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MINISTRY OF HEALTH
REPUBLIC OF INDONESIA

HEALTHY INDONESIA 2010

THE NEW VISION, MISSION AND BASIC STRATEGIES
OF THE MINISTRY OF HEALTH
REPUBLIC OF INDONESIA

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MILIK PERPUSTAKAAN
KEMENTERIAN KESEHATAN

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Perpustakaan Kemenkes RI

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DENGAN RAHMAT TUHAN YANG MAHA ESA

SAYA CANANGKAN

GERAKAN PEMBANGUNAN BERWAWASAN KESEHATAN
sebagai Strategi Pembangunan Nasional untuk mewujudkan
INDONESIA SEHAT 2010

JAKARTA, 1 MARET 1999
PRESIDEN REPUBLIK INDONESIA

BACHARUDDIN JUSUF HABIBIE

On March 1, 1999, the President of Indonesia, Bacharuddin Jusuf Habibie, signed a Declaration proclaiming the start of a new development policy. National development in Indonesia will use a Health-Oriented National Development approach, envisioned as "Healthy Indonesia 2010". A representation of the original Declaration is shown above. The text reads: Declaration. I declare the Movement for Health-Oriented National Development as the strategy for National Development as envisioned by "Healthy Indonesia 2010".

PREFACE



The government of the Republic of Indonesia has just developed a new strategic policy for health development. This policy establishes a Health Based Development Movement called "Healthy Indonesia 2010". This national Movement was launched by the President of the Republic of Indonesia at the annual National Health Planning Meeting on 1 March 1999. With this policy, all development planners and implementers from all sectors must consider the negative and positive impact of their development activities on the health of society and the individual.

The Vision, Mission, and Strategies discussed in this booklet are the foundation for this Movement. The Healthy Paradigm, one of the four key strategies, is health development that is aimed at improving, maintaining, and assuring good health using a promotive and preventive approach. This approach does not ignore sick people and includes the participation of the community and all relevant sectors.



The key to this very crucial effort is the socialization of this concept to all related parties. This must be done very broadly and in consideration of the background, the social problems and culture of Indonesia. Furthermore, because of the national plans for decentralization, this new movement, "Healthy Indonesia 2010" and the new Healthy Paradigm should be understood, internalized and implemented by all districts in Indonesia. Indicators and parameters that will be used to measure the results of "Healthy Indonesia 2010" will be developed through a process of national consensus. To accomplish this task, and to properly implement "Healthy Indonesia 2010", there still remains much hard work from all of us.

Jakarta, 1 April 1999



Prof. Dr. Farid Anfasa Moeloek
Minister of Health Republic of Indonesia

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Introduction

Health is one of the important factors for achieving the national goals as outlined in Indonesia's 1945 Constitution, particularly to promote public welfare and overall development of human capital. The government has taken various initiatives in health development as part of a series of sustainable, comprehensive and integrated development programs. There have been many positive achievements resulting from these programs over the years as can be seen by the steady decrease in infant and child mortality and increase in life expectancy. However, compared to neighboring and comparable countries, the health status of the Indonesian people still lags far behind the norm. For example, the Indonesian infant and maternal mortality rates are the highest among the ASEAN countries.

Many factors contribute to this unsatisfactory performance of the national health development program. One factor is that the national health development program is still not in the main stream of the national development process. The total health development budget in Indonesia is only around 2% of the annual national development budget. As a result, many necessary health development activities can not be properly implemented. Furthermore, other development sectors still do not contribute enough to improve the health status of the nation. Some of their efforts may even worsen the health conditions of the country. This situation also has a negative impact on efforts to improve the quality of human resources in Indonesia. At present, the human resource index for Indonesia ranks 102 out of all nations. In general, the progress of national development in Indonesia is not satisfactory compared to other similar countries.

In order to improve this situation, a new and more progressive policy for the health development program is essential. The purposes of this new Vision and Mission are not only to deal with the current weaknesses but also to look ahead to the coming challenges. In the near future, Indonesia will be a major player in globalization. In order to compete adequately, Indonesia needs high quality human resources. To achieve this goal, a strong and effective national health development program is essential.

