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## THE RESTRUCTURING RIGHTEOUS FOREIGN WORKER REGULATIONS: THE CHALLENGE OF ENORMOUS INFLUX OF FOREIGN WORKERS

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### ABSTRACT

*Foreign workers are needed to overcome the challenge of a shortage of professional workers. However, the ineffectiveness of foreign worker licensing regulations in Indonesia hampers the supply of qualified foreign workers and impacts regional levy revenues. This research aims to structure the rules for the fair use of foreign workers. This is normative juridical research with conceptual, statutory, and comparative approaches. The results of a comparison of foreign worker regulations in Indonesia and Singapore are used to develop a regulatory concept that is more responsive to the use of foreign workers, especially in the health sector. The idea of licensing law and justice theory is used for analysis. The research results show that the regulations on using foreign workers in Indonesia are not yet comprehensive regarding the rules for qualifying foreign workers as a condition for issuing permits and justifying good public services. The issuance of permits to use foreign workers has been hampered because several regions do not yet have implementing regulations that impact the collection of regional levies. Second, setting up mechanisms for utilizing foreign workers in Singapore is relatively easy and successful with strict digital-based permit requirements. Thus, Indonesia needs to adopt a foreign labor policy system with strict requirements for issuing permits that are accessible in terms of bureaucracy, changes to laws, implementation of regulations, and drafting of regional regulations.*

## 1. Introduction

In some fields of work, there is a need for professional workers that a country cannot meet. Thus, opportunities are opened for foreign workers to fill certain positions. To be able to work in a country, foreign workers must meet several criteria and requirements to be issued a work permit. However, in Indonesia, the regulation of the supply of foreign workers still experiences various obstacles, especially in technical rules and regional regulations that regulate the licensing of foreign workers. This also impacts the protection of foreign workers in the destination country and the issue of obtaining regional levies. The

problem of labor in the health sector is still a crucial issue in Indonesia. The number of specialist doctors in Indonesia is still insufficient to meet needs and provide quality health services. The lack of expert medical personnel has become a severe concern in providing quality health services. Population growth and the complexity of medical cases require the availability of qualified and competent medical personnel in various fields of specialization. This means the increasing need for specialist medical personnel is a significant challenge.<sup>1</sup>

Meanwhile, fulfilling health services is a human right, which is a universal and enduring fundamental right that requires safeguarding, respect, and upholding. No individual can neglect, diminish, or revoke them. The right to health is an investment in the success of national development and is a component of human rights.<sup>2</sup> This is guaranteed by the 1945 Constitution of the Republic of Indonesia, which stipulates that the state is obligated to provide health services to all citizens. Furthermore, Article 25 of the Universal Declaration of Human Rights asserts every individual's entitlement to a standard of living sufficient for their and their family's health and well-being. This includes the right to food, clothing, shelter, health services, and essential social services, as well as the right to security in the event of unemployment, illness, disability, abandonment by a partner, old age, or other circumstances that result in a decline in the standard of living that is beyond one's control.<sup>3</sup>

Ensuring the availability and sufficiency of essential medical services, such as general practitioners, general dentists, simple surgical, simple midwifery, and medical record administration services, is one measure that can guarantee the right to health. Health professionals assist healthcare providers in providing fundamental medical services.<sup>4</sup> Therefore, health workers are expected to be able to provide optimal quality health services without being forced to carry out their duties.<sup>5</sup> The Ministry of Health's 2021 data shows that Indonesia has more than 123 thousand physicians and dentists across 34 provinces. This total, 37.473 specialist physicians and 67.147 general practitioners are present. Meanwhile, Indonesia's population is approximately more than 270 million. Based on this information, it is evident that there is a significant disparity between the population of Indonesia's regions and the availability of medical personnel (the number of physicians and dentists). For instance, in the DKI

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1 Arush Lal and others., Fragmented Health Systems in COVID-19: Rectifying the Misalignment between Global Health Security and Universal Health Coverage, *The Lancet*, Vol.397 No.10268, 2021, page.61–67

2 The Lancet., Health as a Foundation for Society, *The Lancet*, Vol.397 No.10268, 2021, page.1

3 Bronwyn McBride, Sarah Hawkes, and Kent Buse., Soft Power and Global Health: The Sustainable Development Goals (SDGs) Era Health Agendas of the G7, G20 and BRICS, *BMC Public Health*, Vol.19 No.1, 2019, page.815

4 Christian Gulden and others., RecruIT: A Cloud-Native Clinical Trial Recruitment Support System Based on Health Level 7 Fast Healthcare Interoperability Resources (HL7 FHIR) and the Observational Medical Outcomes Partnership Common Data Model (OMOP CDM), *Computers in Biology and Medicine*, Vol.174 No.108411, 2024

5 G. V. Artamonova and others., The Personnel Policy in Health Care Institutions in the Light of Tasks of Provision of Medical Care Quality and Medical Activity Safety, *Problems of Social Hygiene Public Health and History of Medicine*, Vol.31 No.2, 2023

Jakarta region, the ratio of medical personnel to the population is 1:65 and 1:19, respectively. This implies 65 general practitioners and 19 dentists per 100,000 individuals. This contrasts the West Sulawesi region, where the ratios are 1:12 and 1:3, respectively. This implies 12 general practitioners and three dentists per 100,000 residents. Nationally, according to the proportion of health centers with doctors available by minimum standards, six provinces—Papua, Maluku, West Papua, East Nusa Tenggara, Central Kalimantan, and West Sulawesi—have a percentage of health centers with doctor present that is less than 80%. Indonesian Health profile 2021 shows that the number of community health centers is around 10,292 units, 4,201 with inpatient care and 6,091 non-inpatient care. Of this number, only around 48.9% of community health centers meet the requirements for the type of health workers or medical personnel in Indonesia. This shows that the distribution of medical personnel still needs to be comprehensive so that health services are provided optimally.<sup>6</sup>

The distribution of doctors also contributes to Indonesia's medical personnel shortage. Additionally, coordinating the planning process for the necessary number of physicians in hospitals and other health facilities in the regions could have been better, particularly in the remote areas and islands. One of the reasons why it is challenging to attain health development targets is the impact of the COVID-19 pandemic in the past three years. In this instance, the government is instrumental in developing health services to ensure they are equitable and of the highest quality, thereby achieving the highest level of public health.<sup>7</sup> Furthermore, the health sector is experiencing changes due to the accelerated growth of technology and information and reduced borders between countries. For example, the ASEAN group of countries is involved in advancing technology and information in all sectors, including the health sector, particularly the medical industry. The ASEAN Economic Community established the Mutual Recognition Arrangement to oversee technological and information advancements in the services sector.<sup>8</sup>

The migration of physicians from developing countries to high-income countries further exacerbates the unequal distribution of doctors worldwide. The health workforce deficit results from numerous countries' insufficient capacity to recruit, train, and retain health and care workers. This deficiency also encompasses difficulties in allocating and distributing personnel with the requisite expertise and quantity.<sup>9</sup> Generally, the Asian continent accounted for

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6 Krittiya Kantachote., Micromanagement of Foreign Domestic Workers in Singapore: The Influence of State Regulations and Laws, *Heliyon*, Vol.9 No.7, 2023

7 Arush Lal and others., Fragmented Health Systems in COVID-19: Rectifying the Misalignment between Global Health Security and Universal Health Coverage, *The Lancet*, Vol.397 No.10268, 2021.

8 Tara Tancred and others., How Can Intersectoral Collaboration and Action Help Improve the Education, Recruitment, and Retention of the Health and Care Workforce? A Scoping Review, *The International Journal of Health Planning and Management*, Vol.39 No.3, 2024, page.757–80

9 Saurabh Saluja and others., The Impact of Physician Migration on Mortality in Low and Middle-Income Countries: An Economic Modelling Study, *BMJ Global Health*, Vol.5. No.1, 2020

the highest number of foreign health workers (39.25%). In Southeast Asia, the foreign health workers were present in 17 people from Malaysia (7 individuals), Singapore (5 individuals), the Philippines (4 individuals), and Cambodia (1 individual). However, Indonesia does not receive enough foreign workers in the health sector. However, there is a need for foreign workers, and this must be met. In 2012, Indonesia employed 147 foreign health professionals, according to data from the Ministry of Health. Out of this total, the Ministry of Health registered 92 individuals as employees of private hospitals, clinics, and other health offices, nine as educators at health polytechnics, 12 as participants in education and training, and 34 as engaged in social service activities. In, foreign health workers received 50 recommendations, with 10 individuals employed in private hospitals and 40 involved in social service activities. This figure does not accurately represent the actual number of foreign health workers.<sup>10</sup> The figure is higher than this, as certain foreign workers enter Indonesia through alternative cross-ministerial licensing routes. Additionally, in 2015, 107 foreign health workers were employed in Indonesia. However, this number still cannot meet the needs of professional medical personnel in Indonesia.

The increase in population is not accompanied by adequate health services, which can increase mortality rates due to the scarcity of physicians in developing nations. However, the enormous influx of foreign medical personnel into Indonesia must also be taken seriously. Meeting the needs of foreign workers needs to be followed by regulations that benefit the country and protect workers.<sup>11</sup> The government has regulated the proliferation of foreign workers in Indonesia, particularly in the health sector, as a means of legal protection and supervision. This regulation is outlined in Law No. 17 of 2023 concerning Health and Regulation of the Minister of Health No. 6 of 2023 concerning the Utilization of Citizen Health Workers from Foreign Countries in Indonesia. However, the implementing and regional regulations have not provided justice in several parts. In substance, the newly passed Health Law stipulates that foreign medical personnel can only practice in Indonesia if they have a particular specialty and have completed a competency evaluation. Second, Indonesia needs a more precise and detailed evaluation system to assess the quality of foreign doctors' practices. This can compromise the integrity of health services. Third, professional organizations, including the Indonesian Doctors Association, continue to play an essential role in monitoring the quality of practicing doctors, including foreign doctors, and ensuring they comply with the required quality standards. Fourth, some may think that the licensing system implemented is not strict enough, meaning that the system does not provide quality that meets Indonesian health standards for foreign doctors practicing in Indonesia.

