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CRIMINAL LIABILITY OF TRADITIONAL PRACTITIONERS ACCORDING TO THE GOVERNMENT REGULATIONS NO 103 YEAR 2014

Wicaksono Subekti Rohman[1], *Prilian Cahyani*[2]

[1,2]Department of Criminal Law, Faculty of Law, Universitas Airlangga, Surabaya, East Java, Indonesia

*Correspondence Author: [2]prillian@fh.unair.ac.id

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ABSTRACT

Traditional medicine practices have the potential for negligence. Negligence of traditional medicine practitioners that causes serious injury or death can be used as a reference to the Penal Code, the Health Act and the Consumer Protection Act. The purpose of this study is to find out, describe and analyze the criminal liability arrangements for negligence committed by traditional medicine practitioners in Indonesia's positive law and upcoming penal law. This study uses the normative-comparative method. The approach used in this study is the Statute Approach and the Conceptual Approach. The results of this study conclude that the criminal liability of traditional medicine practitioners for their negligence which cause death and serious injury in Indonesia's positive law is still regulated by the Penal Code, which is lex generalis, in article 359 up to 361 of the Penal Code. Whereas in the upcoming penal law, the new Penal Code can be used or a special penal law on health can be formed as a step in harmonization of the Health Act, the Consumer Protection Act and the Penal Code.

BACKGROUND

Health is the crucial thing that is needed by the human body. Efforts to improve the quality of human life in the health sector is very broad and comprehensive, in which the effort includes improving public health both physically and non-physically (Taek et al., 2018). Health services that are in great demand by Indonesians recently are alternative medicine or traditional medicine, hereinafter referred to as *battra*. Alternative medicine refers to treatment that uses tools or

materials that are not included in the standard medical treatment and is used as an alternative or complement to medical treatment. In article 1 point 9 of Law No. 36 Year 2009 on Health, traditional medicine is considered as an ingredient or potion ingredients in the form of plant materials, animal materials, mineral materials, essence preparations (galenic), or a mixture of these materials which has been used for medical treatment across generations, and can be applied in accordance with the norms prevailing in the community (Handayani et al., 2013).

There are several methods of traditional medicine that have been mentioned in article 59 of the Health Law, namely: traditional medicine that uses skills; and traditional medicine that uses herbs which are then further explained in the Government Regulations of the Republic of Indonesia Number 103 Year 2014 on Traditional Health Services. According to Article 1 of the Ministerial Decree of Health of the Republic of Indonesia Number 1076 / MENKES / SK / VII / 2003 on Implementation of Traditional Medicine, Traditional medicine refers to medication and/or treatment by means, medicines and practitioners refer to experiences, hereditary skills, and/or education/training, and is implemented in accordance with prevailing norms in the society which are then further accommodated by the Government Regulations of the Republic of Indonesia Number 103 Year 2014 on Traditional Health Services (Handayani et al., 2013).

Several factors that are needed to be considered in using a natural material as a medicine, including safety which does not use dangerous substances, one of which is a medicinal chemical. The effect of medicinal chemicals in traditional medicine or herbal medicine cannot be felt immediately and takes time for its benefits to be perceived and this matter is not understood by the community (Yudaniayanti et al., 2018). Over time, the term *back to nature* increasingly encourages the use of herbs that greatly affects health and the more frequent researches or studies related to herbs conducted by the researchers (Nirwana et al., 2018). There is a term ‘health is expensive’. Therefore, healthy is priceless. Nevertheless, because of the modern life today has unhealthy habits, such as eating fast foods, there are many unfavorable effects from these foods (Prasetyo and Safitri, 2018).

However, currently, skills of traditional medicine methods have caused many problems in the society. Not only the methods are still clinically untested, but also traditional medicine is prone to the patients’ illnesses. An instance of mismanagement that occurs in the society can be seen from the increasing number of infection from bone fracture cases due to being handled by a witch doctor each year. According to the professor of the Faculty of Medicine at Universitas Padjajaran, Darmadji Ismono, in Bandung, during the 1998-2000 period there were 56 cases of limb disability out of 1,224 bone fracture cases that went to the clinic at Hasan Sadikin Hospital (RSHS) in Bandung. While during the 2003-2007 period, the number of similar cases increased up to 150 patients. Darmadji stated that among 150 patients, as many as 22 patients had infections, 32 patients experienced deformity[9], in order to save their lives an amputation was needed.

