

Unraveling health challenges in the interior: public perceptions of Health Service Accessibility and its implications

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Abstract: Access to healthcare services in remote areas remains a significant challenge that impacts community well-being. This study explores community perceptions of healthcare accessibility, identifies the main barriers, and examines their implications. Using a qualitative approach, data were collected through in-depth interviews with community members, local medical personnel, and relevant stakeholders. The findings reveal that the long distances to healthcare facilities, limited transportation, shortage of medical personnel, and lack of medicine and medical equipment are the primary obstacles. Due to these limitations, many residents prefer traditional medicine, which is perceived as more accessible and affordable. Additionally, the community expressed hopes for improvements in healthcare infrastructure, such as the assignment of permanent medical staff, more comprehensive facilities, and better access to medical transportation. This study highlights the need for policy interventions to address these disparities and promote more equitable access to healthcare services. By understanding the lived experiences of people in remote areas, this research contributes to the development of sustainable solutions aimed at improving the quality of healthcare services and overall community well-being.

Keywords : Healthcare Accessibility, Remote Healthcare Services, Community Perception

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INTRODUCTION

Health is a basic right of every individual as mandated by the World Health Organization (WHO) and various national regulations in various countries, including Indonesia. WHO (2022) affirms that accessibility to health services is a major factor in achieving the well-being of society globally. At the national level, law no. 36 of 2009 on health affirms that every citizen has the right to quality, equitable, and affordable health services. However, various studies have shown that there are inequalities in access to health services between urban and rural areas (Handayani et al., 2021). People in remote areas often face various obstacles in getting decent health services, both

in terms of infrastructure, economy, culture, and limited medical personnel. A study by Rahmawati and Ningsih (2020) found that the difficulty of access to health services in remote areas resulted in delays in disease management, which contributed to high morbidity and mortality rates. Therefore, this study focuses on how communities in the interior view the accessibility of health services and its implications for their well-being.

People living in rural areas often face various challenges in accessing health services. Geographical factors are one of the main obstacles, where health facilities are generally centralized in urban areas or regional government centers, so people have to travel long distances with poor road conditions and lack of public transportation (Putri & Wijaya, 2022). For people living in mountainous regions, islands, or dense forests, these challenges are increasingly complex, especially in emergency conditions that require immediate treatment. In addition, economic barriers also make it difficult to access health services. Studies conducted by Susanto et al. (2019) showed that although some basic health services are available free of charge or at affordable cost, people are still faced with the cost of travel, treatment, as well as follow-up examinations that are often unaffordable for low-income groups. As a result, they tend to postpone visits to health facilities until their condition worsens or even choose alternative treatments that are not necessarily effective.

In addition to economic and geographical factors, social and cultural factors also play a role in determining people's access to health services. Some community groups still have a strong belief in traditional medicine and healing methods based on local beliefs, so they rely more on healers or shamans than medical personnel (Sari & Prasetyo, 2021). In addition, the lack of education about the importance of disease prevention and health care makes people seek medical services only when the disease is in serious condition. Gender factors can also affect health access, where in some inland cultures, women have limited mobility and decision-making in accessing health services (Hidayat et al., 2020).

Not only from the community side, the limitations of health workers are also an obstacle in the provision of health services in rural areas. Many remote areas experience a shortage of doctors, nurses, and other medical personnel, which causes services to be not optimal (Yusuf & Andini, 2023). The health workers who work in these areas often face high workloads, inadequate facilities, and lack of incentives, so many of them choose to move to areas with better working conditions. As a result, it is increasingly difficult for people to get quality medical services. In addition, in terms of policy and infrastructure, although the government has made efforts to provide health services through programs such as mobile health centers or community-based health workers, limited resources are still an obstacle. The distribution of medicines and medical equipment in rural areas is often uneven, while patient referral systems from remote areas to larger hospitals still face administrative and logistical barriers (Nugroho & Santoso, 2022).

