

HEALTH BUSINESS SUSTAINABILITY IN THE ERA OF GLOBALIZATION: a Reflection Analysis of Readiness and Challenges in Indonesia and the World

Zaenal Muttaqin¹, Deasy Silvya Sari²

Universitas Padjajaran, Bandung, Indonesia

email: zaenal.muttaqin@unpad.ac.id¹, deasy.silvya@unpad.ac.id²

ABSTRACT

Every human being in any part of the world needs continuous health, both in normal conditions and in pandemic conditions. Health is one of the human capital that is indispensable in supporting economic development. This is because health is a prerequisite for increased productivity. Along with the development of today's era, the development of digitalization has grown rapidly. This has an impact on the sustainable health business at this time. This study aims to describe various health business challenges and opportunities that will be faced in the era of industrial globalization. This research uses a qualitative approach with a literature study method, which collects various information answering the formulation of research problems through various sources such as books and journals. The results of this study show that Globalization and climate change can be a significant influence on an economy, as happened in Indonesia and other countries. Globalization can affect policies set in the country specifically in other fields. The health industry makes all healthcare industry providers compete with each other to compete for competitive advantage amid potential health markets

Keywords: Sustainability; Health Business; Globalization; Challenge

Introduction

Health is the main component in yourself to be able to do all activities. Health also affects the continuity of work. The health of each individual also affects the quality of human resources and the welfare of each country. Therefore, every country in the world provides healthcare facilities for its citizens. The government of each country takes part in preparing a budget to meet quality healthcare facilities to have an impact on the quality of life of people in a country.

The World Health Organization (WHO) has issued regulations that set a benchmark for the allocation of each country's health budget of at least 15 percent of the total State Budget or equivalent to 5 percent of Gross Domestic Product (GDP). Some countries spend large enough budgets to support quality health services. It can be seen from the United States spending a health service budget of 16.9 percent of GDP even exceeding

the minimum benchmark health budget allocation set by WHO.(<https://goodstats.id>, 2024)

The field of health is proving increasingly important in the management and manipulation of very large volumes of data from various health institutions and clinical data of patients, to support health professionals (Abreu et al., 2021). However, the progress of the times and technological developments have provided convenience for humans. Including the presence of health services online or digitally (Surya & Sri Nurul Kur'aini, 2022). The delivery of health care services by all health care professionals, for which distance is a critical factor, who use information and communication technologies for the exchange of valid information for the diagnosis, treatment, and prevention of disease and injury, research and evaluation, and for the continuing education of health care providers, for the advancement of the health of individuals and their communities.

Digital-based health services are present in the community to meet existing needs. The community as users are faced with a variety of health service options according to user preferences and needs (Surya & Sri Nurul Kur'aini, 2022). The general public who are aware of this digital-based health service but have not used it have the biggest consideration on the price factor (Indriyarti & Wibowo, 2020). Public ignorance about the price charged or inability to pay is the main factor determining the use of health services.

Furthermore, for digital-based health service users, the price factor is not the main one. The determining factor is the ease of using or accessing digital-based health services. Therefore, it is necessary to cultivate the capabilities and skills needed to quickly transform their business and management practices in the face of a global health crisis (Christian. M, 2018)(Liu et al., 2020).

Globalization is an era of capital and technology transfer from countries with expensive labor costs to countries with cheap labor costs. The goal is to increase competitiveness. Globalization is strengthened by the GATS (General Agreement on Trade in Services) agreement. Through this agreement, there are four ways of liberalizing trade in services, namely the supply of services to other countries without having to be permanent residents, residents buying services abroad, the presence of foreign branches, agents, or subsidiaries, and the presence of labor or experts for a certain period in a country to supply services. The impact of globalization is required to make changes in management and organization to be able to compete with local, national, and international competitors.

Research Method

This research was written using qualitative research methods through a literature review. Research with a literature study approach is carried out by collecting literature source materials, both primary and secondary, classifying based on data processing formulas / citing references to be displayed as study findings, abstractions are carried out to obtain complete information, and interpretation to produce knowledge for concluding. Literature study can also be interpreted as a series of activities related to methods of collecting library data, reading and recording, and managing research materials. (Darmalaksana. W, 2020)(Zed. M, 2008)

The data in this study used secondary data derived from various books, journals, reports, study results, articles, and internal health documents. Increased Competitiveness, Economic and Business Growth. So with this method data information, and conclusions are drawn to produce new information and/or knowledge as a result of studies, about how reflective analysis and health business sustainability challenges in the era of globalization in various worlds.