Darmadji Ismono argued that the increase in fracture infection cases is due to a number of alternative bone fracture treatments (*bone setter*) that recently also deals with serious fracture injuries (Pudjiastuti, 2015).

Based on the background above, this study aims to analyze the legal liability of the traditional medicine practitioners when committing an act that is detrimental to the patient. The practical implications of this study is expected to be a useful reference for law enforcers in the implementation of the Health Act as well as other related regulations in handling health law cases.

METHOD

This study uses a normative juridical method. Normative juridical research is a research that explains and describes a matter sourced from existing legal provisions. This study points to the primary legal materials that are authoritative[11]. Thus, this study refers to the written legislation and other regulations in Indonesia. The approach used in this study is the Statute Approach and the Conceptual Approach (Suardana et al., 2018).

The laws and regulations used are the Health Act and other provisions relating to traditional medicine. This conceptual approach is conducted by moving from the perspectives and doctrines which are developed in the science of law to find ideas that encourages legal understandings, legal concepts, and legal principles that are relevant to the issue at hand. Implementation in this study is related to the concept of the principle of legality based on article 1 paragraph (1) of the Penal Code which states “An act cannot be convicted, except based on the strength of existing criminal legislation” (Prihandono and Relig, 2019).

Source of Legal Materials

The type of this study is normative juridical with primary legal materials consisting of Law No. 244 Supplement to the State Gazette of the Republic of Indonesia Number 5587, Law No. 1 of 1946 on Criminal Law Regulations in conjunction with Law Number 73 Year 1958 on Stating the Applicability of Law Number 1 Year 1946 Republic of Indonesia on Criminal Law Regulations, Law No. 36 of 2009 on Health. Government Regulation Number 103 Year 2014 on Traditional Health Services, Ministerial Regulations of Health of the Republic of Indonesia Number 61 Year 2016 on Empirical Traditional Health Services, and Ministerial Decree of Health of the Republic of Indonesia No. 1076 / MENKES / SK / 2003 on Implementation of Traditional Medicine. Meanwhile, secondary legal materials in the form of materials that are closely related to the primary legal materials as supporting materials include textbooks, legal dictionaries, legal writings and penal law principles. which are in line towards the issue under study (Niyobuhungiro, 2019).

LITERATURE REVIEW

Traditional Medicine

According to the Ministerial Decree of the Republic of Indonesia Number 1076 / MENKES / SK / VII / 2003 on Implementation of Traditional Medicine, traditional medicine is explained as medication and/or treatment by means, medicines and practitioners refer to experiences, hereditary skills, and/or education/training, and is implemented in accordance with prevailing norms in the community which are then further accommodated by Government Regulations of the Republic of Indonesia Number 103 Year 2014 on Traditional Health Services (Handayani et al., 2013).

WHO defines traditional medicine as the total amount of knowledge, skills and practices based on the theories, beliefs and experiences of people who have different cultural customs, whether explained or not, used in health care and in prevention, diagnosis, improvement or treatment of physical as well as mental illness. Traditional medicine arrangements were also supported and formulated by WHO in 2000 which assigned that traditional medicine is the total amount of knowledge, skills, and practices based on the theories, beliefs, and experiences of the people who have different cultural customs, whether explained or not, are used in the maintenance of health as well as in the prevention, diagnosis, rehabilitation or treatment both physically and mentally (Wang et al., 2011).

Classification of traditional medicine practitioners (or also known as *battra*) is divided into four groups, namely: Skill-based battra are those whose traditional method of treatment is based on their physical expertise by using limbs or other aids, Potion-based battra are those whose method is based on the herbal medicines derived from plants (flora), fauna, minerals, water, and other herbal materials, Religion-based battraare those whose method is based on their religions, and Supernatural-based battra are those whose method is by using inner power, meditation, breathing technique, and supernatural powers (Pudjiastuti, 2015).

With the classification of the traditional medicine practitioners in the Ministerial Decree of Health of the Republic of Indonesia No. 1076 / Menkes / SK / VII / 2003 on Implementation of Traditional Medicines has subsequently accommodated the Government Regulations No. 103 Year 2014 on Traditional Health Services, namely Skill-based Battra Potion-based Battra, Religion-based Battra, Supernatural-based Battra is included in the empirical traditional health services. This proves that the government supports the implementation of traditional medicine in order to improve the public health (Handayani et al., 2013).

