of

Purworejo, they should be proud and love to wear and participate in preserving their wealth of Batik Purworejo. Let the future generation know that it is okay to learn and wear foreign fashion. However, it needs to guide and guard them at the same time and should not ignore the heritage, did not let them become apatism for national heritage.

Based on the educational point of view, local government should obtain the activities outside the academics which are known as the extracurricular activities in the early stage of school as elementary school. The students should be familiar with Batik, the process of making, and designing it. For senior or higher education level, they can start to like Batik compete in fashion show with other school or invite school from other regency to implement the program. However, they should adequate knowledge first. The information regarding Batik should be a part of the program. Building their self-esteem through the cultures and made them love it.

For the batik industries which include as small enterprise need more improvement for the physical equipment to maintain the sustainability of production, training for successor or younger generation since new generation mostly choose another job sector, improvement on the logistic regarding the production material of batik crafting can save time also obtain a better price.

Local government also needs to realized that batik Purworejo is a heritage that needs support and attention by relevant trainings, support for basic infrastructure such as electricity and access for funding. Associated with the Balai Batik under the Ministry of Industry and utilizing it to its maximum potential, upgrade the knowledge and skill and the function of technology to empower the craftsmen and entrepreneurs of Batik Purworejo, by organizing the batik trainings in 154 Batik centrals.

The information and the right market, by collaborating with the trading agency and also local governments, they can propose and send the competent and approved Batik entrepreneurs to join exhibitions within the country and even internationally. Local government can make a suggestion for the entire employee to wear Batik in a specific day, not just ordinary Batik but especially for Batik Purworejo. The government should be responsive in dealing with this issues by oversee our own culture heritage.

* * * * * *

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FINANCIAL, ECONOMIC AND ADMINISTRATIVE METHODS OF PUBLIC ADMINISTRATION THAT PROVIDE THE RIGHT FOR HEALTHCARE TO PERSONS WITH DISABILITIES

Ensuring the right of persons with disabilities for healthcare is one of the main tasks of state policy in the field of healthcare. The implementation of the tasks of the state policy on ensuring the right for healthcare for persons with disabilities is carried out by means of financial, economic and administrative methods of public administration. Along with the administrative methods of public administration of the right for healthcare for persons with disabilities, another group of methods that ensure the right for healthcare for persons with disabilities is important - the adoption of programs for economic development of healthcare, adoption and financing of rehabilitation programs for persons with disabilities, provision of medical measures of separate state programs and complex measures based on program principles, realization of pilot projects on change of the mechanism of financial maintenance of operative treatment with transplantation of organs and other anatomic materials, etc. Therefore, we will pay attention to the problems of application of financial, economic and administrative methods of public administration of the right of persons with disabilities for healthcare

Keywords: healthcare, person with disability, economic methods of public administration, administrative methods of public administration, disability.

1. INTRODUCTION

The main purpose of economic methods of public administration in ensuring the right for healthcare of persons with disabilities is the creation of economic conditions that arouse interest in performing certain work, increasing productivity and, consequently, providing financial support. When applying economic methods of management, the subject of management achieves the proper behaviour of the managed by influencing their material interests. For this purpose, the prospects of material advantages and the threat of material

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sanctions can be used to the same extent (Kolpakov, 1999). These methods should be used to regulate the activities of so-called non-profit institutions, taking into account, for example, how rationally they spend their own material resources received from the provision of paid services, lease of state property and real estate (Ihnatchenko, 2009).

2. LITERATURE REVIEW

Some issues of the study of economic and administrative methods of public administration, providing persons with disabilities with the right for healthcare were the subject of the research of administrators: V. Averyanov, S. Alekseyeva, N. Armash, D. Bakhrakh, Yu. Bytyak, O. Dzhafarova, Ye. Dodin, R. Kalyuzhnyi, S. Kivalov, L. Koval, T. Kolomoyets, V. Kolpakov, A. Komzyuk, L. Kozhura, O. Kuzmenko, V. Kurylo, I. Lychenko, D. Lukyantsya, P. Lyutikova, T. Matselyk, R. Melnyk, O. Mykolenko, D. Priymachenko, A. Sotska, S. Tykhomyrov, V. Chorna, V. Shkarupa and others. The following scientists devoted their works to the issues of social protection of persons with disabilities, realization of the rights of persons with disabilities: M. Avramenko, V. Azin, L. Bayda, S. Bogdanova, N. Boretska, S. Burov, Y. Grybalskyi, Ye. Libanova, L. Koleshnya, M. Kravchenko, O. Krasyukova-Enns, O. Makarova, K. Mishchenko, Yu. Nayda, V. Skurativskyi, V. Sushkevych and others.

An effective way to ensure the right for healthcare for persons with disabilities is to use financial, economic and administrative methods of public administration.

The first part of the article examines economic methods of public administration that provide people with disabilities with the right for healthcare. The second part reveals the concepts and types of administrative methods of public administration that provide persons with disabilities with the right for healthcare. The conclusions suggest the ways to improve legal understanding and types of financial, economic and administrative methods of public administration that provide persons with disabilities with the right for healthcare.

3. RESULTS AND DISCUSSION

It should be noted that in the process of administrative and later medical reforms, the methods of regulatory influence (indirect management), among which the leading place is occupied by economic management methods, are of considerable importance. Their application ensures the meeting of financial and material interests of management objects through the activities of its subjects, which create favourable conditions for achieving the goals and objectives of management, for example, local governments within their competence may finance local programs of development and support of public health facilities, including the renewal of material and technical base, overhaul, reconstruction, increase of salaries of medical workers ("local incentive programs"), as well as local programs of medical services, local public healthcare programs and other programs in the field of healthcare. (Law of Ukraine, 2018).

Economic methods may include material incentives through a system of specially created funds that accumulate and distribute budget funds for healthcare together with private capital; identify priority areas for financing and promoting the development of medical care for persons with disabilities; provide funding for training and retraining programs for specialists who provide medical care for people with disabilities; to redistribute funds from state, local and other sources for treatment of certain types of

diseases; establish a system of grants and trust funds for application of various mechanisms for controlling the use of resources etc.

Thus, economic methods are manifested in the creation of such conditions for development of subordinated objects, under which they, influenced by certain material and financial incentives, can independently choose one or another behaviour. However, this choice is still based on the traditional "residual" principle of public funding for healthcare, which, unfortunately, cannot be overcome in the near future. Economic methods can be applied on a relatively limited scale. Therefore, we should look for new methods of comprehensive investment in healthcare, including sources of funding healthcare for people with disabilities through the use of budgets at various levels, attracting charitable contributions (development of philanthropy and sponsorship), expanding the scope of business in the studied sphere of administration.

It should be noted that the application of economic methods of public administration of the right for healthcare for persons with disabilities requires the search of specific performance indicators of subordinated objects, as well as special criteria for assessing its effectiveness.

Thus, in the state budget of Ukraine for 2018, the expenditures according to the functional classification of expenditures and budget lending for healthcare and social protection, including for persons with disabilities, were as follows:

- measures for rehabilitation of patients with cerebral palsy 14,154,000.00 UAH;
- implementation of a pilot project to change the mechanism of financial support of surgical treatment of organ transplantation and other anatomical materials 112,015,300.00 UAH;
- provision of primary medical care to the population 8,054,517,600.00 UAH;
- subvention from the state budget to local budgets for the purchase of consumables for healthcare facilities and drugs for inhalation anaesthesia 18,972,600.00 UAH;
- subvention from the state budget to local budgets to reimburse the cost of medicines for treatment of certain diseases 1,000,000,000.00 UAH;
- specialized prosthetic, orthopaedic and medical rehabilitation care for the disabled in the clinic of the Research Institute of Prosthetics, Prosthetic Construction and Rehabilitation 23,384,300.00 UAH;
- measures for social protection of children, families, women and other most vulnerable categories of population 100,789,900.00 UAH;
- provision of one-time financial assistance to family members of persons who perished (died) during the participation in the anti-terrorist operation, and to the persons who received a disability group during the participation in the specified operation 48,748,700.00 UAH;
- one-time financial assistance to a family member of a volunteer who died while providing volunteer assistance in the anti-terrorist operation zone, and to a volunteer who became a person with disability due to an injury received during the assistance – 815,700.00 UAH.

Instead, in accordance with the Law of Ukraine "On State Budget – 2019", the following expenditures were planned for the field of healthcare to ensure directly the implementation of the right for healthcare for persons with disabilities:

• subvention from the state budget to local budgets for purchase of medicines and medical devices to provide emergency medical care – 137,992.30 UAH;

- subvention from the state budget to local budgets for purchase of angiographic equipment – 150,000.00 UAH;
- subvention from the state budget to local budgets to reimburse the cost of medicines for treatment of certain diseases 250,000.00 UAH;
- subvention from the state budget to the district budget of Valky district of Kharkiv region for the purchase of a computer tomograph for the municipal healthcare institution "Valky Central District Hospital" 12,500.00 UAH;
- advanced training of employees of the social protection system 644.10 UAH;
- specialized prosthetic, orthopaedic and medical rehabilitation care for persons with disabilities in the clinic of the Research Institute of Prosthetics, Prosthetic Construction and Rehabilitation 26,768.90 UAH;
- measures for social protection of children, families, women and other most vulnerable categories of population – 95,570.30 UAH;
- rehabilitation and recreation of children in need of special attention and support in children's health camps ICC "Artek" and CC "Young Guard" 217,192.10 UAH;
- sanatorium treatment of war veterans, persons covered by the law of Ukraine "On status of war veterans, guarantees of their social protection", "On victims of Nazi persecution" and persons with disabilities 193,165.90 UAH;
- measures for psychological rehabilitation, social and professional adaptation, provision of sanatorium treatment to victims of the Revolution of Dignity, participants of the anti-terrorist operation and persons who carried out measures to ensure national security and defence, repel and deter armed aggression in Donetsk and Lugansk regions – 110,905.60 UAH;
- financial support of public associations of persons with disabilities having the status of all-Ukrainian associations 89,362.40 UAH, including financial support of the National Assembly of Persons with Disabilities of Ukraine, enterprises and organizations of non-productive sphere of the Ukrainian Society of the Blind and the Ukrainian Society of the Deaf and the Union of Organizations of Persons with disability of Ukraine 76,025.90 UAH;
- measures for social, labour and professional rehabilitation of persons with disabilities
 1,335,591.00 UAH;
- ensuring the activities of the Fund for Social Protection of the Disabled 85,678.00 UAH:
- rehabilitation of children with disabilities due to cerebral palsy 130,022.60 UAH;
- subvention from the state budget to local budgets for payment of monetary compensation for housing for families of persons specified in the clauses 5–8 of paragraph 1 of Article 10 of the Law of Ukraine "On status of war veterans, guarantees of their social protection" for persons with disabilities of the groups I–II, which occurred as a result of injuries, contusions, traumas or illnesses received during direct participation in the anti-terrorist operation, ensuring its implementation, taking measures to ensure national security and defence, repulse and deter armed aggression of the Russian Federation in Donetsk and Lugansk regions, their implementation, defined by paragraphs 11–14 of the second part of Article 7 of the Law of Ukraine "On status of war veterans, guarantees of their social protection", and which require improvement of living conditions 305 145.3 UAH (Law of Ukraine, 2019);

• subvention from the state budget to local budgets for payment of monetary compensation for housing to internally displaced persons who defended the independence, sovereignty and territorial integrity of Ukraine and participated directly in the anti-terrorist operation, ensuring its implementation, being directly in the zones of the anti-terrorist operation, during implementation of measures to ensure national security and defence, repulse and deter the armed aggression of the Russian Federation in Donetsk and Lugansk regions, ensuring their implementation, being directly in the districts and during the implementation of these measures, and recognized as disabled of the III group in accordance with paragraphs 11–14 of the second part of Article 7, or combatants in accordance with paragraphs 19–20 of the first part of Article 6 of the Law of Ukraine "On status of war veterans, guarantees of their social protection" and in need of better living conditions – 25 000,00 UAH (Law of Ukraine 2018, Appendix 3).

At the same time, we note that, in accordance with the expenditures of the State Budget of Ukraine planned for the year 2020, the costs of healthcare for persons with disabilities are as follows:

- public health and fight against epidemics 2,121,032.80 UAH;
- creation of a modern clinical base for treatment of cancer at the National Cancer Institute – 700,000 UAH;
- implementation of the state investment project "Improvement of molecular genetic diagnosis of cancer in Ukraine" 100,000 UAH;
- sanatorium treatment of patients with tuberculosis and children and adolescents with somatic diseases – 573,390.40 UAH;
- specialized prosthetic-orthopaedic and medical-rehabilitation care for persons with disabilities in the clinic of the Research Institute of Prosthetics, Prosthetic Construction and Rehabilitation 34,500.70 UAH;
- measures for social protection of children, families, women and other most vulnerable categories of population – 66,019.80 UAH;
- annual one-time assistance to war veterans and victims of Nazi persecution and social assistance to persons who have special labour merits to the Motherland – 1,382,540.60 UAH;
- social protection for persons affected by Chornobyl accident 2,570,195.0 UAH (Law of Ukraine, 2019).

