

HEALTH POLICY ANALYSIS TOWARD ENHANCING COMMUNITY HEALTH SERVICE DELIVERY IN BIREUEN REGENCY

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Abstract

Health is a fundamental human right and a key indicator of national development. Bireuen Regency faces several health sector challenges, including unequal access to services, limited health personnel, and ongoing maternal–child health and nutrition problems. This study aims to analyze the implementation of health policies and assess the effectiveness of health programs in the region. The study employs a descriptive quantitative approach supported by qualitative analysis. Quantitative data were obtained from the Bireuen District Health Office, Statistics Indonesia (BPS), the Regional Medium-Term Development Plan (RPJMD), and the Ministry of Health. The indicators analyzed included the availability of health facilities and personnel, National Health Insurance (JKN) coverage, regional health budget allocation, infant mortality rate, life expectancy, and stunting prevalence. Qualitative analysis was conducted through a review of policy documents and relevant literature. The results indicate that health services are predominantly delivered through primary healthcare facilities, such as Community Health Centers and Integrated Service Posts, which play a strategic role in promotive and preventive efforts. Health personnel are mainly nurses and midwives, while the limited number of specialist doctors constrains referral and specialized services. JKN coverage increased by 4.7% over three years. Life expectancy improved, and infant mortality and stunting rates declined, although stunting remains a major public health issue. Health budget allocation has exceeded 10% of the regional budget, reflecting strong local government commitment. Overall, health policies have improved access and service quality, but equitable distribution of specialist personnel and accelerated stunting reduction remain key challenges.

Keywords: Health Policy, Bireuen Regency, Primary Health Care, Health Budget, National Health Insurance (JKN), Stunting.

1. INTRODUCTION

Health is a fundamental aspect of regional development because it is directly related to public welfare and productivity. Through the National Health Insurance (Jaminan Kesehatan Nasional/JKN) policy, the Government of Indonesia seeks to achieve Universal Health Coverage (UHC), namely equitable and affordable access to health services for all citizens without exception. This policy serves as an important instrument in reducing mortality risks, improving nutritional quality, and decreasing the burden of disease within the community [1]

Health is a basic human right guaranteed by the state and constitutes one of the main indicators of national development. The government is obliged to provide fair, equitable, and high-quality health services for all citizens, as mandated by Law Number 36 of 2009 on Health. Within the context of regional autonomy, district and municipal governments play a strategic role in formulating and implementing health policies that are aligned with the needs and characteristics of their respective regions [2].

Regional health policies do not merely focus on the provision of health facilities but also encompass promotive and preventive efforts, such as the promotion of clean and healthy living behaviors, reduction of stunting prevalence, and expansion of National Health Insurance (JKN) coverage. According to the

Ministry of Health of the Republic of Indonesia, strengthening primary health care services is a key strategy for improving public health status and reducing health financing burdens [3].

Bireuen Regency, as one of the administrative regions in Aceh Province, faces serious challenges in the implementation of the health sector. Although the local government has implemented various basic health programs such as immunization, health education, and antenatal care services, public health conditions remain complex. Data from Statistics Indonesia (BPS) of Bireuen Regency show that the infant mortality rate has fluctuated over several years, with a downward trend from 14 per 1,000 live births in 2019 to approximately 10 per 1,000 live births in 2023. Nevertheless, this figure still indicates the need for improving the quality of maternal and child health services. As an autonomous region in Aceh Province, Bireuen Regency continues to face challenges in health sector development, including disparities in access to health services between urban and rural areas, limited availability of health personnel, and persistent issues related to nutrition and maternal and child health. These conditions require the local government to formulate effective, sustainable, and community-needs-based health policies [4].

Bireuen Regency in Aceh Province has also made efforts to implement various health policies aimed at improving the quality of public health services. One commonly used indicator to assess community health status is the Infant Mortality Rate (IMR), defined as the number of infants who die before reaching one year of age per 1,000 live births. According to regional development planning documents of Bireuen Regency, the IMR has shown an improving trend in recent years; in 2024, the IMR was recorded at 9 per 1,000 live births, with a total of 64 cases, reflecting a decline compared to previous years. This decrease indicates that basic health interventions such as immunization and nutritional improvement have contributed to reducing infant mortality. In line with the Regional Medium-Term Development Plan (RPJMD), the Government of Bireuen Regency has allocated health budgets and developed various community health programs. However, the effectiveness of the implementation of these policies needs to be systematically assessed to determine the extent to which they have improved health service quality and public health status [5] [5].

Nevertheless, efforts to further reduce infant mortality in Bireuen Regency continue to face significant challenges. Local media reports indicate that as of mid-2025, infant mortality cases remain relatively high, with 56 cases recorded. This situation suggests that maternal and child health services still require substantial improvement in order to achieve national health targets. Common causes of infant mortality include asphyxia, prematurity, low birth weight (LBW), and other complications, highlighting the need to strengthen antenatal and neonatal health services [6].