Result and Discussion

Increasing Indonesia's competitiveness and economic growth face various challenges that are not easy. Indonesia's competitiveness index in 2019 decreased compared to 2018 (Schwab, 2019). The ratio of export value to GDP (Gross Domestic Product) of Indonesia has only reached 19%, far below Thailand (69%), Vietnam (93%) and Singapore (172%). The value of Industrial GDP (Gross Domestic Product) contribution in Indonesia has also decreased to below 20% since the 1998 economic crisis, with an average industrial growth of 4.3%, lower than the national growth (Sudewo, 2021). The high cost of doing business has an impact on small and micro companies that choose to stay out of regulation and do business in the informal sector.

The increasing need for medical devices is also currently an opportunity in itself. The Medical Device Manufacturers Association released the market potential of medical devices up to US \$ 2.2 million per year with the potential spread across around 3,000 hospitals and 9,000 health centers and private clinics throughout Indonesia (Alfarizi & Zalika, 2023). The business opportunity of the health service industry is very promising with the situation of changing people's lifestyle patterns that also affect public health patterns. With the condition of public ownership of health, the volume of health services has increased with a fairly high transaction value.(D. S. Arsyad et al., 2022)

Health Business Sustainability in the Era of Globalization

Price-focused competition, as is often the case in markets dominated by managed care, creates incentives to increase efficiency and possibly limit resource use. Except for possible increased administrative activities designed to limit costs in other areas, such

as billing and utilization reviews or to improve marketing efforts, such cost-cutting incentives are likely to affect all aspects of healthcare industry activities (M. Goddard, 2015)(Alfarizi & Zalika, 2023).

The healthcare industry can also compete in quality, both the quality of medical services or products and the output of treatment provided. The importance of quality competition tends to be greater in markets where the healthcare industry competes for patients directly, as they do for all paid patients and for those enrolled in BPJS (Social Security Organizing Agency) who offer hospital options in their market. Furthermore, to the extent that BPJS makes its contract decisions based on the preferences of receiving hospitals, quality perception is an important competitive tool. (I. Nismawati. U. Umaruzzaman and E. Puspitaloka Mahadewi, 2022)

Quality competition is unlike competition in price which can lead to increased costs. Because it can affect clinical services and healing efficacy differently. In markets where patient care choices are increasingly important, hospitals tend to compete more on quality attributes observed and valued by patients. Given the difficulty that patients have in determining the quality of care or medical products, they receive directly, and the relative ease with which they can evaluate the quality of health services such as hospital facilities, insurance benefits, the efficacy of medicines, or the effectiveness of medical devices.(T. K. Yuda and A. Pholpark, 2022)

On the other hand, if patients rely on their doctor's recommendations in choosing a healthcare service, and to the extent that doctors can judge clinical quality, albeit imperfectly, the healthcare industry is faced with a counter-incentive, incentive that will promote the use of resources in clinical services or products. As a result, industries may face conflicting incentives such as incentives to maintain or improve the quality of services or products on the one hand, and incentives to maintain activities that contribute to the quality of services or medical products and health outcomes on the other. The actual choices made about resource allocation depend on the relative strength of these opposing incentives.(P. W. Handayani. A. N. Hidayanto, 2015)

Digital presents challenges to old industry players with the presence of new industry players, this situation causes difficulties for old industry players to compete directly. Then digital utilization must be done effectively (Aprilia & Subiyantoro, 2022). This is so that all information provided is easily accessible to consumers, not only that, old industry players are required to continue to innovate products and production processes differently from before, so these conditions give rise to the term disruption innovation, which is a fundamental change in the industrial field, ranging from various fundamental things to the creation of a new market pedestal.

A sustainable business model can be done by looking at a broader perspective. This perspective needs to be mapped through the selection of alternative strategies developed (Aruni et al., 2023). Countries in the world under the auspices of the United Nations have formulated sustainable development goals in the Sustainable Development Goals (SDGs), which are global development goals that have been processed through various activities since the Earth Summit in 1992 in Rio de Janeiro Brazil (Bariyah, 2022).

The Sustainable Development Goals (SDGs) and Health for All, highlight pre-existing local and global inequities and inequalities, although admittedly not yet sufficiently prioritized in our efforts to realize the SDG ambitions (Wanyenze et al., 2023). One aspect of human capital that is important for driving economic growth and economic development is health. This is because improved health is a condition for increasing productivity in the economy. Economic growth is closely related to health. Economic growth affects public health. Otherwise, public health will affect economic growth. Health is the energy base needed for economic growth (Aurelya et al., 2022).

