

**LITERATURE STUDY ON DETERMINANTS OF SUCCESSFUL
IMPLEMENTATION OF NON-COMMUNICABLE DISEASE
CONTROL POLICIES**

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Abstract

Non-Communicable Diseases (NCDs) are a major health challenge that imposes a huge burden on the health system and the national economy. This literature study aims to identify the determinants that affect the successful implementation of non-communicable disease control policies. The study was conducted by examining 25 national and international articles published in the period 2015–2025 using the Systematic Literature Review approach with the narrative synthesis method. The results of the analysis show that there are seven main determinants that affect the successful implementation of NCD control policies, namely: (1) effective and consistent policy communication, (2) availability and capacity of human and financial resources, (3) implementing disposition that includes motivation and commitment, (4) bureaucratic structure and cross-sector coordination, (5) social support and community participation, (6) socio-economic and cultural conditions, and (7) the use of information technology and health data. Synergy between these determinants is the key to realizing policy effectiveness. Successful implementation is highly dependent on the government's ability to strengthen implementation capacity, improve cross-sector coordination, and leverage digital health information systems to support data-driven decision-making. This study confirms that the success of NCD control depends not only on medical interventions, but also on policy governance that is collaborative, adaptive, and oriented towards community participation.

Keyword: Non-Communicable Diseases 1; Policy Implementation 2; Determinants of Success 3; Public Health 4, Cross-Sector Coordination 5.

INTRODUCTION

Non-Communicable Diseases (NCDs) are the leading cause of death in the world and are a major challenge for the global health system, including in Indonesia. According to the World Health Organization (WHO), around 74% of global deaths are caused by NCDs such as cardiovascular disease, diabetes mellitus, cancer, and chronic respiratory diseases[1]. In Indonesia, data from the Ministry of Health shows that NCDs are responsible for 73% of national deaths, with the largest proportion coming from heart disease (35%), cancer (12%), chronic respiratory diseases (6%), and diabetes (6%)[2]. This condition indicates that NCDs have become a top priority in public health policies because they have a major impact on the quality of life and productivity of the population.

Various control policies have been implemented by the government, including the Healthy Living Community Movement (GERMAS), the Non-Communicable Disease Integrated Development Post Program (Posbindu PTM), and the NCD risk factor early detection program. However, the effectiveness of its implementation still faces many structural and operational challenges, including limited human resources, facilities and infrastructure, and low community participation [3][4]. In addition, technical factors such as limited internet access in remote areas are also obstacles in reporting digital-based health data[5]. These

obstacles have an impact on the implementation of early detection activities, health education, and policy monitoring that are not optimal in various regions.

Globally, the successful implementation of NCD control policies is greatly influenced by governance factors and institutional capacity. Countries with strong cross-sectoral coordination, high political support, and an integrated evaluation system tend to show better results in reducing the burden of NCDs[6][7]. In Indonesia itself, the implementation of the PTM control program still shows variation between regions, depending on the availability of resources and support from local stakeholders[8].

Based on these problems, this literature study aims to identify various factors or determinants that affect the successful implementation of NCD control policies in Indonesia. By synthesizing the results of national and international research, it is hoped that this study can provide a comprehensive understanding of the factors that determine policy success and become an input for decision-makers in strengthening the implementation of the NCD control program effectively and sustainably.

RESEARCH METHODS

This research was conducted through literature search and article selection based on relevance to the research objectives. The search uses the keywords "Non-Communicable Diseases", "Policy Implementation", "Determinants of Success", and "Non-Communicable Disease Control", along with their English equivalents. The search process lasted for five days, from October 8 to 13, 2025, via Google Scholar, PubMed, ScienceDirect, and OpenAlex. From the selection results, 25 articles were obtained that met the inclusion criteria and were relevant to the research topic. The list of articles is displayed in the Table.

