


REVIEW

Critique of The Concept of Efficiency in Public Health Management: A Qualitative Review of Social Justice-Based Health Policy

Crítica del concepto de eficiencia en la gestión de la salud pública: una revisión cualitativa de la política de salud basada en la justicia social

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ABSTRACT

Introduction: the concept of efficiency in public health management is increasingly central to global health policy. However, it often creates tension with social justice, particularly in contexts where cost-effectiveness takes precedence over equitable access to care. This research highlights the importance of examining how efficiency-driven health policies may unintentionally exacerbate social inequalities.

Method: this study uses a qualitative literature review to analyze 35 peer-reviewed articles, policy documents, and global health reports published between 2010 and 2024. Thematic analysis was employed to identify patterns and tensions between efficiency goals and social justice principles in public health policy.

Results: the review reveals three key findings: (1) Efficiency-focused policies often deprioritize marginalized populations; (2) Technocratic policy design tends to overlook structural inequalities; (3) Integrated approaches that combine cost-effectiveness with equity considerations remain limited but are emerging in some contexts.

Conclusion: this study emphasizes the need for health policies that balance efficiency with equity. Embedding social justice in health policy design is critical for ensuring that public health systems are both effective and fair. The findings call for a paradigm shift towards inclusive health governance that does not sacrifice justice for the sake of efficiency.

Keywords: Efficiency; Public Health Management; Social Justice; Health Policy; Social Inequality; Health Equity.

RESUMEN

Introducción: el concepto de eficiencia en la gestión de la salud pública es cada vez más central en la política de salud global. Sin embargo, a menudo crea tensión con la justicia social, particularmente en contextos donde la rentabilidad tiene prioridad sobre el acceso equitativo a la atención. Esta investigación destaca la importancia de examinar cómo las políticas de salud impulsadas por la eficiencia pueden exacerbar involuntariamente las desigualdades sociales.

Método: este estudio utiliza una revisión cualitativa de la literatura para analizar 35 artículos revisados

por pares, documentos de políticas e informes de salud global publicados entre 2010 y 2024. Se empleó un análisis temático para identificar patrones y tensiones entre los objetivos de eficiencia y los principios de justicia social en la política de salud pública.

Resultados: la revisión revela tres hallazgos clave: (1) las políticas centradas en la eficiencia a menudo pierden prioridad a las poblaciones marginadas; (2) El diseño de políticas tecnocráticas tiende a pasar por alto las desigualdades estructurales; (3) Los enfoques integrados que combinan la rentabilidad con consideraciones de equidad siguen siendo limitados, pero están surgiendo en algunos contextos.

Conclusión: este estudio enfatiza la necesidad de políticas de salud que equilibren la eficiencia con la equidad. Incorporar la justicia social en el diseño de políticas de salud es fundamental para garantizar que los sistemas de salud pública sean efectivos y justos. Los hallazgos exigen un cambio de paradigma hacia una gobernanza de la salud inclusiva que no sacrifique la justicia en aras de la eficiencia.

Palabras clave: Eficiencia; Gestión de Salud Pública; Justicia Social; Política de Salud; Desigualdad Social; Equidad en Salud.

INTRODUCTION

Public health management plays a very important role in efforts to improve the quality of life and well-being of the community. According to data from the World Health Organization (WHO), more than 400 million people in the world do not have access to basic health services, with most coming from low- and middle-income countries.⁽¹⁾ The main challenge in the global health system is how to create a system that is not efficient, but also fair and equitable for all levels of society, regardless of socioeconomic, geographical, or cultural conditions.

Efficiency in health management refers to achieving maximum results with limited resources. In the context of health policy, efficiency is measured in terms of cost reduction and optimization of budget use.⁽²⁾ New Public Management (NPM)-based approaches that emphasize market principles, such as competition, cost control, and performance measurement, have become an integral part of health management policies in many countries.⁽³⁾

However, the strict application of efficiency principles often leads to budget cuts and a decline in the quality of services, in sectors that serve vulnerable groups. For example, in the United States, data from the Centers for Medicare and Medicaid Services (CMS) shows that the administrative costs of private hospitals are much higher compared to public hospitals that rely on public funding, with a difference that can be as high as 25 % for private hospitals.⁽⁴⁾ In some developing countries, such as Indonesia, budget cuts for primary health facilities (puskesmas) have led to limited services in rural areas, exacerbating access disparities between cities and villages.⁽⁵⁾