The globalization of international markets today tends to be widespread, becoming complicated to trace. This process occurs so quickly with the tendency of action from various multinational giant companies / MNCs (Multinational Corporations) and the world (*global firms*) to carry out business strategies through integration, mergers, and joint venture activities across territorial boundaries between countries.

The interests of the business as a whole often trump the interests of their branch companies and the interests of trading partners in developing countries. Market globalization in addition to having a positive impact, often produces negative influences on the Indonesian economy, the development of medium and small companies, and competitive advantages in certain economic sectors or industries.

The competitiveness of some of the merchandise of Indonesian exporters began to lose their competitiveness in the international market a few years after the economic crisis in Indonesia. For Indonesian products that are oriented to absorb jobs that can still compete in the international market, technological aspects must begin to be seen and considered as solutions to improve the quality of the company's business processes and ultimately win the competition.

In this connection, factors in the field of technology that need to be studied, impact, and influence include the following: (1) Scientific innovations, (2) Adaptation of ready-to-use technology, (3) New products thrown into the market by competitors, (4) Development of substitute goods technology, (5) National technology development strategy, (6) Expenditure of research and development (R & D) costs by competitors or companies in the industry, (7) Life cycle, a product (*product life cycle*) (8) Development of computer and information technology (9) Breakthroughs that can promote better productivity in

the fields of input, processing and marketing (8) Various forecasts of future technology development

Thus, the positive impact of globalization that occurs in Indonesia is the increasing frequency of investment and trade, as well as the increasingly competitive industry at the national level. Like the two sides of a coin, negative influences must also be borne. The increasingly competitive domestic industry has resulted in damage to people's comfort. From various angles, globalization has caused many traditional economic sectors to be abandoned by society. They are busy migrating to more modern sectors of the economy. As a result, many traditional markets are now quieter.

Economic globalization is indeed a necessity and an unavoidable phenomenon, this is a consequence of a global citizen. However, it must be remembered that Indonesia also has noble cultural roots that should not be left behind. Being global and following developments is important and even a necessity, but local wisdom must also be upheld. Once again it is important to globalize and develop to show existence as a global citizen, but do not let the identity as an Indonesian nation be eroded or even lost because of it.

Health Business Challenges and Strategies in Indonesia and the World: A Reflective Review

The health service industry is unique in the competition of the health market in the world, especially in Indonesia. Most barriers to healthcare market control over the price and quality of results stem from a variety of factors. Most consumers have limited information about their disease and their treatment options. Consumers with chronic diseases should have more opportunities and incentives to gather such information, but there is still an underlying information asymmetry between providers and patients. This is also related to the transparency of treatment information which has the effect of increasing transaction costs or covert treatment fraud that is not medically necessary. (R. P. Kocher. S. Shah and A. S. Navathe, 2021)(F. Longo. L. Siciliani. G. Moscelli and H. Gravelle, 2019)

The problem of comparative measures of health care quality and beneficial outcomes (quantification and qualification) is very difficult to check independently and the lack of information about the relative costs of providers (doctors) and health services also hinders choice for consumers. The interference of insurers, private and government, as intermediaries in the purchase of health services interferes with the motivation of consumers and consequently the choice of their providers and services. This is what underlies the opinion of Barrette et al (2022) which states the specific characteristics of the healthcare industry, namely, uncertainty, unexpected, complex, information asymmetry between consumers and healthcare providers, customization, consumer ignorance, non-profit motives, health as a human right, and externalities. (M. Vilar-

Rodríguez and J. Pons-Pons, 2019)(R. Douven. M. Burger and F. Schut, 2020)(E. Barrette, 2022)

In addition, the issue of health service competition is clinical integration and collusion in health services. Although clinical integration provides the ability to improve the quality of healthcare and more effective business strategies, it can also lead to higher costs through increased market influence with patients as consumers. Integration costs, which include practice acquisition, administration, information technology, development of operating infrastructure, and support of sustainable practices, can also be prohibitive. (L. Garattini and A. Padula, 2019)(A. Faddis, 2018)

