

# The Weak Health Workers Legal Protection Within The Law Number 36 of 2009 Regarding Health

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**Abstract.** Violence against health workers committed by the patients and/or patients' family are still frequently occurred. Law number 36 of 2009 regulates legal protection for health workers, however, the required Government Regulation as it is supposed to act as the implementation regulation has not been issued yet. How does the health workers' legal protection are able to be just and how does a just legal enforcement concerning health workers and health service recipient disputes will be? Applying normative juridical methodology, legal material is qualitatively analyzed by interpreting and discussing the result of the research based on legal definitions, legal norms, legal theories and doctrines. Result of this discussion, arrangement of legal protection for the health workers within the Law number 36 of 2009 causes legal vacuum in regard to its implementation regulation and not able to act as an empowerment of changes as well as the community's legal culture.

Keywords: legal protection, health workers, health law, medical dispute

## 1. Introduction

Violence against health workers is still frequently occurred, with no exception in this Covid-19 Pandemic. International Committee of the Red Cross (ICRC) stated that there are more than 600 health workers who suffered physical and mental violence during the Covid-19 Pandemic. Consisting of physical violence, "discrimination of fear" incident, verbal threat and etc. (<https://health.grid.id>Gird>) Gazali Solahudin Minggu, 18 April 202 | 19:00 WIB.

Literature review conducted by Adb Kadir, Syahrul, Kadek Ayu Erika towards 30 out of 40 articles which was published in 2013 – 2018, with the title of The Prevalence of Violence Against Nurses in Hospital Reviewed from Many Countries in The World, stated that the form of violence against nurses in hospital consist of as follows: physical violence, psychological violence, sexual violence, and racism. This violence adds the nurses works burden which influence their work satisfaction quality and productivity. [1]

In Indonesia, physical violence against health workers committed by the patient's, reoccurred at the Siloam Sriwijaya Hospital Palembang. This event went viral on social media. The position case of the violence against nurses committed by the hospitalized child's parents occurred on April 15<sup>th</sup>, 2021. Initiated because of the nurse was removing the child's infusion and the child's parents was not satisfied. The nurse became physical violence victim committed by the patient's parents. (<https://www.liputan6.com>)

Indonesian Nurses Association stated that within a period of 2020 – 2021 were found 7 up to 8 violence conducted by the patients and/or the patients' family towards nurses. While for the reported cases to the Indonesian Nurses Association of provincial level in regards to such occurrences are excluded from these data. (<https://news.detik.com>)

Association of Indonesian Doctors also noted that there is several violence suffered by doctors on 2017, inter alia, at RSUD Lembong Provinsi Bengkulu, RSUD Sampang, RS Asya Medika Tangerang. Therefore, to optimize health service, protection for the doctors and other health workers are mandatory. (<https://nasional.tempo.com>)

Health workers have a prominent role to achieve the goal of the establishment of health. Protection for health workers are regulated within the article 27 of Law number 36 of 2009 regarding health. However, the required regulation of implementation in the form of Government Regulation has not been issued yet. While on

the other hand, it is clearly stated within the law that the health workers law will be regulated within the Government Regulation not later than 1 year after the stipulation of the Law number 36 of 2009 regarding health on October 13<sup>th</sup>, 2009.

Violence against health workers is still frequently occurred, regulation on health workers' legal protection existence becomes more urgent as in accordance with the order of the applicable law. A comprehensive regulation as in accordance with the applicable legal order. Violence against health workers will be directly affecting their work quality, which will make our objective to pursue health establishment becomes harder to realize.

The non-existence of regulation of implementation which regulates legal protection for health workers cause disputes concerning law substance as it can be considered as a legal vacuum. This legal vacuum within the implementation order is able influence law enforcer in terms of legal enforcement's certainty which eventually affect the function of law as a tool of social development cannot be achieved. This condition will make the goal harder to be achieved with a new paradigm in the society

The formulation of the problem that will be discussed in this paper is limited to health workers' legal protection, therefore, the formulation of the problem, that will be analysed as follows: first, how does the health workers' legal protection as in accordance with the Law number 36 of 2009 regarding health are able to provide justice for the health workers? Second, how is a just health workers law and health service recipient legal enforcement?

