

Legal Protection for Health Workers Working in Remote Areas (Research Study in Kapuas Hulu Regency)

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Abstract This research examines the implementation of legal protection for healthcare workers serving in remote areas, with a case study in Kapuas Hulu Regency. The main focus of the study is to analyze the effectiveness of existing legal protections and identify factors hindering their implementation. Through a qualitative approach using case study methods, this research reveals a significant gap between existing regulations and practices in the field. The case of Dr. I serve as a concrete example of weak legal protection, ranging from transfers without adequate consideration to eviction from official residences. Identified inhibiting factors include lack of understanding among local officials, weak inter-agency coordination, and discrepancies between central policies and local implementation. This study recommends the need for comprehensive reform in the legal protection system for healthcare workers in remote areas, including capacity building for local officials and strengthening oversight mechanisms .

Keywords: Legal Protection, Healthcare Workers, Remote Areas.

I. INTRODUCTION

Health workers have a vital role in ensuring public health, especially in remote areas that often face limited access and health facilities. Law Number 17 of 2023 concerning Health Workers emphasizes that health workers have the right to practice in accordance with their competence and authority. However , the reality on the ground shows that legal protection for health workers, especially those working in remote areas, is still far from optimal. This is reflected in various cases that have befallen health workers in remote areas of Indonesia, including in Kapuas Hulu Regency, West Kalimantan.

The case of a doctor with the initials dr. I in Kapuas Hulu Regency is a real example of how a health worker who has served for more than a decade in a remote area still has to fight to get his rights and adequate legal protection. Dr. I, who started working in Kapuas Hulu in March 2007, faced a series of problems after being transferred to the Bika Health Center in 2016. (Article by Tribun Pontianak, 2024) He experienced various actions that were considered unfair, ranging from the withdrawal of facilities, expulsion from the official residence, to a controversial demotion. (Article by Tribun Pontianak, 2024) This case illustrates the complexity of the problems faced by health workers in remote areas, which not only include challenges in health services, but also uncertainty in employment status and rights as state civil servants.

The situation faced by health workers in remote areas, such as that experienced by Dr. I in Kapuas Hulu Regency, reflects the complexity of the challenges in Indonesia's health system. Uncertainty in terms of facilities, benefits, and legal protection not only impacts the

well-being of individual health workers, but also has the potential to affect the quality of health services as a whole.

Amidst the various problems faced, several health workers were forced to take legal steps to fight for their rights. This action was not merely for personal gain, but also as an effort to improve the system and create a precedent that can protect other health workers in the future. The case of Dr. I is a real example of how a health worker must fight through legal channels to obtain justice and protection that should be his right.

The legal steps taken by Dr. I began by filing a lawsuit against the parties deemed responsible for the unfair treatment he experienced. This lawsuit became a critical point in the effort to seek justice and highlighted the weaknesses of the legal protection system for health workers in remote areas. The legal process that was undertaken not only concerned the fate of an individual, but also opened up a broader discussion about the need for policy reform and better implementation in protecting the rights of health workers throughout Indonesia.

The lawsuit filed by Dr. I against the Regent of Kapuas Hulu, the Kapuas Hulu Health Office, and the Head of the Bika Health Center regarding the non-payment of allowances or incentives during 2017 indicates a systemic problem in the management of health workers in the region. (Article Hi! Pontianak, 2024) The ambiguity in the attendance system, the lack of transparency in the provision of allowances, and the lack of an effective dispute resolution mechanism are indicators of weak legal protection for health workers in remote areas. This situation not only impacts the welfare of health workers individually, but also has the potential to disrupt the quality of health services to the local community.

The problems faced by Dr. I are not isolated cases. Various reports and studies show that health workers in remote areas often face difficult working conditions, lack of system support, and uncertainty in terms of legal protection and career security. This is a serious challenge for the government's efforts to improve equal access to health throughout Indonesia, especially considering the importance of retaining health workers in areas that need them most. Therefore, in-depth research on legal protection for health workers working in remote areas, with a case study in Kapuas Hulu Regency, is very relevant and urgent. This research is expected to identify gaps in the existing legal protection system, analyze factors that contribute to the weak implementation of existing policies, and formulate recommendations to strengthen the legal and policy framework that protects the rights of health workers in remote areas. Thus, the results of this study can be the basis for a more comprehensive system improvement, which

not only protects health workers but also supports improving the quality of health services in remote areas of Indonesia.