One of the traditional medicine types is potion medicine, and one of potion medicine types is traditional medicine. According to the Law No.36 Year 2009 Article 1 number 9, traditional medicines are ingredients in the form of plant materials, animal materials, mineral materials, generic preparations or mixtures of

these materials, which have been hereditary used for treatment based on experiences.

Purposes and Benefits of Traditional Medicine

The general objective is to increase the utilization of traditional medicine either separately or integrated in the plenary health service system, in order to achieve an optimal public health. Thus, traditional medicine is one of the alternatives that is relatively favored by the public. Therefore, the health community seeks to recognize and, if they can, take part in the traditional medicine. Meanwhile, the specific objective is to improve the quality of traditional medical services, so that people are able to avoid negative impacts due to the traditional treatment. In the Ministerial Decree of the Republic of Indonesia Number 1076 / MENKES / SK / VII / 2003 on Implementation of Traditional Medicines Article 2 also explains that the purpose of administering traditional medicine practitioners aims to develop the traditional medicine, give protection to the public, and inventory the number of traditional medicine practitioners, as well as its types and methods (Niyobuhungiro, 2019).

Organization of Empirical Traditional Medical Practices

Traditional medicine is basically one of the medical methods and/or treatments in a different way outside the medical science. Despite traditional method is on the outside of the medical science, it is still trusted and sought after by the public. This is because not all levels of the society can receive medical treatment which generally uses drugs through chemical processes. The government issued regulations through the Decree of the Minister of Health RI No. 1076 // MENKES / SK / VII / 2003 on Implementation of Traditional Medicine. The fact that the regulation was formed by the Government proves that traditional medicine supports an increase in the degree of the public health which is then accommodated by the Government Regulation of the Republic of Indonesia Number 103 Year 2014 on Traditional Health Services (Husada and Tjandrawinata, 2013).

The traditional form of medical regulation is published in the Decree of the Minister of Health RI No. 1076 // MENKES / SK / VII / 2003 on Implementation of Traditional Medicine. The purpose of the Decree of the Minister of Health RI is to foster efforts on traditional medicine; provide protection to the society; and inventory the number of traditional medicine practitioners, as well as its types and methods. Recognition of traditional medicine arrangements is also strengthened by the formulation of WHO in 2000 which defines traditional medicine. Moreover, it is strengthened by the formulation of Article 1 Point 16 of Law No. 36 Year 2009 on Health. Traditional medicine in its implementation is clearly protected by several regulations (Jung, 2016).

Traditional Medicine in Law Number 36 Year 2009 on Health

Traditional medicine as an alternative treatment outside the medical procedures can only be done by a traditional medicine practitioner/person who expertizes the

field. According to the statement of Article 1 Number 16 of Law No. 36 Year 2009 on Health, traditional medicine refers to medication and/or treatment by means, medicines and practitioners refer to experiences, hereditary skills, and/or education/training, and is implemented in accordance with prevailing norms in the society. The availability of human resources in health sectoris listed in Article 16 of Law No. 36 Year 2009 on Health, that the government is responsible for the availability of resources in health sector that is equitable for all people to obtain the highest degree of health (Husada and Tjandrawinata, 2013).

The existence of traditional medicine is also implemented by the arrangement of the treatment methods regulation, traditional health services is also regulated in Article 59 Paragraph (1) of Law No. 36 Year 2009 on Health. Based on how the treatment is done, traditional health services are divided into skills and potions. Control of traditional medical health services is regulated in Article 59 Paragraph (2) and (3) of Law No. 36 Year 2009 on Health, that traditional health service is referred to: in paragraph (1) it is fostered as well as supervised by the Government so that benefits and safety can be accounted for and it does not against the religious norms; and further provisions regarding the procedures and types of traditional health services as referred to in Paragraph (1) shall be regulated by Government Regulation (Abdullah et al., 2012).

There is an existence of the traditional medicine practitioners as stipulated in Article 60 Paragraph (1) and (2) of Law no. 36 Year 2009 on Health, where every practitioner who performs traditional health services using tools and technology must obtain permission from the authorized health institution. In addition, the use of tools and technology as referred to in Paragraph (1) must be able to account for their benefits and safety and that it does not against religious and cultural norms of the society.

