

Health Decentralization still Halfway Done


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The professor of Public Health Science, Medical Faculty of Universitas Gadjah Mada Prof. Dr. Laksono Trisnantoro said that the implementation of health decentralization policy for the last 8 years still seemed halfway done. According to Laksono, this has caused a gap between regions, and there are conflicting roles between the central and regional governments. Unorganized events also occur.

“During 8 years there has been a debate, with the Central Government tending to prefer centralization while regional governments wanting decentralization.” Laksono said to press in the 8th annual health decentralization forum at University Club (UC), UGM, Tuesday (28/7). He said that the implementation of decentralization in health sector has made some regions poorer while others wealthier.

“There should be coordination and agreement between Central and Provincial governments, and there should be consistency and togetherness.” he added.

Health decentralization has been hampered technically because of the weak political policy in provinces. Meanwhile, Laksono stated, health sector tends to be more technical. “We can see now, the data report from Provinces is not delivered to the Central region properly, Central government does not analyze it. The mutation of health officers between regions is also very difficult to do.”



Laksono also mentioned the health policy up till now is still centralized, such as the handling of malaria disease, and the health of mother and baby. Decentralization in health was intended to bring health service closer to the society and make it better particularly to inhabitants in the rural areas. However, budgeting problems and health data which are still not managed well between Central and Provincial regions have made health service less good.

“The budget allocated to poor and rural regions should be more than the wealthier ones. This also happens to public health insurance (Jamkesmas).

Through this annual forum, Laksono said that a discussion will be done to find the effective formula in order to develop health decentralization policy based on Central and Provincial government standard. Several of them are the solution to hospital management, the handling of communicable diseases and the health budgeting to Central, provincial and regency governments.

“The political policy is more on technical aspect, so it is not adequate because Indonesia is a vast country, and many regions are not ready to apply decentralization.” Laksono said.

The solutions to various problems were also discussed in this three days forum from 28- 30 July, involving several health experts. Laksono mentioned one of problems is the sending of doctors to remote areas, especially specialist doctors and surgeons to several regions. There are many imbalances dealing with the demands of doctors in region, while the number of doctors is very limited. An example in Jakarta, the ratio of specialist doctors is 1: 3000, whereas in outside Java is 1: 47,000. The specialists pediatrics in Jakarta are 420 while in Bengkulu only 75.

To overcome this problem, the university is very needed for humanitarian mission. This can be done by involving 50 Medical Faculties in Indonesia in cooperation with regional governments to give scholarships.

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