

Reconstruction of Health Quarantine Regulations against Covid-19 Pandemic Response in Public Health Emergencies

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Abstract - The spread of COVID-19 has an impact on increasing the number of victims and property losses. What is the problem of health quarantine regulations against the response to the COVID-19 pandemic in the public health emergency that applies in Indonesia today?, Reconstruction of the COVID-19 Pandemic Management Regulation in Public Health Emergencies. This research is carried out with normative and empirical juridical research approaches. The legal substance of health quarantine regulation against the response to the COVID-19 pandemic in public health emergencies, its implementation has not been able to overcome the COVID-19 pandemic. Substance of Article 2, Article 44, Article 48, and Article 52 of Law No. 6 of 2018 concerning Health Quarantine; Article 3 and Article 6 of Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions; Article 3 and Article 4 of the Minister of Health Regulation Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions; and the Decree of the Minister of Health Number HK.01.07 /MENKES/413/2020 concerning Guidelines for the Prevention and Control of Coronavirus Disease 2019 (COVID-19) has been implemented, but the COVID-19 pandemic response is not optimal.

Index Terms - covid-19 pandemic, Public Health Emergency, Reconstruction of Health Quarantine Regulations.

INTRODUCTION

Health is a state of good health both physically and spiritually. Health is a human right and one of the elements of welfare that must be realized in accordance with the ideals of the Indonesian nation as intended in Pancasila and the Constitution of the Republic of Indonesia in 1945. A healthy person will be able to realize his human rights well and will fight back if his human rights are deprived, and vice versa. In addition, health is also part of everyone's well-being. No one is prosperous without health in it, so a prosperous person will achieve the highest health.

Health as a human right is a right attached to a person because of his birth as a human being, not because of the gift of a person or state, and therefore cannot be revoked and violated by anyone. Healthy itself is not only free from disease, but the prosperous condition of the body, soul, and social that allows everyone to live productive life socio-economically[1].

The regulation of health rights is regulated in the highest laws and regulations in Indonesia, namely the Constitution of the Republic of Indonesia of 1945 Article 28 H paragraph (1) which reads "Everyone has the right to live a prosperous life born and inner, live, and get a good and healthy living environment and entitled to health services." Indonesia reported its first case on March 2, 2020. Cases are increasing and spreading rapidly throughout Indonesia. The Ministry of Health until August 8, 2021 reported 3,639,616

confirmed cases of COVID-19 with 105,598 deaths, 3,036,194 cured and 497,824[2] active cases treated.

Indonesia already has a policy of dealing with infectious disease outbreaks, Indonesia has law No. 4 of 1984 on Infectious Disease Outbreaks, Government Regulation No. 40 of 1991 concerning Handling infectious disease outbreaks, and Regulation of the Minister of Health No. 1501/Menkes/Per/X/2010 concerning Certain Types of Infectious Diseases That Can Cause Outbreaks and Countermeasures. Efforts to overcome the early COVID-19 outbreak, have been outlined in the Decree of the Minister of Health Number HK.01.07 / MENKES / 104/2020 concerning the Determination of Novel Corona Virus Infection (Infection 2019-nCoV) as a Type of Disease That Can Cause Outbreaks and Countermeasures. The determination is based on the consideration that novel corona virus infection (Infection 2019-nCoV) has been declared by WHO as a Public Health Emergency of International Concern (PHEIC). COVID-19 spread to various countries with the risk of spreading to Indonesia related to population mobility, requiring countermeasures against the disease.

The spread of COVID-19 has an impact on increasing the number of victims and property losses, expanding the scope of affected areas, and has implications for broad socio-economic aspects in Indonesia, so that Presidential Decree No. 12 of 2020 on Determining Non-Natural Disasters for the Spread of Corona Virus Disease 2019 (COVID-19) as a National Disaster was issued. Public Health Emergency Management is carried out through the implementation of health quarantine both at the entrance and in the region. Health Quarantine as an effort to prevent and ward off the exit or entry of diseases and / or public health risk factors that have the potential to cause public health emergencies. Health Quarantine is based on humanity, benefits, protection, justice, nondiscriminative, public interest, cohesion, legal awareness and state sovereignty.

Large-Scale Social Restrictions are restrictions on the specific activities of residents within an area suspected of being infected with disease and/or contaminated in such a way as to prevent the possibility of disease spread or contamination. The implementation of health quarantine in the region, after a fairly comprehensive study, Indonesia took a policy to implement Large-Scale Social Restrictions (PSBB) which in principle was implemented to suppress the spread of COVID-19 which is increasingly widespread, based on epidemiological considerations, the magnitude of the threat, effectiveness, resource support, operational technical, political, economic, social, cultural, defense and security considerations. PsBB regulation is stipulated through Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions in order to Accelerate The Handling of Corona Virus Disease 2019 (COVID-19), and technically described in Regulation of the Minister of Health Number 9 of 2020 concerning Guidelines for Large-

Scale Social Restrictions in the Context of Accelerating The Handling of Corona Virus Disease 2019 (COVID-19).

The enactment of the PSBB awaits the establishment of the Decree of the Minister of Health based on the adjudicator from the regional head. Areas that do not want to be enforced by PSBB, of course, will not apply, because the implementation of PSBB will have an impact on the economy, so that the actual information of the COVID-19 situation is covered, so that the area seems green zone.

Government transparency in handling the COVID-19 pandemic must be open. The disclosure of information about COVID-19 is a concern today. The disclosure of information regarding COVID-19 basically refers to Law No. 14 of 2008 on Public Information which requires the government as a public body to open transparently the case from the beginning. At first, information about the patient and data on this viral infection is not open. The government is worried that if it opens all information related to the handling of the corona virus will cause panic and public unrest, but as the condition of the spread of this virus, data disclosure began to be carried out by the government to the public about the data of patients who died or positive to be able to find out the chain of spread of the virus.

The government's responsibility in protecting public health is also stated in Article 4 of Law No. 6 of 2018 concerning Health Quarantine which reads "The Central Government and Local Government are responsible for protecting public health from diseases and/or Public Health Risk Factors that have the potential to cause Public Health Emergencies through the implementation of Health Quarantine." Administrative sanctions should also be imposed on all communities, because the implementation of health quarantine requires compliance from all elements of society. Increased discipline and law enforcement are needed towards the implementation of health quarantine.

