Vol. 12 No. 1 2026

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

Strengthening Community Healthcare Administration Through Evidence-Based Nursing Practice: Empowering Interprofessional Nursing Policy

Chairun Nasirin[1], **Arizky Farinsyah Pratama**[2], **Akbar Dwifarin Nugraha**[1],

[1] *College of Health Sciences (STIKES Mataram) Mataram, Indonesia*
[2] *Brawijaya University, Malang, Indonesia*
[3]*University of Mataram, Indonesia*

Email: chairun.nasirin@stikes-mataram.ac.id

ABSTRACT

Background: This study aimed to refine nursing policies by examining the effects of evidence-based guidelines on health and economic stability in economically disadvantaged Indonesian communities. The study was conducted in impoverished regions around Mataram in the West Nusa Tenggara Province of Indonesia.
Methods: A qualitative case study approach was used to collect data from 34 individuals, including nurses, community health workers, local policymakers, community members, and midwives, through interviews and group discussions. Ethical approval for this study was obtained from the Institutional Review Board. Data analysis involved thematic coding of service delivery, health behavior, and policy engagement in NVivo 14.
Results: This study highlighted significant health challenges among adolescents, including insufficient maternal health evaluations, inadequate screening for chronic diseases, and sanitation issues. Weak policies and limited community participation have exacerbated these issues. Conversely, areas with robust local policies exhibited improved health-seeking behavior and increased health awareness. These findings underscore the vital role of evidence-based approaches in nursing policies for promoting health equity and improving outcomes for underserved populations.
Conclusion: Enhancing nursing policies requires adopting proven strategies to ensure equitable access to healthcare. This approach clarifies the benefits and challenges associated with accessing healthcare services.

Keywords: *Nursing Policy, Community Health, Empowering, Evidence-Based Practice*

INTRODUCTION

In Indonesia's rural areas, accessing healthcare and achieving favorable health outcomes are challenging for young people. These challenges include insufficient knowledge of reproductive health, nutritional deficiencies, and mental health concerns. Nurses, who often serve as the leading healthcare providers in rural settings, have the potential to address these issues effectively. However, their ability to implement successful health programs is limited by rigid policies that constrain autonomy. Recently, there has been growing global recognition of the need for policy changes to support community-based health care delivery. Research indicates that when supportive policies are in place for nurses, evidence-based practices can enhance adolescent health outcomes and foster community trust. This study investigated the relationship between empowering nursing policies and the effectiveness of health services for adolescents in rural areas of Indonesia. This perspective aligns with the recent recommendations of international health organizations. The World Health Organization (2021) emphasizes the importance of adolescent-focused health services that are accessible, inclusive, and led by trained healthcare professionals.

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

Previous studies have highlighted the vital role nurses play in advancing community health, especially in rural areas. Policy reforms that empower nurses to lead initiatives have been linked to improved health outcomes, including increased service use among adolescents. The concept of empowerment in nursing involves granting nurses autonomy and control over their professional practice. The interpersonal aspects of nursing practice include interactions among nurses, patients, and other healthcare professionals. Nursing policy consists of guidelines and standards that govern nursing practice and shape the healthcare environment. Nursing empowerment has undergone significant evolution, influenced by the contributions of various theorists and practitioners.

Key aspects of empowerment in interpersonal nursing policies include interconnected elements that create a nurturing work environment. Decision-making autonomy enables nurses to exercise their professional judgment and take responsibility for patient care decisions, thereby promoting accountability and confidence among nurses. Shared governance frameworks allow nurses to participate in organizational decision-making, ensuring that their contributions are valued. Collaborative practice models promote interdisciplinary teamwork and mutual respect among healthcare professionals, thereby enhancing the quality of care. Effective communication channels facilitate the exchange of information and feedback, enabling nurses to contribute to patient care and organizational improvements. The synergy of these components lays the groundwork for empowerment, bolstered by leadership support and organizational policies. Nurse managers cultivate supportive work environments by aiding nurses' professional growth and acknowledging their achievements through education, mentorship programs, and celebration of successes. Healthcare organizations leverage their skills to boost engagement. These efforts empower nurses while enhancing patient care, job satisfaction, and the resilience of the healthcare system. Professional development enables nurses to expand their roles through specialized training, certifications, and ongoing education, thereby keeping them up to date with the latest medical knowledge, healthcare technologies, and best practices in patient care.

The integration of technology and digital tools into nursing practice has emerged as a pivotal factor in empowering nurses to provide high-quality care. Electronic health records (EHRs), mobile devices, and advanced medical equipment streamline workflows and enhance efficiency. These innovations provide nurses with rapid access to patient information, medication databases, and evidence-based guidelines, thereby improving their ability to make informed decisions regarding patient care. Real-time information enables nurses to deliver more informed care, leading to enhanced patient outcomes. A supportive work environment is essential for maintaining job satisfaction and empowerment among nurses. Strategies are necessary to address burnout, which is a widespread issue in nursing. Healthcare organizations can promote work-life balance through flexible scheduling, adequate staffing, and opportunities for rest between shifts. Access to mental health resources, stress management programs, and peer support networks helps nurses manage the emotional demands of their job. According to Paethrangsi et al. (2024), empowering nurses involves creating a culture of shared governance and collaborative decision-making within healthcare organizations. This approach enables nurses to influence policy development, resource allocation, and quality improvement initiatives. By

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

engaging in these processes, nurses enhance their expertise, resulting in more effective patient-centered care.

The implementation of empowerment-focused interpersonal nursing policies offers numerous benefits, including increased job satisfaction, enhanced patient outcomes, and improved organizational productivity. However, challenges such as resistance to change, hierarchical structures, and limited resources may impede the successful adoption of these policies. Strategies such as comprehensive educational initiatives, stakeholder engagement, and continuous policy evaluation and refinement are crucial for overcoming these obstacles. The ethical considerations for empowerment in nursing are thus multifaceted. While empowerment can enhance patient care and professional satisfaction, it may also lead to potential conflicts with other professional responsibilities. Ethical decision-making in interpersonal nursing contexts requires a careful balance between autonomy and responsibility.

The healthcare landscape is undergoing a significant transformation, with technology emerging as a crucial tool for addressing ethical concerns and empowering nurses. Technology plays a vital role in empowering nurses to provide high-quality care. Digital tools can improve interpersonal communication, streamline workflows, and provide access to essential information (Shaw, 2023). However, the integration of technology raises concerns about data privacy, digital literacy, and the risk of depersonalizing care. Harnessing technology to navigate challenges requires a comprehensive approach to policy development and implementation. Empowerment-focused interpersonal nursing policies require a systematic process for development, implementation, and evaluation. This process should involve stakeholders, including frontline nurses, administrators, and patients. Regular policy reviews are relevant in an evolving healthcare environment. Education plays a crucial role in empowering nurses within the profession. Societal changes, including demographic shifts, technological advancements, and the development of healthcare models, will influence future trends in empowerment-focused interpersonal nursing policies. Emerging research questions may investigate the effects of empowerment policies on patient outcomes, the use of artificial intelligence in nursing decision-making, and the application of empowerment strategies across diverse cultural contexts.

LITERATURE REVIEW

Research has highlighted the pivotal role of nurses in promoting community health, particularly in rural and underserved areas (Afulani et al., 2021). Policy reforms that empower nurses to spearhead initiatives are associated with enhanced health outcomes, including increased service utilization and improved knowledge retention among adolescents (Bhattacherjee et al., 2022). Furthermore, the importance of accessible, inclusive, and professionally staffed health services for adolescents, especially those provided by trained healthcare professionals such as nurses, is highlighted. The importance of aligning nursing practices with evidence-based policies to improve the well-being of adolescents in remote areas. Such alignment enhances the quality of care and bolsters the sustainability of health programs in these settings. This alignment is crucial for addressing health disparities and promoting comprehensive adolescent well-being, underscoring the vital role of nurses as caregivers and policy implementers in the community health system. This framework ensures that health services are attuned to adolescents' physical, emotional, and social

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

needs, thereby fostering better adherence and improved health outcomes. Aligning nursing practices with evidence-based policies enhances the quality of care and boosts the sustainability of health programs in remote areas (Yusuf, 2025). Further, Al-Qahtani (2024) emphasized that alignment is crucial for reducing health disparities and advancing holistic adolescent well-being, underscoring the critical role of nurses as healthcare providers and policy implementers within community health frameworks.

