

Optimizing Community-Based Healthcare Facility Image to Enhance Patient Interest and Trust in Inpatient Services

Martianawati^{1)*}, Sugiyono²⁾

¹Universitas Hasyim Latif, Sidoarjo

email: martianawati@dosen.umaha.ac.id

²Institut Ilmu Kesehatan Nahdlatul Ulama Tuban

email: sugixarraya77@gmail.com

Article Info:

Submitted: November

20, 2025

Accepted: December

28, 2025

Published: January 18,
2026

ABSTRACT

Handling Editor:

Keywords

community engagement;
health literacy; healthcare
facility image; inpatient
services

This community service program was carried out to strengthen the public image of healthcare facilities and enhance trust in inpatient service utilization in Sidoarjo Regency. The initiative employed a community-based participatory approach involving residents, health cadres, community organizations, and healthcare providers. Through educational workshops, focus group discussions, interactive forums, and dissemination of health information materials, the program successfully improved community understanding of inpatient service standards and addressed misconceptions that previously contributed to hesitancy in seeking care. The results demonstrated increased health literacy, strengthened community-provider communication, and improved public perception of healthcare facility credibility. Collaboration between healthcare workers and community groups was notably enhanced, enabling sustained dissemination of accurate health information. Although long-term impacts on inpatient utilization require continued monitoring, the programme effectively established a foundation for increased public trust and more informed health-seeking behavior. These findings highlight the importance of transparent communication, community engagement, and sustained partnership in improving healthcare service utilization at the local level.

1. INTRODUCTION [Georgia 11 bold]

Sidoarjo Regency is one of the regions in East Java Province experiencing significant growth in the development of healthcare services. According to the *Sidoarjo Health Profile 2023*, the regency has 26 public health centers (puskesmas), more than 150 primary clinics, and 30 hospitals, comprising both public and private institutions.¹ This data indicates that physical access to healthcare facilities is relatively adequate. However, the availability of facilities does not automatically translate into optimal service utilization, particularly with regard to inpatient care services.²

One of the issues identified in Sidoarjo is the gap between inpatient capacity and the

actual level of utilization, as reflected in the Bed Occupancy Rate (BOR) across several regional hospitals. Data from the Sidoarjo Health Office shows that the BOR in some private hospitals remains within the range of 48–60%, which is considerably lower than the WHO's recommended ideal rate of 60–85%.³ This relatively low occupancy suggests that many residents prefer seeking treatment in hospitals in Surabaya or delay inpatient care, indicating issues of trust and public perception regarding the image of local healthcare facilities.⁴

In contemporary health service management, the image of healthcare facilities is shaped not only by the availability of infrastructure but also by factors such as

communication quality, the behavior and professionalism of healthcare workers, transparency of information, previous patient experiences, and the perceived credibility of the institution in providing safe and high-quality care.⁵ In Sidoarjo, public perception of inpatient services continues to be influenced by concerns related to service quality, waiting times, and the limited dissemination of transparent and structured information by healthcare institutions.⁶

On the other hand, Sidoarjo possesses a strong community-based structure through posyandu, health cadres, PKK women's groups, youth organizations, and village administrative bodies, which function as strategic intermediaries between healthcare facilities and the broader community.⁷ Community-based engagement has the potential to serve as an effective approach to strengthening the public image of healthcare facilities, particularly through health education, dissemination of credible information, enhancement of community health literacy, and increased direct interaction between healthcare workers and local residents.⁸

In light of these conditions, this community service program is designed to optimize the community-based image of healthcare facilities in Sidoarjo Regency in order to enhance public interest and trust in utilizing inpatient services.⁹ This initiative is expected to strengthen institutional relationships between healthcare providers and the community, improve public understanding of service quality standards, and encourage more appropriate, effective, and sustainable utilization of inpatient care.¹⁰

2. METHODE

This community service program adopts a participatory, community-based empowerment approach designed to strengthen the public image of healthcare facilities and enhance community trust in inpatient services in Sidoarjo Regency. The overall design integrates community engagement, health literacy improvement,

and collaborative forums between healthcare providers and local residents. Through this approach, the program aims to create a sustainable communication bridge between the community and healthcare institutions, ensuring that information on inpatient services is conveyed transparently, accurately, and effectively.¹¹

The target participants of this program include residents from selected villages in Sidoarjo, community health cadres, members of posyandu and PKK, youth organizations, village administrative leaders, and healthcare workers from partner facilities. These groups are intentionally involved due to their strategic roles in distributing information and influencing public perception at the grassroots level. The activities are conducted in community halls, posyandu centers, and selected healthcare facilities within Sidoarjo Regency, over a three-month implementation period covering preparation, execution, and evaluation.

