



Relationship Between Accessibility And Services Utilization At Tapanuli Selatan Regional General Hospital (Rgh) In 2023

Vera H Hutagalung¹, Ida Yustina², Juanita³

¹Master Student, Faculty of Public Health, Universitas Sumatera Utara, Medan, Sumatera Utara, Indonesia

^{2,3} Faculty of Public Health, Universitas Sumatera Utara, Medan, Sumatera Utara, Indonesia

Email: hhutagalungvera@gmail.com

Article details:

Published: 25th Marc 2024



Abstract

The low access to health services is a significant challenge in providing health services evenly throughout Indonesia. Low health services utilization is caused by accessibility factors which include distances between health facilities that are too far, long achieve times, transportation modes that are difficult to obtain, and also high transportation rates. The aim of this research is to determine the relationship between accessibility and services utilization at Tapanuli Selatan Regional General Hospital

(RGH). This research is a quantitative study with a cross sectional design. The population of this research was all people who used health services at Tapanuli Selatan RGH, totaling 295 people, so the research sample was 75 people. The data collection method is by means of questionnaire interviews. The data analysis method is univariate analysis using frequencies and bivariate analysis using the chi-square test. The research results show that accessibility in the form of transportation modes is 68.0% lacking, long distances are 50.7%, long travel times are 52.0%, and transportation costs are expensive by 56.0%. Respondents who did not utilize Tapanuli Selatan RGH services were 54.7%. The results of the bivariate analysis show that there is a significant relationship between the services utilization of Tapanuli Selatan RGH and the mode of transportation ($p=0.005$), mileage ($p=0.028$), achieve time ($p=0.004$), transportation costs (0.001). Accessibility is often associated with the strategic location of health facilities. Tapanuli Selatan RGH also needs to position its location so that it can reach the wider community and influence the RGH services utilization.

Keywords: Accessibility, utilization, RGH

Cite this Article :

Vera H Hutagalung, Ida Yustina, J. (n.d.). Relationship Between Accessibility And Services Utilization At Tapanuli Selatan Regional General Hospital (Rgh) In 2023. *International Journal of Health, Education & Social (IJHES)*.



Introduction

Hospital is a health service institution that provides comprehensive individual health services (Permenkes RI No. 4 Tahun 2018). Health services are any efforts carried out individually or jointly within an organization to maintain, improve health, prevent and cure disease and restore the health of individuals, families, groups or communities (Ilmayanti et al., 2022).

Health services are an invisible activity, which occurs as a result of interactions between patients and health workers, every effort carried out individually or jointly within an organization to maintain and improve health, prevent and cure disease and restore public health (Panggantih et al., 2019).

Health services utilization is the optimal use of health services to maintain and improve the health of individuals, families or communities (Abdillah & Hosna, 2018). Health services utilization is the emergence of the public's desire to utilize a health service that is needed according to the patient's needs, both when they are healthy for just a health consultation and when they are sick and need the services of a health worker (Zaini et al., 2022; Tunnizha et al., 2023).

Hospital services utilization is a behavior that arises from the patient himself in response to his desire to visit a place where he feels the service is good (Basith & Prameswari, 2020). One of the things related to the patient's desire to use the hospital is complete facilities and the availability of other supporting facilities that can provide satisfaction with the expectations felt by the patient (Ilmayanti et al., 2022; Rahim, et al., 2023).

According World Health Organization (2023), stated that the full scope of access to health services for the world population in 2018 ranged from 2.3 to 3.5 billion people in the world, this implies that half of the 7.3 billion people in the world do not receive and are still low in accessing the health services they need.

Based on data Riskesdas in 2018, the proportion of household knowledge regarding access to hospital services for the Indonesian population is 37.1% easy to access health services and 26.0% very difficult to access health services. Access to health services for residents in urban areas is 53.9% easy, 13.3% is very difficult to access services and for residents in rural areas 14.6% is easy, 43% is very difficult to access services in hospitals (Kemenkes RI, 2018).