Integrating nursing practices with evidence-based policy frameworks is crucial for ensuring consistency and accountability in healthcare, particularly in resource-constrained settings. By embedding these policies in nursing roles, nurses can effectively advocate for adolescents through culturally and contextually appropriate interventions. This approach promotes nursing-led initiatives that foster community trust and engagement, both vital to the sustainability of health programs. The incorporation of evidence-based policies ensures reliable service delivery, especially in resource-limited and underserved areas (Dols et al., 2021; Sampson et al., 2024).

This integration enables nurses to advocate for adolescents by tailoring culturally relevant interventions to meet their needs. Nursing-led initiatives contribute to program sustainability by building community trust and engagement. This strategy addresses inequities while advancing equitable adolescent-focused healthcare, highlighting nurses' roles as frontline providers and key agents in implementing health policies. This approach advances the goal of delivering equitable, adolescent-focused healthcare while emphasizing nurses as primary healthcare providers and key players in implementing health policies to improve adolescent health outcomes. This framework emphasizes investment in nursing education, policy support, and community involvement. These investments ensure that adolescent health services remain adaptable and resilient in the face of healthcare challenges, including demographic shifts, health threats, and resource constraints. By focusing on professional development and leadership training, nurses can acquire advanced skills necessary to meet the complex demands of adolescent healthcare delivery. This capacity-building initiative creates a workforce capable of applying innovative, evidence-based practices that address the needs of the teenage population.

Collaboration among healthcare systems, policymakers, and community stakeholders positions nurses as pivotal agents in implementing comprehensive strategies that address the multifaceted factors influencing adolescent health. This model transcends traditional clinical care by incorporating health promotion, disease prevention, and psychosocial support services tailored to adolescents' developmental stages and cultural contexts. By engaging multiple sectors, this approach enhances individual health outcomes and strengthens community resilience and public health infrastructure. Nurses play a crucial role in bridging clinical services with social determinants of health, ensuring equitable and sustainable adolescent healthcare delivery across diverse settings (Ogbolu, 2022; Rani et al., 2023; Tiase et al., 2022). Aligning nursing practices with evidence-based policies and community frameworks fortifies nurses' roles as both primary caregivers and policy implementers. This alignment ensures that adolescent health programs are sustainable, contextually appropriate, and capable of achieving measurable improvements in health equity. By integrating clinical expertise with policy advocacy and community engagement, nurses can advance adolescent health agendas and sustain progress toward high-quality adolescent-focused services within

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

community health systems. This approach highlights the role of nurses in promoting equitable healthcare. It highlights the importance of investing in nursing education, policy support, and partnerships to address future health challenges in adolescents.

RESEARCH OBJECTIVES

The primary objective of this study is to formulate evidence-based policy recommendations to strengthen nurse-led, community-oriented adolescent health programs and align them with global standards. This endeavor involves creating a framework that integrates nursing empowerment, policy support, and enhanced adolescent health outcomes in economically disadvantaged rural areas. The proposed policy modifications aim to advance nurse community-based adolescent health initiatives that align with international health standards. The overarching aim is to establish a comprehensive framework that amalgamates nursing empowerment, policy endorsement, and improved health outcomes in underserved rural regions. This framework is designed to guide policymakers and healthcare stakeholders in devising strategies that empower nurses to provide accessible, inclusive, and high-quality health services tailored to adolescents' specific needs in these areas. It seeks to connect nursing empowerment, supportive policies, and measurable enhancements in adolescent health outcomes. The framework will help healthcare organizations and policymakers enhance nurse autonomy and promote teenage health initiatives in rural settings. By incorporating stakeholder perspectives, the framework ensures its relevance and applicability and advocates for educational programs that equip nurses with advanced competencies in adolescent healthcare. It encourages the development of leadership roles that enable nurses to influence policy, organizational decisions, and practice improvements.

The empowerment of nurses in interprofessional settings through evidence-based improvement systems aims to enhance decision-making and service efficiency while addressing digital literacy and privacy concerns. This initiative seeks to make programs accessible, inclusive, culturally sensitive, and sustainable for adolescents in underserved areas. The framework is designed to foster sustainable health initiatives that meet healthcare needs, reduce disparities, and promote equity in rural communities. It offers guidance for aligning nursing practices with policies and community engagement, ensuring that programs have a significant impact in resource-constrained environments. The framework empowers nurses to lead community-based health interventions, thereby improving outcomes and advancing public health goals for adolescents in rural Indonesia and similar global contexts. It underscores the importance of continuous professional development, leadership growth, and the integration of technology to enhance nurses' capabilities.

The potential impact on healthcare accessibility and equity in West Nusa Tenggara involves education and training to equip nurses with advanced skills in adolescent healthcare, as well as support for leadership roles that influence policy development and clinical practice. The framework encourages the use of digital tools and health information systems to improve decision-making, communication, and workflow efficiency, while addressing concerns related to digital literacy and privacy. The sustainable health initiatives for adolescents are designed to address healthcare needs and reduce disparities among underserved rural populations. These initiatives align nursing practice with relevant policies and community

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

engagement strategies to ensure a long-term, practical impact in resource-limited settings. The framework serves as a tool to enhance adolescent health by empowering nurses to lead community-based interventions, thereby advancing public health objectives in rural Indonesia and similar contexts. The integration of technology supports targeted training, effective digital technology measures, and user-friendly interfaces, thereby facilitating sustained utilization.

METHODS

This study employed qualitative interviews to capture both the measurable outcomes and nuanced experiences. Data will be collected at rural health centers across three provinces in Indonesia, involving adolescents aged 10–19 years, nurses, and local health officials. This study will evaluate key indicators, including adolescent health knowledge, service utilization rates, and nurse autonomy levels, before and after the implementation of policy changes. Qualitative data responses will be analyzed through thematic coding to ensure a thorough understanding of the impact (Creswell & Poth, 2018). Ethical considerations, including informed consent and data confidentiality, were strictly adhered to throughout the research process. The findings are anticipated to inform future adolescent health policies and contribute to the broader discourse on healthcare accessibility in rural Indonesia. The thematic coding process identified recurring patterns and themes within the qualitative data, providing deeper insights into the participants' experiences and perceptions. These themes were systematically categorized and analyzed alongside quantitative data to develop a comprehensive understanding of the policy's effectiveness. By integrating both quantitative and qualitative findings, this study aimed to offer a nuanced and thorough assessment of the policy's impact on diverse stakeholders.

Data triangulation significantly enhances the validity and reliability of the study's findings by systematically cross-verifying results from multiple research methods (McCreery et al., 2022; Morgan, 2024). This approach not only mitigates the risk of methodological bias but also strengthens the overall robustness of the conclusions. Limitations about sample size, potential response biases, and other contextual factors that may influence data collection and interpretation will be explicitly acknowledged and critically examined in the Discussion section. Addressing these limitations will clarify the scope of this study and inform recommendations for future research initiatives. This study rigorously adhered to all applicable ethical standards and protocols, including obtaining informed consent, ensuring participant confidentiality, and respectfully considering cultural sensitivities. These measures are crucial for protecting the rights, dignity, and welfare of all individuals involved in research. According to Miles and Huberman (2019), the qualitative themes identified through thematic analysis were systematically categorized and integrated with quantitative data to develop a comprehensive and holistic understanding of the policy's effectiveness. By combining qualitative insights with quantitative metrics, this study aimed to provide a nuanced and multidimensional assessment of the policy's impact on diverse stakeholders, including adolescents, healthcare providers, and policymakers. This integrative analytical framework will facilitate a deeper appreciation of the complex dynamics at play, ultimately contributing to more informed policy development and implementation strategies in the future.