It should also be noted that in 2020 a new mechanism was introduced to provide rehabilitation measures for children with disabilities due to cerebral palsy on the principle of "money follows a person", which should ensure targeting, transparency and improve the quality of rehabilitation services. In pursuance of the Law of Ukraine "On State Budget of Ukraine – 2020", which provides for expenditures under the budget program 2507100 "Rehabilitation of children with disabilities due to cerebral palsy" the Cabinet of Ministers of Ukraine adopted a program "On approval of the Procedure for use of funds provided in the state budget for rehabilitation of children with disabilities due to cerebral paralysis in 2019" dd. 27.03.2019 No. 309 (Law of Ukraine, 2019).

The procedure for using the funds provided in the state budget for rehabilitation of children with disabilities due to cerebral palsy in 2020 stipulates that the main administrator of budget funds is the Ministry of Social Policy. Managers of lower level budget funds are: Social Protection Fund for the Disabled – responsible executor of the budget program;

executive body in the Autonomous Republic of Crimea on issues of social protection of population, structural subdivisions on issues of protection of the population of regions, Kyiv City State Administration; structural subdivisions on social protection of population of district, Kyiv local state administrations, city executive bodies, district councils (in case of their formation) (hereinafter – local bodies) (Ministry of Social Policy of Ukraine, 2020).

Funds are distributed on a vertical basis – initially between regional authorities, which, in turn, distribute budget funds among local authorities in proportion to the number of children in need of rehabilitation, according to their place of residence (stay) and individual rehabilitation programs (Ministry of Social Policy of Ukraine, 2020). It should be noted that on the basis of the appeals of these entities the redistribution of funds allocated for implementation of rehabilitation measures can be made.

These program-targeted economic methods of public administration of the right of persons with disabilities for healthcare are applied to healthcare institutions of any form of ownership and organizational and legal form, providing medical care for persons with disabilities and (or) their rehabilitation on the basis of appropriate license and professional activity of medical (pharmaceutical) workers who have a license to conduct business in medical practice in order to reimburse the cost of rehabilitation measures for children in need of rehabilitation measures.

Thus, the use of funds provided in the state budget for rehabilitation of children with disabilities due to cerebral paralysis by local communities is an effective method of public administration of the right for healthcare of persons with disabilities.

Another effective economic method of public administration of the right for healthcare of persons with disabilities is to develop a mechanism for using funds provided in the state budget by local communities to purchase specially equipped vehicles for transportation of persons and children with disabilities of musculoskeletal system. The application of this method will provide an opportunity to encourage local communities to create transportation services for people with disabilities, especially people in wheelchairs. The implementation of these measures will positively contribute to the removal of barriers in the lives of people with disabilities.

The mechanism of application of this economic method of public administration of the right for healthcare of persons with disabilities is approved in the resolution of the Cabinet of Ministers of Ukraine dd. March 14th, 2018 No. 189 "Some issues of using funds provided in the state budget for persons and children with disabilities of musculoskeletal system" (Law of Ukraine, 2018). It should be noted that in accordance with the budget program 2507030 "Measures for social, labour and professional rehabilitation of persons with disabilities" 30,000 thousand UAH were provided for the year 2019 in this sphere.

We also note that the economic methods of public administration of the right for healthcare for persons with disabilities, in our opinion, also include: targeted approach to provision of technical and other means of rehabilitation of persons with disabilities; provision of persons with disabilities according to the principle of "money follows a person"; payment of compensation for self-purchased rehabilitation equipment etc.

The next type of public administration that provides people with disabilities with the right for healthcare is administrative one.

Administrative methods of public administration should be understood as a set of methods and tools used in their activities by public administrations in order to influence the behaviour of individuals. An entity that uses the administrative method is an authority that performs administrative functions, including if they are delegated to it. At the same time,

the object is the behaviour and actions of persons influenced by the subject of power. The use of administrative methods of public administration is aimed at ensuring the right of persons with disabilities for healthcare. Administrative and legal methods are inseparable from the process of exercising executive power, public administration cannot be supplanted by civil law categories of the contractual type. It is also obvious that the methods play a crucial role in ensuring proper legal order, the level of state discipline (Kolpakov, Kuzmenko, 2003).

The administrators Yu.P. Bytyak and V.M. Garashchuk suggest to understand the administrative and legal methods of public administration as the ways and receptions of direct and purposeful influence of executive bodies (their officials) on the basis of the competence assigned to them, within the established limits and the corresponding forms on the bodies subordinated to them, individuals and legal entities (Bytiak, 2001).

Yu. M. Kozlov divides administrative methods of public administration into two groups: non-economic (direct) ones and of economic (indirect) influence (Kozlov, 2003).

A.Ye. Lunyov proposes to apply the methods of public administration into four independent groups: moral and political, economic, organizational, administrative and directive ones (Lunev, 1970).

G.V. Atamanchuk – also divided into four groups: moral and ideological, sociopolitical, economic, administrative one. There are other approaches, when individual, collegial, collective, combined methods, etc. are outlined (Atamanchuk, 2003).

It should be noted that the lack of a single classification of methods of public administration indicates the different purpose of their use, delimitation and grouping of means and methods of influencing the consciousness and behaviour of people in the process of public management as to public administration of any given human right. The same applies to the right of persons with disabilities for healthcare.

The use of public administration methods is always carried out due to meet objective needs, in this case it is about ensuring the right of persons with disabilities for healthcare. That is why the methods used to ensure the right for healthcare of persons with disabilities must be objectively determined, and those that ensure the implementation of international principles on accessibility, equality and freedom of access to quality and timely medical care and a barrier-free environment.

Administrative methods are characterized by relations such as "power – subordination", they most clearly express the administrative nature of the management activities of public administration entities that ensure the right for healthcare of persons with disabilities. The use of administrative methods allows the subject of this activity (for example, the Ministry of Social Policy of Ukraine, the Ministry of Healthcare of Ukraine) to influence the object of activity directly (public relations arising in the process of exercising the right for healthcare of persons with disabilities). However, in case of reorganization, the objects, whom the administrative methods are applied to, may influence the activities of authorized entities, such as public organizations of persons with disabilities, their unions, which are established to ensure equal rights and opportunities for persons with disabilities and their social protection as well as for public control over the observance of rights of persons with disabilities, representation of their interests and elimination of any manifestations of discrimination against persons with disabilities and have the right to enjoy the benefits and preferences provided by law (Law of Ukraine 1991).

According to the method of influence, administrative methods are divided into those that oblige to perform certain actions, and those that authorize to perform certain actions;

encouraging socially useful actions; prohibiting the commission of any actions (Bandurka, 1998). For example, the Decree of the President of Ukraine "On Measures to Ensure Respect for Rights of Persons with Disabilities" of the Cabinet of Ministers of Ukraine instructed local executive bodies to ensure and to analyse additional measures to intensify the work on implementation of the provisions of the Convention on the Rights of Persons with Disabilities with the involvement of public associations that care for persons with disabilities. Instead, Art. 9 of the Law of Ukraine "On Fundamentals of Social Protection of Persons with Disabilities" authorizes central and local executive bodies, local governments with the participation of public organizations of persons with disabilities, within its powers to develop and coordinate long-term and short-term programs for implementation of public policy regarding persons with disabilities and monitor their implementation (Law of Ukraine 2007, Article 9). And the resolution of the Cabinet of Ministers of Ukraine "On approval of the procedure for granting permission for the right to use tax benefits for enterprises and organizations of public organizations of the disabled" provides for state incentives for enterprises and organizations established by public organizations of the disabled by granting permission for the right to use tax. Legislation, guaranteeing the right for healthcare of persons with disabilities, prohibits discrimination on the grounds of disability.

Thus, the application of administrative methods of public administration of the right of persons with disabilities for healthcare is carried out in order to ensure:

- free and equal opportunities for persons with disabilities to exercise their right for healthcare;
- 2) purposefulness of administrative activity of competent subjects of public administration;
- 3) ensuring the legitimacy of the behaviour of participants in administrative relations;
- 4) ensuring the interaction of all participants in administrative relations public administration bodies, public associations, persons with disabilities.

In view of the above, the administrative methods of public amnesty for the right for healthcare of persons with disabilities, in our opinion, should be divided into 4 groups.

The first group is intended to ensure the proper quality of the administrative process, when the governing bodies (officials) adjust their own decisions to the needs of management objects. These are the means, methods and actions associated with preparation and implementation of administrative decisions, their legal consolidation, organization and control over their implementation benefits (Ihnatchenko, 2009).

The second group is designed to ensure the proper functioning of enterprises, organizations and institutions in the field of healthcare, which ensure the exercise of the right for healthcare of persons with disabilities. Their specificity is manifested mainly in the impact on direct activities of these objects, which necessitates the search for effective tools and techniques for a particular system (subsystem) of public administration of the right for healthcare of persons with disabilities. These methods are derived from the methods of the first group, as they specify the content of the latter in relation to the local range of objects and are implemented in all parts of the administrative system of healthcare facilities, especially its basic level – departments and divisions of local administrations or local governments.

Despite the importance of the activities of public administration entities that guarantee the right for healthcare of persons with disabilities, the first and second groups of methods have a coordinating and regulatory impact directly on the activities of public administration

bodies in the field of healthcare. At the same time, the full achievement of the goals and objectives of the state to guarantee the right for healthcare of persons with disabilities is impossible without introduction of methods of direct (immediate) influence. These methods, which are traditionally called administrative, are characterized by one-sided governmental influence of the subject of management on the object. They are manifested in the issuance of orders, decisions, for non-compliance with which the object of management may be held administratively or disciplinary liable (Dorokhova, Kozyreva, Serhyenko, Shabailov, 1988). As noted in the literature, among the factors that led to the deterioration of the situation in some areas of public administration (including public healthcare) the following should be mentioned: the lack of an optimal combination of centralization and decentralization; underestimation of the administrative-legal method of regulation of public relations, and sometimes its mixing with administration or administrative-command style of management (Bytiak, 2001). We are currently talking about the application of the third and fourth groups of methods of public administration of the right for healthcare of persons with disabilities, which we have identified.

The experience of world development shows that the processes of transformation of public relations in the field of healthcare, including the provision of the right for healthcare of persons with disabilities must be managed, including the use of methods of direct influence. However, we emphasize that the very content of operating with these methods should be changed taking into account the needs of people with disabilities. Their use is appropriate, for example, to eliminate or compensate for the consequences caused by persistent health problems, functioning of the system of maintaining the, mental, social well-being of persons with disabilities, and helping them to achieve social and material independence.

The third group of methods of public administration of the right for healthcare are the methods that have a service nature of ensuring the right for healthcare of persons with disabilities. This is a permit, registration, licensing.

Enterprises and organizations established by public associations of persons with disabilities have the right to obtain a permit for the right to use tax benefits. The subject of this type of permit is a central executive body that implements the state policy in the field of social protection of persons with disabilities, war veterans (Ministry of Social Policy of Ukraine), regional, Kyiv city state administration. The permit can be issued for a quarter, half a year, three quarters, a year.

Permission to enterprises with branches, separate subdivisions (if any) and organizations established by public associations of persons with disabilities is granted provided that they meet the following criteria: 1) the number of persons with disabilities who have their main place of work at enterprises and organizations, makes not less than 50 percent of the average number of full-time employees of the accounting staff during the previous reporting (tax) period; 2) the remuneration fund of persons with disabilities who have the main place of work at enterprises and organizations during the reporting period is not less than 25 percent of the total labour costs that are part of the costs in accordance with the rules of corporate income tax; 3) the amount of costs of the enterprise, organization for processing (other types of transformation) of raw materials, components, other purchased goods (services) used for manufacture of goods (services) directly by enterprises, organizations, is not less than 8 percent of the supply price of such manufactured goods (provision of services); 4) the amount of the average monthly salary in the equivalent of full employment of persons with disabilities who have the main place of work at enterprises, organizations, must be not less

than the legally established amount of the minimum wage; 5) implementation by enterprises, organizations of decisions of the Ministry of Social Policy and regional, Kyiv city state administration (Law of Ukraine, 2007).

In our opinion, the permission for the right to use tax benefits granted to enterprises and organizations established by public organizations of persons with disabilities is an effective means of public administration of the right for healthcare for persons with disabilities for the following reasons:

- it creates financial preferences and incentives for enterprises and organizations established by public organizations of the disabled to attract persons with disabilities to work.
- 2) a person with disability who is engaged in labour activity is more mobile, involved in social life, is in contact with the environment and people, which provides not only labour but also physical employment;
- 3) employment of persons with disabilities is an additional source of income for the latter, in addition to social assistance established by the state. higher income of a socially vulnerable person allows him/her to receive not only free medical care, which unfortunately, today, does not always meet the needs of a person with disabilities, but also to pay for paid medical services that he/she needs due to his/her health and special needs.

