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## Antinomy Settlement Of Legal Interest Between Autonomous Rights And Obligations Of Health Services: The Case Of Refusals Of COVID-19 Vaccine in Indonesia

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### Abstract

This study aimed to determine the legality of implementing COVID-19 vaccination and the individuals' independent right to reject it. A normative juridical approach, which entails primary legal materials (laws) and secondary legal materials (health and medical law literature) was used and the legal materials were analyzed qualitatively. Furthermore, the set standards on the two legal interests in the implementation of the COVID-19 vaccination were analyzed. The results showed that the vaccination process focuses on the health services obligation rather than on maintaining autonomous rights over the body. This is in line with the academic approach that follows altruistic philosophy, the principle of public interest, the theory of the welfare state law, and the proportionality of legal restrictions on rights in-laws and regulations. Furthermore, legislators should enact laws that govern vaccination. The vaccines should be administered per the village and neighborhood using trained and medical specialists.

Keywords— COVID-19 Vaccination, Health Services, Autonomous Rights.

### Introduction

The Deputy Minister of Law and Human Rights, Eddy O.S. Hiariej, was quoted by several electronic and print media stating that “criminal sanctions and fines can be imposed on those who continue to refuse the COVID-19 vaccination.” The minister’s sentiment was in line with Article 39, paragraph 1 of Law No. 6 of 2018 concerning Health Quarantine. This law states that “everyone who does not comply with or hinders the implementation of health quarantine from causing a public health emergency can be punished with a maximum imprisonment of one year and/or a maximum fine of IDR 100 million.” Moreover, Article 9 Junction Article 15 paragraph 2 letter of the Health Quarantine Act, states that everyone is obliged to comply with the implementation of health quarantine, including vaccination (Government of Indonesia, 2018).

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The government has also raised the punishment for refusing vaccination as a final remedy (*ultimum remedium*) to provide the last alternative in the pattern of implementation. It continues to prioritize administrative sanctions, seen by implementing the Large-Scale Social Restriction program (Adam et al., 2021; Kurniawati, Rochmah, & Laksono, 2020). To help the anti-vaccination groups understand why vaccination is mandatory, the Indonesian government must rationally have an open dialogue regarding this issue.

This study uses a philosophical, theoretical, and juridical-based approach to examine the correct course of action. Furthermore, the government can accelerate smooth COVID-19 vaccination in Indonesia by encouraging the philosophy of socialization among its ordinary citizens (Mottelson et al., 2021). The philosophy will encourage them to save themselves through government-based vaccination to save their loved ones from COVID-19 transmission.

A thorough search of the relevant literature on legal implication of declining to get the COVID-19 vaccination in Indonesia yielded no result; nevertheless, various studies have been conducted on how the COVID-19 pandemic was handled. Kurniawan (2021) examined the human rights approach to dealing with the COVID-19 pandemic, with a particular emphasis on the need of adopting Large-Scale Social Restrictions (PSBB) programs. Additionally, Handini (2021) employed a human rights perspective to examine government policies related to the COVID-19 pandemic, with a particular emphasis on health and safety insurance rights for health professionals. The study established that these rights were not achieved as a result of the complexity of local government bureaucracy and uneven distribution of Personal Protective Equipment (PPE).

Supriyadi (2020) analyzed government policies in dealing with the COVID-19 pandemic from a forecast perspective. This research found that the government had failed to advocate for people's welfare. Basic needs were not fully addressed, and the legal framework for financial management in handling the COVID-19 pandemic was not yet complete. These frameworks could govern the use of budget during the pandemic without civil and criminal liability to avoid unnecessary errors. Furthermore, Maikel (2021) examined the effects of refusal to abide by health protocols during the COVID-19 pandemic and the normative application of criminal sanctions. However, it failed to conduct a diametrical study on two legal interests used in government health services for the COVID-19 prevention.

The above studies, however, did not focus on the antinomy of legal interest in the administration of COVID-19 vaccination. Therefore, this research was necessary to streamline government programs in facilitating COVID-19 vaccination. The study established the reasons for prioritizing health services obligations to carry out vaccination while justifying reasons or exceptions for autonomous rights to resist the vaccine when medical reasons apply.