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

STUDY AREA

The study was conducted in three remote villages in western Lombok, selected for their challenging accessibility, the presence of active community nurses, and the prevalence of adolescent health issues. These villages provide a context for investigating interprofessional nursing empowerment, encompassing community health dynamics and the practical challenges faced by healthcare providers and residents in underserved areas. This rural setting facilitates an understanding of the factors that influence nursing empowerment. The participant cohort encompassed a diverse range of perspectives relevant to the empowerment of interprofessional nursing. The study comprised 34 participants, including six community nurses; adolescents aged 13–18 years (number unspecified); six community residents who were parents; six nurses serving as caregivers; six community residents in educational roles; three midwives; and seven local policymakers. This diverse participant composition ensured a comprehensive exploration of interprofessional nursing empowerment, integrating clinical, familial, educational, developmental, and policy-related perspectives to enhance the relevance of the findings and support the development of practical, inclusive strategies for empowering nursing professionals and improving community health outcomes (Al Ahmadi et al., 2022).

The three remote villages in West Lombok were selected based on their accessibility, the presence of active community nurses, and the prevalence of adolescent health issues. These villages provide a context for investigating interprofessional nursing empowerment, encompassing diverse community health dynamics and the practical realities faced by healthcare providers and residents in underserved regions. This rural setting facilitates understanding of the factors that influence nursing empowerment.

DATA ANALYSES

The participant cohort was meticulously curated to represent a diverse array of perspectives relevant to the empowerment of interprofessional nursing. This cohort comprised six (6) community nurses who provide frontline healthcare services, adolescents aged 13–18 years representing the youth demographic, six (6) community residents such as parents offering familial insights, six (6) nurses serving as caregivers, six (6) community residents contributing educational perspectives, three (3) midwives with expertise in maternal and child health, and seven (7) local policymakers responsible for health governance. Data collection was conducted through in-depth interviews and group discussions to elicit detailed narratives and collective viewpoints. These sessions were audio-recorded, transcribed verbatim to ensure accuracy, and subsequently coded systematically to uphold rigorous qualitative data management. In addition to primary data, 80 supplementary qualitative data points were gathered from local public health centers *(Puskesmas)* and health college programs over six months in 2025. These supplementary data provide additional context and depth, reflecting broader institutional and educational perspectives on the empowerment of interprofessional nursing. The details regarding the participants to empower interprofessional communication are in the table below.

Interprofessional Participants and Roles

Participant Group	Number of Participants	Role/ Description
Community Nurses	6	Provide frontline

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

		healthcare services
adolescents	Not specified (aged 13-18 years)	Represents the youth demographic
Community Residents (parents)	6	Offer insights into the family
Nurses as Caregivers	6	Provide caregiving perspectives
Community Residents (Educational)	6	Contribute educational viewpoints
Midwives	3	Expertise in maternal and child health
Local Policymakers	7	Responsible for health governance

Table 1: Interprofessional Participant Groups and Description of Healthcare Services

The participant group included diverse perspectives relevant to interprofessional nursing empowerment. This group comprised six community nurses who provided frontline healthcare services and directly engaged with patients. Adolescents aged 13–18 years represent the youth demographics, ensuring that the viewpoints of younger community members are considered in the study. Six community residents who were parents provided insights into the family health dynamics and caregiving. Additionally, six nurses serving as caregivers provided expertise on the emotional, physical, and professional aspects of nursing care. The composition comprised six community residents in educational roles, offering diverse perspectives on health education and community awareness. Three midwives with expertise in maternal and child health provided insights into reproductive health, prenatal and postnatal care, and the needs of mothers and infants. Seven local policymakers responsible for health governance provided a policy-level perspective on regulatory frameworks, resource allocation, and strategic planning for community health initiatives. This diverse participant composition ensured a multifaceted examination of interprofessional nursing empowerment, integrating clinical, familial, educational, developmental, and policy-related perspectives to enhance the relevance of the findings and support the development of practical, inclusive strategies to empower nursing professionals and improve community health outcomes (Al Ahmadi et al., 2022).

Three midwives with expertise in maternal and child health contributed insights into reproductive health, prenatal and postnatal care, and the needs of mothers and infants. Seven local policymakers responsible for health governance brought a policy-level perspective on regulatory frameworks, resource allocation, and strategic planning for community health initiatives. This comprehensive composition provides a multifaceted examination of nursing empowerment, integrating clinical, familial, educational, developmental, and policy perspectives to enhance relevance and support the development of effective and inclusive strategies for empowering nursing professionals and improving health outcomes. The integration of these diverse qualitative sources is pending, as a comprehensive synthesis is necessary to identify the overarching barriers and facilitators effectively. The detailed data are shown in the figure.

Fig. 1: The participant composition of the interprofessional Nursing

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

Based on the data presented above, nurses provided invaluable clinical insights by drawing on their direct patient-care experience to identify practical challenges, including resource constraints, workflow inefficiencies, and patient-compliance issues. Their perspectives elucidate the real-world dynamics of healthcare delivery and the immediate effects of systemic factors on patient outcomes. Community health workers offer a crucial grassroots perspective, emphasizing their role in connecting healthcare systems to underserved populations. They provided observations on the cultural, social, and logistical barriers that affect access to health services and adherence, as well as the strategies employed to build trust and promote health education within communities. Policymakers have contributed a broader systemic viewpoint by discussing health governance, policy formulation, and resource distribution. Their contributions illuminate the constraints and opportunities within institutional frameworks, including policy priorities, funding mechanisms, and regulatory challenges, that shape the implementation of health administration programs. Community residents enriched the study by sharing firsthand accounts of their daily health experiences and social determinants, including housing, employment, education, and community-specific health concerns (Maz-Machado et al., 2024). Their narratives grounded the research in lived realities, revealing the social context and environmental factors that influence participants' health behaviors and outcomes. Collectively, these diverse perspectives have facilitated a comprehensive exploration of community health, integrating clinical practice, community engagement, policy environments, and resident experiences.

RESULTS

The study engaged 34 participants from diverse stakeholder groups to gain a comprehensive understanding of interprofessional nursing empowerment in rural Indonesian contexts. These participants were chosen from sectors that directly and indirectly affect adolescent health outcomes, including clinical practitioners, educators, community members, and policymakers (Table 1). This variety facilitated the triangulation of perspectives across policy, practice, and lived experience, thereby enriching the interpretive analysis of empowerment dynamics within rural healthcare ecosystems (Paethrangsi et al., 2024; Yusuf, 2025). Alongside primary data from interviews and focus group discussions, 80 additional qualitative data points were collected from local Puskesmas (community health centers) and nursing education institutions. These contextual data enhanced validity by aligning participants' narratives with institutional practices observed between May and October 2025. The integration of stakeholder engagement and documentary evidence bolstered the reliability of emergent themes and provided a robust foundation for understanding the structural and socio-cultural determinants influencing adolescent health outcomes. Nursing empowerment through policy and autonomy emerged as a central factor in shaping nursing performance, motivation, and community impact. Participants noted that professional independence in clinical decision-making significantly boosted confidence, accountability, and service quality. Community nurses reported that when allowed to implement context-specific interventions, they could more effectively address adolescents' needs, particularly in areas such as sexual and reproductive health education and preventive care. However, participants consistently identified restrictive bureaucratic structures and

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

limited delegation of authority as barriers to effective practice. Nurses frequently encountered policy constraints that hindered innovation in health promotion programs. Despite these challenges, respondents noted that empowerment policies, such as flexible scheduling, recognition systems, and inclusion in decision-making forums, fostered proactive adolescent engagement and improved community trust. This finding aligns with earlier literature indicating that empowerment enhances both nurse retention and patient outcomes.