The next method of public administration of the right to health of persons with disabilities is registration. The main entity carrying out registration activities is the Ministry of Social Policy of Ukraine and its structural subdivisions.

For example, a person with disability, a child with disability who is registered as an internally displaced person, have the right to receive social services in accordance with the legislation of Ukraine at the place of registration of the actual place of residence of such an internally displaced person. An internally displaced registered person from among persons with disabilities, a child with a disability have the right to be provided with technical and other means of rehabilitation, to receive rehabilitation services in accordance with the legislation at the place of residence. Provision of technical and other means of rehabilitation, provision of rehabilitation services is carried out in the presence of the necessary documents confirming the right for these services and means, and in case of their absence – according to the Centralized Disability Data Bank (for re-applicants) and individual program rehabilitation of a person with disability, a child with disability in the manner prescribed by the Cabinet of Ministers of Ukraine (Law of Ukraine, 2014, art. 7).

Additionally, the Ministry of Social Policy of Ukraine carries out registration activities on: registration of internally displaced persons for the right to obtain registration of employers and data on employment of persons with disabilities; registration of medicines necessary for persons with disabilities; maintaining a register of persons with disabilities.

Carrying out the registration activity of authorized subjects of public administration ensures the right for health protection of persons with disabilities by:

- providing the opportunity to monitor the number of persons with disabilities and, accordingly, to forecast the necessary quantitative and qualitative indicators of medicines, organization and implementation of rehabilitation measures, etc.;
- 2) the possibility for different categories of persons with disabilities to receive equal and free expression of the right for healthcare.

The next service for public administration of the right for healthcare for people with disabilities is licensing.

So, for example, in accordance with the provisions of the resolution of the Cabinet of Ministers of Ukraine "On approval of licensing conditions for business activities for production of medicines, wholesale and retail trade in medicines, import of medicines (except active pharmaceutical ingredients)" a licensee, who carries out activities in the retail sale of medicines, creates the necessary conditions for the accessibility of persons with disabilities and other low-mobility groups to the premises in accordance with state building codes, regulations and standards. In the absence of the necessary conditions for accessibility of persons with disabilities and other low-mobility groups to the premises in accordance with state building codes, rules and standards a license to conduct business in manufacture of medicines, wholesale and retail trade in medicines, import of medicines (except active pharmaceutical ingredients) is not provided.

Thus, through licensing activities, the public administration has the opportunity to regulate the issues of accessibility and unimpeded access to public places for people with disabilities, which will ensure their right for healthcare. In this case, we mean the accessibility and creation of a barrier-free environment for people with disabilities to visit healthcare facilities, including pharmacies, clinics, and other medical facilities, where a person with disability can receive the necessary medical care or medical service.

The fourth group of administrative methods of public administration of the right for healthcare for persons with disabilities are methods that have the managerial nature of ensuring the right for healthcare for persons with disabilities. These, in our opinion, should include: monitoring, accounting, standardization, certification of employees working with persons with disabilities, control, supervision, administrative liability for violations of the rules that ensure the right for healthcare of persons with disabilities.

The main method of public administration of the right for healthcare of persons with disabilities is the method of control. In the most general sense, the concept of "control" means observation, supervision of anything, in order to verify the conformity of certain actions in the field of production, public administration or behaviour of citizens (Krutskykh, 1999). Control is also understood as checking the implementation of decisions or responsibilities imposed by the state and society on enterprises, institutions, organizations, officials and citizens, compliance with legal and social norms, elimination of deviations from specified programs of activities and regulatory requirements (Tsvietkov, 1998).

A wide range of public administration entities monitor the right for healthcare of persons with disabilities. For example, the Ministry of Healthcare is the main body in the systems of central executive bodies that ensures formation and implementation of state policy in the field of development, production, quality control and sale of medicines, medical immunobiological drugs and medical devices.

In its turn, the Ministry of Social Policy of Ukraine monitors: compliance with the legislation of governing legal relations in the field of social protection of persons with disabilities; production of technical and other means of rehabilitation; compliance of medical devices, technical and other means of rehabilitation with the requirements established by the legislation. The State Architectural and Construction Inspectorate of Ukraine exercises control in the field of housing and communal services to take into account the needs of persons with disabilities during the design, construction, reconstruction and repair of public and civil facilities, landscaping, transport infrastructure, road service with the involvement of representatives of public associations that care for people with disabilities (Law of Ukraine, 2016).

A passive form of control is monitoring. In the dictionary literature, monitoring is proposed to be understood as a continuous observance of a process in order to identify its compliance with the desired result. Based on this, it becomes obvious that these concepts are close in meaning, however, like supervision, monitoring cannot be equated with control. As rightly noted by O.F. Andriyko, monitoring should be considered as a kind of control, its certain form, which, in comparison with supervision, the consequences of the impact, can be attributed to its passive form. The use of monitoring is associated with the absence of a situation or process in the field of administration, limiting the impact of administrative decisions, legal acts on existing public relations. At the same time, not so much inspection and audit as observation and analysis are used as methods of such activity (Averianov, 2002).

Monitoring as a method of public administration of the right for healthcare for persons with disabilities is carried out in several areas:

- 1) monitoring the living conditions of persons with disabilities in residential institutions and in case of violations taking appropriate response measures;
- 2) weekly monitoring, which data are taken to ensure proper social support for wounded members of the ato;
- 3) monitoring of measures to ensure unimpeded access for persons with disabilities to residential and public facilities in accordance with the register of such facilities;
- 4) monitoring of the availability of social and engineering-transport infrastructure facilities;
- 5) monitoring of the provision of medicines, rehabilitation aids, etc. to persons with disabilities.

An integral part (element) or administration that provides a systematic review of the Constitution, laws of Ukraine, other regulations, discipline and law and lies in identification and prevention of offenses, elimination of their consequences and bringing the perpetrators to justice, without the right to interfere in operational and economic activity of supervised objects, change or cancellation of administrative acts, there is **supervision** (Bytiak, 2001). The Ministry of Healthcare of Ukraine is the main entity that carries out state supervision over the observance of legislation that guarantees the right for healthcare for persons with disabilities.

Thus, in the process of administrative activity of public administration bodies of the right for healthcare of persons with disabilities at all stages of state provision of this right the various methods of administrative activity are used, among which methods of public administration prevail which have service and administrative nature. At the same time, the methods of regulating their own functioning (methods of the first group) and methods of ensuring the implementation of the goals and functions of public administration of the right for healthcare for persons with disabilities (methods of the second group) are used in the activities of these bodies. The use of the methods of public administration of the right for healthcare of persons with disabilities identified and disclosed by us should be comprehensive and selective, according to specific circumstances, conditions, nature of application of relevant measures, features of referral (medical care, rehabilitation measures, social benefits etc.), the specifics of the implementation of an administrative function. Of course, when choosing and applying a specific method in the system of guaranteeing the right for healthcare for persons with disabilities, it is necessary to take into account the expediency and effectiveness of its application.

4. CONCLUSIONS

Thus, economic methods of public administration of the right of persons with disabilities for healthcare are a set of tools and methods used by authorized subjects of public administration in order to create such economic conditions that contribute to improving the health of persons with disabilities, ensuring accessible and unimpeded environment, improving the professional qualities of medical staff providing medical care to persons with disabilities, the implementation of rehabilitation measures, as well as creating other necessary conditions for integration of persons with disabilities into society.

Economic methods of public administration of the right of persons with disabilities for healthcare are implemented by:

- 1) Planning of expenditures for ensuring the right for healthcare for persons with disabilities in the state and local budgets.
- 2) Development, approval of comprehensive programs of social protection and support and rehabilitation of people with disabilities.
- 3) Development and implementation of rehabilitation measures for persons with disabilities.
- 4) Development of public-private partnership mechanisms to ensure the right for healthcare of persons with disabilities.
- 5) Financing from the state and local budgets for development of healthcare institutions that ensure the implementation of the right for healthcare of persons with disabilities, as well as the construction and commissioning of new rehabilitation centres etc.

In our opinion, it is expedient to divide administrative methods of public amnesty of the right for healthcare of persons with disabilities into 4 groups:

- 1) Methods that ensure the functioning of the relevant state bodies and local governments;
- 2) Methods that ensure the implementation of the goals and functions of this type of administration;
- 3) Methods that have a service nature of ensuring the right for healthcare of persons with disabilities (permits, registration, licensing);
- 4) Methods that have the managerial nature of ensuring the right for healthcare of persons with disabilities (monitoring, accounting, auditing, standardization, control, supervision, administrative liability for violation of the rules that ensure the right for healthcare of persons with disabilities).

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PECULIARITIES OF ENTERPRISE MANAGEMENT IN THE MARKET OF HOUSING AND UTILITIES SERVICES DURING THE REFORM OF THE INDUSTRY (EXPERIENCE OF FOREIGN COUNTRIES)

Housing and communal economy (HCS) is the most important element of both social and economic sphere of the national economy, a complex multi-branch industrial and technical complex. For Ukraine, the problems of development of housing and communal services are of particular importance due to the high level of depreciation of housing stock, the critical state of utilities infrastructure, low quality of services, high resource loss. All these and other factors for many years determine the social, environmental, political and other problems of functioning of the complex, and as a consequence, have a negative impact on the livelihood of the population and the efficiency of the functioning of enterprises, including other industries. Therefore, systematization of the problems of functioning of the housing and utilities sector and the definition of possible prospects for their solution is an urgent issue in modern economic conditions.

Keywords: reform, management, local self-government, associations of co-owners of apartment buildings, housing fund.

1. INTRODUCTION

For many years, Ukraine has carried out global market reforms, which affected all spheres of the national economy, both material and non-material – industry, agriculture, science, education, etc. Housing and utilities, unfortunately, remain one of the most backward and inefficient sectors of the Ukrainian economy: with the huge expenditure of human, financial and material resources the quality of utilities services is unsatisfactory. But it is one of the most significant and important industries, the state of which is of huge importance on the quality of life of the entire population. In the general process of reforming the Ukrainian economy, the problem of reforming the housing and utilities sector occupies a special place. Firstly, it is one of the largest sectors of the national economy, and secondly, this industry is the most socially important. If mistakes in the reform of, for example, the

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coal industry, will affect not directly, but indirectly and after a certain period, then any error in the reform of the housing and utilities sector will cause an immediate negative social reaction, destabilization of the political situation and unforeseen economic losses (Ломова, 2012).

Although the reform of the housing and utilities sector is currently a priority for the Ukrainian economy, most of the activities within the framework of the ongoing reform are aimed more at maintaining the current performance of the sector, rather than at its further development and improvement.

2. RELEVANCE OF THE TOPIC

Ukrainian housing and utilities services are in a state of severe crisis, as evidenced by the high degree of dissatisfaction of citizens, turning into housing and utilities riots. Reforming the housing and utilities services requires a comprehensive approach, systematic measures to improve the efficiency of its functioning. One of the main ways of reforms is to change cardinally the system of providing housing and utilities services, that is, the ways of managing the enterprises of this sector. An important condition for implementing the reform of housing and utilities services in Ukraine is the study of foreign experience of managing and providing housing and utilities services. This article considers the experience of development of institutions of house owners; public-private partnership; advanced training of management personnel employed in the sector; market competition in the industry (Копылов, 2008).

3. STATEMENT OF THE PROBLEM

The domestic practice of management of residential houses has not yet shown its effectiveness and functionality, also, the legislative framework of Ukraine does not give clear and unambiguous explanations on the issue of management of enterprises of the housing and utilities sector. To solve the problems associated with the management of the housing stock, it is advisable to turn to foreign experience, which introduces the most advanced knowledge in the sphere of industry management and regulation of relations between enterprises in the market.

The purpose of the article is to analyze the problems of management of enterprises of housing and utilities services in the conditions of reforming the industry. To solve this problem, it is necessary to analyze the experience of countries that have achieved significant results in the provision of housing and utilities services.

Issues of reforming of the sector, management of enterprises, regulation of relations between enterprises, consumers of its services and stakeholders, have long been considered by Ukrainian and foreign researchers, such as M. Lomova, V. Ignatov, S. Kirsanov, A. Kazarova, L. Bezzubko, S. Evseeva, M. Gerasimova, D. Slavata, E. Skridlovska, M. Karel.

4. PECULIARITIES OF THE FUNCTIONING OF HOUSING AND COMMUNAL SERVICES IN UKRAINE

Housing policy in Ukraine has undergone radical changes over the past 25 years. Its goals, principles of work, various tools and created, new sources of financing have been revised. Transformation of market conditions of management in this area continues today. Organization and management of housing construction in Ukraine since 2006 are carried

out by the Ministry of housing and communal services. At the same time housing issues are divided between two ministries: the first one is responsible for development and implementation of state housing policy and state policy and communal services; the second one is the central body of the government for urban planning and construction. The sources of funding for housing policy in Ukraine are also the regional and local budgets, as well as state programs to support mortgage lending for young families.