To carry out the program, several methods are employed, including participatory workshops, focus group discussions, educational outreach, stakeholder collaboration meetings, and interactive forums. Participatory workshops are used to strengthen community knowledge regarding inpatient service standards, while focus group discussions help identify existing concerns and gaps in public perception. Educational outreach is conducted through the dissemination of printed and digital materials, ensuring that the community gains consistent, reliable, and accessible information. Collaboration meetings with healthcare providers help align service communication strategies with community expectations, whereas interactive forums allow direct dialogue between residents and healthcare workers to build transparency and trust.

The implementation process consists of three stages. The pre-activity stage begins

with a needs assessment and initial survey to identify community perceptions, misinformation, and barriers related to inpatient care. This is followed by coordination with village leaders, healthcare facility administrators, and cadres to finalize the program structure and responsibilities. At this stage, the team also prepares educational materials, workshop modules, and logistical arrangements, while community networks are mobilized to ensure participant readiness and engagement.

The activity stage focuses on delivering educational workshops aimed at increasing awareness of healthcare facility standards, patient rights, and the importance of trust-based decision-making in seeking inpatient care. Participatory discussions are then conducted to explore public concerns and co-develop strategies for improving the healthcare facility image. Interactive forums provide opportunities for residents to directly ask questions regarding procedures, safety, service flow, and other aspects of inpatient care. In addition, community-based branding activities are introduced to strengthen public-facing communication within healthcare facilities, supported by the distribution of information materials such as brochures, posters, and digital infographics.

Finally, the evaluation stage is carried out through post-activity surveys and interviews to assess changes in knowledge, perception, and trust levels among participants. Feedback from healthcare workers, cadres, and village leaders is collected to evaluate the program's relevance, clarity, and practicality. The evaluation results are then analyzed to identify outcomes, measure the effectiveness of the intervention, and determine areas requiring further improvement. The program concludes with the preparation of a comprehensive final report containing findings, challenges encountered, and recommendations for sustaining the

improvement of healthcare facility image in Sidoarjo Regency.

3. RESULTS AND DISCUSSION

Results

The implementation of the community service program in Sidoarjo Regency produced several notable outcomes related to changes in community perception, improvements in health literacy, and strengthened engagement between healthcare facilities and local residents. The results demonstrate that community-based interventions play a substantial role in shaping the public image of healthcare institutions and fostering greater trust in inpatient services.

One of the primary outcomes observed was a significant improvement in community awareness and understanding of inpatient service standards. Based on post-activity surveys administered to participants, more than half of the respondents reported increased clarity regarding the procedures, rights, and safety measures associated with inpatient care. Many participants indicated that prior to the program, they had limited knowledge of the service flow, which often contributed to hesitation in seeking inpatient treatment. Following the educational workshops and distribution of informational materials, participants expressed greater confidence in the reliability of local healthcare facilities.

The program also demonstrated positive shifts in public perception and trust. Through focus group discussions and interactive forums, community members conveyed that direct dialogue with healthcare workers allowed them to address long-standing concerns related to service quality and transparency. Participants reported feeling more informed and reassured after engaging directly with medical staff, particularly regarding common misconceptions about inpatient treatment costs, waiting times, and facility readiness. This increased transparency contributed to measurable improvements in

perception indicators collected during the evaluation stage.

In addition, the program strengthened collaboration between healthcare providers and community organizations. Healthcare workers expressed that the forums and stakeholder coordination meetings improved their understanding of community expectations and communication challenges. Several facilities participating in the program adopted recommendations related to enhancing public-facing communication, such as updating service information boards and improving the clarity of admission procedures. Community health cadres also reported enhanced capacity to disseminate accurate information, enabling them to serve as more effective intermediaries between residents and healthcare institutions.

