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TECHNOLOGY**

**THE EFFECTIVENESS OF HEALTH SERVICE IN INLAND COMMUNITIES IN
SOUTH SULAWESI, INDONESIA**

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ABSTRACT

This type of qualitative research approach through Phenomenology, as for the results of research is the concept of health services in remote areas still need improvement and refinement, this is due to the condition of the Interior which is very far away and remote access road to the Interior is still hard to follow either the two-wheeled or four-wheeled vehicles, this led the Ministry has yet to run optimally, health services in remote areas is still focused on providing health services clinics clinics that are still very minimal health facilities, so the impact on the public health level of in land.

KEYWORDS: service, community, health, Interior, the effectiveness.

1. INTRODUCTION

Indonesia is one of the countries with large population densities in the world. Diverse communities economic conditions give rise to the social gap in the various areas of life. One of them is the uneven health care in all corners of the archipelago which makes the reputation of the health service in this country is rated poor in the eyes of the economic community of the lower classes. The current progress and the success of the health service and education in Indonesia can only be seen in urban areas only.

All the amenities are available with complete, just choose the course in accordance with thick wallets disaku pants. While the outermost regions, how about a secluded, lagging behind that in fact still enter Indonesia regions too? Maybe the young children, adults or elderly people out there could help answer and erodes bit by bit from the problems that arise during this time.

It is true health is not everything, but without health everything is meaningless. Health is urgent for all human beings on this earth. Perform preventative measures (preventive) for the community to avoid the threat of disease is the responsibility of everyone, especially for me as a community health worker.

Many people out there who prefer health solutions through treatment (curative). When in fact not just action treatment (curative) only needs to be done to meet the medical degrees, but must also be coupled with precautionary measures (preventive). what else are in remote areas and outlying. When the limitations of being an obstacle in the area, actually a saying health "preventing is better than cure" is a solution of the problem of health during this time. However this is often overlooked by many people, including large 3T.

Healthy Indonesia Card program (KIS) who is also one of the Government's program in order to improve public health degree evenly is a step that must be supported by an appropriate health workforce professionals to realize the archipelago healthy. However, after the card was launched, would be able to answer the problems of health in Indonesia? No, not at all. So much experience that I experienced during this time, including the experience served in the border. The process is so complicated and long made many of these card holders prefer the silence with an experienced health problems.

Health care services are basically aims to implement the prevention and treatment of diseases, including medical services are implemented on the basis of individual relationships between doctors with patients who need



healing. In the relationship between doctor and patient therapeutic transaction occurs means that each party has rights and obligations. The doctor is obliged to get the medical services for patients. This can be either a media Ministry enforcement diagnosis correctly according the procedures, administering therapies, medical action standard medical services, as well as providing a reasonable course of action is indeed necessary to cure his patients. Existence of maximal effort conducted this doctor is aimed so that these patients can obtain a satisfactory transaction of right i.e healing or restoration of health.

Problem

1. How health services on inland communities in Indonesia?

2. A REVIEW OF THE LITERATURE

Public Administration

In the past, administrative science seen as normative science that emphasizes "what should be", but the current developments, view last experienced a demistifikasi, and experts see the Administrative Sciences as the policy science merge the question "what should be" with "what is" in the form of the question "what is probable" next; Moeljarto in Marlon (2009).

Public administration from each country has a number of specific features of "the way things are done", which is different from one country to another. In addition, in every administration there are many agencies with their own distinctive characteristics: local, provincial or regional, national and transnational institutions even (in Dr. Enrique Claver, Dr. Juan Llopis and Dr. José I. Gascó, 2000). Most theories of public administration (1997 Frederickson; Perry and Wise 1990 in Wouter Vandenabeele, 2007) identifies these behaviors as self-sacrifice in realizing the public interest and altruism as the specificity of civil servants and it is very difficult to explain this type of behavior in terms of rational choice (Wouter Vandenabeele, 2007).