The synthesis perspectives of community health cannot be improved through isolated interventions; instead, they require coordinated multilevel strategies that simultaneously address institutional policies, community engagement, and social determinants of health. This integration underscores the importance of collaborative efforts that bridge the gaps between healthcare systems and the communities they serve (Agonafer et al., 2021; Pinto et al., 2020; Tiase et al., 2022). Frontline realities and community voices must inform institutional policies to create responsive and adaptive health programs. Simultaneously, community engagement led by trusted health workers fosters culturally sensitive interventions that resonate with local values and overcome barriers to access and adherence to treatment. Moreover, addressing social determinants such as housing, education, and employment through policy frameworks is essential to mitigate the underlying inequities that perpetuate health disparities. This comprehensive perspective advocates for sustained partnerships among healthcare providers, policymakers, and community members to design and implement interventions that are equitable, effective, and sustainable, ultimately fostering lasting improvements in population health outcomes.

The expanded thematic analysis deepened our understanding of community health by emphasizing the distinct yet interconnected roles of various stakeholders. Community health workers serve as crucial intermediaries between formal healthcare systems and marginalized groups, addressing the cultural and social barriers that hinder access to and adherence to healthcare services. Their focus on trust building and health education ensures that health interventions are culturally sensitive and aligned with the community's lived experiences. Policymakers offer a broader systemic perspective by situating healthcare within governance and policy frameworks, emphasizing the regulatory complexities and resource allocation challenges that impact program sustainability and effectiveness (Karino et al., 2025; Sarwatt et al., 2025). Meanwhile, community residents contribute personal narratives that illuminate how social determinants, such as housing, employment, and education, directly influence health behaviors and outcomes, thereby grounding the analysis in everyday realities. By integrating these perspectives, clinical insights from nurses, grassroots engagement by community health workers, macro-level policy considerations, and residents' experiential accounts, this study provides a comprehensive examination of the multifaceted factors influencing community health. This comprehensive approach underscores the interplay between systemic structures, social environments, and individual experiences, enriching the discourse on health equity and effective service delivery.

Participants represented a broad spectrum of community health stakeholders, including nurses, adolescents, parents, educators, midwives, and policymakers (see *Table 1*). This diverse composition ensured a multidimensional understanding of interprofessional nursing empowerment and its impact on adolescent health outcomes in

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

rural areas of western Lombok, Indonesia. The participant group included diverse perspectives relevant to interprofessional nursing empowerment. This group comprised six community nurses who provided frontline healthcare services and directly engaged with patients. Adolescents aged 13–18 years represent the youth demographics, ensuring that the viewpoints of younger community members are considered in the study. Six community residents who were parents provided insights into the family health dynamics and caregiving. Additionally, six nurses serving as caregivers provided expertise on the emotional, physical, and professional aspects of nursing care. The composition comprised six community residents in educational roles, offering diverse perspectives on health education and community awareness. Three midwives with expertise in maternal and child health provided insights into reproductive health, prenatal and postnatal care, and the needs of mothers and infants. Seven local policymakers responsible for health governance provided a policy-level perspective on regulatory frameworks, resource allocation, and strategic planning for community health initiatives. This diverse participant composition ensured a multifaceted examination of interprofessional nursing empowerment, integrating clinical, familial, educational, developmental, and policy-related perspectives to enhance the relevance of the findings and support the development of practical, inclusive strategies to empower nursing professionals and improve community health outcomes (Al Ahmadi et al., 2022).

Health professionals, such as midwives with expertise in maternal and child health, contributed insights into reproductive health, prenatal and postnatal care, and the needs of mothers and infants. Local policymakers responsible for health governance brought a policy-level perspective to regulatory frameworks, resource allocation, and strategic planning for community health initiatives. This comprehensive composition provides a multifaceted examination of nursing empowerment, integrating clinical, familial, educational, developmental, and policy perspectives to enhance relevance and support the development of effective and inclusive strategies for empowering nursing professionals and improving health outcomes. The complexity of coordinating inputs from these stakeholder groups and data sources presents challenges in synthesizing findings that are both contextually relevant and actionable. This underscores the need for a systematic and integrative analytical approach to develop sustainable, culturally sensitive interventions tailored to the community's unique needs.

Table 1**:** Participant Composition and Data Collection Methods

Coding Category	Subcategories / Codes	Description / Inclusion Criteria	Data Source Relevance
Stakeholder Perspectives	Stakeholder Perspectives	Roles of participants related to nursing empowerment	Primary interviews, group discussions
Empowerment Factors	Facilitators Barriers	Identify the interprofessional nursing	All qualitative data sources (primary and supplementary)
Healthcare Service Delivery	Frontline care and collaboration among professionals	Issues in healthcare services	Community nurses, midwives, policymakers
Youth Engagement	Awareness and participation in Health education needs	Perspectives from adolescents on health-related issues	Adolescent participants
Family and Caregiver Role	Mechanisms with healthcare providers	Insights on family healthcare	Parents
Educational Influence	Teaching roles	Teaching roles for nursing empowerment	School teachers, health college programs
Policy and Governance	Policy and Governance	Policymakers' views on systemic factors influencing	Policymakers, Puskesmas data
Data Collection Methods	Interview narratives of Group discussion themes	Coding for types of data and methodology	Primary data collection process
Primary data collection process	Cultural Community and Interprofessional Collaboration	Cross-cutting themes that emerge across data sources	All data sources

The table above demonstrates that the participant composition comprised 34 individuals representing key stakeholder categories relevant to interprofessional nursing empowerment, including community nurses, adolescents, parents, school teachers, midwives, and local policymakers. This diversity encompasses perspectives on frontline healthcare, youth

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

experiences, family insights, educational viewpoints, maternal and child health, and governance. Data collection methods, including in-depth interviews, group discussions, audio recordings, verbatim transcriptions, and systematic coding using NVivo 14, reflect a rigorous qualitative approach that upholds data integrity and facilitates thematic analysis. Incorporating diverse participant groups enhances the credibility and transferability of the findings through perspective triangulation (Creswell & Poth, 2018). According to Saldana (2021), verbatim transcriptions with systematic coding frameworks support robust thematic development and transparency in qualitative analyses. The table highlights 80 additional qualitative data points from institutional sources, including local public health centers (Puskesmas) and health college programs, collected from May to October 2025. These supplementary data expand contextual understanding by integrating institutional and educational perspectives. The purpose, notes, and timeframe columns highlight the structured planning of participant selection, data collection, and supporting data integration, as well as the systematic analysis focused on developing culturally sensitive interventions. Combining multiple qualitative datasets requires a structured approach to reconcile the different contexts and enhance interpretive insights.

Descriptive Representation of Evidence-based Nursing Practice

The descriptive portrayal of evidence-based nursing practice, as revealed through thematic analysis, provides a comprehensive and detailed understanding of nurses' vital roles in the healthcare system. Fuentealba-Torres et al. (2021) explained that nurses, on the front lines of clinical care, bring invaluable experiential knowledge that bridges the gap between theoretical evidence and real-world applications. These insights highlight how systemic challenges, including insufficient staffing, limited resources, and workflow issues, pose significant obstacles that directly affect the quality of patient care and treatment adherence. This practical understanding highlights the complexity of nursing, where clinical judgment must continually balance organizational constraints with the nuanced needs of individual patients. Nurses practice evidence-based care as a dynamic, ongoing process that integrates scientific research with practical realities, ensuring that care is effective and adaptable to changing circumstances. Central to this practice is the nurses' capacity to balance competing demands: managing acute clinical situations while maintaining a holistic focus on patient-centered outcomes. Their role extends beyond the mere implementation of protocols; it involves the critical appraisal of evidence in real time and the tailoring of interventions to the unique circumstances of each patient and healthcare setting.