RESEARCH RESULTS

No	Title	Author/ Year	Article Type	Method	Research Results
1.	Identifying key factors for successful formulation and implementation of healthcare policies on non-communicable diseases: a multinational analysis	Abdulfatai Olamilekan Babaita, Yasmin Jahan, Ryota Nakamura, and Michiko Moriyama (2024)[6]	Original Research	Descriptive qualitative research with the Three I's Framework approach	Six main themes were identified as key factors for the success of NCD policies: (1) environmental policy and social determinants of health, (2) multi-stakeholder involvement, (3) collaboration between ministries, (4) independent evidence-based institutions, (5) integration of health data, and (6) primary health service systems. There is a shift from individual approaches to social determinants, with cross-sectoral and institutional cooperation as the key to success.
2.	The Effectiveness of the Non-Communicable Disease Prevention and	Adies Putri Pissesa, Agus Sya'bani Arlan, Irza	Empirical research	This study uses a descriptive qualitative approach	The results of the study show that the P2PTM Program in Pondok Babaris Village is considered quite effective. Effective aspects include planning, implementation, results, impact, socialization, assessment,

No	Title	Author/ Year	Article Type	Method	Research Results
	Control Program (P2Ptm) in Pondok Babaris Village, North Hulu Sungai Regency	Setiawan (2024)[12]			and community support. However, some aspects are still lacking, such as program goals, user satisfaction, meeting needs, and facilities and infrastructure. Supporting factors include good planning, effective socialization, and community support, while the inhibiting factors are low user satisfaction and limited facilities.
3.	Analysis of the Implementation of the Integrated Non-Communicable Disease Construction Post Program in the Work Area Srdol Kulon Health Center, Semarang City (Case Study in RW 13, Srdol Wetan District, Banyumanik Village)	Refiola Irmawati, Putri Asmita Wigati, Septo Pawelas Arso (2018)[13]	Qualitative research	Observational descriptive qualitative approach with in-depth interview techniques	The implementation of the PTM Posbindu is not optimal. The communication aspect is still weak because the community does not understand the purpose of the program; the aspect of adequate resources but low cadre skills and limited funds; aspects of good disposition with high commitment; while the aspect of the bureaucratic structure does not have strong SOPs and coordination.
4.	Factors influencing non-communicable disease policy process in Sub-Saharan Africa: a scoping review	Enny Brouns, Chanelle Mulopo, Solange Mianda, Joy Mauti, Shannon McMahon, Connie Hoe, Bey- Marrie Schmidt (2025)[14]	Literature review articles	Scoping review	Six main actors in NCE policy were identified: government, the private sector, NGOs/advocates, international partners, experts, and the public. Key barriers include limited resources, weak local data, minimal cross-sector collaboration, and low infrastructure and public awareness. Supporting factors include political commitment, multi-sector collaboration, funding, advocacy, and strong local evidence.
5.	Control of Non-Communicable Diseases for Enhanced	Ramesh Govindaraj and Sundararajan	Empirical Research	This study uses a literature review	The results show that NCDs cause 74% of global deaths (42 million/year) and have an impact on productivity and economic

No	Title	Author/ Year	Article Type	Method	Research Results
	Human Capital The case for whole-of- society action	Srinivasa Gopalan (2024)[7]		(desk review) with a descriptive and conceptual analysis approach	growth, especially in low-middle- income countries. The WoS approach is considered the most effective because it involves cross- sectors of society in the prevention and control of NCDs in a sustainable manner.
6.	Analysis of Factors Affecting the Utilization of PTM Posbindu at the Jailolo Health Center, West Halmahera Regency	Rosmila Tuharea, Hairudin La Patilaiya, Yusnita, Sumaryati, Sahril Amin (2022)[15]	Original research article	Types of quantitativ e research with a cross sectional study approach	There was a significant relationship between knowledge (p=0.001) and family support (p=0.004) with the use of PTM Posbindu. There was no significant relationship with attitudes, health worker support, and cadre support.
7.	Efforts to Increase Service Coverage of the National Program for the Prevention and Control of Non- Communicable Diseases at the Balikpapan Peace Health Center	Linda Kristian Ningtiyas, Ariansyah MS, Tedjowati, Niken Giri Wardani, Sulaiman, Aspiansyah, Vidyanti Evabrina Simarmata, AgustinWid yowati (2023)[16]	Applied research	Quantitativ e research with a residency approach with descriptive analysis using the fishbone method	Research shows that increasing the coverage of P2PTM at the Damai Health Center can be achieved by strengthening public education, improving officer competence, improving diagnostic facilities, and strengthening the monitoring and evaluation system of the program.
8.	Implementation of Non- Communicable Disease Control Based on the Regulation of the Minister of Health Number 71 of 2015 at the Kahu Health Center, Bone Regency	Andi Muhammad Multazam, Andi Tripea Maharani Padjalangi, Reza Aril Ahri (2024)[17]	Original Research Article	Descriptive qualitative with a phenomeno logical approach	The implementation of the PTM program at the Kahu Health Center is in accordance with regulations, but it needs to be improved in socialization, cadre training, strengthening surveillance, and cross-sector collaboration so that the results are more effective.