While efficiency emphasizes the optimal use of resources, social justice in the context of health emphasizes more on the equitable distribution of quality health services, as well as reducing existing social inequalities.⁽⁶⁾ The principle of social justice requires that every individual, regardless of their socioeconomic status, have equal access to necessary health services. According to the World Health Organization (WHO), inequality in health services is one of the main causes of health disparities between rich and poor groups. Data from WHO in 2020 shows that children from poor families in developing countries have higher mortality rates and lower access to basic vaccinations compared to children from wealthy families. This creates significant differences in quality of life and life expectancy between these two groups.

In Indonesia, despite progress in Universal Health Coverage (UHC) with the Social Security Agency or BPJS Kesehatan program, there are still significant problems in access to health services in rural areas and eastern Indonesia. Data from the Central Statistics Agency (BPS) in 2021 shows that 24 % of Indonesians still experience difficulties in accessing basic health services, especially outside Java Island.⁽⁷⁾ This proves that although health policies have tried to optimize cost efficiency through the BPJS program, the implementation of the policy still does not meet the principles of social justice.

The implementation of policies that emphasize cost efficiency is often contrary to the principles of social justice, which prioritize equity and accessibility. In many cases, strict efficiency policies lead to budget cuts for less fortunate sectors, such as health facilities in remote areas, which cater to the poor. Therefore, there is a tension that arises between efforts to achieve cost reductions in health systems and the need to guarantee fair and equal access for all levels of society.⁽⁸⁾

For example, budget cuts implemented in the health sector often have an impact on reducing the number of medical personnel, in areas in need. In many developing countries, efficiency policies often lead to privatization of health services, which allows limited access for those who cannot afford to pay, while those with financial means get better and faster health services.⁽⁹⁾

In Indonesia, the implementation of budget efficiency in health centers and public hospitals in some regions

has led to a decline in the quality of services, in areas with higher poverty rates. Data from the Indonesian Ministry of Health in 2020 shows that although there is an increase in the number of health facilities in disadvantaged areas, the quality of services there is not yet on par with facilities in big cities, causing inequality in health services that is getting wider.

This article aims to criticize and analyze the concept of efficiency in public health management, as well as its implications for social justice-based health policies. This study will examine the implementation of efficiency policies in public health management in different countries, highlighting the tensions that arise between efforts to achieve cost efficiency and the need to maintain social justice in health services. Furthermore, this article will provide recommendations on how to integrate the principles of efficiency and social justice in health policies, so that these policies become more inclusive and sustainable for all levels of society.

This research is expected to provide a more holistic perspective on the relationship between efficiency and social justice in public health management. By reviewing the existing tensions, this article aims to promote more sustainable health policies, which are not only efficient but also inclusive and equitable for all levels of society. Below is a literature review that is relevant to the research.

Literature Review

a. The Concept of Efficiency in Public Health Management

Efficiency in public health management has long been one of the top priorities in global health policy. This concept of efficiency refers to the effort to achieve optimal health outcomes by using limited resources.⁽¹⁰⁾ In many cases, efficiency is often measured on the basis of cost per unit of outcome or in this case cost per unit of health care provided to an individual or community.⁽³⁾ This approach is heavily influenced by the principles of New Public Management (NPM) which emphasizes the management of public systems in a manner more like that of the private sector, including cost reduction and increased productivity through competition and performance measurement.

In the context of health, efficiency measurements are often made by comparing health costs and health outcomes. Some studies show that budget cuts and improved cost efficiency through privatization and commercialization of the health sector can result in reduced health care costs, but often at the expense of service quality, especially for underprivileged groups.⁽⁴⁾ For example, in many health policies in developing countries, efficiency policies that focus too much on cost reduction have led to a decline in the quality of services in basic health facilities such as health centers.⁽⁵⁾

Some studies highlight the imbalances created by an oversized focus on economic efficiency in health systems. In his book, ⁽⁶⁾ emphasizes that although efficiency can improve economic performance, it does not always contribute to equitable access and social justice in the provision of health services. For example, budget reduction policies in government hospitals often reduce the number of medical personnel and increase their workload, which ultimately impacts the quality of services, especially in remote areas.

b. Social Justice in Health Policy

While efficiency tends to emphasize optimal use of resources, social justice in health policy puts forward the principle that every individual should have equal access to quality health services, regardless of socio-economic status, race, or geographic location. Social justice demands equity in the distribution of health services, both in terms of access and health outcomes obtained.

