# Protection of the Rights of Health Workers in Handling COVID-19

by Fitriani Nur Damayanti

**Submission date:** 16-Nov-2021 09:17AM (UTC+0700)

**Submission ID:** 1704090695

File name: tection\_of\_the\_Rights\_of\_Health\_Workers\_in\_Handling\_COVID-19.pdf (343.38K)

Word count: 3237

Character count: 14958

#### 第 48 卷 第 10 期 2021 年 10 月

#### 湖南大学学报(自然科学版) Journal of Hunan University(Natural Sciences)

Vol. 48 No. 10 October 2021

Open Access Article

#### Protection of the Rights of Health Workers in Handling COVID-19

#### Fitriani Nur Damayanti

Department of Midwifery, Universitas Muhammadiyah Semarang, Indonesia

Abstract: COVID-19 increasingly spreads in various countries with a very large impact in health, social, and economic spheres. Health workers face various problems, so they need to get legal protections and the rights of health workers in dealing with COVID-19 patients. This study is a literature review that aims to explore the protection of the rights of health workers in handling COVID-19. Legal protection and fulfillment of the right to workplace safety for medical personnel who handle the COVID-19 pandemic can be obtained according to Health Regulation No. 66/2016 concerning Occupational Safety & Health in Hospitals, that health workers must also apply occupational safety and health protocols to handle the COVID-19 pandemic. Steps to ensure that health workers have safe working conditions are the government fulfills all rights under Indonesian law.

Keywords: handling COVID-19, health workers, workplace safety, rights protection.

#### 保护卫生工作者处理新冠肺炎的权利

23 10 **摘要:**新冠肺炎越來越多地在各個國家傳播,對健康、社會和經濟領域產生了非常大的影響。衛生工作者面臨各種問題,因此他們需要在處理新冠肺炎患者時獲得法律保護和衛生工作者的權利。大研究是一項文獻綜述,旨在探討在處理新冠肺炎時保護衛生工作者的權利。根據關於醫院職業安全的健康的第 13 66/2016 號衛生條例,可以為處理新冠肺炎大流行的醫等人員獲得法律保護和工作場所安全權的實施 衛生工作者也必須申請職業安全與健康處也新冠肺炎大流行的協議。確保衛生工作者擁有安全工作條件的步驟是政府履行印度尼西亞法律規定的所有權利。

**关键词:**處理新冠肺炎、衛生工作者、工作場所安全、權利保護。

#### 1. Introduction

The spread of COVID-19 is increasingly widespread in various countries, and the impact is very large in terms of health, social and economic aspects. Indonesia nationally is in the phase of accelerating the pandemic [1]. Reprictions on residents' activities were also carried out. To accelerate the handling of COVID-19, the President formed a task force to accelerate the handling of COVID-19. The formation of the task force was carried out through the issuance of Presidential Decree Number 7 of 2020 concerning the Task Force for the Acceleration of Handling Corona Virus Disease-2019 (COVID-19). This Presidential Decree was later revised with Presidential Decree Number 9 of 2020 concerning Amendments to Presidential Decree umber 7 of 2020 concerning the Task Force for the Acceleration of Handling Corona Virus Disease-2019 (COVID-19). Various problems faced by health worlds range from lack of protective clothing (Personal Protective Equipment / PPE), limited rest time, fatigue, changes in relationships with patients, colleagues, and family, and dishonesty of patients with their travel history during examinations, including being rejected when returning to the hospital. Their homes and vulnerable health workers have to deal with infection [3].

This pandemic shows that victims are not only affecting the community (patients) but also endangering and taking the health of health workers who are fighting at the forefront in overcoming the spread of disease. Health workers must be aware that it is their responsibility to follow the law and professional practice because it is their responsibile. Health workers caring for COVID-19 patients face mental stress, physical exhaustion, separation from family, stigma, and the pain of losing patients and co-workers. Many of them have contracted SARS-CoV-2, and some have died [4]. The protection of health care workers is

Received: June 12, 2021 / Revised: August 7, 2021 / Accepted: September 5, 2021 / Published: October 30, 2021
About the author: Fitriani Nur Damayanti, Department of Midwifery, Universitas Muhammadiyah Semarang, Indonesia

Corresponding author Fitriani Nur Damayanti,  $\underline{\text{fitriani@unimus.ac.id}}$ 

critical in containing the care of patients in a health care system currently challenged by the pandemic but is also critical in ensuring they do not spread the virus [5].

