

LARGE-SCALE SOCIAL RESTRICTION POLICY IN OVERCOMING CORONA VIRUS DISEASE 19: SOCIAL AND ECONOMIC PROBLEMS

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Abstract--The increasingly massive spread of Covid-19 led the Indonesian government to issue a Large-Scale Social Restrictions (LSSR) policy. LSSR was chosen from among the alternatives provided for in Law No. 6 of 2018 concerning Health Quarantine. LSSR is done by limiting community activities. Empirical social restrictions are not able to reduce the transmission rate proved to be a positive case number continues to increase. This study aims to explain the basis for LSSR policy considerations and their implications for social and economic aspects and find alternatives to overcome Covid-19. This research uses a descriptive analytical normative juridical approach, using secondary data, qualitative analysis techniques through legal interpretation. The study found that the establishment of LSSR was the Government of Indonesia's policy to overcome Covid-19 based on epidemiological considerations including the source of disease, distribution and health status of the local community, the magnitude of threats, resource readiness and socioeconomic considerations and two criteria, namely a significant increase in the number of cases and deaths and there are epidemiological links in other regions / countries. LSSR brought changes in social behavior and corrected the economy in the first quarter and did not show an increasing trend. The regional quarantine policy is aggressively an ideal scenario to anticipate if the LSSR does not effectively break the chain of transmission of Covid-19 by stopping the movement of people and goods through strict procedures and supported by strategic measures to ensure that regional quarantine is obeyed by the community.

Keywords: Covid-19, LSSR, Quarantine, Health, and Social Affairs.

I. Introduction

The outbreak of Corona Virus Disease 2019 (COVID-19) has shaken the international public in various parts of the world. The virus was first detected in Wuhan City, Hubei Province, China in early

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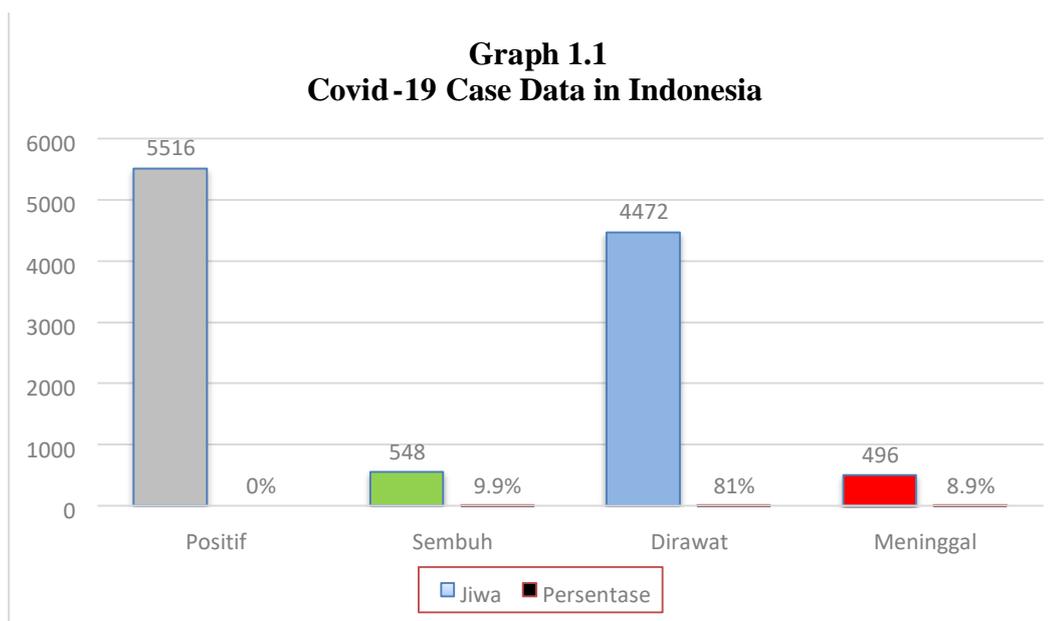
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December 2019, infecting many people and killed thousands of lives and then spread to other cities Zhengzhou, Nanchang, Hangzhou, Guangzhou, Beijing, Huainan, Shanghai and spread to nearby South Korea, Japan, Taiwan, Hong Kong and the Philippines. The rapid transmission of the virus finally made almost all of Asia's mainland infected and continues to spread to various countries in the Middle East, Europe, Australia and the United States [1].