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10 Asianto Nugroho and others., Implementation of Worker Rights Protection for Government Employees with Employment Agreements, *Proceedings of the International Conference on Environmental and Energy Policy (ICEEP 2021)*, Vol.583 No.8, 2021, page.102–4

11 J. Eaton and others., The Negative Impact of Global Health Worker Migration, and How It Can Be Addressed, *Public Health*, Vol.225, 2023, page.254–57

The Ministry of Health allows foreign doctors to practice in Indonesia through the National Medical Practice Permit. Worse, it is not only related to job opportunities but also to patient safety. Unfortunately, the implementation of the use of foreign workers is hampered by domestic regulations. Part of the problem is that there are no implementing regulations for granting permits to use foreign workers; another part is that the new foreign worker permit regulations have not yet been adjusted after the enactment of the Job Creation Law. However, overall, the technical regulations for using labor in Indonesia are remarkably lacking in regulating the qualifications of foreign workers, especially foreign medical workers. Moreover, from another perspective, Law No. 17 of 2023 and Regulation of the Minister of Health No. 6 of 2023 contain the rules governing foreign medical personnel. However, these regulations do not yet include criminal or civil sanctions that foreign medical personnel may receive if they violate Indonesian regulations. Or they are committing malpractice that leads to patient injury in Indonesia. Thus, increasing of foreign workers, in general, not only health workers, can jeopardize public safety if they are not competent in their respective fields.<sup>12</sup> Meanwhile, in reality, there are numerous instances of foreign medical personnel entering and practicing in Indonesia illegally, even though Law No. 36 of 2009 concerning health has been in effect since then. The current applicable regulation is Law No. 17 of 2023. The ongoing discovery of violations and misconduct by foreign medical personnel indirectly demonstrates the ineffectiveness of Indonesia's regulations regarding using foreign medical personnel.

In the employment sector, granting permits for foreign workers means that the state has provided work opportunities for foreigners, which could impact domestic labor absorption. However, if quality is not guaranteed, opening up job opportunities for foreign workers will only be detrimental to public services. Thus, foreign worker permit regulations must be understood as the main gateway to maintaining justice for society, both in terms of prioritization of getting a job and the issue of standardization of medical personnel. Ultimately, these issues will lead to how justice can be achieved in cases of granting foreign worker permits. Because, through a foreign worker permit, various worker criteria must be met. When permission is granted, levies are regulated and paid to the region, benefiting local revenue. This income is distributed back to society through government programs and public services. Without clear licensing and supervision regulations, it is impossible to create fairness in the entry of foreign workers. Therefore, the government must respond wisely with appropriate strategies and supervision, effective laws, policies, and legal documents to protect people who use the services of foreign medical personnel.

Referring to the Job Creation Law, Law No. 1 of 2022 concerning Financial Relations Between the Central Government and Regional Governments, Government Regulation No. 35 of 2023 concerning General Provisions for

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12 Pardeep Kumar and others., Workplace Violence and Bullying Faced by Health Care Personnel at the Emergency Department of a Tertiary Care Hospital of Karachi, Pakistan: A Cross-Sectional Study, *Journal of Emergency Nursing*, Vol.49 No.5, 2023, page.785–95

Regional Taxes and Regional Levies, and Government Regulation No. 34 of 2021 concerning the Use of Foreign Workers, the imposition of levies on foreign doctors has still not yet reached a clear conclusion. It can be concluded that the discourse regarding retribution for foreign doctors has not yet received a clear picture. Problems arise when foreign doctors who work in Indonesia are not affiliated with the company, which raises a big question about who will pay the levy obligations on foreign doctors who work as foreign workers. Worse, not all regions in Indonesia have regional regulations that regulate permits for foreign workers, let alone ones specifically for foreign health workers. As a result, it has significantly hindered the government's ability to improve health services. The absence of regional regulations governing permits is also unfavorable for local income because foreign workers will pay a fee to the local government to obtain a work permit.

While, although health resources are the primary factor in enhancing the efficacy of health services in Indonesia, Singapore guarantees both the quality and quantity of health services in its country, which sets it apart from Indonesia. This is why some individuals, including Indonesians, choose to seek treatment in Singapore. Furthermore, the assessment considers the availability of more advanced and contemporary hospital or health service facilities and technology, the capacity to deliver superior patient service, the availability of services in a consolidated package for greater convenience, and the method and system of patient management. Implementing the package system will lead to a faster reduction in costs. Singapore permits the entry of foreign physicians verified by Singaporean medical institutions. Additionally, to maintain the standard of qualifications, foreign physicians admitted to Singapore must initially work in a public hospital. After six months, a supervisor will conduct an evaluation, and following multiple evaluations, the foreign physician may receive permission to join a private hospital.<sup>13</sup> Successful international examples demonstrate that foreign experience in health care reform can provide valuable insights into mechanisms for enhancing medical services, guaranteeing equal access, and improving primary health care. Appropriate management and policies significantly influence professional development and competence, influencing personnel satisfaction and the quality of medical services. This ultimately influences the quality of health services provided.<sup>14</sup>

In Indonesia, although various policies and initiatives have been implemented to address worker issues<sup>15</sup>, the shortage of health workers is a significant factor

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13 Hans Kluge and others., Strengthening Global Health Security by Embedding the International Health Regulations Requirements into National Health Systems', *BMJ Global Health*, Vol.3 Issue.1, 2018

14 Annisa Purwatiningsih, Asih Widi Lestari, and Lisa Duhaniyati., Implications Of Healthcare System In Singapore And Malaysia As Interesting Lessons Towards Primary Service Innovation For Indonesia, *Asketik*, Vol.6 No.1, 2022, page.16–28

15 Yaya Kareng, Ong Argo Victoria, S Yulianingsih., Legal Protection Against Indonesian Workers (TKI) In Abroad, *International Journal of Law Reconstruction*, 5th, 2019

contributing to the low quality of health in the country.<sup>16</sup> The quality of medical personnel must be resolved at the level of the rules for granting permits to use foreign workers. Thus, this research is essential. As a comparison, a previous study conducted by Perdana shows that utilizing foreign medical personnel to enhance healthcare services requires meticulous evaluation of numerous variables. The research's findings underscore the significance of surmounting cultural barriers in the workplace, a principle that can also be applied to integrating foreign medical personnel.<sup>17</sup> In the interim, Wildan Sani's research determined that the Job Creation Law's facilitation of the employment of foreign workers will be detrimental to potential health workers who aspire to work. Indonesian health workers, such as medical personnel, clinical psychologists, nurses, staff, midwives, pharmaceutical workers, public health personnel, environmental health personnel, nutrition workers, physical health personnel, medical, technical personnel, biomedical engineering personnel, traditional health workers, and other health workers, face unemployment as a result of foreign health worker's marginalization of these foreign workers.<sup>18</sup>

Afterward, Alex Jingwei conducted an investigation. He and Vivien F.Y. Tang discovered that healthcare integration is still in the early stages of development in both research and practice. They demonstrate integration not only laterally but also vertically, transcending public-private boundaries. Almost all integration models emphasize the central function of primary health care. Still, these models need some help with their ability, how they work, and how people see them, which means that more scientific and policy research is needed. This shows how intense and persistent closed healthcare practices are.<sup>19</sup> Furthermore, then Sein's research indicates that improving public health necessitates a substantial investment in developing an efficient and effective health system, which cannot be accomplished independently. Well-articulated policies and strategies, bolstered by effective governance, will fortify the health systems of numerous regional countries.<sup>20</sup> In the interim, this investigation will focus on using foreign medical personnel to improve the quality of health services in Indonesia.

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16 Evgeniy V. Kirichenko, Elman Said-Mokhmadovich Akhyadov, and Oksana Sertakova., The Impact of Health Care Reforms on Improving the Quality of Medical Services: International Experience, *Revista Gestão Inovação e Tecnologias*, Vol.11 No.4, 2021, page.2915–25

17 E. J. Mills and others., The Financial Cost of Doctors Emigrating from Sub-Saharan Africa: Human Capital Analysis, *BMJ*, Vol.343. No.3, 2011

18 Dyas Bintang Perdana and S. Sultoni., Budaya Terlambat Guru Dan Tenaga Kependidikan Sebagai Faktor Penghambat Pemberian Kompensasi Jabatan Di Sekolah, *Jurnal Administrasi Pendidikan*, Vol.18 No.1, 2021, page.11–16.

19 Wildan Sani., The Utilization of Foreign Workers in Hospital in Terms of Law No. 11 Of 2020 Concerning Job Creation Law (Omnibus Law), *Proceedings of the 1st International Conference on Law, Social Science, Economics, and Education, ICLSSEE 2021, March 6th 2021, Jakarta, Indonesia* (EAI, 2021)

20 Alex Jingwei He and Vivien F.Y. Tang., Integration of Health Services for the Elderly in Asia: A Scoping Review of Hong Kong, Singapore, Malaysia, Indonesia, *Health Policy*, Vol.125 No.3, 2021, page.351–62

Ultimately, foreign medical personnel are required to address this nation's challenges, including a shortage of medical personnel. However, the current issue lies in the not yet comprehensive and ineffectiveness of the regulations governing foreign medical personnel in Indonesia, especially the regulations on granting foreign worker permits. At least this article will discuss foreign worker permit regulations in Indonesia. This rule will impact the qualifications of foreign workers, the quality of health services, and the ability to obtain regional levies. Thus, it is necessary to restructure fair regulations to guarantee citizens' interests in health services and through a fair employment regulation scheme.

## **2. Research Methods**

This research used normative juridical legal research, or what is often known as doctrinal legal research, to compile this legal research. This research examines library materials or secondary data consisting of primary legal materials, secondary legal materials, and tertiary legal materials. This research analyzes and examines legislation on health and the utilization of foreign medical personnel in Indonesia and Singapore. The approaches used are statutory and conceptual. The regulations are the Health Law and the rules regarding permits for employing foreign workers. The legislative approach is carried out by reviewing related laws and regulations. At the same time, the legal concepts of licensing and the theory of justice are utilized in legal research that offers an analytical perspective for resolving research problems by examining the values enshrined in enacting a regulation about the utilized concept or reviewing the conceptual aspects underpinning it.<sup>21</sup>

## **3. Results and Discussion**

### **3.1. Legal Challenges in Regulating the Use of Foreign Medical Personnel to Provide Qualified on Public Services**

Health services in Indonesia are not suitable due to the lack of professional medical personnel, causing people to prefer to seek treatment abroad. Every year, Indonesia loses approximately 170 trillion in foreign exchange because nearly 2 million Indonesians go abroad to get health services, whether to Singapore, Malaysia, Japan, the United States, or other countries. This is caused by several supporting factors, including the strong perception that other countries such as Malaysia, Singapore, Japan, and the United States have superior health services to those in Indonesia. However, in reality, health equipment facilities and medical personnel are sufficient in Indonesia, and these countries are similar; the difference is in human resources and the lack of professional health personnel in Indonesia. Foreign doctors are included in the skilled workforce, namely those with qualities, expertise, and skills exceeding ordinary workers. These qualities are specific to a particular field and are acquired through education and work experience in the field of study.<sup>22</sup> In

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21 Than Sein., *Health Systems of East Asia and Pacific States, Reference Module in Biomedical Sciences*, Elsevier, 2023

22 Maddy Thompson and Margaret Walton-Roberts., *International Nurse Migration from India and the Philippines: The Challenge of Meeting the Sustainable Development Goals in*



specific fields, Indonesia still lacks specialist doctors, so the influx of doctors from abroad is expected to increase the number of specialist doctors in Indonesia.