In 2008, to improve the efficiency and reliability of the housing and communal services and to ensure its stable development, the Law of Ukraine "National Program of reform and development of housing and communal services" was adopted (Розпорядження КМУ «Про схвалення Концепції розвитку системи державного регулювання діяльності суб'єктів природних монополій на ринку комунальних послуг». 09.07.2008, № 932).

In particular, the program was designed to ensure the functioning and dynamic development of housing, safety, and affordability of housing for all segments of the population adequate quality and quantity, stimulating investment in housing construction, elimination of monopolization of construction, reconstruction, and maintenance of housing stock and much more.

Local self-government bodies play a significant role in the process of providing housing and communal services in accordance with the competences established by the Law No. 280/97-VR "On Local Self-Government in Ukraine". The managing subjects in the housing and communal sphere can be a state management organization, homeowner's associations, or other association of tenants. (Закон України "Про місцеве самоврядування в Україні". Відомості Верховної Ради України (ВВР), 1997, № 24, ст.170)

In accordance with the Law of Ukraine No. 417-VIII "On peculiarities of exercising the right of ownership in an apartment building", management of an apartment building must provide favorable and safe living conditions for citizens, proper maintenance of common property in an apartment building, addressing issues of the use of said property, as well as providing utility services to citizens living in such building. (Закон України "Про особливості здійснення права власності у багатоквартирному будинку". Відомості Верховної Ради України (ВВР), від 14.05.2015 №417-VIII)

The presence in Ukraine of state programs for the development of the housing and utilities sector indicates that this sector is still centrally regulated by state authorities. As for the role of local governments in the implementation of state regulation in the relevant markets, despite the desire of a number of municipalities to retain their regulatory functions (mainly in tariff setting), under current conditions local authorities are not able to perform market regulation in the district heating, water supply and wastewater disposal markets for the following reasons:

- 1) local self-governments are owners of the respective enterprises, so as a regulator, they cannot make unbiased decisions with respect to their property;
- 2) local governments, having public utilities at their disposal, are not interested in the emergence of a private operator in the market (for example, in the supply of heat, water supply and sewage disposal, or in the generation of heat energy), which cannot but have an impact on regulation;
- 3) today for the implementation of professional regulation in the markets of district heating, water supply and sanitation, there are not enough trained specialists even for the central regulatory body, not to mention the opportunities for such regulation at the local level;

Housing and communal services include the housing stock and utilities. The housing and utilities management system is built around the basic business processes that represent housing and utilities services to consumers. Housing and communal services are divided into collective and individual services that create a public good. Consumption of housing and communal services is essential as it is aimed at satisfaction of basic physiological needs of the population, which makes it practically impossible to completely refuse their consumption or significantly reduce its volume. Most residential and non-residential facilities need these services. This leads to a constant demand and allows us to categorize the housing and utilities sector as socially important. During the reform of the housing and utilities sector, which has been going on for more than 25 years, there have been serious institutional transformations in this sphere. However, a number of unresolved problems and new difficulties have emerged.

Table 1 groups the main problems of the housing and utilities sector and their causes. Consumption of housing and communal services is of an urgent nature, as it is aimed at meeting the basic physiological needs of the population, which makes it practically impossible to completely abandon their consumption, or significantly reduce its volume. Most residential and non-residential facilities need these services. This leads to a constant demand and allows the housing and utilities sector to be categorized as socially important. The economic potential of the housing and utility sector is great. The housing and utilities sector is an attractive economic sector in many countries. The use of market mechanisms makes investing in the housing and utilities sector profitable. The sphere of housing and communal services is very promising for the development of small business and entrepreneurship. However, in order to start a business, small businesses need the support of the authorities, including financial support.

Table 1. Main problems of the housing and utilities sector and their causes.

Groups	Problems	Reasons	
Material and technical	Physical deterioration of fixed assets of engineering systems of the industry	For decades, worn-out funds have not been replaced due to lack of funding	
	Presence of dilapidated and emergency housing	Insufficient funding for new construction, inefficient use of budget funds	
Financial	Debts of payment of housing and communal services	Insufficient funding for new construction, inefficient use of budget funds	
	Investment unattractiveness of the industry	Lack of comprehensive plans for the development of municipal infrastructure Lack of government support for small and medium- sized businesses in the industry	
Legal	Imperfect legal and regulatory framework	Delays by regional and local governments in adapting legislation to local conditions	
Labor	Lack of highly qualified personnel in the industry	ed Low wages in the industry Insufficient num of educational institutions that train special in the industry	

The housing and utilities sector accounts for 20% of the total energy consumption, and 64% of enterprises have private and mixed ownership in the market of housing and utilities

services. There is a positive experience of attracting small business to the sphere of housing and communal services in Ukraine. A number of cities have converted certain services to the full payment by the population, which is attractive to private enterprises. This is especially true for the collection, transportation and recycling of solid domestic waste.

The efficiency of enterprises in the field of housing and utilities services, determined by a set of indicators, which include the quality of their services, resource conservation, effective financial management etc. is an important element of the development of a modern economy. In the course of work housing and utilities, enterprises face many difficulties, among which domestic researchers single out problems associated with the provision of quality services in the current economic environment, the lack of competent management, and the low level of legal and professional literacy of both owners and staff etc. (Евсеева, Герасимова, 2012).

However, the existence of several problems highlighted by domestic researchers often complicates enterprise management in the housing and utilities sector. The main problems faced by managers in the sector include:

- 1. Lack of qualified personnel, both managerial and manual laborers;
- 2. Low level of competition among companies, and a lack of serious control, which often results in an unsatisfactory quality of services;
- 3. Lack of strict and effective control mechanisms over the management companies, and thus, lack of consumers' influence on the companies in this field;
- 4. Unattractiveness of the sector for private investments due to a long payback period. (Хайруллина, Шакирова, & Зиннуров, 2014).

5. FEATURES OF THE FUNCTIONING OF HOUSING AND COMMUNAL SERVICES IN THE WORLD

The existing approaches to management of housing and utility services abroad basically boil down to the fact that municipal authorities regulate the work of private enterprises and protect the rights of the population and guarantee high-quality and uninterrupted services.

In such countries as the USA, Sweden, Finland, Germany, Poland, England management of housing and utilities sector is a kind of business. Management is carried out by management companies, which are remunerated for their work. The homeowners' association (association or partnership) is responsible for the maintenance of the building to the owners. (Deutsch-Tschechische Industrie- und Handelskammer. Zielmarktanalyse 2020 mit Profilen der Marktakteure. 01.07.2020). Table 2 shows the peculiarities of housing and communal services management in foreign countries. (Кицай, 2012).

Table 2 shows that abroad the forms of management of housing and communal services are very diverse. From the conclusion of individual contracts of each resident of an apartment house, or all residents of one house with different suppliers of resources, as in England and Germany, to the management of the sphere of housing and communal services with 100% municipal capital as in Poland.

Thus, having analyzed the situation with reform of the sphere of housing and communal services in different countries of the world it is possible to note that everywhere there was a privatization of the housing stock. The share of homeowners in the countries of Europe is from 50 to 80%. As for the United States, the share of homeowners is about 70 percent. If there are owners, there is a market for the provision of public services, which should meet the growing demand for high-quality services from homeowners. In some countries in

Europe and especially in Central Europe, the share of tenants is still large. In Scandinavia, this share is between 13–20%. In the U.S. about 30%. There is, however, a gradual tendency towards a decrease in their share. In socially oriented countries and countries of the former socialist camp, there is still municipal ownership of housing. Such housing is found in Sweden and the CE countries. Its share ranges from 3 to 18%. Such housing is mainly used for low-income groups of the population. As for management of housing and provision of housing and communal services, during the reform, it is carried out mainly with the help of management companies and homeowners themselves. And in the countries of Europe preference is given to the latter. Their share is about 70% in Finland.

Table 2. Features of management of housing and communal services in foreign countries

Country	Peculiarities of housing and utilities management	Result
Sweden	Existence of unions or associations of tenants who monitor the quality of housing services. Influence political parties have regional and local branches Existence of two models of payment for services: 1. "Discount model" - choosing and paying only for the services that the tenant needs. 2. The "depreciation model" - reduction of fees for services in case of careful handling of the property. Existence of a housing court.	Ensuring transparency of management structures and tariffs, suppressing corruption
Germany	Each apartment building is managed independently. It has its own "coffers", the number of contributions to which is determined at the general meeting. For cleaning and maintaining cleanliness residents can hire a manager, but his services are paid for additionally. Each apartment owner concludes a contract with a supplier of resources - water, electricity, gas. Heating for each house is autonomous - the construction of a boiler room (boiler room).	Full autonomy of residents, minimizing costs
USA	There is a broad market for highly specialized services in the maintenance and repair of housing and maintenance of engineering networks and facilities. There is a need for highly skilled management and knowledge of the contracting market and technology. Each state has its own routines. Money for utility bills is automatically deducted monthly from the bank account. Housing tax in the U.S. is levied annually and is 13% of the market value of the property.	A highly specialized market for utilities. The absence of rent as such.
England	The existence of only private companies - suppliers of resources. Each resident chooses their own resource provider, and can change them if necessary, but no more than once a week. Resource providers can be different, for example, one sells electricity during the day and another at night.	Independent sourcing of resources to minimize rent
Poland	The housing and utilities sector is managed by a joint-stock company with 100% state (municipal) capital. All types of public utilities are combined into a single state-owned company. It manages finances, resource production and monitoring. Suppliers of resources may have different forms of ownership.	Providing quality services. Ensuring reliable operation of the housing and utilities sector

Table 2 (cont.). Features of management of housing and communal services in foreign countries

Country	Peculiarities of housing and utilities management	Result
Finland	The association of houses into joint-stock companies, 70% are managed by management companies (MC), 30% - independently. The MC is responsible for the daily management under a management contract. The contract contains a list of services, their rates and conditions of provision. The MC chooses the operating organizations to provide different kinds of services. Operating organizations provide housing and communal services independently or under contracts with specialized firms (repair and construction, landscaping, security, garbage collection, etc.). The operating organization reports annually to the residents on revenues and expenditures. In large cities, utility systems are in municipal ownership. Heating and water supply are centralized. Power plants may be privately owned.	Minimization of costs and application of advanced technologies (e.g., availability of backup oil stations during periods of low temperatures (-30° C) and the use of secondary heat from homes)

In all European countries during the reform of the housing and utilities sector there was a sharp increase in tariffs, in Eastern Europe they increased by more than 10 times. In the countries of Western Europe, the growth correlated mainly with the growth of energy prices and inflation and was about 2-3 times. It should be noted that sharp growth of tariffs was observed in the case of state and not always effective regulation. In Western Europe and the United States, tariffs are set in a decentralized manner, mainly by the organizations providing services in the field of housing and public utilities. (Brauer, 2003).

Many countries use public-private partnerships and concession agreements between private firms and municipal authorities to reform the housing and utilities sector. Concession agreements exist not only in the maintenance of infrastructure, but also in the construction of houses. The British and German models of housing and utilities management are somewhat different from other countries. Here all the systems of life support of the population have been transferred to private hands.

The analysis allowed us to group the common problems of management of housing and communal services in Ukraine and abroad. The solution of these problems will depend on the modernization of existing business processes.

In Europe, the management of housing and communal services is regarded as a separate business activity. In this case, the responsibility for the key management decisions in this area is vested in the association of homeowners, who are entitled both to sign a contract with a management company and to independently resolve all issues arising in the operation of housing. This increases the role of personal responsibility of each citizen for the condition of housing. In contrast to Ukraine, where the same attempt was made to delegate the responsibility for maintenance of premises, in most European countries the obligation of citizens to join homeowners' associations simultaneously with the purchase of real estate is legislatively fixed. This also leads to the fact that among contractors there is a growth of companies with highly specialized activities (for example, companies specializing only in the repair of engineering networks), allowing them to provide better services to the population, as well as to reduce costs (Васильева, 2006).

In most European countries, such as France, the Czech Republic, Slovakia, etc., management in the field of housing and utilities services is considered a separate type of business activity for which the management organization is paid by the premise's owners, and the liability to the owners for the maintenance of the building is borne by the homeowners' association. It should also be emphasized that the approach to the management of apartment buildings, which is followed by managers in most Western countries, is based on the fact that the management organization works based on an agreement with the association of homeowners, and not with individual owners.

To improve the economic efficiency of activities, service organizations in Eastern Europe have divided into more specialized organizations. Thus, market development goes in the direction of increasing competition between organizations with the same specialization, for example, maintenance of internal house heating is carried out by one company, maintenance of metering devices on heating systems - by the second company. Accordingly, the manager should know the contractor market, the advantages of the use of various technologies, be familiar with the prices, have different tools for financing, and act as a consultant of homeowners on these issues. The separation of management of apartment buildings into an independent type of activity contributes to the increase of proposals from professional managers and the formation of a competitive market of management services, the development of small and individual entrepreneurship in the field of management of housing.