The World Health Organization (WHO) has established Covid-19 as a pandemic which has a rapid rate of transmission of dangerous vascularity rates and urges all countries to be aware and adopt policies according to WHO recommendations and protocols [2]. Covid-19's status as a pandemic puts the global community in a state of health emergency and must comply with all health policies set by the government so that transmission can be controlled.

Indonesia has become one of the infected countries and has declared Covid-19 as a non-natural disaster in the form of disease outbreaks that must be addressed to prevent an increase in cases of infection. Covid-19 transmission in Indonesia is currently increasing and is spreading in various regions marked by a growing number of positive cases. Reporting from the official data of the National Disaster Management Agency (NDMA) and the Ministry of Health of the Republic of Indonesia the total data of the Covid-19 case is as follows:



Source: NDMA and Ministry of Health Report, April 16, 2020

This data illustrates that the transmission process is still ongoing in Indonesian society and is predicted to increase. According to the latest data as of 26 April 2020 the number of positive Covid-19 cases

numbered 8882 cases, treated by 7032 people, 743 died and 1107 people recovered. The number of cases that continue to increase has an impact on the economic, social, cultural, defense, security and welfare aspects of the community so that it requires accelerated handling to suppress and break the massive chain of transmission. Seeing the condition of public health getting worse President Jokowi issued Presidential Decree No. 11 of 2020 concerning Determination of the Emergency Status of Public Health Covid-19. This Presidential Decree is the authority of the central government granted Law No. 6 of 2018 on Health Health Quarantine to respond to the increasingly massive impact of the spread of Covid-19. To follow up the status of public health emergencies the Government undertakes countermeasures by issuing Government Regulation No. 21 of 2020 concerning Large-Scale Social Restrictions (LSSR). This government regulation becomes the legal basis for local governments to limit the movement of people or goods that are suspected of being infected or contaminated with Covid-19. The first area that sets the LSSR policy is the Capital of DKI Jakarta, which is suspected to be the Covid-19 epicenter. However, even though the LSSR has been carried out, the number of positive cases has not decreased because LSSR merely limits the movement of people and goods, not stopping all activities, so it is not surprising that the spread increase.

LSSR still provides opportunities for interaction between people, goods and transportation equipment in various public facilities such as ports, stations, airports and terminals that carry viruses (carriers) so that transmission will still occur. Human mobility is a major factor in the spread of Covid-19, limiting population movement to and from the epicenter of the virus will not stop transmission as evidenced by the positive number of cases not decreasing when human life is zero tolerance.

The public questioned the basis for the consideration of determining LSSR and what criteria must be met by the region or province to apply for LSSR, what activities are restricted, time limits and other information that is entitled to the public. Facing the Covid-19 pandemic can be seen from policies that are not firm and tend to change. Determining the LSSR criteria without considering risk factors will cause social and economic turmoil considering that there are still many Indonesians living below the poverty line, plus many regions of Indonesia bordering other countries will hamper economic activity and international trade.

In comparison, the Indonesian government can learn how the Chinese government performs a total lockdown of the entire population of Wuhan City by intensively treating positive patients in the hospital and ordering all residents to stay at home by guaranteeing all the medical, food needs of the community in full. The result is that in less than three months China has succeeded in reducing transmission rates and its population is now able to move normally. The factual determination of LSSR has implications and social, economic and health dynamics that are widespread in the community but have not shown success in breaking the spread of Covid-19. The government needs to study and calculate comprehensively the success rate of the policy with the social and economic impacts that occur. Therefore a study was conducted with the aim of reviewing the considerations and criteria of the Large-Scale Social Limitation (LSSR) policy in overcoming Covid-19 and its implications for social and economic life and alternative government policies to overcome the Covid-19 pandemic.