The adaptive, evidence-based approach highlights the importance of practical solutions that address both large-scale institutional policies and individual patient needs (Fischer et al., 2021). Nurses practice reflection and continually assess how systemic factors, such as resource distribution, interdisciplinary teamwork, and organizational culture, influence care processes. Evidence-based nursing is not a static adherence to guidelines but rather a responsive practice grounded in frontline realities. Furthermore, nurses play a key role in developing and refining clinical guidelines by providing feedback based on their direct patient care experiences. Their insights into workflow bottlenecks, communication breakdowns, and patient barriers to adherence help inform quality improvement initiatives and policy changes.

The thematic analysis also places nurses within a broader interdisciplinary

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

framework, recognizing their collaboration with community health workers, policymakers, and community members. This interconnectedness highlights the multifaceted nature of evidence-based nursing practice, which extends beyond bedside care to encompass community engagement and health system navigation. Nurses serve as liaisons, translating clinical evidence into culturally sensitive interventions while working alongside community health workers who address social determinants of health and build trust within marginalized populations. Together, these roles support comprehensive, scientifically informed, and socially responsive care strategies for older adults. Additionally, the analysis acknowledges the challenges nurses face in implementing evidence-based practices within evolving healthcare environments characterized by technological advancements, shifting policies, and diverse patient populations (Johnsen et al., 2021). Nurses must continually develop their skills in areas such as continuous learning, critical thinking, and ethical decision-making to effectively manage these complexities. Their practice reflects a commitment to lifelong professional growth and evidence-based reviews, ensuring that nursing interventions remain current, relevant, and aligned with emerging research.

Ultimately, this representation underscores evidence-based nursing practice as an integrative, patient-centered approach that harmonizes empirical evidence, clinical expertise, and contextual understanding. This highlights the pivotal role of nurses in improving healthcare quality and safety, emphasizing the need to address systemic barriers while tailoring care to individual patient needs. This comprehensive portrayal highlights the importance of sustained support for nursing roles through adequate resource allocation, organizational empowerment, and inclusion in policy development, thereby fostering an environment that enables evidence-based nursing to thrive and significantly improve health outcomes.

DISCUSSION

The study was conducted in three remote villages in western Lombok, selected for their challenging accessibility, the presence of active community nurses, and the prevalence of adolescent health issues. These villages provide a context for investigating interprofessional nursing empowerment, encompassing community health dynamics and the practical challenges faced by healthcare providers and residents in underserved areas. This rural setting facilitates an understanding of the factors that influence nursing empowerment. The participant cohort encompassed a diverse range of perspectives relevant to the empowerment of interprofessional nursing. The study comprised 34 participants, including six community nurses; adolescents aged 13–18 years (number unspecified); six community residents who were parents; six nurses serving as caregivers; six community residents in educational roles; three midwives; and seven local policymakers. This diverse participant composition ensured a comprehensive exploration of interprofessional nursing empowerment, integrating clinical, familial, educational, developmental, and policy-related perspectives to enhance the relevance of the findings and support the development of practical, inclusive strategies for empowering nursing professionals and improving community health outcomes (Al Ahmadi et al., 2022).

The three remote villages in West Lombok were selected based on their accessibility, the presence of active community nurses, and the prevalence of adolescent health issues. These villages provide a context for investigating

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

interprofessional nursing empowerment, encompassing diverse community health dynamics and the practical realities faced by healthcare providers and residents in underserved regions. This rural setting facilitates understanding of the factors that influence nursing empowerment. The study also reveals an integrative knowledge of community health that encompasses the perspectives of nurses, community residents, policymakers, and community health workers. This multidimensional lens reflects how social, structural, and professional factors converge to influence health outcomes and the delivery of care. The previous literature, nurses in this study demonstrated that evidence-based nursing (EBN) is not merely the implementation of standardized guidelines but a dynamic, context-responsive process that integrates research evidence, clinical expertise, and patient preferences [(Fuentealba-Torres et al., 2021)]. The participants' reflections reaffirmed that frontline nurses often bridge the gap between theoretical frameworks and real-world care through adaptive clinical decision-making shaped by cultural and systemic realities.

In line with the global health discourse, these findings align with the conceptual frameworks of community-based care emphasized by Agonafer et al. (2021) and Pinto et al. (2020), who stress that sustainable healthcare outcomes can only be achieved through multilevel coordination that simultaneously addresses institutional governance, social determinants, and community participation. The evidence gathered from this study highlights that nurses' capacity to integrate empirical evidence into clinical judgment remains a cornerstone of high-quality and equitable healthcare delivery. Moreover, community health workers (CHWs) play an indispensable role as mediators between healthcare systems and vulnerable populations, facilitating culturally competent interventions and health education programs that improve adherence and trust in health institutions [(Tiase et al., 2022)]. Policymakers in this study articulated challenges consistent with previous findings by Cleary-Holdforth et al. (2021) and Frederickson et al. (2018), noting that evidence-informed governance requires balancing limited resources with increasing population needs. Their accounts reinforced the notion that systemic constraints such as budget limitations, fragmented communication channels, and regulatory inconsistencies often impede the efficient translation of policy into practice. Yet, their perspectives also underscored opportunities for reform through collaborative, evidence-based policymaking. This aligns with Devi et al. (2020), who advocated institutionalizing nurse-led policymaking to strengthen community health systems.

Regulation Evidence-Based Nursing Care Empowerment

Evidence on the regulation and empowerment of evidence-based nursing care highlights integrating regulatory standards with evidence-based practices to enhance nursing autonomy and decision-making. This involves utilizing current, high-quality research and clinical guidelines to guide nursing care within the framework established by healthcare regulations. Nurses are empowered when they apply evidence-based knowledge to meet regulatory requirements and deliver safe, effective, and patient-centered care (Maz-Machado et al., 2024). This empowerment enables nurses to advocate for best practices, improve patient outcomes, and maintain professional accountability under regulatory oversight. Furthermore, it strengthens community healthcare by enabling nurses to implement evidence-based interventions that address local health needs, promote preventive care, and ensure continuity of

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

care across diverse populations (Al Ahmadi et al., 2021). By aligning regulatory compliance with evidence-based strategies, nurses can help create responsive, equitable, and sustainable community health services.

Regulations ensure that evidence-based nursing care is consistently applied by establishing clear standards and expectations for clinical practice (Cleary-Holdforth et al., 2021). They promote ongoing education and competency assessments, enabling nurses to incorporate current research into their patient care practices effectively. This regulatory framework encourages continuous quality improvement, thereby enhancing overall health outcomes across healthcare systems. Collaboration among healthcare professionals is essential for translating the regulatory standards into effective clinical practice. Regulations promote interdisciplinary communication and teamwork, thereby enhancing the adoption of evidence-based interventions. This dynamic process enables adaptive improvements in nursing care, helping to meet the evolving needs of patients and address healthcare challenges. Empowering interprofessional nursing involves promoting collaboration among healthcare professionals by sharing evidence-based knowledge and cultivating a shared understanding of regulations. This teamwork enhances communication, coordination, and collective decision-making, resulting in improved patient outcomes and more efficient healthcare delivery. Nurses empowered in this way actively participate in interdisciplinary teams, advocate for patient-centered care, and support integrated practice models that respect regulatory frameworks while utilizing the strengths of various disciplines.