## Research Method

### Research Type

This research is normative juridical research that employs a conceptual approach (Marzuki, 2010). It heavily relies on the theoretical study of the existing literature by connecting the problems to the subject of discussion. Additionally, the research

analyzed legal issues, such as the antinomy of legal interests between autonomous rights over the body and health service obligations when refusing to COVID-19 Vaccine.

### Legal Material

This research used primary<sup>10</sup> and secondary legal materials, with the former including the 1945 Constitution, Law Number 36<sup>17</sup> of 2009 concerning Health, Law Number 39 of 1999 concerning Human Rights, and Presidential Regulation Number 14 of 2021 on the Amendments to Presidential Regulation Number 99 of 2020. The presidential regulation was formulated to guide the Vaccination Procurement and Implementation to help citizens cope with the COVID-19 pandemic. In contrast, the secondary legal materials were literature related to health and medical law.

### Analysis

The research used qualitative analysis when examining the legal materials by describing the legal antinomy between the autonomous right to the body and the obligation of health services in the administration of COVID-19 vaccination. The study also used a legal conceptualization to obtain the main legal interest and justify one's right to refuse the administration of COVID-19 vaccination.

### Analysis and Discussion

#### • Prioritizing Obligations of the Health Service by the State about the Autonomous Right to Refuse COVID-19 Vaccines

COVID-19 has affected people's lives for the last two years as it transmitted across the globe. By January 28, 2021, there were 87,640,097 positive cases, with 1,890,847 deaths in over 215 countries in the world (Kurniawan, 2021). In addition, the emergence of the new "Delta" variant in India, Indonesia, and the surrounding countries have dealt a huge blow to the people (Alexandar et al., 2021). The statistics from the Task Force on the Acceleration of COVID-19 (Kemenkes, 2021) show that the cumulative positive cases in July 2021 were 3,409,658. Most of these cases were from the new variant that killed many people in India (Sasikumar et al., 2020). The rise in infection after normalizing the curve saw the government issue restrictive policies, such as the Community Activities Restrictions Enforcement (PPKM) program to reduce virus transmission.

Indonesia may manage the spread of the new variant due to the available vaccines from other countries. The vaccine arrival and quick implementation could help curb the spread and the effects of the new variant. Data from the Ministry of Health indicate that a total of 21,496,995 have been vaccinated to date (August 3, 2021). This accounts for 44.64% of the eligible population (48,148,817 people). The data is encouraging, with many Indonesians eager to participate in vaccination, as witnessed in long queues in private and public institutions. Nevertheless, some still refuse vaccination, even though the state bears the cost.

People are refusing vaccines for many reasons, including juridical reasons, religious reasons, and others who suspect the material to be *haram* (prohibited). Additionally, others refuse vaccination for safety reasons, fearing it will affect their health and result in death. The major legal challenge the state is facing towards vaccination is that

everyone has autonomous rights over their bodies (Samsi & Jacobalis, 2005). The autonomous right to one's body is a fundamental human right that should not be interfered with unless there is a strong argument to do so (Brennan, Carr, & Cousins, 2007; Office of the High Commissioner Human Rights, 2011).

The citizens' autonomous rights are included in Article 28 G paragraph 1 of the 1945 Constitution, which states that "Everyone has the right to protect personal, family, honor, dignity, and property under his control. This basic law also alludes to the right one has for a sense of security and protection from the threat of fear to do or not do something, considered a human right." Moreover, Article 5 paragraph 3 of Law no. 36/2009 on health shows that "everyone has the right to independently and responsibly determine the health services needed for them."

The autonomous rights referred to in the above laws do not stand alone in the legislation. These laws should be read with consideration to legal provisions mandating the state to form health service policies for every citizen. For instance, Article 34, paragraph 3 of the Constitution states that "The state is responsible for the provision of proper health care facilities and public service facilities." Article 14, paragraph 1 of Law no. 36/2009 on health also affirms that "The government is responsible for planning, regulating, organizing, fostering, and supervising the implementation of equitable and affordable health efforts for the community."