The exact role of the communities in public administration has been an active and sustainable area on the investigation, experimentation, revolution, and controversy since the birth of this nation. Contemporary movement to examine the role of the community in the administrative decision-making process has come as a response to problems in the second half of the century and as a result of concerns on the part of citizens, administrators, and more politicians on the desperation of citizens and apathy (Box, 1996; Putnam, 1995, Timney, 1996; In 1995 Thomas, Cheryl Simrell King, Kathryn Feltey and Bridget m. O'Neill Susel, 1998). Because both of the citizens and their leaders have realized, "participation through the normal institutional channels have little things that have an impact on the Government's political substance" (Crosby, Kelly, and Schaefer, 1986 in Cheryl Simrell King, Kathryn M. Feltey and Bridget O'Neill Susel, 1998). Many citizens and politicians, administrators, interested in improving public participation in the decision of the community. Attempts to do so are currently underway across the country (Cheryl Simrell King, Kathryn Feltey and Bridget m. O'Neill Susel, 1998).

Administration as art because in implementing it using the skill that reflects the ability of the individual, as expressed by the Administration was that besides Siagian as artistic science as well as scientific art. Administration require ethics in serving the interests of the community. As put forth by Plato in Irawati (2007) says that one cannot be a good public administrator without being first a philosopher.

Bellone (Irawati, 2007) argues that the discipline of public administration is predicated on the study of organization. Organizational theories, hypotheses about human behavior in a complex organisational and administrative theories and hypotheses about human behavior in the Working Group, is the basis in the theory of public administration. To be explained that the public administration is talking about human behavior in government organizations. Even Shafritz and Russell (2005:5) in Irawati, (2007) posited; It is easy to define administration if you are content with being simplistic: it is government in action – the management of public affairs on the implementation of public policies.

The verdict against the existence of the public administration as a political science is also part of which is supported by Allen Schick which are convinced that the public administration basically serve power and have

full power to do his devotion to helping the ruler in governing more efficiently (2002:33 in Thoha, Anwaruddin, 2004).

This kind of thinking is particularly expressed by Dwight Waldo (1953) (Anwaruddin, 2004) that gives a sense of the public administration, that "the organization is public administration and management of men and materials to achieve the purpose of government".

Services

According to Munir in Hendra Hadiwijaya (2011:224) services are activities by someone or a group of people with a grounding system through material factors, specific methods and procedures in order to meet the needs of others in accordance with the its rights. It is explained that the Ministry is a form of systems, procedures or methods that are given to certain other human in this case the customer so that the customer's needs can be fulfilled in accordance with their expectations.

A friendly and professional service has become a condition that must be met by providers in the administration of the State (Waworuntu in Suratno, S.Ag., MAP, 2013). Siagian in Hasma Erpanti H (2009:9) renders services are often defined as activities take care, prepare something good in the form of goods or services against its users (stakeholders), customer (user) and consumers. Terms of It is also expected that the good climate in the service unit work, assessment of customer service quality will be both of the employees (i.e., the employee's performance). Finally, customers will be more loyal to the organization when they assess the performance of the more positive employees (Marisa Salanova and Sonia Agut, 2005).

Evidence empiris show it with employees who are able to provide services, high-quality the extent to which employees are able to, customers are more likely to evaluate the beneficial results of a Ministry meeting, high, experience and satisfaction increase their purchases and the frequency of visits times ahead of them (for example, Borucki & Burke, 1999; Bowen, Siehl, & Schneider, in Liao Hui and Chuang Achia: 2004).

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Tjiptono (1998) in Hendra Hadiwijaya (2011) reconsideration of the service quality/service is the level of excellence for meet the desires of the customer. According to the opinion of the quality of service or as an excellence-excellence given company in order to meet the wishes of the customer. While according to Siagian (1998) in Hendra Hadiwijaya (2011) services in General is the sense of fun that was given to others accompanied amenity and meet all their needs.

Thus the Ministry is providing pleasure-pleasure to the customer by the existence of amenity so that customers can meet his needs. Payne (2000) in Hendra Hadiwijaya (2011) declaring services relating to the quality of an organization's ability to meet or exceed customer expectations.

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Public Policy

The process of public policy, at the very least include: 1) the formulation of a problem; 2) Forecasting; 3) Recommendations; 4) Monitoring; 5) evaluation. Innovative public policy always should be: 1) Based upon the

public interest; 2) planning, execution, and oversight, as well as his engaging public pastisipasi; 3) their definitions are always dynamically moving in accordance with the development aspirations of the public.