In understanding health challenges in the Interior, people's perceptions become a key factor that determines how they utilize health services. This perception is influenced by their experience in accessing health services, the level of satisfaction with the services provided by medical personnel, and their expectations of ideal health services. If people have a negative perception of health services, for example, they feel that services are unfriendly, expensive, or difficult to reach, then they tend to be reluctant to use them (Fatmawati, 2021). Conversely, a positive perception can increase people's awareness of the importance of Health and encourage them to be more proactive in seeking medical services. Therefore, this study seeks to explore more deeply how people perceive the accessibility of health services in the interior as well as the factors that influence these perceptions.

Research on healthcare challenges in remote areas of Indonesia reveals several key issues. Limited access to health facilities, particularly in rural and coastal regions, remains a significant obstacle (Situmorang, 2020; Youlanda & Susilawati, 2023). Poor road conditions and long travel times hinder accessibility to healthcare services (Armoni Suci Dewi et al., 2024). The uneven distribution of healthcare personnel and inadequate facilities contribute to healthcare disparities between urban and rural areas (Karunia et al., 2024; Youlanda & Susilawati, 2023). Safety concerns for healthcare workers in remote areas also impact service delivery (Situmorang, 2020). To address these challenges, improvements in infrastructure, transportation, and basic amenities are necessary (Situmorang, 2020). Collaboration with local community leaders and traditional healers is recommended to enhance healthcare planning and accessibility (Situmorang, 2020). Additionally, addressing the shortage of qualified medical staff and equipment is crucial for improving healthcare quality in remote areas (Youlanda & Susilawati, 2023).

This research has a high urgency because it can provide new insights into the reality of Health Access in rural areas. In terms of policy, this study can serve as a basis for the government in designing more effective strategies to improve health services in remote areas, especially in terms of equitable distribution of medical personnel, infrastructure, and drug distribution (Amirullah et al., 2022). For health workers and health institutions, this research can help to understand the needs and expectations of the community towards health services, so that a more community-based approach can be applied so that services are more effective and accepted by the community. In addition, for academics and researchers, this study can add references to public health studies, especially related to the accessibility of health services in remote areas. Based on the challenges that have been outlined, it is clear that the limited access to health services in the interior is not only a matter of infrastructure, but also involves social, economic, cultural, and health policy factors. Public perceptions of health services play a key role in determining whether they will use available facilities or seek alternatives. Therefore, this study aims to dig deeper into the challenges and perceptions of rural communities on the accessibility of health services, as well as the implications of these conditions on health care policies and practices in the future.

METODOLOGI

This study uses a qualitative method with a phenomenological approach to understand the experiences and perceptions of communities regarding healthcare accessibility in remote areas. The phenomenological approach was chosen because it allows for an in-depth exploration of the community's subjective experiences in accessing healthcare services and the challenges they face. As stated by Creswell (2013), this approach aims to uncover the meaning behind individual or group experiences related to a particular phenomenon. Therefore, this study focuses on how people perceive, assess, and adapt to limited healthcare access in their environment.

The research was conducted in remote areas with limited access to healthcare services, such as isolated villages, island regions, or mountainous areas. The locations were selected based on criteria such as distance from primary healthcare facilities, limited transportation infrastructure, and the socio-economic conditions of the community that hinder access to healthcare. The research subjects consist of three main categories: local community members who have experience accessing healthcare services, healthcare workers stationed in the area such as doctors, midwives, and nurses, as well as local policymakers such as village heads and health department officials. The subjects were selected using purposive sampling, in which informants were chosen based on their relevance to the research objectives. In some cases, snowball sampling was also applied to expand the network of informants based on recommendations from previous participants.

Data collection techniques in this study included in-depth interviews, field observations, and document analysis. In-depth interviews were conducted using a semi-structured approach to flexibly explore information according to the informants' experiences and perceptions. Field observations were carried out to understand the actual conditions of healthcare access, such as the travel distance to health facilities, transportation infrastructure, and interactions between the community and healthcare workers. Additionally, secondary data was collected from various documents such as government reports, scientific journals, and relevant news articles.

The collected data was analyzed using thematic analysis, which includes several stages: transcribing the interviews, coding the data to identify patterns or main themes, organizing themes based on similarities, and interpreting the findings. In this analysis process, a triangulation strategy was applied by comparing the results of interviews, observations, and secondary documents to ensure the accuracy of the information. Member checking was also conducted, in which informants were asked to reconfirm the findings to ensure that the analysis accurately reflected their experiences.