Based on The Ministry of Health data, the condition of medical personnel needs to catch up. This is justified by the data from the World Bank, that confirms that Indonesia has the second-lowest number of physicians per 1.000 population, with 0,4 doctors per 1.000. Consequently, Indonesia has only four doctors to serve its 10.000 population. This figure is significantly lower than that of Singapore, which has two physicians per 1.000 residents. On a scale of 1–100 points, Singapore has the highest quality health services and conditions globally, with a score of 86,89 points. This data indicates that Indonesia's medical resources are still inadequate. In addition, the Indonesian Medical Council reports that as of 2022, 254.894 registered Indonesian doctors possess registration certificates. This number includes 161.779 general practitioners, 48.167 specialist doctors from 36 specialties, and 39.953 dentists. Based on the data, Indonesia currently lacks approximately 85.000 physicians to provide comprehensive care to the entire population.<sup>23</sup> Therefore, the Indonesian government is trying to improve the standard of health services by bringing foreign doctors to Indonesia.<sup>24</sup>

Generally, based on the Ministry of Manpower data, in 2023, 73,011 foreign workers were working in Indonesia. The following details are as follows: 37.6 thousand foreign workers are in the service sector, 33.4 thousand people are in the service sector, and 1.9 thousand other people are in agriculture and maritime. China dominated the workforce in Indonesia. In 2023, the foreign worker is consisted of 33 thousand people, followed by Japan with 7.7 thousand foreign workers and South Korea with 7.5 thousand foreign workers. Furthermore, India is in fourth place with 3.7 thousand foreign workers, followed by Malaysia, which is in fifth place with 2.6 thousand people.<sup>25</sup> Still, the health sector is still experiencing a labor shortage. For example, there is an issue of a lack of health workers in the capital city (Ibu Kota Nusantara/ IKN). Even though there are already regulations such as Law No. 3 of 2022 concerning the National Capital jo. Law No. 21 of 2023 and Government Regulation No. 12 of 2023 concerning Providing Business Licensing, Ease of Business, and Investment Facilities for Business Actors in the National Capital of the Archipelago. The main problem with using foreign workers is granting work permits.

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Training, Orderly Migration and Healthcare Worker Retention, *Journal of Ethnic and Migration Studies*, Vol.45 No.14, 2019, page.2583–99

23 Abdul Kadir Jaelani, Reza Octavia Kusumaningtyas, and Asron Orsantinutsakul., The Model of Mining Environment Restoration Regulation Based on Sustainable Development Goals, *Legality: Jurnal Ilmiah Hukum*, Vol.30 No.1, 2022, page.131–46

24 Abdul Kadir Jaelani and others., Indonesia Carbon Tax Policy: A Key Role in Sustainable Development Goals, 2024, page. 020040.

25 Ferry Efendi, Gading Ekapuja Aurizki, and others., The Paradox of Surplus and Shortage: A Policy Analysis of Nursing Labor Markets in Indonesia, *Journal of Multidisciplinary Healthcare*, Vol.15, 2022, page.627–39

The problem of foreign employment in Indonesia can be found in at least two ways: firstly, there are no regional regulations governing permits for the use of foreign workers, which has an impact on the collection of fees—and second, technical rules to screen the quality of foreign workers entering Indonesia. Regarding the quality of foreign workers, especially in the health sector, Article 248 of Law No. 17 of 2023 and its implementing regulations—Minister of Health Regulation No. 6 of 2023 concerning the Utilization of Foreign National Health Workers has provided provisions. Foreign health workers who can practice in Indonesia only apply to certain positions, namely specialist and subspecialist medical personnel. So, it can be said that foreign doctors in the professional workforce can only carry out their practice in Indonesia for specialist doctors and/or subspecialist doctors. In addition, foreign medical workers can work to a specific level of competency, subject to an evaluation. The Council, the Collegium, and the minister overseeing government affairs in education demonstrate the minister's competency. The competency evaluation in question includes an assessment of practical ability and administrative completeness, which provides for competency equalization and competency testing.<sup>26</sup>

The Minister of Health Regulation No. 6 of 2023 specifies that foreign medical personnel may be employed in the following areas: health services, education in the health sector, health training in disaster emergency response conditions, research and development of health science and technology, and other health sector activities (Article 7).<sup>27</sup> Moreover, Article 46 of Law No. 13 of 2003 forbids foreign laborers from holding positions involving personnel or specific roles governed by ministerial decree. According to the provisions of Minister of Health Regulation Number 6 of 2023, Article 14, and Companion Personnel, the use of foreign medical personnel in this activity area requires the assignment of Indonesian citizen health workers as companions, in line with the health service activities they provide. The accompanying personnel must possess qualifications similar to or equivalent to those of the foreign medical personnel. Nevertheless, the health sector and health promotion encounter challenges in collaborating with other sectors to influence public policy and establish the social, economic, environmental, and cultural conditions essential for equitable health.<sup>28</sup> Therefore, foreign workers cannot fill all medical workforce positions. Foreign workers are also supervised and evaluated.

However, considering the implications of the General Agreement of Trade in Services, the current regulations in Indonesia tend to create conditions that make it easier for foreign doctors to enter and leave Indonesia. One objective

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26 Robert Marten, Johanna Hanefeld, and Richard D. Smith., How States Engage in and Exercise Power in Global Health: Indonesian and Japanese Engagement in the Conceptualization of Sustainable Development Goal 3, *Social Science & Medicine*, Vol.321 No.115455, 2023

27 Endeh Suhartini and others., Indonesian Migrant Workers After Job Creation Law: A Challenging Problem for Protection Welfare, *BESTUUR*, Vol.11 No.2, 2023, page.271

28 Eka Rismawati and Abdul Kadir Jaelani., The Regulation of Foreign Workers as Technology and Knowledge Transfer, *Journal of Sustainable Development and Regulatory Issues*, Vol.1 No.2, 2023, page.64–74.

of establishing Law No. 17 of 2023 is facilitating the licensing process for foreign medical personnel wishing to work in Indonesia. The aim is to increase the quantity and distribution of health workers in Indonesia. The problem will impact licensing and monitoring the quality of medical personnel. Therefore, Indonesia regulates in Article 43, paragraphs (1) and (2) that employers are required to obtain approval for a permit to employ foreign workers in the form of a Plan for the Use of Foreign Workers that has been authorized by the minister or appointed official. Article 249 mandates that a Practice Permit (SIP) and Registration Certificate (STR) are required for foreign nationals who have graduated overseas and participate in the adaptation to health service facilities, as well as specialist and subspecialist medical personnel and health workers of specific skill levels. Furthermore, foreign nationals who have completed the competency evaluation procedure and will be practicing in Indonesia, health workers at a particular level of competency, specialist, and subspecialist medical personnel, and foreign nationals who have graduated overseas must possess STR and SIP. The validity of STR and SIP spans two years, with a potential extension of two years.<sup>29</sup>

Howsoever, it seems that the problem of the quality of foreign workers will be resolved. Likewise, accompanying issues include community anxiety about losing work opportunities due to competition for positions with foreign workers. Minister of Health Regulation No. 6 of 2023, which maintains the use of foreign national health personnel. This regulation thoroughly elucidates the terms and conditions for entering foreign medical personnel into Indonesia. However, this rule only stops at the ministerial level. This means these regulations apply specifically to the Ministry of Health institution only and cannot influence the policies or regulations of other related institutions, such as the Ministry of Manpower. Foreign workers also need a Permit to Employ Foreign Workers (IMTA), a written permit given by the Minister who handles government affairs in employment or an appointed official to users of foreign workers. The rules for qualifying medical personnel become weak when dealing with other institutions. You can even lose direction when there are no IMTA regulations in the area. Please note that in Indonesia, the regional autonomy system enables foreign health or medical personnel to enter with the approval of the local regional government. Multiple entry points permit foreign medical personnel to enter Indonesia. However, numerous doors will enable foreign medical personnel to engage in various activities with the visa they possess, such as perpetrating violations or malpractice. This is due to the issue of qualifying foreign workers in the region to determine whether or not foreign workers can obtain work permits.<sup>30</sup>

Apart from that, the Minister's regulation also does not make it explicit state the sanctions for foreign medical personnel who conduct violations or engage in malpractice, in case the foreign medical workers break this administrative rule,

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29 Sidik Budiono and John Tampil Purba., Factors of Foreign Direct Investment Flows to Indonesia in the Era of COVID-19 Pandemic, *Heliyon*, Vol.9 No.4, 2023

30 Lego Karjoko and others., The Urgency of Restorative Justice on Medical Dispute Resolution in Indonesia, *AL-IHKAM: Jurnal Hukum & Pranata Sosial*, Vol.16 No.2, 2021, page.362–92.

they will only face administrative punishments. These can include a written warning, a suggestion that their temporary STR be revoked, a suggestion that their approval be revoked, a suggestion that they stop working as a medical worker, a revocation of their SIP, and a recommendation that the relevant minister take action by the immigration administration. Personnel are required to conduct government affairs by human rights and law.<sup>31</sup> Because, from the main regulation, Law No. 17 of 2023, it does not regulate the criminal provisions for foreign medical personnel who practice medicine without a registration certificate or practice permit from the Indonesian government. In reality, the regulation does not govern the criminal or civil penalties that foreign medical personnel may incur for malpractice that leads to patient injury in Indonesia. The criminal provisions that pertain to medical personnel who commit malpractice are generally addressed.<sup>32</sup>

The existence of these diverse accreditation routes will impact the weak supervision of foreign medical personnel entering Indonesia. The Ministry of Health's failure to provide definitive and explicit data about the number, type, qualifications, and competence of foreign medical personnel in Indonesia clearly demonstrates this. Consequently, the optimal supervision and guidance of foreign health or medical personnel is impossible. To comprehend and consistently monitor the costs and benefits of dynamic national and international health labor markets, it is imperative to expand the availability of data on health worker migration, including their potential return and reintegration into the health systems of their countries of origin.<sup>33</sup> The findings suggest that the potential benefits of migration do not occur spontaneously; instead, they necessitate supportive policies and programs at home, such as programs that target diaspora engagement or favorable reintegration policies.<sup>34</sup>

More deeply discussing foreign worker permits. Granting permits significantly impacts the distribution of benefits to the community. This is because permission to use foreign workers provides retribution to the region, which is included in the Regional Original Income. This scheme is used to equalize the distribution of benefits from employing foreign workers. The reason is that using foreign workers has sociological and economic consequences. Foreign workers can help with the shortage of workers and can be a means of transferring or sharing knowledge with domestic workers. However, jobs that

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31 Corinne Packer, Vivien Runnels, and Ronald Labonté., Does the Migration of Health Workers Bring Benefits to the Countries They Leave Behind?, *The International Migration of Health Workers*, London, Palgrave Macmillan UK, 2010, page.44–61

32 Elfrida Ratnawati and others., The Cabotage Principle on Law Enforcement for Licensing Ship Operations in Indonesian Waters, *Journal of Human Rights, Culture and Legal System*, Vol.3 No.3, 2023, page.678–705

33 Lila Sax dos Santos Gomes and others., The Impact of International Health Worker Migration and Recruitment on Health Systems in Source Countries: Stakeholder Perspectives from Colombia, Indonesia, and Jordan, *The International Journal of Health Planning and Management*, Vol.39 No.3, 2024, page.653–70.

