Handling and Countermeasures of Covid-19 Pandemic in Indonesia Reviewed from The Aspect of Law

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Abstract. This examination concentrates on government legitimate legislative issues in managing crown episode explored from the right to wellbeing. The success right is a right of assurance to human, including from the gamble of COVID-19. The Government has given a couple of legitimate things in managing the Covid-19 pandemic, for instance, PERPPU Number 1 of 2020. Indonesia Government also executed PSBB and Physical Distancing approaches. Notwithstanding, these policies were not effective in breaking the spread of COVID-19 as COVID-19 cases in Indonesia. Since January 28, 2021, it has showed up at 1 million cases which is the most major in Southeast Asia. This sort of investigation is a regularizing lawful assessment that gives deals with any consequences regarding handle COVID-19 in Indonesia. This evaluation determines that the real arrangement picked by the Indonesian Government cannot safeguard the flourishing's right of Indonesian as taught by the article 28H fragment (1) and Article 34 area (2) and (3) UUD 1945. The Government should have executed a deficient lockdown method as China's outcome in doing it in Wuhan. With a fragmentary lockdown in Jakarta Province as the mark of combination of the COVID-19 pandemic in Indonesia, the pollution won't spread to different areas.

Keywords: Legitimate Policy; COVID-19; The Right to Health’s

1 Introduction

The world is currently excited with events that are extraordinary and have an impact on all systems and human life around the world. In December 2019, secretive pneumonia was first uncovered in Wuhan, Hubei Province. The wellspring of this case is as yet unclear; however the principal case was connected to a fish market in Wuhan. 1 Initially this illness was briefly named as 2019novel Covid (2019-nCoV), then WHO declared another name on February 11, 2020, in particular Coronavirus Disease (COVID-19) brought about by the Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) infection. Toward the start of 2020, the world was stunned by the flare-up of another infection, to be specific the new sort of Covid-19 (SARS-CoV-2) and the sickness was called Coronavirus Disease 2019 or Covid-19. It is realized that the beginning of this infection came from Wuhan, China, found toward the finish of December 2019. Up to this point, it has been affirmed that there are 65 nations that have been contaminated with this infection. human life. This disaster not only destroys human material, but also human psychology all over the world and this disaster destroys all hope.

WHO expressed that at present Europe has turned into the focal point of the worldwide Corona infection pandemic, Europe as of now has a larger number of cases and passing’s from Covid-19 than China, the all-out number of Corona infection cases, as per WHO, is no less than 123 nations and districts, of this number, right around 81 Thousands of cases are in central area
China, Italy, which is the European country that was most horrendously awful impacted by the Corona infection, presently the most prevailing is kept in this Corona Virus cases?

The spread of Covid-19 virus cases in the world and in particular the country of Indonesia has experienced a very significant increase and the impact of deaths from this virus continues to increase. On June 13, there were 37,420 infected people, while 2,091 people died, and 13,776 people were declared cured. Chaos occurs in every area in Indonesia, from people who have lost their jobs to hospitals that experience a shortage of places.

2 Research Methods

In writing this article the author uses a qualitative descriptive method, this is done in order to get a deep, authentic, normative and fundamental understanding related to the phenomenon being studied. This is because there are limitations to conducting interviews directly related to pandemic situations which still provide limitations for conducting studies. This is a strong reason why the author only conducted a literature study as a data collection technique.

3 Results and Discussion

In the health literature, there are two terms used in the articulation of human rights in the health sector, namely "right to health" or "right to obtain the maximum degree of health" (The Right to Attainable Standard to Health). Health is a crucial right for the survival of human life. Health is so essential that it is known as an adage "health is not everything, but without health everything is meaningless". As a human right, the right to health is a right that is inherent in humans because of their existence as human beings, which rights must be respected and protected by every country. [1]

If referring to International Conventions and international legal documents, the provisions of the right to health are determined as part of the basic rights (fundamental rights) that are owned by every individual. The assertion is written in the introduction of the World Health Organization (WHO) Constitution which peruses: The satisfaction in the most increased down to earth expectation of thriving is one of the fundamental chances of each and every person without partition or race, religion, political conviction, monetary or social circumstances. Consequently, the right to wellbeing as a component of the essential privileges moved by each individual should be secured, regarded, and satisfied by the state paying little heed to nationality, religion, political decision, economy or social circumstances. [2]