We expect that by considering that every health worker has a prominent role in the establishment of health in Indonesia shall be given the right to a just legal protection. The legal enforcement shall be directed to prevention of violence against health workers through the establishment of legal substance, legal structure and legal culture integrated in accordance with the new health paradigm.

## 2 Method

Analysis will use normative juridical research methodology. Legal material is qualitatively analysed that is interpreting and discussing the result material of the research based on legal definition, legal norm, theory and legal doctrines by deductive mindset.

## 3 Discussions

Indonesia is a law country which prioritize its civilians' welfare, this matter can be seen on how its civilian and governments are abiding the law. As a law country, Indonesia has a peculiar characteristic that is Pancasila animate each law and its enforcement, the presence of kinship principle which is used as a starting point of Indonesia as a law country, independent adjudication, civilian's participation as well as acknowledgement and human rights protection. [2]

Pancasila is a value system which originally from Indonesian noble values. Lives and develops in concomitant with Indonesian history and rooted to Indonesian culture. Mafud MD and M. Muslih stated that the concept of Indonesia as a law country comprise legal prismatic theory. This matter implicates to the understanding of this law country's concept which is integrative or by combining several concepts such as the *rechtsstaat*, rule of law and religious values. The legal enforcement must realize justice, therefore, laws that are obstructing justice shall be removed. [3]

The teaching of Hans Kelsen the *stufenbautheori* is very fundamental and comprehensive. Constitute as a positive law theory but it did not talk about positive law within a particular system, but a theory with an intention of explaining on where a law originally comes form. Hans Kelsen's teaching indicated that law positivism considering a discussion of moral, values made and final to the making of positive law "law is not obeyed because of considered to be just or good, but as law was written and enacted by the authority". This is known as the Murni Kelsen legal theory. *Theorie von stufenbau de rechtsordnung* stated the arrangement of norms that is fundamental norm, basic norm, *staats grundgesetz*, laws (*formell gesetz*), enforcement regulation and autonomy regulation (*verordnung en autonome satzung*). *Staats fundamental norm* is a basic norm for the establishment of Constitution (*staats verfassung*) of a country. [4]

In accordance with the theory, can be considered that the existence of Government Regulation as the enforcement regulation of article 27 verse 3 of Law Number 36 of 2009 regarding Health which regulates about legal protection for health workers. If we were about to see the hierarchy of Indonesian regulations will be as follows:

1. 1945 Constitution
2. Representative Consultative Assembly Decree
3. Laws/Government Regulation In Lieu of Law
4. Government Regulation
5. Presidential Decree
6. Regional Regulation; and
7. City Regulation

Jimly Asshidiqie and Ali Safa'at in the theory of Hans Kelsen stated that law is an arrangement of human behavior. Therefore, law doesn't refer to only a single provision but a whole provision in unity, thus, can be understood as a system. Hence, it is barely possible to understand laws by only comprehend only one law. [5] Legal rights shall not be interpreted as a will or interest which is not qualified but as an interest that is acknowledged and made effective by the law. This definition is still conceiving dualism as its right can be considered as logical and temporary by law. Legal provision guarantees and protect legal right, but not to make it.

According to Mochtar Kusumaadtmaja in I Dewa Gede Atmaja dan Nyoman Putu Budiarta stated that the objective of law is justice that is distinct in term of substance and standards for difference era and society: while legal certainty in the society is regarded to achieve order, without order human will not be able to develop their talent and skills given by God maximally. Thus, legal certainty and legal order are highly required but law also as a means of tool of social engineering.[6] .