The implementation of the obligation to comply with health protocols was initially a bit difficult to implement. Health Minister Budi Gunadi Sadikin admitted that asking all Indonesians to implement this coronavirus prevention health protocol is not easy. The rate of transmission of the virus can be suppressed through the implementation of health protocols that must be implemented with great discipline. This is very difficult and this cannot be done alone by the government without being with the people, all components of the nation build this disciplinary movement[3]. Changing people's behavior to always implement health protocols is one of the strategies in overcoming the COVID-19 pandemic[4].

Tedros Adhanom Ghebreyesus who serves as Director General of the World Health Organization (WHO) said that many countries are misguided in dealing with the COVID-19 pandemic. He said that many of the actions taken by the government and the community do not reflect the resistance to COVID-19. People's behavior and the way governments convey messages to communities correlate in

the face of pandemics, there are other health, economic, social, and cultural challenges to consider[5].

Society is entering a new era of normality, faced with changing lifestyles, ranging from the individual side to the social, cultural, economic, political, and legal levels. The Large-Scale Social Restriction Policy (PSBB) taken by the government had caused public services to be hampered. A high trend still exists in the community to access public services directly, so the transition to a new normal needs to be accompanied by providing education and socialization massively to all elements of society. People need to be encouraged to be information technology literate and understand the consequences of today's digital era in order to access public services online, especially during the new normal. Education on COVID-19 health protocols also needs to be massively encouraged through advertising in electronic media and various media as socialization to the community in the face of the new normal[6].

Rejection also occurred at the funeral of the bodies of COVID-19 victims by a number of villagers. The body of a nurse from rsup dr Kariadi Semarang who died of coronavirus infection was refused by residents to be buried in Sewakul Public Cemetery (TPU) in RT 06, West Ungaran, Semarang Regency[7]. The story of the rejection of COVID-19 corpses also occurred in Pedes District, Karawang, West Java. Residents block an ambulance carrying a COVID-19 positive body that will be interred. This event further adds to the concerns amid everyone's struggle against the coronavirus. There is a growing stigma against people with COVID-19 or even those at the forefront of dealing with coronavirus patients[7].

There are medical personnel who get discriminatory treatment, expelled from the neighborhood where they live. The medical personnel were expelled because they were afraid to transmit the coronavirus or COVID-19. They are known to the nurses at the Friendship Central General Hospital (RSUP), East Jakarta. This is not only the case in Jakarta, but also in Surakarta, Central Java. A total of three nurses of Karno Regional General Hospital (RSUD), Surakarta were expelled from their eco-premises in Grogol District, Sukoharjo Regency, Central Java. The expulsion event was even recorded in a video uploaded on the official Instagram account of Karno Hospital, Monday (27/4/20). The nurses were picked up by VIP ambulance from their boarding house and are now staying at the hospital where they work, namely Karno Hospital[8].

Government Spokesman for COVID-19 Handling Achmad Yuriyanto said, the key to breaking the chain of transmission of the coronavirus is discipline from the community in carrying out a number of preventive measures.

Based on the description of the background mentioned above, it is formulated as follows:

1. What are the health quarantine regulations against the COVID-19 pandemic in the current public health emergency in Indonesia?
2. Reconstruction of COVID-19 Pandemic Response Regulations in Public Health Emergency?

RESEARCH METHODS

This research approach is in accordance with the title and problems that will be discussed and in order to provide useful results, this research is carried out with a normative and empirical juridical research approach. Normative juridical research methods are literature law research conducted by examining literature materials or mere secondary data[9].

RESULTS AND DISCUSSIONS

Health quarantine is carried out on the basis of: humanity; benefits; protection; justice; non-discriminatory; public interest; cohesion; legal awareness; and state sovereignty, as stated in article 2 of Law No. 6 of 2018 concerning Health Quarantine. In the response to the COVID-19 pandemic, the implementation of health quarantine is still independent, not all cities and/or districts hold health quarantines, even if there are those who hold health quarantines are not held in an integrated, joint, and simultaneous manner. The above principles according to researchers still need to be added simultaneous principles, because according to the author if the principles are implemented not together and not implemented simultaneously, it will still cause the possibility of the spread of COVID-19.

Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in the Context of Accelerating the Handling of Corona Virus Disease 2019 (COVID-19) Article 6 reads "The Implementation of Large-Scale Social Restrictions proposed by the Governor / Regent / Mayor to the Minister who organizes Government affairs in the field of health."

Health Quarantine Measures that must be proposed first by the Regional Head, according to him, not all regional heads propose the existence of health quarantine measures in this case Large-scale social restrictions, and if there must be a proposal from the Regional Head first, then the determination of the implementation of large-scale social restrictions becomes not held jointly and there is no cohesion between regions, so there is no benefit, because the spread of COVID-19 continues. Researchers propose health quarantine measures in this case the implementation of large-scale social restrictions instructed by the President to all regions of the unitary state of the Republic of

Indonesia, so that the transmission of COVID-19 does not occur.

Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in the Context of Accelerating The Handling of Corona Virus Disease 2019 (COVID-19) Article 3 reads "Large-Scale Social Restrictions must meet the following criteria: a. the number of cases and/or the number of deaths due to the disease increases and spreads significantly and rapidly to several regions; and b. there is an epidemiological link to similar events in other regions or countries." The article requires that health quarantine measures can only be imposed on areas where the number of cases and deaths is increasing. The transmission of COVID-19 could have occurred in areas where there were no cases, so researchers proposed an addition that was in areas where there were no cases, suddenly there was 1 case that could be applied psbb without having to die first.

Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions Article 3 Paragraph 1 reads "The Minister establishes Large-Scale Social Restrictions in a region based on the request of the governor / regent / mayor." According to the psbb determination researcher, if there must be an application from each Regional Head will inhibit the termination of the COVID-19 transmission chain, so the researcher proposes a sentence based on the governor/regent/mayor's application to be removed.

In Article 4 paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions, it reads "Governors / regents / mayors in applying for Large-Scale Social Restrictions to the Minister must be accompanied by data: a.increase in the number of cases by time; b. spread of cases by time; and c. local transmission events." According to the Researcher article 4 paragraph (1) changed the sentence, because the determination of large-scale social restrictions can be directly determined by the Minister of Health without any application from the Regional Head, so article 4 Paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions reads "The Minister in charge of Health determines the areas that must hold Large-Scale Social Restrictions."

Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for the Prevention and Control of Coronavirus Disease 2019 (COVID-19). In the annex to Chapter III of the Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19), it is stated that the final evaluation of the clinical status of COVID-19 patients, positive confirmation cases without symptoms, mild symptoms, and symptoms are being declared complete isolation without rt-PCR follow-up examination. According to researchers, the completion of self-isolation must be carried out rt-PCR examination

accompanied by evidence of follow-up examination of negative RT-PCR results, because the public needs evidence that the person concerned no longer contains the coronavirus.

The existing and ideal regulation of Health quarantine against the response to the COVID-19 pandemic in public health emergencies is displayed in the following table.

Table : 1
Existing And Ideal Health Quarantine Regulation

No	Exiating	Ideallt
1	Article 2 of Law Number 6 of 2018 concerning Health Quarantine reads Health Quarantine is held based on: a.humanity b.benefits c.protection d.justice e.non-discriminatory f.public interest g.cohesion h.legal awareness;and i.sovereignty of the state.	Article 2 of Law Number 6 of 2018 concerning Health Quarantine reads Health Quarantine is held based on: a.humanity b.benefits c.protection d.justice e.non-discriminatory f.public interest g.cohesion h.simultaneously i.legal awareness;and j. sovereignty of the state.
2.	Article 44 of Law No. 6 of 2018 concerning Health Quarantine reads Every Item that has Public Health Risk Factors in Transport Equipment that is in Quarantine Status, Health Quarantine Officials carry out Health Quarantine actions as intended in Article 15 paragraph (2) c and d coordinate with related parties.	Article 44 of Law No. 6 of 2018 concerning Health Quarantine reads Every Person and Goods that have Public Health Risk Factors in Transport Equipment that is in Quarantine Status, Health Quarantine Officials carry out Health Quarantine actions as intended in Article 15 paragraph (2) c and d coordinate with related parties.
3.	Article 48 of Law Number 6 of 2018 concerning Health Quarantine reads (1) Any Skipper who violates the provisions as intended in Article 19 paragraph (2) or Article 21 shall be subject to administrative sanctions in the form of: a. warning;b. administrative fines; and/or c. revocation of permission. (2) Any Airman Captain who violates the provisions as intended in Article 28 paragraph (2) or Article 29 shall be subject to administrative sanctions in the form of: a. warning;b. administrative fines; and/orc. revocation of permission. (3) Any Skipper who does not complete the Health Quarantine Document so that	Article 48 of Law Number 6 of 2018 concerning Health Quarantine reads (1) Any Skipper who violates the provisions as intended in Article 19 paragraph (2) or Article 21 shall be subject to administrative sanctions in the form of: a. warning;b. administrative fines; and/or c. revocation of permission. (2) Any Airman Captain who violates the provisions as intended in Article 28 paragraph (2) or Article 29 shall be subject to administrative sanctions in the form of: a. warning;b. administrative fines; and/orc. revocation of permission. (3) Any Skipper who does not complete the Health

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| <p>limited quarantine approval is issued as intended in Article 19 paragraph (5) b shall be subject to administrative fines.</p> <p>(4) Any Airman Captain who does not complete the Health Quarantine Document so that limited quarantine approval is issued as intended in Article 30 paragraph (3) b shall be subject to administrative fines.</p> <p>(5) Any driver or person in charge of a land vehicle that does not complete the Health Quarantine Document so that it is not given health quarantine approval as intended in Article 36 paragraph (1) shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission.</p> <p>(6) Further provisions on the procedures for the imposition of administrative sanctions as intended in paragraph (1) to paragraph (5) shall be regulated by Government Regulation</p> | <p>Quarantine Document so that limited quarantine approval is issued as intended in Article 19 paragraph (5) b shall be subject to administrative fines.</p> <p>(4) Any Airman Captain who does not complete the Health Quarantine Document so that limited quarantine approval is issued as intended in Article 30 paragraph (3) b shall be subject to administrative fines.</p> <p>(5) Any driver or person in charge of a land vehicle that does not complete the Health Quarantine Document so that it is not given health quarantine approval as intended in Article 36 paragraph (1) shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission.</p> <p>(6) Any person who is obliged to undergo quarantine, but is in a public place and a crowded place is subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. are included in a centralized isolation place.</p> <p>(7) Further provisions on the procedures for the imposition of administrative sanctions as intended in paragraphs (1) to (5) shall be regulated by Government Regulation</p> <p>Article 52 of Law No. 6 of 2018 concerning Health Quarantine reads that during the implementation of Home Quarantine, basic living needs for people and food for livestock that are in Home Quarantine are the responsibility of the Central Government.</p> <p>Article 6 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in order to accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads</p> <p>The implementation of Large-Scale Social Restrictions is proposed by the Governor / Regent / Mayor to the Minister who organizes Government affairs in the field of health."</p> <p>Article 3 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in</p> | <p>order to accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads</p> <p>Large-Scale Social Restrictions must meet the following criteria: a. the number of cases and/or the number of deaths from the disease increases and spreads significantly and rapidly to several regions; and b. there is an epidemiological link to similar events in other regions or countries.</p> <p>7. Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions Article 3 Paragraph 1</p> <p>The Minister establishes Large-Scale Social Restrictions in a region based on the request of the governor/regent/mayor.</p> <p>8. Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions Article 4 Paragraph 1</p> <p>The Governor/regent/mayor in applying for Large-Scale Social Restrictions to the Minister must be accompanied by data: a.increase in the number of cases by time; b. spread of cases by time; and c. local transmission events.</p> <p>9. Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19)</p> <p>In the annex to Chapter III of the Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19), final evaluation of clinical status of COVID-19 patients, positive confirmation cases without symptoms, mild symptoms, and symptoms are being declared complete isolation without RT-PCR follow-up examination.</p> |
| | | <p>order to accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads</p> <p>Large-Scale Social Restrictions must meet the following criteria: a. the number of cases and/or the number of deaths from the disease increases and spreads significantly and rapidly to several regions; and b. there is an epidemiological link with similar events in other regions or countries.c.except in areas where there were no cases, suddenly there is 1 case that can be applied PSBB without having to die first.</p> <p>Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions Article 3 Paragraph 1</p> <p>The Minister establishes Large-Scale Social Restrictions in a region. based on the request of the governor/regent/mayor removed</p> <p>Article 4 Paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions</p> <p>The Minister in charge of Health determines the areas that must hold Large-Scale Social Restrictions.</p> <p>Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19)</p> <p>In the annex to Chapter III of the Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19), the final evaluation of the clinical status of COVID-19 patients, positive confirmation cases without symptoms, mild symptoms, and symptoms are declared complete isolation if the results of the RT-PCR follow-up examination are negative.</p> |

According to Anna, Large-Scale Social Restrictions (PSBB) can prevent the transmission of COVID-19 but have a negative impact on the inhibition of interaction and transactions, thus directly affecting the decline of the world economy[10].