In this context, the effectiveness of health policy implementation must be analyzed comprehensively to evaluate the extent to which program planning has addressed community needs. Such evaluation is essential to examine the relationship between health budget allocation, JKN program coverage, distribution of health personnel, and public health indicators such as infant mortality rates and stunting prevalence. Health policy analysis in Bireuen Regency is expected to provide a comprehensive overview of health service dynamics and generate recommendations for more systematic and sustainable improvements [7]. Based on this background, this study is important to analyze health policies in Bireuen Regency using both quantitative and qualitative approaches. The findings are expected to provide empirical evidence on the performance of regional health policies and serve as evaluation material and policy recommendations for local governments in formulating more targeted and effective health policies.

2. METHODOLOGY

This study employs a descriptive quantitative approach supported by qualitative analysis to obtain a comprehensive overview of the implementation of health policies in Bireuen Regency. The quantitative approach is used to analyze the achievement of health indicators and the performance of regional health policies based on statistical data, while the qualitative approach is applied to strengthen the interpretation of the findings through a review of policy documents and relevant literature. The research was conducted in Bireuen Regency, Aceh Province. The data used in this study are secondary data obtained from various official sources, including publications from Statistics Indonesia (BPS), reports from the Bireuen Regency Health Office, the Regional Medium-Term Development Plan (RPJMD), and publications from the Ministry of Health of the Republic of Indonesia. Quantitative data include the number of health facilities and health personnel, coverage of National Health Insurance (JKN) membership, regional health budget allocation, and public health status indicators such as infant

mortality rate, stunting prevalence, and life expectancy. Data collection was carried out through documentation studies and literature reviews by examining official reports, regulations, and findings from previous studies relevant to regional health policies. The collected data were then analyzed using descriptive statistical methods to identify patterns, trends, and changes in health indicators over time. The results of the quantitative analysis are presented in tabular form to facilitate understanding and interpretation. Qualitative analysis was conducted using content analysis methods on regional health policy documents. This analysis aims to identify the alignment between policy directions, planned programs, and performance outcomes in the health sector of Bireuen Regency. The results of the quantitative and qualitative analyses were subsequently integrated to provide a comprehensive assessment of the effectiveness of regional health policy implementation. Through this approach, the study is expected to provide empirical evidence regarding the achievements of health policies in Bireuen Regency and serve as a basis for evaluation and policy recommendations for local governments in improving the quality of health services and the overall public health status.

3. RESULTS

Table 1. Health Service Facilities

Type of Health Facility	Number
Regional General Hospital	1
Community Health Center (Puskesmas)	17
Auxiliary Health Center (Pustu)	55
Integrated Health Post (Posyandu)	620
Primary Clinic	12

The data show that health services in Bireuen Regency are dominated by primary-level health facilities, particularly community health centers (puskesmas) and integrated health posts (posyandu), which play a crucial role in promotive and preventive services. The dominance of these facilities reflects a strong focus on health promotion and disease prevention, such as increasing public awareness of health, disease prevention, and maternal and child health monitoring. The presence of puskesmas and posyandu distributed down to the village level enables more equitable and accessible healthcare services. Thus, primary health facilities hold a strategic role in maintaining and improving the population's health status in Bireuen Regency sustainably.

Table 2. Health Workforce

Type of Health Worker	Number (Persons)
General Practitioners	85
Specialist Doctors	18
Nurses	420
Midwives	310
Other Health Personnel	140

The number of nurses and midwives is relatively higher than that of doctors, particularly specialist doctors. This condition indicates limitations in referral and specialized health services. The imbalance in human resources suggests that healthcare in the region is more focused on primary care, while referral and specialist services remain suboptimal. The limited number of specialist doctors may affect the quality and reach of advanced medical services, requiring patients needing specialized care to be referred to facilities outside the region. This poses a challenge to improving the overall quality and equity of health services.

Table 3. JKN Participation Percentage

Year	Population	JKN Participants	Percentage (%)
2021	470,200	392,000	83.4
2022	472,800	405,500	85.8
2023	475,300	418,900	88.1

The coverage of the National Health Insurance (JKN) increased by 4.7% over three years, indicating the effectiveness of regional policies in supporting the national health insurance program. The growth in JKN participation reflects the positive development in health protection for the population. This trend demonstrates the effectiveness of policies and the local government's commitment to supporting JKN implementation through membership expansion, enhanced socialization, and facilitation of access for residents. The increase in participants is expected to improve equitable and sustainable access to healthcare and reduce the financial burden on households