Based on the background above, the author raised the title of this research, namely: "**Legal Protection for Health Workers Working in Remote Areas (Research Study in Kapuas Hulu Regency) "**".

Formulation of the problem

The main problems in this research are:

1. How is the implementation of legal protection for health workers working in remote areas of Kapuas Hulu Regency?
2. What factors hinder the effectiveness of legal protection for health workers in remote areas of Kapuas Hulu Regency?

Research purposes

The objectives of this research are:

1. To find out the implementation of legal protection for health workers working in remote areas of Kapuas Hulu Regency .
2. To determine the factors that hinder the effectiveness of legal protection for health workers in remote areas of Kapuas Hulu Regency .

2. LITERATURE REVIEW

Legal Protection

Legal protection is a fundamental concept in a state of law that aims to provide protection and guarantees for the rights of citizens. According to Satjipto Rahardjo, legal protection is an effort to protect a person's interests by allocating power to him to act in his interests (Rahardjo, S. 2000). In a broader context, Philipus M. Hadjon stated that legal protection for the people includes two things, namely preventive and repressive legal protection. (Hadjon, PM1987).

Preventive legal protection aims to prevent disputes from occurring, while repressive legal protection aims to resolve disputes. The implementation of this legal protection can be seen in various aspects of national life, including in the fields of health, employment, and public services. Legal protection is not only the responsibility of the state, but also involves the active role of society in enforcing and respecting applicable laws.

In its development, the concept of legal protection has experienced an expansion of meaning. Not only limited to physical protection, but also includes protection of basic human rights, such as the right to decent work, the right to health, and the right to a sense of security.

This is in line with the development of the concept of human rights which is increasingly comprehensive and universally recognized. (Mertokusumo, S. 2009).

Health workers

Health workers are a vital component of the health care system in every country. According to Law Number 17 of 2023 concerning Health Workers, health workers are defined as anyone who devotes themselves to the health sector and has knowledge and/or skills through education in the health sector which for certain types requires authority to carry out health efforts.

Health workers have a strategic role in improving the quality of health services and realizing optimal public health. They are not only responsible for providing direct health services to the community, but also play a role in health education, research, and development of science in the health sector.

In the global context, *the World Health Organization* (WHO) emphasizes the importance of strengthening health systems by increasing the quantity and quality of health workers. WHO estimates that the world will face a shortage of 18 million health workers by 2030, especially in low- and middle-income countries. (World Health Organization. 2016). This shows how important it is to increase the number of health workers and ensure equitable distribution, especially in underserved areas.

Health Worker Protection Regulations

The regulation of health worker protection in Indonesia is regulated in various laws and regulations. Law Number 17 of 2023 concerning Health Workers is the main basis that regulates the rights and obligations of health workers, including legal protection in carrying out practice. Article 57 of the Law explicitly states that health workers in carrying out practice have the right to obtain legal protection in accordance with the provisions of laws and regulations.

In addition, the protection of health workers is also regulated in Law Number 36 of 2009 concerning Health, which emphasizes the importance of protecting health workers in carrying out their duties. Government Regulation Number 67 of 2019 concerning the Management of Health Workers also provides further explanation of the mechanism for the protection and development of health workers.

In the context of the COVID-19 pandemic, the Indonesian government has issued various additional regulations to strengthen the protection of health workers. One of them is the Decree of the Minister of Health Number HK.01.07/MENKES/447/2020 concerning the

Provision of Incentives and Death Benefits for Health Workers Handling Corona Virus Disease 2019 (COVID-19). This regulation shows the government's efforts to provide additional protection for health workers in health crisis situations.

However, the implementation of these regulations in the field still faces various challenges. Research conducted by Trisnantoro et al. (2020) shows that there is still a gap between regulations and practices for protecting health workers in Indonesia, especially in remote and border areas. (Trisnantoro, L., et al. 2020). This indicates the need for continuous evaluation and improvement in the health worker protection system in Indonesia.