Traditional Medicine in Government Regulation of the Republic of Indonesia Number 103 Year 2016 on Traditional Health Services

Health services, according to Government Regulation No. 103 Year 2014 on Traditional Health, Services are divided into three types that are explained in Article 7 and described in Article 1 Point 1, 2 and 3. First is Empirical Traditional Health services which its benefits and safety are empirically proven. Second, Complementary Traditional Health services that utilize biomedical and biocultural science. Third, Integrated Traditional Health Services that combine conventional health services with complementary health services, either as a complement or substitute.

In its implementation, traditional medicine can be carried out in accordance with the Decree of the Minister of Health RI No. 1076 / MENKES / VII / 2003 on Organizing Traditional Medicine in Article 13, in which it does not endanger lives or violate the moral and religious rules and beliefs of God Almighty recognized in Indonesia, safe and beneficial to health, does not conflict with efforts in

improving the degree of public health, and does not conflict with the norms and values lived by the society.

As traditional medicine practitioners, in carrying out the work they have the rights and obligations, as stipulated in Government Regulation No. 103 Year 2014 on Traditional Health Services stated in Article 28 Paragraph (1) on rights. Traditional medicine practitioners have the right to obtain complete and honest information from clients or their families, receive rewards, and participate in health promotive training. In addition, based on article 29 paragraph (1), the practitioners have the right to obtain legal protection as long as they perform their duties in accordance with predetermined standards, obtain complete and honest information from the patient/client and the family, as well as receive compensation for the services (Fossati, 2017).

RESULT AND DISCUSSION

Criminal Liability of the Traditional Medical Practitioners for Their Negligence that Cause Severe Injuries or Deaths in Indonesia's Positive Law

Indonesia's positive law that is directly related to the crime of negligence resulting in serious injury or death committed by traditional medicine practitioners namely the Penal Code, the Law of the Republic of Indonesia number 36 of 2009 on Health and Law of the Republic of Indonesia Number 8 Year 1999 on Consumer Protection. The Penal Code regulates negligence that results in serious injury or death in Article 359 and Article 360 of the Penal Code jo. 361 Penal Code (Fossati, 2017). The Law of the Republic of Indonesia Number 36 Year 2009 on Health and Health is not regulating the responsibility of criminal liability for negligence resulting from serious injury or death by traditional medicine practitioners. One of the executive instruments from the Law is the Decree of the Minister of Health RI No. 1076 / MENKES / VII / 2003 on Organizing Traditional Medicine. In the article 35 of the Decree of the Minister of Health RI stated that "*Without prejudice to the criminal provisions as stipulated in the Penal Code (KUHP), the Law Number 8 Year 1999 on Consumer Protection, violations of the provisions in this decision may be subject to criminal provisions in accordance with the provisions in Law Number 23 Year 1992 on Health*" (Prakoso and Setyaningati, 2018).

Because of the lack of any regulation regarding negligence that causes death or serious injury committed by traditional medicine practitioners in the law, there is a lex generlis namely the Penal Code. Article 62 paragraph (3) of Law Number 8 Year 1999 on Consumer Protection states that those that violations that result in serious injury, serious illness, permanent disability or death are subject to applicable criminal provisions. From paragraph (3) it can be seen that the Penal Code is used to regulate every action of the business agents resulting in serious injury, serious illness, permanent disability or death. Furthermore, in this verse

the offender's inner attitude that causes serious injury, serious illness, permanent disability or death remains unknown.

Criminal Liability of the Traditional Medicine Practitioners for Negligence

One of the reforms of the law that is being carried out by Indonesia is to draft a new Penal Code which is judged to be in accordance with the values and outlook of life of the Indonesian people. The following table will present a comparison of the articles on negligence that caused death or serious injury in the Penal Code with the 2012 concept of Penal Code Bill. Comparison between the Penal Code and the 2012 Concept of Penal Code Bill.

According to the form of penal law protection in the case of traditional medicine practitioners refers to the decree No. 68 / Pid.B / 2015 / PN.Kbm explains that there has been an element of negligence that makes other people die. Therefore, the traditional medicine practitioners have made an element of error that causes the occurrence of victims. In the trial, the Panel of Judges would not find things that could eliminate criminal liability, either as a justification and/or reason for forgiveness. Thus, traditional medicine practitioners must take the responsibility for their actions, because the defendant are able to take the responsibility then the defendant must be found guilty and sentenced to prison for 6 (six) months.