This study also pays close attention to research ethics by applying the principle of informed consent, in which each informant was provided with an explanation of the research objectives and their right to refuse or withdraw participation at any time. The informants' identities were kept

confidential and used solely for research purposes. Additionally, the study ensured the principle of non-maleficence, which means avoiding any form of harm to the informants due to their participation in the research. Through this research method, it is expected that the findings will provide more comprehensive insights into the challenges of healthcare access in remote areas and their implications for future health policy.

RESULTS AND DISCUSSION

This study highlights the challenges of accessibility of health services in rural areas as well as public perceptions of the availability and quality of these services. One of the main obstacles faced is long distances and limited transportation infrastructure, which hinders people from obtaining medical services on time. Many inland regions have geographic conditions that are difficult to reach, such as mountains, remote areas, or small islands that require long journeys to reach nearby health facilities. Studies conducted by Mahendradhata et al. (2017) showed that limited transport infrastructure in remote areas contributes to low numbers of visits to health facilities, thereby increasing the risk of medical complications due to late treatment. In addition, the limited number of health centers and medical personnel further worsens accessibility conditions, making people often have to rely on alternative solutions to get treatment.

Table 1. Community Perceptions on Healthcare Services

Aspect	Key Findings	Respondent Quotes
Satisfaction with medical personnel	The community finds medical staff friendly and helpful, but their numbers are limited.	"The medical personnel are good, they are friendly and willing to help. But the problem is there are too few of them." (Respondent 3, 45 years old)
Availability of facilities and medicine	Medicines are often unavailable, and medical equipment is limited.	"Often, the stock of medicine at the community health center runs out, so we have to buy it in the city, which is much farther away." (Respondent 7, 52 years old)
Accessibility to healthcare services	The distance to the community health center is far, roads are in poor condition, and transportation is difficult to access.	"The health center is quite far, about 10 kilometers away, and the roads are bad, especially when it rains." (Respondent 2, 38 years old)
Trust in traditional medicine	Many people still use traditional medicine because it is easier and cheaper.	"If the illness is mild, we usually use herbal remedies or visit traditional healers." (Respondent 4, 60 years old)
Expectations for service improvement	The community hopes for permanent medical personnel, closer healthcare facilities, and better medical transportation.	"If possible, we need permanent medical staff in the village or at least a closer healthcare center." (Respondent 1, 33 years old)

Source : results of primary interviews with research respondents

The table highlights key aspects of the community's perception of healthcare services in remote areas. While medical personnel are regarded as friendly and helpful, their limited numbers create a challenge in providing adequate care. The availability of medicine and medical equipment is also a major issue, with frequent shortages forcing residents to travel long distances to purchase necessary supplies. Accessibility remains a significant barrier, as healthcare facilities are located far from residential areas, with poor road conditions and lack of transportation further complicating access. Due to these challenges, many residents still rely on traditional medicine, as it is perceived to be more accessible and cost-effective for treating minor illnesses. Ultimately, the community expresses a strong desire for improved healthcare services, including permanent medical personnel, better-equipped facilities, and enhanced medical transportation to ensure timely and effective treatment.

Table 2. Challenges in Accessing Healthcare Services

Type of Challenge	Description	Percentage of Respondents Affected
Distance to healthcare facilities	The community health center or clinic is located about 10 km away from residential areas.	85%
Limited transportation	No public transportation is available; residents must rent private vehicles at high costs.	78%
Availability of medical personnel	Only one or two medical personnel are available at the local health center.	65%
Availability of medicine and facilities	Frequent shortages of medicine and inadequate medical equipment.	72%
Trust in traditional medicine	Many prefer traditional healing methods over formal healthcare services.	60%

Source : Data processed in 2025

The table illustrates the significant challenges faced by remote communities in accessing healthcare services. The most pressing issue is the distance to healthcare facilities, with 85% of respondents stating that the nearest clinic or community health center is approximately 10 kilometers away, making it difficult to seek timely medical care. Additionally, 78% of respondents report limited transportation options, as there is no public transport available, forcing residents to rely on costly private vehicle rentals. The shortage of medical personnel is another major concern, with only one or two healthcare workers available, affecting 65% of the community. Furthermore, 72% of respondents experience frequent shortages of medicine and inadequate medical equipment, which limits the effectiveness of treatment. Due to these accessibility and resource constraints, 60% of respondents prefer traditional medicine over formal healthcare services, as it is more affordable and readily available. These findings highlight the urgent need for improved healthcare infrastructure, better medical resource distribution, and enhanced transportation options to ensure adequate medical support for remote populations.