There are many substitutions for health services in Indonesia, but due to limited information, the usefulness of substitutions for health services is limited. Any subsurface in the healthcare industry, that wants to enter the market, must overcome enormous competitive challenges due to the potential for vertical and horizontal integration of markets and resistance from incumbents. The barriers are also caused by the large number of clinics, hospitals, pharmacies, or medical devices that dominate the market. The intensity of competition in the healthcare industry is due to weak consumer bargaining power, strong bargaining power of providers, malfunctioning availability of substitutions, and other market entry barriers. The findings of related barriers are discrimination in consumer service and price due to information asymmetry, the tendency of organizers to integrate vertically and horizontally, and public dependence on general insurance. (M. W. Lestari. A. Surjoputro and A. Sariatmi, 2021)(R. K. Rachman, 2021)

The results will be relevant to develop Indonesia's health policy to minimize unfair competition and maximize benefits to society. In the healthcare industry, antitrust laws have played an integral role including protecting consumers from higher prices as a result of efforts to reduce or eliminate price competition, preventing providers from boycotting innovative healthcare delivery systems, preventing consumers from providers forming collective agreements to raise costs or prices above competitive prices and providing unjustified increase benefits such to consumers, and prevent anticompetitive mergers that would result in reduced service, decreased quality and increased prices. (Y. S. Wibowo, 2021)

To overcome certain key challenges mentioned above, healthcare businesses around the world can control and even reduce costs while improving quality, including:

Quality improvement and standardization

Globally, providing quality and equitable healthcare standards continues to be a challenge for many countries, and can have major financial impacts. An analysis of the quality of healthcare in *low and middle-income countries* (LMICs) in 2018 found that poor-quality services contributed to 15% of overall deaths, impacting the country's long-term

economic output. In high-income countries, a World Health Organization report states that about 15% of hospital expenditures are due to clinical errors or hospital-acquired infections.

Having access to the latest clinical decision support information can help improve care decision-making and safety across hospital systems and countries, and new advances in telehealth and virtual learning can support clinicians if technology infrastructure is in place.

Clinical workflow optimization

Clinicians and staff need access to actionable information at the time of treatment. But when workflows aren't optimized, providers are forced to handle incomplete information, and warn of fatigue, and delays. For example, nearly half of the physicians who responded to the KLAS survey said that HER (Electronic Health Record) systems are information technology applications used to record patients' medical information electronically, and they load too slowly. HER (Electronic Health Record) dissatisfaction is also a key factor related to doctors' likelihood to resign. EHRs and integrated technologies need to make the best use of physicians' time and effort.

Personnel shortage and fatigue

Staff shortages continue to plague the health system. According to the American College of Healthcare Executives' annual survey, shortages were the top concern for hospital CEOs in the U.S. in 2021, making the financial challenge the second in the first year since 2004. Recruiting and retaining employees, especially registered nurses, is a major thing for many people. The national nursing workforce report in 2022 predicts that the shortage of nurses will further increase at least through 2023 and a report from the International Council of Nurses predicts a global shortage of 13 million nurses by 2030. Burnout plays a big role, especially as the pandemic continues, but an aging workforce is also a major factor.

Keep up with advances in medical science and information

As Deloitte notes, breakthroughs in digital medicine, gene therapy, nanomedicine, mRNA research, and other new fields are happening at an "unprecedented and exponential" rate. Doctors also need clarity on the latest evidence-based information. The challenge for health system leaders is that these innovations outstrip hospitals' ability to keep pace.

Boston Consulting Group warns that "as available therapies rapidly expand," healthcare leaders and physicians "must adjust their practices to keep pace with those advances." Hospital leaders should stay abreast of the latest findings and information, and

ultimately conduct a cost-benefit analysis of emerging options to determine how these innovations can assist their physicians in providing care.

Improving health equity

Healthcare inequality causes annual spending of nearly \$320 billion. That number could rise to more than \$1 trillion by 2040, according to a 2022 report from Deloitte. Hospital executives turned their full attention to the care disparities faced by marginalized patient populations including socioeconomic, racial, and gender-based disparities, and realized that these issues were difficult to solve. Bias can be deeply embedded in the language of clinical content such as patient education materials. They can also spread outward among members of the care team. For example, black patients were 2.5 times more likely to have negatively marked patient behaviors and histories in EHR records compared to white patients.

Patient safety

From medication and diagnostic errors to surgical errors, patient safety has always been a formidable challenge to the health system and its leadership. Hospital-acquired infections (HAIs), for example, are still a significant burden on the health-care system. After years of decline, hospitals in the U.S. saw a significant increase in HAIs in 2020, largely due to the pandemic.