The elucidation of this law stated that health aspect is realized as a fundamental needs and valuable investment for the nation and country. New paradigm is required to implement it, that is the healthy paradigm which prioritize promotive and preventive efforts without neglecting the curative and rehabilitative aspect. This paradigm is very distinguish compared to the prior health law paradigm, which solely based on curative paradigm.

This law was enacted on a political situation in which it was the time of decentralization. The authority to manage and perform all health aspects were given to the regional government. This event was indicated by the enactment of Law Number 32 of 2004 regarding Regional Government amended by Law Number 12 of 2008 regarding Second Amendment of Law Number 32 of 2008 regarding Regional Government.

Establishment of health in accordance to this Law, based on the principle of humanity, balance, benefit, justice, gender and non-discriminative and religion norms. The elucidation of the principle of protection would be that the establishment of health must be able to provide protection and legal certainty towards health service provider and health service recipient.

Health workers legal protection is regulated within the Article 27 verse (1) to (3) of Law Number 36 of 2009 as follows:

Article (1) Health Workers are entitled to compensation and legal protection in carrying out their duties in accordance with their profession.

Article (2) Health Workers in carrying out their duties are obliged to develop and improve their knowledge and skills

Article (3) Provision regarding rights and obligation of health workers as referred to verse (1) and verse (2) are regulated in the Government Regulation

The provision of this Law transition stated that it shall not later than 1 (one) year since October 13<sup>th</sup>,2009, regulation on the implementation was enacted. However, the required Government Regulation as it will be functioned as the implementation regulation for the health workers' legal protection has not been issued yet.

The non-existence of this Government Regulation causes legal vacuum. Furthermore, this legal vacuum made the health workers legal protection to be uncertain. The protection principle in this Law becomes further to reach.

The new paradigm that are going be established in this Law, at least shall reach legal aspect that is protecting health workers.

The legal certainty of the health workers legal protection is highly needed by considering that every conduct in carrying out curative has risk. This risk consists of as follows [7] :

1) Medical Treatment Risk

- a. An Inherent risk that sticks to every medial conduct that is conducted by the doctor. E.g.: sitolatica chemotherapy will cause hair fall
- b. Hypersensitive reaction is an immune respond towards excessive alien things that enters the body, in this context, drugs that frequently cannot be estimated, in advanced.
- c. Complications are frequently abruptly occurred and cannot be fathomed in advanced. This event often occurred when the patient's prognosis is improving and suddenly the patient's condition becomes worst even sometimes leads to death without any prior knowledge of its cause. E.g. emboli of amniotic fluid

2) Medical Accident

Medical accident frequently regarded as medical malpractice as this condition cause damage and loss to the patient. These two conditions must be distinguished as in medical realm, doctor strive to heal and not to injure the patient. If medical accident did occur, the doctor's accountability is directed on how the accident happened or the doctor must prove on how the accident occurred.

3) Contribution Negligence

The blame cannot be put on the doctor if the patient was not honest in explaining and conveying their diseases history that they had experienced including drugs that they took during the medication or if they did not comply with the doctor's instruction or refuse the agreed medication method. This is known as contribution negligence, or the patient can be considered to be also guilty. The patient's honesty is considered as the patient's obligation towards the doctors and their self.

4) Respectable Minority Rules & error of (in) judgement

Medical field is a very complex field as a disagreement is frequently arise in regards of medication method or dissenting opinion concerning the right therapy for a particular medical circumstance. Medical science is an art and science aside from experienced matured technologies. Therefore, it is very possible for one doctor and another to have a distinct approach. However, it must be based on an accountable science. Therefore, in respect of the aforementioned condition, appeared a legal theory called the respectable minority rule that is when a doctor are not considered to have done something neglectful if he/she chose one of the other available medication method.

