# Republic of indonesia an overview health essay

Health & Medicine



Republic of Indonesia is consists of approximately 17, 506 islands. Indonesia has 34 provinces with population more than 242. 4 million people, and is the world's 4th most heavily populated country. Its capital city is Jakarta. Indonesia shares its eastern land borders with Papua New Guinea, and Malaysia. The Indonesian economy is the world's 16th largest by purchasing power and 17th largest by means of nominal GDP. Indonesia consists of numerous different local ethnic and linguistic groups across its various islands. The leading and politically governing ethnic group is the Javanese. Regardless of its huge population and heavily occupied regions, Indonesia

has immeasurable areas of badlands which facilitate world's 2nd utmost level of biodiversity. Indonesia has rich natural resources; however poverty remains prevalent in the country. indonesia-flag. gif

#### **Demographics**

Table. 1

#### Characteristics

#### **Facts and figures**

Total population248, 219, 189 (248. 6 million)Males114, 805, 139 (49. 96%)Females115, 157536 (50. 12%)Population growth rate1. 04%Birth rate17. 76 births/1000 populationDeath Rate6. 28 deaths/1000 populationNet migration rate-1. 08 migrants/1000 populationUrban Population45% of total populationRate of urbanization1. 7% annual rate of changeThis table provides figures calculate approximately from the World Development Indicator (WDI) is of the survey based on data and figures from population. The total population depicts on the whole determines the possible impact of Indonesia on the outside world as well as inside its own https://assignbuster.com/republic-of-indonesia-an-overview-health-essay/ territory. The population growth rate is a reason in determining how large a problem possibly forced on a country as a result of the varying requirements of its people intended for infrastructure includes schools, hospitals, roads and railing networks, and resources consist of foodstuff, water, electrical energy and jobs etc. The table also shows the average annual number of births and deaths throughout a year per 1, 000 people in the population. The birth rate is typically a main reason in deciding the rate of population growth and the figure shows that death rate is considerably affected with age distribution. The urban population of Indonesia and rate of urbanization is also shown in table.

## Table. 2

#### Characteristics

#### **Facts and Figures**

Age of total population71. 62 yearsMale66. 08 yearsFemale74. 29 years

## **Table. 2.** 1

## Age structure (years)

Total

## Male

## Female

0-1427. 3%35, 995, 91934, 749, 58215-6466. 5%80, 796, 70980, 754, 23865 and above6. 1%5, 737, 4707, 418, 730The tables above give the division of the population in accordance with age. Facts and figures are included in the tables by sex and age. Countries with high percentage of young populations (below age 15) should invest maximum in schools, while countries with high https://assignbuster.com/republic-of-indonesia-an-overview-health-essay/ percentage of older populations (65 and over) should invest extra in the health sector.

# Table. 3

## **Ethnic groups**

# Percentage of total population (%)

Javanese40. 6Sundanese15Madurese3. 3Minangkabau2. 7Betawi2. 4Bugis2. 4Banten2Banjar1. 7Other29. 9The table shows a prearranged list of ethnic groups begins with the largest and generally includes the percentage of total population.

# Table. 4

## Religions

# Percentage of total population (%)

Muslims88Protestants5Roman Catholic3Hindu2Other or

Unspecified1Buddhist1The table above shows ordered lists of religions begins with the largest percentage of religion and also include the percent of total population.

# Table. 5

# Characteristics

## Literacy rate (%)

Total population90. 4Male94Female86. 8The table above shows literacy rate in percentages for the total population, males, and females. As per the definition of literacy that is age of 15 and above can read and write or the ability, skills or aptitude to read and write at a particular age. At lowest point of literacy and education on the whole, it can barely slow down the economic development of a country in the up to date speedily shifting, technologydriven world.

#### Languages

The Government site of Indonesia illustrates that there are more than 70 languages spoken in the country and they usually belong to the many diverse racial and ethnicity traditions of the total population. Some of the local languages includes: Acehnese, Sundanese, Javanese, Sasak, Dayak, Minahasa, Toraja, Halmahera, Ambonese, and Several Irianese languages. Moreover, these languages are also spoken in different phrasing and all of the above languages ' Bahasa Indonesia' is the national language of Indonesia. English is considered the most prevailing foreign language in Indonesia. In addition, Dutch is spoken and understood in bigger cities of Indonesia.

#### Culture

The Indonesia culture is as energetic and flexible as its environment and natural beauty. The richness in Indonesian traditions is because of the influence of the different neighboring countries and especially its own ethnic culture. The active history of Indonesia has persuaded the development of a lot of unique cultures. Nowadays, the country upholds its own cultural prosperity. Together with harmony and traditional values to society's set of laws, praise and respect for the person is the root of Indonesian culture. Indonesians give importance and devotion to family and friends above all. They Shake-hands and propose a slight nod while meeting for the first time to a person and after the first meeting, a handshake is not necessary as https://assignbuster.com/republic-of-indonesia-an-overview-health-essay/ greeting. Indonesians have norms and values in their culture as they meet people with ' Selamat' that means peace. Moreover, the society itself educates some norms and values to them. For instance; pointing a person with index figure creates a bad impression on others so they used to point someone with their thumb. They considered left hand unclean, so they do not touch food, give or receive anything from left hand.