Based on the two legal paradigms mentioned above, there are two incompatibilities of legal interest between autonomous rights and health service obligations. The question implementers are which part of the legal interest should take precedence against the refusal of COVID-19 Vaccine? The research ascertains that the obligation of health services takes precedence over the autonomous right to body based on the following arguments:

First, it is based on an altruistic philosophical approach, which promotes togetherness between communities by providing help to others without expecting any favors (Fraser & Sterelny, 2015; Li, 2021). This philosophy is closely related to the flow of utilitarianism (Mitchell, 1987), considered the precedence to the principle of expediency, as popularized by Jeremy Bentham (Quinn, 2017). The purpose of this law aims to provide happiness for as many people as possible. The study observed that this flow is not the result of social interaction but is innate from a person's birth. Everyone is born with the desire to preserve their life and endowed with good qualities to positively contribute to the surrounding environment. Therefore, the anti-COVID-19 stand pegged on the autonomous right on one's body may not be just if it endangers others. A person's right to their body should be inextricably linked with the external obligation to do good for others. It means that one's independence over the body cannot be used as an excuse to refuse the COVID-19 Vaccine without a basic reason since they should radiate kindness in protecting their surroundings. It is understood that the autonomous right to one's body and the state's obligation to provide health services are needed by human beings; therefore, they are integral units that cannot be separated from each other.

Second, it is based on the theory of the welfare state law, which carries the material law and the people's welfare. This law obligates the state to advance people's welfare through services, assistance, protection, and the prevention of social problems (Elviandri, 2019). The government's approach agrees with an old saying, "Salus

*Populi suprema lex exsto*," used by monarch state. The saying can also be applied in a democratic government when it applies strict rules during an emergency (Faiz, 2020). For example, the government issues strict regulations during COVID-19, such as the Presidential Decree No. 12 of 2020 concerning the Determination of Non-Natural Disasters for the Spread of Corona Virus Disease 2019 (COVID -19) as a National Disaster.

The Indonesian government has issued policies to curb COVID-19 transmission and to provide health services through vaccines. A person infected by the coronavirus loses his autonomous right to the body and becomes of public interest. The government takes over the responsibility of providing essential health services for the public good. In theory, this law is derived from various state policies due to its obligation to prevent and curb the transmission of the COVID-19. These policies include regional quarantine (Aviariska, 2020), Large-Scale Social Restrictions (PSBB) (Suraya et al., 2020), and the Community Activities Restrictions Enforcement (PPKM) (Ilyas, 2021).

Third, the law is formulated using the legal principle approach. The principle used to bridge the antinomy of legal interest between the autonomous right to the body and the obligation to provide health services concerning the administration of the COVID-19 vaccination prioritizes public interest over personal interest (*Bonum commune Bono private preferred debet*). Public interest is defined in Article 10 paragraph 1 letter G of Law Number 30 of 2014, which states that "the principle of public interest prioritizes the public welfare and benefit through aspirational, accommodating, selective, and not discriminatory laws." This definition indicates that public interest can be determined through people's will and by prioritizing services fairly when implementing public policies. The understanding of public interest obligates a citizen in contact with health services to implement COVID-19 vaccination to create a healthy life and environment. The reasoning behind this policy is that COVID-19 vaccination should be prioritized if it does not threaten the body, thus dismissing vaccine resistance that uses the autonomous right to the body. The study observed that defending autonomous rights often results in loss of lives, but following government direction on vaccination saves others' lives.

Fourth, the policies follow the juridical approach, resulting from the philosophical and theoretical reasoning of developing norm texts or imperative clauses (Hart, 1994). The statutory regulation that covers right formulation talks about citizens' rights and formulating known restrictions and obligations that should be fulfilled. These obligations and restrictions meet with the original rights that have been normalized at this time. Though Article 28 G paragraph 1 of the 1945 Constitution recognizes that everyone has autonomous rights over their bodies, these rights are limited through (Article 28 J paragraph 2 of the 1945 Constitution. The limitation guarantees the "recognition and respect of others' rights and freedoms by justly considering religious values, morals, security, and public order in a democratic society." Additional laws include Law Number 39 of 1999 on Human Rights highlighted in Article 69 paragraph 1, which states that: "Everyone is mandated to respect other people's rights, morals, ethics, and the order of life in society, nation and state." Furthermore, Article 69 paragraph 2 also emphasizes that: "Every human right creates a basic obligation and responsibility to respect the rights of fellow humans in return and that the Government must respect, protect, uphold and promote those rights."