Michael e. Porter in Susy Susilawati (2007) tells us that competitive advantage from each State is determined by how capable the country was able to create an environment that fosters the competitiveness of every actor in it. In the context of global competition, then the task of the public sector is building an environment that allows each of the principals of development able to develop themselves into the perpetrator-perpetrators are competitive.

Thomas r. Dye defines that "Public policy is whatever the government chose to do or not. to do "(whatever that is selected by the Government to do or not to do). From this definition, then public policy includes everything stated and done or not done by the Government. In addition, public policies are also policies that are developed/created by agencies and Government officials.

In this case the author of the theory of policy public use is public policy theory according to Thomas r. Dye public policy stating that is what was done by the Government and what was not done by the Government.

One of the important things related to public policy is the process of making public policy. According to Thomas r. Dye public policy making process is a political process that involves a wide range of interests and resources so that the end of the political process is a subjective product created by the conscious choices of principals the policy.

Health services

As for medical services, according to the experts, namely:

1. According to Prof. Dr. Soekidjo Notoatmojo, Ministry of health health care system is that its main goal is preventive services (prevention) and promotif (health promotion) with target communities.

2. According to Levey and Loomba (1973)

Health care is an effort organized by yourself or together in an organization to maintain and promote health, prevent disease and cure, and restore the health of individuals, families, groups, or the community.

3. According to Azrul Azwar (1996)

Health care is every effort organized themselves together in an organization to maintain and promote health, prevent and cure disease and restore the health of individuals, families, groups and or the community.

Based on the definitions above, we conclude that health services health care system is the ultimate goal, namely promotif, preventive, curative, and rehabilitation of the health of individuals, families, groups or society, environment.

3. RESEARCH METHODS

Qualitative Research Approach Through Kind Of Phenomenology Of

4. THE DISCUSSION.

The Ministry of health prepared the Government one is the primary service as the giver of clinics that become the main flagship service for the community, hasn't been able to provide services to remote areas of the border and the Islands. Work-area clinics geographically quite widespread, most hard to reach population, scattered in small groups that are far apart. Public transportation is very limited with the expensive cost of good land, River, sea or air. Community health status and health service coverage in remote areas of the border are still low.

The community in general do not have the knowledge and behavior of healthy living and environmental conditions are unfavourable. The use of clinics in remote areas, among others, influenced by access services that not only caused problems of distance, but there are two determining factors (determinants) that provision which is the determinant factors of the Ministry, and the request is the determinant factors of users (Judith Timyan, et al, 1997). Determinants of provision consists of physical infrastructure and services organization, place of service, availability, utilization and distribution officers, service fees as well as the quality of service. While the determinants of demand is a factor users include low educational and socio-cultural conditions of society and people's income levels are low or poor. The primary need in order to obtain an effective service: access is the

availability of facilities and officers, distance and financial affordable as well as socio-cultural issues that can be received by users. Constraint is the distance of the user from the place of residence of service, lack of tools and supplies in place of service, lack of funding for the cost of transportation, and lack of funding for medical expenses.

In addition to transportation facilities and infrastructure factors, there are still many other factors that have not been elucidated clearly related to affordability of service that can help solve the problem.

□ Factors Restricting health service Community inland today, implementation of health services at community insufficient. It is influenced by several factors, namely, the improvement of science and new technology, persgeseran the value of community, legal aspects and ethics, economics and politics.

1. Science And Technology

Implementation of the health care system can be affected by knowledge science and new technologies, considering the development of science and technology, it will be followed by the development of the health service or as well as the impact of service more clearly follow the development of health and health care such as in technology to solve the problem of difficult diseases can be used use tools such as laser therapy, changes in gene and others. Based on that then health care cost is quite expensive and the service will be more professional and need staffs who are experts in a particular field.

2. Shift The Value Society

The health care system can also be affected by the value that is in the public as users of the services, where with the various communities, then it can be raises the utilization of health services. The community has already come forward with a high knowledge, then it will have a deeper awareness of the use of utilization of health services, likewise on a society that has less knowledge will have an awareness low against the health service, so so will greatly affect kondis system of health services.