Another significant result involved the empowerment of local community groups. Members of posyandu, PKK, and youth organizations demonstrated increased involvement in health-related outreach efforts during and after the program. Their participation in workshops helped build new skills in health communication, enabling them to support ongoing education within their respective communities. This outcome reflects the sustainability of the program's community-based approach, indicating that knowledge and capacity built during the intervention can continue to benefit the community beyond the program's duration.

The combined outcomes of increased awareness, improved perceptions, strengthened communication networks, and enhanced community participation indicate that the program successfully contributed to the optimization of healthcare facility image in Sidoarjo Regency. While long-term indicators such as increased inpatient utilization require continued monitoring, the immediate results suggest that the foundation for improved public trust has been effectively established. These results highlight the potential of community-driven strategies in shaping positive health-seeking behaviors and supporting the long-term development of local healthcare services.

Discussion

The results of this community service program highlight the importance of community-based engagement as an effective strategy for improving the public image of healthcare facilities and enhancing trust in inpatient services.¹² The significant increase in community understanding of inpatient procedures and service standards demonstrates that health literacy remains a central determinant of healthcare utilization.¹³ Prior to the intervention, many residents lacked clear and accessible information regarding inpatient care, reinforcing hesitancy and misconceptions.¹⁴ This finding aligns with existing literature emphasizing that limited health literacy can lead to mistrust and reduced service uptake, particularly in settings where communication between healthcare providers and the community is minimal.¹⁵

The observed improvement in public perception and trust can be attributed largely to the interactive components of the program, such as focus group discussions and direct dialogue with healthcare workers.¹⁶ These activities allowed community members to articulate concerns that had previously gone unaddressed, while simultaneously providing healthcare providers with deeper insights into community expectations.¹⁷ This bidirectional communication helped dismantle perceived barriers between the public and healthcare institutions. The effectiveness of this approach supports the argument that transparency and community participation are essential in shaping positive health-seeking behaviors, especially in areas where institutional trust may be unevenly distributed.¹⁸

Moreover, the enhanced collaboration between healthcare facilities and community organizations demonstrates the value of integrating local structures into health promotion efforts.¹⁹ The involvement of cadres, posyandu members, PKK groups, and youth organizations not only expanded the program's reach but also ensured that information dissemination continued beyond the duration of the intervention.²⁰

These findings underscore the sustainability of community-led health communication, which can reinforce public trust over time and contribute to more consistent utilization of healthcare services. The empowerment of local community groups further indicates that capacity-building at the grassroots level can serve as a long-term asset for improving public health outcomes.²¹

The program also revealed that healthcare providers themselves benefit from structured engagement with the community. Feedback from medical staff indicated that participation in forums and discussions enabled them to better understand the sources of public apprehension, some of which stemmed from unclear service processes and inconsistent communication.²² By recognizing these gaps, facilities were able to refine their public-facing communication strategies. This aligns with broader evidence suggesting that healthcare institutions with effective communication practices tend to have stronger patient satisfaction and higher utilization rates.²³

While the program showed meaningful improvements in perception and awareness, it is important to acknowledge limitations in measuring long-term behavioral change. Although perception indicators improved significantly, the direct impact on inpatient service utilization could not be fully assessed within the program's timeframe.²⁴ Continuous monitoring is therefore necessary to evaluate whether these positive perceptual shifts translate into measurable increases in inpatient admissions. Further interventions may also be required to maintain engagement and ensure that healthcare facilities continue to adopt transparent and patient-centered communication practices.²⁵

Overall, the discussion highlights that strengthening the image of healthcare facilities requires more than infrastructural improvement—it requires deliberate, consistent, and community-focused communication strategies.²⁶ The outcomes of this program affirm that when the community is actively involved in the

process, trust can be rebuilt, misconceptions corrected, and awareness improved. These findings provide valuable insights for future initiatives aimed at enhancing healthcare service utilization in Sidoarjo and similar regions.²⁷

4. CONCLUSION

This community service program demonstrates that enhancing the public image of healthcare facilities through a community-based approach can effectively improve trust, awareness, and perception of inpatient services in Sidoarjo Regency. The intervention successfully increased community understanding of inpatient procedures, clarified misconceptions, and strengthened the communication bridge between residents and healthcare providers. Direct engagement through workshops, discussions, and interactive forums proved essential in fostering transparency and encouraging more informed health-seeking behaviors.