34 Ferry Efendi, Lisa McKenna, and others., Experiences of Healthcare Worker Returnees in Their Home Countries: A Scoping Review, *Journal of Multidisciplinary Healthcare*, Vol.14 2021, page.2217–27

should be filled by domestic medical personnel will disappear. This means that through programs and policies at the regional level funded by local revenue, it is hoped that the quality of human resources can be improved. Foreign workers also must have a Taxpayer Identification Number when becoming the subject of domestic tax. The individual becomes subject to foreign tax if the foreign worker is in Indonesia for no more than 183 days in 12 months. In this case, the withholding tax on foreign workers' income is regulated in Article 21 or Article 26 of Law No. 26 of 2008, namely 20% of the gross amount by the party obliged to pay it.<sup>35</sup> The results of these levies and taxes should ideally be returned to the community as a consequence of the taking of domestic jobs by foreign workers. The form of benefit return will have a severe impact if provided for a program to improve the quality of domestic medical personnel. Thus, the use of foreign workers can be reduced gradually.

Unfortunately, the challenge of establishing technical rules and regional regulations regarding permits for qualified foreign workers has not been resolved by all districts/cities in Indonesia. Suppose a levy on foreign workers is also applied to the presence of foreign doctors as the new center of government. In that case, this will boost regional government income through regional levies. This will create a sense of justice for the local community because foreign doctors will increase the number of specialist doctors in Indonesia and efforts to share knowledge with domestic doctors and embody the principle of benefit. The presence of foreign workers can positively contribute to regional income through levies received, which in turn is expected to significantly influence Indonesia's economic growth and the welfare of Indonesian society in the future.

### **3.2. Strict Conditions for Granting Work Permits for Foreign Medical Personnel in Singapore**

The WHO has acknowledged Singapore as one of the ASEAN countries with the most exceptional health service system. In practice, Singapore's health system is structured. The government and the private sector both regulate it. The Monetary Authority of Singapore, Central Provident Fund, and Ministry of Health are the government entities involved. The majority of the health system in Singapore is regulated by the Ministry, which is responsible for the following: the allocation of human resources and health infrastructure, the promotion of health education, the monitoring of the quality and accessibility of health services, the prevention and control of disease.<sup>36</sup> In the interim, the Monetary Authority of Singapore and the Central Provident Fund regulate Singapore's social security costs. In stark contrast, health services in Indonesia still

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35 Franklin A. Shaffer and others., International Nurse Recruitment Beyond the COVID-19 Pandemic, *Nurse Leader*, Vol.20 No.2, 2022, page.161–67.

36 Marilyn Wise and others., The Role of Health Impact Assessment in Promoting Population Health and Health Equity, *Health Promotion Journal of Australia*, Vol.20 No.3, 2009, page.172–79

structurally overlap due to the involvement of numerous health organizations and the ongoing lack of optimal parameters in the Indonesian service system.<sup>37</sup>

In 2021, the number of registered medical practitioners in Singapore increased to 16,044 from 15,430 in 2020. There were 776 new registered medical practitioners, 456 of whom were local graduates from our three medical schools. A total of 373 new specialists were added to the specialist list. At the end of 2021, there were 6,431 registered specialist doctors, which exceeded 40% of the total number of doctors in Singapore for the first time. The number of foreign-trained Singapore Citizens and Permanent Residents who returned to Singapore and registered with the SMC was 217 people in 2021. This number increased slightly from the 209 people who returned in 2020. In 2021, 156 overseas-trained medical practitioners were awarded registration conditional 143 were non-specialists (92%), and 13 were specialists (8%). Of the 156 medical practitioners, 42 are Singaporean citizens (27%) and 11 are permanent residents (7%) and 70 new overseas-trained medical practitioners registered in the provisional registration. They are accepted for postgraduate training/research in Singapore, consisting of 65 Clinical Fellows, 2 Clinical Observers and 3 Clinical Research Fellows.<sup>38</sup>

To meet the needs of health services in Singapore, it is assisted by professional medical personnel and driven by the high quality of expertise of its medical personnel. However, it is still necessary to consider the possibility that Singapore still needs professional medical personnel from other countries. In this case, Singapore has regulations regarding using foreign medical personnel in Singapore. Singapore has a ratio of doctors per 1,000 people, reaching 1.9 doctors or 190:100,000. Singapore is a country that does not have rural areas, so all doctors work in the urban sector. The division of existing doctors is also independent of urban or rural, but the division is based on the public and private sectors. The country's small geography also means that the distribution of doctors in Singapore is relatively good. Meanwhile, in Indonesia, according to the Indonesian Medical Council, as in 2022, Indonesia only has 54.1 thousand domestic specialist doctors with an Indonesian population of more than 270 million people.<sup>39</sup>

Singaporean citizens and foreign medical personnel from other countries primarily make up the health profession in Singapore. Foreign national health professionals are an essential component of Singapore's healthcare system. Over the past five years, Singapore has granted permanent resident status to approximately 1.200 foreign health workers, who have entered and worked there annually on average. This figure includes over six out of ten nurses, with

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37 Suparto Suparto and others., Administrative Discretion in Indonesia & Netherland Administrative Court: Authorities and Regulations, *Journal of Human Rights, Culture and Legal System*, Vol.4 No.1, 2024, page.75–100.

38 H.-C. Stoeklé, J.-F. Deleuze, and G. Vogt., Society, Law, Morality and Bioethics: A Systemic Point of View, *Ethics, Medicine and Public Health*, Vol.10, 2019, page.22–26

39 Bambang Ali Kusumo and others., COVID-19 Vaccination Service: Legal Issues and Health Workers Protection in Indonesia, *International Journal of Health Sciences*, Vol.6 No.1, 2022, page.50–60

the remaining individuals being physicians, related specialists, and other health workers.<sup>40</sup> To become a doctor in Singapore, one must meet the following criteria have a medical degree from a university or medical school recognized by the Singapore Medical Council, a postgraduate qualification recognized by the Singapore Medical Council, have been selected to work in a Singapore Medical Council-approved healthcare institution, possess an experience certificate or equivalent as proof of satisfactory completion of a horsemanship, PGY1, or apprenticeship year, be currently in active clinical practice, have passed the national licensing examination as required in the state where the primary medical degree was awarded, have been certified as being in good standing by a foreign regulatory body or equivalent medical board, and meet the English language requirements. They will go to a training and a residency program.<sup>41</sup>

One of the conditions that must be satisfied to become a foreign worker in Singapore is the possession of a work permit, as outlined in the Singapore Foreign Worker Law (Chapter 91A). The necessary criteria for obtaining a work permit include applying for one to the employer or on behalf of an authorized employer in a format determined by the superior. The information, statements, and personal documents in this job application letter substantiate the supervisor's requirements. Subsequently, the supervisor may grant the foreign worker a training work permit. At any moment, the supervisor may request the revocation and cancellation of the work permit that has been issued. Several rights are granted to every foreign worker who works in Singapore, including a fixed salary and monthly allowances that do not include variable allowances, overtime payments, bonuses, commissions, additional annual wages, fees from sitting on the Board, stock options, or dividends, payments in the form of in-kind, all forms of cost reimbursement, including costs incurred by an employee during their work, productivity incentive payments, contributions paid by the employer to a pension fund or savings fund, including contributions made on behalf of the employee, and gratuities paid to foreign workers upon dismissal, reduction, or retirement. In addition, foreign laborers in Singapore are entitled to health insurance, monthly levies, and security guarantees.<sup>42</sup> Singapore, in contrast, does not deduct income tax from earned salaries. People regard the Singapore government's system for employing foreign medical personnel as straightforward and efficient. Furthermore, the Singapore government does not discriminate against non-Singapore citizens during the process.<sup>43</sup>

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40 Joshua Munywoki and others., Tracking Health Sector Priority Setting Processes and Outcomes for Human Resources for Health, Five-Years after Political Devolution: A County-Level Case Study in Kenya, *International Journal for Equity in Health*, Vol.19 No.1, 2020, page.165

41 Mary Joy Garcia-Dia., The Ethical Recruitment of Internationally Educated Nurses, *Nurse Leader*, Vol.20 No.1, 2022, page.43–47

42 Hanzhang Zhan and others., Towards a Sustainable Built Environment Industry in Singapore: Drivers, Barriers, and Strategies in the Adoption of Smart Facilities Management, *Journal of Cleaner Production*, Vol.425, 2023

43 Wee Tong Ng., COVID-19: Protection of Workers at the Workplace in Singapore, *Safety and Health at Work*, Vol.12 No.1, 2021, page.133–35

Singapore is a developed nation that attracts international talent due to its exceptional benefits. Medical expenses in Singapore have steadily increased over the years. As stipulated by the Ministry of Manpower, employers are accountable for procuring health insurance for each foreign laborer they employ.<sup>44</sup> Specific requirements dictate the type of insurance required and the coverage it provides. While most employers offer health insurance for their foreign employees, all foreign workers must comprehend the operation of the health insurance system. Employers must obtain and maintain health insurance coverage for work permit holders that is at least S\$15,000 annually. Nevertheless, employers are not required to purchase insurance for dependents if their health insurance plans meet the minimum coverage requirement of S\$15,000 per year. Furthermore, the health insurance bundle must encompass the entire work permit's validity duration. The plan should cover medical expenses related to inpatient care, daily operations, and treatment for non-work-related conditions. Suppose each sub-limit is equivalent to the minimum claimable amount of \$15,000 per year. In that case, health insurance plans with sub-limits on aspects such as daily surgery, inpatient care, or per disability may still satisfy MOM requirements. Furthermore, to fulfill the Ministry of Manpower requirements, a minimum total coverage of S\$15,000 for both categories collectively is necessary in the absence of sub-limits for daily surgery and inpatient care. This implies that foreign laborers can claim up to \$15,000 for inpatient treatment, provided they do not incur daily operating expenses during the policy year.<sup>45</sup>