No	Title	Author/ Year	Article Type	Method	Research Results
9.	Analysis of Prevention and Control of Non-Communicable Diseases (Hypertension) at UPT Puskesmas Way Halim in 2025	Febria Listina, Nyoman Erfiyani, Davina Melani Putri, Fajar Prasetyo R, Vincentius Raldo A (2025)[18]	Field research articles	Using an analytical descriptive approach with a case study method	The coverage of hypertension services is only 51.9% of the target. The main obstacle: low participation and public awareness. Inputs (manpower, medicine, funds) are adequate, but the methods of education and community motivation are not optimal. Leaflet media and social media have been used, but their reach is limited.
10.	Disease Burden and Disease Burden Prevention and Control Program and Non-Communicable Disease Prevention and Control Program in Indonesia	Mugi Wahidin (2022)[8]	Original research article	This study uses an analytical descriptive approach with secondary data analysis	Non-communicable diseases are the leading cause of death in Indonesia (73% of total deaths). The four diseases with the highest burden are cardiovascular, cancer, diabetes, and chronic respiratory diseases. The P2PTM program has increased the number of PTM Posbindu in all provinces, but its utilization is still low due to low public awareness and limited resources.
11.	Policy Implementation of the Non-Communicable Diseases Integrated Development Post Program (Posbindu Ptm) in Makkawing Village, Balai District, Sanggau Regency	Julianawati (2022)[19]	Original research article	Types of qualitative descriptive research	The results of the study show that the implementation of the PTM Posbindu Program in Makkawing Village is quite good. Human resources are adequate, but the budget and facilities are still limited. Cadres understand their duties, but socialization and community participation are still low even though the implementation of activities is in accordance with the guidelines.
12.	Analysis of Puskesmas Policy Implementation in The Integrated Position	Nurul Evi Yanti, Namora Lumongga Lubis, Vivi Eulis Diana (2019)[20]	Original research article	This study uses a mixed method that combines quantitativ	The results of the study show that the implementation of the PTM Posbindu policy at the Juang City Health Center is relatively good, with input aspects of 78.4%, process 70.3%, and output 59.5%. Community activity is also quite

No	Title	Author/ Year	Article Type	Method	Research Results
	Guidelines Program			e and qualitative approaches	high at 67.6%. The implementation SOP is available and runs according to the guidelines, but cadre training is still rarely carried out. The main obstacles include limited facilities, delays in village funds, and lack of active cadres, while most of the community feels comfortable and supports Posbindu activities
13.	“Posbindu PTM”: The Key of Early Detection and Decreasing Prevalence of Non-Communicable Diseases in Indonesia	Tri Siswati, Heru Subaris Kasjono, Yustiana Olfah (2022)[21]	Qualitative research	This research uses a qualitative approach	The results of the study show that there are still many risk factors for non-communicable diseases in adult workers in Yogyakarta. The PTM Posbindu program has proven to be useful in the early detection and prevention of NCDs, but it still faces obstacles in the form of limited resources, lack of cadre training, and low public awareness.
14.	Strategy to Strengthen the Non-Communicable Disease Posbindu Program in Bogor City	Wahyu Pudji Nugraheni, Risky Kusuma Hartono (2018)[22]	Qualitative research articles	Qualitative research with a case study approach and analytical descriptive methods	The results of the study show that the implementation of the PTM Posbindu in Bogor City has been running and visited by people of all ages, but it is still constrained by limited cadres, lack of training, lack of funding, incomplete facilities, and weak monitoring and cross-sector cooperation.
15.	Optimization of the Healthy Living Community Movement for Non-Communicable Diseases and Health Management for Infectious Diseases in Mergangsan Lor, Wirogunan	Marita Kumala Dewi, Enik Listyaningsih, Dwi Nugroho Heri S, Resta Betaliani Wirata (2023)[23]	Community Service Article	Descriptive Method with a Participatory Approach	The results showed a significant increase in community knowledge after counseling, with more than 85% of participants having excellent knowledge and understanding of TB prevention, the use of medical devices, and the importance of maintaining mental health. This activity improves community behavior in maintaining health and encourages the active participation of cadres and residents in public health programs.