Tapanuli Selatan Regional General Hospital (RGH) is one of the hospitals that can be used by people living in the South Tapanuli Regency area, North Sumatra Province. Tapanuli Selatan RGH has the capacity to provide 125 beds and is a class C hospital which then provides health services based on the availability of hospital facilities and facilities, as a referral center hospital for 15 community health centers in South Tapanuli Regency. The efficiency and effectiveness of the performance of the Tapanuli Selatan RGH can be seen from the data from outpatient and inpatient visit reports, one of which is the Bed Occupancy Ratio/ BOR (Gustomi et al., 2023). This BOR data provides an overview of the level of utilization of hospital inpatient services. According to national standard measurements, the ideal average BOR figure is 60% to 85% (Departemen Kesehatan Republik Indonesia, 2017).

According Dewi & Nurjannah (2020), one thing that influences the use of health services is accessibility, where accessibility factors include distance, time, transportation and costs incurred



to reach health service facilities. The low use of health facilities is often caused by the distance between the health facility and the community being too far (both physical and social distance), quite long travel times, transportation mode that are difficult to obtain, and also high transportation rates or fares (Fitriani, et al., 2021).

Tapanuli Selatan RGH health services are in Sipirok City which is located in the northern part of South Tapanuli District. There are two types of public transportation that can be used to reach Tapanuli Selatan RGH in Sipirok City. Based on the results of Riskesdas (2018) regarding access to hospitals in South Tapanuli, it is known that the majority of households said it was very difficult, namely 63.42%. This is supported by research conducted by Laoli et al., (2019) at Nias RGH which found that one of the factors influencing the use of health services is distance and access to transportation.

Based on the description of the problem above, the objectives of this research is to determine the relationship between accessibility and services utilization at Tapanuli Selatan Regional General Hospital (RGH).

Methods

This research is quantitative with a cross sectional study design. This research will be carried out at the Tapanuli Selatan Regional General Hospital (RGH), which will be carried out from October 2022 to November 2023. The population of this research is all people who use health services at the Tapanuli Selatan Regional General Hospital from January to March 2023 totaling 295 people. Based on sample calculations using the Slovin formula, the sample for this study consisted of 75 people. The sampling technique using purposive sampling is used for sampling based on predetermined criteria. The data collection method is through interviews and documentation as research evidence, with the instrument used in the form of a prepared questionnaire. The data analysis method used is univariate and bivariate analysis. Univariate analysis was carried out using a frequency distribution table which includes independent variables and dependent variables, to obtain an overview of the distribution and proportions of each variable studied. Bivariate analysis uses the chi square test, where to determine the relationship between two variables and the relationship between independent and dependent variables, data analysis uses the SPSS (statistical package for sessional science) version 21.0 for Windows program.

Results

Patient Characteristics

Patient characteristics include age, gender, marital status, education level, occupation, ethnicity, income, and type of payment. Can see the frequency distribution analysis of the patients characteristics of Tapanuli Selatan RGH as follows:



Table 1 Frequency Distribution of Patient Characteristics at Tapanuli Selatan RGH

Patient Characteristics	n	%
Age		
Adult (19–44 years)	53	70.7
Pre elderly (45–59 years)	14	18.7
Elderly (≥60 years)	8	10.6
Gender		
Male	29	38.7
Female	46	61.3
Marital status		
Married	64	85.3
Not married	11	14.7
Level of education		
Elementary school	1	1.3
Junior high school	4	5.3
Senior high school	34	45.3
College	36	48.1
Work		
Doesn't work	2	2.7
Civil Servants	16	21.3
Private employees	4	5.3
Self-employed	29	38.7
Farmer	24	32.0
Tribes		
Batak	72	96.0
Java	1	1.3
Malay	2	2.7
Income		
< Tapanuli Selatan RMW (< IDR 2,900,000)	44	58.7
≥ Tapanuli Selatan RMW (≥ IDR 2,900,000)	31	41.3
Type of payment		
BPJS	53	70.7
Independent	14	18.7