Further more, in the country's development, the orientation of efforts to preserve and promote health has shifted with the progress of ideas, technology, social economy and culture. Health initiatives, initially focused more on curative and rehabilitative services, have gradually shifted and evolved into an integrated health effort aimed at the entire population with active community participation. This new approach enhances promotional and preventive aspects of health without neglecting curative and rehabilitative services.

This changed understanding of the concept or definition of health and the increased awareness of factors affecting public health have led experts to conclude that the provision of curative medical services is not sufficient to create a healthy community.

Efforts to achieve a healthy community require a more promotional approach, i.e. a model approach that, in the long-term, will encourage the general public to stay healthy by themselves through increased awareness of the importance of health maintenance.

The Ministry of Health--as advocated by the Minister of Health, Prof. Dr. Farid Anfasa Moeloek, at a session with Commission VI of the Indonesian House of Representatives on September 15, 1998--is fully aware of the importance of applying a new paradigm, the Healthy Paradigm, focusing health development more on promotional and preventive efforts rather than on curative and rehabilitative services. This change in paradigm, as outlined by the Minister of Health, is expected to be the turning point of the Ministry's policies in improving the health of all Indonesians, through the National Health Development Program.

The Ministry of Health has forged a consensus or a common outlook concerning this new paradigm and its implementation as the leading force behind the NHBP. This was accomplished through a socialization and communication campaign among all ranks in the Ministry of Health and other related government departments, as well as the private sector and the general public. Given the time needed to internalize the new paradigm at each level of the Ministry of Health, new Vision and Mission statements, accommodating the spirit of this new paradigm, were formulated to develop a common understanding of the new Healthy Paradigm.

The leadership of the Ministry of Health now shares a common outlook and understanding on the Vision of the future of the National Health Development Program and the Mission it should exercise, including concrete measures to implement the Healthy Paradigm. Key decisions on the strategy to achieve the Ministry of Health's new Vision and Mission for the National Health Development Program have been collectively agreed and all top Ministry officials are committed to their implementation. Consensus and commitment for this Vision and Mission will be developed in other levels of the Ministry of Health, in the private sector and the general public.

New Vision and Mission of the National Health Development Program

Through a series of in-depth discussions of Ministry of Health leaders, a statement on the Ministry's new Vision and Mission for the National Health Development Program has been formulated. The Vision is an ideal portrayal of the future National Health Development Program that will be achieved over a fixed period of time. Three essential elements are contained in the Vision and Mission statement:

Values : High values to be held by the Ministry and the National Health Development Program

Behavior : Behavior to reflect these values, and

Image : Desired image or characteristics to be projected

High values that must be held include:

- High commitment to humanity
- Strict adherence to ethics
- Enthusiasm in assisting and serving
- Exemplary behavior
- Team work

Based on these values, the expected behavior should reflect the following: "Comprehensive and professional health care that is ethical and thorough, involving active community participation and implemented in a coordinated, proactive and principled way."

The image to be projected is:

- Friendliness
- Strong leadership
- Excellent service
- Solution-oriented

This new Vision of the National Health Development Program was reached through intensive discussions of the above three essential elements of the Vision. A consensus on the formulation of this new Vision is reflected in the motto "Healthy Indonesia 2010." This brief Vision Statement must be understood in the context of the values, behavior and image that underlie it, even though the words of the three essential elements are not included in the statement itself. This means that the achievement of a "Healthy Indonesia 2010" must be accomplished with a profound commitment to humanity and ethics, with the spirit of helpfulness and service, undertaken with teamwork and a common dedication. This must start with the Ministry of Health itself serving as a role model for other departments and the general public.

In implementing this Vision, the Ministry of Health should be able--through policies, sound planning and other health development initiatives--to reflect these goals in comprehensive and professional health care that is ethical and free of vested interests. The creation of "Healthy Indonesia 2010" forces the Ministry of Health to forge collaborative relationships with others. Because health is a shared responsibility, the Ministry of Health must involve all parts of the community, related government departments and agencies and the private sector. In the effort to achieve "Healthy Indonesia 2010", the Ministry of Health must also be proactive and forward thinking, without neglecting consistency. Only when all these are consistently achieved will the Ministry of Health be the leading government institution oriented to providing excellent services and effectively solving health problems in a friendly manner.