No	Title	Author/ Year	Article Type	Method	Research Results
	Village, Yogyakarta				
16.	Analysis of the Implementation of the PTM Posbindu Program in the Working Area of the Putri Ayu Health Center, Jambi City in 2024	Fatmasari Astuti, Arnild Augina Mekarisce, Adila Solida, Hubaybah, Rizalia Wardiah (2025)[24]	Qualitative research	Using qualitative research methods with an analytical descriptive approach	(1) Communication: Information is conveyed clearly through coordination and social media, but public participation is still low. (2) Resources: Limited and partially untrained cadres, facilities and infrastructure are incomplete. (3) Disposition: The executor behaves well with active strategies such as door to door and RT coordination. (4) Bureaucratic Structure: SOPs are not in accordance with the guidelines, cadre guidelines are not yet available, and monitoring is still rarely carried out.
17.	Analysis of the Implementation of Health Promotion Strategies in the Utilization of Posbindu PTM by At-Risk Groups in the UPTD Working Area of Silau Laut Health Center, Asahan Regency in 2024	Marlina Renta Juyanti Butarbutar, Desideria Yosepha Ginting, Agustinus Sitepu (2024)[25]	Qualitative research articles	Qualitative approach	Health promotion is carried out through advocacy, social support, and community empowerment. Advocacy has been running at the village level, but the response from other sectors is still low. Social support is carried out through community activities and social media, but participation is still lacking due to distance and stigma. Community empowerment has been routinely carried out through monthly Posbindu, but cadre training is still rare and the facilities are not complete.
18.	Papua The Analysis Of Implementation Of Posbindu Ptm Program In Harapan Health Center, Jayapura Regency, Papua	Antonius Satrio Wicaksono Dosinaeng, Yunita Irianti Mangonto, Derik Pibino, Ria Romantir, Lewi Itlay (2025)[26]	Qualitative research articles	Using a qualitative approach	The results of the study show that the PTM Posbindu at the Harapan Health Center has been running since 2018 and has been following SPM since 2019, but the implementation still focuses on treatment. Cadres do not fully understand their duties, community participation is still low, hypertension is most commonly experienced at the age of ≥ 48 years, and an unhealthy lifestyle is the main factor.

No	Title	Author/ Year	Article Type	Method	Research Results
19.	Implementation of the Non-Communicable Disease Posbindu Program	Dian Fitriyani, Siti Utami Dewi, Susilo Wirawan, Supriyatni Kartadarma, Heru Purnomo (2024)[5]	Original research article	This study uses a qualitative method with a descriptive approach	The results of the study show that the implementation of the PTM Posbindu at the Lubuk Ambacang Health Center has been running but is not optimal. The number of implementing staff is still limited (two people), infrastructure facilities are inadequate, funding from BOK funds is not enough, and community support is low, especially
20.	Factors Related to the Utilization of the Integrated Development Posts of Non-Communicable Diseases (POSBINDU PTM) in Bulili Health Centre Area	Vidyanto Untad, Muhammad Ryman Napirah , Novitayanti Pongsapan Department (2022)[27]	Quantitative research article	This study uses a quantitative method with an analytical survey design and a cross-sectional approach.	The results of the study show that the utilization of Posbindu PTM is still low, only 22%. There was a significant relationship between knowledge, access, facilities and infrastructure, cadre support, support for health center officers, and family support for the use of Posbindu ($p < 0.05$). The better these factors, the higher the utilization rate of PTM Posbindu.
21.	Empowerment and Partnership Program through the Healthy Community Movement Integrated Development Post for Non-Communicable Diseases	Tantut Susanto, Erwin Nur Rif'ah, Irawan Fajar Kusuma, Suyani Indriastuti (2023)[28]	Community service article	Research based community service	The results of the activities showed an increase in the community's ability to run Germas, such as routinely doing anti-hypertensive exercises, compiling a low-salt menu, and carrying out monthly PTM Posbindu. Statistically, there was a significant decrease in systolic and diastolic blood pressure, body weight, and abdominal circumference after the program was implemented. This program has proven to be effective as a community-based NCD control model
22.	Management and Prevention Strategies for Non-	Aida Budreviciute , Samar Damiati,	Literature review	Literature review sistematis	The results show that non-communicable diseases such as the heart, cancer, and diabetes are the leading causes of global deaths