According to table 1, it is known that the most dominant characteristics of Tapanuli Selatan RGH patients are adults (19–44 years) as many as 53 people (70.3%), female gender as many as 46 people (61.3%), marital status is 64 people (85.3%) were married, 36 people had a tertiary education level (48.1%), 29 people (38.7%) worked as entrepreneurs, 72 people (96.0%) were



Batak people. income < Tapanuli Selatan RMW (< Rp. 2,900,000) as many as 44 people (58.7%), and type of payment by BPJS as many as 53 people (70.7%).

Patient Accessibility at Tapanuli Selatan RGH

Transportation modes. The results of measuring transportation modes are grouped into two categories. Can see the results of the analysis of the frequency distribution of transportation modes for patients at Tapanuli Selatan RGH as follows:

Table 2 Frequency Distribution of Transportation Modes for Patients at Tapanuli Selatan RGH

Transportation modes	n	%
Good	24	32.0
Poor	51	68.0
Total	75	100.0

According to table 2, it is known that there were 24 patients at Tapanuli Selatan RGH with good transportation modes (32.0%) and 51 patients with poor transportation modes (68.0%).

Mileage. The results of measuring mileage are grouped into two categories based on the mean value, where can see the frequency distribution analysis results of mileage by patients at Tapanuli Selatan RGH as follows:

Table 3 Frequency Distribution of Mileage for Patients at Tapanuli Selatan RGH

Mileage	n	%
Near	37	49.3
Far	38	50.7
Total	75	100.0

According to table 3, it is known that there are 37 patients at Tapanuli Selatan RGH with nearby distances (49.3%) and 38 patients with far distances (50.7%).

Achieve time. The results of measuring achieve time are grouped into two categories based on the mean value, where you can see the frequency distribution analysis results of achieve time for patients at Tapanuli Selatan RGH as follows:

Table 4 Frequency Distribution of Achieve Time for Patients at Tapanuli Selatan RGH

Achieve time	n	%
Fast	36	48.0
Long	39	52.0
Total	75	100.0

According to table 4, it is known that Tapanuli Selatan RGH patients with fast achieve time



were 36 patients (48.0%) and patients with long achieve time were 39 patients (52.0%).

Transportation costs. The results of measuring travel time are grouped into two categories based on the mean value, where you can see the frequency distribution analysis results of transportation costs for patients at Tapanuli Selatan RGH as follows:

Table 5 Frequency Distribution of Transportation Costs for Patients at Tapanuli Selatan RGH

Transportation Costs	n	%
Inexpensive	33	44.0
Expensive	42	56.0
Total	75	100.0

According to table 5, it is known that Tapanuli Selatan RGH patients with inexpensive transportation costs were 33 patients (44.0%) and patients with expensive transportation costs were 42 patients (56.0%).

Hospital Services Utilization

The results of measuring the hospital services utilization are grouped into two categories based on the mean value, where you can see the frequency distribution analysis results of service utilization at Tapanuli Selatan RGH as follows:

Table 6 Frequency Distribution of Service Utilization at Tapanuli Selatan RGH

RGH Service Utilization	n	%
Utilize	34	45,3
Not utilize	41	54,7
Total	75	100,0

According to table 6, it is known that 34 patients (45.3%) RGH service utilized and 41 patients (54.7%) did not RGH service utilize.