Penal law reform is needed, which can be done by adding and completing the Panel Code, one of which is by forming a special penal law that has been commonly committed. Sudarto in his book entitled *Kapita Selekta Hukum Pidana* explains that special penal law is a penal law that is applied to special groups of people or related to special acts. Based on the theory put forward by Sudarto mentioned before, the researcher considers that the formation of special penal laws in health sector that specifically regulates negligence that causes serious injury or death as one of the effort in increasing the health services. This is necessary because traditional medicine is one of the professions in the health sector that is being developed, fostered and supervised by the government. In addition, with special laws, there will be harmonization between the health laws and consumer protection laws that have their own legal or criminal sanctions with a special minimum criminal system (Bason, 2018).

Liability of Traditional Medicine According to Civil Law

Legal liability aims to find out which parties are responsible for an act that causes harm to the other parties. In the civil context, civil liability is an act, usually in the form of compensation payments, which must be carried out by a person or party whose actions have caused damage to others. A measurement used to determine this civil liability is Unlawful Acts (Handayani et al., 2013).

Acts against the law in Indonesia normatively always refers to Article 1365 BW in which stated that: "every act that violates the law, which brings harm to others,

obliges people which because of their wrongs, issue losses due to other causes, compensation for damages due to destruction and/or vilification. The public can also use the construction of civil liability under this Article 1365 BW.

Theoretically, the experts stated that the principle used in Article 1365 BW is a liability based on fault with the burden of proof being on the plaintiff. In this case, the new plaintiff will get compensation if he succeeds in proving that the perpetrator (the defendant) has been guilty of committing an act against the law.[43] Thus, such proof determines the accountability, because if the defendant has found guilty and the plaintiff issues a loss then the defendant is mandatory for the compensation, and if the defendant has not found guilty then the defendant is free from liability (Handayani et al., 2013).

In connection with the proof, it is necessary to be stated in Article 1865 BW, which states that whoever proposes events in which is based on the rights is obliged to prove the events. In brief, those who postulate something have an obligation to prove the truth of the postulation. The definition of liability is based on acts against the law, which is an act that results in harm to others, obliges people which because of their wrongs, issue losses due to other causes, compensation for damages due to destruction and/or vilification. In addition, violating the law is any act that violates the rights of others or is contrary to propriety that must be heeded in social relations with others’ personal property or contrary to propriety that must be heeded in social relations with others' personal or property.

Thus, with the broader understanding of the act against the law, which includes one of the actions, namely actions that are contrary to the rights of others, actions that are contrary to his own legal obligations, acts that are contrary to decency, acts that are contrary to prudence or necessity in the community of good relations, the explanation for each of the above categories can be seen in the following explanation, Acts that are Contrary to the Rights of Others (Palar and Rasiah, 2019).

Acts that are contrary to the rights of others include one of the acts prohibited by Article 1365 BW, because the rights violated are the rights of someone that is recognized by the law, including but not limited to personal rights (*persoonlijkheidsrechten*), property rights (*vermogensrecht*), the right to freedom, and the right to honor and on behalf of their names. Violations of legal obligations are also included in unlawful acts. This legal obligation is imposed on a person, based on both written and unwritten laws. Thus, against the law in the form of violations of the perpetrators' legal obligations occurs not only when they are in conflict with written legal obligations, but also against other people’s rights (Visvizi et al., 2018).

An act that violates decency and is considered by an unwritten rule can also be said as an act against the law. If the act that violates the decency causes another

loss to the other party, the party experiencing the loss may request compensation based on acts against the law article 1365BW. Actions carried out by someone and contrary to prudence or necessity in good relations with the society, or referred to by the term *zorgvuldigheid*, can also be considered an illegal act. Therefore, if someone does an action that harms others, but does not violate the articles in the written law, the person may still be charged with unlawful acts, as long as his actions are contrary to the principle of prudence or necessity in social relations. This caution or necessity in daily life is more often found in the form of unwritten laws, but their existence is still recognized by the community concerned (Wiesener et al., 2012).

