

Covid-19 Vaccination In Indonesia: The Problem Between Community Protection And Government Responsibility

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Abstract

Implementation of vaccination in Indonesia is based on Presidential Regulation Number 99 of 2020 concerning Procurement of Vaccines and Implementation of Vaccinations which is actually intended to prevent the spread of Covid-19 during a pandemic. However, the vaccinations carried out also caused Post-Immunization Follow-up Events (AEFI). The purpose of writing is to find out the form of legal protection for the community as well as the government's responsibility for the Covid-19 Vaccine AEFI. The literature study research method uses a statutory, case and comparative approach. The research results show that the Covid-19 vaccination as a national program is a real form of legal protection for the wider community as well as realizing the safety of all citizens. The existence of a legal policy set by the government has actually accommodated the needs of the community before and after the Covid-19 pandemic conditions were established through various legal regulations and practically carried out by administering vaccines. However, during this process there were also Post-Immunization Follow-Up Events which resulted in health impacts on vaccine recipients. Therefore, the government has the responsibility not only to suppress the spread of Covid-19 but also to be responsible for the occurrence of AEFI. This responsibility is carried out through the formation and implementation of the authority of the National Commission on Child Protection and the National Committee on Child Protection and Child Protection which are spread at the central and regional levels by tracing KIPi cases as well as financing the KIPi cases that occur.

Keywords: Covid-19 Vaccines; Community Protection; Government Responsibilities

INTRODUCTION

Health becomes a very important thing in the life of every human being. In carrying out every daily activity, every human being needs a fit body and a healthy environment so that every activity runs smoothly (Abdussamad dkk., t.t.). Therefore, determining the elements of Health for humans not only depends on the condition of the sufferer, but also ensures that the surrounding environment is in a clean and healthy condition. Both aspects are pursued by the state through various government policies with the aim of protecting every community with the ultimate goal is a society that will feel happy and prosperous life (Bakung dkk., 2022).

Indonesia as a legal state that is actually present to the welfare of the people without exception, it can be said that Indonesia aims to create a welfare state (welfare state). As a welfare state, Indonesia provides services to its people in the form of education or health services (Kiswanto, 2015). Based on this, the people can demand what must be obtained as stipulated very clearly and clearly in the Constitution, especially to get health services (Elviandri dkk., 2019).

Constitutionally, the responsibility of the state to provide health is a right for every citizen as stipulated in the 1945 Constitution of the Republic of Indonesia (UUD 1945). Article 28A of

the 1945 Constitution explains that: *every person shall be entitled to live and be entitled to defend his/her life and living* (Widodo dkk., 2023). Furthermore, in Article 28H paragraph (1) it is reaffirmed that: every person is entitled to live prosperous physically and spiritually, to have a place to reside, and to acquire a good and healthy living environment as well as be entitled to obtain health care.

The formulation of the two articles of the Constitution shows the responsibility of the government in pursuing the environment and health services while affirming that access to health and the environment is a fundamental right for every citizen. As a human right, then strive for health as much as possible is a necessity. From the existence of this article, it provides an understanding that every human being has the right to his life in any circumstances, including in the conditions of the outbreak of the Covid-19 pandemic that affects the whole world without exception in Indonesia.

Covid-19 is a disease caused by a virus known as Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV2), this virus can have implications for carrying the disease in humans and animals. In humans, this virus causes respiratory infections such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) (Covid, 2021). In general, as a result of the Covid-19 infection, it causes symptoms with mild, moderate, and severe categories. The main symptoms resulting from Covid-19 infection to human health can be fever, cough, and respiratory distress. Then, Covid-19 will be more dangerous for older or elderly age groups and for comorbid groups, because it can increase risk factors for diseases such as high blood pressure (hypertension), asthma, heart disease, or other chronic diseases.