II. Method

This study uses a normative juridical approach that examines the legal norms in Law No. 6 of 2018 concerning Health Quarantine, Government Regulation No. 21 of 2020 About LSSR and other regulations related to handling Corona [3]. The study will analyze the conditions and social behavior of the community in the midst of the Corona outbreak and analyze the level of compliance with community behavior on social distancing calls to measure the urgency of conducting health quarantine.

III. Results and Discussions

LSSR Policy Considerations and Criteria in Overcoming Covid-19 and Its Implications for Social and Economic Life

The Covid-19 case originated from WHO information dated December 31, 2019 which stated there were cases of pneumonia clusters with unclear etiology in Wuhan City, Hubei Province, China and continued to grow until there were reports of deaths and imports outside China. Who established Covid-19 as the Public Health Emergency of International Concern (PHEIC) and ailment that troubled the world community. On 12 February 2020 WHO officially designated Covid-19 as a pandemic and on 2 March 2020 Indonesia officially reported 2 positive confirmation cases of Covid-19 [4].

Since then Covid-19 continues to be transmitted from one human to another, the people of Indonesia and the world are made afraid and anxious because every day reports of positive cases and deaths continue to increase. WHO informs all countries that the virus is transmitted from sprinkling of saliva when coughing and sneezing (droplets), contact with infected people so that it calls on the international community to implement social distancing and avoid direct contact with Covid-19 patients. Since the first Covid case was confirmed the government began to realize the danger of this disease and appealed to the whole community to maintain social distance and not hold activities that involve large numbers of masses. To ensure that Social Distancing goes well, the Indonesian National Police issued a notice No. 2 / III / 2020 on Compliance with Government Policies in Handling the Distribution of Covid-19 which refers to the principle of *salus populi supreme lex exto* (people's safety is the highest law) by prohibiting all Indonesian people from carrying out activities social in public places and the environment itself [5]. Although the appeal has been socialized, it seems that the community is not aware of the danger that Covid19's recommendations have been ignored and over time positive case reports continue to increase followed by mortality.

Realizing that its citizens do not comply with social distancing and the condition is getting worse the government states that Indonesia is in a state of civil emergency even though social security conditions of the people are still safe and conducive to chaos, especially looting. Later the declaration of civil emergency was "abandoned" and replaced it by establishing the LSSR policy. Some regional heads, especially those of the Covid-19 epicenter, want the central government to hold a regional quarantine (lockdown) so that the spread can be controlled and handled well, but the government instead chose the

LSSR option. Academics and practitioners question the basis for the consideration of the policy and what regional criteria can apply for LSSR to the central government because this policy is considered to have no significant difference from the appeal of Social Distancing.