The Coronavirus Disease 2019 (COVID-19) pandemic encouraged the government to take various strategic steps as a form of accelerating the handling of COVID-19. One of the strategic policies carried out by the government is the act of health quarantine, namely the implementation of Large-Scale Social Restrictions carried out in various cities or districts in Indonesia. The Laws and Regulations regarding health, it is explained that in order to ensure the implementation of laws and regulations regarding health, a health supervision system is held as clearly mentioned in several articles of laws and regulations, including: Article 14 paragraph (1) of the Law of the Republic of Indonesia Number 36 of 2009 concerning Health which reads: "The government is responsible for planning, regulating, organizing, fostering, and supervising the implementation of equitable and affordable health efforts by the community."

The state's responsibility to the community in the COVID-19 pandemic has become very important, considering that the people are the 'owners' of the highest sovereignty in Indonesia (Article 1 Paragraph (2) of the Constitution of the Republic of Indonesia in 1945). All aspects of government power come from the people, indicating that the people have a principled and central position in the continuity of a country's government. The state is the 'tool' of society to achieve the hopes of the nation[11]

The responsibility of the state can be seen in the 4th paragraph of the Opening of the Constitution of the Republic of Indonesia in 1945, namely protecting the entire Indonesian nation and all Indonesian blood spills, advancing the general welfare, educating the life of the nation, and participating in implementing world order based on independence, lasting peace and social justice. The four responsibilities above are the mandate by the founders of the nation for the stewards of the state. Indonesia is a country that stands on the basis of law (*rechtsstaat*) not based on power alone[11]. The Constitution of the Republic of Indonesia of 1945 has a principled position as a guideline for the governance and implementation of state life, government, and society, not least affirming the existence of the concept of the state.

Article 1 paragraph 3 of the Constitution of the Republic of Indonesia of 1945 affirms that "the State of Indonesia is a state of law". The implication is that all acts of state administration must be based on legal instruments that boil down to the state's objectives, namely protecting and prospering. Article 6 of the Law of the Republic of Indonesia Number 6 of 2018 concerning Health Quarantine also gives responsibility to the central government and local governments for the readiness of all resources needed in the

period of health quarantine. Everyone has the right to get responsibility from the government during the COVID-19 pandemic.

The government took a policy of implementing restrictions on community activities (PPKM) in Java and Bali from January 11-25, 2021. This decision is regulated through the Instruction of the Minister of Home Affairs Number 1 of 2021 concerning Restrictions on Community Activities in Java and Bali. Restrictions on community activities focus on several sectors, namely workplaces or offices, teaching and learning activities, restaurants or places to eat, malls or shopping centers and places of worship. The essential sector and construction activities are allowed to continue, but with strict health protocols.

The policy step of implementing restrictions on micro-based community activities (PPKM Mikro) in all provinces in Indonesia starting February 9, 2021. PPKM Mikro is a micro-based PPKM approach that regulates up to the level of neighboring pillars (RT)/ community harmony (RW) which has the potential to cause COVID-19 transmission. Restrictions on community activities in their implementation should take into account the development of regional risk zoning in each region. The Micro PPKM policy has been extended several times.

In Law No. 6 of 2018 concerning Health Quarantine, there is no Implementation of Restrictions on Community Activities (PPKM), there are Large-Scale Social Restrictions (PSBB) which are then further regulated in Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions in the Context of Accelerating The Handling of Corona Virus Disease 2019 (COVID-19) and Regulation of the Minister of Health Number 9 of 2021 concerning Guidelines for Large-Scale Social Restrictions in the Context of Acceleration Handling Corona Virus Disease 2019 (COVID-19).

The impact of health quarantine measures restrictions on community activities, both the central government and local governments must pay attention to meeting the basic needs of the population, ranging from food, health services, and other daily life, including the needs of domestic animals. Countries must take primary responsibility for preventing, treating and controlling the COVID-19 pandemic[11]

The Indonesian government has issued several appeals after the announcement of the first case in early March 2020, until now, including social distancing and work from home. Both appeals are expected to suppress the spread of the coronavirus because the community reduces activities outside the home. President Joko Widodo chose a rapid test to deal with COVID-19. This is considered more profitable than having to implement a national lockdown policy. Rapid test is a mass health test to find out the patient's condition through a blood sample[11].

The policies made by the Indonesian government are Large-Scale Social Restrictions (PSBB), the establishment of the Committee for handling COVID-19 and National Economic Recovery (KPC-PEN), and

requiring all Indonesians to implement health protocols such as always washing their hands, wearing masks, and keeping their distance from each other. These policies can work effectively and efficiently if the community complies with these policies. Comparative handling of the COVID-19 pandemic in other countries is presented in the following.

Table : 2
Comparative Handling of the COVID-19 Pandemic in Other Countries

No.	Country	COVID-19 Handling Policy
1.	Malaysia	<i>National Lockdown, Self-Isolation for 2 weeks</i>
2.	Singapura	Tightening foreign tourists entering and closing tourist access from China since January 2020. Quickly responding in stopping the spread of COVID-19, with data transparency, in just 2 hours can reveal the patient's close contact. The imposition of strict sanctions against violations of health protocols.
3.	Vietnam	Installation of disinfectant booths in institutions of various important sectors Strict quarantine policy. A complete search of everyone who came into contact with COVID-19 patients.
4.	Thailand	Closure of educational facilities, sports venues, entertainment outlets. Medical robot to detect COVID 19 patients. The role of female volunteer Aksorn Boosamsai oversees quarantine and straightens out hoaxes related to COVID-19. Culture does not shake hands when greeting each other. The implementation of the 'THai Chana' Application curfew policy tracks the movement of people infected with COVID-19. Strict implementation of health protocols Solidarity shoulder to shoulder to fight COVID-19 together
5.	Filipina	The application of social distancing. Halted land, sea, domestic air travel to and from Manila. Quarantine the community. Ban mass meetings. School closures.