3. RESEARCH METHODS

The research method used in this study is an empirical legal research method with a qualitative approach. Data collection was carried out through a combination of literature studies, in-depth interviews, and field observations in Kapuas Hulu Regency. The literature study includes an analysis of laws and regulations, legal literature, and policy documents related to the protection of health workers. In-depth interviews were conducted with various stakeholders, including health workers, health service officials, and representatives of health professional organizations. Field observations were carried out to obtain a real picture of the working conditions and challenges faced by health workers in remote areas. The data collected were then analyzed using qualitative descriptive analysis methods, with a focus on identifying gaps between regulation and implementation, as well as factors that influence the effectiveness of legal protection for health workers in Kapuas Hulu Regency.

4. DISCUSSION RESULTS

Implementation of legal protection for health workers working in remote areas of Kapuas Hulu Regency

The implementation of legal protection for health workers in remote areas is a crucial aspect in efforts to equalize health services in Indonesia. Theoretically, this legal protection should cover various aspects, ranging from job security guarantees, provision of adequate facilities, to protection of the basic rights of health workers as state civil servants. According to Soerjono Soekanto, the effectiveness of legal protection is highly dependent on the legal factors themselves, law enforcement, facilities and infrastructure, society, and legal culture. (Soekanto, S.2008).

In the context of health workers in remote areas, the implementation of this legal protection often faces more complex challenges. A study conducted by Trisnantoro et al. (2018)

shows that there is still a significant gap between the national level health worker protection policy and its implementation in the regions, especially in remote areas. (Trisnantoro, L., Hendartini, J., Susilowati, T., & Miranti, PAD 2018). This not only has an impact on the welfare of health workers individually, but also has the potential to affect the quality of health services as a whole. In Kapuas Hulu Regency, as one of the remote areas in Indonesia, the implementation of legal protection for health workers is a reflection of the complexity of the challenges faced in realizing a fair and equitable health system.

The implementation of legal protection for health workers in Kapuas Hulu Regency, as reflected in the case of Dr. I, shows significant and multidimensional weaknesses. This case reveals various aspects that illustrate the weakness of legal protection for health workers in remote areas, including:

1. There was a mutation without adequate consideration, where Dr. I, a senior doctor with years of experience at the Regional Public Hospital, was transferred to the Bika Health Center without considering his expertise and experience. This is contrary to the principle of placing health workers which should consider competence and experience to maximize health services.
2. The withdrawal of work facilities, especially official vehicles, which are essential for working in remote areas, shows a lack of understanding of the geographical conditions and logistical challenges in Kapuas Hulu. This action is not only detrimental to Dr. I personally, but also has the potential to hinder health services to the community.
3. The termination of the doctor's allowance on the grounds of absence, even though Dr. I is still actively on duty, reflects a problem in the health worker's performance administration and supervision system. This is contrary to Government Regulation Number 53 of 2010 concerning Civil Servant Discipline which regulates the rights and obligations of civil servants.
4. Eviction from the official residence without providing a suitable alternative, even though Dr. I still has the status of an active civil servant, shows a violation of the basic rights of health workers and is contrary to the spirit of Law Number 17 of 2023 concerning Health Workers.
5. The lack of dialogue and humane approach from the Health Office and local government, which prefer a coercive approach, reflects the weakness of legal culture and good governance in handling health worker issues. This is contrary to the principles of *good governance* that should be applied in public administration.

6. The absence of an effective complaint mechanism, which caused Dr. I to have difficulty in conveying his complaint and obtaining a fair resolution, shows the absence of a *checks and balances system* in the governance of health workers in the region. This situation is contrary to the principles of accountability and transparency in public services as regulated in Law Number 25 of 2009 concerning Public Services.

The case of Dr. I in Kapuas Hulu Regency highlights the urgency to strengthen the implementation of legal protection for health workers in remote areas. The situation he experienced reflects a significant gap between existing regulations and practices in the field. To overcome this, comprehensive efforts are needed involving various stakeholders, from the central government, local governments, to health professional organizations. Improving the health human resource management system, increasing the understanding of local officials about the rights of health workers, and strengthening monitoring and evaluation mechanisms are crucial steps that need to be taken. Moreover, a paradigm shift is needed in viewing health workers in remote areas, from merely "officers" to valuable assets in regional health development. With a more humanistic approach and oriented towards fulfilling rights, it is hoped that similar cases can be avoided in the future, so that health workers can carry out their duties optimally in building public health in remote areas.

