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## Legal Protection for Doctors Under Law Number 17 of 2023 Concerning Health

Oktavian Tamon<sup>1</sup>, Eko Wahyuddin Setiawan<sup>1</sup>, Asep Sapsudin<sup>1</sup>

<sup>1</sup> Universitas Islam Nusantara, Bandung, Indonesia

\*Corresponding author: Oktavian Tamon ([oktaviantamon.dr@uninus.ac.id](mailto:oktaviantamon.dr@uninus.ac.id))

## Abstract

The security and safety of doctors is a serious concern in the health sector, especially after the occurrence of various violence against health workers. This issue has become increasingly important with the new Health Law, which is expected to provide stronger legal protection for doctors in carrying out their professional duties. This study aims to examine how legal protection for doctors is regulated in the new regulation and identify whether the protection is sufficient to ensure a sense of security at work. This research uses a normative juridical method with a statutory approach and a case approach. Data collection techniques were carried out through literature study of legal documents, laws and regulations, and relevant court decisions. Data analysis was conducted qualitatively with a descriptive-analytical approach. The findings indicate that the new Health Law contains several important provisions regarding legal protection for doctors, but there are still some legal gaps and weaknesses in implementation in the field. Therefore, it is recommended that the government strengthen legal protection mechanisms and clarify law enforcement procedures in cases of violence against doctors in order to create a safe and conducive work environment.

## Keywords:

Doctor Security, Health Law, Legal Protection, Occupational Safety.

## 1. Introduction

The medical profession is one of the professions that has a high level of risk, both in terms of physical safety and legal threats that can arise in the performance of their duties. The main basis for doctors to be able to practice medicine is knowledge, technology, and knowledge gained through education (Ahmed et al., 2022; Damayanti, et al. 2023; Moldt et al., 2023). Doctors are supposed to provide correct and clear information to patients (Fauziyah & Mukhlis, 2023). But, Doctors are often the target of violence in the workplace, with research showing that up to 75% of healthcare workers experience some form of harassment (Joseph & Joseph, 2023). This violence is triggered by a number of factors, such as inadequate healthcare infrastructure, increasingly high patient expectations, and communication problems between doctors and patients (Jain et al., 2023). In addition, the legal threat is also quite large, where claims of malpractice and possible criminal prosecution create an atmosphere of uncertainty among medical professionals (Steavanno, et al, 2023).

Based on data from the Indonesian Doctors Association (*Ikatan Dokter Indonesia/IDI*), there was an increase in cases of violence against medical personnel by 30% in 2022 compared to the previous year. Since July 2023, the Ministry of Health has received 1,500 reports of alleged bullying, with 356 of them confirmed. The report covers the Ministry of Health's vertical hospitals and other public hospitals. In April 2023, two intern doctors in West Lampung, precisely at the Pajar Bulan Health Center, were strangled and strangled by patients who were upset because they did not recover that same day. In 2024, precisely in August, there was a case of bullying at Padjajaran University, where a lecturer who was also a specialist doctor received a sentence at (*Rumah Sakit Dokter Hasan Sadikin/RSHS Bandung*, a similar case in the same month and year occurred at Diponegoro University where a (*Program Pendidikan Dokter Spesialis/PPDS*) doctor allegedly committed suicide due to bullying and heavy workload, the case of persecution of dentist Vissi El Alexandra in Bandung was persecuted and threatened with death by Samuel Sunarya, The latest case in November 2024 is a contract doctor at Lukas Ebembe Hospital who was beaten by a local official. This reflects the tremendous pressure experienced by medical personnel, both in terms of workload and work environment.

Legal protection of medical personnel, especially doctors, is becoming an increasingly important issue. Indonesia passed Health Law Number 17 of 2023 which is expected to be able to provide a strong legal basis to ensure the safety and security of doctors in carrying out their duties (Soge, 2023). Several previous studies have highlighted legal protections for medical personnel in the context of such legislation. Mangku et al. (2022) and Rizka et al. (2022) emphasized the importance of preventive protection through vaccination and safety protocols, as well as repressive protection in the form of sanctions against acts of violence and discrimination against medical personnel. Then expand the study by discussing the responsibility of hospitals in providing administrative legal support and their role in handling complaints of medical practices.