A. Reconstruction of Health Quarantine Regulations against The 2019 Corona Virus Disease (COVID-19) Pandemic In a public health emergency. Health quarantine regulations against the response to the COVID-19 pandemic in public health services must be reconstructed with comprehensive, systemic arrangements, both from the aspects of legal culture, legal structure, and legal substance

Reorganizing something based on the original event, in the reconstruction contained primary values that

must remain in the activity of rebuilding something in accordance with the original condition. Reconstruction of Health quarantine regulations against the response to the COVID-19 pandemic in public health emergencies, outlined by the legal system using the theory of the legal system Lawrence M. Friedman[11]which suggests that the legal system consists of legal material/ substance, legal structure and legal culture

Reconstruction of health quarantine regulations against the response to the COVID-19 pandemic in public health emergencies is contained in Article 2, Article 44, Article 48 and Article 52 of the Law of the Republic of Indonesia Number 6 concerning Health Quarantine; Article 3 and Article 6 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in the Context of Accelerating The Handling of Corona Virus Disease 2019 (COVID-19); Article 4 paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions; Attachment Chapter III of the Decree of the Minister of Health Number HK.01.07/MENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19).

Article 2 of Law No. 6 of 2018 concerning Health Quarantine mentions the principles in the implementation of Health quarantine, namely the principle of humanity, the principle of benefits, the principle of protection, the principle of justice, the principle of non-discrimination, the principle of public interest, the principle of cohesion, the principle of legal awareness and the principle of state sovereignty. Health Quarantine should also be held integrated, together and simultaneously, because if it is not implemented simultaneously there is still a chance for increased transmission. Researchers propose reconstruction in article 2 by adding a principle simultaneously after the principle of cohesion, so that Article 2 of Law No. 6 of 2018 concerning Health Quarantine reads "Health quarantine is held on the basis of: a. humanity; b.benefits; c. protection; d.justice; e.non-discriminatory; f.public interest; g.cohesion; i.simultaneously: j.legal awareness; and k. state sovereignty."

The COVID-19 pandemic has not only affected the health sector but also impacted the economic, social, cultural and political sectors. The direction of policy reconstruction in tackling the COVID-19 pandemic in public health services aims to break the chain of transmission of COVID-19 so as to inhibit its spread and casualties do not increase, but the economic, social, cultural and political sectors are not disturbed.

Health Minister Budi Gunadi Sadikin said that the COVID-19 pandemic will not disappear in a short time. Budi said people may stay alive with the SARS-CoV-2 coronavirus in another 5 to 10 years[12].Chairman of the COVID-19 Handling Task Force, Ganip Warsito said, the government will change the handling to control COVID-19. This change in strategy aims to make the pandemic endemic

for COVID-19, so that people can be more productive and safe[13].The regulations that have been enacted have not succeeded in achieving the desired goal because it is less responded to or even ignored altogether by the community. A rule of law is said to be responsive when the law acts as a means of response to social provisions and public aspirations. In accordance with its open nature, this type of law prioritizes accommodation to accept social changes in order to achieve justice and public emancipation[14].

The purpose of the law according to Gustav Radbruch is threefold, namely expediency, certainty, and justice. The principle of priority should be used in carrying out these three legal objectives. Justice may take precedence and sacrifice benefit to the wider community. This is because in reality, legal justice often clashes with the usefulness and certainty of the law and vice versa. The principle of priority used by Gustav Radbruch should be implemented in the following order: 1. Legal Justice; 2. Legal Expediency; 3. Legal Certainty.

The purpose of the law according to Gustav Radbruch is threefold, namely expediency, certainty, and justice. The principle of priority should be used in carrying out these three legal objectives. Justice may take precedence and sacrifice benefit to the wider community. This is because in reality, legal justice often clashes with the usefulness and certainty of the law and vice versa. The principle of priority used by Gustav Radbruch should be implemented in the following order: 1. Legal Justice; 2. Legal Expediency; 3. Legal Certainty[15].

The COVID-19 virus is dangerous and spreading rapidly. If not treated immediately can cause severe pain and even death, especially in vulnerable groups of people such as the elderly, pregnant women, and people with concomitant diseases such as heart, high blood pressure, lung disease, and others.

The existing conditions of existing regulations that exist today have not completely suppressed the number of new cases and deaths due to COVID-19, even the prediction is that COVID-19 will still last a long time and does not support the community's economy. The durability of the community is limited when mobility restrictions last a long time. The need to increase discipline enforcement in implementing the 3M health protocol, is one of the steps to deal with health problems as a determinant for the next step in economic recovery.

In the preparation of policies, data accuracy is required. However, differences in COVID-19 data presented by the central, provincial, municipal and district governments always occur. Deputy II of the Presidential Staff Office (KSP) for Human Development, Abetnego Tarigan mentioned the political interest in the data collection of COVID-19 cases. Local governments when inputting data often isolate so that the area looks fine. This happens because the determination of the PPKM level of a region is based on an assessment of the level of the pandemic situation, namely data on tightening or easing public health efforts and social restrictions based on WHO

standards. The formula is to look at the transmission level in a region, and then divide by the level of response capacity. If there is no controlled spread or transmission of COVID-19 in a region, then the lower the level, between Levels 0 - 2. The situation is already at Level 3 or 4 if the transmission situation begins to spiral out of control or the response capacity begins to be limited or inadequate.

Areas that do not want additional cases of course testing and tracing are reduced so that no positive confirmed cases are found. Similarly, a number of regions that initially implemented PPKM level 4 has dropped to level 3 will reduce the number of tests so that the level can fall again. Epidemiologist Dicky Budiman from Griffith University, Australia reminded for areas that drop in level to remain consistent in testing in accordance with WHO standards.

The main key to breaking the chain of transmission of the COVID-19 virus is community compliance and discipline to implement strict health protocols, namely implementing 3M: wearing masks, maintaining distance, and diligently washing hands. The Police Chief's telegram letter regarding the enforcement of COVID-19 health protocols numbered ST/3220/XI/KES.7./2020 dated November 16, 2020 ordered to enforce the law indiscriminately against violators of health protocols that interfere with public security and order.