An important feature of the legal regime of real estate in apartment buildings is that all owners of residential premises, along with the premises they own, own a share of the common property in the apartment building. The law establishes strict requirements for the owner to bear the obligatory common expenses on the maintenance of the common property in the apartment building. The burden of maintenance means not only bearing obligatory expenses, but also the duty of the owner to take measures to ensure safety, security, technical serviceability, and proper sanitary condition of the common property in the apartment building. The owner must make decisions and take care of the organization of the maintenance of the building. If the house does not meet legally established requirements for the safety and quality of residential real estate, all premises' owners in the house are equally responsible to state supervisory bodies (Ломова, 2012).

In Ukraine, the emergence of housing associations as well as housing management companies largely depends on the policies of local governments. It depends on them, first of all, whether equal conditions will be created for access to the market of housing services provider for enterprises of different organizational-legal forms of ownership (Копылов, 2008).

Interaction between municipal organizations and private companies can and should be conducted in a way that promotes reasonable competition. For example, when contracting out part of the scope of certain work, the municipal service is forced to enter into a competitive struggle with a private company. A positive effect can be achieved if the municipal organization only takes on the role of the developer of the terms of reference and the controller, monitoring compliance with the terms of the contract. However, in this case, the increase in productivity will occur only if the competition among private firms is high and there is no corruption (Васильева, 2006).

Public-private partnership in various infrastructure spheres has shown its high efficiency, which determines the feasibility of using its models in the process of improving the organizational and legal forms of relations between municipal governments and public

utilities. Thus, the experience of other countries shows a variety of forms of management of public infrastructure enterprises, allowing them to rationally distribute responsibilities and risks between the municipal and private businesses. The large-scale and complexity of the solution of economic, social, and other problems of management of housing and utilities services in Ukraine requires a comprehensive approach, the effective use of accumulated foreign experience, and its adaptation to the prevailing socio-economic and political conditions.

6. PROPOSALS FOR REFORMING THE MANAGEMENT PROCESS OF HOUSING AND COMMUNAL ENTERPRISES IN UKRAINE

Summarizing the diversity of theoretical knowledge and practical experience in the management of housing in developed countries, the following directions for reforming the management of housing and utilities enterprises in Ukraine can be proposed:

- A change in the mentality of homeowners, who perceive the maintenance of their housing stock as a burden of costs, while in most Western countries, citizens regard the purchase of housing ownership as an investment (investment) and understand maintenance as an activity that ensures the safety and proper condition of the property.
- 2. Transition to highly specialized service of apartment buildings. In the world practice of management of apartment buildings, the approach where the owners make management decisions within the framework of the association created by them a legal entity, and the execution of decisions are entrusted to a professional management organization based on the contract is most often used. This approach to the management of apartment buildings can be considered the best because management activities are carried out on a professional level, the quality of services corresponds to the needs and capabilities of homeowners, and the democratic norms of making management decisions by homeowners are respected. Also, an advantage for homeowners when creating a partnership is the possibility to control the spending of their funds (Игнатов, 2004). In Ukraine, it is characteristic that private housing organizations seek to provide the entire range of services for the management, maintenance, and repair of apartment buildings on their own. Such universality of management organizations leads to a significant deterioration in the quality of housing and utilities services.
- 3. Insurance of the activities of management companies. In most countries management in the field of housing and utilities services is considered to be a separate type of business activity that requires risk insurance. The market of housing and utilities services forms requirements to management companies, non-compliance with which makes a company uncompetitive. First of all, this applies to the insurance by the managing company (manager) of its civil and material responsibility arising if improper actions of the manager caused damage to the homeowner's property, which is especially developed in most countries of Europe and America. The introduction of this approach in the legislation of Ukraine will dramatically change the situation with the quality of housing and communal services (Кирсанов, 2011).
- 4. Information openness and transparency of management companies. The main complaints of Ukrainian citizens to management companies are related to a lack of

understanding of what constitutes tariffs for housing and utility services and how the cost of these components is calculated. Many people state regular unreasonable overpricing of tariffs by management companies directly in the payment documents. In this case, the experience of Finland and France, where information technology is an important component of public services, is useful. The collection and processing of information and the interaction of utilities (Brauer, 2003) companies with consumers and government agencies are automatic. In general, the entire process of personal interaction between the consumer and the service provider can take place via the Internet or other information resources (Казарова, 2015).

Thus, to solve the system problems in the sphere of provision of housing and utilities services in Ukraine, it is useful to study the positive international experience tested over time. At the same time, it is possible to build its unique model of management of multifamily residential buildings, which will be based on the best foreign analogs, but take into account the specifics and characteristics of the Ukrainian housing and utilities economy.

7. CONCLUSIONS

Although most enterprise management problems in the housing and utilities sphere must be solved at the legislative level, several points can be implemented by the enterprises already today. For instance, looking for contractors with narrower specialization, simplification of requirements for contractors to participate in tenders, looking for personnel with higher education and taking into account the personal qualities of the employee, interaction with educational institutions directly to attract potential employees, or formation of a new relationship with entrepreneurs who rent premises in apartment buildings.

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PECULIARITIES OF FINANCIAL AND LEGAL REGULATION IN THE FIELD OF TRANSPLANTATION: CURRENT STATE AND DEVELOPMENT PROSPECTS

Authors in the article analysed the current state and development prospects of financial and legal regulation in the field of transplantation. In the context of reforming the entire system of domestic health care, the problem of financial and legal regulation in the field of transplantation becomes relevant. The purpose of the article is to study the financial and legal regulation in the field of transplantation, highlight its problems and form the prospects for improvement. After a throughout analysis of all peculiarities of the transplantation in the light of law and medicine issues authors stated the barriers which should be lifted in order to open the production capacities of medical institutions in this area, which are now used by 15-25%, or not used at all. This, at present, is insufficient: with a huge demand for such operations, very few of them are carried out, and public funds are spent on the treatment of citizens abroad, although in Ukraine it would be many times cheaper.

Keywords: financial and legal regulation, regulatory and legal support, transplantation

1. INTRODUCTION

The development of the field of transplantation calls society into a so-called duel between transplantologists, the population and the state, since a significant number of questions and problems arise in various areas of this activity. Since, firstly, a significant number of patients are in great need of organ transplantation, which are extremely necessary for their life, without which, unfortunately, death will occur; secondly, society today cannot fully implement this activity due to imperfect regulatory and legal support and due to insufficient funding, which is not provided either by the state budget, or in the Government Program "Affordable Medicines", or financing it locally by individual territorial communities and the like; thirdly, medical professionals who start working in the field of transplantation, work without regulatory support, and thus expose themselves to relevant risks from a legal point of view.

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Accordingly, certain significant problems arise in the field of transplantation, without which it will be impossible to bring the area under study to the appropriate level of implementation, namely: 1) introduction and implementation of the principle of "presumption of consent" into the current legislation; 2) introduction of such instruments as transplantation "organ waiting lists"; 3) introduction of effective digitalization in the field of transplantation; 4) active grass-roots outreach; 5) introduction of the Unified database for registration of recipients and donors (i.e., those who have expressed a desire and have given their consent on their own or have the consent of relatives or persons replacing them for donation), as well as the Register of matching donor organs; 6) providing funding for the field of transplantation at all stages of its public administration (at the state and local levels), etc.

2. LITERATURE OVERVIEW

The problems of financial and legal regulation in the field of transplantation have been studied for many years from different points of view. So, S. Grinchak, considered these issues from the point of view of criminal law (Grynchak, 2017). Many scientists are in favour of the use of the "presumption of consent", since it will save many lives without requiring additional funding from the state budget, and it is also the most effective step to prevent illegal organ transplantation (Kraynik, 2017). The same topic was touched upon by (Mykhaylenko, Solovey, 2006; Musiyenko, 2004) and other researchers. Ya.A. Trinyova in her work pointed out that changes in legislation are important, while, first of all, she saw the need to deploy broad ideological work with the population (Trinyova, 2015). Today, both in the conditions of active reforming of the healthcare sector and with such a complex sanitary and epidemiological situation in the world, this problem is gaining significant relevance and scientific researches are being conducted to solve it.

3. RESEARCH AND DISCUSSION

In the past few years, the problem of transplantation of organs and anatomical materials to humans has received a new round of popularity both among scientists and among medical workers and the population.

This problem of transplantation is quite actively broadcast on television, on the Internet, on the pages of the print media, both in the form of stories about recipients awaiting transplantation of vital organs abroad, and on the part of public and charitable organizations that help carry out organ and other human anatomical materials transplantation.

We consider it expedient to look into the historical past of the formation and development of transplantation. The first mention of a successful transplant dates back to the 13th century. It is presented in the form of a legend about the life of the holy martyrs, doctors Cosmas and Domian, who were supposed to miraculously replace a sick leg with a healthy one taken from a dead person. This successful procedure is immortalized in paintings that are found in many countries. In subsequent centuries, similar information about transplantation is also found, although they have no historical confirmation. For the first time organ transplantation from a deceased person to a living one was performed in 1931 by V.P. Filatov at the Odessa Medical Institute. The doctor performed a corneal transplant from a deceased donor (Bryukhovetska, 2017). The origins of Russian transplantology are associated with the name of the outstanding surgeon N.I. Pirogov, who back in 1835 gave a lecture "About plastic surgery in general and especially about plastic

surgery of the nose" and analysed in detail the problem of organ and tissue transplantation. The era of transplantation began in 1902 in Vienna with an attempt at a canine kidney transplant by E. Ullmann. The very first attempt to transplant a kidney to a person (a monkey was a donor) was carried out in 1936 in Berlin. The operation was unsuccessful. The attempt of the Ukrainian scientist Yu.Yu. Voronin to transplant a kidney from a healthy person to a patient in the same year 1936 was also unsuccessful. Only two decades later (in 1954, Boston, USA) the first successful kidney transplant operation was performed, in which the recipient and donor were identical twins. As a result of this operation, which was performed by J. Murray and J. Merrill, the operated patient lived for more than 20 years (https://www.ifnmu.edu.ua/images/biblioteka/nashi_resursi/medichni_vistavki/2018/Peres adka_organiv.pdf).

It is necessary to pay attention to the fact that even despite all the regulatory, financial and legal obstacles in the field of transplantation, Ukraine was among the first to carry out it. So, back in 1933 in our country, surgeon Yuriy Voronin made an attempt to transplant a kidney from a healthy person. This operation was the first transplant of its kind. However, today, in Ukraine, more than 8000 people are on haemodialysis (treatment of acute and chronic renal failure using the "artificial kidney" apparatus), and some of them are awaiting kidney transplantation (Transplantology in Ukraine; Strelchenko, Lychenko, Shevchenko, 2018). This confirms that the development of transplantation requires the fastest development in order to preserve the health and life of people.

Today in Ukraine there are quite a few centres, hospitals and other medical institutions that are capable of transplanting organs and other human anatomical materials. So, as of May 1, 2021, there are only six transplant centers in Ukraine, which are licensed to carry out transplantations (National Institute of Surgery and Transplantology named after A.A. Shalimov; Lviv Regional Clinical Hospital; Odesa Regional Clinical Hospital; Regional Clinical Centre of Urology and Nephrology named after Shapoval (Kharkiv); Zaporizhya Regional Clinical Hospital; Dnipropetrovsk Regional Clinical Hospital named after I.I. Mechnikov etc.), where heart, liver and kidneys are already being transplanted, and the like.

For comparison, it should be noted that, for example, in Spain there are more than 40 centres for transplantation of organs and other human anatomical materials per 47 million of the population, where the number of transplants ranges from 99–120 transplants per year.

In general, in developed countries, organ transplantation is the standard treatment for many diseases of the kidneys, heart, liver, lungs, intestines, etc. One-year and five-year survival rates for organ transplants from cadaverous donors in the United States are: kidneys $-94.2\,$ and $\,80.7\%\,$, liver $-86.3\,$ and $\,72.1\%,\,$ heart $-85.6\,$ and $\,72.0\%,\,$ respectively (Gorodetska, 2012).

To date, for more than 35 years of clinical transplantation, approximately 2500 kidney transplants, 20 liver transplants, 10 heart transplants, 5 pancreas transplants have been performed in Ukraine. It is necessary to focus on the fact that small intestine transplants have not been carried out in Ukraine at all, only the large intestine has been partially implanted.

It is advisable to note quite significant achievements in the global transplantology, the transplants are carried out much more actively abroad than in Ukraine. Thus, kidney transplants are actively carried out, which averages more than 150 transplants per year. For example, in 2020, 55611 organ transplants were performed in the United States, while only 226 were performed in Ukraine last year, of which 215 were kidney transplants, 6 liver transplants, 4 heart transplants and 1 lungs (Strelchenko, Okhrimenko, Pavlov, 2020). At

the same time, it should be noted that a greater number of transplants were performed from a living donor, and only three transplants were made from a dead donor in the cities of Zaporizhya, Donetsk and Dnipropetrovsk.

Today, 1,894 people with transplanted organs live on the territory of Ukraine. The number of organ transplants in Ukraine does not exceed 100-120 per year. Basically, kidney transplantation is performed from a living related donor (90%), which is 1.6 per 1 million of the population, while in Austria this figure is 81.5, in Spain - 85.6, in the USA - 76. 7 per million of population (Gorodetska, 2012).