The spread of Covid-19 occurs in an incubation period of 5-6 days with a span of 1 to 14 days. The risk level of transmission of Covid-19 occurs in the early days of infection due to the contemplation of the virus is very high, then later people infected with the virus can transmit to other people within 48 hours before presymptomatic and up to 14 days after symptoms (T. Covid & IDI, 2020). In Indonesia itself, people who are confirmed to be infected with Covid-19 have compiled more than 4 million (*Data Vaksinasi COVID-19 (Update per 5 November 2021) - Berita Terkini | Covid19.go.id, t.t.*). This situation forces all elements, especially the government, to try to take action to fight the pandemic. Despite the many policies that have been implemented by Indonesia, such as increasing self awareness of the existence of Covid-19, taking action against sufferers, taking preventive actions to destroy the chain, to educating the community about the existence of Covid-19 (Wahidah dkk., 2020).

Responding to the massive spread of Covid-19, many health agencies are also trying to participate to solve problems that seek to break the chain of the spread of Covid-19 by creating vaccines. In the third quadrant of 2020, several pharmaceutical companies managed to create a Covid-19 vaccine, one of them is Sinovac Biotech with its product Sinovac vaccine. Because there are already several vaccines available, the government is actively procuring vaccines from pharmaceutical companies in the world that have succeeded in creating Covid-19 vaccines.

Based on the decree of the Minister of Health HK number.01.07 / MENKES / 12758/ 2020 on penetration of vaccine types for Coronavirus infection 2019 (Covid-19), there are several types of Covid-19 vaccines that are allowed to circulate in Indonesia, including those produced by PT Bio Farma (Persero), AstraZeneca, China National Pharmaceutical Group Corporation (Sinopharm), Moderna, Novavax Inc, Pfizer Inc. and BioNTech, Sinovac Life Science Co. Ltd., as a trusted vaccine in Indonesia to be used face vaccination for the whole community. Until the

third week in December 2021, it was recorded that people who had vaccinated against Covid-19 dose 1 were 156 million more and dose 2 was a total of 110 million more (*Vaksin Dashboard*, t.t.).

The implementation of vaccination in Indonesia is based on Presidential Regulation No. 99 of 2020 concerning the procurement of vaccines and the implementation of vaccinations in the framework of combating the corona Virus Disease pandemic (Covid-19) which has been amended for the third time, namely with Presidential Regulation No. 14 of 2021 concerning amendments to Presidential Regulation No. 99 of 2020 concerning the procurement, and vaccination implementation in the context of combating the 2019 Corona virus disease pandemic, Presidential Regulation Number 50 of 2021, and the last is Presidential Regulation Number 33 of 2022. The scope of this regulation includes the procurement and implementation of Covid-19 vaccinations. Please note that the Covid-19 vaccine circulating in general has received approval for the use of drugs during public health emergencies or what is known as Emergency Use Authorization by BPOM (Gandryani & Hadi, 2021). Therefore, with this emergency period, based on the regulation of the drug and food Supervisory Agency Number 27 of 2020 concerning the Second Amendment to the regulation of the head of the drug and food Supervisory Agency Number 24 of 2017 concerning criteria and procedures for Drug Registration, precisely in Article 3, it is regulated that the distribution permit for drugs is ruled out in the Covid-19 vaccine because it meets the criteria in the form of drugs in special use and emergency use of drugs during public health emergency conditions.

In practice, the implementation of vaccination in Indonesia involves various stakeholders including the Ministry of Health. Not only that, the presence of Presidential Decree Number 18 of 2020 concerning the national team for the acceleration of the Corona Virus Disease 2019 (Covid-19) vaccine (Presidential Decree 18/2020), makes the Food and Drug Supervisory Agency (BPOM) also contribute to vaccine problems in Indonesia. BPOM's involvement is clearly visible in the decision, in Articles 9 and 10 of Presidential Decree 18/2020 which states that the head of BPOM is one of the members of the Covid-19 vaccine development team and is supported by other parties.