There are three primary categories of institutions in Singapore's healthcare system. Firstly, acute hospitals were specialized institutions (excluding psychiatric hospitals) that offered acute with inpatient facilities. Secondly, a mental hospital is a facility that is dedicated to the diagnosis and treatment of mental conditions and disorders. Lastly, community hospitals offer medical services to individuals who require follow-up care for a brief period, typically after discharge from an acute hospital. Advanced technological advancements have also been implemented in Singapore's health services. The Electronic Registration Certificate (e-RC) and Electronic Practice Certificate (e-PC), collectively referred to as e-Cert, were introduced by the Secretariat of the Health Professions Board in partnership with the Ministry of Health in the Professional Registration System for 11 Professional Councils and Healthcare Accreditation Councils in Singapore.<sup>46</sup>

The party also partners with the Ministry of Health and GovTech to introduce a digital Practice Certificate on the Singpass telephone application. The two digital

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44 A.P. Bochkovskyi and N.Yu. Sapozhnikova., Development of System of Automated Protection of Employees from COVID-19 and Other Infections at the Enterprise, *Journal of Achievements in Materials and Manufacturing Engineering*, Vol.112 No.2, 2022, page.70–85.

45 Franklin A. Shaffer and others., International Nurse Recruitment Beyond the COVID-19 Pandemic, *Nurse Leader*, Vol.20 No.2, 2022, page.161–67.

46 William Burdick and Ibadat Dhillon., Ensuring Quality of Health Workforce Education and Practice: Strengthening Roles of Accreditation and Regulatory Systems, *Human Resources for Health*, Vol.18 No.1, 2020, page.71



initiatives offer healthcare professionals, and consumers registered in a secure electronic network system increased convenience and access. All registered healthcare personnel with a valid PC can now access and view their PC digitally on the Singpass app in the "My Cards" section, in addition to their digital NRIC and digital Driving License, shortly after the launch of e-Certs. Greater convenience is provided to over 75,000 registered health professionals with valid PCs through collaboration with the Ministry of Health and GovTech. The Singpass application on their smartphone allows them to access their PC information directly. However, the Singpass app will not display the digital PCs of healthcare professionals who are suspended, unregistered, or have a PC whose validity period has expired.<sup>47</sup>

The government encourages Singaporean and non-Singaporean enterprises to establish private hospitals within the country in the context of health service providers. Foreign ownership and hospital management are not subject to any constraints in the private healthcare sector. In other words, the city-state does not prohibit or impose maximal limits on the amount of bets that non-Singaporeans may hold in private healthcare facilities. The Ministry of Health is responsible for making licensing decisions, and the Regulations on Private Hospitals and Medical Clinics (last amended in 2002) delineate the licensing procedures. The Licensing, Inspection & Audit Branch of the Ministry of Health must receive an application with the necessary license fee two months before the facility's commencement of operations. Institutions with multiple branches are required to submit distinct applications for individual licenses. It is essential to mention that these private facilities are not permitted to incorporate the terms "Singapore" or "National" into their names unless they "fulfill or intend to fulfill a national or equivalent role." Permit extensions are permissible; however, they must be executed two months before the permit's expiration date. Failure to comply with this requirement will result in a penalty for late renewal. Late fees may be assessed at 20% of the license renewal fee or S\$100, whichever is greater. The authorities did not mandate that these entities obtain insurance coverage for their liabilities to expedite the establishment of private health institutions.

Foreign dentists are permitted to operate in Singapore provided that they satisfy the following criteria: (1) possess a primary degree from a university listed in the Second Schedule of the Medical Registration Act or an equivalent degree (subject to approval by the Singapore Dental Council (SDC)); (2) have been selected to work in a dental facility approved by the SDC; (3) pass the national licensing examination at the institution where the degree was earned; and (4) pass a qualifying examination administered by the SDC for individuals with an alternative degree. Because of this licensing policy, the number of health professionals in the city-state has increased. For instance, 2017, 1,583 of 9,521 medical practitioners were non-Singaporeans employed in the public

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47 Foster Mensah Kofi Agbornu, Isaac Mensah Boafo, and Adelaide Maria Ansah Ofei., Effects of Workplace Violence on the Quality of Care by Nurses: A Study of the Volta Region of Ghana, *International Journal of Africa Nursing Sciences*, Vol.16, 2022

healthcare sector. The Ministry of Health has increased the enrollment of Singaporean medical students and provided professional licenses to foreign health workers. The ministry has provided subsidies for the final three years of medical school to encourage Singaporean medical students who have completed their studies abroad to return and serve in the country.<sup>48</sup>

In January 2018, the Ministry of Health proposed replacing the current Private Hospitals and Medical Clinics Act (PHMCA) with the Health Services Act (HCSA) to ensure effective rules and regulations govern the country's healthcare system. Established in 1980 and last amended in 1999, the PHMCA aims to "ensure the regulation, licensing, and inspection of private hospitals, medical clinics, clinical laboratories, and health care institutions." According to the HCSA, the Ministry of Health must oversee "the licensing and quality of hospital services and other medical institutions."<sup>49</sup> In 2018, the Ministry of Health revealed that the government aimed to "improve the governance of healthcare providers, strengthen regulatory clarity, ensure continuity of service and accountability, and better regulate health services" by "safeguarding patient safety and welfare." The private medical practice operates in a constantly changing environment. The following schedule shows that the hope is to pass this policy in three stages in December 2019. It is classified under this law. All PHMCA-licensed hospitals and nursing homes will be subject to the HCSA during Phase II, which will commence in June 2020. This new law will apply to new services, including telemedicine, during Phase III, which will begin in December 2020.

### **3.3. Restructuring of Righteous Regulations for Issuing Foreign Worker Permits and Its Significance in Increasing Regional Retribution Collection and Quality of Health Services**

Foreign workers cannot work in an area without issuing a permit. Permits are crucial to the supervision of foreign workers and are the basis for evaluating the quality and specifications of the foreign workers used. This is because permission is given when making regulations; generally, it does not prohibit an action, provided the applicable provisions carry it out. Permits can be limitative, meaning they can be rejected if they do not meet the conditions. Granting a foreign worker permit is the basis for payment of levies by the permit holder. The result will be regional original income. In the concept of regional autonomy, regional original income is an indicator of the success of a region in managing its region. In this case, regions must carry out various programs to increase local revenue, including obtaining levies from permits to use foreign workers.<sup>50</sup> A region with original regional income that increases yearly indicates that it can its household independently without depending on the central government. On

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48 Sheila Kusuma Wardani Amnesti and others., Higher Education with Disabilities Policy: Ensuring Equality Inclusive Education in Indonesia, Singapore and United States, *Journal of Human Rights, Culture and Legal System*, Vol.3 No.3, 2023, page.412–40

49 Helena Legido-Quigley and others., Are High-Performing Health Systems Resilient against the COVID-19 Epidemic?, *The Lancet*, Vol.395 No.10227, 2020, page.848–50

50 Sallie Yea., The Art of Not Being Caught: Temporal Strategies for Disciplining Unfree Labour in Singapore's Contract Migration, *Geoforum*, Vol.78, 2017, page.179–88.

the other hand, if an increase in original regional income impacts the regional economy not developing or worsening, then it cannot be said that an increase in original regional income is a successful implementation of regional autonomy. This is a form of self-support in financial matters.<sup>51</sup> However, success in managing regional finances is not only limited to collecting funds but is also influenced by organizational management and capacity development, which is programmed and sustainable; efforts are made for internal and external organizational capacity elements to increase organizational capacity.<sup>52</sup> According to Horton (2003), for an institution to manage finances optimally, it needs to have strategies and tools, strengthen the capacity of its apparatus, strengthen institutions/reforms, and strengthen systems by making regulations.<sup>53</sup>

In a country of law and welfare, withdrawing regional levies, especially for foreign workers, requires legal certainty as a basis for such withdrawals. Because the regions grant permits to foreign workers, each region must make regional regulations regarding fees for the use of foreign workers within its territory's scope. The consequence is that if a region does not have regional regulations regarding levies for the use of foreign workers, the authorized officials cannot collect these levies, which will affect the potential regional income that should be obtained. Regarding levies on foreign workers, several regions in Indonesia already have regional regulations. However, after the ratification of Law No. 6 of 2023 concerning Job Creation, regional governments must re-harmonize regional regulations relating to the Job Creation Law.<sup>54</sup>

Therefore, previously existing Regional Regulations can no longer be implemented without prior adjustments by the Job Creation Law. The existence of regional levies that run smoothly and are aligned with the regulations that regulate them will have an impact on increasing regional income massively, so that if linked nationally, it will have a strong influence on national monetary and fiscal matters, so it will help the government in realizing other national strategy projects. On the other hand, the government needs to create a sense of justice for domestic doctors by improving their quality in order to compete with foreign doctors. Another problem that could arise due to the relaxation of the permits of foreign doctors in Indonesia is related to the length of service of foreign doctors. If a foreign doctor has worked in Indonesia for a long time, setting up their practice is not impossible. This will affect the level of employment of doctors in the country.<sup>55</sup>

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51 K. J. Davey., *Pembiayaan Pemerintah Daerah Di Indonesia (Terjemahan Amanullah)*, Jakarta, UI-Press, 1988.