Relationship Between Accessibility and Services Utilization at Tapanuli Selatan RGH

Bivariate analysis was carried out to see whether or not there was a relationship between accessibility including transportation mode, mileage, achieve time and transportation costs with services utilization RGH using the chi-square test with a significance level of 95% or significant if $p < 0.05$. The following are the results of the analysis of the relationship between accessibility and service utilization at Tapanuli Selatan RGH:



**Table 7 Relationship Between Accessibility and Services Utilization at Tapanuli Selatan
RGH in 2023**

Accessibility	RGH Service Utilization				Total		P-value
	Utilize		Not Utilize				
	n	%	n	%	n	%	
Transportation modes							
Good	17	70.8	7	29.2	24	100	0.005
Poor	17	33.3	34	66.7	51	100	
Mileage							
Near	22	59.5	15	40.5	37	100	0.028
Far	12	31.6	26	68.4	38	100	
Achieve time							
Fast	23	63.9	13	36.1	36	100	0.004
Long	11	28.2	28	71.8	39	100	
Transportation Costs							
Inexpensive	24	72.7	9	27.3	33	100	0.001
Plush	10	23.8	32	76.2	42	100	

According to table 7, the results of the analysis show that of the 24 patients with good transportation modes, more patients used the hospital, namely 70.8% (17 people) and only 29.2% (7 people) did not use the hospital. On the other hand of the total of 51 patients with poor transportation modes, the majority of patients did not use the hospital, namely 66.7% (34 people) while the rest used the hospital, namely 33.3% (17 people). The results of bivariate analysis using the chi-square test show that there is a relationship between transportation mode and utilization of the Tapanuli Selatan RGH with a pvalue of 0.005 ($< \alpha = 0.05$).

The results of the analysis show that of the 37 patients who had nearby mileage from their residence to Tapanuli Selatan RGH, more patients used the hospital, namely 59.5% (22 people) and the rest did not use the hospital, namely 40.5% (15 people). On the other hand, of the total of 38 patients who had far mileage, the majority of patients did not use the hospital, namely 68.4% (26 people) while the rest used the hospital, namely 31.6% (12 people). Based on the results of bivariate analysis with the chi-square test a pvalue= 0.028 ($< \alpha = 0.05$) was obtained, which means that there is a relationship between distance traveled and utilization of the Tapanuli Selatan RGH.

The results of the analysis show that of the 36 patients who needed a fast achieve time from their place of residence to Tapanuli Selatan RGH, more patients used the hospital, namely 63.9% (23 people) and the rest did not use the hospital, namely 36.1% (13 people). On the other hand, of the total of 39 patients who required long achieve time, the majority of patients did not use the hospital, namely 71.8% (28 people) while the rest used the hospital, namely 28.2% (11 people). The results of bivariate analysis using the chi-square test show that there is a relationship between achieve time and utilization of the Tapanuli Selatan RGH with a pvalue of 0.004 ($< \alpha = 0.05$).



The results of the analysis show that of the 33 patients with cheap transportation costs from their place of residence to Tapanuli Selatan RGH, the majority of patients used the hospital, namely 72.7% (24 people) and only 27.3% (9 people) did not use the hospital. . On the other hand, of the total of 42 patients with expensive transportation costs, the majority of patients did not use the hospital, namely 76.2% (32 people) while the rest used the hospital, namely 23.8% (10 people). Based on the results of bivariate analysis with the chi-square test, the $p\text{-value} = <0.001$ ($< \alpha = 0.05$) was obtained, which means that there is a relationship between transportation costs and utilization of the Tapanuli Selatan RGH.

Discussion

Relationship Between Transportation Modes and Services Utilization at Tapanuli Selatan RGH

Transportation is an activity to select or decide on alternative options for providing transportation facilities to achieve optimal goals that have been previously determined by using existing resources efficiently (Sary et al., 2023). Transportation must be carried out through an intermodal integration approach, which means it must be carried out comprehensively and form one integrated system (Ramdani, 2022). Transportation has a very important role in people's lives today in carrying out their daily activities (Nurhidayat et al., 2023).

The transportation mode is alternative transportation that can be used by the public to get to health facilities consisting of private cars, public transportation, walking, motorbikes, boats, etc. and the public can use more than one transportation mode or a combination of transportation modes (Masridah, 2023).