The time limit of 2010 was chosen in the formulation of the new Vision of the Ministry of Health with the following considerations:

- A decade provides adequate time for achieving a dream or an ideal.
- The time span is challenging and inspirational, yet achievable.

The Ministry's Vision Statement for the National Health Development Program must be followed up with effective socialization and communications both internally and externally with all levels of the community. Since the concept of a Healthy Paradigm refers to the principle that health is a commonly shared responsibility, the picture of a bee was selected as the symbol for the "Healthy Indonesia 2010" movement. The bee was selected to symbolize the collaborative teamwork approach to health care delivery. This illustrative the notion that "Healthy Indonesia 2010" can only be achieved if all parties are collectively willing and truly committed to fulfill this movement.

In contrast to the Vision depicting the dream of Ministry of Health in the future (answering the question "What?"), the Mission is commonly understood as the objective, purpose and rationale for the existence of the National Health Development Program (to answer the question "Why?"). In other words, it can be said that the Mission is tasks or responsibilities that should be accomplished by the National Health Development Program in achieving the ideal Vision for the future.

It was agreed that the new Mission of The National Health Development Program is:

- To lead and initiate healthy-oriented national development
- To maintain and enhance individual, family and public health, along with their environment
- To maintain and enhance quality, equitable and affordable health services
- To promote public self-reliance in achieving good health

To lead and initiate healthy-oriented national development means that the National Health Development Program serves as the prime driver for the implementation and achievement of national development, based on health as the primary and measurable outcome of development.

To maintain and enhance individual, family and public health, along with their environment signifies that the National Health Development Program, as reflected in the new paradigm, will direct its attention and initiatives for health development more on the promotion and preservation of individual, family and public health, as well as their environment, rather than on curative and rehabilitative services.

To maintain and enhance quality, equitable and affordable health services illustrates the commitment of the National Health Development Program in assisting with the provision of quality health services for all Indonesian people, including the poor.

To promote public self-reliance in achieving good health emphasizes the importance of partnerships with the Ministry of Health in national health development, in addition to promotional and preventive efforts. Health is a commonly shared, public responsibility between the Ministry of Health and other related parties. It requires a well-trained professional health workforce that is responsive and highly accountable for decisions and programs. In addition, the community must gradually achieve good health care based on their own efforts, with or without the participation by the Ministry of Health. Regardless of the role played by the Ministry of Health, little will be achieved without public awareness to monitor and maintain their own health.

Strategies to support the new Vision and Mission

In order to operationalize the Vision and Mission, as previously described, and achieve the Ministry's goals, it is agreed that there are four paramount issues to serve as the pillars in formulating a strategy for national health development:

1. The "Healthy Paradigm" emphasizing Health Promotion
2. Professionalism
3. The Community Managed Health Care Program (JKPM)
4. Decentralization

The identification of these four elements as pillars of the strategy for national health development does not mean that other programs should not be supported. All programs and plans of potential assistance to the Ministry of Health in achieving its Vision and Mission should continue to be carried out, even though these four pillars have the highest priority.

For each above strategic priorities, the critical success factors, i.e. the activities or interventions essential for the strategy to succeed, have been identified and agreed to as described below.

Strategy 1:

Healthy Paradigm - Health Promotion

Factors for successful implementation of Strategy 1 include:

(a) The Vision of Health as the foundation of National Development Health problems are complicated and involve various aspects of life. The solutions to health problems cannot be separated from the non-health factors. In the context of national development, health should be a foundation for national development where progress is measured by improvements in health. All aspects of development, including public infrastructure development such as urban development, industrialization and so forth must be measured by their positive or negative impacts on overall public health.