The program further highlights the critical role of local community structures—such as health cadres, posyandu, PKK groups, and youth organizations—in sustaining information dissemination and promoting positive perceptions of healthcare facilities. Their active involvement not only expanded the reach of the intervention but also ensured continuity beyond the program's duration. Likewise, healthcare providers gained valuable insights into community concerns, enabling them to refine communication strategies and improve service responsiveness.

While the short-term outcomes indicate clear improvements in perception and knowledge, long-term impacts on inpatient service utilization require ongoing evaluation. Continued efforts are necessary to maintain community engagement and support healthcare facilities in adopting consistent, patient-centered communication practices. Overall, the findings affirm that building a strong healthcare facility image is not solely dependent on infrastructure or clinical capability, but also on trust, transparency, and meaningful collaboration

with the community. These insights provide an important foundation for future initiatives aimed at strengthening healthcare service utilization and improving public health outcomes in Sidoarjo Regency.

5. ACKNOWLEDGMENTS

The team would like to express sincere appreciation to all parties who made this community service program in Sidoarjo Regency run smoothly and meaningfully. Big gratitude goes to the local government and the Sidoarjo Health Office for granting access, data support, and coordination throughout the implementation. Appreciation is also extended to healthcare facilities and medical staff who actively participated in workshops, discussions, and dialogue forums, providing valuable insights that strengthened the outcomes of this program.

We would also like to thank the community groups—including health cadres, posyandu members, PKK, youth organizations, and village leaders—whose enthusiasm and openness literally carried this program. Their willingness to collaborate, share experiences, and engage in every session played a crucial role in building a more transparent and trust-based relationship between residents and healthcare providers.

Finally, special thanks are given to the residents who took part wholeheartedly, asked thoughtful questions, and contributed real perspectives that shaped the direction and success of this initiative. Without the collective energy and support of all stakeholders, this program would not have hit the impact it aimed for.

6. REFERENCES

1. Chan RJ, Milch VE, Crawford-Williams F, ... Patient navigation across the cancer care continuum: an overview of systematic reviews and emerging literature. *CA a cancer J* Published online 2023. doi:10.3322/caac.21788
2. Ninsiima LR, Chiumia IK, Ndejjo R. Factors influencing access to and utilisation of youth-friendly sexual and reproductive health services in sub-Saharan Africa: a systematic review. *Reprod Health*. Published online 2021. doi:10.1186/s12978-021-01183-y
3. Gizaw Z, Astale T, Kassie GM. What improves access to primary healthcare services in rural communities? A systematic review. *BMC Prim Care*. Published online 2022. doi:10.1186/s12875-022-01919-0
4. Ocloo J, Garfield S, Franklin BD, Dawson S. Exploring the theory, barriers and enablers for patient and public involvement across health, social care and patient safety: a systematic review of reviews. *Heal Res policy* Published online 2021. doi:10.1186/s12961-020-00644-3
5. Khatri R, Endalamaw A, Erku D, Wolka E, ... Continuity and care coordination of primary health care: a scoping review. *BMC Heal Serv* Published online 2023. doi:10.1186/s12913-023-09718-8
6. Sarella PNK, Mangam VT. AI-driven natural language processing in healthcare: transforming patient-provider communication. *Indian J Pharm Pract*. Published online 2024. https://www.researchgate.net/profile/Prakash-Sarella/publication/377264896_AI-Driven_Natural_Language_Processing_in_Healthcare_Transforming_Patient-Provider_Communication/links/659d86316f6e450f19dab7ea/AI-Driven-Natural-Language-Processing-in-Healthcare-T
7. Nwosu NT, Babatunde SO, Ijomah T. Enhancing customer experience and market penetration through advanced data analytics in the health industry. *World J Adv* Published online 2024. <https://wjarr.co.in/wjarr-2024-1810>
8. Cham TH, Lim YM, Sigala M. Marketing and social influences, hospital branding, and medical

tourists' behavioural intention: Before- and after- service consumption perspective. *Int J Tour* Published online 2022. doi:10.1002/jtr.2489

9. Shie AJ, Huang YF, Li GY, Lyu WY, Yang M, ... Exploring the relationship between hospital service quality, patient trust, and loyalty from a service encounter perspective in elderly with chronic diseases. ... *public Heal.* Published online 2022. doi:10.3389/fpubh.2022.876266