## **Culture Variation**

As Indonesia is extremely diverse country and all provinces has its own language, ethnic structure, beliefs and history. Besides there are various cultural that influences from difference in tradition. For that reason, Indonesian society is a mixture of different cultures belongs to Chinese, European, Indian, and Malay. The majority of citizens describe themselves locally before nationally, they are in a habit of defining themselves according to their ethnic group, folks and family. Because of the presence of diversity in Indonesian society there exists a sturdy pull that drags people towards their ethnic group.

## Health System of Indonesia

#### **Introduction to Health System**

In Indonesia, healthcare is managed at the public or national level, provincial or regional levels, and at district levels. The Ministry of Health Republic of Indonesia sets up nationwide healthcare policies (health insurance policies) and establishes authorized standards for healthcare services. Indonesia's healthcare services include government healthcare services, overseas aids, NGOs (non-profit health organizations), and the private sector health system.

Generally the government healthcare system has three major levels: Minister of National or Public Health. Provincial or Private Level Health. District or Regional Level Health. On the other hand, in rural areas medical facilities are limited, in urgent situation services are especially rare, and there is very fewer numbers of doctors providing services there and same goes for medical or health-check facilities. Well-resourced hospitals are very rare in rural areas. At the regional or provincial level, the Health offices support the work of the district level and public health administrator that manages health resources all over the province. While, the District level health office takes provincial guidelines then directs it to local public health center, for instance vaccination of infectious disease and standardize the food or drug industries. There were some reports highlighting health care issues and failure of Indonesia's Health care system that have an effect on millions. Considering the measurements of the last two decades, that showed zero or low performance of the health system for the reason that there was low level of public financial support for health system. The World Bank investigation shows that public funding was less than 0. 5% of GDP between the years 1991 and 1999. Columnists say Ministry of Health has spend 7 years planning a new universal healthcare statement, though it has faced delays because financial arrangements are not being met, budgets or some technical problems occur. The World Bank report demonstrated huge distinction in health system efficiency for the year 2006-07. The complete decentralization put into practice in 2001 that revealed its various impacts on the overall health system. Under decentralization process, the responsibility for health care requirements is basically in the hands of district level governments.

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#### **Division in Health System**

In Indonesia, People can have health care facilities that can be provided to them through both public and private health care system. Public health care is normally provided by the government through state healthcare systems. Private health care is usually provided through private hospitals and clinics, whereas private health care also includes non-profit organizations or NGOs. However, people using private health care think that public health care benefiting poor people the most. Usually, it has been observed that majority of the people who support the private health care sector, for the reason that it provides health care in areas where the public sector has completely failed or destroyed. People in Indonesia are more inclined towards private health care and they suggested that the private sector is more efficient, wellorganized and quick in respond to patient's requirements because of competition with other private hospitals or clinics providing same services in market as well. A public health care supporter taking public health facility is because he cannot afford to pay for private health services. And that is the reason why Indonesia's health check care facilities are ranked much lower as compared to other developed countries. If someone got badly ill, he would rather go to Singapore or Bangkok for his treatment.

#### **Cost of Health Care**

The worth of public health care system in Indonesia is not up to the mark; therefore people look forward to Europe or South America's health systems and want to get treatment from there with the aim to pay high price. However, private health care in Indonesia is costly or expensive as compare to public medical care. Seeing that health care services in Indonesia are

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limited and local medical care is not up to the standards therefore poor are inclined to go private which is comparatively expensive because they do not have alternative option of getting treatment. One of the major drawbacks of health system of Indonesia is that there is no emergency medical service all over the country. Although Public hospitals have ambulances but the staff they employed and equipment or tools they used are not mainly of a high standard. Secondly, the major problem with healthcare in Indonesia is that poor or rural people are not so much financially strong to get the health care that they need. A lack of government support and financial support gives you an idea that lower class Indonesians is not capable to meet the expenses treatment. It is hard to say that health care in Indonesia is costly or expensive, if put side by side to other Asian and European countries in terms of health care facilities then it is not that expensive; though quality value health care is nearly inaccessible for the local population.