On the other hand, developments in Indonesia, COVID-19 cases continue to increase. Based on data published by the Indonesian Doctors Association on April 6, 2020, 24 doctors (including 6 dentists) died amid the COVID-19 pandemic. Meanwhile, based on data as of May 8, 2020, released by the Indonesian National Nurses Association (PPNI), the number of health workers (15 rses) exposed to COVID-19 continues to grow. Number of people under monitoring (ODP) was 596, patients under monitoring (PDP) - 48 people; people without symptoms (OTG) – 97, positive - 53 people, and 19 people died [6]. This condition clearly cannot be ignored because new cases continue to emerge. Meanwhile, health workers on duty are vulnerable to infection. According to Jatu Apridasari, in terms of affordability, five groups are most vulnerable to contracting the virus, namely health workers who treat patients, people who live in the same house as COVID-19 sufferers, people traveling in one means of transportation, the person who treats and waits for the patient in the room, guests who share the same room with COVID-19 sufferers, and people who work with COVID-19 sufferers [3].

Health workers, doctors, nurses, and hospital administrative staff need to get legal protection from the government that must fulfill the rights of health workers. One of the basic rights of equality in health workers is that all health work professions are regulated by rights, obligations, authority, certification, registration, and licensing in carrying out their profession [2]. Health workers are willing to devote themselves to serving public health and even sacrifice their lives and their families to tackle the spread of COVID-19. The profession of health workers is a noble profession, and in this profession, it is increasingly being realized amid the COVID-19 pandemic crisis [6].

Based on the provisions of Article 43 IHR as an international binding legal instrument that limits action, it can be applied by countries when dealing with public health risks with action parameters supported by science, commensurate with the risks involved, and following human rights [3]. The above does not prevent states and states parties from implementing health measures, under relevant national law and obligations under international law, in dealing with public health risks or health emergencies of international concern but should be subject to human rights. In this context, it is related to the rights of patients, the rights of health workers, and the community's rights during the pandemic. The government must guarantee the right of the community to be healthy by providing fair, equitable, adequate, affordable, and quality health services.

Meeting the availability of PPE (Personal Protective Equipment) is one form of protection for health workers in carrying out their duties. However, it also seems that this cannot be implemented. Without fulfilling the right to health, the welfare state will not be realized. Therefore, as the bearer of the mandate for the community's welfare, the state is obliged to respect, protect and fulfill these basic health rights to fulfill their basic needs as a health service provider [7]. Based on the background described above, the problem raised in this study is how the Indonesian government's policy regulates the protection of the rights of health workers who handle the COVID-19 pandemic.

#### 2. Research Method

The method used in this paper is a literature review study that aims to explore the protection of the rights of health workers in handling COVID-19. The review process begins with identifying journal articles that are relevant to the research topic. The databases used in the source search are Google Scholer and PubMed. The search for articles was carried out by collecting themes regarding the discussion of legal protection for the rights of health workers in handling the COVID-19 pandemic. The inclusion criteria for searching for literature sources are the article's year of publication from 2018 to 2021, in English and Indonesian, and the full article. The search keywords are legal protection, health workers, COVID-19.

#### 3. Efforts to Protect the Law and Fulfill the Rights of Health Workers While Dealing with the COVID-19 Pandemic

Legal protection for the safety of health workers is an important aspect 1 mid the COVID-19 pandemic. Health workers get legal protection as long as they carry out their duties according to professional standards and standard operating procedures. In order to carry out disaster management, doctors/dentists do not need to have a Registration Certificate (STR) [8]. In an emergency, informed consent is also not required to save life or prevent disability. In practice, health workers often do no the rights to be fulfilled, such as PPE availability. Lack of PPE can lead to infection, and infection can affect the mental health of health care providers and their lives.

Legally, health workers are equipped with obligations and legal rights and protections regulated in the legislation. Regarding the rights of health workers as regulated in the Health Law in Article 57, it is emphasized that: "In carrying out the practice, health workers have the right to obtain legal protection while carrying out their duties under the Professional Service Standards and Standard Operating Procedures."