As long as this Vision of Health is not accepted as a foundation of National Development and is not one of the key criteria for determining the appropriateness of development initiatives, health problems will remain a critical national issue. Without initiatives to establish health as the foundation of development, health development will lag behind the increasingly rapid development often undertaken without consideration of the impacts on public health. Therefore, the principle of the Vision of Health as the foundation of national development should be officially incorporated in the State Guidelines (GBHN).

(b) Health Paradigm as the commitment of national movement One of the keys to success of the Ministry of Health's new paradigm is to establish the Healthy Paradigm as a national movement. As the initial step, the President, as the country's highest national leader, has directly endorsed this national movement. His launching of the Healthy Paradigm Movement must be followed up by concrete, innovative, consistent and sustainable measures involving all strata of the community, including active intersectoral participation.

The Healthy Paradigm will remain a mere slogan without active intersectoral and community participation. The Ministry of Health is the only government institution responsible for national health development. Without a commitment and a strong effort to make the Healthy

Paradigm a national movement, the idea that health is a shared responsibility requiring partnership will remain a meaningless concept.

(c) A system advocating promotional and preventive initiatives in a comprehensive health program A new system or mechanisms should be established so that health development efforts will not revert to the old paradigm focusing more on curative and rehabilitative aspects. At the operational level, this system will work best if there are intersectoral or interdepartmental synergies, in addition to the cooperation between the Ministry of Health and all strata of the community including the private sector. The application of the Vision of Health as the foundation for national development will play a substantial role in the development of the strategic policies of this system to improve the health status of Indonesia's human resources.

(d) Sustainable support of resources The Ministry of Health is acutely aware that resources are a determining factor for the successful implementation of the Healthy Paradigm. Efforts will continuously be undertaken to identify resources from the government, the private sector and donor agencies to achieve the agreed Vision and Mission.

(e) Internal and external socialization The Ministry of Health recognizes that the Healthy Paradigm, as a new pattern or approach, requires socialization and communication, both in Ministry of Health staff and in all strata of the community. An appropriate socialization and communication strategy should be designed and incorporated into a clear and effective campaign based on a comprehensive MOH communications plan. This should consider key aspects such as strategies and goals, the strata of the targeted community group, the media and the promotional and educational materials used. The effectiveness of this socialization and communication campaign will be enhanced through collaboration with the involved parties.

- (f) Restructure and revitalize infrastructure associated with decentralization plans

The strategy of the Healthy Paradigm, health promotion and disease prevention cannot be achieved without support from involved organizations, qualified human resources and efficient procedures and systems. The implementation of decentralized national health development will considerably affect the future organization of the Ministry of Health both at the center and the local level. In addition, it will affect the human resource and administrative systems requirements as well as necessary procedures.

Strategy 2:

Professionalism

Factors determining successful implementation of Strategy 2 include:

- (a) Consolidation of human resources management

The management of human resources for the National Health Development Program within the organization of the Ministry of Health is of highest importance. The implementation of the Healthy Paradigm, with a health promotion oriented development, is a new conceptual framework and approach in national health development. This and a number of other key strategies require a fundamental change in the Ministry of Health's management of human resources. In order to support the achievement of Healthy Indonesia 2010 and the new National Health Development Program Mission, almost every function involving human resource management needs to be re-examined, strengthened and made more effective and efficient. This includes clear roles and responsibilities, job descriptions, recruitment, deployment, education, training, evaluations, promotions, incentives and career development. For instance, the change from a centralized system to a decentralized one requires new types of competencies and skills for Ministry of Health managers and general personnel both at the center and the local level. The consequence of decentralization is the empowerment of district and provincial health offices to perform activities, such planning, program management, decision making and problem solving, previously undertaken by the central government. These activities should be undertaken in a framework of national policy, priority and standard settings.

Professionalism must be enhanced at all levels of the Ministry of Health in order that the new Vision and Mission with its strategic pillars can jointly function in an effective and efficient manner.