52 D.Berliner and others., Building Capacity, Building Rights? State Capacity and Labor Rights in Developing Countries, *World Development*, Vol.72, 2015, page.127–139

53 Arthur Sakamoto and Anita Koo., American versus East Asian Norms and Labor Market Institutions Affecting Socioeconomic Inequality, *Research in Social Stratification and Mobility*, Vol.90, 2024

54 Loan Thi-Hong Van and others., From Foreign Direct Investment to Environmental Regulations: Does a Feedback Effect Ever Exist?, *Heliyon*, Vol.10 No.8, 2024

55 *Ibid.*

Comparing to Singapura, the influx of senior researchers and migrants from a variety of countries serves as evidence that Singapore has strategically recruited foreign medical personnel to meet its healthcare requirements and improve its biomedical research capabilities. The country's initiatives are consistent with the World Health Organization's Global Code of Practice on International Recruitment of Health Workers, which underscores the significance of training and retaining local health workers to mitigate international migration pressures.<sup>56</sup> The recruitment of foreign medical professionals not only strengthens Singapore's health workforce but also facilitates the advancement of biomedical research by attracting renowned scientists and establishing research institutes.<sup>57</sup> In its regulations, Singapore even requires graduates and certifications recognized by the country to be able to work. This differs from Indonesia, which has looser regulations and tends to pursue the quantity of workers rather than quality. This regulation should be adopted in Indonesia to change the conditions for issuing permits to use foreign workers.<sup>58</sup>

Restructuring regulations is not as pragmatic as creating regional regulations in each autonomous region. However, the government should create a national strategy to implement national politics. This strategy is divided into short, medium, and long term. Thus, national strategy determines how national politics is implemented to achieve the goals and objectives set by national politics. Political policies for national purposes must have specific goals for national and international life. Apart from that, the national strategy can influence international life and achieve several goals, including pursuing prosperity in every aspect of the lives of the Indonesian people. Apart from that, the government's strategic policies are intended to promote justice, advance the country's progress, and create an economic system that can generate justice by looking at the mechanisms in the implementation process.<sup>59</sup>

One form of national strategic politics in the economic sector is the implementation of levies on foreign workers. Even though regulations provide a legal umbrella for levies on foreign workers, there is still confusion and deadlock due to the lack of comprehensive regulations. One of the things that has become a polemic regarding the levy on foreign workers is the reform of regulations regarding the arrival of specialist doctors. Unfortunately, these

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56 Susann Schäfer and Sebastian Henn., Recruiting and Integrating International High-Skilled Migrants – Towards a Typology of Firms in Rural Regions in Germany, *Journal of Rural Studies*, Vol.103, 2023

57 I Gede Adhi Mulyawarman, Putu Gede Arya Sumerta Yasa, and Lambertton Cait., Blocking Dangerous Content in Electronic Communications Networks: Evidence from Netherlands, United States and Singapore, *Journal of Human Rights, Culture and Legal System*, Vol.4 No.1, 2024, page.237–62

58 Joanna SE Chan and others., Health-Seeking Behaviour of Foreign Workers in Singapore: Insights from Emergency Department Visits, *Annals of the Academy of Medicine, Singapore*, Vol.50 No.4, 2021, page.315–24

59 Zhilin Wu, Haiming Long, and Hui Song., The Impact of Infrastructure Investment on Multidimensional Poverty. Evidence from Chinese Rural Migrant Workers, *Economic Systems*, 2024.

regulations have not reached the ideal level, especially when the foreign worker employed is a doctor. The length of time foreign doctors can practice in Indonesia will also be limited. Foreign doctors are only permitted to work in Indonesia for a maximum of four years, with an initial limit of two years and the possibility of one extension, so it does not exceed four years. This aims to enable them to contribute to transferring knowledge, ways of working, experience, and medical practices to local medical personnel. However, suppose foreign doctors do not work directly under a company affiliate. In that case, the question arises: who will pay levies for foreign doctors in areas without specific regulations.<sup>60</sup>

For example, in the case of IKN, the policy regarding foreign workers is contained in Government Regulation No. 12 of 2023. Article 22 explains that business actors carrying out business activities in IKN areas can employ foreign workers for specific positions following the provisions of statutory regulations. Foreign workers can be approved plans to use foreign workers for ten years, which can be extended. Then, Article 23 regulates that foreign workers can be given residence permits for a maximum of ten years by the provisions of statutory regulations. If the residence permit is about to expire, the period can be extended according to the work agreement between the business actor and the foreign worker. The period of permission granted is quite long. However, the rules for labor specifications and permits have not even been refined to follow the regulations of IKN as the capital or the laws of the district where IKN is located. Until there are regulations underlying the collection of levies, levies cannot be collected. Imagine the loss to the country because the levy rate for foreign workers is USD 100 or the equivalent of IDR 1.5 million per month and applies to each foreign worker per position. This rate must be adjusted if one foreign worker has more than one position in one company or office. Every foreign worker who extends their work permit must pay a fee of USD 100 every month, bringing the total to USD 1,200 per year, with the nominal depending on the current rupiah exchange rate.<sup>61</sup>

Therefore, a regulation that reflects the principles of justice is needed to ensure that the resulting legal product is fair for all parties. Talking about the formation and results of fair legal products will be related to the concept or understanding of justice, which cannot be separated from the words "fair" and "prosperous." This shows the desire of the Indonesian people to implement justice in every aspect of their lives while maintaining the welfare of their people. Prosperity is closely related to prosperity. According to Article 1 Paragraph (4) of the Minister of Manpower Regulation No. 8 of 2021 concerning Implementing Regulations of Government Regulation Number 34 of 2021 concerning the Use of Foreign Workers, it is stated that the plan to use foreign workers (RPTKA) is a plan to use foreign workers for positions and specific period, also known as "RPTKA ratification." Ratification of RPTKA is approval to employ foreign workers

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60 Rochelle Ball and Nicola Piper., Globalisation and Regulation of Citizenship—Filipino Migrant Workers in Japan, *Political Geography*, Vol.21 No.8, 2002, page.1013–34

61 Wikan Dinar Sunindyo and others., Should We Build a Metaverse for the New Capital of Indonesia?, *Heliyon*, Vol.10 No.7, 2024.

authorized by the minister in the field of workforce or an appointed official. This is implemented so that the central and regional governments foster and supervise the use of foreign workers to create a good investment climate and many job opportunities for Indonesian workers.<sup>62</sup>

The principles of good governance must be applied to run a justice-based government, where every citizen must have the same opportunity to obtain prosperity. Therefore, after the Plan for the Use of Foreign Workers was approved, Government Regulation Number 34 of 2021 concerning the Use of Foreign Workers and Law No. 11 of 2020 concerning Job Creation, especially Article 47 amended the Regional Regulations or Regional Head Regulations, which regulate the payment of regional levies, which comes from the Compensation Fund for the Use of Foreign Workers. Therefore, there are rigorous mechanisms and procedures for hiring workers. It is important to remember that companies or employers who use foreign workers must make a Plan for the Use of Foreign Workers (RPTKA) before they can work in Indonesia.<sup>63</sup>

Establishing a levy for permits to use foreign workers as a regional levy provides an opportunity for regions to increase sources of income by funding government tasks and developing the skills and expertise of local workers. In the Regional Revenue and Expenditure Budget, funding for IMTA extension is allocated to achieve prosperity. Foreign worker levies can be used optimally to carry out development activities in the region and also play a role in regulating the community's economy so that it can develop, which will ultimately result in increased community welfare so that justice-based foreign labor levies are achieved, where these regulations provide welfare and benefits for the region and local communities. Revenue from these levies can help countries achieve fiscal goals and drive other national strategic programs, influencing monetary policy.<sup>64</sup>

Therefore, there needs to be ideals in supporting the national strategy through levies on foreign workers, especially for foreign medical personnel. The policy of establishing regional regulations that regulate regional levies as a legal basis for regional governments in determining the payment of Compensation Funds for the use of foreign medical personnel is expected to become a source of income for regions, in line with the increasing number of foreign workers spread across various regions in Indonesia. Regional government efforts to explore potential sources of regional income are a form of regional government responsibility to accelerate economic recovery in the region so that it will impact improving the

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62 Sulistiyo K Ardiyono and Arianto A Patunru., 'Firms' Responses to Foreign Demand Shocks: Evidence from Indonesia after the Global Financial Crisis, *Economic Modelling*, Vol.128, 2023.

63 Eko Arief Yogama, Daniel J Gray, and Matthew D Rablen., Nudging for Prompt Tax Penalty Payment: Evidence from a Field Experiment in Indonesia, *Journal of Economic Behavior & Organization*, Vol.224, 2024, page.548–79

64 Erwiza Erman., Workers and Democracy: The Indonesian Labor Movement, 1949–1957, by John Ingleson, *Bijdragen Tot de Taal-, Land- En Volkenkunde / Journal of the Humanities & Social Sciences of Southeast Asia*, Vol.180 No.1, 2024, page.108–10.

national economy. Thus, the foreign doctor levy policy has a positive effect on national infrastructure development and can also create jobs for local communities to achieve the lofty ideals of monetary policy.<sup>65</sup>

Thus, fair regulations must be prioritized rather than simply making regulations to search for foreign medical personnel. The law must comprehensively explain the imposed sanctions to ensure the Indonesian people receive legal protection when employing foreign medical personnel.<sup>66</sup> Consequently, the regulations must adhere to the eight principles outlined in the morality of law. First, there is a requirement for a correlation between the regulations issued and their daily application. Lon Fuller said the law leads to a social order, which needs moral values and two beings that do so by respecting individuality and the right to self-guidance. Thus, the rules for the use of foreign workers in health law, especially in the health sector, must be drawn up at least by paying attention to, firstly, the policy of prohibiting foreign doctors from opening practices independently because it will conflict with the concept of retribution and the use of foreign workers, as well as to avoid malpractice. Increasingly widespread. Second, foreign doctors who are employed should join the affiliated company because the affiliated company will pay the levy for foreign workers. Medical personnel must also comply with the provisions governing the working time limit, namely a maximum of four years, and must share knowledge.<sup>67</sup>

Third, requirements for equalizing graduate standards and/or medical personnel certification per the state's indicators. Fourth, registration, certification, and monitoring of foreign workers with centralized data and digitally done. Indonesian law is characterized by a complex system of administration and authority, which will inevitably complicate the law's enforcement and oversight. Each of these authorities receives the exact latitude and authority, leading to various perspectives on preserving the rule of law. Derivative regulations, designed to regulate more specific matters, may lead to misinterpretation of the law, thereby creating legal uncertainty. The overlap between Indonesian structures and the variations in authorities at each level (internal hospital, regional, and central) arise from applying each regulation in line with established legal principles.<sup>68</sup> Thus, Indonesia should emulate legislative procedures, looking at the way Singapore simplifies its bureaucracy based on a digital employment bureaucratic system.<sup>69</sup>

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65 Ali Maksum., Indonesian Post-Migrant Workers: A Challenging Problem for Human Security, *Social Sciences & Humanities Open*, Vol.4 No.1, 2021

66 Willem Thorbecke., Sectoral Evidence on Indonesian Economic Performance after the Pandemic, *Asia and the Global Economy*, Vol.3 No.2, 2023

