

**Editorial**

**Equilibrium of Medical Doctor Specialist and Indonesian Health Service**

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Another menace in Indonesian health care nowadays is uneven placement of health professional, especially specialist medical doctor. With 265 Million population and 1,905 million km<sup>2</sup> region, Indonesia has 13.6 specialist MD for 100.000 population (PPSDM Health Ministry 2017). In accordance to Standard of hospital workman PMK 56/2014 (RSU) and 340/2014 About Indonesian Hospital Classification, Indonesia need 200.000 more of MD specialist to optimize the health care in Indonesia.

Another problem is the unwillingness of MD specialist to serve in sub rural area hence there are large gap in between the number of MD in Indonesia. We can found the lowest ratio of MD Specialist to the population in Papua (3.0 : 100.000) and the highest ratio in Jakarta (52,2:100.000).

According to the data from <https://data.worldbank.org/indicator/sh.med.phys.zs?view=map>, Vietnam has the highest ratio of MD specialist amongst other ASEAN country (0.82), the next rank is Singapore (0,42); Brunei (0.15); Philippines (0.15); Malaysia (0.14); Thailand (0,13) and Indonesia (0.02). Indonesia is in the crisis of Specialist if the government did not plan a strategy to increase MD Specialist graduate annually.

For example, Faculty of Medicine Universitas Indonesia only can produce 400 MD specialist graduate yearly. Meanwhile to catch the ratio Malaysia we have to add 120 MD per 1000 population. In other word 31,8 million MD specialist to serve 265 million population all over Indonesia. This is a very great number though.

The effort that can be made by the government to solve the problem is establish new center to make more MD graduate or upgrading the facility and man power in the established center so that they can keep the quality of their graduates and add the number of the graduates.

Another options are to make policy regarding to funding aid and simplify the birocracy for residents for example give the scholarship and study assignment for civil servant MD especially those who serve in rural part of Indonesia with minimum specialist.

The integration of Man power, facility and policy will determine the quality of Indonesian Health service. Qualified man power was formed by an excellent and competence educational center so as the number. The most important thing to be understand is specialist and sub specialist education is the main thing in medical educational system in order to make a better service for the country. Proportional and supportive policy atmosphere for doctors or patient is in urgent to be made with all of the consequences for example Indonesian health insurance. The same thing goes to the health facility. Health facility shall be placed evenly in Indonesia and equipped with good diagnostic instruments and all the supporting system, with the most important thing is prioritizing the patient's safety.