- (b) Strengthening aspects of science and technology, faith and devotion, and professional ethics

The shift to the Healthy Paradigm clearly requires a shift or change in the mastering of science and technology so that health decisions can be evidence-based. The transition from the curative and rehabilitative to preventive and promotional approaches will have a widespread impact on the type of science and technology that should be mastered by professionals engaged in the field of health. Development of appropriate health services research networks will be important so that research can be directed to priorities. Education and professional development initially emphasized science and technology with a view of producing medical and must be counterbalanced with the improved scientific and technical training in the fields of sanitation, nutrition, public health, environment, and so forth. Various disciplines with their supporting technology for preventing the spread of diseases must have a place in efforts to improve education and professionalism.

A long with increased scientific and technical knowledge, strengthened moral persuasion is also required, particularly in preventing the spread of various new diseases. For example, the Ministry of Health cannot control the spread of HIV/AIDS solely through curative and rehabilitative treatments. Efforts should include interventions from other sectors, such as Ministry of Religious Affairs, in addition to the efforts to promote public awareness of the hazard of this virus. Thus, efforts to strengthen faith and devotion are essential in preventing a disease to ensure that this disease will not spread or at least to slow transmission. These initiatives will be more effective if health providers strictly adhere to the professional ethics that should underlie their attitudes and actions.

- (c) Strengthening of the concept of medical and health professionalism

In order to ensure the achievement of the Ministry of Health's Vision and Mission for the National Health Development Program, it is necessary to improve human resources, particularly the professionalism of medical and other health care workers. At the present time, the professionalism and capacity of the Ministry of Health's human resources is not yet adequate to support the new Healthy Paradigm mainly because the focus of their professional development is directed more at curative health services. This is reflected by the substantial number of general practitioners and the limited number of specialists and professionals engaged in preventive and promotional initiatives, such as nutritionists and sanitarians.

Strengthening health professionalism will be more effective if it is supported by policies to elevate the social status and appreciation of professionals involved in promotional and preventive activities to the level enjoyed by those engaged in curative and rehabilitative services.

- (d) Making strategic alliances with other parties plays an important role in achieving the Vision of Healthy Indonesia 2010

The concept of national health as a shared responsibility between the Ministry of Health and all strata of the community and the private sector necessitates the Ministry, as a governmental institution, to forge strategic alliances with all related parties. Partnerships between the Ministry of Health and these parties are the key to improving the health of the population through preventive and promotional efforts. Without such strategic alliances, the Ministry of Health will be trapped in the old curative and rehabilitative paradigm. In addition, these outmoded attitudes will only cause the Ministry of Health to lag further behind in the rapid progress of national development.

Strategy 3:

The Community Managed Health Care Program (JKPM)

Several factors that have been identified as the determinants of success for the JKPM system are:

- (a) Collective commitment and launching along with the Healthy Paradigm movement

The JKPM system is one of the strategic pillars for achieving Healthy Indonesia 2010 and should be launched along with the Healthy Paradigm Movement. The commitment of government and all involved parties, including the private sector and the general public, should be established from the beginning to ensure the success of this system. The aims of JKPM, health promotion and disease prevention should be clear and unequivocal so that they can be understood in the community at large.

- (b) Support of legal regulations

As with the implementation of development in general, the JKPM system, serving as one of the strategic pillars in national health development, requires the support of clearly defined and adequate legal regulations and guidelines. Legal regulations assuring the expected level of support for public health care must be formulated immediately. These regulations must ensure necessary funding for health promotion and prevention initiatives. In addition, all current laws and regulations should be reviewed to resolve any inconsistencies with the Healthy Paradigm.

- (c) Internal and external socialization

As with the Healthy Paradigm, the JKPM system, a new way of providing health care, requires an effective socialization and communication process, both in the ranks of Ministry of Health and with outside parties, including other governmental institutions, the general public and the private sector. A communication strategy and plan to socialize this new system requires immediate consideration and implementation.

- (d) Governmental interventions in the early initiatives of fund raising

As with previous initiatives for health development, efforts to reach the goal of national health development, Healthy Indonesia 2010, require adequate funding, from a combination of donor, public and private sources. Although there is a consensus that health initiatives are a shared responsibility of the government, general public and the private sector, the government's role remains essential, particularly in the efforts to raise initial funds. In any event, the government has the obligation to consider and develop health-financing issues, including funding sources and methods of financing.