Regulation evidence-based Nursing Empowerment

Fig. 1. Responses from community health workers: Evidence-Based

In this figure, the joint efforts of nurse-led outreach and Community Health Workers (CHWs) are shown to be essential in increasing engagement, trust, and health outcomes within Regulation-Based Nursing Care. Prentiss et al. (2018) stated that the figure above illustrates that success is achieved through four key components that collectively form a comprehensive, integrated strategy for enhancing community health, as supported by the evidence-based nursing approach. The distinct yet interconnected roles of community health workers and the empowerment of nurse outreach are at the center of this framework. Community Health Workers serve as vital links between healthcare systems and community members, utilizing their cultural understanding and local insights to foster trust and enhance communication. Nurse Outreach Empowerment complements this by providing nurses with specialized training and resources, enabling them to extend their clinical expertise beyond traditional settings and actively engage with at-risk populations. Together, these roles create a synergistic model that combines clinical care with community insights, ensuring that interventions are evidence-based and contextually suitable.

The Enhanced Adolescent Health component focuses on initiatives tailored to meet the specific needs of young people. These initiatives aim to improve access to preventive healthcare services, including vaccinations, health education, and screening programs, while promoting healthy behavior through culturally relevant outreach strategies. By prioritizing adolescent health, the framework aims to

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

establish healthy habits and reduce the incidence of chronic conditions, ultimately promoting a healthier future for adolescents. Policy-driven nursing provides an essential structural and regulatory foundation for the effective implementation of care strategies. This component involves developing policies that allocate resources, standardize care protocols, and ensure accountability in nursing practices. By integrating nursing initiatives within a strong policy environment, this element guarantees the sustainability and scalability of interventions across healthcare settings. The elements in the figure demonstrate how Policy-Driven Nursing facilitates systematic implementation and resource advocacy, promoting sustainable improvements in community health (Fischer et al., 2021; Johnsen et al., 2021; Scott & Scott, 2020). The integration of nurse-led outreach, community health workers, adolescent-focused initiatives, and culturally sensitive engagement creates a responsive model that addresses immediate health concerns while building resilient healthcare networks that adapt to changing community needs, ultimately contributing to equitable health outcomes and a stronger public health infrastructure. The figure highlights the crucial role of culturally sensitive direct community responses in enabling timely interventions and effective communication. This acknowledges the importance of respecting cultural values, traditions, and languages in health outreach, thereby enhancing community receptivity and participation in health programs. Direct community responses enable the rapid identification of emerging health issues and the development of tailored messaging that resonates with specific populations, thereby enhancing adherence to health recommendations and fostering mutual respect between health care providers and community members.

Integration with Global Health and Policy Priorities

The integration of findings with global health priorities reveals strong alignment with the Sustainable Development Goals (SDG 3), which aims to ensure healthy lives and promote well-being for all at all ages. The study's emphasis on adolescent health, policy-driven nursing, and culturally responsive community engagement contributes directly to the broader goal of achieving Universal Health Coverage (UHC). By embedding nursing leadership within health governance structures, the study supports the WHO's agenda to optimize human resources and decentralize primary healthcare.

Policy implications are particularly relevant for health systems reform. The study calls for the institutionalization of nurse-led policymaking bodies and interdisciplinary task forces that promote evidence-based governance. As Fischer et al. (2021) and Johnsen et al. (2021) argue, empowering nurses to participate in regulatory decision-making fosters innovation and enhances the adaptability of healthcare systems. Furthermore, the integration of CHWs into nurse-led outreach models ensures that care delivery remains grounded in community realities, while policy frameworks guarantee sustainability and scalability. This dual approach, combining grassroots empowerment with top-down policy reinforcement, provides a robust foundation for building resilient health systems that can effectively address emerging public health challenges.

Global Implications and Future Directions

At the global level, this research highlights the necessity of cross-border collaboration in nursing education, research, and policy development. The insights derived from this

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

study are transferable to international contexts facing similar disparities in access to health care, particularly in low-resource settings. Future nursing research should prioritize transnational partnerships that facilitate comparative analyses of regulatory frameworks and their impacts on evidence-based nursing outcomes. Further, the collaborations could advance the standardization of implementation across diverse cultural and economic settings. Additionally, future studies should incorporate technological innovations such as digital health platforms and tele-nursing systems to enhance the reach and impact of community-based interventions. The integration of digital tools with evidence-based nursing practice can support real-time data collection, improve care coordination, and promote health equity, especially in remote or underserved populations.

Participants Role	Primary Contribution
Nurses	Provide clinical expertise, implement evidence-based decision-making, and ensure patient-centered care that bridges research and real-world applications.
Community Health Workers	Act as intermediaries between healthcare systems and marginalized populations; promote health education, cultural sensitivity, and community trust.
Policymakers	Develop and implement health policies, allocate resources effectively, and ensure accountability and regulatory compliance in healthcare governance.
Community Residents	Offer lived experiences and socio-cultural perspectives that reveal health determinants related to housing, employment, education, and environment.

Table 2: Contribution of Participants

The transformative stakeholder contribution of evidence-based healthcare interventions hinges on the dynamic collaboration of diverse stakeholders, each bringing unique expertise and perspectives to every stage of research and practice. Nurses stand at the forefront as clinical experts, wielding evidence-based decision-making to ensure care remains unwaveringly patient-centered. Their indispensable role bridges the gap between research findings and tangible clinical outcomes, elevating the quality and safety of healthcare delivery worldwide. Community Health Workers (CHWs) emerge as crucial conduits between healthcare systems and marginalized populations, fostering cultural competence, health literacy, and trust within communities (Munyaneza et al., 2025). Their involvement is not only beneficial but also essential for strengthening health equity and expanding the reach of preventive care.

A compelling study underscores that early and continuous stakeholder engagement, particularly with CHWs, significantly enhances the sustainability and adoption of evidence-based interventions, especially in low-resource settings. Policymakers wield the power to shape the macro-level implementation environment by transforming scientific evidence into actionable policies. Through strategic resource allocation, robust regulatory frameworks, and stringent accountability mechanisms, policymakers ensure that healthcare governance is firmly aligned with evidence-based standards. Their collaboration with researchers and healthcare practitioners accelerates the

adoption of policies and the national scale-up of proven interventions. According to Jason et al. (2024), residents and patient groups provide invaluable socio-cultural insights that contextualize health determinants, such as education, environment, and employment, ensuring that interventions are not only socially responsive but also locally sustainable. Participatory approaches that integrate community voices into implementation planning have been unequivocally shown to enhance both acceptability and the long-term impact of the program. The time to act is now; the evidence is clear, and the path forward is undeniable.

Limitations of the Study

This study acknowledges several limitations. The sample size of 34 participants restricts the generalizability of the findings to other rural areas in West Lombok, Indonesia. The data obtained from villages in western Lombok may not accurately represent conditions in other regions, and the study's cross-sectional design may fail to capture long-term effects on adolescent health. Resource limitations impacted data collection, and the lack of control groups complicates the establishment of causal relationships between policies and outcomes. The interpretation of qualitative data may lead to measurement inaccuracies, and the emphasis on nursing empowerment policies may overlook the contributions of other healthcare providers. The limited examination of technology results in an incomplete understanding of the impact of digital tools. Future research should aim to include larger sample sizes, expand the geographic scope, employ longitudinal designs, and integrate technology to evaluate the effects of nursing empowerment. This approach enhances the analysis by contextualizing health behaviors within a social framework, highlighting the interplay of structural, cultural, and clinical factors.

The study's combination of nurses' insights, residents' experiences, and policymakers' perspectives offers a holistic view of health systems. Nevertheless, the small sample size (n = 34) constrains generalizability. As participants were drawn from a single community, there may be selection bias influenced by local norms. Despite efforts to ensure representativeness, self-reported data may have introduced biases. Future research should expand sample sizes and employ longitudinal designs to evaluate the sustainability of strategies and their impact on community health outcomes.