According to Setyo Trisnadi in his paper "Legal Protection for Doctors in Medical Dispute Settlement" stated, in the period of 2005 – 2006 was found 317 reported medical disputes to the Indonesian Medical Council, 114 general doctors, 76 surgeon, 56 obstetrics and gynaecology, 27 child specialist doctors. The law Number 36 of 2009 regarding Health has not fully provide legal protection for health workers because, unwanted events in a medical service has potential to lead to a malpractice. The result of Article 50 of Law number 44 of 2009 reconstruction regarding Medical Practice that are doctors and dentists in carrying out their duty were entitled to: a. receive legal protection so they cannot be sued as long as they carrying out their duty in accordance with the profession standard and operational procedure standard; point b were removed. [8]

The definition of health workers in accordance with article 1 verse (6) of Law Number 36 of 2009 is that everyone who devote themself to medication and having the knowledge and/or skills through education

in health which for a particular type requires certain authority to perform medical practice. Article 21 verse (3) of Law Number 36 of 2009 regarding health stated, further regulated in an Act.

Regarding health workers qualification and classification cannot be found in the Law Number 36 of 2009 regarding Health but can be found in Article 8 of Law Number 36 of 2014 regarding Health Workers. Health workers itself consist of health workers and health workers assistants. The minimum qualification for a health worker except medical personnel is Diploma 3, while the qualification for a health workers assistant is middle education in health.

The classifications of health workers are classified as follows:

- a. Medical personnel (doctor, dentist, dental specialist doctor).
- b. Clinical psychologist.
- c. Nursing staff.
- d. Midwife.
- e. Pharmacy staff (pharmacist and technical pharmacy staff)
- f. Society's health workers (health epidemiologist, health promotion and behavioral science personnel, occupational health supervisors, health administration and policy personnel, biostatistics and population personnel as well as reproductive and family personnel).
- g. Environmental health workers (environmental sanitation personnel, health entomologist and health microbiologist).
- h. Nutritionist (nutritionist and dietician).
- i. Physical therapy personnel (physiotherapist, occupational therapist, speech therapist and acupuncture).
- j. Medical technician personnel (medical recorder and health information, cardiovascular technician, blood service technician, optometrist / optometrist refractionist, dental technician, anesthesiologist, dental and oral therapist and audiologist).
- k. Biomedical technicians (radiographers, electro medics, medical laboratory technologists, medical physicists, radiotherapists, prosthetic orthotics).
- l. Traditional health workers (traditional herbal health workers, traditional skilled workers).
- m. Other Health Workers are stipulated by the Ministry.

Furthermore, in fulfilling science and knowledge and technology developments in health along with the needs of health service, the Ministry are able to stipulate other types of health workers in each group of the classification of health workers.

While in regard to medical personnel are regulated within the Law Number 29 of 2004 regarding Medical Practice, this Law was enacted prior to the Law Number 36 of 2009 regarding Health. Hereafter the regulation of nursing staff is regulated in the Law Number 28 of 2014 regarding nursing. Thereto Law Number 36 of 2014.

The Law Number 29 of 2004 regarding Medical Practice, was enacted prior to Law Number 36 of 2009 regarding Health. While on the other hand, Law Number 28 of 2014 regarding Nursing and Law Number 36 of 2014 regarding Health Workers were enacted right after the enactment of Health Law. However, the Nursing Law did not regulate anything regarding its relationship with Health Law. Contrary with Law Number 36 of 2014 regarding Health Workers, Article 94 stated that:

- Article 4 verse (2), Article 17, Article 20 verse 940 and Article 21 of Law Number 29 of 2004 regarding Medical Practice (revoked and stated to be not applicable).
- Indonesian Doctors Council Secretary as it is regulated within the Law Number 29 of 2004 regarding Medical Practice.

By considering these unrelated Laws whereas the regulated matters are related one to each other indicates the disintegration of health law establishment. As well as the legal vacuum of the required Government Regulation which was supposed to regulate the implementation of legal protection for health workers can be considered as a disintegration of health law establishment.