There are still incidents of medical and health workers exposed to COVID-19, and even some cases have resulted in death. This incident is a big challenge amid the COVID-19 pandemic, considering that medical and health personnel are the major elements in handling COVID-19. Several laws have regulated the protection for medical and health personnel when carrying out their duties under normal or emergency counttions [2].

Health workers in carrying out their practice are entitled 250 protection for occupational safety 2nd health. This provision is contained in Article 57 of Law Number 36 of 2014 concerning Health Workers. This provision is also in line with the provisions contained in the Manpower Law, which regulates the normative rights of workers to obtain protection for OSH. In the formulation of the articles, both the Health Manpower Act and the Manpower Act also add protection to obtain treatment that follows human dignity, morals, decency, and religious values [2]. Overall, regulatory interventions in OSH have sought to strengthen the protection of workers' health and safety during the pandemic, in line with the evolving health situation and following the recommendations issued by the ILO and the World Health Organization (WHO). As will be seen further down, health protection is not limited to physical protection alone: various mental health and well-being aspects have also been considered [9].

Based on Permenkes No. 66/2016 concerning Occupational Safety & Health in Hospitals, health workers must also follow occupational safety and health protocols while dealing with the COVID-19 pandemic. The protocol guidelines are regulated in Permenkes No. 27/2017 on Guidelines for Infection Prevention & Control in Health Facilities. However, these provisions have not specifically regulated the potential danger of spreading the COVID-19 virus [6].

From the sound of Article 57 of the Health Manpower Act above, the profession of health workers needs to get legal protection in carrying out their duties and has the right to occupational safety and health in providing health services. However, during this COVID-19 pandemic, many health workers had to sacrifice their lives to cope with the spread of COVID-19 until they were exposed and died. Not only that, but the government is also responsible for providing health service facilities for health workers to carry out their work. Therefore, the Central Government and Regional Governments are responsible for the availability of health service facilities in the context of realizing the highest degree of health. This responsibility is regulated by and stated in Article 6 of Government Regulation Number 47 of 2016 concerning Health Service Facilities.

The Indonesian government needs to further increase the national production of medical supplies and equipment by encouraging domestic producers of non-medical devices to reorient the production of PPE and medical devices by further facilitating the licensing process [10]. Provision of adequate PPE is only the

first step; other practical actions should be considered, including canceling events that are not critical to resource priority, providing food, rest, family support, and psychological support. Today, health workers are every country's most valuable resource [11]. Considering that the current COVID-19 outbreak has the status of a disaster after the issuance of the Decree of the Head of BNPB Number 13 A of 2020, all levels of the government are obliged to carry out all their obligations as stipulated in the applicable legislation. The obligations that the government should fulfill include supporting the availability of medical equipment in the field, ensuring the fulfillment of the rights of the community and medical personnel, transparency of information to the public, making policies that take into account the values of human rights and democracy.

#### 4. Conglusion

The COVID-19 pandemic has made all countries, especially Indonesia, aware of the vital role of health workers in saving the lives of patients infected with COVID-19. Legal protection and fulfillment of the right to workplace safety for medical personnel who handle the COVID-19 pandemic can be concluded that it is regulated in Minister of Health Regulation No. 66/2016 concerning Occupational Safety & Health in Hospitals, that health workers must also follow occupational safety and health protocols during dealing with the COVID-19 pandemic. Ensuring health workers include safe working conditions to ensure that the government fulfills all rights under Indonesian law.