Contribution to Global Nursing Practice

This research has a significant impact on global nursing by demonstrating how evidence-based nursing (EBN), when combined with policy and community engagement frameworks, can transform equitable healthcare. The findings underscore the evolving roles of nurses as caregivers, advocates, educators, and innovators. By integrating research, regulation, and practical experience, nurses can positively impact patient outcomes and inform policy, effectively bridging the gap between practice and governance. The study offers insights into developing evidence-based policies for resource-constrained rural areas, such as Indonesia's West Nusa Tenggara Province. For global nursing empowerment policies to be effective, they must align with local norms and resources. The research emphasizes the importance of empowering nurses through autonomy and policy support in addressing adolescent health issues. The findings advocate for policies that elevate the status of nurses and involve them in the creation of health programs. The study identifies the underutilization of technology in nursing

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

and recommends the use of digital tools to support evidence-based decision-making. It emphasizes the need for multidisciplinary collaboration among healthcare providers to optimize resources in environments with workforce shortages. The study informs nursing policy reforms through evidence-based, culturally sensitive strategies, identifying gaps in community involvement and technology use. However, focusing solely on nursing empowerment policies might overlook the contributions of other healthcare providers, and exploring technology leaves gaps in understanding the role of digital tools in empowering rural nursing.

Regulatory empowerment is crucial, underscoring the need to align evidence-based nursing with standards that support autonomy and accountability. Consistent with Maz-Machado et al. (2024) and Al Ahmadi et al. (2021), the study demonstrates that when nurses apply evidence-based knowledge within clear regulatory frameworks, they enhance patient safety and promote health equity. This empowerment enables nurses to act as decision-makers, shaping preventive strategies beyond hospital settings. Additionally, this study highlights that global nursing practice benefits from models that integrate nurse-led outreach, community participation, and policy development. This model aligns with international frameworks, such as the WHO's Global Strategic Directions for Nursing and Midwifery (2021–2025), which advocate for strengthening leadership and fostering interprofessional collaboration. By situating nursing practice within regulatory and community contexts, this research provides a blueprint for implementing evidence-based interventions in low- and middle-income settings. It illustrates how global nursing can address challenges through culturally sensitive, evidence-informed approaches.

Conclusion

This study highlights the vital role of empowering nursing policies in enhancing adolescent health outcomes in rural Indonesia. By fostering nurse autonomy, promoting continuous professional development, and encouraging collaborative practice within supportive organizational frameworks, these policies enable nurses to address complex health issues effectively and creatively. The combination of evidence-based nursing, active community participation, policy advocacy, and technological progress creates a responsive healthcare setting that addresses both clinical and broader social factors that affect health. Breaking down systemic barriers through inclusive, participatory policymaking and ongoing evaluation ensures that health interventions remain culturally appropriate, adaptable, and sustainable, tailoring them to the unique socioeconomic and demographic contexts of rural communities.

Addressing systemic barriers through inclusive participatory policymaking and ongoing evaluation ensures that health interventions remain flexible, culturally appropriate, and responsive to the community's changing needs. Empowering nurses to design and implement care strategies tailored to the social, economic, and demographic realities of their communities bridges gaps in healthcare equity, particularly in resource-limited rural areas, where disparities are more pronounced. Continued investment in nursing education, leadership development, and capacity building equips nurses with advanced clinical and managerial skills, enabling them to handle increasingly complex healthcare demands and adopt innovative, evidence-based solutions. Additionally, fostering interdisciplinary collaboration among healthcare providers, policymakers, and community stakeholders

JURNAL ILMIAH ILMU KESEHATAN
Jln. Swakarsa III No. 10-13 Grisak Kekalik Mataram-NTB.Tlp/Fax. (0370) 638760

enhances the impact of adolescent health initiatives by promoting integrated, holistic approaches that encompass prevention, early detection, treatment, and psychosocial support, all tailored to adolescents' developmental stages and cultural backgrounds. Ultimately, advancing equitable, adolescent-focused healthcare in rural Indonesia relies on the continued strengthening of nursing roles through robust policy support, comprehensive professional development, and effective partnership-building. This integrated approach not only improves immediate health outcomes but also boosts the resilience, responsiveness, and overall effectiveness of rural health systems.

Positioning nurses as key leaders and advocates ensures that adolescent health services are sustainable, locally relevant, and adaptable to emerging health challenges and demographic changes. An ongoing commitment to empowering nursing practice, supported by technological innovation, community involvement, and policy advocacy, is crucial for shaping a sustainable future that prioritizes adolescent and community health. To improve interprofessional nursing policy, this study recommends: (1) enhancing nurse autonomy through policies that promote decision-making and establish shared governance for policy development. (2) Incorporating evidence-based practices by aligning nursing efforts with community engagement and supporting initiatives that address health disparities.

Recommendations

The empowering interprofessional nursing policy entails several recommendations and policy implications, including: (1) Enhancing Nurse Autonomy and Shared Governance by developing policies that promote nurse autonomy in clinical decision-making and organizational participation. Establish shared governance structures that involve nurses in policy development, resource allocation, and quality improvement, thereby fostering ownership and improving care quality and job satisfaction. (2) Integrating Evidence-Based Practices with Community Engagement by formulating policies that facilitate the systematic integration of evidence-based nursing with active community participation. Support nurse-led, culturally sensitive interventions and health education to build community trust, enhance service utilization, and ensure sustainability. Empower nurses to advocate for interventions that address these determinants, thereby reducing disparities and promoting equity.

Author Contribution

Chairun Nasirin, Arizky Farinsyah Pratama, and Akbar Dwifarin Nugraha contributed to the study's design and implementation. Chairun Nasirin also contributed to the analysis of the results and writing of the manuscript. Akbar Dwifarin Nugraha and Arizky Farinsyah Pratama conceived and supervised this study.

Conflict of Interest

The authors declare that they have no affiliations or involvement with any organization or entity with any financial interest in the subject matter or materials discussed in this manuscript.

Data availability

All necessary data are presented in this manuscript, and further specific requests are available from the corresponding authors upon reasonable request.

Funding/ Support

The authors received no financial support for the research, authorship, or

publication of this article.

Ethical Statement:

This study adhered to ethical guidelines and obtained approval from the ethics committee for all procedures involving human participants. Participants were informed of the study's objectives and potential risks before providing their consent. Participation was voluntary, with the right to withdraw at any time. Confidentiality was ensured through data anonymization and secure storage. The study was conducted in accordance with the principles of the Declaration of Helsinki. The authors declare no conflicts of interest.

ORCID iD.

1. Chairun Nasirin, https://orcid.org/0000-0002-2766-8858
2. Arizky Farinsyah Pratama: https://orcid.org/0009-0002-4526-9196
3. Akbar Dwifarin Nugraha: https://orcid.org/0009-0005-6692-768X

References

Article Journals

Afulani, P. A., Nutor, J. J., Agbenyo, F., & Kofie, P. (2021). Empowering nurses through health system redesign: A qualitative study in rural Ghana. *BMC Health Services Research, 21*(1), 1–12. https://doi.org/10.1186/s12913-021-06138-6

Agonafer, E. P., Carson, S. L., Nunez, V., Poole, K., Hong, C. S., Morales, M., Jara, J., Hakopian, S., Kenison, T., Bhalla, I., Cameron, F., Vassar, S. D., & Brown, A. F. (2021). Community-based organizations\u2019 perspectives on improving health and social service integration. BMC Public Health, 21(1). https://doi.org/10.1186/s12889-021-10449-w

Al-Qahtani, B. (2024). Global Health Nurses and Healthcare Providers in Addressing Health Disparities. Power System Technology, 48(3), 1466–1476. https://doi.org/10.52783/pst.1449