3. Legal And Ethical Aspects

With the high public awareness of the use of or the utilization of health services, it will be increasingly higher demands of law and ethics in health care, so that the offender health care givers should be required to provide health services professionally by observing the values of existing laws and ethics in society.

4. The Economy

Implementation of health will be affected by the level of economy in the community. The higher a person's economic, health care will be better cared for and easy to reach, and vice versa when the economic level of a person, then it is very difficult to reach health services given the cost in the service health costs are quite expensive. The State of the economy will be able to influence in the health care system.

5. Politics

Government policy through the existing political system would be very influential in the system of administering health services. Existing policies can give you patterns in health care systems.

J. public health service strategy for inland health development especially in the Outback is a part that is not an integral part of national development that attempted by the Government. In carrying out health development at the center of the load and the increasingly complicated health problems, it takes strategy Sharpshooter to deal with it. In addressing the issue of health, the Ministry of health has five major strategies.

Moving and empowering people to live a healthy life.

The main goal of this strategy is the whole village becomes idle, the whole village community behaves live clean and healthy as well as the whole family aware of nutrition. Improve access of the community taking action against a quality health service.

The main objectives of this strategy are; Each person impoverished get quality health care; every infant, child, and community groups a high risk unprotected from disease; in every village available competent human resources for health; in each village there is enough essential drugs and basic medical tools; each health center

and its network to reach and to reach all communities in the territory it works; health services in every hospital, Clinic and its quality standards. Improve the system of surveillans, monitoring and health information.

The main objectives of this strategy are: every occurrence of the disease quickly to the village of terlaporkan/head and then forwarded to the nearest health agencies; any extraordinary events (of the OUTBREAK) be solved disease outbreaks rapidly and precisely so that it does not pose a public health impact; all the availability of pharmaceuticals, food and health supplies are eligible; under control environmental pollution in accordance with the health standards; and the proper functioning of the system of health information across Indonesia.

Improve health financing.

The main objectives of this strategy are: health development take priority Central Government budgeting and region; the Government's health budget to health promotion and prevention efforts; and the creation of a system of guarantee of financing health care especially for poor people.

On that occasion also presented regarding the National medium term development plan (RPJMN) 2004-2009. ? Based on the presidential Regulation No. 7 year 2005 about National medium term development plan (RPJMN) 2004-2009, has been determined that the target health development at the end of the year 2009 is the increasing degree of public health through increased access of society towards quality health care.? the Health Minister said.

The achievement of these targets reflected in the indicators of the impact of health development, namely: • increased age life expectancy of 66.2 years to 70.6 years • decrease in infant mortality from 35 to 26 per 1000 live birth • Declining numbers maternal mortality from 307 into 226 per 100,000 live birth prevalence of Decreased nutrition • less on older toddlers from 25.8% to 20%.

• further submitted that, in the implementation of health development, the Department of health has committed to upholding the values as follows:

In favour of the people

In implementing health development, the Department of health will always be in favour of the people. He got the degree of extended health care for everyone is one of human rights without a tribe, the religious, and socioeconomic status.

Act quickly and appropriately

In addressing health problems, let alone the nature of the emergency must be done quickly. Quick action must also be followed by a careful consideration, so it can be on target with the right intervention.

Teamwork

In carrying out the duties of health development, must be built team work intact and compact, by applying the principle of coordination, integration, synchronization and sinergisme

Based on the HDI report issued by the development programme of the United Nations (UN) 2013, for the maternal mortality (AKI) in Indonesia is still very high numbers i.e. recorded 220 per 100,000 live births, while in neighboring States ASEAN, as the number of records the Singapore 3, Brunei 24, Malaysia 29, Thailand 48, 59, Viet Nam and the Philippines amounted to 99. Indonesia only better from Cambodia, Laos and Timor-Leste.

Associated with the problems of sanitation, as reported by the UNICEF data from 2013, Indonesia is at # 2 as the country with the lowest sanitation in the world. The first position that is India about 626 million of its people live without sanitation, while Indonesia as many as 63 million people recorded do not have toilets or SANITARY FACILITY so it's not surprising outbreak of diarrhoea is still one of the causes of the high number of infant mortality in Indonesia. recorded worldwide from 600 thousand children die per year due to diarrheal diseases and own Indonesia is one of the 11 countries, the highest death toddler due to the disease.