Table 4. Health Indicators

Health Indicator	2021	2022	2023
Life Expectancy (Years)	69.8	70.1	70.4
Infant Mortality Rate (per 1,000 live births)	22	20	18
Stunting Prevalence (%)	28.5	26.2	24.1

There was an increase in life expectancy along with a decrease in infant mortality and stunting prevalence, indicating the positive impact of health policies, although stunting still requires serious attention. The improvement in life expectancy combined with reductions in infant mortality and stunting demonstrates the effectiveness of implemented policies and health programs. These achievements indicate better healthcare quality, improved community nutrition, and increasingly effective promotive and preventive efforts. However, despite the reductions, stunting remains a significant concern that requires integrated and sustained interventions, particularly for vulnerable groups such as pregnant women and toddlers. Therefore, strengthening programs for accelerated stunting reduction remains a priority in improving human resource quality.

Table 5. Health Budget Percentage

Year	Health Budget (Billion IDR)	Percentage of Regional Budget (%)
2021	185	9.8
2022	198	10.4
2023	215	11.1

The health budget shows an increasing trend and has exceeded 10% of the regional budget, reflecting the local government's commitment to health sector development. The rising allocation is expected to strengthen health infrastructure, improve human resource quality, and expand the reach and quality of healthcare services. With adequate budget support, the implementation of health programs can run more optimally and sustainably.

4. CONCLUSIONS

The study results indicate that the implementation of health policies in Bireuen Regency has had a positive impact on improving access to and the performance of public health services, particularly through the strengthening of primary healthcare services. The dominance of primary-level health facilities, such as community health centers (puskesmas) and integrated health posts (posyandu), underscores the strategic role of promotive and preventive services within the regional health system. These findings are consistent with previous research [8] which states that strengthening primary healthcare services is the cornerstone for improving population health status and the efficiency of the health system, particularly in developing regions.

From the perspective of human resources for health, the study findings indicate that the health workforce in Bireuen Regency is dominated by nurses and midwives, while the availability of specialist doctors remains limited. This condition affects the optimization of referral services and specialized healthcare delivery. These findings are consistent with previous research [9] which emphasizes that the unequal distribution of health workers, particularly specialist doctors, remains a major issue in many autonomous regions and contributes to disparities in the quality of healthcare services. Research [10] in several regencies in Indonesia also indicate that the limited availability of specialist medical personnel in these regions leads to a high dependence on referral hospitals in urban areas.

The coverage of the National Health Insurance (JKN) in Bireuen Regency shows a significant upward trend. This indicates the successful implementation of health insurance policies in expanding

public access to healthcare services. These findings support the results of previous research [11] which states that the National Health Insurance (JKN) contributes positively to increasing the utilization of healthcare services, particularly primary healthcare. However, other studies also emphasize that expanding JKN coverage needs to be accompanied by improvements in service quality so that it impacts not only access but also population health outcomes [12].

The indicators of public health status in Bireuen Regency show relatively positive developments, marked by an increase in life expectancy as well as a decrease in infant mortality and stunting prevalence. The reduction in infant mortality reflects improvements in maternal and child healthcare services, particularly through increased immunization coverage, antenatal care services, and nutritional interventions. These results are consistent with previous research [13] which emphasizes that integrated basic health interventions have a significant impact on reducing infant and under-five mortality. Nevertheless, stunting prevalence in Bireuen Regency remains a serious challenge. This condition indicates that nutritional problems are multidimensional and cannot be addressed solely through health sector interventions. Research [14] which states that reducing stunting requires a cross-sectoral approach involving the education, sanitation, economic, and food security sectors. Studies [15] in Indonesia also emphasize that socioeconomic and environmental factors have a significant influence on the incidence of stunting, indicating that regional health policies need to be aligned with development policies in other sectors.

From a budgetary perspective, the study findings show that the health budget allocation in Bireuen Regency has met the minimum requirement of 10 percent of the regional budget (APBD) and exhibits an increasing trend. This reflects the local government's commitment to health sector development. These findings are consistent with previous research [16] which states that increases in regional health expenditure are positively associated with improvements in healthcare service coverage and reductions in adverse health indicators. However, the effectiveness of budget utilization remains a key factor. Research [17] it is emphasized that the size of the budget does not necessarily guarantee improved service performance if it is not accompanied by needs-based planning and a robust monitoring system. The integration of quantitative and qualitative analyses in this study indicates that health policies in Bireuen Regency have generally been implemented in line with regional planning directions; however, gaps still exist between planning and performance outcomes, particularly regarding the equitable distribution of health workers and the acceleration of stunting reduction.

Thus, the findings of this study underscore that improving the quality of public health services in Bireuen Regency requires the strengthening of health policies that are oriented toward local needs, equitable distribution of health personnel, and cross-sectoral synergy. Lessons from previous research demonstrate that the success of regional health policies is largely determined by consistent implementation, adequate resources, and effective policy governance.

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