One important transportation mode is public transportation, because it is included in the ASDP development category. Public transportation is the main transportation and a cheaper alternative for the community (Septiawan, et al., 2020). Therefore, developing transportation in an area is an important thing to do, especially in 3 areas (frontier, remote and underdeveloped) (Hidayat et al., 2023).

The transportation mode in this case is related to the availability of vehicles in areas, especially remote areas, where transportation is difficult and infrequent which can make it difficult to access health services which will cause people not to use health facilities (Septiawan, et al., 2020; Sary et al., 2023).

There is not enough public transportation available to health facilities, where limited transportation will result in quite high costs so that people have difficulty in reaching health service facilities, thus resulting in people not using health services. It is necessary to pay attention to the strategic position of health facilities and have high access, because the location of health facilities ensures that they fulfill people's needs for transportation, which will increase the health services utilization (Bamba, 2017).

The results of this research are in line with the research of Safmila, et al. (2023), who said there is a relationship between frequency of access and utilization of health services, it is proven



from research results that health services are located far away so they have to use public transportation, where public transportation routes to health facilities are not too numerous or frequent, resulting in high transportation costs.

Relationship Between Mileage and Services Utilization at Tapanuli Selatan RGH

Miliage is a factor for people in utilizing health services (Umboh et al., 2023; Tunnizha et al., 2023). The level of health service utilization facilities can be influenced by the distance from where one lives. People are more numerous and tend to use the facilities around where they live (Logen, et al., 2015).

The results of this research are in line with research by Irawan & Ainy (2018), which states that there is a significant relationship between distance (accessibility) to health facilities and utilization of health services, where people who utilize health services are close to health facilities.

The results of this research are strengthened research by Safmila, Yani, & Andika (2023), which states that there is a relationship between frequency of access and utilization of health services. It is proven from the research results that more respondents in the remote access category result in people not utilizing health services compared to people in the remote access category. Close access will make people utilize health services (Zafasia et al., 2021).

The closer access to services from the community's residence to the health center, the greater the amount of community utilization of health facilities, and vice versa, the further the service access is from the community's residence and health facilities, the lower the amount of the Tapanuli Selatan RGH community utilization (Oktarianita et al., 2021; Widiyastuty et al., 2023)

According to existing theory, it is stated that the closer the distance, the greater the opportunity to carry out an action. The results of the study concluded that people with short distances are more likely to utilize health facility services compared to people with long distances. So that the location of health facilities that are strategic and easy to reach by the community is very important to increase the number of community participation in utilizing health facilities (Sonia et al., 2022).

Relationship Between Achieve Time and Services Utilization at Tapanuli Selatan RGH

Achieve time is the duration of time to access health services, where a long achieve time to get to a health service facility will influence people in utilizing health services compared to a short achieve time (Khatimah et al., 2019).

The results of this research are in line with research conducted by Mardiana et al., (2021), explaining that the achieve time for utilizing health services to health facilities is easy due to the strategic location of health facilities, namely right next to the main road so that patients do not have difficulty utilizing available health services.

The results of this research are strengthened by the research of Maulany, et al. (2021), said that achieve time has an influence on access to health facilities where health facility achieve time of less than or equal to 30 minutes are accessed more often than health facility achieve time of more than 30 minutes. Achieve time of more than 60 minutes only resulted in visits to health



facilities of 8.8% compared to achieve time of less than 30 minutes using health facilities of 64.94%.

According to the research results, it can be concluded that the community's achieve time to the Tapanuli Selatan RGH services in utilizing the Tapanuli Selatan RGH health services, where people who have a longer achieve time to the Tapanuli Selatan RGH, causes people not to utilize the Tapanuli Selatan RGH health services compared to people who have the time. Faster achieve to existing health services will result in more frequent use of Tapanuli Selatan RGH health services.

Relationship Between Transportation Costs and Services Utilization at Tapanuli Selatan RGH

Transportation costs are costs incurred by the community to get to health service facilities, usually long distances will incur quite large costs where the large amount of transportation costs borne by the community to get to health service facilities will influence the community in utilizing health services (Safmila, et al., 2023).