Liver transplantation is mainly performed from a living donor, liver and heart transplants from a corpse donor are rare. During 2020, 47 cadaveric seizures were carried out, which amounted to 0.3 donors per 1 million of population. At the same time, according to preliminary estimates, 40-60 potential donors per 1 million of the population die in Ukraine every year, which is about 3000 potential donors who could save the lives of 10 thousand patients (Gorodetska, 2012).

It should be noted that the annual need for organ transplants in Ukraine is as follows: 3653 operations, of which kidney transplants – 2115, liver – 830, pancreas - 30, pancreas plus kidney complexes – 89, hearts – 328, lungs – 240, complex "heart – lungs" – 3, intestines – 42. However, the share of organ transplant operations is only 0.8% of all operations. The statistics are terrifying, because according to the Ministry of Healthcare of Ukraine in 2016 only 5 liver transplants were performed in Ukraine, 2 cadaveric kidney transplants and 93 family ones (Moroz, 2017), in 2017, a total of 118 operations were performed, in 2018 – 96 ones (Goncharenko, 2018) (before the coming into force of the current Law of Ukraine "On use of transplantation of anatomical materials by humans"), and in 2019 and the beginning of 2020 only 9 organ transplant operations were performed (2 – heart transplant, 7 – kidney transplant), 3 of which were from deceased donors (Official site of the Ministry of Health).

That is why an urgent study of topical problems in the development of transplantation at the scientific, national and international levels is so important.

It should be noted that the field of transplantation requires careful research, study, analysis and improvement by means of effective ways of its active implementation into the current domestic legislation, without violating the rights of donors, recipients and medical transplant specialists.

Thus, the outstanding problems in the field of transplantation that need to be solved and without which it will be impossible for the studied area to reach the appropriate level of implementation are the following: 1) lack of clear vertical subordination of public administration subjects in the field of transplantation during the recovery of donor organs; 2) the lack of the "presumption of consent" principle in the activity of transplantation and its absence at the legislative level; 3) low level of popularization of organ transplantation and other human anatomical materials; 4) insufficient procedures for diagnosing brain death as a mandatory medical procedure that must precede the recovery of a donor organ for the purpose of transplantation to its recipient; 5) insufficient funding and material and technical support to conduct a study on the compliance of a donor organ with a recipient and the absence of a single register of donors, whose organs can best suit a particular recipient; 6) lack of a unified database for registration of recipients and donors; 7) the absence of a single controlling body of public administration in the field of transplantation; 8) lack of funding for the field of transplantation at all stages of its implementation; 9) the absence of an ombudsman in the field of health care, whose powers should include protection the rights

of donors, recipients and medical transplant specialists; 10) imperfection of legal liability for violation of the mechanism of organs and other human anatomical materials transplantation; 11) the lack of a course of transplantation in medical institutions, resulting in medical workers ignorance in the field of transplantation.

We consider it expedient to investigate the indicated problems of the development of the sphere of organ and other human anatomical materials transplantation.

When carrying out transplantation, a mandatory permit for transplantation of organs or other human anatomical materials is required – that is, the principle of "presumption of consent" or "presumption of refusal" must be applied. In various foreign countries, it is interpreted in different ways.

The main problem in organ transplantation is the lack of organs and potential donors willing to donate their organs. At the heart of this problem of obtaining an organ for a recipient is the patients' consent to the recovery of their organs after their biological death, which is the basis of the principle of "presumption of consent" in the field of transplantation. In every country of the world, this problem is solved using the principle of "presumption of refusal" ("opting in") or "presumption of consent" ("opting [or contracting] out").

It is necessary to pay attention to the fact that one of the most problematic issues is the moral and ethical aspects of transplantation from the deceased. So, each person during his lifetime can give or not give consent to donation. But in the case when this issue has not been unambiguously resolved, it is argued that it is necessary to obtain consent for the organ harvesting from the husband / wife or close relatives, which personify the presence of hereditary rights of the latter to the organs of a potential donor. This aspect is governed by Art. 16. The Law of Ukraine "On transplantation of organs and other human anatomical materials", which provides for the possibility of organs and other anatomical materials recovery from a corpse donor, provided that a capable and adult person during his lifetime declared his consent or disagreement with the posthumous organs recovery. If there is no such statement, then this consent can be obtained from close relatives. That is, in fact, there is a presumption of refusal, which is the cause of disputes around this law (Gorodetska, 2012).

Now the presumption of refusal is valid in 64% of countries where transplant procedures are performed, namely the USA, Germany, France, Canada. Accordingly, in 36% of countries such as Austria, Spain, Belgium (that is, countries with a high moral potential of society and trust in public administration bodies) there is a presumption of consent. At the same time, the average number of organ transplants from a corpse donor in countries with a presumption of refusal and a presumption of consent does not significantly differ (including the population) – 28.9 and 32.8 transplants per million population, respectively (Gorodetska, 2012).

In addition, the presumption of refusal makes it possible to better protect the rights and freedoms of citizens, especially in countries with unstable economies, lack of trust in state institutions. The solution to the issue of increasing the number of organs taken from a corpse donor lies in the plane of the social sphere, the media, the activation of the work of public organizations and, what is important, religious communities. The most common reasons for refusal by relatives are hope for recovery when it comes to brain death while maintaining other somatic functions, unwillingness to take responsibility, aggressive or inappropriate behaviour of medical personnel in matters of potential donation. Despite this, it is widely believed among transplantologists that the introduction of the presumption of refusal stopped the development of Ukrainian transplantology (Gorodetska, 2012).

In the world community, there are certain disagreements in the legal regulation of transplantation and donation issues, their application and control. In the practice of foreign countries, various legal models of law regulation of organs recovery from the deceased have developed – "presumption of consent" and "presumption of refusal". Each model of legal regulation of organs or tissues recovery from a deceased seeks to maximally take into account his lifetime will, but none of them, unfortunately, is not devoid of shortcomings and serious objections (Myslyva, 2005).

The "presumption of consent" is also known in the legal literature as "presumptive consent" or "denial model". According to it, the extraction and use of organs from the deceased is carried out if the deceased did not express objections to this during his lifetime, or if his relatives or legal representatives did not express objections. However, if the health care institution at the time of seizure is informed that during his lifetime the person, his relatives or legal representative expressed their disagreement with the recovery of his organs and (or) tissues after death, then the seizure is not carried out (Chebotaryova, 2003). This type of presumption is used in Belgium, Belarus, Russia, Israel, Spain, Italy, Austria and Great Britain. One of the countries where the presumption of consent to organ harvesting for transplantation in the event of a person's death is currently applied is Belarus. Belarus adopted the law seven years ago, which laid down the presumption of consent, and increased the number of transplant operations 40 times. After the amendments were made to the legislation in Belarus, the deficit of organs disappeared, they began to save thousands of people, and even make money on this. Today our patients go to Belarus to transplant hearts or other organs and pay a lot of money for this – \$ 100–120 thousand (Todurov Boris, 2017). In this country, half a thousand organ transplants are carried out a year. The waiting time for a donor kidney is the smallest in Europe. All operations for the citizens of the country are done free of charge. For all the time there was not a single criminal case related to the illegal removal of organs (Romanyuk, 2021). Today, this country ranks first among the post-Soviet countries in terms of the number of organ and other anatomical tissue transplants performed (Anikina, 2010).

China has become a negative example of the application of the principle of "presumption of consent", where the problem of lack of donor material is solved by removing organs from executed prisoners. This requires three conditions: first, if the body of a prisoner is not required; second, if the prisoner has given consent; third, if the prisoner's relatives also agreed. However, it is believed that China does not adhere to these conditions. The executions were planned for the day of the transplant. It has been estimated that the state receives two to three thousand organs per year from executed convicts. However, this practice cannot serve as a model for other states, because regardless of the legal status of individuals, the fundamental rights of potential donors must be respected and protected (Fabre, Murphy, Matesanz, 2010).

"Presumption of refusal" (informed consent) means that a person during his lifetime explicitly stated his consent to the recovery of an organ (s) or his family members clearly express their consent to such actions in the event that the deceased did not leave such a statement. In such cases, the lack of consent is considered a refusal to transplant. This legal model of organs and tissues recovery from a deceased donor for transplantation makes it impossible to empower doctors with the right to dispose of the body of the deceased without separate permission. According to this principle, it is believed that each person initially does not agree that his organs will be transplanted to another person (Anikina, 2010). This presumption is valid in the USA, Denmark in Ukraine.

To date, legal science distinguishes another legal model of organ transplantation from a deceased donor – the "principle of requested consent" for posthumous donation. M. S. Bryukhovetska suggests that under this principle a person, or members of his family, give consent to organ harvesting after death based on the full, objective information they received about the possibility of organ transplantation of the deceased. "Requested consent", according to the author, differs from others in that an informed patient or his relatives are asked by medical workers about granting permission or a ban on the use of organs after death (Fabre, Murphy, Matesanz, 2010). Accordingly, in our opinion, it is inappropriate to correlate or identify the above principles, namely "presumption of refusal" and "presumption of requested consent", which some scholars equate with each other, we consider it inappropriate, since these are categories that differ in meaning and content.

As for the problems of popularizing transplantation development, it should be noted that it is at a rather low level.

Accordingly, popularization of donation and transplantation is defined as "promotion" or activity that is aimed at supporting something, or as activity aimed at drawing attention to something in order to raise awareness among the population; also as an advertising campaign organization activity (English Oxford Living Dictionary).

The transplant community is interested in promoting donation, its popularization, which is a working tool for increasing the number of organs available for transplantation. Directly popularizing transplantation is aimed to increase the number of donors with the help of informed consent for transplantation; through the introduction of mechanisms of financial and non-financial incentives (Held, McCormick, Ojo, Roberts, 2016) donation; by optimizing medical protocols that relate to the communication of medical professionals with family members of donors; by organizing and conducting educational events and other advertising campaigns to increase the donation rating (Morgan, 2011).

It should be noted that the popularization of transplantation should be carried out in all the most relevant and accessible media and on the Internet. The popularization of donation should be based on an educational mission, which essentially boils down to the most complete informing of the population about transplantation and the purpose of which should be so that every citizen can weigh the merits in the field of transplantation and can express a desire or unwillingness to become a donor.

It should be noted that the leaders in the field of popularization of transplantation are Spain (46.9 donors per 1 million of population), Portugal (34.0 donors per 1 million of population), Belgium (33, 6 donors per 1 million of population), Croatia (29.8 donors per million of population) and the United States (46.3 donors per million of population).

Spain is the direct leader in the number of donors in the world with 30 years of experience. It is in Spain that purposeful activities for the development of transplantation are taking place through educational activities, which are quite actively supported by the population. In order to popularize posthumous donation, various means of informing the population are used through round-the-clock "hot lines", relevant websites, where you can always submit questions and get a comprehensive answer. These sites are a fairly common informant about transplantation both among ordinary citizens and among medical workers, where you can get medical, legal or statistical information about donation. This is what increases and improves the informational impression about transplantation and gives people confidence in this type of activity, around which a positive atmosphere is formed based on full trust and transparency.

In Portugal and Croatia, there are "adaptation" versions of the Spanish model for transplantation, which quite clearly reproduce the organizational and legal aspect of its components, adjusted for local characteristics. There are several methods of transplantation, namely in Croatia in 2005 the New Life as a Gift program was launched, and since 2006, National Donor Day is celebrated annually, as well as European Donor Day, that is events where participants are invoked in an unobtrusive manner to support donation and say "YES to donation!" and at the same time register at the transplant centre as a donor.

In Portugal, since 2009, there has been a public awareness program on transplantation, which was launched by the Portuguese Transplant Organization (Autoridade para os Serviços de Sangue e da Transplantação), in 2007 it was replaced by the "Portuguese Transplant Organization"), which received the blessing of the Catholic Church (Australian Government Initiative).

Regarding transplantation in Belgium, it should be noted that their transplant centres became the basis of the Eurotransplant organization, which was founded in 1967. It was in Belgium for the first time in the world in 1963 that organ explantation was carried out from a donor who was diagnosed as having brain death.

Even today, transplantation in Belgium is quite relevant, there is a progressive program for the exchange of donor organs, and an ambiguous form of organ donation after euthanasia is used (Detry, Van Deynse, Van Vlierberghe, Pirenne, 2017).

At the same time, it should be noted that the principle of "presumption of consent" is officially applied in the areas under study. In Spain, in most cases, medical professionals try to obtain from the relatives of the deceased person the consent to organs recovery (Fabre, Murphy, Matesanz, 2010).

With the so-called "nominal" presumption of consent, an important and non-obvious effect can be observed: the doctor goes to a meeting with the relatives of the deceased, neglecting the current legal norms, consoles them with a conversation and ultimately obtains consent for explantation. "Non-compliance" with the law, in this case, unites the doctor with the relatives of the deceased, makes them, in a sense, like-minded people (Reznik, Reznik, 2018)

With regard to transplantation in the United States, the use of organs for transplantation is possible only after obtaining the informed consent of the future donor or his family members. It follows from this that every American may find himself in a situation where he will need to make a decision on organ donation, which means that campaigns to promote donation should have an appropriate scope (Reznik, Reznik, 2018).