#### References

- [1] DAMAYANTI F.N. and MULYANTI L. Protection of the Rights of Patients with COVID 19 in Obstetrics Emergencies. Program Studi S1 Kebidanan, Fakultas Ilmu Keperawatan dan Kesehatan, Universitas Muhammadiyah Semarang. 3: 748-754.
- [2] DAMAYANTI F.N., ABSORI, and WARDIONO K. Legal Protection of Midwives Based on Professional Justice in Midwifery Practices. *Indian Journal of Public Health Research & Development*. 2019, 10(4): 437-441
- [3] SHOLIKIN M.N. and HERAWATI. Legal Aspects of Occupational Safety and Health (K3) for Medical and Health Workers During a Pandemic. *Majalah Hukum Nasional*, 2020, 50(2): 163-182.
- [4] HAFRIDA H., HELMI H., and KUSNIATI R. Health Workers' Legal Protection Policy to the Coronavirus Disease 19 (COVID-19) Containment Measures. *Fiat Justisia Jurnal Ilmu Huk*. 2021, 15(1): 51-74.
- [5] CHERSICH M.F., GRAY G., FAIRLIE L., EICHBAUM Q., MAYHEW S., ALLWOOD B., ENGLISH R., SCORGIE F., LUCHTERS S., SIMPSON G., HAGHIGHI M.M., PHAM M.D., and REES H. COVID-19 in Africa: Care and protection for frontline healthcare workers. *Global Health*. 2020, 16(1): 1-6.
- [6] TAN Z., SHI KHOO D.W., ZENG L.A., TIEN J.C.C., YANG LEE A.K., ONG Y.Y., TEO M.M., and ABDULLAH

- H.R. Protecting health care workers in the front line: Innovation in COVID-19 pandemic. *Journal of Global Health*, 2020, 10(1): 1-4.
- [7] SANTOSO P.A., SEPTIARINI A.D., ROHMAH S.N., and HARYADI A.R. Perlindungan Hukum Tenaga Kesehatan dalam Gugus Tugas Percepatan Penanganan COVID-19 Ditinjau dari Sudut Pandang Hukum Administrasi Negara. *Pros HUBISINTEK*, 2020, 1:276. [Online]. Available from: http://ojs.udb.ac.id/index.php/HUBISINTEK/article/view/10 06
- [8] HODGE J.G.JR., GARCIA A.M., ANDERSON E.D., and KAUFMAN T. *Emergency legal preparedness for hospitals and health care personnel*. 2009.
- [9] INTERNATIONAL LABOR ORGANISATION. Protecting the life and health of workers during the COVID-19 pandemic: Overview of national legislative and policy responses. 2020: 1-19.
- [10] MAHENDRADHATA Y., ANDAYANI N.L.P.E., HASRI E.T., ARIFI M.D., SIAHAAN R.G.M., SOLIKHA D.A., and ALI P.B. The Capacity of the Indonesian Healthcare System to Respond to COVID-19. *Frontiers in Public Health*, 2021, 9:1-9.
- [11] THE LANCET. *COVID-19: protecting health-care workers*. Lancet, 2020, 395(10228): 922. [Online] Available from: http://dx.doi.org/10.1016/S0140-6736(20)30644-9

#### 参考文:

[1] DAMAYANTI F.N. 和 MULYANTI L. 在產科急診中保護 新冠肺炎 患者的權利。三寶壟大學護理與健康學院助產學本科課程。3: 748-754。

[2] DAMAYANTI F.N.、ABSORI 和 WARDIONO K.

基於助產士實踐中的專業公正對助產士的法律保護。印度公共衛生研究與發展雜誌。2019,10(4): 437-441 [3] SHOLIKIN M.N.和赫拉瓦蒂。大流行期間醫療和衛生工作者職業安全與健康(钾3)的法律方面。國家法律雜誌,2020,50(2): 163-182。