Transportation is one of the obstacles for people in accessing health facilities (Prapti, et al., 2015). People who have private vehicles use health facilities more than those who don't, due to transportation costs or costs.

Transportation costs are one of the factors for people in utilizing health services. If transportation costs are too high it can affect people's quality of life because this is because health services are located far away so they have to use public transportation where part of their needs must be allocated for transportation access. So it can be concluded that the higher the transportation costs, the less people will use health facilities.

The results of this research are in line with research conducted by Maulany, et al. (2021), said there is a relationship between transportation costs and the use of health services, where if transportation costs are too high it can affect people's quality of life because part of life's necessities must be allocated for transportation access. The higher the transportation costs, the less people's access to health facilities.

Conclusion

Based on the research results, it can be concluded that the majority of respondents (54.7%) did not utilize the services of the Tapanuli Selatan RGH, this was due to accessibility factors, including 68.0% of respondents with insufficient transportation modes, 50.7% of respondents with long mileage, 52.0% of respondents had long achieve time, and 56.0% of respondents had expensive transportation costs. The results of the bivariate analysis show that there is a significant relationship between the utilization of Tapanuli Selatan RGH and the transportation mode ($p=0.005$), mileage ($p=0.028$), achieve time ($p=0.004$), transportation costs ($p=0.001$). Accessibility is often associated with the strategic location of a health facility, which is a determining factor in the use of health facilities. This means that the hospital also needs to place its presence in a location that is easily accessible to the community, so that the location factor is the best (golden location).



or has high accessibility, so that it can reach the community at large and will influence the Tapanuli Selatan RGH services utilization.

References

- Abdillah, N., & Hosna, D.A.E. (2018). Faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan oleh peserta bpjs di Instalasi Rawat Jalan RSUD Kabupaten Kepulauan Mentawai. *Jurnal Kesehatan Saintika Meditory*, 1(2), 136–143.
- Gebhy, B. (2017). Jangkauan pelayanan kesehatan persalinan Rumah Sakit Swasta Bunda Margonda dan Tugu Ibu di Kota Depok. *IRONS: Industrial Research Workshop and National Seminar*, 506–517.
- Basith, Z.A., & Prameswari, G.N. (2020). Pemanfaatan pelayanan kesehatan di puskesmas. *Higeia Journal Of Public Health*, 4(1), 52–63.
- Departemen Kesehatan Republik Indonesia (Depkes RI). (2017). *Juknis Sistem Informasi Rumah Sakit*.
- Dewi, C., & Nurjannah, A. (2020). Hubungan model 4a (four as) dalam pemanfaatan layanan kesehatan pasien rawat inap peserta bpjs kesehatan non pbi di RSUD Kabupaten Pangkep. *Jurnal Promotif Preventif*, 3(1), 1–13. <https://doi.org/10.47650/jpp.v3i1.148>
- Fitriani, L., Nur, A.A., Rahayu, R., Jinan, R., Selviana, R.E., Rahman, F., & Laily, N. (2021). Keputusan Pemilihan Pelayanan Pengobatan Ditinjau dari Karakteristik Individu dan Aksesibilitas. *Jurnal Penelitian dan Pengembangan Kesehatan Masyarakat Indonesia*, 2(1), 67-75.
- Gustomi, M.P., Zahroh, R., Umah, K., Syafii, M., Mustafidah, N., & Gresik, U. (2023). Analysis of bed occupancy rate (bor) factors in the intensive care unit (icu) of Gresik Driyorejo Petrochemical Hospital. *Management Studies and Entrepreneurship Journal*, 4(1), 426–435. <http://journal.yrpioku.com/index.php/msej>
- Hidayat, A., Hijriah, H., & Setiowati, N.O. (2023). Kelayakan jaringan transportasi sungai Kabupaten Mimika. *Journal of Urban Planning Studies*, 3(2), 217–224. <https://doi.org/10.35965/jups.v3i2.338>
- Ilmayanti, N.A., Rusydi, A.R., & Andyanie, E. (2022). Faktor Yang berhubungan dengan pemanfaatan pelayanan kesehatan poli interna di RSUP Dr. Tadjuddin Chalid Kota Makassar. *Window of Public Health Journal*, 3(6), 1081-1090. <https://doi.org/10.33096/woph.v3i6.527>
- Irawan, B., & Ainy, A. (2018). Analisis faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan pada peserta jaminan kesehatan nasional di Wilayah Kerja Puskesmas Payakabung, Kabupaten Ogan Ilir. *Jurnal Ilmu Kesehatan Masyarakat*, 9(3), 189–197. <https://doi.org/10.26553/jikm.v9i3.311>
- Kementrian Kesehatan Republik Indonesia. (2018). *Laporan Riset Kesehatan Dasar Sumatera Utara Tahun 2018 (Riskesdas 2018)*. Kementrian Kesehatan Republik Indonesia.