Community Perception of Healthcare Services

The community's perception of healthcare services is also a crucial aspect of this research. The level of satisfaction with healthcare services in remote areas tends to vary, depending on the quality of medical personnel, availability of medicine, and the condition of health facilities. Some community members feel that the medical personnel assigned lack adequate skills or are not available at all times, leading them to prefer traditional or alternative medicine as a solution. A study by Agustina et al. (2019) revealed that public trust in healthcare workers plays an important role in determining the utilization of medical services. The shortage of specialist doctors also poses a problem, especially in dealing with chronic diseases or emergency deliveries.

The impact of limited access to healthcare services is highly significant for the well-being of the community. One of the main consequences is the delay in receiving medical treatment, which can increase morbidity and mortality rates, particularly among vulnerable groups such as pregnant women, infants, and the elderly. Limited healthcare services also contribute to the rise in complications of diseases that could actually be prevented through routine checkups and early detection. Research by the Center for Health Policy and Management at Gadjah Mada University (UGM) in 2021 shows that regions with limited access to health facilities have higher maternal and child mortality rates compared to urban areas with better services. Additionally, people in remote areas tend to develop adaptation strategies such as relying on traditional medicine, herbal remedies, or seeking help from shamans, although the effectiveness of these methods is still debated within the medical community.

In addressing these issues, various policies and interventions have been implemented by the government, such as the Mobile Health Clinic (Puskesmas Keliling) program, the deployment of health workers to remote areas, and the implementation of telemedicine. The Mobile Health Clinic program aims to bring healthcare services closer to the community through mobile clinics, while telemedicine is expected to bridge the access gap for people living in hard-to-reach locations. However, the implementation of these policies still faces several challenges, such as limited digital infrastructure, a lack of health workers equipped to use the technology, and minimal public understanding of technology-based services (WHO, 2022).

Based on the findings of this study, several recommendations can be proposed to improve healthcare accessibility in remote areas. Improving transportation infrastructure and healthcare facilities is a fundamental step to ensure that communities can access adequate healthcare services. In addition, strengthening telemedicine systems through training for health workers and the provision of appropriate technology can serve as an innovative solution to reach people living in isolated regions. Incentive policies for health workers willing to serve in remote areas should also be reinforced to address the shortage of medical personnel. With synergy between the government, health workers, and the community, it is hoped that access to healthcare in remote areas can become more equitable and effective in improving public welfare.

Community Perception of Healthcare Services

Community perception of healthcare services in remote areas is strongly influenced by their level of satisfaction with medical personnel and available health facilities. Many respondents in this

study reported that the shortage of healthcare workers and the lack of medical facilities were the main factors contributing to their dissatisfaction. A study by Mahendradhata et al. (2017) showed that people in isolated regions often face difficulties in obtaining optimal medical care due to the limited number of health workers stationed in those areas. Additionally, the lack of medicines and medical equipment in local clinics or health centers makes people feel that the services they receive do not meet their needs.

Besides the satisfaction aspect, this study also identified several major obstacles faced by the community in accessing healthcare services. Geographical barriers such as long distances to health facilities and poor road infrastructure are the main challenges that hinder timely medical care. According to the 2021 study by the Center for Health Policy and Management at UGM, many people in remote areas must undergo long and difficult journeys to reach the nearest health center, especially in emergency situations. Furthermore, limited transportation—both in terms of cost and availability of public transport—worsens the condition. Economic factors also present major obstacles, as travel and healthcare costs are considered high, leading some people to delay or even forgo medical treatment that they actually need.