Other research, such as the one conducted by Prayuti et al. (2024), highlights challenges in the implementation of this new Health Law, such as the lack of a clear definition of malpractice and the weakness of the overall legal protection mechanism. Elizar et al, (2024) stated that malpractice is an act that can be categorized as criminal malpractice if it meets the formula of criminal offenses, that is, the act must be a reprehensible act and carried out with the wrong mental attitude, such as intentionality, carelessness, or negligence. On the other hand, Sarwono's research (2023) shows that Law of the Republic of Indonesia Number 17 of 2023 concerning Health in cases involving fake doctors also provides legal protection for health institutions that report violations, such as the case of fake doctors.

It can be seen that most of the research still focuses on institutional or the general context of the protection of medical personnel as a whole. There are still gaps in studies that specifically examine the legal protection of the safety and security of doctors specifically both as individuals and professionals within the framework of the new Health Law, as well as its direct implications for the medical profession in Indonesia

Doctors still face the risk of criminal liability due to misdiagnosis or treatment that is not up to standard. However, if they act in accordance with professional standards, the Health Law offers protection through preventive and repressive measures, as reinforced by the Supreme Court's decision in case Number 233 K/Pid.Sus/2021. The purpose of this study is to analyze the extent to which Health Law Number 17 of 2023 provides protection for the safety and security of doctors and to examine its juridical implications for the practice of the medical profession in Indonesia.

## **2. Literature Review**

### **2.1. Grand Theory: The Theory of the State of Law (*Rechtsstaat*)**

The concept of the State of Law, or *Rechtsstaat*, as articulated by Julius Stahl, is a foundational framework for understanding the role of law in governance, emphasizing four key elements: protection of human rights, separation of powers, governance based on law, and the establishment of a state administrative court. These elements collectively ensure that the state operates within a legal framework that prioritizes the welfare of its citizens and upholds justice (Mamytova & Mamytov, 2024). In the context of this study, the *Rechtsstaat* principle underscores the state's obligation to safeguard the rights of medical professionals, particularly doctors, whose safety and security are critical to the effective functioning of public health services. The legal protections enshrined in Indonesia's Health Law Number 17 of 2023 reflect this responsibility, aiming to create a secure environment for doctors to perform their duties without fear of physical, psychological, or legal threats, thereby aligning with the *Rechtsstaat* ideal of protecting fundamental rights.

Further elaborating on the *Rechtsstaat* concept, Moniz (2024) highlights its distinction from the Anglo-Saxon Rule of Law by emphasizing its focus on the state's active role in shaping legal order to achieve justice and societal welfare. Unlike the *Rule of Law*, which often prioritizes procedural fairness, *Rechtsstaat* integrates substantive justice, ensuring that laws not only regulate but also promote the well-being of citizens, including vulnerable professions like doctors (Moniz, 2024). This perspective is particularly relevant to the study of legal protections for doctors, as it positions the Health Law as a tool for the state to proactively ensure occupational safety and legal certainty for medical personnel. By embedding protections within the legal framework, the state fulfills its *Rechtsstaat* duty to balance individual rights with public interest, fostering a health system where doctors can operate confidently and contribute to socio-economic development.

### **2.2. Middle Theory: Legal Protection Theory**

Legal protection theory, as articulated by Hadjon (1987), categorizes protection into two primary forms: preventive and repressive. Preventive protection involves regulations that ensure the rights of doctors are upheld, such as mandates requiring health institutions to provide safe working environments, adequate facilities, and clear procedural guidelines to mitigate risks (Hadjon, 1987). Repressive protection, on the other hand, encompasses legal mechanisms to address violations of doctors' rights, including sanctions against individuals or entities that perpetrate physical, psychological, or legal threats against medical professionals. This dual approach aims to safeguard doctors, who face unique vulnerabilities due to the high-risk nature of their profession, from both potential and actual harm.