This paper aims to adopt restrictions on people's rights while considering their obligations. The autonomous right over one's body cannot take precedence over health care obligations since the body in question can also injure other human bodies through a virus or pathogen transmission. The basis for this reasoning is that the virus hiding in an autonomous body cannot be made autonomous. Therefore, the state will follow the laws as stipulated in Article 28 H paragraph 1 of the 1945 Constitution, which states that: "Everyone has the right to live in physical and spiritual prosperity, in a good and healthy living environment and the right to health services." The "everyone" as used in this statute does not refer to an Individual but a community. Article 34, paragraph 3 of the 1945 Constitution guarantees everyone's interest in obtaining health services when talking about the general population. Additionally, Article 152 paragraph 1 of Law Number 36 of 2009 concerning Health highlights the state's responsibility in providing health services, stating that: "The government, local government, and the community are responsible for preventing, controlling, and eradicating infectious diseases and their consequences."

The laws we have discussed show that the state's response to COVID-19 through policies in Indonesia is more valuable in providing health care obligations than the autonomous right to the body. The government's effort in making the COVID-19 Vaccine available should also be considered. Since the Vaccine is costly to produce, the Indonesian government has imported different types, including Sinovac, AstraZeneca, Sinopharm, Moderna, Pfizer, and Sputnik.

Nevertheless, the government should accelerate research in producing domestic Vaccines. Some stride is already being made with the emergence and development of the current Merah Putih vaccine through a collaboration between the Ministry of Research and Technology/National Research and Innovation Agency (Kemenristek/BRIN) with the Ministry of Health. This domestic Vaccine will help distant villages after pre-clinal and clinal trial periods, helping prevent the spread of the virus to remote areas.

The vaccination process can be hastened by following the pattern set by elections, which takes only one day for the entire country. Instead of polling stations (TPS), the vaccine team can use Vaccine implementation place (TPV), vaccinating 100 people per TPV a day. The health workers who inject the Vaccine into everyone can be recruited from some students in the health and medical faculties by providing them with education and technical guidance before going into the field.

#### • **Justification for the Enactment of the Autonomous Right to Refuse the Covid-19 Vaccine**

The state's implementation of a COVID-19 vaccine in accomplishing its obligation for providing health services is for the common good of all people. Legal science provides a balance point in implementing public policies without ignoring the essential rights of everyone.

According to the prevailing medical research, certain vaccines, such as Sinovac, cannot be given to people, including those who have a confirmed history of COVID-19, pregnant and lactating women, individuals under 18 years of age, those experiencing ARI symptoms such as cough/cold/shortness of breath in the last seven days, and those with blood pressure above 140/90. It should also not be given to people that have family members who are in close contact with or undergoing treatment due to COVID-19

disease, those under long-term active therapy for blood disorders, Systemic Autoimmune disease (SLE/Lupus, and have heart disease (heart failure/coronary heart disease). Additionally, individuals with Sjogren's, kidney disease, hypothyroidism due to autoimmune disease, Rheumatoid Arthritis, blood disorders, chronic digestive tract disease, cancer, and immune deficiency should not be vaccinated with Sinovac. Research is also indicated that recipients of blood products/transfusions, those with Diabetes mellitus, have HIV (in certain conditions, the COVID-19 Vaccine can be given), have lung diseases such as asthma, COPD, and have tuberculosis should not be vaccinated with Sinovac (Fadlyana et al., 2021; World Health Organization, 2021).

Article 13, paragraph 3 of the Presidential Regulation Number 14 of 2021 on the Amendments to Presidential Regulation Number 99 of 2020, covers the rights of those who experience side effects of the COVID-19 Vaccine. The amendment done on the Vaccination Implementation in the Context of COVID-19 Pandemic Prevention (Last Amendment with Presidential Regulation No. 51/2021) states that "the target recipients of the COVID-19 Vaccine who do not meet the criteria are excluded from the obligation as referred to in paragraph 21 following the indications of the available Vaccine."