In the enforcement of local regulations or regional head regulations on the implementation of COVID-19 health protocols, if there are attempts at rejection, non-compliance or other efforts that cause community unrest and disrupt the stability of kamtibmas, then strict law enforcement efforts are made against anyone. Based on the Decree of the Minister of Health Number HK.01.07/MENKES/382/2020 of 2020 concerning Health Protocols for People in Public Places and Facilities in the Framework of Prevention and Control of Corona Virus Disease 2019 (COVID-19) (Attachment p. 7), health protocols in general must contain provisions for the use of personal protective equipment in the form of masks covering the nose and mouth to chin, if you have to go out of the house to interact with other people whose health status is unknown.

The COVID-19 health protocol in the Ministry of Health HK.01.07/2020 was then used as a reference for ministries / institutions, provincial governments, district / city governments, and communities both in policy determination, business activity development, business implementation / activities, community activities, and in supervising activities in public places and facilities, in order to prevent the occurrence of new epicenters / clusters during the COVID-19 pandemic. The rules for sanctioning those who do not wear masks refer to their respective local regulations. Penalties that can be imposed are not only in the form of fines, but with the addition of other penalties such as verbal / written reprimands and social work.

The Indonesian government in addition to preparing sanctions against violators of health protocols, also prepared three sanctions for people who refuse COVID-19 vaccinations. The Ministry of Health said this

step was taken so that the target of herd immunity against the coronavirus was achieved. Presidential Regulation Number 14 of 2021 concerning Vaccine Procurement and Vaccination Implementation, regarding sanctions stated in article 13a paragraph 4. that any person who has been designated as a target recipient of the COVID-19 vaccine who does not participate in vaccination may be subject to administrative sanctions in the form of: delay or termination of social security or social assistance; delay or termination of government administrative services; and/or fines

The legal construction built during the outbreak was made on the understanding that the louder the sound of the law, the higher the level of compliance with community law. The idea of progressive law offered by Satjipto Rahardjo, law enforcement that makes humans the core of the law can be done in any situation including in times of plague like this. Progressive law bases its view on the idea that, "the law is for man, not man for the law". Progressive law breeds a variety of dynamic and responsive frame of mind in response to various existing conditions. Some progressive legal ideas that can be used as guidelines in creating law enforcement that humanizes humans in the time of COVID-19, one of which is by understanding that regulation as an instrument / tool to help humans.

The current special circumstances have forced the law to give birth to various new rules in a short time and in large numbers, but it has no impact at all on the need for a decline in human standing in the face of these rules. Law enforcement against the COVID-19 pandemic must be implemented with the understanding that the regulation aims to limit or reduce certain rights owned by the community, not as a legitimacy to violate people's rights in the law enforcement process. The law must always seek to liberate and lead society to prosperity and happiness. Law enforcement is required to always look at the various conditions that accompany individuals / parties that will be subject to existing rules, and dare to take useful policies that are outside the specified regulations.

Various restrictions and prohibitions on a number of things related to the spread of COVID-19 must be implemented by law enforcement by looking thoroughly at how the impact of a regulation on individuals / groups, and vice versa, by looking at what drives these individuals / groups to commit violations and exceptions to existing regulations. The success of various strategies and regulations to overcome the COVID-19 pandemic led to the ability of law enforcement to use these rules. Law enforcement during the COVID-19 period must also dare to break into the legal culture that has been implemented.

Reconstruction of COVID-19 pandemic management regulations in addition to aiming to break the chain of COVID-19 transmission to be controlled for its spread, increasing discipline for the implementation of health protocols by implementing sanctions, must also think about keeping the community productive, so that the economic, social, cultural sectors are not disturbed. The

implementation of sanctions against violators of health protocol 3 M has been imposed on all regions, but there have been no sanctions against areas that do not test and trace according to WHO standards and tend to hide data so that the area looks fine. The researcher proposed that the level determination should not only be based on reported data but that there should be data validation from experts.

Areas that deliberately do not present accurate data should be sanctioned. People can remain productive in carrying out daily activities by implementing health protocols, diligently checking their health by testing at least once a month and have been vaccinated. In early detection testing and tracing activities, if it is found that there is a positive confirmed immediately, isolation is carried out in a centralized isolation place, it is not allowed to undergo self-isolation in their respective homes, so that there is no family cluster. The initial regulation and reconstruction of regulations are shown in the following

Table : 3
Existing And Ideal Health Quarantine Regulation

Initial regulation	Reasons for Reconstruction	Reconstruction	Reconstruction Results
Article 2 of Law Number 6 of 2018 concerning Health Quarantine reads Health Quarantine is held based on: a.humanity b.benefits c.protection d.justice e.non-discriminatory f.public interest g.cohesion h.legal awareness;and i.sovereignty of the state.	The principle of Health quarantine measures that are not implemented simultaneously, making health quarantine actions carried out is not integrated, not implemented together and not implemented simultaneously, resulting in community mobilization continues to increase so that the chances of COVID-19 transmission continue to occur.	letter h. cohesion replaced h.simultaneously, replacement of letter i. sovereignty of the state into i.legal awareness addition of the letter j. state sovereignty.	Article 2 of Law Number 6 of 2018 concerning Health Quarantine reads Health Quarantine is held based on: a.humanity b.benefits c.protection d.justice e.non-discriminatory f.public interest g.cohesion h.simultaneously i.legal awareness;and j. sovereignty of the state.
Article 44 of Law No. 6 of 2018 concerning Health Quarantine reads Every Item that has Public Health Risk Factors in Transport Equipment	The conveyance not only contains goods that are in quarantine status, but people who are in the conveyance also have public health	Addition of the word "person and" before the word goods	Article 44 of Law No. 6 of 2018 concerning Health Quarantine reads Every Person and Goods that have Public Health Risk Factors in Transport Equipment that is in Quarantine Status, Health