Several regulations on legal protection apart from Law Number 36 of 2009 regarding Health reads as follows:

Article 57 point (a) of Law Number 36 of 2004 regarding Health Workers stated as follows: health workers in carrying out their duty are entitled to:

- a. receives legal protection so they cannot be sued as long as they carrying out their duty in accordance with the profession standard and operational procedure standard Furthermore, the elucidation of Article 50 explained that what “profession standard” meant is minimum skills threshold (knowledge, skill and professional attitude) that are compulsory requirement made by profession organization for a person to be managed to be able to perform their professional practice in the society independently. Whereas “Operational Procedure Standard” is a instruction device that must be performed to finish a routine work process. Operational Procedure Standard provides best and appropriate steps based on consensus to perform various activities and service function made by service facilities based on profession standard.
- b. Article 36 point (a) of Law Number 38 of 2014 regarding Nursing stated: Nurse in carrying out Nursing Practice are entitled to: a. receives legal protection if performing their duty in conformity with service standard, profession standard, operational procedure standard and legal provisions. If we were about to observe regulation on legal protection for health workers in the aforementioned laws, it cannot be considered as a improvement of regulations in the Law Number 36 of 2009 regarding Health. As its essence is that health workers are entitled to be granted legal protection as long as they conduct their duty in conformity with the profession standard, service standard and operational procedure standard.

The term “Omnibus” in accordance with Black Law Dictionary the Ninth Edition Bryan A. Garner in Agnes Firtryantica defined as: “relating to or dealing with numerous objects or item at once; including many things or having various purposes, which if were to be spliced with law will mean law for everything. Objectives of Omnibus law inter alia : [9]

1. Overcome regulations disputes timely, efficiently and effectively.
2. Synchronize governments policy both in central level and regional level to promote investment.
3. More effective, efficient and integrated License management.
4. Simplifying bureaucracy.
5. Increasing coordination between involved agency as it is regulated in the integrated Omnibus Law.
6. Guaranteed Legal certainty and legal protection for policy maker.

In Omnibus Law which generated Law Number 11 of 2020 regarding Job Creation regulation on legal protection for health workers are regulated in Article 61 of Law Number 11 of 2020 regarding Job Creation stated that provisions of Law Number 44 of 2009 regarding Hospital amended with provision as follows:

Article 29 was amended as of reads as follows:

Article 29 verse (1) point (s) stated “protecting and providing legal aid for every hospital stake holder in carrying out their duty”. Further regulated in the Government Regulation.

Based on the elucidation, legal substance that regulates the enforcement of legal protection for health workers as mandated in the health law has not have legal certainty. By considering that violence against health workers is still frequently occurred indicates that justice for health workers can be realize if the enforcement regulation on legal protection for health workers are clearly regulated. This regulation is also required to be used as a steppingstone for legal enforcer in enforcing laws and promote the establishment of a new legal culture which shall erase violence against health workers to improve health service for the society.

Lawrence M. Friedmen in Anajeng Esri Edhi Mahanani stated that legal system consists of structure, substance, and legal culture. Legal structure manifested in the whole legal institution along with its officer, such as the court and judge, attorney office and prosecutor, police, solicitor and etc. furthermore, this legal structure is included in the lawmaking. Legal substance has a definition of every regulation made or every legal provision

both written and unwritten including court verdicts that is used by legal enforcer to enforce the law. Legal culture or frequently regarded as legal custom as culture including opinions, trust/believes, custom mindset and acts both from the perspective of legal enforcer and society regarding various phenomena which involves laws. [10] Pancasila act as a filter for foreign culture which influence Indonesia's culture. Pancasila which is also considered to be the formulation of national's original values, is used as a guidance on how legal awareness and community's legal culture are supposed to form as in conformity with Pancasila.