- Kementerian Kesehatan Republik Indonesia. (2018). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 4 Tahun 2018 tentang Kewajiban Rumah Sakit dan Kewajiban Pasien*.
- Khatimah, H., Sundari, S., Candra. (2019). Faktor-faktor yang berhubungan dengan akses di Kabupaten Jayapura Provinsi Papua Tahun 2018. *Info Kesehatan*, 9(2), 150–156.
- Laoli, C.H., Nur'aini, & Anggraini, I. (2019). Faktor yang mempengaruhi pemanfaatan pelayanan kesehatan pada masyarakat miskin di RSUD Kabupaten Nias Tahun 2019. *Jurnal Health Reproductive*, 4(2), 22–36.
- Logen, Y., & Balqis, D. (2015). *Faktor yang berhubungan dengan Pemanfaatan Pelayanan Kesehatan oleh pemulung di TPA Tamangapa* (Skripsi, Universitas Hasanudin)
- Mardiana, N., Chotimah, I., & Dwimawati, E. (2021). Faktor-faktor pemanfaatan pelayanan kesehatan di Puskesmas Parung Selama Masa Pandemi Covid-19. *Promotor*, 5(1), 59–74. <https://doi.org/10.32832/pro.v5i1.6129>
- Masridah, L. (2023). *Faktor-faktor yang berhubungan dengan pemanfaatan pemeriksaan vct (voluntary counseling and testing) pada ibu hamil di Wilayah Kerja Puskesmas Mangkubumi Kota Tasikmalaya Tahun 2021* (Disertasi, Universitas Siliwangi). <http://www.nber.org/papers/w16019>
- Maulany, R.F., Dianingati, R.S., Annisa, E. (2021). Faktor-faktor yang mempengaruhi akses kesehatan. *Indonesian Journal of Pharmacy and Natural Product*, 4(2), 142–149.
- Nurhidayat, M., Rumata, N.A., Burhanuddin, F., Hakim, D.H., & Praja, S.E. (2023). Kinerja angkutan umum di Kota Palu. *Jurnal Arsitektur Kota dan Pemukiman*, 8(1), 36–45.
- Oktarianita, Sartika, A., & Wati, N. (2021). Hubungan status pekerjaan dan pendapatan dengan pemanfaatan puskesmas sebagai pelayanan primer di Puskesmas Sidomulyo. *Avicenna: Jurnal Ilmiah*, 16(2), 91–96. <https://doi.org/10.36085/avicenna.v16i2.1927>
- Panggantih, A., Pulungan, R. M., Iswanto, A. H., & Yuliana, T. (2019). Faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan oleh peserta jaminan kesehatan nasional (jkn) di Puskesmas Mekarsari Tahun 2019. *Media Kesehatan Masyarakat Indonesia*, 18(4), 140–146.
- Prapti, R.S., Suryawardana, D., & Triyani, D. (2015). Analisis dampak pembangunan infrastruktur jalan terhadap pertumbuhan usaha ekonomi rakyat di Kota Semarang. *Jurnal Dinamika Sosial Budaya*, 17(2), 82–103.
- Rahim, F., Juliana, N., & Mulyawati, S.E. (2023). Determinan pemanfaatan layanan kesehatan selama masa pandemi covid-19. *Journal of Health, Education and Literacy (J-Healt)*, 6(1), 35–43. https://doi.org/https://doi.org/10.31605/j_healt.v2i1
- Ramdani, M. (2022). Analisis pemilihan moda transportasi untuk perjalanan kerja (Studi Kasus : Hanura, *Ilmu Teknik*, 2(2), 1–11.
- Safmila, Y., & Yani, E.D., & Andika. (2023). Analisis hubungan akses dan kecepatan pelayanan dengan pemanfaatan pelayanan kesehatan puskesmas singkil Desa Teluk Rumbia Kecamatan Singkil Aceh Singkil. *Serambi Saintia: Jurnal Sains dan Aplikasi*, 11 (1), 8–12.
- Sary, W. I., Rusyidi, A. R., & Baharuddin, A. (2023). Pengaruh hubungan bauran pemasaran