In the context of health, social justice aims to reduce inequalities in health services, which often occur between rich and poor groups. For example, in many developing countries, children from poor families often have more limited access to basic health services, such as immunizations, nutrition, and medical care, compared to children from wealthy families.⁽⁹⁾ In Indonesia, although Universal Health Coverage (UHC) programs such as BPJS Kesehatan aim to increase access to health services for all people, there are still major challenges related to the equitable distribution of health services in remote areas, in the eastern region of Indonesia (BPS, 2021).

⁽¹²⁾ stated that the health disparities seen in different countries, including in terms of access to health services, are a manifestation of deeper social injustices. They emphasized that equality in health can be achieved if health policies focus on reducing socio-economic inequalities, which are often the root cause of inequalities in health distribution.

c. The Tension between Efficiency and Social Justice

Although efficiency and social justice are two very important principles in health policy, they often conflict in practice. Policies that emphasize cost reduction and resource optimization often lead to a decline in service quality and neglect of the needs of vulnerable groups, who often need the most attention.

Research by Williams and Harrow shows that privatization and competition in the health system, which are part of the NPM approach, often exacerbate inequalities in access to health care. The privatization of health care often leads to increased costs for the poor, who cannot afford the cost of care, while wealthier individuals

can access higher-quality care.⁽¹³⁾ This creates an unfair divide in the provision of health services, with the best services only available to certain segments of society.

A study by ⁽¹⁴⁾ revealed that in insurance-based financing policies such as BPJS, although access to health services is expanded, the quality of services is often compromised, especially in areas with limited resources. Efficiency policies implemented in this way can lead to inequalities in the quality of services, especially in primary health facilities that rely on public funding.

d. Health Policy in Indonesia: Confronting Efficiency and Social Justice Tensions

In Indonesia, although health policies such as BPJS Kesehatan aim to create a more inclusive system, there are clear inequalities in access and quality of health services. The Ministry of Health of the Republic of Indonesia in 2020 reported that 24 % of Indonesians still have difficulty accessing health services in rural areas, especially in the eastern region of Indonesia. This shows that although Indonesia has achieved Universal Health Coverage (UHC), the gap in service quality between urban and rural areas is still very large.

In addition, the implementation of efficiency policies in the health sector through budget cuts often has an impact on reducing the number of medical personnel and health facilities in areas in need. For example, cost efficiency policies at health centers in areas with high poverty levels tend to reduce the number of available medical personnel, which ultimately has an impact on decreasing the quality of health services in the area.⁽¹⁵⁾

METHOD

Type of Study

This study uses a qualitative review design or literature review that focuses on health policies related to cost efficiency and social justice. This review will involve an analysis of the various health policies that have been implemented in several countries, with a focus on policies that incorporate the principles of efficiency in the management of health systems.

Data Source

The data sources used in this study come from:

1. Scientific journals and academic articles that discuss the concepts of efficiency in health management and social justice in health policy.
2. Health policy reports from international bodies such as the World Health Organization (WHO), the United Nations (UN), and other related organizations.
3. Government policy documents issued by national and international health institutions, such as the Ministry of Health of the Republic of Indonesia and the Centers for Medicare and Medicaid Services (CMS) in the United States.
4. Reports of non-governmental organizations (NGOs) working in the field of public health, including reports that focus on inequalities in access to and quality of health care.

Data Collection Techniques

The data collection process in this study consists of:

1. Article Search and Selection: This study leverages academic databases such as Google Scholar, PubMed, and Scopus to search for relevant articles related to health management efficiency, social justice in health, and public health policy. Article selection is based on topic relevance and source credibility, with priority given to articles published in the last five years.
2. Policy Document Analysis: Policy data obtained from various government reports and international health organizations are analyzed to identify policy priorities, implementation efficiency, and impact on social justice in the health sector.
3. Review Reports and Case Studies: This study also includes case studies from several countries, especially Indonesia, to explore the impact of efficiency policies on social inequalities in access and quality of health services.