Dissatisfaction with formal healthcare and the difficulty in accessing medical facilities cause many people to prefer traditional medicine. Trust in alternative treatments is based on cultural factors, generational experience, and the belief that traditional methods are more accessible and affordable. Research by Agustina et al. (2019) found that many people in remote areas place greater trust in local healers or shamans because they are more accessible and perceived to better understand local health conditions than formal medical personnel. Moreover, some respondents believe that traditional medicine has fewer side effects compared to modern pharmaceuticals. However, relying on alternative medicine without proper medical diagnosis can pose health risks, especially when the condition requires advanced medical intervention.

Overall, community perception of healthcare services in remote areas is influenced by satisfaction with available medical personnel and facilities, accessibility challenges, and trust in traditional healing methods. Therefore, further efforts are needed to improve the quality of healthcare services, enhance accessibility, and educate the public about the importance of formal healthcare services so that they can receive more effective and safer treatment.

Healthcare Accessibility → Community Perception

Healthcare accessibility is a major factor influencing how communities in remote areas perceive the quality of medical services. Long distances, limited transportation infrastructure, and a shortage of healthcare personnel present significant challenges to obtaining medical care. A study by Mahendradhata et al. (2017) showed that limited access results in lower rates of visits to health facilities, especially for those living in remote areas. Consequently, communities tend to develop negative perceptions of healthcare services, particularly if they feel that health facilities are not easily reachable or that medical personnel are not always available. Conversely, in areas where health facilities are closer and there are sufficient medical staff, community perceptions of healthcare tend to be more positive because they feel more assured of receiving the treatment they need.

Community Perception → Utilization of Healthcare Services

Community perception of healthcare services directly affects the extent to which people utilize health facilities. If people feel that medical personnel are not competent or the services provided do not meet their needs, they are less likely to access them. A study by Agustina et al. (2019) revealed that public trust in health workers plays a vital role in determining how willing people are to use available medical facilities. As a result of these negative perceptions, many people prefer traditional or non-medical treatments, such as using herbal remedies or consulting shamans. Meanwhile, in areas where medical personnel are deemed competent and facilities are adequate, the utilization of healthcare services is higher because people are confident that they will receive effective and quality care.

Accessibility & Community Perception → Implications for Public Health

The combination of limited accessibility and negative perception of healthcare services has serious implications for public health. Delays in receiving necessary treatment can increase illness and death rates, particularly among pregnant women, infants, and the elderly. A study by the Center for Health Policy and Management at UGM (2021) found that regions with limited access to healthcare services have higher maternal and infant mortality rates than areas with better health facilities. Furthermore, the lack of medical services has led to increased use of non-formal healthcare, such as alternative medicine and consultations with shamans, which in some cases may worsen individual health due to delayed diagnosis and inappropriate treatment.

Policy Implications and Recommendations

The results of this study indicate that improving healthcare accessibility in remote areas is essential to enhance public perception and utilization of healthcare services. Building better transportation infrastructure, increasing the number of health workers in remote areas, and providing technology-based services such as telemedicine can serve as effective solutions to overcome access barriers. Incentive policies for healthcare workers willing to serve in remote areas can also help improve the availability of medical staff. Moreover, educating the public about the importance of formal healthcare services should be strengthened to reduce negative perceptions of health workers and facilities. With improvements in access and changes in community perceptions, it is expected that the utilization of healthcare services will increase, thereby ensuring better welfare and health outcomes for people in remote areas.

CONCLUSIONS

In conclusion, the study reveals that remote communities face significant challenges in accessing healthcare services, primarily due to distance, transportation limitations, shortages of medical personnel, and inadequate medical supplies. The majority of respondents struggle with long distances to the nearest healthcare facilities and the absence of affordable transportation options, making medical care difficult to reach. Additionally, the limited availability of healthcare professionals and frequent shortages of medicine further exacerbate the situation. As a result, many community members turn to traditional medicine as a more accessible and cost-effective

alternative. These findings emphasize the urgent need for improvements in healthcare infrastructure, including the establishment of closer healthcare centers, better transportation support, and increased medical personnel and supplies to ensure equitable access to quality healthcare services in remote areas.

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