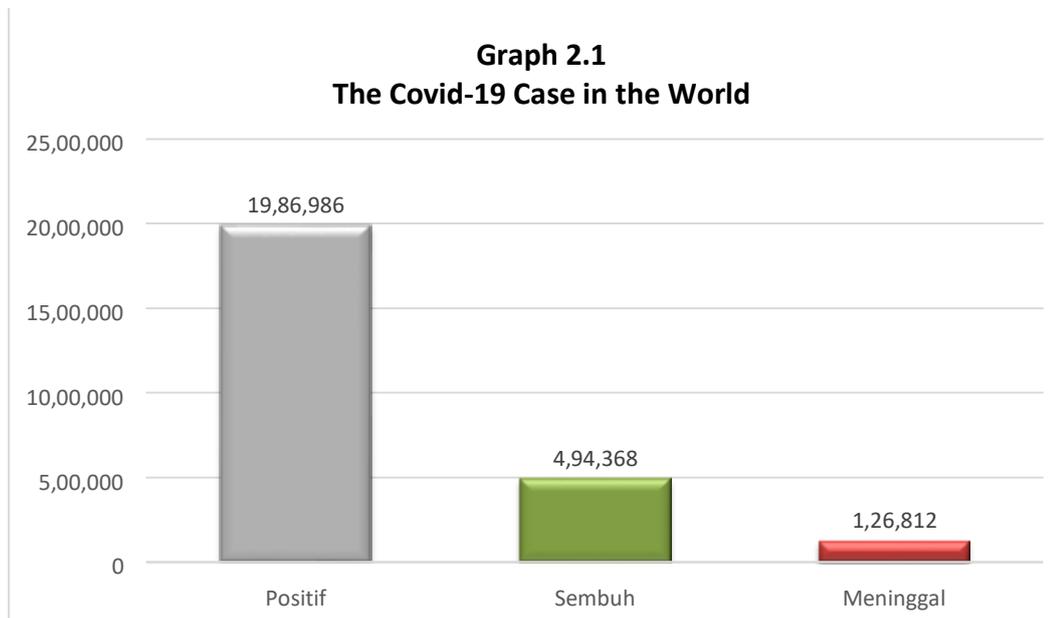
In Indonesian law if the Province or City will determine the LSSR must be based on several considerations. First, epidemiological considerations as a scientific basis in health science to assess the source of disease, distribution, public health status and medical treatment applied. With this study, the local government has complete information and data about the disease that is plaguing it so that it will be the next consideration for developing a treatment strategy. Second, consideration of the magnitude of the threat. Epidemiological studies provide a complete picture of the etiology of the disease, patient risk factors, surveillance of public health status so as to clearly illustrate the level of threat posed by the disease. Third, operational and technical resource support. Overcoming Covid-19 having the status of a pandemic the government has thought of the best possible readiness of medical resources (doctors and nurses), medical equipment, medicines, isolation rooms, personal protective equipment and other medical needs to ensure that during the LSSR period positive patients can be treated intensively without lack of resources needed. Fourth, social and economic considerations. This consideration is a factor that is highly taken into account by the government before and during the LSSR period because limiting population movements means reducing social interaction and suppressing mass economic activities, large social restrictions such as those currently occurring in Jakarta have a significant impact on social activities, especially stretching the economy of Jakarta's population has even affected the surrounding area because generally the City which is the economic center invites populations throughout the region to look for income.

In the Indonesian legal system the government has set if regions / provinces applying for LSSR must meet the criteria in Government Regulation No. 21 of 2020 concerning LSSR. The criteria that must be met are:

1. Number of cases and deaths due to illness increased significantly and spread
Submitting an LSSR request for Covid-19 infected provinces must be based on data on the number of positive cases, patients recovering and mortality rates without valid data the central government may not grant the request. For example, DKI Jakarta officially set LSSR on 10 April 2020 because based on studies and data the number of positive cases reached 2,474, meaning that Jakarta contributed almost 50% of positive cases nationally, the death rate was 242 while 164 patients were cured 164 [6]. This figure is the largest in all of Indonesia and continues to increase every day so that Jakarta is placed as the epicenter of Covid-19 in Indonesia and the population space must be immediately restricted so as not to spread to other areas, especially the capital buffer area.

The spread of positive cases that hit Jakarta makes this region must limit itself to other regions, but why does the government not adopt a quarantine policy that is medically more guaranteed because quarantine is not a limitation but a separation, delay in making quarantine decisions will trigger positive cases and death rates. The government must learn from many countries that are successful or late in handling them. Jakarta's population is as dense as the state of New York being the worst after Italy and Spain, from 8.6 million people, 160,000 people were confirmed positive. New York has more than 60 million tourists a year and is the entry point to the United States whoever carries the virus is likely to

infect others. New York has the best health system on the planet but due to doubts about taking quarantine decisions the city finally became the epicenter of the spread of Covid-19 in the land of Uncle Sam [7]. Experts in the country said that there was a tug-of-war between the state governor and the mayor, New York officials pointing a sharp spotlight on the Federal government, which is considered slow in making decisions. The distribution of this pandemic is increasingly out of control as shown in this table:



Source: NDMA and Ministry of Health Report, April 16, 2020

According to the latest data as of April 26, 2020, the total number of Covid-19 cases in the World reached 2,995,636 cases, of which 207,020 people died. While the number of people recovering reached 881,561. These transmission figures illustrate that the handling of Covid-19 in each country is different. Countries that are late and also wrong in handling Covid-19 infection rates are higher for a long time and the mortality rate always increases. In contrast to countries that respond appropriately and a high level of population awareness is relatively faster past the peak of the pandemic.