Therefore, the law provision does not fully protect a person who cannot be vaccinated since each circulating Vaccine requires Standard Operating Procedures (SOP). However, there is no complete data on who cannot be vaccinated. Those with a clear track record of the disease from the upper-middle-class can be exempted from the Vaccine if it is unsafe. However, some lower-middle-class people have complained about inequality in receiving vaccinations due to a lack of accurate health checks. This person cannot be ignored during vaccination since they may become carriers of the virus and transmit it to others in the future.

Due to distrust in the administration of vaccines in the country, the government has issued a decree through Article 15 B of Presidential Regulation Number 99 of 2020 concerning Vaccine Procurement and Vaccination Implementation stating the following: "(1) In the case of adverse side effects following COVID-19 vaccination, as referred to in Article 15 A paragraph (3) and in case the Vaccine cause a disability or death, the government will offer compensation. (2) The compensation, as referred to in paragraph (1), is awarded should the Vaccine result in disability or death, (3) Further provisions regarding the criteria, form and amount for compensation as indicated in paragraph (1) shall be stipulated by the Minister of Health after obtaining approval from the Minister of Finance."

Anti-vaccine groups can interpret the article for the provision of compensation by the state as unsafe because the government is anticipating causalities from the vaccinations. The law does not hold health workers accountable for any vaccine eventualities, though they are the one who administers the drug. This situation presents a dilemma for the targeted vaccine recipients from rural areas and inner community groups, who care less about compensation if their bodies and lives are not valued. Therefore, the autonomous right over the body should not be enforced on this group. Nevertheless, the government proves accountable for the Vaccine's negative impact through compensation, with no legal recourse on health workers who make mistakes in injecting vaccines and providing a diagnosis. This serves as a warning and concern for future vaccine administration activities. Autonomy and personal life do not justify special treatment or protection of those who do not deserve to receive vaccines.

The principle of equality before the law should be balanced between vaccine recipients and givers. Though the government is quick to provide warnings to those refusing vaccines through Presidential Regulation on Vaccine Procurement and Vaccination Implementation in the Context of Handling the COVID-19 Pandemic, there are no criminal sanctions for vaccine givers when they err in diagnosing prospective vaccine recipients. For instance, Article 13 A paragraph 4 and 5 states that "(4) Any person who has been designated as the target recipient of the COVID-19 Vaccine and does not participate in the COVID-19 vaccination as referred to in paragraph (2) may be subject to administrative sanctions, such as (a). postponement or termination of the social security or assistance; (b). postponement or termination of government administration services; and (c). fine. The article also states that; (5) the administrative sanctions as referred to in paragraph (4) shall be imposed by the ministry, institution, regional government, or agency following their respective authorities. This article is closely followed by the criminal sanction in Article 13 B, which states that: "Everyone designated as the target recipient of the COVID-19 Vaccine, but does not follow the COVID-19 Vaccination as referred to in Article 13 A paragraph (2) and causes obstruction of the implementation of the COVID-19 spread prevention, will be given sanctions as referred to in Article 13 A paragraph (a) and may be imposed by the provisions of the law on Infectious Disease Outbreaks."

These problems will continue in the future during the vaccination period, as many people continue queuing to hunt for vaccines until health workers who provide vaccines inject up to hundreds of people. Even though the vaccine supplies are not sufficient for everyone, vaccine administration activities should be arranged in a place and time based on the neighborhood, village, or sub-district area. At the same time, it is necessary to add health workers to provide vaccine injections by recruiting students from health and medical personnel. Furthermore, regulation of vaccination should not be left only to Presidential Regulation. Still, there is a need to form a special law that governs the necessary sanctions for those refusing.

Moreover, there is no agreement in criminalizing those who refuse vaccination. Others argue that the Infectious Disease Outbreak and the Health Quarantine Laws were not meant to trap parties who reject government policies handling the COVID-19 pandemic. Another argument is that the regulations for handling the COVID-19 pandemic should not be formulated as a criminal offense, cause a health emergency, or be deterred from implementing the prevention of the spread of COVID-19 circumstances in question are difficult to prove. The regulation is focused on the material on prevention, showing that the emphasis is on acts rather than waiting for the consequences of resistance to government policies in health services.