#### **Health Insurances**

Unlike developed countries UK, USA etc, Indonesia does not have a health insurance policies or retirement plans that provides insurance to the total population. Citizens who do not have any kind facility receiving from the government public security, they have to pay for health care themselves. However, refugees are insured through their company's employer health assurance, or they personally own private health insurance. Travelers or foreign tourists that come to Indonesia, they got to have health insurance from their home country, if not they have to pay cash for medical treatment. At present, still, approximately 36. 68% of the total population still not gets government health insurance. Statistics shows that Health insurance treatments in 2011 reached 64. 32% of the total Indonesian population and the remaining percentage left behind i. e. 36. 68% has not yet been covered by government public security. In view of the fact that Indonesia does not spend so much on health services as it supposed to be. The expected overall spending on health (per capita, in 2004) was \$ 33 in Indonesia. However, Private sector also providing services are mostly funded by out-of-pocket expenses. Public providing services are funded by both public finances and consumer fees who actually take insurance policy publically. Since public sector insurance policies are mostly used by poor in Indonesia because they cannot afford private assurance. And if there is an opening of the newest social insurance scheme for the poor, they devotedly contribute in it.

#### **Role of Government**

A fine system of rules and regulation is vital for successful public healthiness outcome. And the role of the government in controlling total population health is not only restricted to the health sector but also with many different external health systems. There may be an improvement of public health laws by the government is achievable through informing and practicing or implementing them. As the financial budgeting system in Indonesia is complex, extremely centralized, and rigid for the reason that each and every secretarial level makes local financial arrangements, include a budget for health as well. On the whole Government of Indonesia plays a vital role in creating awareness of health care systems and facilitates inter-secretarial coordination towards public health problems. The Government of Indonesia is taking active steps to safeguard the health of its population through the amendment of various health systems but it seems that the rate of

improvement in resolving health issues has been slow. As a result of health status of Indonesia lags behind as compared to its neighboring countries.

## **Quality of Hospitals**

Indonesia has effectively expanding its health system to advance the quality of care for the people, and initiates primary health care. Basically, the health system in Indonesia is split into 3 categories i. e. Public hospitals, Private medical hospitals and rural health clinics.

## **Public Hospitals**

Public hospitals in Indonesia are generally found at provincial and district levels. The well set and equipped hospitals are mostly found in provincial capitals. There are a small number of finest hospitals that are being support by public funding, and these hospitals are found mostly in Jakarta and other provincial capital cities. An access to the hospital rooms plus VIP private rooms is an optional in most of the public hospitals. VIP rooms are large, furnished in an excellent way and provides better food and nursing care.

## Private medical care

Private medical care hospitals are regulated by the government. Most of these hospitals are run by non-profit and NGOs. Apparently most private sector hospitals, however, are profits. There are many expert medical practices, health centers, laboratories, and private hospitals in urban areas, but not in rural areas. Doctors in government practices are not well paid as they supposed to pay; therefore they are allowed to practice voluntarily or privately as well. In Indonesia any doctor's practicing outside a government service is usually considered its private practice. People who utilize the private health sector can pay in cash or have private assurance.

#### **Rural health clinics**

In Indonesia, there are 3 types of village health center which provide services of medical care to most villagers: Sub-health care centers, Village Midwifery private clinics, integrated Health station. They are generally open 24 hours a day and providing medical care to villagers. These are better funded clinics and have staff include doctors and nursing works 24 hours a day with some specialists and dentists available. Mainly rural health clinics have in-patient services and a pharmacy for patients' convenience.

#### **Attitude of Doctors**

According to the Ministry of Health Republic of Indonesia, doctor is not observed as a leader or king, a doctor is a qualified and specialist who gives the best possible services to his patients. Moreover the workload of doctors in Indonesia is also diverse. Doctors in other countries simply work in one hospital only but in Indonesia doctors works in many hospitals or in various health care centers. There are a lot of Indonesian doctors who practice late in night with many patients behind their busy schedule. In addition to the fact, there has seen a big gap between Indonesian doctors and their patients. Because Indonesian Doctors believe that their position is superior to their patients, therefore they do not bothered about their patients' needs or requirements, this problem influences communication gap between doctors and patients. On comparing to neighboring countries there is something extraordinary about these countries, they allow their medical services to make available of best quality aid than Indonesian health care https://assignbuster.com/republic-of-indonesia-an-overview-health-essay/ services. Perhaps the problem is not in health technologies; since the health technologies are being used in Indonesia is as same as other Southeast Asian countries. Maybe there are issues with Indonesian doctors' generosity and professionalism.

## Percentage of practicing doctors

Not enough quantity of health personnel affected health services in Indonesia. The table below shows the statistics of percentage of practicing and registered doctors taken from World Health Organization (the source is provided in reference) Global health observatory data repository.

## **Characteristics (Indonesia, country statistics)**

## **Facts and figures**

General practitioners density (per 10, 000 population)2. 88 (year 2007)Ratio of general practitioners (per 100, 000 population)19. 9 (year 2006)Total number of physicians65722Number of Dentistry personnel13709Most medical doctors and nurses are working in urban area, and less number in countryside area. In 2003, the Ministry of Health Republic of Indonesia updated its human resource jobs and occupations by starting a new foundation for Empowerment and Development of Health Manpower. The table shows the figures of 2006-2007 years as World Health Organization does not have updated figures of 2011-2012of the country.