No	Title	Author/ Year	Article Type	Method	Research Results
	communicable Diseases (NCDs) and Their Risk Factors	Dana Khdr Sabir, Kamil Onder, Peter Schuller-Goetzburg, Gediminas Plakys, Agne Katileviciute, Samir Khoja and Rimantas Kodzius (2020)[29]			(71%). Effective prevention is carried out through healthy lifestyle changes as well as policy support and cross-sectoral collaboration.
23.	Evaluation of the Implementation of the Integrated Development Post	Ambarwati and Ferianto (2019)[30]	Original research article	Types of qualitative descriptive analytical research	The respondents' knowledge of the PTM Posbindu is relatively good, and the attitude of all informants (midwives, cadres, residents) is very supportive of the program. However, the practice of implementing Posbindu has not been maximized according to the technical guidelines of the Ministry of Health (2012). The obstacles found include a lack of infrastructure, cadre training that is not routine, and uneven community participation.
24.	Health Education and Promotion in Efforts to Prevent and Control Non-Communicable Diseases	Oksfriani Jufri Sumampouw, Odi Roni Pinontoan, Jeini Ester Nelwan (2023)[31]	Applicative descriptive research	Descriptive method with a participatory approach	Education and health promotion activities play an important role in increasing public awareness of NCD prevention and control.
25.	Analisis of the Implementation of Non-Communicable Disease Control Programs in Posbindu PTM Puskesmas Rokan IV Koto	Kholida Hosni, Dedi Afandi, Jasrida Yunita, Doni Jepisah, Ahmad Hanaf (2020)[32]	Original research article	This study uses an observational analytical method with a cross-	The results of the study show that the implementation of the PTM control program at the Rokan IV Koto I Health Center Posbindu has been good and innovative through the "BASMI PELAKOR 1" program which increases public visits, although it is still

No	Title	Author/ Year	Article Type	Method	Research Results
	I Districs Rokan Hulu			sectional approach	constrained by low participation and uneven facilities.

DISCUSSION

The results of the review of 25 articles show that the implementation of Non-Communicable Disease (NCD) control policies in Indonesia and in other countries faces complex challenges. Most of the research focuses on the implementation of the Non-Communicable Disease Integrated Development Post (Posbindu PTM) and the Healthy Living Community Movement (GERMAS) at the primary service level. These two programs play an important role in suppressing the prevalence of NCDs through promotive and preventive approaches. In general, the determinants of successful policy implementation include policy communication, human and financial resources, implementing disposition, bureaucratic structure and cross-sector coordination, social support, and socioeconomic and cultural conditions of the community [6][20][24].

Policy communication is the main key to successful implementation. Clarity of message, effectiveness of socialization, and targeted advocacy determine the extent to which policies can be implemented in the field. Research [25] confirms that health promotion aimed at village officials and the community is able to increase awareness of the PTM Posbindu, but cross-sector communication is still weak. Research [24] also found that even though the socialization of the program has been carried out, community participation remains low due to a lack of understanding of the benefits of early detection. This shows that policy communication must be two-way and adapted to the socio-cultural characteristics of the local community [26][23].