Besides based on Unlawful Acts, the Indonesian legal system also recognizes strict liability. This system of responsibility is intended specifically for losses resulting from certain acts that are considered dangerous or high risk. In Indonesia, civil liability which requires an element of fallacy is responsible based on Unlawful Acts. According to article 1365, BW explains that "Every act that violates the law brings harm to others, obliging people which because of their mistake of issuing the loss, compensating for the loss.

Unlawful acts occur not only when violations of written law, but also violate unwritten laws in the form of propriety, accuracy or caution. In this case, fighting the law is considered as something that contradicts other people's rights or against its own legal obligations or morality and also contradicts with prudence or necessity in appropriate social relations. In the law, the element of fallacy includes negligence, namely fallacies in the broad sense and fallacy in the narrow sense. Fallacy in the broad sense is manifested in the form of not doing something or having done something differently than what should be done by people generally in the same circumstances. In a narrow sense, fallacy means intentional, that is, if the perpetrator knows that his actions will result in damage to other parties. In addition, the element of fallacy also consists of two meanings, namely an objective sense in which a measure of behavior is determined according to a general measure to prevent the occurrence of chaos. Subjective loss, which is related to the perpetrators themselves.

Another thing that can be reported as a violation of the law is if there is a party injured. Losses are divided into two forms, namely material losses and non-material losses. Material losses are losses incurred by other parties and a number of values can be requested for the compensation. While non-material losses are losses that cannot be valued by a number of payments but cause uneasiness, shame, such as humiliation and defamation. The possibility of compensation for non-material losses is intended as an effort to restore the original condition, namely the state before the unlawful act occurred.

A cause-and-effect relationship is needed in order to know how the relationship of an event will cause harm to another party. In Indonesia there are two forms of causality theory, one of which is the Von Buriyaituteori called "*theorieconditio*

sine quanon". Based on this theory, an act against the law is said to be a cause of loss (effect), if the loss would not occur on condition that the cause (the act against the law) does not exist. Another causality theory is "*adequate veroorzaking*" which states that a new thing can be named as a cause of an effect. This causality relationship is used to see and examine whether there is a causal relationship between an action carried out with an effect that occurs in which results a loss.

With the revision of the Law No. 4 Year 1982 by the Law No. 23 Year 1997, the formulation of Strict Liability also changed. In article 35 paragraph (1) of the Law no. 23 Year 1997 stated that the responsibility of businesses and/or activities whose businesses and activities have a major and significant impact on the environment, which uses hazardous and toxic materials, and/or produces hazardous and toxic waste materials, is absolutely responsible for the losses incurred arising from the obligation to pay compensation directly and immediately at the time of vilification and/or damage to the environment (Prihandono and Relig, 2019).

Thus, based on the form of civil law protection in the case of traditional medicine practitioners according to the decree No. 68 / Pid.B / 2015 / PN.Kbm explained that there has been an element of fallacy in the practitioners because there has been a fallacy during the treatment process in which there are victims in the treatment process which is due to negligence by the practitioners. Therefore, traditional medicine practitioners have committed an element of fallacy to the occurrence of victims, thus the form of accountability of the practitioners to consumers is through consultation to find an agreement between the two parties but if deliberation fails then a form of legal protection can be made (Pudjiastuti, 2015).

CONCLUSION

Traditional treatment arrangements in Indonesia in general still regulate the goals and benefits, implementation, types and classifications of traditional medicines. The Health Act discusses about improving the public health, Government Regulation of the Republic of Indonesia Number 103 Year 2014 discusses about traditional health services. There are no clear rules regarding sanctions against traditional medicine practitioners which in its process of treatment causes victims.

The form of criminal liability for negligence of traditional medicine practitioners resulting in serious injury or death is still governed by the Penal Code, namely Article 359 and Article 360 of the Penal Code jo. 361 Penal Code. This is because the Law of the Republic of Indonesia Number 36 Year 2009 on Health does not regulate negligence which results in serious injury or death. Thus when viewed from the perspective of civil law, the form of accountability for the mistakes of traditional medicine practitioners is through consultation to find agreement between the two parties. Traditional medicine practitioners with traditional health

workers have the difference that traditional health workers are health workers so that they use the Health Personnel Act and the Health Act.