The correlation between the components influences legal enforcement in Indonesia. Legal vacuum of legal protection in the Government Regulation creates legal uncertainty on legal enforcement. Legal culture that is sourced on the noble values of Pancasila became very important for the establishment of a good legal structure amidst legal uncertainty of legal protection for health workers

Violence against health workers is clearly in contradiction with noble values of Pancasila. A just legal enforcement based on Pancasila will be realized if the one who enforce the law, implement the law, and take action on law violators understands the values of Pancasila. Moreover, legal culture of Pancasila must always be implemented in national life.

Legal enforcement became main issue which is very interesting by considering the inequality of dynamic interaction between *das sollen* aspect and *das sein* aspect. If this inequality will keep on continue, accordingly legal enforcement essence did not reflect the objectives of law that is legal justice, legal certainty, and utility. The existence of law will be acknowledged if its moral values can be implemented.

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The effort in actualizing a just legal enforcement is started with establishing a noble mental attitude among legal enforcer and society. legal enforcer in carrying out their duty must comply with norm-based behavior standard, laws and moral. At the time that laws are having weakness caused by legal vacuum, then there are still legal enforcers with a noble moral to counter the laws' weakness in order to actualize justice.

Similarly, the society who strive for justice are unjustified to conduct every means, manipulate information and provide fake testimony before the court, especially if they utilize violence as a means of judgement. Therefore, integration of intellectual attitude, emotion and spiritual and place the objectives of law on priority is required.

Every form of violence against victim will cause trauma. A physical violence victim will not only suffer physical trauma but also psychological trauma. Diandra Preludio Ramada in Reality of Protection for Sexual Violence Victims: Comprehensive Protection Analysis for Sexual Violence Victims stated the needs of victim's protection and aid wholly both physically and psychologically. [11] Health workers in carrying out their duty are also frequently becoming sexual harassment and sexual violence victims. Wherefore, every physical violence against health workers will influence their productivity which will decrease their service quality and leads to the obstructed health establishment.

Legal enforcement in a broad sense comprises of enforcement and implementation of the law as well as taking legal action towards violations or deviation committed by a legal subject, either through adjudication or arbitration and other alternative disputes resolution. Enforcing law means referring to subjects who are subjects to legal provisions/regulation, implementation means referring to subjects and objects that are subjects to a legal provision/regulations, whereas taking legal action means related to law enforcement action to law violators.

Legal enforcement based on Pancasila refers to its enforcement, implementation and legal action based on the values of Pancasila and related with the legal culture of Pancasila that is a custom behavior and understanding the value of Pancasila in social life. An established Pancasila culture will be integrated with the existed legal norms.

Legal culture on the value of Pancasila shall be regarded as a system. The value that are contained in each sila of Pancasila are as follows:

- a) Belief in the one Almighty God sila contains inherent value which related to every enforcement, management of the state as well as moral of state, moral of state apparatus, state politics, state government,

state laws and legal provisions, liberty and human right must be imbued with the value of Belief in the Almighty God.

- b) Just and Civilized Humanity sila is an actualization of the value of humanity as a creature with culture, morale, and religion and just in terms of the relation of their self, with others and environment.
- c) Unity of Indonesia contains a value that Indonesia is unity in diversity which is depicted in *Bhineka Tunggal Ika*. Nationalism must be reflected on every aspect of state administration.
- d) Democracy led by wisdom in deliberation / representation sila contains a value that a state is from, by and for the civilians. The value of democracy is absolute and must be implemented in every aspect of the state.
- e) Social Justice for the people of Indonesia sila contains an objective of the state. Justice value must be actualized (social justice) which are meant to preserve national welfare.