The theory underscores the state's responsibility to establish robust legal frameworks that protect vulnerable professions, such as doctors, from threats by individuals, groups, or even state entities. In the context of Indonesia's Health Law Number 17 of 2023, this obligation is reflected in provisions ensuring occupational safety and legal recourse for doctors facing violence or malpractice allegations (Geovani et al., 2021). Geovani et al. (2021) emphasize that legal protection must align with human rights principles, ensuring that professionals, like doctors, are shielded from exploitation and harm while performing their duties. This perspective reinforces the need for comprehensive regulations and effective enforcement to create a secure environment, enabling doctors to deliver healthcare without fear of retribution or undue legal risks. By integrating preventive measures, such as safety protocols, and repressive actions, like legal sanctions, the state fulfills its duty to uphold the rights and dignity of medical professionals, fostering trust in the healthcare system.

### 2.3. Applied Theory: Legal Certainty Theory (Gustav Radbruch)

Gustav Radbruch's legal certainty theory underscores the necessity of clear, consistent, and enforceable legal rules to ensure justice and stability in society. Radbruch's concept of *idee des recht* integrates three core elements: justice (*gerechtigheit*), legal certainty (*rechtsicherheit*), and utility (*zweckmäßigkeit*) (Sutedja, 2023). In the context of Indonesia's Health Law Number 17 of 2023, this theory is pivotal, as it demands that legal frameworks provide unambiguous protections for doctors against physical, psychological, and legal threats. Legal certainty, as Radbruch envisions, goes beyond mere enforcement; it requires laws to be rationally accepted by the community, ensuring that medical professionals can perform their duties without fear of arbitrary interference or uncertainty. This principle is critical for doctors, who face heightened risks due to their frontline role in healthcare, ensuring they operate in a secure and predictable legal environment.

Furthermore, legal certainty aligns with the state's obligation to protect vulnerable professions like medicine, fostering trust in the healthcare system. Kurniawan (2024) emphasizes that, from a legal positivism perspective, legal certainty ensures laws are predictable and uniformly applied, preventing arbitrary actions that could undermine professional rights. In the context of the Health Law, this translates to clear regulations on the responsibilities of health institutions and law enforcement in safeguarding doctors, as well as mechanisms to address violations promptly. By embedding these protections, the law upholds Radbruch's vision, balancing justice with practical utility to create a safe working environment. This framework not only shields doctors from threats but also reinforces their role as essential contributors to public health, free from fear of retribution or legal ambiguity.

### 2.4. Legal Certainty

Legal certainty is a cornerstone of jurisprudence, ensuring that laws are applied consistently, predictably, and fairly to provide justice that is universally perceivable (Zikrullah, 2024). The term "legal protection," as defined by the KBBI, refers to actions or mechanisms that safeguard individuals, combining the concepts of protection and law. In the context of Indonesia's Health Law Number 17 of 2023, legal certainty is critical for protecting doctors, ensuring they can perform their duties without fear of arbitrary legal actions or threats. This principle demands that legal norms be clear, enforceable, and uniformly interpreted, preventing unpredictable enforcement that could undermine the rights of medical professionals. Ciongaru (2016) emphasizes that legal certainty eliminates uncertainty by ensuring that applicable legal norms are easily identifiable, consistently applied, and accessible to those affected, thus fostering trust in the legal system.

Moreover, legal certainty extends beyond mere enforcement to include protections against violations of rights, such as those faced by doctors in high-risk healthcare settings. Ramadhani (2021) highlights that legal certainty is essential for safeguarding individuals from exploitative practices, drawing parallels to the need for clear legal frameworks to protect vulnerable groups, including professionals like doctors. In the medical context, this translates to regulations that clearly define the responsibilities of health institutions and law enforcement in shielding doctors from physical, psychological, or legal threats. By ensuring predictable and fair application of the law, legal certainty creates a secure environment, enabling doctors to focus on delivering quality healthcare without the burden of legal ambiguity or fear of unjust repercussions, thereby reinforcing the integrity of the healthcare system.