In view of this clarification, the right to wellbeing has been supported as a "common freedom" by the global local area since the reception of the Constitution of the World Health Organization (WHO) in 1946. Then, it was confirmed in the general comments of the Committee on Economic, Social and Cultural Rights on the right to prosperity, specifically "Wellbeing is a major common freedom imperative for the activity of other basic liberties.14 Based on this statement, health is placed as a human right that has a strategic position for the implementation of other human rights. So the state should prioritize the protection of the health rights of its citizens, especially against the threat of a pandemic (COVID-19).

Novel Corona Virus or known as COVID-19 is a real threat to human health. A person who is positive for COVID-19 will experience symptoms of fever, cough with phlegm or blood, shortness of breath, chest pain, loss of the ability to smell odors, and even death. In addition, human-to-human transmission of COVID-19 has become a nightmare because of its rapid spread. 15 A person can be infected with COVID-19 without realizing it, and have infected
others without being noticed, because knowing 100% accurately someone is already positive for COVID-19 needs to be done. Swab PCR test to confirm the diagnosis of corona virus infection.

The weakness of the corona swab test, according to biologists Ahmad Rus and Handoyo Utomo, PhD, is because the test results can only be obtained about 3-4 days from the time the test sample is received by the hospital, and for the corona swab test at the airport the results can only be obtained 8 hours after the examination. a negative test is of course nothing to worry about but if the test result is positive, in the time span from the time the person is tested until the results of the swab test come out, it is difficult to know how much of the virus has been spread to other people. This is one of the difficult factors to break the chain of the spread of COVID-19.

In an effort to prevent the spread of COVID-19, the Government of Indonesia has made legal politics by issuing various legal products including [3]:

a. In this case, the emergency in question is the Corona Virus Disease (COVID-19) outbreak. COVID-19 as a pandemic that is extraordinary due to its massive spread has caused a public health emergency. The pandemic additionally affects the deceleration of public financial development, a decrease in state incomes, and an expansion in the weight of state spending. With these considerations, the Government focuses primarily on state financial policies and policies on financial system stability.

With respect to monetary arrangements, Article 2 section 1 of Perppu Number 1 of 2020 approves the Government to set a spending plan deficiency surpassing 3% of Gross Domestic Product (GDP) during the treatment of COVID-19 or potentially confronting dangers that jeopardize the public economy. The next paragraph is granting authority to the Government to be able to reallocate and refocus the budget according to a priority scale for the sake of economic recovery. In the field of taxation, Article 8 of the Perppu provides relaxation in the form of an extension of the time for the implementation of rights and fulfillment of tax obligations as well as exemption/relief from import duties due to the COVID-19 pandemic. In the context of restoring national economic conditions, Article 11 of the Perppu gives authority to the Government through state capital participation or placement and/or Government investment in order to protect, maintain and increase the economic capability of business actors in both the real sector and the financial sector.

The issuance of the Perppu is a legal policy taken by the Government to stabilize state finances and prevent the spread of the COVID-19 outbreak. However, the Perppu contains potentials that can damage state administration practices in Indonesia. First, this Perppu has the potential to lead to absolute power in the formation of a regulation by the President. Article 12 paragraph (2) of Perppu No. 1/2020 authorizes the President to make changes to the posture and/or details of the State Revenue and Expenditure Budget (APBN) in the context of implementing state financial policies regulated by or Presidential Regulations. Positive aspects of changes in budget posture and changes in the APBN deficit, with Presidential Regulations provide legitimacy to the Government to move quickly and responsively to safeguard the financial system and the national economy from the threat of COVID-19.

The negative aspects of changes in budget posture and changes in the APBN deficit through a Presidential Regulation have violated state administration practices so far, where changes in posture and changes in the budget deficit are carried out with the Revised State Budget which requires the approval of the DPR as the representation of the people in Parliament as regulated in Article 27 paragraph (3) Law Number 17 of 2003 concerning State Finance.