However, the implementation of vaccination in Indonesia did not go smoothly. Because in the implementation of vaccination there is anxiety and the emergence of pros and cons that come from the community. The number of pros and cons present, the question that approaches is the extent of side effects and the effectiveness of the Covid-19 vaccine (Gandryani & Hadi, 2021). The anxiety is present because of the vaccination action is possible to cause adverse events following immunization (AEFI) both light and heavy categories. Of course, with these problems, people are restless to vaccinate, as a result, the public's interest in vaccination is not fully met to vaccinate against Covid-19. AEFI or as adverse events following immunization has a short meaning is the body's response to vaccination. The resulting implications are also different, starting from headaches, fever, trembling, not feeling well, or difficult to swallow. Then this AEFI also occurs globally, especially in the United States as of the end of October 2021, the American Department of Health has received approximately 6 thousand cases of AEFI including 47 deaths, 2 thousand more cases of hospitalization, and 4148 other cases. One of the contributors to the AEFI number in America comes from the Sinovac vaccine vaccination, which reaches 2 thousand cases (*Centre for Health Protection, Department of Health - COVID-19 Vaccination Programme*, t.t.).

In Indonesia itself, there has not been a fatal impact due to Covid-19 vaccination to cause death. Referring to data released until the end of 2021, AEFI cases that occurred in all Indonesian provinces were 363 serious cases (*Komnas KIPI Belum Ada Kasus Meninggal Disebabkan Vaksinasi COVID-19 | Covid19.go.id*, t.t.). AEFI cases that occur in various countries including in Indonesia show that there is indeed open space for health impacts after vaccination.

Such conditions become increasingly problematic in the community when faced with mandatory vaccinations in all aspects of the social line so that it becomes a requirement for everyone's activity to require a vaccination certificate as proof of having been vaccinated. The government's policy by requiring vaccination in the middle of the AEFI cases that occur raises new problems about protecting the community as well as steps from the government in addressing the problems of AEFI cases that occur. This is certainly intended to provide a sense of security for the community in vaccinating against Covid-19.

RESEARCH METHODS

The limits of the problem that has been set while observing the title of the study so in the description of the second discussion, the problem formulation will be analyzed normatively. Therefore, this research is categorized as normative research or commonly known as doctrinal legal research. This kind of research is done because often the law is conceptualized as what is written in the legislation. Normative legal research or method library research method is a method or way to used in legal research conducted by researching existing library materials(Jonaedi Efendi dkk., 2018). Normative legal research as a type of research conducted by examining library materials as secondary data and then use the approach of legislation, case approach, and comparative approach. Through these three approaches, it is expected that the evaluative analysis will produce justification as well as answers to the problems raised by the author.

RESULT AND DISCUSSION

Covid-19 Vaccination and its impacts

The Covid-19 pandemic status was determined through a long process. The World Health Organization (WHO) study was carried out in three meetings. The first meeting could have produced conclusions related to the criteria for public health emergency of international concern (PHEIC) in the Covid-19 case, followed by the second meeting. The same thing still needed to occur in agreement to declare PHIEC status. Only at the third meeting did the Emergency Committee declare the spread event that had spread to various countries in the world of Covid-19 as PHEIC (Nadilla, 2020).

After the Covid-19 pandemic, various policies have been established and implemented in various countries to tackle COVID-19, including Indonesia. Some of the regulations the author mentions in the background section show the maximum effort from the government in suppressing the spread of Covid-19. Another concrete step is to establish a mandatory vaccination policy to protect every citizen until the formation of herd immunity in a wider

community.

Vaccination itself is the administration of vaccines in order to actively increase a person's immunity to a disease, so that when one day exposed to the disease will not experience illness or will only experience mild pain and will not transmit it to others (Kemenkes, 2021). Giving vaccines is not the same as giving drugs intended to cure, but vaccines will encourage specific immunity in everyone's body.

Vaccines are biological products that contain antigens in the form of microorganisms or their parts or substances produced by them that have been processed in such a way that they are safe, which, when given to someone, will cause immunity in the body actively against certain types of diseases. The interpretation shows that the vaccine will work in the body to protect everyone because of three things, namely:

- (1) A vaccine is a biological product given to people to protect them from a debilitating, even life-threatening disease.
- (2) Vaccines will stimulate the formation of immunity against certain diseases in one's body.
- (3) The body will bind to the specific virus or bacteria carrying the disease to recognize and know how to fight it.

