

Juridical Review of the Rights and Obligations of Citizens According to Law Number 6 of 2018 concerning Health Quarantine

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Abstract. What obligations do the national authority, regional authority, and affiliated organizations have to uphold in the event of an outbreak of an infectious disease, an emergency of public health, or a scenario requiring quarantine? This study aimed to explain and prescribe the legal protection that is the right of citizens during the health quarantine period and sanctions for Indonesian citizens who do not carry out their obligations during the health quarantine period. This study's methodology is known as normative legal research, where the main characteristic of normative legal science research, the primary source is legal material which contains normative rules. In this study, what is meant is regulations regarding Health Quarantine. The study results indicate that there must be legal protection for the rights of Indonesian citizens during health quarantine based on Law Number 6 of 2018 regarding Health Quarantine. Furthermore, According to Law Number 6 of 2018 regarding Health Quarantine, there are penalties for citizens who fail to fulfill their commitments during health quarantine.

Keywords: *Rights and Obligations; Citizen; Law; Health Quarantine*

INTRODUCTION

The central and regional governments have implemented a health quarantine as a result of the Covid 19 outbreak, or in today's language, it is called LockDown. Law Number 6 of 2018 regarding Health Quarantine allows the government/the authority to carry out quarantine to prevent or prevent the entry and exit of diseases or health risk factors that can potentially cause public health emergencies (Indonesia 2018).

According to (Wowor, Ginting, and Kindangen 2022), Articles 7, 8, 39, 52, 55, and 79 of the 2018 Health Quarantine Law as well as Article 8 jo. Article 5 of Law No. 4 of 1984 concerning Outbreaks of Infectious Diseases expressly say that what matters are the rights

of citizens that the Central Government must fulfil and Regional Governments along with related agencies when an outbreak of infectious diseases occurs, an emergency of public health, and is in a Regional Quarantine situation as well as Home Quarantine or in the Large-Scale Social Restrictions Status, which include:

- a. The right to receive necessary medical care in accordance with one's needs,
- b. The right to access food and other essentials for survival,
- c. The right to equitable treatment when enforcing a health quarantine,
- d. The right to expect the government to meet their basic requirements and provide livestock feed; this right is implemented by

- the central authority (government), regional authority (governments), and other associated parties,
- e. Everyone has the right to obtain health quarantine officer's services if they are from a country or region that is experiencing a public health emergency, which includes: (1) screening; (2) a health alert card; (3) information on methods for preventing and treating epidemics; (4) collection of specimens/samples; (5) referrals; and (6) isolation,
 - f. The right to compensation if they suffer property loss as a result of the epidemic's control measures,
 - g. The right to achieve information on quarantine of health to stop and stop events or risk factors that could lead to a public health emergency from entering or leaving a country.

Both Central and Regional Governments have to be prepared to allocate budget monies in order to fulfill the 7 (seven) fundamental rights of residents during an epidemic, public health emergency status, house quarantine, and regional quarantine (Asyahril 2023).

In addition to the rights and obligations regulated in Law Number 6 of 2018 concerning Health Quarantine, there are also several other provisions that may affect the rights and obligations of citizens related to health quarantine, including:

Law Number 4 of 1984 concerning Outbreaks of Infectious Diseases. This law regulates the prevention and control of infectious disease outbreaks. In this case, citizens have an obligation to provide reports and cooperate with the government in preventing and controlling disease outbreaks (Indonesia 1984).

Government Regulation Number 21 of 2021 concerning Implementation of Restricting Micro-Based Community Activities and the Establishment of Covid-19 Handling Posts. In research of (Rahmawati 2021), it was explained that this Government Regulation regulates restrictions on community activities during the Covid-19 pandemic. Citizens have an obligation to comply with restrictions on community activities set by the government in order to prevent the spread of Covid-19.

Law Number 23 of 2002 concerning Child Protection. (Absor 2011) in his research explained that this law regulates child protection in all aspects of life, including health. In terms of health quarantine, children have the right to receive adequate and safe health protection according to their age and development.

In implementing health quarantine, the government also has an obligation to provide clear and transparent information about policies and actions taken as well as to guarantee rights and protection for citizens undergoing health quarantine. This aims to

minimize misunderstanding, uncertainty, and discrimination that can occur in the implementation of a health quarantine (Hayati, Misnaniarti, and Idris 2021).