### **3. Methods**

The research method used in this study is a juridical normative method with a qualitative descriptive approach. The juridical normative approach was chosen because this study focuses on the analysis of legal norms relevant to legal protection for doctors under the new Health Law. This research utilizes primary data sources in the form of Health Law Number 17 of 2023 and other regulations, such as the Medical Practice Law, as well as secondary data sources in the form of legal literature, journal articles, and supporting research reports. The data collection technique is carried out through literature studies by collecting various legal documents, books, scientific journals, and research reports, as well as document analysis to examine the content of relevant laws and regulations. The selection of documents is selected based on relevance, novelty, and urgency with the chosen topic. The data obtained were then analyzed qualitatively descriptive by describing the content and relationships between legal norms and comparing them with the legal theories used, such as the Theory of the State of Law, the Theory of Legal Protection, and the Theory of Legal Certainty. The analysis process is carried out in a deductive manner, namely drawing conclusions based on legal principles that have been analyzed from the theoretical framework to their application in the legal protection of medical personnel.

### **4. Results**

Legal knowledge among health professionals is a very important aspect in supporting the advocacy of the rights of medical personnel and creating a safe work environment. This is in line with Article 189 paragraph (1) letter s in Law Number 17 of 2023 concerning Health, which affirms the obligation of hospitals to protect and provide legal assistance to all hospital staff when carrying out their duties. Furthermore, this legal protection also supports patient safety, because medical personnel can work without fear of legal risks or other threats, thus maintaining ethical standards in health services. Hospitals must play an active role in making regulations and regulating this transfer process so that they can still fulfill patients' and doctors' rights (Pardomuan and Prasetyo, 2024).

Protection of doctors is first emphasized as part of the purpose of health care. In Article 3 letter h, it is stated that Health Implementation aims to provide protection and legal certainty for Patients, Health Human Resources, and the community. This provision shows that the state not only pays attention to the protection of patients, but also explicitly guarantees the rights and safety of medical personnel, including doctors, in carrying out their practice.

Furthermore, this protection is affirmed as a fundamental principle in the implementation of health. Article 2 letter g states that This law is organized based on the principles of protection and safety. This suggests that all policies and actions within the scope of health must make protection and safety, including for medical

personnel, as the main guideline.

The state's commitment to protecting doctors is also reflected in the legal obligations imposed on the central and local governments. In Article 12 letter d, it is stated that The Central Government and Regional Governments are responsible for the protection of Patients and Health Human Resources. Thus, the protection of doctors is not only a normative aspiration, but has been framed as a constitutional and administrative obligation that must be fulfilled by the state.

Furthermore, in Article 273 paragraph (1) letter d) it is emphasized that Medical Personnel and Health Workers have the right to obtain protection for safety, occupational health, and security. This provision strengthens the legal position of doctors as a profession whose safety must be guaranteed by the state, both physically and psychologically, while carrying out health service duties.

As a continuation of the protection in Article 273 paragraph (1) letter, Article 273 paragraph (2) regulates the right of doctors to stop services if they receive treatment that degrades dignity, including in the form of violence, harassment, and bullying. This signifies that the law not only provides legal protection, but also provides recognition of the psychological and moral aspects of medical personnel who may be disturbed by inhumane acts during their duty.

Protection of doctors is also strengthened at the institutional level. Article 189 states that Hospitals are obliged to protect and provide legal assistance for all hospital officers in carrying out their duties. This is the legal basis for the hospital's responsibility to provide legal assistance actively if doctors or medical personnel face legal problems while carrying out their practice

In addition, in the event of a dispute or alleged violation by medical personnel, this law regulates a settlement mechanism that does not directly lead to the criminal realm. Article 310 paragraph (1) expressly states that Any dispute due to alleged wrongdoing by Medical Personnel and Health Workers in the implementation of the practice shall be resolved first through a dispute resolution mechanism outside the court. In fact, Article 308 paragraph (1) adds that Criminal proceedings against Medical Personnel and Health Workers can only be carried out after there are results of an examination from the Assembly. These two articles provide legal certainty and fair procedural protection, preventing the early criminalization of doctors before there is an assessment from ethical institutions or professional disciplines.

