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POLICY ADVICE ON EQUAL ACCESS TO HEALTHCARE: WHAT'S NEW?

Rekomendasi Kebijakan untuk Kesetaraan Akses terhadap Layanan Kesehatan: Apa yang Baru?

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With less than a decade remaining to achieve the 2030 Sustainable Development Goals (SDGs), attaining SDG Goal 3, which emphasizes health and well-being for all, remains critical (Elliott, 2022). However, disparities in healthcare access persist, negatively impacting vulnerable populations (United Nations, 2023). Some countries have adopted Universal Health Coverage (UHC) to ensure equal access to healthcare for everyone (World Health Organization, 2024). How effective is this in improving population health and encouraging people to seek care?

Since Indonesia implemented health national insurance (Jaminan Kesehatan National or JKN) in 2014, access to healthcare has remained a key concern. In this edition of Indonesian Journal of Health Administration, Rahvy and Gani (2024) highlight significant disparities in access to inpatient care, showing that urban residents in East Nusa Tenggara (NTT) are much more likely to use these services than their rural counterparts. With nearly 60% JKN coverage in NTT in 2019, they suggest that the government expand insurance improve healthcare coverage and prevent poverty from accessibility to hospitalization costs. Additionally, Laksono et al. (2024) found that seniors and informal workers face barriers to healthcare access. They recommend policymakers consider travel time to primary healthcare centers in future planning, noting that older adults are more likely to visit primary care if it is within ten minutes of travel.

Bridging this gap is essential. Implementing JKN has increased demand for health services and encouraged the

growth of private hospitals, making the attractive sector more to investors. However, Rachmawati et al. (2024) reported that public hospitals still dominate the market share, thus indicating the need for policies that ensure equal access in all health service sectors. Digital marketing in healthcare is promising but must comply with ethical guidelines to reach diverse effectively. populations (Alhudha, Setvonuaroho and Pribadi. 2024). Meanwhile, Rahman and Rahman (2024) point out the potential of telemedicine in rural areas, such as cost savings and increased accessibility. Despite its benefits, awareness and internet connectivity issues remain barriers.

To improve the quality of health services in the UHC era, Ambarwati and Dewi (2024) research on patient safety in hemodialysis units, concluding the need to improve safety measures, such as patient identification and hand hygiene. Also, effective nursing leadership significantly influences healthcare outcomes, Pangandaman (2024) Abdulmalik and study suggests that discussed. This leadership traits such as ethical behavior and continuing education positively impact nurses' commitment and, consequently, the quality of patient care in Philippine hospitals. In addition, research on tuberculosismellitus (TB-DM) diabetes screening reveals significant challenges in private primary health services in Indonesia. Despite the promise of health information systems (HIS), effective two-way screening remains difficult due to systemic barriers. This study advocates a holistic approach involving various sectors to improve the

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integration and management of TB-DM screening in private health services (Arini *et al.*, 2024).

This issue also covers studies that child address maternal and health disparities. Munawaroh, Fajri and Ajija (2024) emphasize the role of social assistance programs like Bantuan Pangan Non-Tunai (BPNT) and Program Keluarga Harapan (PKH) in reducing stunting rates in Indonesia. These programs, while crucial, require effective utilization and public education on childcare and nutrition to maximize their impact. The study reveals a correlation between increased social assistance and decreased stuntina prevalence, supported by improved sanitation and education levels.

A study on health financing under Minimum Service Standards (MSS) in Lumajang Regency discovers persistent disparities in service access and health outcomes. Challenges include lower-than-expected Local Original Revenue (LOR) realization and insufficient budget allocation for maternal health services. This report advises diversifying funding sources and reallocating budgets to improve regional service delivery efficiency and equity (Risdiyanti, Paramu and Sunarto, 2024).

analysis of NICU service The improvements at Fatmawati Hospital quantifies a 55% increase in costs but a significant decrease in infant mortality rates. (Salim, Insani and Sihaloho, 2024) This study underscores the cost-effectiveness of enhancing NICU services despite initial financial investments. Α study implementing lactation clinics in Semarang City highlights the need for clearer policies areater awareness to support breastfeeding settings. in workplace (Khalishah, Sriatmi and Budiyanti, 2024)

This issue published an interesting article on the influence of media on health policy. In his commentary, Ridlo (2024) discusses the influential role of media in shaping health policy agendas during political campaigns. He highlights the importance of media in addressing urgent health issues such as non-communicable diseases and healthcare disparities. Also, in this edition, the evaluation of smoking policy among adolescents is examined. Megatsari

et al. (2024) explore the exposure of Indonesian adolescent smokers (IAS) to anti-smoking messages (ASM) and prosmoking messages (PSM). They analyzed data from the 2019 Global Youth Tobacco Survey (GYTS) in Indonesia, which shows high exposure to both ASM (92.4%) and PSM (93%). Despite government regulations smoke-free schools. for compliance is low. This study proposes the need for stronger ASM efforts. Kesuma et al. (2024) also recommends targeted health promotion strategies to tackle lymphatic filariasis (LF) treatment compliance in Eastern Indonesia.

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