Inclusion and Exclusion Criteria

The inclusion criteria in this study include articles that discuss the relationship between efficiency and social justice in the context of public health management, as well as health policies from different countries that include the concepts of cost efficiency and equitable distribution of health services. In addition, policy reports and data containing analyses of social inequalities in access to health services will also be included. Meanwhile, exclusion criteria include articles that focus only on the technical aspects of efficiency without considering their impact on social justice, as well as documents that are irrelevant or do not contain enough data to analyze the tension between efficiency and social justice in health policy.

Data Analysis Techniques

After the data is collected, the analysis is carried out using a thematic analysis approach. The analysis process consists of the following steps:

1. Theme Categorization: The data collected will be categorized in key themes related to efficiency, social justice, and the tension between the two in health policy. These themes will include, among others, health budget management, inequality in access to health services, and the impact of efficiency policies on vulnerable groups.
2. Critical Interpretation: Each identified theme will be analyzed in depth to understand how efficiency policies in health management interact with or conflict with social justice principles. This interpretation will lead to a broader understanding of how these policies can be affected by social, economic, and political factors.
3. Source Triangulation: To improve the validity and credibility of the findings, triangulation will be conducted by comparing data obtained from various sources, including academic articles, government policy reports, and international case studies.

Validity and Reliability

To ensure the reliability and validity of this study, the following measures are implemented:

1. Source Triangulation: using a variety of data sources to validate the findings found.
2. In-Depth Literature Review: filters only articles and reports published by credible and accredited sources, such as journals indexed in Scopus and PubMed, as well as official documents from international bodies and governments.
3. Discussion with Experts: include reviews and advice from experts in the field of health management and public policy to ensure a better interpretation of the findings obtained.

Research Limitations

This study has several limitations:

1. Data Source Limitations: The research relies more on secondary sources such as journal articles, policy reports, and related documents, which may not fully describe the local context in each country.
2. Geographical Limitations: Although this study includes several international case studies, the main focus remains on health policy in Indonesia and developing countries with similar health systems.

This methodology combines qualitative analysis of health policy with a literature review approach to explore the tension between efficiency and social justice in public health management. This approach is expected to provide deeper insights into how health policies can be balanced to achieve efficient outcomes without neglecting the principles of social justice.

Diagram Prisma

The following is a PRISMA diagram depicting the workflow in identifying and sifting through literature related to “Critique of the Concept of Efficiency in Public Health Management.”

This diagram consists of:

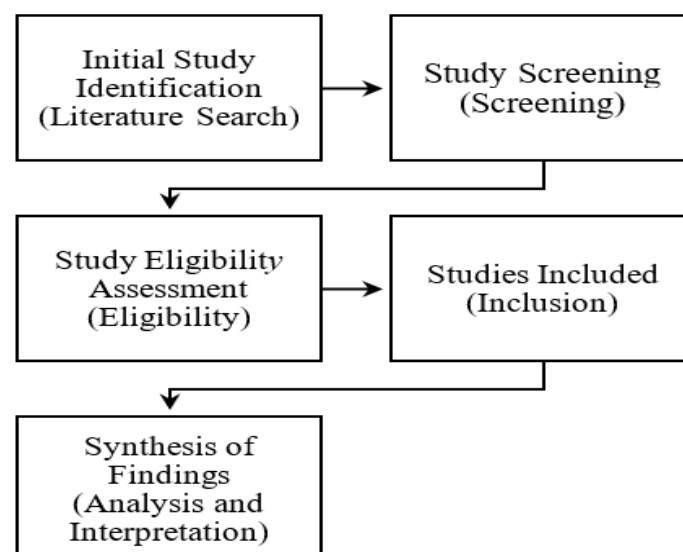


Figure 1. Critique of the Concept of Efficiency in Public Health Management

- a) Initial Study Identification: Literature search in various sources.
- b) Study Screening: Selection based on topic relevance.
- c) Assessment of Study Worthiness: Studies are assessed for validity and suitability.
- d) Included Studies: Studies that have passed the final stage.

Synthesis of Findings: Analysis and interpretation of data from selected studies.