Article 306 paragraph 3 states that Medical Personnel or Health Workers who have carried out disciplinary sanctions as referred to in paragraph (1) where there is an allegation of criminal acts, law enforcement officials prioritize the resolution of disputes with restorative justice mechanisms in accordance with the provisions of laws and regulations . This provision emphasizes that if a medical or health worker has undergone disciplinary sanctions but then an allegation of a criminal act arises, dispute resolution must be prioritized through restorative justice mechanisms. Law enforcement officials must work in accordance with the principles of laws and regulations, so as to maintain justice, professionalism, and the public interest.

Article 286 paragraph 1 In certain circumstances, Medical Personnel and Health Workers may provide services beyond their authority . This shows that there is legal flexibility to respond to emergency situations or exceptional conditions that require immediate action for the safety of patients. However, its implementation must still pay attention to ethical limits, professional responsibility, and applicable legal procedures, in order to prevent potential abuse of authority. This arrangement reflects humanitarian principles in health services, but still requires strict supervision so as not to violate medical practice standards.

2023 concerning Health is affirmed through various normative provisions that state the state's commitment to ensuring legal protection, occupational safety,

and security for medical personnel. The initial basis of this commitment can be found in Article 3 letter h which states that the implementation of health aims to provide legal protection and certainty for patients, health human resources, and the community.

Furthermore, the protection of doctors is also regulated in Article 273 paragraph (1), which explicitly states that Medical Personnel and Health Workers in carrying out their practice have the right: to obtain legal protection as long as they carry out their duties in accordance with professional standards, professional service standards, operational procedure standards, and professional ethics, as well as the needs of Patient Health. In addition, doctors are also entitled to protection for safety, occupational health, and security. This shows that legal protection is not only provided when doctors face legal problems, but also in a preventive context so that doctors do not become victims of criminalization or threats during their work.

The state's commitment to protect doctors also applies in the context of reporting criminal acts. In Article 302 paragraph (3), it is emphasized that Medical Personnel and Health Workers who report suspected criminal acts to patients are required to receive legal protection. This is very important so that doctors do not experience pressure or intimidation when carrying out ethical and professional obligations in certain legal situations..

No less important, Article 393 provides specific protection for doctors involved in dealing with Extraordinary Events (KLB) and Outbreaks. Paragraph (1) states that they are entitled to legal protection and security as well as health insurance in the performance of their duties, and paragraph (2) adds that protection also includes access when conducting investigations in areas affected by the outbreak. This protection is included in both the medical context and personal safety, which strengthens the position of doctors when working in high-risk zones.

Thus, Law Number 17 of 2023 is not only promising, but also designs systematic legal protection for doctors in various conditions, including regular practice and health crisis situations. However, in order for its implementation to be more operational, implementing regulations are needed in the form of Government Regulations or Ministerial Regulations that technically describe forms of protection, enforcement mechanisms, and sanctions for parties who interfere with the safety and security of medical personnel. With this approach, the legal guarantee for doctors does not only stop at the text of the law, but is really alive and functional in the field.

The implementation of Rechtsstaat values in Indonesia is reflected in the revision of the Health Law through Law No. 17 of 2023. This revision provides a stronger legal framework for the protection of medical personnel. One of the key elements is Article 273, which explicitly guarantees legal protection for medical personnel as long as they carry out their duties according to professional and ethical standards. This provides better legal certainty than previous regulations, while reducing the risk of criminal prosecution for medical personnel in cases of ethical violations or negligence.