So important is vaccination for every citizen that vaccination is designated as a national program, where the implementation of COVID-19 Vaccination to the public whose funding is borne or borne by the government. Referring to the Minister of Health Regulation Number 7 of 2023, the vaccination program is carried out in two stages, namely : (Pasal 1 angka 6 dan angka 7 Peraturan Menteri Kesehatan Nomor 7 tentang Pengadaan Vaksin dan Pelaksanaan Vaksinasi dalam Rangka Penanggulangan Pandemi Corona Virus Disease 2019 (COVID-19)., 2023)

- (1) Complete Dose Primary Vaccination, which is the main dose of the Covid-19 vaccine following the vaccine type regimen to provide immunity against Covid-19 disease within a certain period.
- (2) Booster vaccination is a Covid-19 vaccination after a person as received a complete primary vaccination dose aimed at maintaining immunity and extending the protection period.

Vaccination carried out at health facilities or other places that have been determined following these procedures is known as program vaccination and cooperation vaccination. Mutual Aid Vaccination is a form of implementing COVID-19 Vaccination to employees, families, and other related individuals in the family and other communities whose funding is borne or charged to legal entities or business entities (Pasal 1 angka 8 Peraturan Menteri Kesehatan Nomor 7 tentang Pengadaan Vaksin dan Pelaksanaan Vaksinasi dalam Rangka Penanggulangan Pandemi Corona Virus Disease 2019 (COVID-19)., 2023, hlm. 1).

Vaccinations carried out, both as a national program and in cooperation, are intended to provide certain benefits for each citizen and the wider community. There are at least four benefits of vaccine administration, namely:

- (1) Stimulating the immune system.

Vaccines, consisting of various biological products and parts of weakened viruses injected into humans, will stimulate a person's immune system.

- (2) Reduce the risk of transimission.

The body of a person injected with a vaccine will stimulate antibodies and recognize

weakened virus. Thus, the body will hit the virus and reduce the risk of exposure.

(3) Reducing the severe impact of the virus.

With the immune system already recognizing the virus, if a person's immune system is defeated and then exposed, the impact or symptoms of the virus will be weakened.

(4) Achieving Herd Immunity.

The more individuals vaccinated in an area or country, the more herd immunity will be achieved, thus minimizing the risk of exposure and mutation of the Covid-19 virus. (Superadmin, t.t.)

Vaccinations carried out in Indonesia are then mandatory at certain ages and conditions, such as before traveling using various modes of transportation. The mandatory vaccine policy is an effort to save the community from further chaos. This effort is also a form of government maintaining everything built together so that it is not lost and destroyed due to a pandemic (Bustomi, 2022). The efforts made by the government are certainly a form of providing happiness and benefits to the community so that the spread of Covid-19 does not cause panic, chaos and even more casualties in the community. Through this legal engineering, the government tries to rebuild the country's chaotic state due to the Covid-19 pandemic, which has caused the world to pause from its various activities.

Covid-19 vaccination during a pandemic is a "Public Goods" effort carried out by the Government as an Obligatory Public Health Function. To accelerate the decline of the pandemic, immunization coverage of 70% is needed so that 'herd immunity' is immediately achieved in less than 1 year (Tinungki dkk., 2022). In summary, the implementation of vaccination started on January 13, 2021, and is expected to be one of the preventive measures used to control Covid-19 transmission in Indonesia.

Regarding the vaccination process, everyone has the right to choose the health services they want, including vaccination. However, this does not mean that it is the basis for justification in refusing vaccination. From this, implementing vaccination in Indonesia can be categorized as a citizen's obligation. There is indeed a person's right to choose health services for him. However, in the context of a pandemic, this right can be reduced to achieve the state's goal of protecting the entire Indonesian nation, which also includes protecting one's human rights to obtain the right to a healthy life (Gandryani & Hadi, 2021).

The government's efforts by vaccinating Covid-19 are carried out to protect all citizens and are based on various good benefits. However, with more than 270 million citizens with various conditions and environments, vaccination sometimes runs smoothly without experiencing obstacles. In its implementation, there are effects and other disorders experienced by certain people due to the administration of vaccines.