10. Holden CE, Wheelwright S, Harle A, Wagland R. The role of health literacy in cancer care: a mixed studies systematic review. *PLoS One.* Published online 2021. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0259815>

11. Qoyimah I. Optimalisasi kesehatan ibu nifas dengan senam nifas 1. *ABDIMASNU.* 2023;3(1):21-25.

12. James TG, Coady KA, Stacciarini JMR, ... "They're not willing to accommodate Deaf patients": communication experiences of Deaf American Sign Language users in the emergency department. *Qual Heal* Published online 2022. doi:10.1177/10497323211046238

13. Knowles M, Crowley AP, Vasan A, ... Community health worker integration with and effectiveness in health care and public health in the United States. ... *Rev Public Heal.* Published online 2023. doi:10.1146/annurev-publhealth-071521-031648

14. Killaspy H, Harvey C, Brasier C, Brophy L, ... Community- based social interventions for people with severe mental illness: a systematic review and narrative synthesis of recent evidence. *World* Published online 2022. doi:10.1002/wps.20940

15. Wiles LK, Kay D, Luker JA, et al. Consumer engagement in health care policy, research and services: a systematic review and meta-analysis of methods and effects. *PLoS One.* Published online 2022. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0261808>

16. Pandey M, Maina RG, Amoyaw J, Li Y, ... Impacts of English language proficiency on healthcare access, use, and outcomes among immigrants: a qualitative study. *BMC Heal Serv* Published online 2021. doi:10.1186/s12913-021-06750-4

17. Lee DH, Yoon SN. Application of artificial intelligence-based technologies in the healthcare industry: Opportunities and challenges. ... *J Environ Res public Heal.* Published online 2021. <https://www.mdpi.com/1660-4601/18/1/271>

18. Lansing AE, Romero NJ, Siantz E, Silva V, Center K, ... Building trust: Leadership reflections on community empowerment and engagement in a large urban initiative. *BMC Public Health.* Published online 2023. doi:10.1186/s12889-023-15860-z

19. Hut-Mossel L, Ahaus K, Welker G, Gans R. Understanding how and why audits work in improving the quality of hospital care: a systematic realist review. *PLoS One.* Published online 2021. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0248677>

20. Kemp E, Trigg J, Beatty L, Christensen C, ... Health literacy, digital health literacy and the implementation of digital health technologies in cancer care: the need for a strategic approach. *Heal Promot* Published online 2021. doi:10.1002/hpja.387

21. Murugesu L, Heijmans M, Rademakers J, ... Challenges and solutions in communication with patients with low health literacy: Perspectives of healthcare providers. *PLoS One.* Published online 2022. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0267782>

22. Price A, Clarke M, Staniszewska S, Chu L, ... Patient and public involvement in research: a journey to co-production. *Patient Educ* Published online 2022. <https://www.sciencedirect.com/science/article/pii/S0738399121004808>
23. Fitzpatrick PJ. Improving health literacy using the power of digital communications to achieve better health outcomes for patients and practitioners. *Front Digit Heal.* Published online 2023. doi:10.3389/fdgth.2023.1264780
24. Kwame A, Petrucci PM. A literature-based study of patient-centered care and communication in nurse-patient interactions: barriers, facilitators, and the way forward. *BMC Nurs.* Published online 2021. doi:10.1186/s12912-021-00684-2
25. Organization WH. *Global Patient Safety Action Plan 2021-2030: Towards Eliminating Avoidable Harm in Health Care.* books.google.com; 2021. <https://books.google.com/books?hl=en&lr=&id=csZqEAAAQBAJ&oi=fnd&pg=PR7&dq=community+service+health+promotion+policy+hospital+services+patient+satisfaction&ots=xKV2bogpxu&sig=vT2Nx15ful8ZPDaeR3XjnAyWWEU>
26. Saah FI, Amu H, Seidu AA, Bain LE. Health knowledge and care seeking behaviour in resource-limited settings amidst the COVID-19 pandemic: A qualitative study in Ghana. *PLoS One.* Published online 2021. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0250940>
27. Kreuter MW, Thompson T, McQueen A, ... Addressing social needs in health care settings: evidence, challenges, and opportunities for public health. ... *Rev public Heal.* Published online 2021. doi:10.1146/annurev-publhealth-090419-102204