Unofficial law Number 21 of 2020 concerning Large-Scale Social Restrictions with regards to Accelerating the Handling of Corona Virus Disease (COVID-19) controls Large-Scale Social Restrictions (PSBB). PSBB is a limitation on specific exercises of an inhabitant in a space or region associated with being contaminated with COVID-19 determined to forestall a more extensive not entirely set in stone by the Minister of Health or by the Regional Government in view of the endorsement of the Minister of Health. [4]

The declaration of Government Regulation (PP) Number 21 of 2020 concerning Large-Scale Social Restrictions as a feature of the execution of Law Number 6 of 2018 concerning Health Quarantine invites public questions because in substance the PP only contains brief contents and several articles of the PP are only re-copy of article contained in Law Number 6 of 2018 concerning Health Quarantine. The PP only reiterates that the authority to determine health quarantine is in the hands of the Central Government and warns Regional Governments to first seek approval from the Minister of Health before implementing PSBB in their regions.

As regulated in Article 11 of Law Number 6 of 2018 concerning Health Quarantine that the implementation of health quarantine is carried out by the Central Government quickly and accurately by taking into account the scale of threats to health, economy, social and state security.

The decision of PSBB over provincial quarantine as a strategy taken by the public authority is associated with being a legitimate move to keep away from the public authority's liability to individuals, where assuming the approach taken is Regional Quarantine, the Central Government is expected to satisfy the fundamental necessities of its residents and animals in the quarantine region as expressed. in Article 55 of Law Number 6 of 2018 concerning Health Quarantine. In the mean time, in the PSBB strategy, the public authority isn't obliged to give the satisfaction of essential necessities as expressed in the regularizing arrangements of the PP a quo.

This is one of the elements for the insufficient execution of PSBB in Indonesia. From one viewpoint, individuals are approached to remain at home and not head outside, however then again, their essential requirements are not ensured by the public authority, so individuals, particularly the lower working class, must choose between limited options, yet should keep on working outside to meet their fundamental necessities notwithstanding fears of contracting COVID - 19.

Factors causing the failure of the Indonesian government to prevent the spread of the corona virus include:

a. At the beginning of the pandemic that entered Indonesia, the government seemed slow in responding and preparing strategic steps. The government is in denial, even some of President Jokowi's ministers seem to underestimate the COVID-19 pandemic. During the first two weeks of COVID-19 entering Indonesia (in March), the Government hid at least a few cases that entered Indonesia, with the excuse that people would not panic and the economy would be maintained.

b. Lack of good coordination between the Central and Regional Governments. This can be seen how often there are different strategies between the Central Government and Regional Governments in dealing with COVID-19. As at the beginning of COVID-19 entering Indonesia, the Jakarta Regional Government wanted to implement a lockdown but was rejected by the Central Government.

c. In the absence of the Government's firmness to lock down when COVID-19 cases continue to increase, the Government argues not to do a lockdown because it is driven by economic
and security issues. The government with the PSBB policy does not cover the basic needs of the community so that people have no choice to continue working even though they are worried about the COVID-19 pandemic. The government also relaxed the PSBB and chose to implement a new normal lifestyle at a time when the rate of COVID-19 cases was still high and had not shown a decline.

d. The government's lack of seriousness in tracing cases of COVID-19. So it is difficult to make a decision on the spread of the COVID-19 virus. And also the rate of corona testing in Indonesia is among the lowest in the world. The country with the most population in Southeast Asia also has a very low tracing rate.

e. Low public awareness to comply with Government policies in implementing a healthy lifestyle, people seem to underestimate the COVID-19 virus, are not disciplined in wearing masks and keeping a distance. This can be seen from the latest data that the total number of COVID-19 cases in Indonesia has exceeded 1 million cases. [5]

In view of these reasons, the writer is of the assessment that the lawful legislative issues of the Indonesian government in taking care of the COVID-19 Covid isn't ideal in safeguarding the wellbeing privileges of the Indonesian public as expressed in the Constitution Article 28 H section (1) and Article 34 passage (2) and (3) the Constitution of the Republic of Indonesia Year 1945. Where Article 28 Hayat (1) says "Everybody has the option to reside in physical and otherworldly thriving, to reside, and to get a decent and sound residing climate and reserve the privilege to get wellbeing administrations. The creator accepts that since the start of the COVID-19 case entering Indonesia, the public authority ought to mimic how China prevailed with regards to doing an incomplete lockdown in Hubei Province, Wuhan, to be specific completing a fractional lockdown in Jakarta Province as the focal point of the COVID-19 pandemic in Indonesia.