Five Pillars Of Healthy Rural

It is this circumstance which later gave rise to one of needs analysis the concept of acceleration of development of rural-based health healthy, so that later can accelerate the increase in the affordability of access and quality of basic services health for the people of the village leading to an increase in community empowerment in General.

As a form of Government commitment in accelerating the development of health, then through the Ministry of regional development, the Village left behind and Resettlement have been assigned a wellness-based rural development policy or more popular the rural Program called healthy. Therefore, this programs is absolutely right to accelerate health development in Indonesia, where the initial process should start from the countryside, given the strength of the country is a village and village as the majority of Indonesia society so that the village should be a priority of the national implementation plan development.

Rural Healthy program that has been launched that will have 5 (five) focus/pillar as a form of intervention directed at development;

- 1) availability of Physician Clinics for any health center, Village midwives, Availability
- 2 for every village,
- 3) availability of clean water to every household,
- 4) the availability of good sanitation, as well as
- 5) fulfillment of balanced Nutrition especially for pregnant women, breastfeeding women and Toddlers.

As for the number of villages which targeted Rural Healthy Program as much as 9,497 village in 84 Counties in areas lagging behind.

It is at once in support of the implementation of Cards Healthy Indonesia (KIS) is a kind of social security/health insurance used for free, which has been rolled out by President Jokowi some in order to improve the welfare of society the less fortunate who mostly reside in the villages. Surely forward this program will be able to be a breakthrough in accelerating the development of public health Indonesia in order to be human in a healthy, prosperous and will be able to give birth to generations of very superior.

Public health barriers

1. Health Status Disparities

Disparity is the difference; distance: existence of the wage earned by workers in the factory. In Indonesia the truly wealthy of this remarkable, the status of Blocking their owners to get the right health care it deserves. , society, mass media, politicians even insan health still looked only at the health rights of the right to acquire curative services in the home and clinic. "Although nationwide public health quality has improved but the disparity between the economic and social level of the region is still quite high, " said.

In fact, the right to enjoy a healthy lifestyle is much broader than just the right to curative services. one of the guarantees of the State that all access information about health and availability must be met for all walks of life. Have not been met by the State. During this Health is considered an expensive goods, health In Indonesia just for the establishment of ' poor people are prohibited from pain here. tragically, given the wealth of remarkable Indonesia much. Where the results of the Earth Indonesia.

Mukhlas is one of th,52 citizens of the poor who has spent years saving the debt to the State because hospitals don't have medical expenses, 5 years ago he fell away from the coconut tree. medical expenses that are increasingly felt more weight make the most of the citizens of this country being reluctant to let his health. They tend to be indifferent to health. Whereas buila date back to health is a pillar of the Country to advance the State. When Health is going to be stuff that's cheap, even free of charge.

2. The Double Burden Of Disease

For the people of Indonesia in particular, has a double burden of disease, the first is the pain suffered and the money is enough to resolve the problem of the disease he suffered. This gives the potential negative impact on patients is concerned, because of limited funds, they get health care limitations.

3. Low Service Performance

Jakarta Coordinating Minister for people's welfare Agung Laksono,, assess the performance of the health service is still low especially in regions lagging behind, isolated, frontier and outlying islands. "Wellness performance But is one of the important factors in an effort to improve the quality of health of the population, " said, tonight. Agung Laksono, explains it is a challenge at the Indonesia health development requires the support of all elements of the nation.

"Poor quality of health services is characterised by still under service quality by default partial regional hospital as well as the limitations of the health workforce is also a challenge that should be immediately addressed, " said. It is said, up to now the number and distribution of physicians, midwives and nurses have not been evenly distributed where the disparity ratio of general practitioners per 100,000 population between regions is still high. "Indonesia experienced a shortage in almost all health workers are required, " said.

4. The Behavior Of Society Who Are Less Supportive Of Clean Living

This adult attitudes Indonesia equally bad with a system that regulates health. If you pay a visit to Jakarta, for example, take a look at the river there is now River in Jakarta are having a change of function, the function of the river no longer be tata city waters but the trash. Not to mention there is a SANITARY FACILITY in the community, as well as in parts of rural Indonesia kesadaraan of the importance of health yet we find in our society.