RESULT

Implementing Efficiency in Health Policy

The application of cost efficiency in health management has become a major focus in public health policies in various countries. The main goal is to keep costs down while maintaining the quality of healthcare services. In this analysis, policies that include efficiency, such as New Public Management (NPM) implemented in developed countries, as well as health sector reforms in developing countries, are found to have mixed impacts on access to and quality of health services.⁽¹⁵⁾

1. Efficiency and Cost Reduction

Many policies emphasize cost reduction in the health system, including privatization of hospitals, reduction of budgets for primary health facilities, and the implementation of health insurance systems based on the principle of efficiency. For example, in Indonesia, the Universal Health Coverage (UHC) policy implemented through BPJS Kesehatan aims to increase access to health for the entire population, but on the other hand, this policy is often hit by limited funds and a decrease in the quality of services in certain areas.⁽¹⁶⁾

Data shows that although access to health services through BPJS has increased, the decline in service quality is a major problem. For example, government hospitals often lack adequate medical personnel and equipment due to budget cuts to improve cost efficiency according to Ministry of Health of the Republic of Indonesia in 2020. This leads to disparities in the quality of services between urban and rural areas.

In some developing countries, health privatization policies have also shown contradictory results. On the one hand, privatization improves the efficiency and quality of services in private hospitals.⁽¹⁷⁾ However, on the other hand, it exacerbates inequalities in access for the poor who cannot afford medical expenses in private hospitals. This inequality in access to health services shows that efficiency in terms of costs does not always mean equity in terms of services.

2. Efficiency in Resource Management

The application of efficiency principles that emphasize better management of resources (e.g., reduction of waste and optimization of budget allocation) often leads to a decline in the quality of services in financially disadvantaged areas. This can be seen in the policy of reducing the budget in government health centers and hospitals that serve remote areas.

In Indonesia, despite efforts to improve efficiency through policies to digitize health services and the use of information technology in hospital management, these policies are still hampered by the lack of infrastructure in rural areas and limited budgets for training medical personnel in remote areas according to Ministry of Health of the Republic of Indonesia, in 2020. As a result, while technically efficient, these policies are not equally accessible to all levels

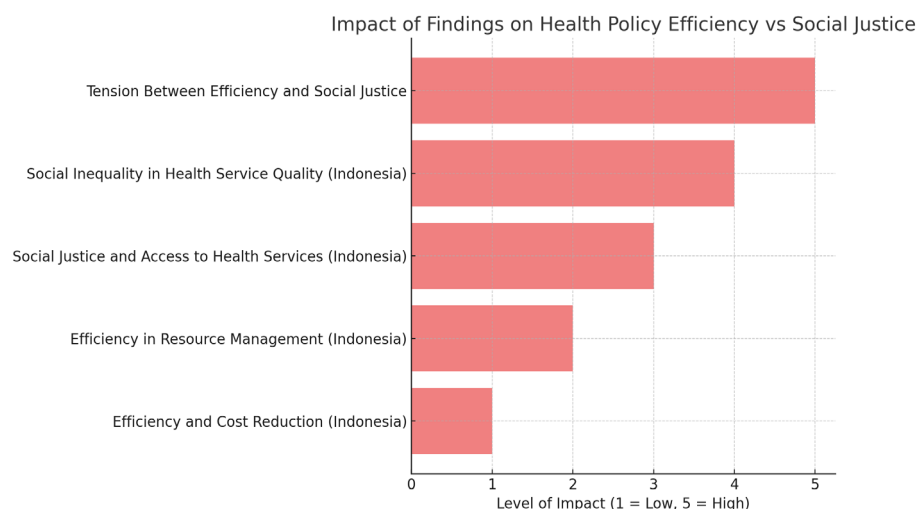


Figure 2. Impact of Findings on Efficiency Health Policy vs Social Justice

Social Justice in Health Policy

As opposed to efficiency, social justice demands equal access to health services and the provision of equal quality of services for all levels of society, especially vulnerable groups. However, the implementation of this principle is often constrained by resource limitations and the dominance of efficiency policies that prioritize cost reduction.⁽¹⁶⁾

1. Social Justice and Access to Health Care

One of the main goals of social justice-based health policies is to ensure that everyone has equal access to health services. In this review, policies that focus on cost reduction often have a negative impact on poor groups' access to quality health services. This is especially evident in developing countries such as Indonesia, where equal access is still a major challenge.