<p>that is in Quarantine Status, Health Quarantine Officials carry out Health Quarantine actions as intended in Article 15 paragraph (2) c and d coordinate with related parties.</p>	<p>risk factors and enter into quarantine status.</p>	<p>Quarantine Officials carry out Health Quarantine actions as intended in Article 15 paragraph (2) c and d coordinate with related parties.</p>	<p>quarantine approval is issued as intended in Article 19 paragraph (5) b shall be subject to administrative fines. (4) Any Airman Captain who does not complete the Health Quarantine Document so</p>	<p>a limited quarantine approval is issued as intended in Article 30 paragraph (3) b is subject to administrative fines. (5) Any driver or person in charge of a land vehicle that does not complete the Health Quarantine Document so that it is not given health quarantine approval as intended in Article 36 paragraph (1) shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission. (6) Any person who is obliged to undergo quarantine, but is in a public place and crowded place is subject to sanctions administrative in the form of: a. warning; b. administrative fines; and/or c. are included in a centralized isolation place. (7) Further provisions on the procedures for the imposition of administrative sanctions as intended in paragraphs (1) to (5) shall be regulated by Government Regulation</p>
<p>Article 48 of Law Number 6 of 2018 concerning Health Quarantine reads (1) Any Skipper who violates the provisions as intended in Article 19 paragraph (2) or Article 21 shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission. (2) Any Airman Captain who violates the provisions as intended in Article 28 paragraph (2) or Article 29 is subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission. (3) Any Skipper who does not complete the Health Quarantine Document so that limited</p>	<p>Sanctions are needed to support changes in behavior towards everyone. Administrative sanctions in the form of warnings, administrative fines are not only applied to the skipper, captain of the airman, driver or person in charge of the conveyance, but must also be applied to the person in the conveyance..</p>	<p>Replacing the contents of paragraph (6) Everyone who is obliged to undergo quarantine, but is in a public place and crowded place is subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. are included in a centralized isolation place. Adding 1 verse, namely paragraph (7) which contains paragraph (6) before.</p>	<p>Article 48 of Law Number 6 of 2018 concerning Health Quarantine reads (1) Any Skipper who violates the provisions as intended in Article 19 paragraph (2) or Article 21 shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission. (2) Any Airman Captain who violates the provisions as intended in Article 28 paragraph (2) or Article 29 shall be subject to administrative sanctions in the form of: a. warning; b. administrative fine; and/or c. revocation of permission. (3) Any Skipper who does not complete the Health Quarantine Document so that limited quarantine approval is issued as intended in Article 19 paragraph (5) b shall be subject to administrative fines. (4) Any Airman Captain who does not complete the Health Quarantine Document so that</p>	<p>that a limited quarantine approval is issued as intended in Article 30 paragraph (3) b is subject to administrative fines. (5) Any driver or person in charge of a land vehicle that does not complete the Health Quarantine Document so that it is not given health quarantine approval as intended in Article 36 paragraph (1) shall be subject to administrative sanctions in the form of: a. warning; b. administrative fines; and/or c. revocation of permission. (6) Further provisions on the procedures for the imposition of administrative sanctions as intended in paragraph (1) to paragraph (5) shall be regulated by Government</p>

Regulation				accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads Large-Scale Social Restrictions must meet the following criteria: a. the number of cases and/or the number of deaths from the disease increases and spreads significantly and rapidly to several regions; and b. there is an epidemiological link to similar events in other regions or countries.	spread significantly and quickly to some regions resulting in its management being too late. An area can be declared an extraordinary event if there were no cases, then there is 1 case, health quarantine measures can be carried out immediately, so that the spread does not occur.	having to have a case of death first.	Corona Virus Disease 2019 (COVID-19) reads Large-Scale Social Restrictions must meet the following criteria: a. the number of cases and/or the number of deaths from the disease increases and spreads significantly and rapidly to several regions; and b. there is an epidemiological link with similar events in other regions or countries.c. except in areas where there were no cases, suddenly there is 1 case that can be applied PSBB without having to die first.
Article 52 of Law No. 6 of 2018 concerning Health Quarantine reads that during the implementation of Home Quarantine, basic living needs for people and food for livestock that are in Home Quarantine are the responsibility of the Central Government.	Basic living needs for people undergoing home quarantine are not only the responsibility of the central government, but also the responsibility of the local government.	Adding the word "and Local Government" after the word Central Government	Article 52 of Law No. 6 of 2018 concerning Health Quarantine reads "during the implementation of Home Quarantine, basic living needs for people and livestock food that are in Home Quarantine are the responsibility of the Central Government and Local Government.				
Article 6 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in order to accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads The implementation of Large-Scale Social Restrictions is proposed by the Governor / Regent / Mayor to the Minister who organizes Government affairs in the field of health."	Provisions for the Implementation of PSBB Health Quarantine Measures that must be proposed by local governments hinder the implementation of the quarantine act as a whole. Not all regions want to propose PSBB, because the implementation of PSBB has an impact on economic, social, cultural.	The word "proposed by the Governor/Regent/Mayor to the Minister who conducts Government affairs in the field of Health" is removed, replaced instructed by the President to all regions of the unitary state of the Republic of Indonesia	Article 6 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in order to accelerate the handling of Corona Virus Disease 2019 (COVID-19) reads The implementation of Large-Scale Social Restrictions was instructed by the President to all regions of the unitary state of the Republic of Indonesia.	Article 3 Paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Social Restrictions Large-scale The Minister establishes Large-Scale Social Restrictions in an area based on the request of the governor / regent / mayor.	Large-Scale Social Restriction Health Quarantine Measures are not set by the Minister based on request of the regional head, but it can be directly determined by the Minister who oversees health affairs.		Article 3 Paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions Minister establishes Large-Scale Social Restrictions in a region.
Article 3 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in order to	Health quarantine measures that can only be established in areas where the number of cases and deaths is increasing, because it has	The addition of the letter c. except in areas where there were no cases, suddenly there is 1 case that can be applied PSBB without	Article 3 of Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions (PSBB) in order to accelerate the handling of	Article 4 Paragraph 1 Regulation of the Minister of Health Number 9 of 2020 concerning guidelines for Large-Scale Social Restrictions of Governors	Health quarantine measures are directly established by the Minister, without waiting for an increase in cases and deaths..	Replacing the sentence "Governor/regent/mayor in applying for Large-Scale Social Restrictions to the Minister must be accompanied by data: a.increase in	Article 4 Paragraph 1 of the Regulation of the Minister of Health Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions The Minister in charge of Health determines the

/ regents / mayors in applying for Large-Scale Social Restrictions to the Minister must be accompanied by data: a.increase in the number of cases by time; b. spread of cases by time; and c. local transmission events.