5. Low Environmental Health Conditions

Low level of economic development that has not been evenly is the cause of this subject matter. This raises the gap social Good Boards, clothing and food. The question of why health more in natural by the person not the establishment, perhaps the answer is because the environment is a bad place to live.

Efforts improve health services

Along with the growing Knowledge about the sense of community needs and health, then the perpetrators of health is required to provide a better health service, therefore all the parties working in health are advised to improve the quality and quantity, either with normal education, informal education, the seminar health seminar. And it always accesses the updated information. Step step is expected to be able to advance the health of Indonesia.

Managing The Community

Development geared to raising awareness, willingness and ability of healthy life goal is change the behavior of the community. Organized with the basics of humanitarian, empowerment and self-reliance, fair and equitable because the community as a health determinant by themselves. Pay attention to population dynamics, epidemiolog, ecology, science and technology, as well as the progress of globalization and democratization of this deals with the influence of other sectors.

External

1. Outside Of The Health System

The large number of factors the slowness of health development in Indonesia, it should be immediately corrected. factors from outside the offender health is the patient or target health i.e. community. seen in terms of the economy of Indonesia alone had able views gaps occur, expect the Department of health, community, and health care more about the perpetrators as well as the problems this issue. the habit of the poor who tend to be messy, not without reason, is because of their the limitations of, While the indifference they caused by the lack of knowledge community about health. Offender health expected hold extension-extension, as well as the empowerment of the community, not just in the city, but especially in the villages of the hinterland.

2. Health Determinants

To realize the above objectives need to be improved social sector economy, positive culture and a healthy environment. Lifestyle behaviors are influenced by:

- Education



- Agriculture
- Food Industry
- Work environment
- Work
- Water clean and sanitary
- And residential health care

All that needs to be improved in order to progress and increase in health development. but the most important thing is to improve health HUMAN RESOURCE Indonesia is a factor in genetic and early life conditions corresponding to the pregnant women, pregnancy and birth. improvement in this respect is very important to note by all of society Indonesia.

Increased productivity of human resources, because only healthy human resources, activities and can develop themselves. Health development is an effort of fulfilling one of the basic rights of the people, namely people's right to gain access over inexpensive health care needs and quality. Health development should also be seen as an investment in terms of supporting the improvement of the quality of human resources and economic development, as well as having an important role in poverty reduction efforts. Health efforts should be done early and continuously.

The granting of sufficient nutrition and healthy behavior is very important for the health and growth of the toddlers. A healthy child will concentrate more in learning, healthy workers would be more productive in his work, as well as the healthy mothers will give birth to healthy children, and infant mortality can also be pressed. The level of health is also influenced by income level, because the income will affect the level of consumption, and consumption levels are related to health. Those in high income brackets will have the capability of fixing the level of consumption, which will ultimately improve the nutritional level of residents, and the standard of health, as well as lowering the death rate of the population. Therefore, an increase in the accessibility of health services are cheap and quality become very relevant for the poor. Health status disparity between social economic level, between regions, between urban and rural areas are still quite high. Infant mortality and mortality in the poorest toddlers is four times higher than the richest. The extent of public health also affected environmental conditions of housing and decent sanitation and healthy, as well as

The availability of clean water. A healthy home and awake sanitation, as well as the availability of clean water is one of the prerequisites for the health of the occupants. Clean water is absolutely necessary to meet the household needs of drink/cook. Many diseases are caused by a white garment not water being consumed. Trouble getting clean water is mainly due to the limited access and the control of water sources, as well as a decrease in the quality of water sources. Limitations of access to clean water will result in a decline in the quality of health and spreading of various diseases, such as diarrhea. Environmental conditions of housing and sanitation are not feasible and less healthy, as well as the unavailability of clean water are generally concerned with the lives of the poor population, whether in rural or urban areas.

5. CONCLUSION

Health services in remote areas must still be kept on increase, the condition of facilities and infrastructure is very less impact on the speed of service, in addition to that in the hinterland of society's level of understanding of the meaning of the importance of health belongs to still very less, for that performance of the service of the Government still has to continue to be improved in order to give our satisfaction community as a macro, especially at remote areas (the outback)

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