The effects and disturbances referred to by the author are other impacts of the vaccination. In the medical world, this is commonly referred to as *adverse events following immunization (AEFI)*. AEFI is a medical event that occurs after vaccination or immunization, is a concern and is suspected to occur due to administering certain vaccines. This effect, referred to as AEFI, is the focus of the problem in this article, where vaccination as a program must also be seen to protect every citizen, including protection after AEFI and the actions taken by the government against AEFI.

Legal Protection for the Public in the Covid-19 Vaccination Process in Indonesia

The term *Salus populi suprema lex*, or some call it *Salus populi suprema lex esto*, or *Salus populi suprema est* means that the safety of the people is the supreme law is one of the adages in law that emphasizes that all policies taken by a legitimate government, both in normal times and in emergency conditions must be based on the context of safety as the main objective.

In carrying out its obligations and responsibilities towards the safety of the people, the government has two types of duties simultaneously, namely negative and positive. Negative duties mean that the government and public officials must not arbitrarily or deliberately take someone's life. Meanwhile, positive duties should mean that the government is obliged to pay attention to and protect the right to life of its people in every action and decision-making.

In the context of the Covid-29 pandemic problem, every decision and policy that the government will take in handling the covid-19 pandemic must place the safety of the lives of its people as the main priority and goal. Although other important factors also need to be saved, for example, the country's economy, the end of all these policies must be directed as optimally as possible to prevent the loss of life or the increasing number of infected patients.

Efforts to prioritize the interests and safety of the people as the first thing also include overriding the law in the context of safety. The government chooses this condition as a representation of state representation in protecting all elements of the nation without exception. This protection effort must be seen in the form of field practice and legal regulations so that protection efforts in the conditions of the Covid-19 pandemic are an inseparable part of legal protection efforts.

In the context of people's safety, the principle of the rule of law and the principle of protecting basic rights support each other. Protecting the basic rights of citizens against their emergency conditions certainly begins with legal protection efforts through various legal regulations that accommodate the conditions and expectations of handling the conditions of the Covid-19 pandemic. The birth of regulations such as Government Regulations in place of Laws, Government Regulations, Presidential Regulations, to regulations of the Minister of Health must be placed in a position that protects rights and realizes people's safety so that if the birth of various new legal regulations must change or replace the previous legal basis, it is understandable with both the basis of protecting rights and realizing people's safety.

As a consequence of the choice of the rule of law, legal regulations are formed to protect the rights of citizens, including the constitutional rights of citizens regulated in the Constitution. Therefore, the rule of law is not just meaningful if it is understood that the state has produced laws, but the legal apparatus and the community do not have what it has (Atmasasmita, 2012). Every legal product, policy and action of state administrators is in the context of protecting, promoting, upholding and fulfilling the constitutional rights of citizens (Gaffar & Budiarti, 2012).

The legal footing in various regulations established or even implemented reflects legal protection. On the other hand, legal protection is used as a theoretical reference in fulfilling citizens' rights. The term legal protection comes from English, namely legal protection theory. At

the same time, in Dutch, it is called *theorie van de wettelijke bescherming*, and in German, it is called *theorie der rechtliche schutz* (Nurbani;, 2017). Philipus Hadjon defines *legal protection* as the protection of dignity and recognition of human rights owned by legal subjects in a legal state based on the provisions of the law in force in the country to prevent arbitrariness. Legal protection is generally in the form of a written regulation so that its nature is more binding and will result in sanctions that must be imposed on those who violate it. Legal protection protects legal subjects through applicable laws and regulations and enforced implementation with a sanction. Philipus M. Hadjon divides the means of legal protection into two (Wibowo, 2021), namely:

- (1) Preventive legal protection. Preventive legal protection allows legal subjects to submit their views before a government decision gets a definitive form.
- (2) Repressive legal protection. This type of legal protection has the aim of resolving disputes. This protection category in Indonesia is carried out through the General Court and Administrative Court.

In particular, the form of protection referred to by the author is preventive legal protection. Preventive legal protection aims to prevent disputes and is meaningful for government actions based on freedom of action. This form of legal protection encourages the government to be careful in making decisions related to the principle of *freies ermessen*, and the people can object to or be consulted about the planned decision.