### Conclusion and Suggestions

The main objective of Indonesian legal interest is implementing COVID-19 vaccination as the state's obligation of health services rather than maintaining autonomous rights over the body. This philosophy of prioritizing health service obligations is supported by philanthropic philosophy, the principle of the public interest, the theory of the welfare state law, and the proportionality of legal restrictions on rights in-laws and regulations. Autonomous rights over the body can be applied to citizens with limited conditions as long as they experience legitimate resistance to receiving COVID-19 vaccinations.

The COVID-19 vaccination requires special legislation in addition to the presidential regulations. The Covid-19 vaccination process restricts some rights for smooth and quick operations intended to save lives. This process cannot be left for the private sector alone to handle but should be governed by the state policy with the vaccination pattern based on the village or neighborhood area. The law should also balance the recruitment of vaccine givers from health and medical universities.

## References

- Adam, S., Supusepa, R., Hattu, J., & Taufik, I. (2021). Law Enforcement Against Violations of Public Health Protocols During the Covid-19 Pandemic in Ambon City. *SASI*, 27(2), 230–246. <https://doi.org/10.47268/sasi.v27i2.441>
- Alexandar, S., Ravisankar, M., Kumar, R. S., & Jakkan, K. (2021). A comprehensive review on Covid-19 Delta variant. *International Journal of Pharmacology and Clinical Research (IJPCR)*, 5(2), 83-85. <https://www.researchgate.net/profile/Ravisankar-Mathesan/publication/353179027>
- Aviariska, A. M. (2020). Regional Quarantine Policy Related to Handling Covid-19 Pandemics in Various Countries. *Media Gizi Kesmas*, 9(2), 67-73. <https://e-journal.unair.ac.id/MGK/article/download/21262/12827/0>
- Brennan, F., Carr, D. B., & Cousins, M. (2007). Pain management: a fundamental human right. *Anesthesia & Analgesia*, 105(1), 205-221. <https://doi.org/10.1213/01.ane.0000268145.52345.55>
- Elviandri, E. (2019). Quo Vadis Welfare State: Strengthening the Ideology of the Welfare State of the Indonesian Welfare State. *Pulpit of Law-Faculty of Law, Gadjah Mada University*, 31(2), 252–266.
- Fadlyana, E., Rusmil, K., Tarigan, R., Rahmadi, A. R., Prodjosoewojo, S., Sofiatin, Y., Khrisna, C. V., Sari, R. M., Setyaningsih, L., & Surachman, F. (2021). A phase III, observer-blind, randomized, placebo-controlled study of the efficacy, safety, and immunogenicity of SARS-CoV-2 inactivated vaccine in healthy adults aged 18–59 years: An interim analysis in Indonesia. *Vaccine*, 39(44), 6520-6528. <https://doi.org/10.1016/j.vaccine.2021.09.052>
- Faiz, P. M. (2020). Meaning of Salus Populi Suprema Lex. *Constitution Magazine*, 68-69.
- Fraser, B., & Sterelny, K. (2015). Evolutionary Approaches to Human Behaviour: Philosophical Aspects. *International Encyclopedia of the Social & Behavioral Sciences*, 399–405. <https://www.academia.edu/download/34168879>
- Government of Indonesia. (2018). *Law of the Republic of Indonesia No. 6 of 2018 on Public Health Care*. Indonesia. <https://leap.unep.org/countries/id/national-legislation/law-republic-indonesia-no-6-2018-public-health-care>
- Handini, D. T. (2021). The Concept of Legal Protection for Medical Workers in Handling COVID-19. *Journal of Law and Economic Development*, 9(1), 52-64. <https://jurnal.uns.ac.id/hpe/article/view/52619>
- Hart, H. L. A. (1994). *The Concept of Law*. New York: oxford university press.
- Ilyas, T. R. (2021). Effectiveness of ppkm (enforcement of restrictions on community activities) emergency and levels 1-4 on control of spread covid 19 virus in east java. *PERCIPIENCE International Journal of Social, Administration, & Entrepreneurship*, 1(1), 39-46. <http://riset.unisma.ac.id/index.php/PERCIPIENCE/article/view/13515>