67 Robert Genthner and Krisztina Kis-Katos., Foreign Investment Regulation and Firm Productivity: Granular Evidence from Indonesia, *Journal of Comparative Economics*, Vol.50 No.3, 2022, page.668–87

68 Vanessa W Lim and others., Cross-Sectional Study of Prevalence and Risk Factors, and a Cost-Effectiveness Evaluation of Screening and Preventive Treatment Strategies for Latent Tuberculosis among Migrants in Singapore, *BMJ Open*, Vol.11 No.7, 2021

69 Ratnawati, Elfrida, Laurensius Arliman S, Meta Indah Budhianti, Vience Ratna Multi Wijaya, and Aida Abdul Razak., The Cabotage Principle on Law Enforcement for Licensing Ship

Fifth, the rules for using foreign medical personnel must also regulate the distribution of foreign medical personnel services in 3T (underdeveloped, frontier, and uttermost) areas. The Regulation should incorporate several substances that facilitate the implementation of health system transformation, including the equitable distribution of health service facilities, health workers, medical personnel, and health facilities for the convenience of the community through the construction of service facilities. This is also intended to prevent the proliferation of foreign medical personnel in Indonesia, exclusive to major cities. Fifth, regulation must contain sanctions that can be given to foreign medical personnel who practice illegally and commit malpractice. Law No. 17 of 2023 or its regulations have yet to regulate this matter clearly and in detail. Health regulations must contain articles protecting health and medical personnel, especially foreign ones. Sixth, bilateral work contracts agreements are agreements, usually between countries or regions, that outline the recruitment and employment of foreign workers. This often involves multiple ministries, including the Ministry of Trade or Employment, the Ministry of Foreign Affairs, the Ministry of Finance, and the Ministry of Health.<sup>70</sup> Furthermore, the provisions above are used to issue permits to obtain retributions. This is also followed by synchronization between various implementing rules and regional regulations. Thus, these regulations should not be merely a reference or boundary line for derivative regulations, which generate numerous legal regulations and cause uncertainty and ambiguity in Indonesian law.

#### **4. Conclusion**

Based on the analysis and discussion, the first conclusion is that the regulation of the use of foreign workers in Indonesia does not reflect the value of justice. This is due to the lack of comprehensive regulations regarding the use of foreign workers relating to the qualifications of foreign workers as a condition for issuing permits, which can endanger patient safety. In addition, the issuance of permits to use foreign workers is hampered because several regions do not yet have implementing regulations that impact regional levies and community welfare. Second, setting up mechanisms for utilizing foreign workers in Singapore is relatively easy and successful with strict digital-based permit requirements. Third, Indonesia needs to adopt a foreign labor policy system with strict requirements for issuing permits but is accessible in terms of bureaucracy. Revision of the Health Law, implementing regulations, and drafting regional regulations need to be carried out with an orientation towards balancing the entry of qualified foreign workers into the employment market with the issuance of permits related to the acquisition of significant levies.

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Operations in Indonesian Waters, *Journal of Human Rights, Culture and Legal System*, Vol.3 No.3, 2023

<sup>70</sup> Miguel Angel Esquivias and Samuel Kharis Harianto., Does Competition and Foreign Investment Spur Industrial Efficiency?: Firm-Level Evidence from Indonesia, *Heliyon*, Vol.6 No.8, 2020



## References

### Books:

Packer, Corinne, Vivien Runnels, and Ronald Labonté., 2010, *Does the Migration of Health Workers Bring Benefits to the Countries They Leave Behind?*, The International Migration of Health Workers, Palgrave Macmillan UK, London;

K. J. Davey., 1988, *Pembiayaan Pemerintah Daerah Di Indonesia (Terjemahan Amanullah)*, UI-Press, Jakarta;

### Journals:

Agbornu, Foster Mensah Kofi, Isaac Mensah Boafo, and Adelaide Maria Ansah Ofei., Effects of Workplace Violence on the Quality of Care by Nurses: A Study of the Volta Region of Ghana, *International Journal of Africa Nursing Sciences*, Vol.16, 2022;

Annisa Purwatiningsih, Asih Widi Lestari, and Lisa Dhuhaniyati., Implications Of Healthcare System In Singapore And Malaysia As Interesting Lessons Towards Primary Service Innovation For Indonesia, *Asketik*, Vol.6 No.1, 2022;

Ardiyono, Sulistiyo K, and Arianto A Patunru., 'Firms' Responses to Foreign Demand Shocks: Evidence from Indonesia after the Global Financial Crisis', *Economic Modelling*, Vol.128, 2023;

Artamonova, G. V., A. N. Popsuiko, Yu. V. Danilchenko, and E. A. Batsina., The Personnel Policy in Health Care Institutions in the Light of Tasks of Provision of Medical Care Quality and Medical Activity Safety, *Problems of Social Hygiene Public Health and History of Medicine*, Vol.31 No.2, 2023;

Ball, Rochelle, and Nicola Piper., Globalisation and Regulation of Citizenship—Filipino Migrant Workers in Japan, *Political Geography*, Vol.21 No.8 2002;

Berliner, D., A. Greenleaf, M. Lake, and J. Noveck., Building Capacity, Building Rights? State Capacity and Labor Rights in Developing Countries, *World Development*, Vol.72, 2015;

Bochkovskyi, A.P., and N.Yu. Sapozhnikova., Development of System of Automated Protection of Employees from COVID-19 and Other Infections at the Enterprise, *Journal of Achievements in Materials and Manufacturing Engineering*, Vol.112 No.2, 2022;

Budiono, Sidik, and John Tampil Purba., Factors of Foreign Direct Investment Flows to Indonesia in the Era of COVID-19 Pandemic, *Heliyon*, Vol.9 No.4, 2023;

Burdick, William, and Ibadat Dhillon., Ensuring Quality of Health Workforce Education and Practice: Strengthening Roles of Accreditation and Regulatory Systems, *Human Resources for Health*, Vol.18 No.1, 2020;

Chan, Joanna SE, Dennis WJ Chia, Ying Hao, Sherman WQ Lian, Mui Teng Chua, and Marcus EH Ong, 'Health-Seeking Behaviour of Foreign

- Workers in Singapore: Insights from Emergency Department Visits', *Annals of the Academy of Medicine, Singapore*, 50.4 (2021), 315–24 <<https://doi.org/10.47102/annals-acadmedsg.2020484>>
- Davey, K. J., *Pembiayaan Pemerintah Daerah Di Indonesia (Terjemahan Amanullah)* (Jakarta: UI-Press, 1988)
- Eaton, J., F. Baingana, M. Abdulaziz, T. Obindo, D. Skuse, and R. Jenkins., The Negative Impact of Global Health Worker Migration, and How It Can Be Addressed, *Public Health*, Vol.225, 2023;
- Efendi, Ferry, Gading Ekapuja Aurizki, Ilmiawan Auwalin, Anna Kurniati, Lita Dwi Astari, Ias Tarina Puspitasari, and others., The Paradox of Surplus and Shortage: A Policy Analysis of Nursing Labor Markets in Indonesia, *Journal of Multidisciplinary Healthcare*, Vol.15, 2022;
- Efendi, Ferry, Lisa McKenna, Sonia Reisenhofer, Anna Kurniati, and Eka Mishbhahatul Marah Has., Experiences of Healthcare Worker Returnees in Their Home Countries: A Scoping Review, *Journal of Multidisciplinary Healthcare*, Vol.14 2021;
- Erman, Erwiza., Workers and Democracy: The Indonesian Labor Movement, 1949–1957, by John Ingleson, *Bijdragen Tot de Taal-, Land- En Volkenkunde / Journal of the Humanities and Social Sciences of Southeast Asia*, Vol.180 No.1, 2024;
- Esquivias, Miguel Angel, and Samuel Kharis Harianto., Does Competition and Foreign Investment Spur Industrial Efficiency?: Firm-Level Evidence from Indonesia, *Heliyon*, Vol.6 No.8, 2020;
- Garcia-Dia, Mary Joy., The Ethical Recruitment of Internationally Educated Nurses, *Nurse Leader*, Vol.20 No.1, 2022;
- Genthner, Robert, and Krisztina Kis-Katos., Foreign Investment Regulation and Firm Productivity: Granular Evidence from Indonesia, *Journal of Comparative Economics*, Vol.50 No.3, 2022;
- Gulden, Christian, Philipp Macho, Ines Reinecke, Cosima Strantz, Hans-Ulrich Prokosch, and Romina Blasini., RecruIT: A Cloud-Native Clinical Trial Recruitment Support System Based on Health Level 7 Fast Healthcare Interoperability Resources (HL7 FHIR) and the Observational Medical Outcomes Partnership Common Data Model (OMOP CDM), *Computers in Biology and Medicine*, Vol.174, 2024;
- He, Alex Jingwei, and Vivien F.Y. Tang., Integration of Health Services for the Elderly in Asia: A Scoping Review of Hong Kong, Singapore, Malaysia, Indonesia, *Health Policy*, Vol.125 No.3, 2021;
- Jaelani, Abdul Kadir, Resti Dian Luthviati, Muhammad Jihadul Hayat, Reza Octavia Kusumaningtyas, and Fitri Nur Aini., Indonesia Carbon Tax Policy: A Key Role in Sustainable Development Goals, *AIP Conference Proceedings*, Vol.3048 Issue.1, 2024;
- Kadir Jaelani, Abdul, Reza Octavia Kusumaningtyas, and Asron Orsantinutsakul.,