Decree of the Minister of Health Number HK.01.07/M ENKES/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19) In attachment to Chapter III of the Decree of the Minister of Health Number HK.01.07/M ENKES/413/2020 Concerning Coronavirus Disease Prevention and Control Guidelines 2019 (COVID-19), final evaluation of clinical status of COVID-19 patients, positive confirmation cases without symptoms, mild symptoms, and symptoms are being declared complete

Patients who are confirmed positive and have undergone self-isolation for 10 days, when tested for antigen swabs, there are still many positive ones.

the number of cases by time; b. spread of cases by time; and c. local transmission events." Being the Minister in charge of Health determines the areas that must hold Large-Scale Social Restrictions."

Replace the sentence "without RT-PCR follow-up examination." Becomes "when the results of the RT-PCR follow-up examination are negative."

areas that must hold Large-Scale Social Restrictions.

Decree of the Minister of Health Number HK.01.07/MENKE S/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19) In the annex to Chapter III of the Decree of the Minister of Health Number HK.01.07/MENKE S/413/2020 concerning Guidelines for prevention and control of Coronavirus Disease 2019 (COVID-19), the final evaluation of the clinical status of COVID-19 patients, positive confirmation cases without symptoms, mild symptoms, and symptoms are declared complete isolation if the results of the RT-PCR follow-up examination are negative.

isolation without RT-PCR follow-up examination.

Regulation of Corona Virus Disease Pandemic Management in the Current Public Health Emergency.

The regulation of COVID-19 pandemic response in public health emergencies has not provided optimal efforts in tackling the COVID-19 pandemic, due to the following:

1. Harmonization of regulations with each other regulations that have not been synchronized so that they have not fully supported the response to the COVID-19 pandemic in public health services.
2. Health quarantine regulations related to the COVID-19 pandemic response have not been able to cope with the COVID-19 pandemic optimally, it can only increase the number of cases and deaths which can then occur a spike in cases again. This is because the substance of the law only limits community activities so as to reduce community productivity which further impacts the economic, social and cultural sectors. Each region makes regulations with different legal substances.
3. The legal substance of health quarantine regulation against the response to the COVID-19 pandemic in public health emergencies, its implementation has not been able to overcome the COVID-19 pandemic. Substance of Article 2, Article 44, Article 48, and Article 52 of Law No. 6 of 2018 concerning Health Quarantine; Article 3 and Article 6 of Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions; Article 3 and Article 4 of the Minister of Health Regulation Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions; and the Decree of the Minister of Health Number HK.01.07 /MENKES/413/2020 concerning Guidelines for the Prevention and Control of Coronavirus Disease 2019 (COVID-19) has been implemented, but the COVID-19 pandemic response is not optimal.
4. The legal structure has not supported the implementation of the COVID-19 pandemic in a complete / complete manner, each region has a different legal structure and there is still weak supervision related to health quarantine.
5. Aspects of legal culture in the response to the COVID-19 pandemic in each region are different, have not fully supported the change in behavior, mindset and attitude towards the termination of transmission chain which is an effort to overcome the COVID-19 pandemic in

public health emergencies.

- a. Reconstruction of Health Quarantine Regulations against The 2019 Corona Virus Disease (COVID-19) Pandemic In a public health emergency. Health quarantine regulations against the response to the COVID-19 pandemic in public health services must be reconstructed with comprehensive, systemic arrangements, both from the aspects of legal culture, legal structure, and legal substance.
 1. The substance of the law must be consistent both from one Law with other Laws, Government Regulations, and The Minister of Health Regulation governing the COVID-19 pandemic Response in public health emergencies. Clear and concrete understanding and procedures about what the central government does and what the local government does. The legal substance created must also be based on accurate COVID-19 situation data. Reconstruction of the substance of the law made in addition to containing efforts to break the chain of transmission of COVID-19, also contains how the community remains productive but safe from the transmission of COVID-19, so that economic, social and cultural aspects are not affected. The substance of the law in Article 2 of Law No. 6 of 2018 concerning Health Quarantine, the principle of Health Quarantine Measures in addition to being based on humanity, benefits, protection, justice, non-discrimination, public interest, cohesion, legal awareness and state sovereignty, need to be added simultaneous principles. The legal substance of Article 44 of Law No. 6 of 2018 concerning Health Quarantine is reconstructed, so that people who have health risk factors in transportation equipment that are in quarantine status must also be carried out health quarantine measures. The legal substance of Article 48 of Law No. 6 of 2018 concerning Health Quarantine is reconstructed, so that sanctions are not only given to the skipper, captain of the airman, driver or person in charge of the conveyance, but sanctions are also given to the person in the conveyance if it violates the Health Quarantine Act. The legal substance of Article 52 of Law No. 6 of 2018 concerning Health Quarantine is reconstructed, so that the fulfillment of basic life for people undergoing quarantine is not only the responsibility of the central government, but also the responsibility of the local government.
 2. Legal or institutional structure, to provide legal certainty for the community by involving police, security officers up to the RT level so that the whole community is involved in tackling the COVID-19 pandemic.

3. Aspects of legal culture, functioning the law as a means of education to socialize and educate the community in the response to the COVID-19 pandemic. The public is given knowledge to know how to overcome and decide the chain of transmission from COVID-19 disease, so that there is a change in mindset, attitudes and behaviors that support the development of health laws and policies that must be built on the values of Pancasila and the Constitution of the Republic of Indonesia in 1945.

SUGGESTION

Based on the results of the study that has not been answered in the conclusion, the researcher can include in the following suggestions:

- a. For the Government, it should make clear, synchronous and harmonious regulations for the implementation of the COVID-19 pandemic so that COVID-19 infectious diseases are controlled and the community is safe, protected but the community remains productive.
- b. For Law Enforcement, it should conduct security and law enforcement indiscriminately against anyone who commits violations of the COVID-19 pandemic response.
- c. For Health Workers, they should carry out their duties in accordance with standard operational procedures to protect themselves.
- d. For the Community, the community should be able to help the government in tackling the COVID-19 pandemic by participating in socializing and educating the importance of health protocols, testing, tracing, treatment and vaccination.

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