3 Conclusion

From the description above, it can be concluded as follows. First, the right to health is one of the derivations of human rights. As a human right, the right to health is an inherent right in humans as creatures created by Allah S.W.T God Almighty, where this right is a gift that must be respected and protected by every country. Second, the lawful legislative issues picked by the Indonesian government as PSBB and physical separating in taking care of COVID-19 have not been expanded in safeguarding the wellbeing freedoms of the Indonesian public as specified in the constitution Article 28H passage (1) and Article 34 section (2) and (3) the Constitution of the Republic of Indonesia. In 1945. This can be seen from the number of COVID-19 cases in Indonesia which currently has reached 1 million cases. Indonesia is the only Southeast Asian country where the number of COVID-19 cases has reached 1 million cases compared to other Southeast Asian countries.

Third, authentic things gave, for instance, State Expenditures (APBN) concerning executing state financial plans constrained by or Presidential Regulations. Positive aspects of changes in budget posture and changes in the APBN deficit, with a Presidential Regulation giving legitimacy to the Government to move quickly and responsively to safeguard the financial system and the national economy from the threat of COVID-19. The negative aspects of changes in budget posture and changes in the APBN deficit through Presidential Regulations have violated state administration practices so far in which changes in posture and changes in the budget deficit are carried out with the Revised State Budget which requires the approval of the DPR as the people's representation in Parliament as regulated in Article 27 paragraph (3) Law
Number 17 of 2003 concerning State Finance. The decision of PSBB over provincial quarantine as an arrangement taken by the Government is associated with being a legitimate move to keep away from the Government's liability to individuals, where assuming the approach embraced is Regional Quarantine, the Central Government is expected to meet the fundamental requirements of its residents and animals in the quarantine region as alluded to in passage (1). recorded in Article 55 of the Health Quarantine Act. While in the Government's PSBB strategy isn't obliged to give the satisfaction of fundamental requirements as expressed in the regulating arrangements of the PP a quo.

Since the start of the COVID-19 case entering Indonesia, the Indonesian government imitated how China prevailed with regards to completing a fractional lockdown in Hubei Province, Wuhan, specifically by executing a midway lockdown in Jakarta Province as the point of convergence of the COVID-19 pandemic in Indonesia so the contamination doesn't spread to various regions. With the incomplete lockdown in Jakarta, the Government can zero in more on dealing with the COVID-19 infection in light of the fact that main Jakarta is positive for the Covid, while different areas can in any case complete exercises as expected by carrying out wellbeing conventions as an expectant measure.

As to issues, with just Jakarta being secured, the wheels of the economy in 33 different territories will keep on running ordinarily, obviously, different regions and the Central Government need to cooperate to help the economy of Jakarta which is impacted by the lockdown. Against the potential threat of viruses from other countries, the Government can imitate New Zealand which closes all access to travel, both airports, ports and borders, and prohibits foreign nationals from entering New Zealand. This policy is quite successful, where the number of COVID-19 cases in New Zealand from mid year 2020 up to 28 January 2021 only 2,299 cases.

Regarding vaccination, for the success of vaccination, it is necessary to carry out massive socialization about vaccination as the safest and most effective effort to prevent the COVID-19 pandemic. Socialization efforts can involve relevant stakeholders including the Indonesian Ulama Council regarding the issue of halal vaccines. The government also needs to take a persuasive approach to groups that are against vaccination (anti-vaccination) through health promotion strategies such as advocacy efforts, social support and community empowerment. At long last, in managing comparative pandemics later on, the Government should be responsive, take fast, estimated activities that are arranged towards safeguarding the right to life and the option to individuals' wellbeing. The public authority should not recurrent the ongoing mix-ups, forswearing perspectives, slow reactions, and messing with COVID-19 toward the start of entering Indonesia should not be rehashed.

References