The Juridical Review research on the Citizens' Rights and Obligations according to Law Number 6 of 2018 regarding Health Quarantine which I raise, follows legal issues/issues in legal dogmatics because legal issues at the dogmatic level/scope of law are more burdensome (inclined) to aspects practical law. Although burdensome to the practical aspects of legal science, obtaining answers to legal issues in the dogmatic scope of the law is obtained from academic research. Legal research within the scope of legal dogmatics, the legal issues regarding legal provisions which contain legal meanings are related to the legal facts encountered (Christianto 2011). Legal issues within the scope of legal dogmatics can arise in terms of the parties to a case conflicting with each other and putting forward conflicting interpretations of the text of the regulations because the regulations are unclear, the occurrence of a legal vacuum, and there are different interpretations of the facts (Hidayat 2013).

To support the object of legal research that we will carry out, we choose the type of normative law research. Case studies based on normative law are used in normative law research to examine legal behavior outcomes, such as analyzing proposed laws (Barus 2013). The law is the primary topic of the study,

which is conceptualized as a social standard or regulation that affects everyone's behavior. So, this field of study concentrates on the positive law inventory, legal principles and doctrine, legal discoveries in actual instances, legal systematics, degree of legal synchronization, legal comparisons, and legal history (Benuf and Azhar 2020). Therefore, in this research design, researchers want to examine behavioural products, namely: Law Number 6 of 2018 regarding Health Quarantine.

Based on the issues listed above, the research objectives that i will carry out are a) To describe the legal protection of the rights of Indonesian citizens during health quarantine based on Law Number 6 of 2018 regarding Health Quarantine. b) To describe sanctions for citizens who do not fulfil their obligations during health quarantine based on Law Number 6 of 2018 regarding Health Quarantine.

RESEARCH METHODS

The research's methodology is the normative legal research method. The main characteristic of normative legal science research is that legal materials containing normative rules are the primary source (Arliman 2018).

Review of normative law because it explains the provisions stipulated in Law Number 6 of 2018 concerning Health Quarantine and the sanctions that can be given if there is a violation of the law. A review of

normative law includes an explanation of written law or legal norms contained in laws, regulations and other legislation, as well as explaining how the law should be applied in an existing situation or case (Khalid 2014).

The author uses primary and secondary legal materials as the main sources in studying the legal issues raised in this research (Johan 2008). In this study, the primary legal material referred to is the legislation regarding Health Quarantine, namely Law Number 6 of 2018. And Legal science books, legal journals, scientific, legal papers, etc. are examples of secondary legal literature. One of the legal science books that are used and has something to do with the object of this research is a book on human rights as a reference and legislation relating to human rights (Supriyanto 2014).

DISCUSSION

On January 30, 2020, the World Health Organization (WHO) declared the COVID-19 outbreak a global public health emergency. A virus called the coronavirus can cause infections with mild to severe symptoms. Severe symptoms of at least two coronavirus strains, including Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome, are known to occur (SARS) (Handayani et al. 2020).

The 2019 Coronavirus Disease (COVID-19) is a brand-new illness that has never been seen in people. Sars-CoV-2 is the name of the virus that causes COVID-19.

Although COVID-19 is a brand-new illness, little study has been done on it. Laws have been created in Indonesia to address illness epidemics, such as Covid-19, but they have not been effective because the implementing regulations have not been issued. On August 7, 2018, the Health Quarantine Law No. 6 of 2018 was ratified (Suhardi 2020).

Five government regulations and 11 health minister regulations are ordered by the Law of Health Quarantine to complement the law. Article 96, paragraph (1) states that implementing regulations for this law must have been enacted within three years from the enactment of this law. However, from the specified timeframe until now, not all of them have been realized.

Based on the study's findings, legal defenses and arguments against the rights of Indonesian individuals and the state's obligations during health quarantine are anticipated to be made in accordance with Law Number 6 of 2018 regarding Health Quarantine, as follows:

Legal protection for the rights of Indonesian citizens during health quarantine based on Law Number 6 of 2018 regarding Health Quarantine

The general provisions of Article 1, paragraphs 1 and 2 of Law Number 6 of 2018 state that Health quarantine is an attempt to stop and fend off the emergence or admission of diseases and/or risk factors for public health

that could result in emergencies. An extraordinary public health event known as a "public health emergency" is characterized by the spread of infectious diseases and/or incidents brought on by radiation from nuclear power plants, biological pollution, chemical contamination, bioterrorism, and/or food that poses a health risk and may travel across regions or nations (Pratiwi, Artha, and Nurlaily 2020).