2. There are Epidemiological Relations with Similar Events in Other Regions or Countries

Hirsch [8] argues that epidemiology is important to provide an overview of the occurrence of the spread of a type of disease in humans at certain times in various places on earth and relate it to external conditions and populations. Epidemiology studies become one of the important criteria before the government determines what policies are implemented. Beaglehole put forward 4 main roles in epidemiology, namely: a) Finding the cause of disease that affects the degree of public health; b) Tracing the natural history of the disease and its survival; c) Explain the public health status according to changes in time, age, and other related factors; d) Results of evaluations of disease management such as promotion, prevention efforts and health services provided.

For Indonesia, determining the status of LSSR in epidemiological studies must at least meet several steps, namely conducting a study of the number of cases based on time, the spread of cases from one place to another over time, studies of local transmission and mortality. This step must include the most up-to-date data so that it can be believed that there has been an uncontrolled spread of the virus in the region and should immediately limit social interactions on a large scale. This step has been taken by the DKI Jakarta government when submitting an LSSR request to the Ministry of Health and followed by other regions such as Bogor, Depok and Bekasi which have also participated in setting LSSR because most of the population interacts with Jakarta.

LSSR policies in a Province or City with high population density and economic activity carry wide socio-cultural and economic implications. The spread of Covid-19 changed social and cultural habits throughout the country. China as a country of origin Covid-19 changed the habits of the people originally used to shake hands changed with gestures gong shou for men half right hand clenched and left hand holding right hand in front of the chest and vice versa for women. This causes concern because of fears of spreading the disease through the infection chain [9]. Iran, the country with the fourth highest number of Covid-19 patients, has "a handshake" becoming a new habit that replaces the handshake by bringing the two people's legs together in a position like kicking a ball. In Indonesia a slight change in social habits, children used to kiss the hands of older people at this time schools and educational institutions have banned, the tradition of the major or eating together in large containers based on banana leaves has also been banned.

Implications of LSSR in Indonesia have made all large-scale socio-cultural and religious activities canceled to be held as examples of wedding receptions in urban and rural areas canceled and even disbanded by the Police, Friday prayer services (Islam) and worship services (Christian) are abolished, sports competitions, music performances, exhibitions, seminars and other activities cannot be carried out until an unspecified time limit. This social implication makes people experience panic and worry because of the increasingly uncertain situation.

Economic implications are far more worrying, the epicenter of the Covid-19 crisis centered in China resulted in a slowdown in global economic growth in the first quarter of around 4% from an estimated 5.8% which would have an impact on the financial crisis and the global crisis due to an increase in epidemic status to be Pandemic in all parts of the world. This has had an impact on world economic growth, which was corrected very significantly from the initial projection of 3.3% to 1.5-2.5%. It was even predicted that there would be a contraction in global economic growth to -2.2% if the handling of pandemic outbreaks in various countries prolonged beyond the second quarter. Indonesia's economy has been hit and has barely experienced an increase from the first quarter at 5.1%. Since Covid-19 hit China affecting 3 (three) sectors of the Indonesian economy at least 2.1 million tourist visits (12.9%) came from China, the World Trade Organization (WTO) determines tourism as an integral part of human life and contributes to social and economy [10]. The second largest decline in Chinese foreign investment was US \$ 4.7 billion or 64.4 trillion rupiah (16.8%) of total FDI. The Chinese trade sector, the largest trading partner of non-oil and gas exports is US \$ 25.8 billion or 353.3 Trillion rupiah (16.7%), non oil and gas imports of US \$ 44.6 Billion or 611 Trillion rupiah (30%) [11]. This figure is certain to decrease in the third quarter if the outbreak is still ongoing and very influential on national economic growth.