- The Model of Mining Environment Restoration Regulation Based on Sustainable Development Goals, *Legality: Jurnal Ilmiah Hukum*, Vol.30 No.1 2022;
- Kantachote, Krittiya., Micromanagement of Foreign Domestic Workers in Singapore: The Influence of State Regulations and Laws, *Heliyon*, Vol.9 No.7, 2023;
- Kirichenko, Evgeniy V., Elman Said-Mokhmadovich Akhyadov, and Oksana Sertakova, 'The Impact of Health Care Reforms on Improving the Quality of Medical Services: International Experience, *Revista Gestão Inovação e Tecnologias*, Vol.11 No.4 2021;
- Kluge, Hans, Jose Maria Martín-Moreno, Nedret Emiroglu, Guenael Rodier, Edward Kelley, Melitta Vujnovic, and others., Strengthening Global Health Security by Embedding the International Health Regulations Requirements into National Health Systems, *BMJ Global Health*, Vol.3 Issue.1, 2018;
- Kumar, Pardeep, Uzma Rahim Khan, Salman Muhammad Soomar, Zohra Jetha, and Tazeen Saeed Ali., Workplace Violence and Bullying Faced by Health Care Personnel at the Emergency Department of a Tertiary Care Hospital of Karachi, Pakistan: A Cross-Sectional Study, *Journal of Emergency Nursing*, Vol.49 No.5, 2023;
- Kusumo, Bambang Ali, Muhamad Mahrus Setia Wijaksana, Fatma Ulfatun Najicha, Ariesty Fujiastuti, and Abdul Kadir Jaelani., COVID-19 Vaccination Service: Legal Issues and Health Workers Protection in Indonesia, *International Journal of Health Sciences*, Vol.6 No.1, 2022;
- Lal, Arush, Ngozi A Erondu, David L Heymann, Githinji Gitahi, and Robert Yates., Fragmented Health Systems in COVID-19: Rectifying the Misalignment between Global Health Security and Universal Health Coverage, *The Lancet*, Vol.397 No.10268, 2021;
- Legido-Quigley, Helena, Nima Asgari, Yik Ying Teo, Gabriel M Leung, Hitoshi Oshitani, Keiji Fukuda, and others., Are High-Performing Health Systems Resilient against the COVID-19 Epidemic?, *The Lancet*, Vol.395 No.10227, 2020;
- Lim, Vanessa W, Hwee Lin Wee, Phoebe Lee, Yijun Lin, Yi Roe Tan, Mei Xuan Tan, and others., Cross-Sectional Study of Prevalence and Risk Factors, and a Cost-Effectiveness Evaluation of Screening and Preventive Treatment Strategies for Latent Tuberculosis among Migrants in Singapore, *BMJ Open*, Vol.11 No.7, 2021;
- Maksum, Ali., Indonesian Post-Migrant Workers: A Challenging Problem for Human Security, *Social Sciences & Humanities Open*, Vol.4 No.1, 2021;
- Marten, Robert, Johanna Hanefeld, and Richard D. Smith., How States Engage in and Exercise Power in Global Health: Indonesian and Japanese Engagement in the Conceptualization of Sustainable Development Goal

- 3, *Social Science & Medicine*, Vol.321, 2023;
- McBride, Bronwyn, Sarah Hawkes, and Kent Buse., Soft Power and Global Health: The Sustainable Development Goals (SDGs) Era Health Agendas of the G7, G20 and BRICS, *BMC Public Health*, Vol.19 No.1, 2019;
- Mills, E. J., S. Kanters, A. Hagopian, N. Bansback, J. Nachega, M. Alberton, and others., The Financial Cost of Doctors Emigrating from Sub-Saharan Africa: Human Capital Analysis, *BMJ*, Vol.343. No.3, 2011;
- Mulyawarman, I Gede Adhi, Putu Gede Arya Sumerta Yasa, and Lamberton Cait., Blocking Dangerous Content in Electronic Communications Networks: Evidence from Netherlands, United States and Singapore, *Journal of Human Rights, Culture and Legal System*, Vol.4 No.1, 2024;
- Munywoki, Joshua, Nancy Kagwanja, Jane Chuma, Jacinta Nzinga, Edwine Barasa, and Benjamin Tsofa., Tracking Health Sector Priority Setting Processes and Outcomes for Human Resources for Health, Five-Years after Political Devolution: A County-Level Case Study in Kenya, *International Journal for Equity in Health*, Vol.19 No.1. 2020;
- Ng, Wee Tong., COVID-19: Protection of Workers at the Workplace in Singapore, *Safety and Health at Work*, Vol.12 No.1, 2021;
- Nugroho, Asianto, Reza Octavia Kusumaningtyas, Ravi Danendra, Gusti Faza Aliya, and Fatma Ulfatun Najicha., Implementation of Worker Rights Protection for Government Employees with Employment Agreements, *Proceedings of the International Conference on Environmental and Energy Policy (ICEEP 2021)*, Vol.583 No.8, 2021;
- Perdana, Dyas Bintang, and S. Sultoni., Budaya Terlambat Guru Dan Tenaga Kependidikan Sebagai Faktor Penghambat Pemberian Kompensasi Jabatan Di Sekolah, *Jurnal Administrasi Pendidikan*, Vol.18 No.1, 2021;
- Ratnawati, Elfrida, Laurensius Arliman S, Meta Indah Budhianti, Vience Ratna Multi Wijaya, and Aida Abdul Razak., The Cabotage Principle on Law Enforcement for Licensing Ship Operations in Indonesian Waters, *Journal of Human Rights, Culture and Legal System*, Vol.3 No.3, 2023;
- Rismawati, Eka, and Abdul Kadir Jaelani., The Regulation of Foreign Workers as Technology and Knowledge Transfer, *Journal of Sustainable Development and Regulatory Issues*, Vol.1 No.2, 2023;
- Sakamoto, Arthur, and Anita Koo., American versus East Asian Norms and Labor Market Institutions Affecting Socioeconomic Inequality, *Research in Social Stratification and Mobility*, Vol.90, 2024;
- Saluja, Saurabh, Niclas Rudolfson, Benjamin Ballard Massenburg, John G Meara, and Mark G Shrimme., The Impact of Physician Migration on Mortality in Low and Middle-Income Countries: An Economic Modelling Study, *BMJ Global Health*, Vol.5 No.1, 2020;
- Sani, Wildan., 2021, *The Utilization of Foreign Workers in Hospital in Terms of Law No. 11 Of 2020 Concerning Job Creation Law (Omnibus Law)*,

- Proceedings of the 1st International Conference on Law, Social Science, Economics, and Education, ICLSSEE , March 6th 2021, EAI, Salatiga;
- Sax dos Santos Gomes, Lila, Ferry Efendi, Nuzulul Kusuma Putri, Mery Bolivar-Vargas, Rami Saadeh, Pedro A. Villarreal, and others., The Impact of International Health Worker Migration and Recruitment on Health Systems in Source Countries: Stakeholder Perspectives from Colombia, Indonesia, and Jordan, *The International Journal of Health Planning and Management*, Vol.39 No.3, 2024;
- Schäfer, Susann, and Sebastian Henn., Recruiting and Integrating International High-Skilled Migrants – Towards a Typology of Firms in Rural Regions in Germany, *Journal of Rural Studies*, Vol.103, 2023;
- Sein, Than., Health Systems of East Asia and Pacific States, *Reference Module in Biomedical Sciences*, Elsevier, 2023;
- Shaffer, Franklin A., Mukul Bakhshi, Kaley Cook, and Thomas D. Álvarez., International Nurse Recruitment Beyond the COVID-19 Pandemic, *Nurse Leader*, Vol.20 No.2, 2022;
- Stoeklé, H.-C., J.-F. Deleuze, and G. Vogt., Society, Law, Morality and Bioethics: A Systemic Point of View, *Ethics, Medicine and Public Health*, Vol.10, 2019;
- Suhartini, Endeh, Mimi Fitriana Zaini, Bambang Widjojanto, and Ani Yumarni., Indonesian Migrant Workers After Job Creation Law: A Challenging Problem for Protection Welfare, *BESTUUR*, Vol.11 No.2, 2023;
- Sunindyo, Wikan Danar, Alfrojems, Doddi Septian, Rini Rachmawati, and Dana Indra Sensuse., Should We Build a Metaverse for the New Capital of Indonesia?, *Heliyon*, Vol.10 No.7, 2024;
- Suparto, Suparto, Fadhel Arjuna Adinda, Azamat Esirgapovich Esanov, and Zamira Esanova Normurotovna., Administrative Discretion in Indonesia & Netherland Administrative Court: Authorities and Regulations, *Journal of Human Rights, Culture and Legal System*, Vol.4 No.1, 2024;
- Tancred, Tara, Michelle Falkenbach, Joanna Raven, and Margaret Caffrey., How Can Intersectoral Collaboration and Action Help Improve the Education, Recruitment, and Retention of the Health and Care Workforce? A Scoping Review, *The International Journal of Health Planning and Management*, Vol.39 No.3, 2024;
- The Lancet., Health as a Foundation for Society, *The Lancet*, Vol.397 No.10268, 2021
- Thompson, Maddy, and Margaret Walton-Roberts., International Nurse Migration from India and the Philippines: The Challenge of Meeting the Sustainable Development Goals in Training, Orderly Migration and Healthcare Worker Retention, *Journal of Ethnic and Migration Studies*, Vol.45 No.14, 2019;
- Thorbecke, Willem., Sectoral Evidence on Indonesian Economic Performance

- after the Pandemic, *Asia and the Global Economy*, Vol.3 No.2, 2023;
- Van, Loan Thi-Hong, Duc Hong Vo, Nam Thanh Vu, Chi Minh Ho, and Thang Cong Nguyen., From Foreign Direct Investment to Environmental Regulations: Does a Feedback Effect Ever Exist?, *Heliyon*, Vol.10 No.8, 2024;
- Wardani Amnesti, Sheila Kusuma, Jundiani Jundiani, Siti Zulaichah, Mohd Shahid Mohd Noh, and Lailatul Fitriyah., Higher Education with Disabilities Policy: Ensuring Equality Inclusive Education in Indonesia, Singapore and United States, *Journal of Human Rights, Culture and Legal System*, Vol.3 No.3, 2023;
- Wise, Marilyn, Patrick Harris, Ben Harris-Roxas, and Elizabeth Harris., The Role of Health Impact Assessment in Promoting Population Health and Health Equity, *Health Promotion Journal of Australia*, Vol.20 No.3, 2009;
- Wu, Zhilin, Haiming Long, and Hui Song., The Impact of Infrastructure Investment on Multidimensional Poverty. Evidence from Chinese Rural Migrant Workers, *Economic Systems*, 2024;
- Yaya Kareng, Ong Argo Victoria, S Yulianingsih, Legal Protection Against Indonesian Workers (TKI) In Abroad., *International Journal of Law Reconstruction*, 5th, 2019;
- Yea, Sallie., The Art of Not Being Caught: Temporal Strategies for Disciplining Unfree Labour in Singapore's Contract Migration, *Geoforum*, Vol.78, 2017;
- Yogama, Eko Arief, Daniel J Gray, and Matthew D Rablen., Nudging for Prompt Tax Penalty Payment: Evidence from a Field Experiment in Indonesia, *Journal of Economic Behavior & Organization*, Vol.224, 2024;
- Zhan, Hanzhang, Bon-Gang Hwang, Hanjing Zhu, and Si Hui Pearlyn Ang, Towards a Sustainable Built Environment Industry in Singapore: Drivers, Barriers, and Strategies in the Adoption of Smart Facilities Management, *Journal of Cleaner Production*, Vol.425, 2023.