ETHICAL CLEARANCE

This study does not involve any participants in the survey, instead itis literary analysis study with theoretical point of view. The present study was carried out in accordance with the research principles. This study implemented the basic principle ethics of respect, beneficence, nonmal eficence, and justice.

CONFLICT OF INTEREST

The authors believe that there is no conflict of interest

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REFERENCES

Abdullah, A., Hort, K., Abidin, A.Z., Amin, F.M., 2012. How much does it cost to achieve coverage targets for primary healthcare services? A costing model from Aceh, Indonesia. Int. J. Health Plann. Manage. 27, 226–245.

Bason, C., 2018. Leading public sector innovation: Co-creating for a better society. Policy Press.

Fossati, D., 2017. From periphery to centre: Local government and the emergence of universal healthcare in Indonesia. Contemp. Southeast Asia A J. Int. Strateg. Aff. 39, 178–203.

Handayani, R.S., Supardi, S., Herman, M.J., 2013. Policy on Herbal Traditional Medicines Therapy in Three Provinces in Indonesia. Indones. Bull. Heal. Res. 41.

Husada, R., Tjandrawinata, R.R., 2013. The Healthcare System and the Pharmaceutical Industry in Indonesia, in: The New Political Economy of Pharmaceuticals. Springer, pp. 134–151.

Jung, E., 2016. Campaigning for all Indonesians: The politics of healthcare in Indonesia. Contemp. Southeast Asia 476–494.

Nirwana, I., Rianti, D., Soekartono, R.H., Listyorini, R.D., Basuki, D.P., 2018. Antibacterial activity of fig leaf (Ficus carica Linn.) extract against Enterococcus faecalis and its cytotoxicity effects on fibroblast cells. Vet. world 11, 342.

Niyobuhungiro, J., 2019. International Economic Law, International Environmental Law and Sustainable Development: The Need for Complementarity and Equal Implementation. Environ. Policy Law 49, 36–39.

Palar, M.R.A., Rasiah, R., 2019. Universalization of Indonesian cultural and scientific regulations. African J. Sci. Technol. Innov. Dev. 1–10.

Prakoso, A.E.J., Setyaningati, C.N., 2018. Law Protection for Procurement Officers: Legal Protection against the Procurement Instrument of Goods and Services, in: IOP Conference Series: Earth and Environmental Science. IOP Publishing, p. 12128.

Prasetyo, R., Safitri, E., 2018. TOPICAL HONEY TO TREAT AN ABSCESS CAUSED BY STAPHYLOCOCCUS AUREUS: A CASE REPORT. Southeast Asian J. Trop. Med. Public Health 49, 835–838.

Prihandono, I., Relig, F.H., 2019. International Certification as a Mechanism for Protecting the Human Rights of Indonesian Coffee Farmers. Environ. Policy Law 49, 49–54.

Pudjiastuti, L., 2015. Licensing And Legalization Of Traditional Medicine To Ensure Public Healthh Quality. J. Din. Huk. 15, 121–128.

Suardana, I.W., Yusuf, A., Purnomo, W., 2018. Self-Help Group Therapy: The Enhancement of Self-Care Ability and Quality of Life Among the Elderly in Bali, Indonesia. Indian J. Public Heal. Res. Dev. 9.

Taek, M.M., Prajogo, B.E.W., Agil, M., 2018. Plants used in traditional medicine for treatment of malaria by Tetun ethnic people in West Timor Indonesia. Asian Pac. J. Trop. Med. 11, 630.

Visvizi, A., Lytras, M.D., Damiani, E., Mathkour, H., 2018. Policy making for smart cities: Innovation and social inclusive economic growth for sustainability. J. Sci. Technol. Policy Manag. 9, 126–133.

Wang, X., Liang, Z., Huang, H., Liang, W., 2011. Principles of ethics review on traditional medicine and the practice of institute review board in China. Chin. J. Integr. Med. 17, 631.

Wiesener, S., Falkenberg, T., Hegyi, G., Hök, J., di Sarsina, P.R., Fønnebø, V., 2012. Legal status and regulation of complementary and alternative medicine in Europe. Complement. Med. Res. 19, 29–36.

Yudaniayanti, I.S., Primarizky, H., Nangoi, L., 2018. The effects of honey (Apis dorsata) supplements on increased bone strength in ovariectomized rat as animal model of osteoporosis, in: AIP Conference Proceedings. AIP Publishing, p. 20004.