- (e) **Policy of responsible and autonomous management**
As a new policy to provide health care based on the Healthy Paradigm and implemented in accord with decentralization, the JKPM system should be established immediately at both the central and the provincial levels in order to regulate and ensure comprehensive, integrated, equitable and affordable health services for all members of the community.

Strategy 4:

Decentralization

Since health is affected by environmental and regional factors—including development policies where priorities may differ from area to area—decentralization or locally based health development with locally specific approaches is indispensable to increase the effectiveness and efficiency of health programs.

Factors determining the success of decentralization-based health development include:

- (a) **Balance and synergy of decentralization, deconcentration and delegation**
Locally based health development (decentralization) should be implemented with a balance of decentralization with deconcentration and delegation. Without a proper balance of these three principles, it will be difficult for districts to support the implementation locally based approaches for health development.
- (b) **Clarification of the types and levels of authority**
Policies for health development based on decentralization must be followed by clarification of the types and levels of decentralization. This must be done because the potentials of all regions will vary. To ensure the successful implementation of this new system, it is necessary for the Ministry of Health to specify unambiguously the level, roles and functions of decentralization given.
- (c) **Clear management guidelines with performance indicators/parameters of healthy cities and districts;**
evidence-based analysis used as the basis for programming Policies for decentralized development and health care must be backed up by clear instructions that serve as management guidelines to prevent confusion, particularly in evaluating the performance of health initiatives in each area, city or district.

To achieve the above goal, it is necessary to establish clear and measurable indicators/parameters so that it is easy to evaluation or examine the criteria for determining when a city or district can be classified as healthy.

These indicators/parameters for measuring the level of success in achieving a Healthy Indonesia 2010 should not only be related to health status and health care, but also should encompass other indicators. These include success in reaching a policy consensus for implementing healthy development, involvement of other sectors and the community, the availability of human resources, funding and facilities necessary for implementing decentralization and other non-health indicators related to public health care and improved community health.

Clear management guidelines and performance indicators/parameters of a healthy city or district will have meaning or value added only if the health development program implemented is based on evidence-based analyses of the locale and its specific needs. The health development program plans must be based on locally specific needs identified on the basis of accurate data, within a MOH health management information system framework, and not merely on the basis of donor driven pressures.

- (d) **Empowerment:** Capacity for applying decentralization Decentralization that empowers regions must be tailored to the local capacity for implementation. Empowerment not followed up by careful analyses of each region's capacity will only give rise to new problems.
- (e) **Sustainable human resource policies and system**
As previously indicated in the discussion on professionalism, decentralization must be accompanied by a suitable and conducive system for human resources. Turning over some authority to the region or locale to implement health development based on the Healthy Paradigm, which is not accompanied by the strengthening and revitalization of human resources, will disrupt health initiatives already underway.
In line with current needs, human resources functions must be able to serve as a strategic partner in supporting all health development programs, both at the center and at the

local level. A reexamination of re-deployment practices, in addition to established patterns of education, training and development, is necessary in order to ensure the availability of adequate human resources to achieve stated goals.

(f) Conducive intersectoral infrastructure

As with the Healthy Paradigm, the implementation of decentralization requires the collaboration and the availability of appropriate intersectoral infrastructure. The collaboration between health sector and other sectors, in this context particularly with Ministry of Home Affairs, is essential and must be appropriately coordinated. Industry based ministries are also important if health promotion and prevention programs are to be fully effective.

(g) Effective control mechanisms

In order effectively and efficiently implement decentralized health initiatives, it is essential to create good control mechanisms to monitor and evaluate all activities in each area. This is closely associated with paragraph c above, i.e. clear management guidelines with performance indicators/parameters of healthy cities and districts.

With the establishment of the Ministry of Health's new Vision and Mission for the National Health Development Program and with the identification of factors determining the success of the health development strategy as outlined above, it is the task of everyone in the Ministry of Health to start thinking clearly about plans of action that we must undertake in line with areas of expertise.

Only through clear plans of action and our full and consistent commitment to implementing them, can our cherished Vision and Mission be fulfilled.

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