Hospital executives and leaders face several challenges in trying to provide the best possible patient care. Access to trusted clinical technology and evidence-based solutions can drive effective decision-making, improve quality, and improve financial and patient outcomes across the continuum of care.

Conclusion

Globalization and climate change can be a significant influence on an economy, as happened in Indonesia. Globalization can affect policies set in that country or also apply in other countries in other parts of the world specifically, in the fields of trade, investment, services, and other economic fields. It does not guarantee that these policies will work in developing countries as they do in developed countries.

The health industry makes all health service industry providers compete with each other to compete for competitive advantages amid potential health markets. However, there are also several challenges in digital business development in Indonesia and other countries, such as the lack of adequate technology infrastructure, low levels of digital literacy in society, and lack of investment from the private sector. However, the country's huge potential as a large and growing digital market will make it an attractive market for technology companies and sustainable healthcare businesses in the days to come.

Bibliography

- Abreu, J., Guimarães, T., Abelha, A., & Santos, M. F. (2021). Business Analytics Components for Public Health Institution - Clinical Decision Area. *Procedia Computer Science*, 198(2021), 335–340. <https://doi.org/10.1016/j.procs.2021.12.250>
- A. Faddis. (2018). The Digital Transformation of Healthcare Technology Management. *Biomed Instrum Technol*, vol. 52, no. 52, Apr. doi: 10.2345/0899-8205-52. S2.34., 34–38.
- Alfarizi, M., & Zalika, Z. (2023). Competition Issues in Indonesia's Health Care Industry: Challenges and "Shields" of KPPU Supervision. *Journal of Business Competition*, 3(1), 5–18. <https://doi.org/10.55869/kppu.v3i1.89>
- Aprilia, A., & Subiyantoro, S. (2022). Opportunities and Challenges: Business in the era of industrial disruption. *Journal of Eduscience*, 9(2), 377–387. <https://doi.org/10.36987/jes.v9i2.2820>
- Aruni, A., Rukman, N., Marliani, Y. U., Muharram, L. H., & Yunan, A. (2023). Community-based sustainable business development strategy using Triple Layer Business Model Canvas (Case Study: Magotsuka Community). *Journal of Business and Entrepreneurship*, 19(01), 13–21.
- Aurelya, T., Nurhayati, N., & Purba, S. F. (2022). The Effect of Health Sector Conditions on Economic Growth in Indonesia. *Journal of STEI Economics*, 31(02), 83–92. <https://doi.org/10.36406/jemi.v31i02.752>
- Bariyah, N. (2022). Education, Health and Poverty Reduction in West Kalimantan: Towards Sustainable Development Goals. *Journal of Social Sciences and Humanities*, 11(1), 93–110. <https://doi.org/10.23887/jish.v11i1.39343>
- Christian., M. (2018). Determinants of the intention to switch between online transportation. *Journal of Business & Applied Management*, 11(2). Retrieved from <https://journal.ubm.ac.id/index.php/business-applied-management/article/view/1353/1164>.
- D. S. Arsyad et al. (2022). Modifiable risk factors in adults with and without prior cardiovascular disease: findings. *Indonesian National Basic Health Research," BMC Public Health*, vol. 22, no. 1, p. 660, Apr. , doi: 10.1186/s12889-022-13104-0.
- Darmalaksana. W. (2020). *Qualitative Research Methods: Literature Studies and Field Studies*. Bandung: Pre-Print Digital Library UIN Sunan Gunung Djati Bandung.
- E. Barrette, G. G. (2022). Countervailing Market Power and Hospital Competition. *Rev Econ Stat*, vol. 104, no. 6, , Nov. doi: 10.1162/rest_a_01020., 1351–1360.
- F. Longo., L. Siciliani., G. Moscelli and H. Gravelle. (2019). Does hospital competition improve efficiency? The effect of the patient choice reform in England, *Health Econ*, vol. 28, no. 5, May. doi: 10.1002/hec.3868., 618–640,.
- Indriyarti, E. R., & Wibowo, S. (2020). Digital-Based Health Business: Halodoc Digital Application User Intentions. *Journal of Community Service and Entrepreneurship*, 4(2). <https://doi.org/10.30813/jpk.v4i2.2328>