This instance involved the Covid-19 Epidemic, which is a condition where there is a disease that is highly contagious massively and endangers the entire community so. That the government needs to take action to implement various policies that can prevent or overcome these problems, primarily related to inter-regional travellers as well as between countries where these people need to quarantine themselves for a few days or weeks to prevent various possibilities related to the spread of the coronavirus whether it is from the departure area, during the trip until arriving at the destination (Keluarga 2022).

The general provisions of Article 2 state that Health Humanity, benefit, protection, fairness, prudence, nondiscrimination, public interest, coherence, legal awareness, and state sovereignty are the foundations of quarantine.

The application of the principles referred to in Article 2 is basically not running as it should. Why is that? Because there are still many people who receive unequal treatment, it is not uncommon to even receive

discriminatory actions from health or quarantine providers. One of the principles in the Health Quarantine Law states that the implementation of this quarantine pays attention to the principle of non-discrimination, but in practice discriminatory practices have been found in various health quarantine policies. This shows that the law enforcement process has not been running as it should. People who have money have better services than ordinary people who cannot afford to pay for health or quarantine costs, even though quarantine facilities or programs should be the same for all people.

In the Rachel Venya case example, "Not only did she escape from quarantine, but Rachel Venny also committed several violations". Based on the investigation results, It was discovered that dishonest TNI members participated in the airport's security task force and took non-procedural measures. At the Wisma Atlet Pademangan RSDC, one of them permitted Rachel to quarantine. In the case of the celebrity program Rachel Venny, it was shown that the person in question was not entitled to these facilities because she had just returned from abroad on vacation (Fikri/BW 2021).

The general provisions of Article 3 state that the purpose of administering the quarantine's health is to:

- a. safeguarding the populace from illnesses and/or risk factors for public health that could result in a public health emergency,

- b. avoiding diseases and/or risk factors for public health that could result in a public health emergency,
- c. bolstering national fortitude in the area of public health; and,
- d. ensure the community's and health professionals' safety and legal clarity.

To stop or prevent the spread of Covid-19, the government's policy is to isolate those who are afflicted with the virus as well as those who move from one place to another both domestically and abroad. The Ministry of Health (Kemenkes) noted that active cases of COVID-19 have fallen again and have touched 399,583 after the previous day (9/3) were in position 417,219. Since February 28, 2022, when there were 569,736 active instances, the number of active cases has consistently decreased until it started to reach 300,000. In addition, The number of confirmed cases for today dropped to 21,311 from the previous day, which was 26,336. This record makes the national hospital occupancy rate 26% (10/3). This reduced from the previous figure, which was 27% (9/3) (Rokom 2022).

The right to health does not entail that everyone must be well or that the government must provide expensive medical facilities that are beyond its financial means. However, The ability of the government and public authorities to create various policies and work plans that result in the accessibility and affordability of health service facilities for

everyone in the shortest amount of time is increasingly demanding (Afandi 2008).

The government's obligation under the right to health is to provide the community with infrastructure, policies, and facilities in the hopes that they will use these resources to improve their own health, and that is the choice of the community itself where the government certainly cannot impose health on the community let alone have to until punishment is given, the government can only provide facilities and socialize regarding health facilities provided by the country.

The general provisions of Article 4 explain that With the employment of health quarantines, both Central and Regional Governments are in charge of safeguarding the people's health from illnesses and/or public health risk factors that could potentially result in a public health emergency.

Based on the Infectious Disease Outbreak Act, the government, in this case, must bear the financial burden of the treatment people are undergoing due to infectious diseases, such as COVID-19. Prof. Kadir, the Ministry of Health's Director General of Health Services., in the Merdeka Barat 9 Forum discussion virtually Wednesday (27/1), emphasized that it is not justified if the public pays or even a hospital withdraws money from a COVID-19 patient (Andrean W. Finaka 2021).

In conclusion, the rights and obligations of citizens related to health quarantine are

regulated in Law Number 6 of 2018 concerning Health Quarantine. Citizens have the right to obtain adequate health services, clear and timely information, as well as protection from discrimination and violence (Basuki 2020). Meanwhile, citizens have an obligation to comply with the health quarantine provisions and procedures set by the government, assist the government in implementing health quarantine, and maintain personal hygiene and health (Arfiyanto 2022). Implementation of a health quarantine must also pay attention to the rights and protection of citizens and provide clear and transparent information.