This form of protection can be traced from various regulations related to the conditions of the Covid-19 pandemic in Indonesia. Constitutionally, as explained in the background section, the form of legal protection of the right to health has become a constitutional right and is clearly emphasized in the formulation of Article 28A and Article 28H paragraph (1) of the 1945 Constitution. However, the affirmation of legal protection efforts in the context of handling Covid-19 is also illustrated in the following regulations:

- (a) Article 25 of the Universal Declaration of Human Rights:

Declaration of Human Rights:

Everyone has the right to a standard of living adequate for the health and well-being of himself and his family, including the right to food, clothing, shelter, and necessary health and social services, as well as the right to security in times of unemployment, sickness, disability, abandonment by his spouse, old age, or other circumstances resulting in a decline in living standards beyond his control.

- (b) Article 12 of the International Covenant on Economic, Social, and Cultural Rights, as ratified by the Government of Indonesia by Law Number 11 of 2005, which reads:

- (1) The States Parties to the present Agreement recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
- (2) The measures taken by the States Parties to the present Agreement to achieve the full exercise of this right include Prevention, treatment and control of epidemic, endemic, occupational and other diseases;

(c) Law Number 36 of 2009 concerning Health:

Article 4 : Every person has the right to health.

Article 5 :

- (1) Every person has the same rights in obtaining access to resources in the health sector.
- (2) Everyone has the right to obtain safe, adequate and affordable health services..
- (3) Every person has the right to independently and responsibly determine the health services needed for themselves.

Article 15 : The government is responsible for the availability of the environment, order, and physical and social health facilities for the community to achieve the highest degree of health.

Article 16 : The government is responsible for the availability of resources in the health sector that are fair and equitable for the entire community to obtain the highest degree of health.

(d) Law Number 39 of 1999 concerning Human Rights:

Article 9 : Everyone has the right to life, survival and an improved standard of living.

Article 8 : The protection, promotion, enforcement, and fulfillment of human rights are primarily the responsibility of the Government.

Based on the description above, the Covid-19 vaccination process must be considered a concrete form of legal protection for the wider community. The intended protection is to ensure the safety of all citizens. The existence of legal policies implemented by the government has accommodated the needs of the community before and after the establishment of the Covid-19 pandemic conditions. The constitutional rights of citizens to rights in the health sector, including the right to a healthy environment, are protected by the state through the birth of government obligations in making policies that will save people, including in the context of the vaccination program, which is determined to be an obligation as well as a right for every Indonesian citizen following predetermined provisions.

Forms of Government Responsibility for Post-Immunization Adverse Events (AEFI) of the Covid-19 Vaccine

One of the obligations of the state that must be fulfilled is the guarantee and protection of the rights of citizens. These obligations become the scope of the constitution as the legal basis for state administration, containing guarantees and protection of human rights and accountability to the people (public accountability) as the main joints of the principle of popular sovereignty in addition to the anatomy of power (political power) subject to law and a free and independent judiciary (S.H.,L.L.M, 2019)

The state's obligations are then carried out further into the government's responsibility, including protecting its citizens in the emergency conditions of the Covid-19 pandemic. The government's responsibility as a state representative in practice does not only occur in Indonesia

but is recorded in such a long historical trajectory. The history of handling international health crises can be traced back to the late 19th century. In 1851, European countries gathered in Paris to establish a common framework to harmonize responses to the spread of disease across national borders. A common method used in this era was quarantine measures against incoming tourists and sea transportation (Nadilla, 2020).

The government's responsibility to protect its citizens is not only limited to preventing transmission through various policies such as vaccination but also includes actions taken after vaccination that result in other vaccination problems, commonly referred to in Indonesia as *AEFI*. The impact of vaccination can be categorized into two main causes: the vaccine component causing an adverse physical reaction in a person and human error in administering the vaccine (injection in the wrong part).