- Liu, Y., Lee, J. M., & Lee, C. (2020). The challenges and opportunities of a global health crisis: the management and business implications of COVID-19 from an Asian perspective. *Asian Business and Management*, 19(3), 277–297. <https://doi.org/10.1057/s41291-020-00119-x>
- <https://goodstats.id>. (2024). *10-countries-with-best-health-services-in-the-world-ZskaW*.
- I. Nismawati., U. Umaruzzaman and E. Puspitaloka Mahadewi. (2022). Implication of BPJS for Private Health Insurance Marketing and Business Competition in Indonesia. *International Journal of Health and Pharmaceutical (IJHP)*, vol. 2, no. 3, 580– 588.
- L. Garattini and A. Padula, ". (2019). Competition in health markets: is something rotten? *J R Soc Med*, vol. 112, no. 1, Jan. , doi: 10.1177/0141076818816935, 6–10.
- M. Goddard. (2015). Competition in Healthcare: Good, Bad or Ugly. *Int J Health Policy Manag*, Vol. 4, No. 9, pp. Aug. doi: 10.15171/ijhpm.2015.144., 567–569.
- M. Vilar-Rodríguez and J. Pons-Pons, ". (2019). Competition and collaboration between public and private sectors: the historical construction of the Spanish hospital system 1942–86,". *Econ Hist Rev*, vol. 72, no. 4, Nov., doi: 10.1111/ ehr.12771., 1384–1408.
- M. W. Lestari. A. Surjoputro and A. Sariatmi, ". (2021). Sustainable competitive advantage strategy in hospital industry to response policy change in Indonesia: A narrative review. *Public Health of Indonesia*, vol. 7, no. 3, Sep. doi: 10.36685/phi, 95–100.
- P. W. Handayani. A. N. Hidayanto, P. S. (2015). Strategic hospital services quality analysis in Indonesia. *Expert Syst Appl*, vol. 42, no. 6, 3067–3078.
- R. Douven. M. Burger and F. Schut, ". (2020). Does managed competition constrain hospitals' contract prices? Evidence from the Netherlands. *Health Econ Policy Law*, vol. 15, no. 3, doi: 10.1017/ S1744133119000215., 341–354.
- R. K. Rachman. (2021). A Juridical Review on the Enforcement of Criminal Law to the Violations of Tender Conspiracy Practices in the Procurement of Government Goods/ Services in the Health Sector. *International Journal of Social Science And Human Research*, vol. 2, no. 12, doi: 10.47191/ijsshr/v4-i12-27, 3652–3661.
- R. P. Kocher., S. Shah and A. S. Navathe. (2021). Overcoming the Market Dominance of Hospitals. *JAMA*, vol. 325, no. 10, Mar. doi: 10.1001/jama.2021.0079, 929.
- Sudewo, P. A. (2021). Challenges of Food and Drug Control Policy in Supporting Competitiveness, Economic and Business Improvement in Indonesia: An Analytical Study. *Eruditio: Indonesia Journal of Food and Drug Safety*, 1(2), 1–14. <https://doi.org/10.54384/eruditio.v1i2.79>
- Surya, N. T., & Sri Nurul Kur'ani. (2022). Digital-Based Health Business: Perceived Usefulness to the Intention of Using Digital Telemedicine Applications. *Journal of Human Science and Health*, 5(2), 272–278. <https://doi.org/10.31850/makes.v6i2.1619>

- T. K. Yuda and A. Pholpark. (2022). Healthcare expansion in Indonesia and Thailand: a causal mechanism and its implications for welfare regimes, *Journal of International and Comparative Social Policy*, vol. 38, no. 2, doi: 10.1017/ics.202, 111–129.
- Wanyenze, R. K., Alfvén, T., Ndejjo, R., Viberg, N., Båge, K., Batte, C., Helldén, D., Lindgren, H., Mayega, R. W., Ndeezi, G., Peterson, S. S., Nawangwe, B., & Ottersen, O. P. (2023). Sustainable health—a call to action. *BMC Global and Public Health*, 1(1), 1–4. <https://doi.org/10.1186/s44263-023-00007-4>
- Y. S. Wibowo, G. S. (2021). Analysis of the Implementation of Public Information Disclosure Policy at the Business Competition Supervisory Commission of the Republic of Indonesia," *Cerdika: Indonesian Scientific Journal*, vol. 1, no. 7, pp. Jul. doi: 10.36418/cerd. *CCerdika: Indonesian Scientific Journal*, vol. 1, no. 7, pp. 892–909, Jul. 2021, doi: 10.36418/cerdika.v1i7.127, 892-909.
- Zed. M. (2008). *Literature Methodology*. Jakarta: Yayasan Obor Indonesia.