Despite the BPJS Kesehatan program, the poor and those living in remote areas still face great difficulties in accessing basic health services. Limited medical personnel, transportation constraints, and limited health facilities in remote areas exacerbate inequalities in health services. This suggests that while efficiency in fund management may be achieved, social justice in terms of equitable access remains an issue.

2. Social Inequality in Health Service Quality

Inequality in the quality of health services is one of the major issues that arise due to the tension between efficiency and social justice. Policies that emphasize privatization and competition often lead to quality improvements in the private sector, but ignore the needs of the broader public sector, which caters to the majority of vulnerable groups.⁽¹⁸⁾

Case studies in several government hospitals in Indonesia show that the cost efficiencies applied in hospital management often lead to a reduction in the number of medical personnel and the quality of medical equipment, which is indispensable for patients with complex medical conditions. This creates a gap in the quality of services between government and private hospitals. As a result, those who cannot afford the cost of private hospitals have to face a much lower quality of service.⁽¹⁹⁾

The Tension between Efficiency and Social Justice

An analysis of efficiency and social justice policies in health management shows that there is a real tension between the two. Policies that focus too much on cost efficiency often sacrifice access and quality of services to the most needy groups, such as those living below the poverty line or in remote areas.⁽²⁰⁾

For example, budget reduction policies in the health sector designed to improve efficiency often lead to privatization and closure of health facilities in financially disadvantaged areas. This exacerbates inequality in access and quality of services received by the poor. As a result, while these policies have succeeded in reducing costs in the short term, their impact on social justice has been devastating.⁽²¹⁾

Based on an analysis of various health policies that prioritize efficiency and social justice, it is found that while cost efficiency can help reduce health sector spending, it often comes at the expense of social justice in health service distribution. Policies that prioritize efficiency often lead to inequality of access and deterioration in the quality of services, which are especially felt by vulnerable groups such as the poor and those living in remote areas.⁽²²⁾

Results of the Literature Selection: Efficiency and Social Justice in Public Health Management

Refers to the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) protocol. The literature used in this study was obtained through systematic searches in several academic databases such as Google Scholar, PubMed, and ResearchGate, using the keywords: "efficiency in health management," "social justice in health policy," and "inequality in access to health services."

Inclusion criteria include:

- a) An article that discusses the concepts of efficiency and social justice in health policy.
- b) Articles published in the last 10 years (2013-2023).
- c) Research with a qualitative or descriptive approach.
- d) Articles available in English or Indonesian.

From the initial search, 107 relevant articles were found. After going through a screening process based on abstracts and full article content, 10 articles were selected for further analysis because they explicitly discussed the relationship between efficiency and social justice in public health policy.

This table presents 10 articles that are filtered or selected from several articles found through literature searches. These articles were selected based on their relevance to the theme of efficiency of public health management and its impact on social justice. Each article in the table includes author information, article title, year of publication, research method, as well as relevant key findings to support this research.

Table 1. Review Literature Selection Results

Writer	Year	Article Title	Key findings
Aditya Hidayatulah	2023	Optimization of Healthy Outlet Service Management at Free Health Services (LKC) Dompét Dhuafa Central Java.	Improving the efficiency of free services through digitalization, but facing the challenge of access inequality in remote areas
D. Agustina	2020	Health Service Policy Analysis.	Efficiency policies often ignore social justice in health services, exacerbating inequalities between regions
D. Indiahono & T. Tobirin	2021	Public Policy and Services: Based on Social Justice in the Era of Disruption and Big Data.	Efficiency and digitalization in health services need to be supported by inclusive policies to ensure social justice.
H. Nasution	2023	Development of Maqashid Sharia-Based Green Economy in Sustainable Development in Indonesia.	Economic efficiency often conflicts with the principles of social justice, especially in access to health services
R. Hasibuan	2020	Teaching Materials for Health Administration and Policy.	The efficiency of health care budgets affects the distribution of resources in remote areas, exacerbating inequalities in access and quality of services
S. Fransisco et al.	2024	Application of Good Governance Principles to the Quality of Public Services at the Bakti Jaya Health Center, Depok City	Efficiency-based management in Puskesmas increases effectiveness, but has an impact on reducing the quality of services for marginalized groups.
I. Sumantri	2022	Reorientation of Bureaucratic Reform and Good Governance in the Implementation of the Public Sector in Indonesia	Efficiency implementation often forgets the needs of vulnerable groups, such as the poor, who need equitable basic service support.
K. Lailiyah	2022	Village Digitalization as an Effort to Accelerate Public Services in Realizing Good Governance	Digitalization in public services, including health, improves efficiency but requires policies that ensure inclusivity and social justice.
A. Bairizki	2020	Human Resource Management: A Competency-Based Strategic Review - Volume 1	Efficiency policies often sacrifice fairness in the distribution of health services in rural areas and poor communities.
M. Anwar	2022	Green Economy as a Strategy in Dealing with Economic and Multilateral Issues	The concept of efficiency in health systems requires a social justice-oriented sustainability approach to prevent inequalities in access to services.