More broadly, this revision also introduces a more strategic approach to national health development. The shift in focus from treatment to prevention, improved efficiency of health financing, and the use of cutting-edge technology show that this revision is not only oriented towards structural improvement, but also on the sustainable strengthening of health systems. Thus, the revision of the Health Law is not only a tool to protect the medical profession but also a means to improve the national health system holistically.

The inequality of legal protection between doctors and patients in health regulations in Indonesia reflects a broader issue related to the principles of fairness and balance in the health care system. Law No. 17 of 2023 concerning Health and Government Regulation No. 28 of 2024 only focuses on the responsibilities and obligations of medical personnel, without paying attention to the role of patients as

partners who should be responsible for the success of health services. Patient dishonesty, such as concealing a history of illness, certain habits, or other important information, can have a significant impact on diagnosis and treatment, thereby increasing the risk of malpractice or failure in medical care. However, due to the absence of clear sanctions or rules, patients have no legal incentive to act honestly or responsibly.

In addition, patients' awareness of their rights is an important factor in improving healthcare outcomes. Research shows that there is still a significant knowledge gap among patients regarding their rights in the healthcare system. A study by Zahid and Sumbal (2024) revealed that only about 11.5% of patients have good knowledge of their rights in healthcare. This ignorance can limit patients' ability to fight for their rights, whether it is regarding the medical information provided or their right to the quality of care received. Therefore, it is important to design effective educational initiatives, both for patients and healthcare providers, to reduce these information gaps. Proper education will not only increase patients' awareness of their rights, but will also encourage their greater involvement in the treatment process. This, in turn, can contribute to improved quality of care and overall patient satisfaction (Bhupal et al., 2024).

Health reform must include broader structural changes in the health care system itself. This includes increased patient access to legal resources and the efficiency of the judicial process associated with malpractice claims. Many patients, especially in developing countries, have difficulty accessing quality legal aid due to limited resources or knowledge of how to engage the legal system. In this context, it is important to ensure that access to fair and equal legal aid can be obtained by all levels of society

## 5. Discussions

The legal protection for doctors under Indonesia's Health Law Number 17 of 2023 is grounded in the Rechtsstaat theory, which emphasizes the state's role in ensuring justice and safeguarding fundamental rights through a robust legal framework. This law aims to provide comprehensive protection for medical professionals against physical, psychological, and legal threats, including malpractice claims and workplace violence. By integrating preventive and repressive measures, it seeks to create a secure environment for doctors, aligning with the Rechtsstaat principle of prioritizing human rights and governance based on law (Mamytova & Mamytov, 2024). However, the practical implementation of these protections reveals gaps that undermine legal certainty and fairness, reflecting challenges in harmonizing regulations with real-world application.

Hadjon's (1987) Legal Protection Theory provides a framework for understanding the dual approach of preventive and repressive protections. Preventive measures, such as mandates for hospitals to ensure safe working conditions and clear procedural guidelines, aim to mitigate risks before they escalate. Repressive protections, meanwhile, include legal sanctions against perpetrators of violence or harassment, as outlined in Article 273 of the Health Law, which grants doctors the right to stop services in response to degrading treatment. Despite these provisions, the law's implementation faces challenges, including procedural ambiguities and weak enforcement, particularly in cases of violence against doctors. For instance, research by Mangku et al. (2022) highlights that during the COVID-19 pandemic, medical personnel faced discrimination and violence despite existing protections under earlier laws, indicating that normative provisions alone are insufficient without effective enforcement mechanisms.

Radbruch's Legal Certainty Theory further underscores the need for clear, consistent, and enforceable legal norms to ensure justice and stability (Sutedja, 2023). While Health Law Number 17 of 2023 provides a stronger framework than

its predecessors, concerns remain about regulatory inconsistencies and ambiguities that erode legal certainty (Feriana & Hosein, 2024). For example, the lack of clear definitions for malpractice and standardized reporting procedures for violence, as noted by Prayuti et al. (2024), creates confusion and delays in legal recourse. Radbruch's emphasis on balancing justice, legal certainty, and utility highlights the need for laws to be both enforceable and aligned with societal notions of fairness. In some instances, legal ambiguities may lead to perceptions of injustice, as Borowski (2024) warns, potentially causing doctors to view the law as invalid when it fails to protect them adequately.