A significant contribution to the field of transplantation in the United States was the introduction of amendments and additions to the legislation on the public health service (Public Health Service Act) in terms of raising public awareness about the donation of organs and other human anatomical materials, increasing the number of donors through educational work among the population and patients resulting in increased availability of organ transplants. On a positive note in US support for transplantation, the government has approved a Funding Plan for Donation Development Initiatives in the form of educational events, presentations and various other research activities, for which, on a "guaranteed basis", costs of \$ 5,000,000 are provided for each financial year. (Organ Donation Awareness and Promotion Act of 2015).

Donor organizations work well in the USA. Also in America there is a principle of "presumption of refusal" on the provision of their organs for transplantation after death. However, thanks to the widespread distribution of donation as a noble cause, saving the life

of a neighbour, people massively agree to posthumous organ harvesting. Donate Life America, for example, has over 150 million registered potential donors. These are people who voluntarily agreed to become posthumous donors. Americans are told about donation at school. Famous people, officials encourage by their own example, signing a consent. The Church also strongly supports transplantation. After all, the appropriate outdoor advertising works. Every spring, Los Angeles hosts a memorial parade with organ transplants and relatives of posthumous donors (Lysytska, 2020).

So, having carried out a deep analysis of the development of transplantation in different countries, we believe that in any activity, including the activity of transplanting organs and other human anatomical materials, it is necessary to popularize it at all levels of public administration.

It is necessary to pay attention to the fact that in Ukraine significant funds are allocated for transplantation of organs and other human anatomical materials abroad (in Belarus and India). Several hundred Ukrainians receive financial assistance, and the annual estimated need for the total number of transplants in our country is about 3.5 thousand people. According to the calculations, the cost of transplantation of various organs in Ukraine is 7–10 times less than in Europe. In accordance with this, with the introduction of an effective Transplantation system in Ukraine for the same money that is spent on the treatment of patients in need of transplantation abroad, it is possible to provide the estimated need for such operations in almost full volume directly in our country (Koval, Rudenko, 2018; Strelchenko, Bass, Gorbach-Kudrya, Myrgorod-Karpova, 2021).

In order to solve the problem of financing and material and technical support of transplantation in Ukraine, it is necessary to include in the government program "Affordable Medicines" all the costs of transplanting organs and other anatomical materials of a human being. Also, the State budget needs to provide funding for the material and technical base necessary for transplantation. At the same time, it is necessary to introduce universal compulsory health insurance, which also provides, in addition to treatment, transplantation of organs and other human anatomical materials.

In our opinion, transplantation in Ukraine should become an absolutely standard type of medical care that Ukrainians can receive in their own country without going abroad to receive it.

That is why it is necessary to introduce funding for an information system at the state level, which should maintain a register of donors and recipients, which greatly simplifies and speeds up the search for donors and recipients, the ratio and selection of a donor and recipient pair. It is the Unified Database of the Register of Donors and Recipients that will contain information about the waiting list of the donor organ and determine the order of recipients and their urgency.

In Ukraine, in 2009, the Base of the All-Ukrainian Register of Donors of Hematopoietic Bone Marrow Stem Cells was created, in which, as of May 01, 2021, there are only 53 potential donors, which explains its actual inability to provide donor material for cell transplantations. The small number of cell donors is determined by the fact that in Ukraine, cell transplants from an unrelated donor are not performed, and the number of bone marrow cell transplants from a related donor does not exceed ten per year (Komarov, Nikonenko, Salyutin, Palyanytsya, 2013).

It is such a difficult internal situation with cell transplantation that makes the citizens of Ukraine solve this issue through treatment abroad, which, first of all, imposes a burden on the state budget and causes social tension in society. Moreover, it should be noted that the

cost of transplantation from an unrelated donor in Europe is more than 200 thousand euros, while a similar transplant in Ukraine will cost up to 500 thousand UAH. (Komarov, Nikonenko, Salyutin, Palyanytsya, 2013).

It is also advisable to provide funding for the development of a single aeromedical space throughout Ukraine, with the development of which the rapid delivery of donor organs to the recipients will be carried out, regardless of which city they are located in.

It should be noted that transplantation in Ukraine has a rather significant economic aspect. Let's take, for example, the cost of a procedure such as haemodialysis, which is quite an expensive treatment and without which the patient is doomed to die, or to a kidney transplant. So, per year the cost of haemodialysis per patient is 180–200 thousand UAH, and peritoneal one is 200–280 thousand UAH. Accordingly, the cost of a kidney transplant and drug treatment provision is 160–190 thousand UAH, and in subsequent years of the post-transplant period is approximately 20–50 thousand UAH. It follows from this that kidney transplantation is 3–4 times cheaper than annual haemodialysis.

Today in Ukraine there are more than 4 thousand patients on haemodialysis, which is 65.2 per 1 million of the population with an average need of 300 to 800 per 1 million of population (according to the European register). Due to the insufficient development of the transplant service, citizens of Ukraine are forced to receive transplant assistance abroad, which is economically unprofitable (Gorodetska, 2012).

Thus, the example of kidney transplantation testifies to the unconditional economic feasibility of organ transplants only from the standpoint of material support, which does not take into account a weighty fact – the patient's social and labour integration into society (Komarov, Nikonenko, Salyutin, Palyanytsya, 2013).

Simultaneously with the financing of transplant interventions abroad, the development of the transplant service is actually not funded by the state. The state social program "Transplantation" was funded by 55% of the planned. Funding is mainly targeted on the procurement of immunosuppressive drugs and partly for equipment. It should be noted that the planned amount for the Program was calculated at 2019 prices, and the price growth rate for 2020-2021 was not taken into account. Provision of regional centres for transplantation is laid on local health budgets, practically reduced to financing salaries and utilities (Gorodetska, 2012).

Funding for the process of extracting anatomical material (compensation to health care institutions for consumables, depreciation of equipment, etc.) is generally not provided for by the budget, which negatively affects the number of cadaveric transplants (Komarov, Nikonenko, Salyutin, Palyanytsya, 2013).

According to analysts' estimates and medical reviews, transplantation, including the cost of therapy to restore the body after surgery, costs almost half as much as maintenance therapy such as haemodialysis. However, for some reason this progressive method of treatment is ignored in Ukraine, and the production capacities of medical institutions in this area are used by 15–25%, or not used at all. Thus, at present, the situation in transplantation is very sad: with a huge demand for such operations, very few of them are carried out, and public funds are spent on the treatment of citizens abroad, although in Ukraine it would be many times cheaper (Kraynik, Sachuk, 2018).

4. CONCLUSIONS

So, based on the above, we state that the field of transplantation is characterized by a number of problems that arise due to the chronic underfunding of its development, namely: 1) the lack of clear vertical subordination of public administration subjects in the field of transplantation during recovery of donor organs; 2) the lack of the principle of "presumption of consent" in the activity of transplantation and its absence at the legislative level; 3) low level of popularization of organs and other human anatomical materials transplantation; 4) insufficient procedures for diagnosing brain death as a mandatory medical procedure that must precede the recovery of a donor organ for the purpose of transplantation to a recipient; 5) insufficient funding and material and technical support for conducting research on the compliance of the donor organ with the recipient and the absence of a single register of donors and recipients; 6) lack of a unified database for registration of recipients and donors; 7) the absence of a single controlling body of public administration in the field of transplantation; 8) lack of funding for the field of transplantation at all stages of its implementation; 9) the absence of an ombudsman in the field of health care, whose powers should include the protection of the rights of donors, recipients and medical transplant specialists; 10) imperfection of legal responsibility for violation of the mechanism of transplantation of organs and other anatomical materials of a human being, result in forming negative attitude of citizens towards "black transplantation"; 11) the lack of a course of transplantation in medical institutions, resulting in medical workers ignorance in the field of transplantation.

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CUSTOMER SERVICE AND ITS IMPACT ON CONSUMER BUYING PATTERNS

The study focuses on the relationship between customer service and consumer shopping patterns at a selected retailer in Whittlesea, South Africa. The study's primary objectives were to identify the fundamental components of customer service and assess if customers are satisfied with the service levels they obtain from the chosen retailer, and if not, to suggest ways to improve it. Self-administered questionnaires were used to collect data, which was then quantitatively analyzed. As a result, data from 135 respondents were collected using the most efficient and less time-consuming non-probability and convenience sampling method. The findings reveal that customers are dissatisfied with the service levels of the retailer and thus recommend that there should be improvements with: i) Assisting of customers whilst shopping; ii) handling of customer complaints; understanding of customer needs; and iv) general politeness towards customers

Keywords: Customer service, purchasing pattern, retailing, customer buying patterns, service quality.

1. INTRODUCTION

Customer service is a major activity that a firm needs to master. Thus, customer service strategies need to be executed to retain customers and increase sales. Despite retailers offering low prices for their products, without efficient customer service, it will be hard for them to push sales and reach their sales target. Customer service leads to the satisfaction or dissatisfaction of customers depending on whether it is poor, good, or excellent.

Most successful companies have since recognized the significance of providing outstanding customer service. Courteous and empathetic interaction with a trained customer service representative can mean losing or retaining a customer (Drury, 2020). When a customer enters a firm, they have conjectured that their expectations will be met. These expectations determine their involvement in a purchase situation. Today, if a firm is delivering sincere value to its customers, it is guaranteeing its success rather than sealing its fate in a coffin of corporate greed and advancement at all costs (Adams, 2016). Patrons require assistance, before, during, and after making a sale. Customer service provides this

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support through information, assistance, and creating a trusting environment (Oberlo, 2015).

The main objective of this research is to discover whether consumer buying patterns are influenced by customer service at selected retailer in Whittlesea, South Africa, and to further uncover the fundamental components of customer service.

2. LITERATURE REVIEW

Role and importance of customer service

Cant & Van Heerden (2017) define customer service as all the activities that an organization puts in place to ensure that value is added to its products and services, as a way to improve the customer experience the moment the customer comes into contact with the organization. Tlapana (2020) further supports that customer service in the retail context refers to the mixture of activities provided by retailers that offer customer support to enhance retail profitability. It is also argued by Jeske, Chimusoro & Karodia (2015) that customer service is anything a business does for customers that enhances the customer experience. From the perspective of clients, customer service can be defined as the entirety of what a company does to add value to its goods and services.

The customer service process is defined as structured sets of work activity that leads to specified business outcomes for customers (Setia, Venkatesh & Joglekar, 2013) which can be categorized into three tiers. The first tier is reliability, which means performing the basics well. The second tier is resilience or the ability to respond to failures of the customer service systems. The third tier is referred to as creativity or innovation. Creativity means developing value-added programmes for the customers such as direct store delivery or packaging innovations (Theodoras, Laios, Moschuris, 2005). Elements of customer service comprise all the external factors that stimulate the consumer's mind. The interpretation of the individual elements of Customer service is considered a cognitive activity that involves interpretation within established schemata in memory that are based on existing knowledge structures (Marx, Erasmus, 2006). Customer service can be measured in many dimensions such as service empathy, access time, courtesy of staff, and service quality.

Generally, customer service contributes to the long-term survival, growth, and success of the organization. Furthermore, Lamb, et al. (2015) argues that meeting and exceeding customer expectations lead to profitability. Venetis & Ghauri (2004) conclude that customer service has been argued to increase the willingness of consumers to purchase again, buy more, buy other services, become less price-sensitive, and inform others about their positive experiences. Figure 1 below depicts how service quality, employee satisfaction, retention, and productivity, lead to customer satisfaction and profitability.



Figure 1. Service-profit chain

Adapted from Cant and Van Heerden (2017).

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The above diagram illustrates the correlation between variables that influence a firm's profitability. These variables include internal service quality, employee satisfaction, employee retention and productivity, customer satisfaction and retention, and organizational profitability.

- Internal service quality is the quality of the services frontline employees are receiving from the rest of the organization
- Employee satisfaction if employees are satisfied with their jobs, external customer satisfaction will be easy to achieve
- Employee retention and productivity Ecstatic and satisfied employees will remain in the firm for longer, translucently their productivity will improve.
- Customer satisfaction and retention if consumers' needs are met, they will become loyal.
- Organizational profitability Customer satisfaction leads to customer retention which results to repeat purchases.

Components of customer service

Customer service components need to be incorporated and executed in such a manner that they retain customers and generate profit. Customer service enhances the consumer experience.

Basic components of customer service are:

Building a long-term relationship with customers

It is done by communicating with customers, exchanging information, or ideas keeping in mind that in marketing, the customer is 'King'. Ensuring that customers are well informed before making a purchase increases the chances they will be elated (Quickstone Capital, 2016). A firm should measure its customer service or satisfaction frequently by providing customers a podium where they can suggest ways that a firm can use to meet their needs. Companies can give customers questionnaires to rate their service and revisit the areas that require improvement.