- Kemenkes. (2021). A total of 21.4 million Indonesians have received the full Covid-19 vaccine. Databoks.Katadata.Co.Id. <https://sehatnegeriku.kemkes.go.id/baca/rilis-media/20211115/5438856>
- Kurniawan, M. B. (2021). Government Legal Politics in Handling the Covid-19 Pandemic From the Perspective of Human Rights to Health. *Journal of Human Rights*, 12(1), 37-56. <http://dx.doi.org/10.30641/ham.2021.12.37-56>
- Kurniawati, D., Rochmah, T. N., & Laksono, A. D. (2020). The Policy of Large-Scale Social Restriction (LSSR): Prevention Effort of COVID-19 and Community Compliance in Indonesia. *Medico-Legal Update*, 20(4), 159-163. <https://www.researchgate.net/profile/Agung-Laksono-2/publication/344623538>
- Li, H. (2021). Philosophy in the flesh: How philosophical view of embodiment motivates public compliance with health recommendations during the COVID-19 crisis. *Personality and Individual Differences*, 181, 111059. <https://doi.org/10.1016/j.paid.2021.111059>
- Maikel, M. P. (2021). Legal Aspects of Rejection of Health Protocols in the Era of the COVID-19 Pandemic. *Indonesian Journal of Health Law*, 1(01), 24-32. <https://jurnal-mhki.or.id/jhki/article/view/3>
- Marzuki, P. M. (2010). *Penelitian Hukum*. Kencana Prenada Media Group, Jakarta.
- Mitchell, C. N. (1987). Legal restraint, happiness, and anxiety: Parallels between utilitarianism and psychiatry. *International Journal of Law and Psychiatry*, 10(3), 265-281. [https://doi.org/10.1016/0160-2527\(87\)90029-X](https://doi.org/10.1016/0160-2527(87)90029-X)
- Mottelson, A., Vandeweerd, C., Atchapero, M., Luong, T., Holz, C., Böhm, R., & Makransky, G. (2021). A self-administered virtual reality intervention increases COVID-19 vaccination intention. *Vaccine*, 39(46), 6746-6753. <https://doi.org/10.1016/j.vaccine.2021.10.004>
- Office of the High Commissioner Human Rights. (2011). *Applicable International Human Rights and Humanitarian Law Framework*. Manual on Human Right Monitoring.
- Quinn, M. (2017). Jeremy Bentham, choice architect: law, indirect legislation, and the context of choice. *History of European Ideas*, 43(1), 11-33. <https://doi.org/10.1080/01916599.2016.1251720>
- Samsi, & Jacobalis. (2005). *Development of Medicine, Medical Ethics, and Bioethics*. Jakarta: Sagung Seto.
- Sasikumar, K., Nath, D., Nath, R., & Chen, W. (2020). Impact of extreme hot climate on COVID-19 outbreak in India. *GeoHealth*, 4(12), e2020GH000305. <https://doi.org/10.1029/2020GH000305>
- Supriyadi, S. (2020). Policies for Handling COVID-19 From a Prophetic Legal Perspective. *Suloh: Journal of the Faculty of Law, University of Malikussaleh*, 8(2), 91-109. <https://ojs.unimal.ac.id/suloh/article/view/3069>
- Suraya, I., Nurmansyah, M. I., Rachmawati, E., Al Aufa, B., & Koire, I. I. (2020). The impact of large-scale social restrictions on the incidence of covid-19: A case study of four provinces in Indonesia. *Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)*, (1), 49-53. <http://dx.doi.org/10.21109/kesmas.v15i2.3990>
- World Health Organization. (2021). *Background document on the inactivated vaccine Sinovac-CoronaVac against COVID-19: background document to the WHO interim recommendations for use of the inactivated COVID-19 vaccine, CoronaVac, developed by Sinovac, 24 May 2021*. World Health Organization. <https://apps.who.int/iris/handle/10665/341455>

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