By comparison, the government's responsibility for the consequences of vaccination is also applied in the United States. In the United States, the consequences of vaccination are guaranteed through the Countermeasures Injury Compensation Program (CICP). CICP is the Injury Compensation Insurance Program for public health emergencies and security hazards. CCIP compensates for serious injury or covered death due to the administration or use of certain countermeasures. Compensation may include unreimbursed medical expenses (not covered by health insurance), lost work income, and death benefits.

The compensation is provided to people who have been seriously injured by adverse effects of vaccines during exceptional events. Applicants for CCIP must provide an appendix of medical records that can be submitted by the vaccine recipient or vaccination healthcare provider, including all medical records documenting medical visits, procedures, consultations, and test results occurring on or after the date of administration or use of the vaccination measure. The CICP is administered and guaranteed by the US Secretary of State. Department of Health and Human Services (HHS), a department of health and human services in a declaration issued under the Emergency Preparedness and Response Act.

Like Indonesia, the government is also responsible for *AEFI* due to vaccination. The legal basis related to KIPPI in Indonesia already exists, namely the issuance of Minister of Health Regulation Number 12 of 2017 concerning the Implementation of Immunization. The existence of this regulation provides arrangements for handling *AEFI* in general. Article 45, Paragraphs (1) and (2) state that health service facilities that carry out immunization must routinely record and report immunization coverage, stock, usage, and cases of *AEFI* or suspected *AEFI*. With the presence of this regulation, the government has made an effort to respond to the existence related to vaccination, especially *AEFI* itself.

The government has also anticipated the follow-up of *AEFI* through the government's alertness in handling *AEFI*, which can be seen in Article 40 of Minister of Health Regulation No. 12/2017, the establishment of the National Commission for *AEFI* by the Minister of Health and for the Provincial area, the *AEFI* Regional Commission was formed by the Governor. In addition,

what needs to be considered is also a guarantee to the community if AEFI cases are found that harm the community. This is because the existence of AEFI with severe levels can cause disability and death. Referring to other regulations that regulate public protection against AEFI, this is also contained in Presidential Regulation Number 14 of 2021 concerning Amendments to Presidential Regulation Number 99 of 2020 concerning Vaccine Procurement and Implementation of Vaccinations in the Context of Overcoming the Corona Disease 2019 (Covid-19) Pandemic and also Minister of Health Regulation Number 18 of 2021 concerning Amendments to Minister of Health Regulation Number 10 of 2021 concerning the Implementation of Vaccinations in the Context of Overcoming the Corona Virus Disease 2019 (Covid-19) Pandemic.

Specifically, the government's responsibility for AEFI in Indonesia, regulated through Ministry of Health Regulation Number 18 of 2021, is handled by treatment and care in health facilities tailored to medical indications and according to established treatment protocols. There are aspects of financing, namely:

- (1) Active participants of the National Health Insurance will be covered through the national health insurance mechanism and can be carried out at all health service facilities.
- (2) Inactive participants and non-participants of the national health insurance will be funded through other mechanisms sourced from the state budget following the provisions of laws and regulations.
- (3) Health services will be provided equivalent to class III of the national health insurance program.
- (4) For services above class III at their own will, the difference in costs will be borne by the person concerned.

The presence of the various regulations above provides guarantees to the public for the existence of AEFI in the form of health service financing for both active national health insurance program participants and non-active national health insurance program participants. Moreover, if it is proven that AEFI is affected by the Covid-19 vaccine product and causes disability or death, compensation will be given by the Government.

CONCLUSION

The Covid-19 vaccination carried out during the pandemic is none other than to protect all citizens and is based on various benefits. Covid-19 vaccination as a national program is a tangible form of legal protection for the wider community while realizing the safety of all citizens. Legal policies implemented by the government has accommodated the community's needs before and after the establishment of the Covid-19 pandemic conditions through various legal regulations and practically carried out by administering vaccines.

However, in this process, Post-Immunization Adverse Events also occur, which result in health impacts on vaccine recipients. Therefore, the government has the responsibility not only to suppress the spread of covid-19 but also to be responsible for the occurrence of AEFI. This responsibility is carried out through establishing and implementing the authority of the National

Commission and the AEFI Regional Commission, which are spread at the central and regional levels by tracing AEFI cases and financing AEFI cases.

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