- [4] HAFRIDA H.、HELMI H. 和 KUSNIATI R. 衛生工作者對冠狀病毒病十九 (新冠肺炎) 遏制措施的法律保護政策。菲亞特賈斯蒂西亞 法律科學雜誌。 2021, 15 (1): 51-74。
- [5] CHERSICH M.F.、GRAY G.、FAIRLIE L.、EICHBAUM Q.、MAYHEW S.、ALLWOOD B.、ENGLISH R.、SCORGIE F.、LUCHTERS S.、SIMPSON G.、HAGHIGHI M.M.、PHAM MD 和REES H.
- 非洲的新冠肺炎:對一線醫護人員的關懷和保護。全球健康。2020,16(1):1-6。
- [6] TAN Z.、SHI KHOO D.W.、ZENG L.A.、TIEN J.C.C.、YANG LEE A.K.、ONG Y.Y.、TEO M.M. 和 ABDULLAH H.R. 保護一線醫護人員:新冠肺炎大流行中的創新。全球健
- 康雜誌,2020,10(1): 1-4。
  [7] SANTOSO P.A.、SEPTIARINI A.D.、ROHMAH S.N.
  和 HARYADI A.R.
  國家行政法視域下加快處理新冠滑工作組衛生工作者的
- 國家行政法視域下加快處理新冠宿工作組衛生工作者的 法律保障。優點胡比辛特,2020
- 年, 1:276。[在線的]。可從: http://ojs.udb.ac.id/index.ph p/HUBISINTEK/article/view/1006
- [8] HODGE J.G.JR.、GARCIA A.M.、ANDERSON E.D. 和 KAUFMAN T. 醫院和衛生保健人員的緊急法律準備。 2009 年。
- 國際勞工組織。在新冠肺炎大流行期間保護工人的生命 和健康:國家立法和政策響應概述。2020年:1-19。
- [10] MAHENDRADHATA Y.、ANDAYANI N.L.P.E.、HASRI E.T.、ARIFI M.D.、SIAHAAN R.G.M.、SOLIKHA D.A. 和 ALI P.B. 印度尼西亞醫療保健系統應對新冠肺炎的能力。公共衛生前沿,2021年,9:1-9。
- [11] 柳葉刀。新冠肺炎: 保護醫護人員。柳葉刀, 2020, 395(10228): 922. [在線] 可從: http://dx.doi.org/10.1016/S0140-6736(20)30644-9

### Protection of the Rights of Health Workers in Handling COVID-19

19					
ORIGIN/	ALITY REPORT				
SIMILA	2% ARITY INDEX	9% INTERNET SOURCES	6% PUBLICATIONS	3% STUDENT PA	PERS
PRIMAR	Y SOURCES				
1	ojs.udb. Internet Sour				1 %
2	ojs.exce Internet Sour	lingtech.co.uk			1 %
3		ed to Harrisburg hnology	g University of	Science	1%
4	radiogra percept	lMulla. "A meas aphers pandemi ions survey (PEF rirus pandemic i 2020	c experiences PS) during the		1 %
5	grjl.hnu.				1%
6	www.id>				1 %
7	www.ka Internet Sour	rger.com			1 %

8	Submitted to University of Maryland, University College Student Paper	1 %
9	policyandcomplexsystems.files.wordpress.com	1 %
10	czkj.ci.cqvip.com Internet Source	<1%
11	Manzilur Rahman Romadhon, Fachrul Kurniawan. "A Comparison of Naive Bayes Methods, Logistic Regression and KNN for Predicting Healing of Covid-19 Patients in Indonesia", 2021 3rd East Indonesia Conference on Computer and Information Technology (EIConCIT), 2021 Publication	<1%
12	s3.amazonaws.com Internet Source	<1%
13	www.immiknow.com Internet Source	<1%
14	www.velotrade.com Internet Source	<1%
15	E F Yogachi, V M Nasution, G Prakarsa.  "Design and Development of Fuzzy Logic Application Mamdani Method in Predicting The Number of Covid-19 Positive Cases in	<1%

## West Java", IOP Conference Series: Materials Science and Engineering, 2021

Publication

16	Samuel Bert Boadi-Kusi, Samuel Kyei, Stephen Ocansey, Michael Ntodie, Dziffa-Bella Ofori-Agyei, Khathutshelo Percy Mashige. "Assessment of infection prevention and control measures adopted by eye care practitioners in Ghana and South Africa against COVID-19", Scientific African, 2021 Publication	<1%
17	Ulfa Husnul Fata, Sandi Alfa Wiga Arsa, Thatit	<1%

Ulfa Husnul Fata, Sandi Alfa Wiga Arsa, Thatit Nurmawati, Lury Trijayanti et al. "The Application of Booklet as The Effort to Prepare Type 2 Diabetes Mellitus Patient in Facing New Normal Era During Covid-19 Pandemic", Journal of Community Service for Health, 2020

Publication

	Publication	
18	docsplayer.com Internet Source	<1%
19	eaglescheapshop.com Internet Source	<1%
20	www.51hpzs.com Internet Source	<1%
21	www.coursehero.com Internet Source	<1%