- terhadap kunjungan ulang pasien rawat jalan di RSUD Regional Provinsi Sulawesi Barat. *Journal of Muslim Community Health (JMCH)* 2023, 4(2), 15–29. <https://doi.org/10.52103/jmch.v4i2.1202> JournalHomepage:<https://pasca-umi.ac.id/index.php/jmch>
- Septiawan, F.C., Ansari, T.S., Apriani, R., & Iman, C. H. (2023). Tanggung jawab pelaku bisnis angkutan umum bus lintas kota lintas provinsi terhadap barang bawaan penumpang. *Nusantara: Jurnal Ilmu Pengetahuan Sosial*, 10(11), 5008-5019.
- Sonia, P., Ramadhani, A. C., Pramita Gurning, F., & Putra, S. (2022). Analisa faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan bagi peserta bpjs di Puskesmas. *Nautical: Jurnal Ilmiah Multidisiplin*, 1(4), 260–267.
- Tunnizha, B. M., Haeruddin, H., Arman, A., Asrina, A., & Yusrani, Y. (2023). Faktor-Faktor yang Berhubungan dengan Partisipasi Masyarakat dalam Pemanfaatan Layanan Promosi Kesehatan di Daerah Pegunungan Enrekang. *Journal of Muslim Community Health*, 4(3), 143-156. <https://doi.org/10.52103/jmch.v4i3.1139> Journal
- Umboh, A.G., Kolibu, F.K., & Korompis, G.E.C. (2023). Pekerjaan, pendapatan, pemanfaatan pelayanan kesehatan peserta jaminan kesehatan nasional (non-pbi) di Kecamatan Sario. *JKKI: Jurnal Kebijakan Kesehatan Indonesia*, 12(03), 160–167.
- Widiyastuty, F., Suryawati, C., & Arso, S. P. (2023). Pemanfaatan pelayanan puskesmas oleh masyarakat di Daerah Perbatasan Kecamatan Entikong. *Jurnal Manajemen Kesehatan Indonesia*, 11(April), 64–78.
- World Health Organization (WHO). (2023). *Tracking Universal Health Coverage in the WHO African Region, 2022*. <https://www.afro.who.int/health-topics/universal-health-coverage>
- Zafasia, A.F., Deli, H., & Arneliawti. (2021). Hubungan jarak rumah dan waktu tempuh dengan pemanfaatan pelayanan kesehatan selama pandemi. *JOM FKP*, 9(2), 161–168.
- Zaini, R., Parinduri, S.K., & Dwimawati, E. (2022). Faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan di Puskesmas Tegal Gundil Kota Bogor Tahun 2020. *Promotor*, 5(6), 484–487. <https://doi.org/10.32832/pro.v5i6.8752>