The imbalance between legal protections for doctors and patients is another critical issue. While the Health Law emphasizes doctors' obligations, it lacks provisions to hold patients accountable for actions like concealing medical histories, which can lead to misdiagnoses and malpractice claims (Pardomuan & Prasetyo, 2024). This gap reflects a broader issue of fairness in the healthcare system, where patients' rights are prioritized without corresponding responsibilities. Additionally, low patient awareness of their rights, with only 11.5% demonstrating good knowledge (Zahid & Sumbal, 2024), exacerbates tensions and hinders collaborative healthcare delivery. Addressing this requires educational initiatives to enhance patient understanding and involvement, as suggested by Bhupal et al. (2024).

Institutional coordination remains a significant barrier, as Afandi and Pratimaratri (2023) note, with overlapping authorities and weak collaboration between hospitals, professional organizations, and law enforcement slowing legal processes. The absence of specialized protection units, as recommended by Rizka et al. (2022), further limits doctors' access to timely legal assistance. International Humanitarian Law, which prohibits attacks on healthcare workers, reinforces the need for robust protections (Andayani & Kurniawan, 2023), yet domestic mechanisms lag in implementation.

This study highlights that while Health Law Number 17 of 2023 provides a normative foundation for protecting doctors, its effectiveness is hampered by legal vacuums, weak enforcement, and cultural gaps in recognizing violence against doctors as a serious violation. To address these, an integrative approach is essential: refining regulations to include specific protections against violence, establishing dedicated protection units, and fostering legal awareness among stakeholders. These measures align with Sarwono's (2023) call for preventive and responsive legal systems and Pasaribu and Sembiring's (2024) emphasis on ensuring occupational safety and fair compensation. By addressing these gaps, Indonesia can strengthen legal certainty and create a safer, more supportive environment for doctors, enhancing the overall healthcare system.

## **6. Conclusion**

Health Law Number 17 of 2023 establishes a robust normative framework for protecting doctors in Indonesia, incorporating preventive and repressive measures to address physical, psychological, and legal threats. By mandating compliance with professional and ethical standards, as outlined in Article 273, and requiring health institutions to ensure safe working environments, the law aims to provide legal certainty and safeguard doctors from risks such as violence and unfounded malpractice claims. However, challenges persist, including regulatory ambiguities, weak enforcement, and an imbalance in legal protections between doctors and patients. The absence of clear mechanisms for addressing violence and inconsistent coordination among institutions undermine the law's effectiveness, leaving doctors vulnerable to threats and demotivation. These gaps highlight the need for stronger implementation strategies to ensure the law's protections translate into practical security for medical professionals, fostering a safer and more ethical healthcare system.

This study is limited by its normative juridical approach, which focuses on legal texts without empirical data on the law's real-world impact, particularly in resource-constrained areas. This restricts the analysis of practical challenges faced by doctors. Practically, the findings serve as a reference for health institutions and policymakers to develop targeted protection policies, emphasizing clear enforcement mechanisms. Academically, the research enriches health law studies by underscoring the need for balanced protections for doctors. To address identified gaps, the government should prioritize derivative regulations, such as Government or Ministerial Regulations, to clarify protection mechanisms and strengthen oversight. Health institutions should provide legal training to enhance doctors' awareness of their rights. Further empirical research, using quantitative or qualitative methods, is recommended to evaluate the law's effectiveness across diverse regions. Professional organizations should also advocate for inclusive policies to ensure comprehensive protection for medical personnel.

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### ***Ethical Approval and Originality Statement***

Ethical approval was obtained for this study. The manuscript represents original work and has not been previously published, nor is it under consideration by another journal.

### ***Data Disclosure Statement***

The data that support the findings of this study are available from the corresponding author upon reasonable request.



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