Factors that hinder the effectiveness of legal protection for health workers in remote areas of Kapuas Hulu Regency

The effectiveness of legal protection for health workers in remote areas is often hampered by various interrelated factors. According to Lawrence M. Friedman, the legal system consists of three main components: structure, substance, and legal culture. (Friedman, LM 1975). In the context of protecting health workers in remote areas, these three components often face specific challenges. In terms of structure, limited infrastructure and resources in remote areas can hinder the implementation of effective protection policies.

In terms of substance, although there are regulations governing the protection of health workers, such as Law Number 17 of 2023 concerning Health Workers, its implementation at the regional level is often not optimal. Meanwhile, in terms of legal culture, understanding and awareness of the importance of legal protection for health workers among stakeholders in the regions still needs to be improved. A study conducted by Efendi et al. (2019) shows that factors such as budget constraints, lack of coordination between agencies, and weak monitoring systems are often the main obstacles in realizing effective legal protection for health workers in remote areas. (Efendi, F., Pratiwi, R., Nazri, C., & Anwar, M. 2019).

In Kapuas Hulu Regency, as an area with unique geographical and socio-cultural characteristics, these inhibiting factors can have more complex manifestations and require a more contextual approach in handling them. The factors that inhibit the effectiveness of legal protection for health workers in remote areas of Kapuas Hulu Regency reflect the complexity of multidimensional problems, including:

1. The lack of understanding of local officials regarding legal protection of health workers is the root of various detrimental actions, such as those experienced by Dr. I. The actions of the Head of the Health Service and the Regional Secretary who ignored the basic rights of health workers showed a significant knowledge gap between regulations and their implementation in the field.
2. The weak coordination between agencies, as seen from the differences in information between the Health Office, Regional Secretary, and Satpol PP, reflects fragmentation in regional governance. This situation has the potential to create confusion and legal uncertainty for health workers.
3. The ambiguity in the management of health human resources, especially in terms of transfer and placement, illustrates the absence of a competency-based approach and regional needs. The case of Dr. I who was transferred without considering his experience as a senior doctor is contrary to the principles of effective health human resource management.
4. The lack of transparency in decision-making, such as in the case of transfers and withdrawal of facilities, reflects the weakness of the principle of good governance in public administration at the regional level. This situation is contrary to the spirit of Law Number 14 of 2008 concerning Openness of Public Information.
5. The mismatch between policy and implementation shows a gap between policy formulation at the central level and implementation capacity in the regions.
6. The limited infrastructure and facilities in remote areas, such as the lack of proper official housing at the Bika Health Center, reflect the development inequality that is still a major challenge in Indonesia. This situation not only affects the quality of life of health workers but also has the potential to hinder the quality of health services.

All of these factors indicate the need for a more comprehensive and humanistic approach in implementing legal protection for health workers in remote areas. Systematic efforts are needed to improve understanding of the rights of health workers among policy makers in the regions, strengthen coordination between agencies, increase transparency in decision-making, and build an effective evaluation and monitoring system. Without

comprehensive reforms in these aspects, legal protection for health workers in remote areas such as Kapuas Hulu Regency will remain a major challenge in efforts to realize a fair and equitable health system in Indonesia.

5. CLOSING

The implementation of legal protection for health workers in remote areas of Kapuas Hulu Regency is still far from optimal, as reflected in the case of Dr. I. Various aspects of legal protection, ranging from transfers without adequate consideration, withdrawal of work facilities, termination of allowances, to expulsion from official residences, show a significant gap between existing regulations and practices in the field. The factors that hinder the effectiveness of this legal protection are multidimensional, including a lack of understanding by regional officials, weak coordination between agencies, unclear management of health human resources, lack of transparency, inconsistency between policies and implementation, and limited infrastructure in remote areas. This situation reflects the need for comprehensive reform in the legal protection system for health workers in remote areas to realize a fair and equitable health system.

To improve the effectiveness of legal protection for health workers in remote areas of Kapuas Hulu Regency, a comprehensive approach is needed that involves increasing the capacity of regional officials, strengthening coordination between agencies, improving the health human resource management system, increasing transparency in decision-making, and developing adequate infrastructure and facilities. In addition, an effective monitoring and evaluation mechanism needs to be established to ensure that the implementation of legal protection policies is in accordance with existing regulations, as well as building a better legal culture among stakeholders in the region.

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