

Indonesia

Population¹ (000s)
(2024)

283 488



Urban population² (%)
(2024)

59.2



GDP per capita³
(current US\$) (2022)

4 940.5



Life expectancy at birth⁴
(years) (2021)

68.3

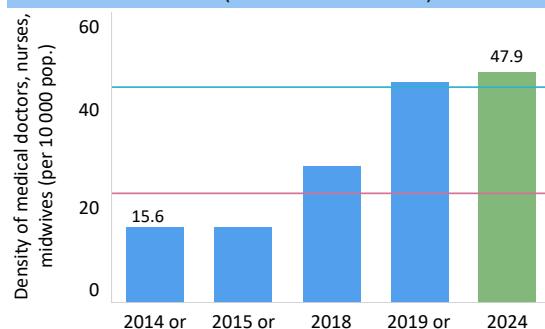


UHC SCI⁵ (2021)

55

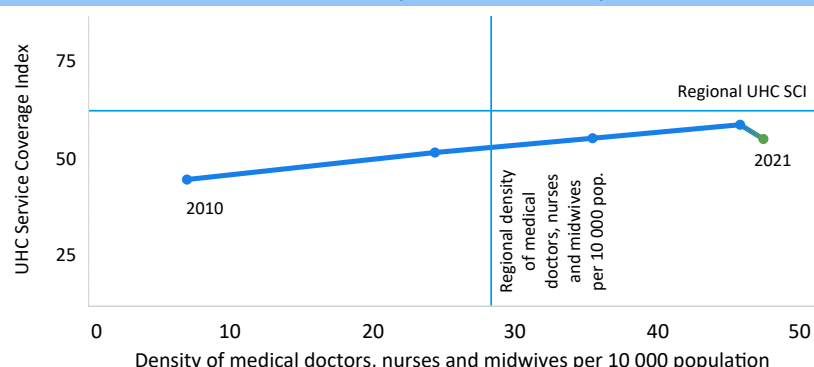


Trend in the density of medical doctors, nurses and midwives (SDG indicator 3.c.1)⁶

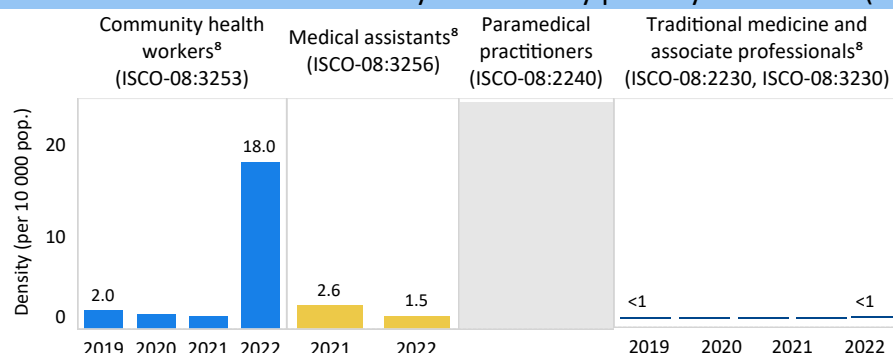


— 44.5 per 10 000 pop.: GSHRH:2030 (2016) — 22.8 per 10 000 pop.: World Health Report (2006)

Trends in UHC Service Coverage Index (SDG indicator 3.8.1) and the density of medical doctors, nurses and midwives (SDG indicator 3.c.1), 2010–2021⁷