Sanctions for citizens who do not carry out their obligations during health quarantine based on Health Quarantine Law Number 6 of 2018

Based on the Law of Health Quarantine, every citizen confirmed with the Covid 19 virus must be quarantined. Quarantine is carried out in three forms: quarantine at home, in quarantine centres prepared by the government and quarantine in quarantine, at a health centre that treats Covid-19 patients. Isolation is carried out to separate people who have confirmed COVID-19 from healthy people to reduce the risk of transmission. This procedure is also carried out for someone with positive quarantine exit test results. The isolation location is adjusted to the patient's condition. If the patient has severe symptoms,

isolation is done at the hospital. Meanwhile, Friends of MIKA can choose to self-isolate at home or together in a centralized location for patients with no symptoms or mild symptoms (Syarif and Haryanto 2021).

Home quarantine Article 50. (1) Home quarantine occurs when a Public Health Emergency case occurs in only one house. (2) The residents of the home, as well as any items or vehicles involved in the case, are subject to home quarantine, as described in paragraph (1), (3) Cases, as referred to in paragraph (1), are referred to hospitals that can handle cases.

Article 52 of house quarantine. (1) The Central Government is in charge of providing the fundamental need for people and feed for livestock under Home Quarantine during its implementation. (2) The Regional Government and connected parties are involved in carrying out the Central Government's obligation to implement Home Quarantine, as stated in paragraph (1).

The problem that often occurs is people's reluctance to quarantine because they have to meet household needs which, according to Article 52, should be borne by the government. However, in reality, it is still borne by the community itself. Meanwhile, another factor that causes non-compliance is deprivation, which is not accompanied by compensation. So that people experience economic difficulties in Jakarta, and they are not allowed to leave their homes. By not being able to leave the house, they are also unable to earn income

for some people in Jakarta. It is known that the people who go to Jakarta are middle to lower-class people in the villages where the village has experienced involution. (Wahyuni and Nurlatifah 2017) stated that involution is the process of returning an organ to its original size. Nevertheless, if it is associated with this condition, it means that agriculture can no longer support life. If they are not supported in their life, it will be difficult for them to survive.

Minister of Communication and Informatics Johnny G. Plate responded to this and said that everyone must comply with all regulations related to COVID-19, including undergoing quarantine for all international travellers. If someone violates the quarantine rules, strict sanctions will be imposed. Strict sanctions will be imposed for those who violate them," said Plate as quoted from Liptan6.com, Saturday (16/10/2021). Strict sanctions for international travellers who violate quarantine obligations will refer to the provisions of Article 14 of the Law on Infectious Disease Outbreaks and Article 93 of the Law of Health Quarantine, in which a fine of IDR 100 million and a six-month jail sentence are the penalties (Kadir and Idrus 2021).

Article 14 of the Law on Infectious Disease Outbreaks reads—article 14. (1) Anybody who knowingly hinders the implementation of epidemic control as specified in this legislation faces a potential sentence of one year in prison and/or a

maximum fine of Rp. 1,000,000. (one million rupiah), (2) Anybody who willfully hinders the implementation of epidemic prevention as specified in this Law faces a maximum sentence of 6 (six) months in prison and/or a fine of no more than Rp. 500,000. (five hundred thousand rupiah), (3) The unlawful behavior mentioned in paragraph (1) is an offense, and the unlawful behavior mentioned in paragraph (2) is a violation.

Article 93 of the Health Quarantine Law reads: Everyone who does not comply with the implementation of the Health Quarantine as referred to in Article 9 paragraph (1) and/or obstructs the implementation of the Health Quarantine causing a Public Health Emergency shall be subject to imprisonment for a maximum of 1 (one) year and / or a maximum fine of IDR 100,000,000.00 (one hundred million rupiah) (Mranani 2021).

Violations that can be subject to sanctions include violating health quarantine provisions, not undergoing health quarantine, not carrying out independent isolation, conducting independent isolation by not fulfilling the requirements, and providing wrong information or covering up information related to health quarantine.

It should be remembered that these sanctions were given as an effort to encourage public awareness and compliance in implementing health protocols to prevent the spread of Covid-19 and protect public health. Therefore, it is very important for citizens to

comply with the provisions stipulated in Law Number 6 of 2018 concerning Health Quarantine to avoid sanctions and assist the government in fighting the Covid-19 pandemic.

CONCLUSION

According to the general rules of Article 1, paragraphs 1 and 2 of Law Number 6 of 2018, health quarantine is an effort to prevent and ward off the emergence or entrance of diseases and/or public health risk factors that have the potential to trigger public health emergencies. Citizens have seven (seven) fundamental rights during an epidemic, including house quarantine and regional quarantine. Based on the Health Quarantine Law, every citizen confirmed with the Covid 19 virus must be quarantined. Quarantine is carried out in three forms: quarantine at home, in quarantine centres prepared by the government and quarantine in quarantine, at a health centre that treats Covid-19 patients.

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