Al Ahmadi, S. A. M., Alraddadi, A. S., Alharbi, M. S. S., Alsulaiman, A. L., Al-Shuwayman, A. A., Al-Qarni, F. K. A., Al-Shahri, S. B. S. M., Alhejaili, S. E. F., Aldawsari, H. F. H., Al Qahtani, M. M., Saeed, S. M. B., Almzairie, K. A., & Almughathawi, A. S. (2022). Empowering community health workers: Navigating opportunities and challenges in a transformative era. International Journal of Health Sciences, 6(S10), 1992–2002. https://doi.org/10.53730/ijhs.v6ns10.1528

Bhattacherjee, S., Datta, S., & Das, D. K. (2022). Impact of menstrual hygiene education on school girls: A rural-based intervention study in India. *Journal of Family Medicine and Primary Care, 11*(3), 1250–1256. https://doi.org/10.4103/jfmpc.jfmpc_1165_21

Cleary-Holdforth, J., O'Mathúna, D., & Fineout-Overholt, E. (2021). Evidence-Based Practice Beliefs, Implementation, and Organizational Culture and Readiness for EBP Among Nurses, Midwives, Educators, and Students in the Republic of Ireland. Worldviews on Evidence-Based Nursing, 18(6), 379–388. https://doi.org/10.1111/wvn.12543

Devi, R., Wright, J., Goodman, C., Dalkin, S., Bate, A., Spilsbury, K., & Jones, L. (2020). Attracting, recruiting and retaining nurses and care workers working in care homes: the need for a nuanced understanding informed by evidence and theory. Age and Ageing, 50(1), 65–67.

https://doi.org/10.1093/ageing/afaa109

Dols, J. D., Aguillon, V., Hernandez, A. D., Allen, D., Kloewer, T., & Ramirez, M. N. (2021). Impact of Evidence-Based Charge Nurse Education on Charge Nurse Skills and Nurse-Specific Metrics. JONA: The Journal of Nursing Administration, 51(12), 630–637. https://doi.org/10.1097/nna.0000000000001086

Fuentealba-Torres, M. Á., Cartagena, D., Lagos Sánchez, Z., & Alves De Araújo Püschel, V. (2021). Systematic Reviews to Strengthen Evidence-based Nursing Practice. Aquichan, 21(4), 1–15. https://doi.org/10.5294/aqui.2021.21.4.5

Fischer, M., Zionts, D., Brown-Johnson, C. G., Safaeinili, N., Haverfield, M. C., & Zulman, D. M. (2021). Approach to Human-Centered, Evidence-Driven Adaptive Design (AHEAD) for Health Care Interventions: a Proposed Framework. Journal of General Internal Medicine, 36(4), 1041–1048. https://doi.org/10.1007/s11606-020-06451-4

Johnsen, S. K., Voss, M., & Simonds, M. (2021). Implementing Evidence-Based Practices in Gifted Education. Routledge. https://doi.org/10.4324/9781003235729

Jason, L. A., Bell, J. S., & Bobak, T. J. (2024). Positive Associations between Women's Employment at the Community-Level and Opportunities and Interpersonal Sharing within Recovery Homes. Sustainability, 16(15), 6551. https://doi.org/10.3390/su16156551

McCreery, M. P., Krach, S. K., Head, D. L., Fiorentini, J. P., & Leif, S. A. (2022). Data-Triangulation Through Multiple Methods (pp. 90–115). Igi Global. https://doi.org/10.4018/978-1-6684-2468-1.ch005

Morgan, H. (2024). Using Triangulation and Crystallization to Make Qualitative Studies Trustworthy and Rigorous. The Qualitative Report. https://doi.org/10.46743/2160-3715/2024.6071

Maz-Machado, A., Dalagkozi, P., Caicedo-Quiroz, R., & Valenzuela, G. L. (2024). Nurses' Satisfaction with Lifelong Learning Educational Programs and How They Apply New Knowledge in Their Daily Nursing Practice. Revista de Gestão Social e Ambiental, 18(8), e06544. https://doi.org/10.24857/rgsa.v18n8-111

Munyaneza, E., Umutesi, V., & Imanishimwe, A. (2025). Exploring the Role of Community Health Workers in Improving Surgical Care Outcomes and Research in Rwanda: A Mixed-Methods Study, 2023. Rwanda Public Health Bulletin, 6(2), 36–44. https://doi.org/10.4314/rphb.v6i2.1

Ogbolu, Y. (2022). Nurses' Role in Addressing Social Determinants of Health: A Case Study on the Social Determinants of Health Taskforce of Baltimore City. Journal of Addictions Nursing, 33(3), 198–199. https://doi.org/10.1097/jan.0000000000000474

Paethrangsi, N., Jandaboue, W., Teekasap, S., & Khiewpan, R. (2024). Empowering Students' Autonomous Learning through Self-regulation, Metacognitive Strategies, and Collaborative Learning Environments. Journal of Liberal Arts RMUTT, 5(1), 69–79. https://doi.org/10.60101/jla.2024.5.1.4065

Pinto, D., Heidig, M., Turchi, R., Carroll-Scott, A., & Christmas, T. (2020).

Community health workers: improving population health through integration into healthcare systems. Current Opinion in Pediatrics, 32(5), 674–682. https://doi.org/10.1097/mop.0000000000000940

Prentiss, T., Tanniru, M., Zervos, J., & Tan, J. (2018). Community Health Workers (CHWs) as Innovators. International Journal of Healthcare Information Systems and Informatics, 13(1), 15–28. https://doi.org/10.4018/ijhisi.2018010102

Rani, B., Thakur, S., & Srivastava, S. P. (2023). Exploring the role of nursing in addressing social determinants of health. International Journal Of Community Medicine And Public Health, 10(11), 4497–4501. https://doi.org/10.18203/2394-6040.ijcmph20233501

Sampson, M., Knupp, A., Chignolli, H., Dhakal, K., Bulkowski, K., Perdue, J., Warren, S., & Zellefrow, C. (2024). Strategies for incorporating evidence-based practice into nurse residency programs: A scoping review. Worldviews on Evidence-Based Nursing, 21(4), 407–414. https://doi.org/10.1111/wvn.12720

Sarwatt, A. C., Charles, A. M., & Yusuf, O. M. (2025). Effectiveness of Decentralisation by Devolution Approaches in Public healthcare services Delivery in Ilala Municipal Council and Geita Town Council, Tanzania. Eastern African Journal of Humanities and Social Sciences, 4(1), 108–117. https://doi.org/10.58721/eajhss.v4i1.904

Scott, S. M., & Scott, P. A. (2020). Nursing, advocacy and public policy. Nursing Ethics, 28(5), 723–733. https://doi.org/10.1177/0969733020961823

Tiase, V., Valu, M., Crookston, C. D., & Schoenbaum, A. (2022). Nurses' role in addressing social determinants of health. Nursing, 52(4), 32–37. https://doi.org/10.1097/01.nurse.0000823284.16666.96

Shaw, R. J. (2023). Access to Technology and Digital Literacy as Determinants of Health and Health Care. Creative Nursing, 29(3), 258–263. https://doi.org/10.1177/10784535231211682

Yusuf, S. (2025). Contemporary Nursing as a Dynamic Response to Evolving Health Challenges. Indonesian Contemporary Nursing Journal (ICON Journal), 10(1), 1-2. https://doi.org/10.20956/icon.v10i1

Books

Creswell, J.W., & Poth, C.N. (2018). Qualitative Inquiry and Research Design: Choosing Among Five Approaches. Sage Publications. Administration

Frederickson, H. G., Smith, K. B., Larimer, C., & Licari, M. J. (2018). The Public Administration Theory Primer: Routledge.

Miles, M. B., Huberman, A., Saldana, J. (2019). Qualitative Data Analysis: A Methods Sourcebook.

Electronics:

World Health Organization. (2021). *Global standards for quality healthcare services for adolescents*. Geneva: WHO Press. https://www.who.int/publications/i/item/9789240017899