Resources (human resources, funds, facilities and infrastructure) are also determinants of policy success. Limited health workers, training, and operational funds hinder the implementation of programs in a sustainable manner [13][5]. Research [20] shows that although the implementation of the Posbindu policy is relatively good, obstacles in the form of limited facilities and delays in funds still occur. Sustainable financial support through village funds or Health Operational Assistance (BOK) is important so that promotive-preventive activities do not depend on self-help.

The disposition of the implementer is related to the commitment, attitude, and motivation of health workers and cadres. Studies [13] and [24] show that cadres have high commitment despite facing limited resources. However, a lack of training and rewards can reduce motivation [30] [21]. Therefore, the government needs to strengthen the system of coaching, providing incentives, and continuous training so that a positive disposition is maintained.

Bureaucratic structure and coordination also affect the effectiveness of implementation. Research [20] and [24] found that not all health centers have uniform SOPs and monitoring activities have not been routinely carried out. Bureaucratic fragmentation and weak coordination between sectors cause the implementation of programs to be not optimal [21]. Conversely, research [6] and [7] confirm that cross-sector coordination and inter-agency collaboration improve the effectiveness of evidence-based policy implementation. The study of [14] adds that there are six main actors in NCE policy—governments, the private sector, NGOs, international partners, experts, and communities whose success is influenced by political commitment, funding, advocacy, and multi-sector collaboration. These findings

underscore the importance of inclusive, coordinated, and evidence-based policy governance to strengthen NCD control in Indonesia.

Social support and community participation are important elements in the sustainability of the program. Research [15], [16], and [19] shows that knowledge, family support, and the role of cadres are closely related to the level of utilization of PTM Posbindu services. Active community participation in counseling and education activities has been proven to increase awareness and healthy living behaviors [28] [23]. Therefore, community empowerment and increasing health literacy need to be the main focus of NCD control policies.

The environment, culture, and socio-economy also have a great influence. Limited geographical access, education, and economic conditions are the main obstacles to community participation [26]. Cultural values such as the habit of consuming foods high in salt and fat are often barriers to behavior change [27]. A communication approach that is sensitive to the local context is needed to make policies more acceptable. A whole of society approach that emphasizes cross-sectoral collaboration between the government, education, economy, and environment sectors becomes an effective strategy [7].

In addition, the use of technology and health data systems is an important determinant in the success of NCD control policies. The study by [6] confirms that an integrated health information system supports early detection of risk factors and accurate monitoring of program achievements. Digitization of primary services plays a role in strengthening cross-sector coordination, accelerating reporting, and encouraging evidence-based decision-making. However, low digital literacy and limited technology infrastructure in rural areas are still major challenges. Therefore, the development of digital infrastructure, increasing technological literacy, and training of health workers are strategic steps to increase the effectiveness and sustainability of the implementation of NCD control policies.

All of these determinants have mutually reinforcing relationships. Good policy communication requires resource support, bureaucratic coordination, and active community participation. Meanwhile, technology acts as a link between determinants through the provision of evidence-based data. This synergy between factors is the main key to the successful implementation of the NCD control policy.

In practical terms, the results of a synthesis of various studies show that human resource capacity building, sustainable financial support, and strong cross-sectoral coordination are priority steps. Strengthening the health information system and the use of digital technology needs to be integrated into every policy so that the monitoring and evaluation process runs more effectively. Thus, an adaptive, collaborative, and data-based NCD control policy is expected to strengthen the public health system in Indonesia.

CONCLUSION

The results of the literature study show that the success of the implementation of Non-Communicable Disease (NCD) control policies is determined by various interrelated factors. There are seven main determinants that affect the effectiveness of implementation, namely policy communication, resources, implementing disposition, bureaucratic structure and cross-sector coordination, social support and community participation, socio-economic and cultural conditions, and the use of technology and health data.

NCD control policies will be successful if they are supported by effective communication, adequate resources, and strong implementation commitment. In addition, cross-sector coordination and community participation are key in ensuring the sustainability of the program at the local level. The government needs to strengthen synergy between institutions, expand the

use of digital health information systems, and adjust intervention strategies to the social and cultural characteristics of the community.

By paying attention to these determinants, it is hoped that the implementation of NCD control policies can run more effectively, sustainably, and have a real impact in reducing the number of illnesses and deaths due to NCDs in Indonesia.

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