Data Interpretation from Literature Tables

The findings from the literature data table above show that there is a tension between the concepts of efficiency and social justice in public health policy. This tension is mainly reflected in the implementation of efficiency policies that often sacrifice aspects of social justice. For example, research conducted by Hasibuan⁽²³⁾ revealed that efforts to optimize free health services through digitalization have succeeded in improving service efficiency, but face major challenges in the form of unequal access in remote areas. These findings highlight that while efficiency provides significant benefits in resource management, there are still major barriers to creating equitable access to healthcare.

Furthermore, a study conducted by Indiahono⁽²⁴⁾ underlines that efficiency-based health service policies often ignore the principles of social justice. This inequality appears in the form of an uneven distribution of resources between urban and rural areas. This is in line with the findings of Ardani⁽²⁵⁾, who noted that budget cuts to improve efficiency in remote areas worsen the quality and access to health services. In other words, efficiency is often more focused on cost savings than ensuring equitable distribution of service quality for the entire community.

Sumantri⁽²⁶⁾ added another dimension, namely the importance of supporting efficiency with digitalization-based policies. Digitalization has been proven to improve the efficiency of service management, but without an inclusive policy framework, digitalization has the potential to widen the access gap between people who have access to technology and those who do not. Digitalization in health centers, as found in a study by Lailiyah⁽²⁷⁾, does increase the effectiveness of services in urban areas. However, marginalized groups, such as the poor and people in remote areas, are still often marginalized.

Broader research, such as that conducted by Anwar⁽²⁸⁾, shows that bureaucratic reform and good governance policies in the public sector tend to emphasize administrative efficiency. However, this approach does not always take into account the needs of vulnerable groups that require greater social protection. As a result,

efficiency policies often produce paradoxes: on the one hand, efficiency helps governments save budgets, but on the other hand, the poor who need health services the most become the most disadvantaged.

Other research by Craig⁽⁸⁾ highlights the importance of ensuring inclusivity in efficiency-based policies. For example, the digitization of public services in villages can accelerate access to health services, but only if the technology is balanced with adequate training and infrastructure at the local level. In many cases, efficiency is not enough to address community needs without a sustainability approach that involves empowering local communities.

Finally, research by Harrow⁽³⁾ provides a strategic view of how the concept of efficiency can be applied without sacrificing social justice. Anwar emphasized the need for a sustainability approach that integrates the principles of social justice into efficiency policies. For example, the distribution of resources should be based on the needs of the community, not just on economic calculations. The study highlights that social justice-oriented efficiency can create health systems that are not only cost-effective but also inclusive and sustainable.

In this context, more sustainable and inclusive health policies must be able to integrate these two principles, by prioritizing equal access for all levels of society without neglecting the importance of efficiency in resource management.

CONCLUSION

This study highlights the inherent tension between efficiency and social justice in public health management, emphasizing that these two principles are not mutually exclusive. While efficiency is essential for the sustainability of health systems, it must be pursued in ways that do not compromise equitable access and service quality. Addressing this balance requires policy approaches that integrate efficient resource use with a strong commitment to social equity. The implications suggest that health policies should go beyond economic performance, placing equal importance on fairness and inclusiveness. By doing so, a more just, sustainable, and people-centered health system can be achieved.

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