Staff visibility

Staff should be visible on the shop floor so that customers can be assisted. It makes it easier for customers to come and ask for assistance. For example, Pre-suppose that a customer is looking for a shield on the shop floor and they are finding it difficult to find the section of shields (roll-on), staff should be there to attend to them so that the customer does not get exasperated and decide to leave the shop.

Courtesy of staff

When customers visit a firm or call on the phone, the level of courtesy employees show affects whether a customer buys and whether they come back (Kokemuller, 2020). The hired hands ought to be courteous towards customers. Staff should smile and greet a customer with a friendly smile, by doing that a customer will feel welcome to ask for assistance and they will repeat visiting the firm. Employees are so much more than paid workers, they are ambassadors of a firm's brand and anything that a firm stands for (Timesheets, 2017).

3. BENEFITS OF CUSTOMER SERVICE

Providing good customer service has the following benefits:

Increased customers population

Repeat sales are not serendipitous, and without creating a positive consumer experience, buyers will go elsewhere (Joseph, 2019). When customers know that their needs are paramount to your company's staff, returning to your establishment is an easy decision. Patrons will become loyal and repeat visiting the firm. Satisfied customers tend to recommend a firm to others. Consequently, that will bring more patrons to a firm (MerchantPro Express, 2016).

Profitability

With more customers buying at a certain firm, optimistically the firm will become lucrative. Loyal customers tend to be less price-sensitive. Consequently, cash flow will also be increased. When a firm delivers a good service, word of mouth and references are good, it will acquire new customers at a fraction of the cost (Bhasin, 2018).

Better work environment

The benefits of good customer care can impact the kind of work environment a firm creates (Joseph, 2019). A firm that is constant in providing good customer experiences will yield satisfied customers as a consequence of unsatisfied customers are not easy to deal with.

4. CUSTOMER SATISFACTION

In the retail industry, it is all about meeting customers' needs. Customer satisfaction is a result of good or excellent service. Customer satisfaction is a metric used to quantify the degree to which a customer is elated with a product, service, or experience. According to Lamb, et al. (2015), customer satisfaction is a customer response to a product or service in terms of the extent to which consumption meets the customer's anticipations. Ostensibly, meeting customers' anticipations should be one of the main objectives of a firm.

Benefits of customer satisfaction

Customer satisfaction has the following benefits:

• Greater customer loyalty

Satisfied patrons eventually become loyal, translucently they will buy more. Loyal customers will recommend the firm to their families and friends.

• Support during a corporate crisis

Satisfied or loyal patrons want the firm to survive during a corporate crisis, thus they will support it till the end (Megha, 2020).

• Growth in sales revenue

Satisfied or loyal customers will buy more, and they will recommend the firm to others, thus the company will become lucrative. Happy customers always lead to higher profits (Kate, 2015). Brands focusing on customer satisfaction actively will experience healthy sales revenue.

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• Stand out from the competition

Customer satisfaction is the key to making or breaking brands. Exceeding or meeting customers' anticipations distinguishes a firm from its competitors. Satisfied customers will always go and spend where their needs or desires are met (Megha, 2020).

• Increase brand popularity

Satisfied customers tend to share a firm's content on social media channels. Many people are using social media channels such as Facebook, WhatsApp, Twitter, Instagram, etc, consequently, that will create widespread brand exposure.

5. CONSUMER BEHAVIOUR

For a firm to master customer service, it requires a thorough understanding of consumer behaviour. Consumer behaviour describes how consumers make purchase decisions and how they use and dispose of the purchased goods or services (Lamb et al., 2015). Consumer buying decisions are determined by several factors as outlined in figure 2 below.

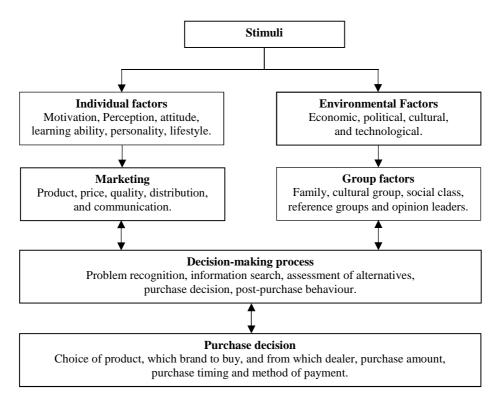


Figure 2. A model of consumer behaviour Adapted from Cant & Van Heerden (2017).

The above diagram illustrates that consumer behaviour is influenced by several factors. These factors include marketing, environmental factors, individual factors, and group factors.

- Marketing factors include the product, price, quality, distribution, and communication. This involves a firm selling good quality products at a reasonable price and communicating effectively with its customers. For example, Shoprite emphasizes that they sell good quality products at lower prices. Shoprite position itself as a retailer that sells at lower prices "Lower prices you can trust, always" is their slogan. Price has an impact on a consumer buying decision.
- Environmental factors include economic, political, cultural, and technological. These factors are in the macro-environment and the business has no control nor influence over these factors. Shoprite's supervisor claims that their marketing team performs environmental scanning monthly to be aware of unfavourable trends.
- Individual factors include motivation, perception, attitude, learning ability, personality, and lifestyle. The store's supervisor claims that they are acutely conscious that patrons do not just buy for the sake of buying, their decisions are influenced by certain individual factors.
- Group factors. Shoprite is acutely aware that the buying decisions of consumers can
 be influenced by group factors of family, cultural group, social class, reference
 groups, and opinion leaders.

6. METHODOLOGY

The study was both explanatory and quantitative in nature. Explanatory research was conducted to have more insights into the research topic and to identify the extent and nature of cause-and-effect relationships. The target population comprised retail customers from the South African town of Whittlesea. A survey was utilized as a data collection method for primary data from respondents. A structured self-administered questionnaire consisting of closed questions was utilized to gather data from a conveniently selected sample of 135 respondents ranging in age from 18 to 60 years. Questionnaire content covered the perceptions of retail customer service employing a five-point Likert scale (Strongly disagree to strongly agree). Data obtained from the questionnaires were meticulously checked to ensure that it is flawless. Data was scrutinized to ensure the precision and reliability of the results.

1. Results

The figure above shows that the preponderance of shoppers were females (58%), followed by males (42%). It was uncovered that males had a negative attitude towards the activity of shopping. They have a conjecture that shopping is for females.

Figure 4 illustrates that the preponderance of respondents (33.33%) are middle-aged (30–40), followed by young consumers (18–29) with a response rate of 30%, the age group that is between 41 and 55 were 25%, lastly, the respondents from 56 and above were 11.67% of the sample.

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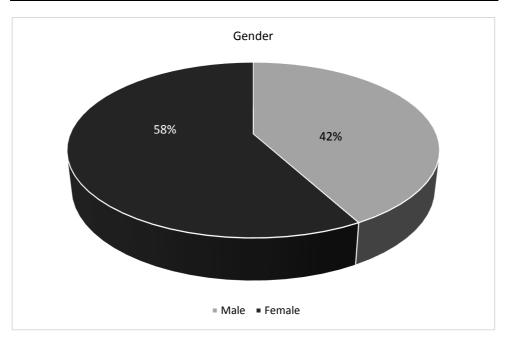


Figure 3. Gender of Respondents

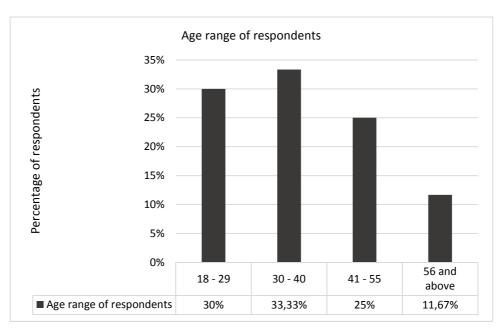


Figure 4. Age of respondents

Figure 5 illustrates that the preponderance of respondents shop thrice a week (37%) and it was uncovered that they are in the rural areas of Whittlesea in South Africa. 33.33% of respondents go shopping more often, 18% of respondents go shopping twice a week, lastly, 12% of participants go shopping once a week.

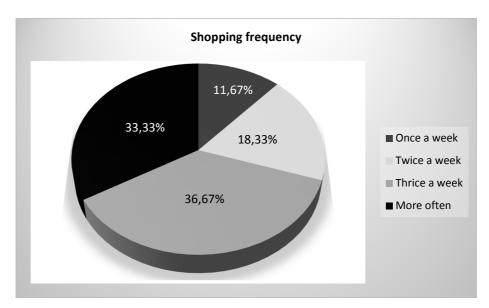


Figure 5. Shopping frequency by respondents

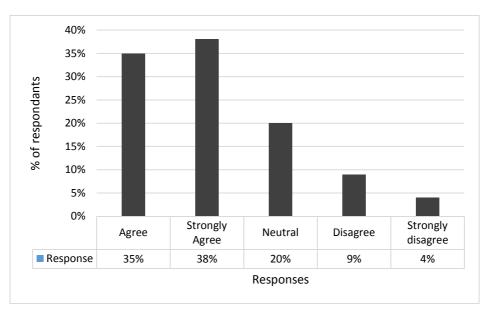


Figure 6. Personnel interested in helping clients

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Figure 6 depicts that 35% of participants agreed that employees should demonstrate an interest in supporting customers. The workers should demonstrate interest in supporting customers were strongly accepted by 38% of respondents. Results indicate that 73% of the respondents expect employees to be prepared to support customers.

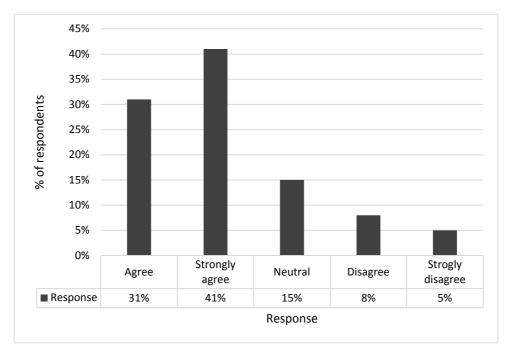


Figure 7. Personnel problem solving

Figure 7 shows that 31% of participants decided that workers should be able to address customer issues quickly. The vast majority of respondents (41%) strongly agreed that employees should be able to address customer issues immediately. Just 8% of respondents believed that employees should be able to address customer problems. According to the findings, 72 % of participants expect team members to intuitively elucidate consumer plights. As a result, it seems that consumers expect the workers to resolve their problems quickly and decisively.

Figure 8 accurately validates that 13% of respondents agreed that staff in a selected retail store are polite to customers, although a larger sample proportion (38%) disagreed. 24 % of those polled were unconcerned about the idea. As a result, the majority of participants are dissatisfied with the courtesy of employees at a selected retail store in Whittlesea. It was recommended that the store should train their employees to be courteous to customers so that they can return to the store and purchase more.

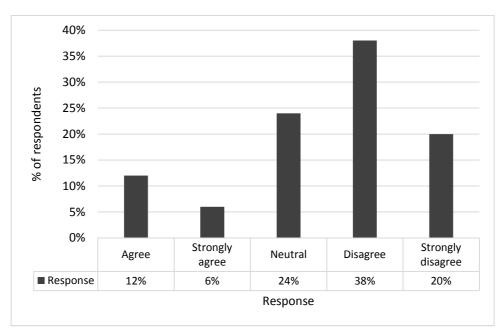


Figure 8. Politeness of staff towards customers

Table 1. Customer Service Expectations

Customer Service Expectations	Number of Responses (n)	Percentage of respondents (%)
Assist customers whilst shopping	99	73%
Problem Solving	97	72%
The appearance of store personnel	118	87%
Understanding Customers' needs	115	85%
Handle Customer Complaints	92	68%
Staff reliability and trustworthiness	121	90%
Politeness of personnel towards customers	96	71%
The willingness of staff to assist customers	92	68%
treating customers with respect	87	64%

Source: Own development.

2. Recommendations based on findings

It is suggested that retail workers show a desire to help customers. According to the findings, a large percentage of respondents are dissatisfied with the degree of interest displayed by staff members in assisting them. Customer service training is expected to help employees become more sophisticated in their dealings with customers.

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It is strongly recommended that retail employees be able to quickly address customer issues and have a clear understanding of customer expectations and preferences. Customers should be treated with respect by retail employees in order to make them feel comfortable. Workers may receive training in order to improve their communication skills.

7. CONCLUSION

This research study has discussed the impact of customer service on purchasing patterns of customers at a selected retailer in Whittlesea in South Africa. It can be concluded that customer service has an impact on the purchasing patterns of consumers. Satisfied customers become loyal. Consequently, good customer service is an extensive strategy to retain customers. Therefore, retailers should strive to provide excellent service to patrons. Retailers should train their employees to be customer-centric and seek to retain customers. Customer service has been shown to increase customers' willingness to shop again, buy more, buy other items, become less price-sensitive, and tell others about their positive experiences, according to Venetis & Ghauri (2004).

Further research using a survey and monitoring approach to examine and find out more about retail customer service in greater detail are recommended.

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