Dispute settlement between health service provider and health service recipient must be based on a legal culture rooted to Pancasila which is the noble national values. The approach on awareness that the object of health service is "efforts" which has medical risk, hence, its legal implementation is oriented to profession standard, service standard and operational procedure standard. A just dispute settlement on a dispute between health service provider and health service recipient shall be oriented on the compliance of the standards. Restorative justice and deliberation in conformity with the noble values of Pancasila is a big hope in case of future disputes settlement. Even though it cannot substitute the needs of special courts for medical disputes. [12]

## 4 Conclusion

Legal protection for health workers in accordance with the Law Number 36 of 2009 can still be weak as its required enforcement regulation in the form of Government regulation has not been issued yet. Every kind of violence against health workers are unjustifiable and will only cause the service to be non-optimal and will obstruct the establishment of health itself. Therefore, efforts are required to establish a comprehensive and integrated law to prevent legal vacuum.

Legal enforcement regarding medical disputes shall apply the noble values of Pancasila. Deliberation and restorative justice aspects shall be the settlement method in future occurrences. By considering the construction of the relation of laws in health service as its objects is the "efforts" which shall be based on profession standard, service standard and procedure operational standard as well as the existence of risk in every medical action. Restorative justice and deliberation will provide a win – win solution for every involved parties.

## References

- [1] K. A. S. S. E. K. et Al., "Prevalensi Kekerasan Terhadap Perawat di Tempat Kerja Di Rumah Sakit Ditinjau Dari Berbagai Negara Di Dunia: A Literature Review," *J. Keperawatan Muhammadiyah*, pp. 260–264, 2019.
- [2] R. A. Lestari, Lilis Eka, "Penegakan Dan Perlindungan Hak Asasi Manusia Di Indonesia Dalam Konteks Implementasi Sila Kemanusiaan Yang Adil Dan Beradab," *J. Komun. Huk.*, vol. 5, no. 2, pp. 12–25, 2019.
- [3] M. Muslih, "Negara Hukum Indonesia dalam Perspektif Teori Hukum Gustav Radbruch," *Legalitas*, vol. 4, no. 1, pp. 130–152, 2013.
- [4] F. A. Samekto, "Menelusuri Akar Pemikiran Hans Kelsen Tentang Stufenbeuthetheorie Dalam Pendekatan Normatif-Filosofis," *J. Huk. Progresif*, vol. 7, no. 1, p. 1, 2019, doi: 10.14710/hp.7.1.1-19.
- [5] A. Jimly and S. M. Ali, *Teori Hans Kelsen Tentang Hukum*. 2006.
- [6] I. D. G. Atmaja and I. N. P. Budiarta, "Teori-teori Hukum," p. 233, 2018.
- [7] O. Michel and D. Mangkey, "Perlindungan Hukum Terhadap Dokter Dalam Memberikan Pelayanan Medis," *Lex Soc.*, vol. 2, no. 8, 2014.
- [8] S. Trisnadi, "Perlindungan Hukum Profesi Dokter Dalam Penyelesaian Sengketa Medis," *J. Pembaharuan Huk.*, vol. 4, no. 1, p. 24, 2017, doi: 10.26532/jph.v4i1.1656.
- [9] A. Fitriyanti, "Harmonisasi Peraturan Perundang-Undangan Indonesia melalui Konsep Omnibus Law," *Gema Keadilan*, 2019.
- [10] A. E. E. Mahanani, "Rekonstruksi Budaya Hukum Berdimensi Pancasila," *J. Yustika Media Huk. dan Keadilan*, vol. 22, no. 2, pp. 1–10, 2019, [Online]. Available: <http://journal.ubaya.ac.id/index.php/yustika/article/view/1954/1655>.
- [11] D. P. Ramada, "Reality of Protection for Sexual Violence Victims: Comprehensive Protection Analysis for Sexual Violence Victims," *IJCLS (Indonesian J. Crim. Law Stud.)*, vol. 2, no. 2, pp. 168–183, 2017, doi: 10.15294/ijcls.v2i2.12324.
- [12] Setiyawan, "Law and Culture," *J. Chem. Inf. Model.*, vol. 53, no. 9, pp. 1689–1699, 2013.