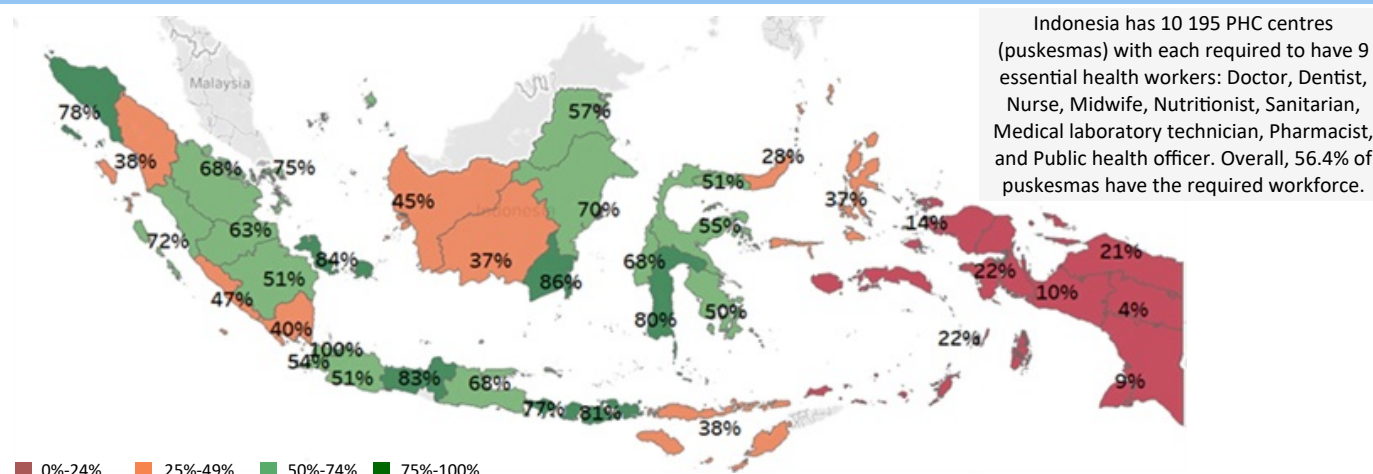


Density of other key primary health care (PHC) workers



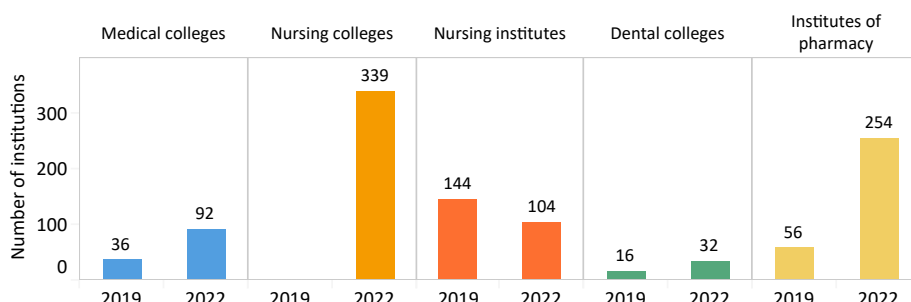
Countries in the SE Asia Region benefit from a range of key occupations close to communities. These health workers, central to the effective functioning of primary health care and district health systems, are often the first point of contact for those most vulnerable and for emergency response.

Percentage of PHC centers (puskesmas) with complete staffing by province⁹ (2024)



Production of select health workers

Number of institutions¹⁰ (2019–2022)



The increasing production of health workers across countries of the SE Asia Region speaks of a further increase in the availability of health workers in the near future. It is crucial to align this growth with evolving population health and health system needs.

Progress over the decade

Strategic direction & governance	<p>The Health Omnibus Law enacted in 2023, revokes and supersedes 11 separate laws, with a focus on aligning health professional regulation with national health needs through strengthening HRH information systems, strengthening the availability, distribution and quality of the health workforce, streamlining licensure and registration processes, and managing international migration</p> <p>Health workforce transformation has been identified as a key pillar of Health System Transformation 2022, with establishment of the Directorate General of Human Resources for Health (HRH)</p> <p>The Indonesian Health Council was formed through merger of Medical and Health Personnel Councils</p>
Transformative education	<p>Shift to Hospital-based Medical Specialist Training Programme (2024) to boost specialist numbers, distribution and quality</p> <p>Establishment of health polytechnics by the Ministry of Health to increase the number, type and quality of health personnel education, while also increasing the number of MoH scholarships (domestic and overseas)</p> <p>Integrated digital training system, 'Plataran Sehat', implemented for continuous professional development</p>
Rural retention	<p>Special Assignment Programme deploying PHC teams to underserved and remote rural areas</p> <p>Range of financial and non-financial incentives, including preference for application to civil service positions</p> <p>Approximately 2 500 MoH scholarships with associated compulsory service requirement</p>
Key innovations for strengthening the PHC workforce	<p>National PHC integration (ILP Initiative) rolled out in more than half of the target Puskesmas, with reform of PHC team composition, roles and responsibilities based on life-cycle approach</p> <p>Special Assignment Programme focused on PHC team approach (nine occupations)</p> <p>Integration and upskilling of community health workers ('kaders'), with set of 25 basic health skills</p>
International migration	<p>Reintegration programmes established for returning specialists and foreign-trained health-care professionals</p> <p>Competency evaluations and certifications required for all foreign-trained health practitioners</p>
Identified achievements, challenges and future priorities	<p>Achievements: enactment of Health Omnibus Law and establishment of Health Reserve Workforce Programme</p> <p>Challenges: regional disparities in health worker numbers, quality and competence, uneven distribution of educational centres and inadequate focus on preventive health</p> <p>Priorities: implementing regulations and socialization to support implementation of the Health Omnibus Law, strengthening equitable distribution through increased production and local scholarships, international exchange and optimization of training capacities for primary, referral and reserve health workforces</p>

References

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- Latest data obtained by the Ministry of Health via WHO Country Office (July 2024). United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
- See for UHC SCI: WHO Global Health Observatory (GHO), accessed on 17 July 2024; See for density of medical doctors, nurses and midwives: National Health Workforce Account (Ministry of Health) online portal as of 10 September 2024. United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
- National Health Workforce Accounts (Ministry of Health) as of 10 September 2024. United Nations World Population Prospects 2024 was used to calculate density.
- Indonesia HRH Information System (SISDMK), 2024. Modified from WHO South-East Asia Region PHC Poster, 2024.
- Human Resources for Health Country Profiles Indonesia 2020; National Health Workforce Accounts (Ministry of Education) as of 10 July 2024.