In less than 2 (two) months Indonesia was infected by Covid-19 various large-scale industries began to collapse and sever the employment relations of its employees. On April 15, 2020 the Ministry of Labor noted that 74,430 companies operating in the formal and informal sectors went bankrupt with 1.5 million employees forced to be laid off, this situation caused the purchasing power and consumption of the people to decline and resulted in an increase in unemployment which was very high. This condition is very difficult so the Indonesian government must spend 405.1 trillion rupiah to handle Covid-19. The allocation of these funds is used for the health sector, especially in increasing the capacity of Covid-19 referral hospitals and incentives for health workers, social safety nets, electricity subsidies, work cards for affected communities, meeting basic needs and tax incentives. The disbursement of these funds has the consequence of a deficit in the National Budget reaching 5.07% of Gross Domestic Product (GDP) or exceeding the provisions of the Law on State Finances which limit deficits to not exceed 3% [12].

Legal, social and economic experts asked the government to evaluate the implementation of LSSR because it was feared it would create an economic crisis and not overcome the plague. The government can learn from Vietnam's experience when the first positive confirmation case arises the Vietnamese government immediately makes an aggressive quarantine (lockdown) scenario for the cities of Hanoi and Ho Chi Minh and orders flight stops, stops public meetings and closes unnecessary services. The results were very positive Vietnam had passed the peak of the pandemic peak of 258 positive cases, 75 thousand people were quarantined but there were no reports of deaths due to aggressive quarantine that was applied obeyed so that the spread of the virus could be controlled [13]. The Indonesian government needs to create a quarantine scenario if within 14 days LSSR policies in various regions are unable to break the chain of transmission of Covid-19.

Alternative Policies for Overcoming Pandemic Covid-19

Each country infected with Covid-19 has different policies and strategies and learn from one another. Differences in geographical location, socioeconomic conditions, the distribution of positive cases largely determine the varied decision making in each country. Since this outbreak entered Indonesia the government has taken precautionary measures ranging from social distancing and physical distancing calls to reduce crowds and crowds, banning social activities involving large numbers of people even closing places and rituals of worship of all religions, but these efforts seem to have not produced results even Until the LSSR was established the government continued to announce an increase in the number of positive cases followed by a death rate making the anxious community outbreak not fast passing.

The Indonesian government should consider and prepare a quarantine scenario to anticipate if the LSSR is unable to break the chain of transmission. The budget that has been disbursed to cope with Covid19 cannot be left without results that imprint because the human spirit is zero tolerance, so the government and the community must work hand in hand to overcome this pandemic.

Indonesia already has a clear legal basis for dealing with infectious disease outbreaks in Law No. 6 of 2018 concerning Health Quarantine. The government should respond to public health emergencies by issuing a Government Regulation on Quarantine not with LSSR. The choice of quarantine area is ideal with the level of the threat of the spread of a massive pandemic. There are two logical arguments that can be put

forward to apply the quarantine scenario: first, quarantine requires that mass activities be terminated in large numbers during the virus incubation period (14 days). Second, the cessation of mass activity will reduce the increase in cases of infection so that medical staff can treat patients positively. Proving the truth of this argument can be tested if the government has the courage to establish quarantine for areas that have implemented LSSR. The WHO said cases of infectious diseases were recorded to have reached 376 million cases [14]. The threat of this pandemic is very real in Indonesia and even spread to hundreds of countries in the world so it is very reasonable and rational if quarantine is the ideal option to stop Covid-19. The initial step that must be prepared is the selection of quarantine forms that are seen as effective by looking at experiences in many countries, locking details, strategies to meet basic needs so as not to disadvantage many parties. Each region can diagnose its own territory and calculate carefully the potential impacts caused during quarantine.

The Health Quarantine Law provides several quarantine options that can be implemented in public health emergencies. First, house quarantine in the form of restrictions on the occupants of the house and its contents that are suspected of being infected / contaminated to prevent the spread of disease. Second, hospital quarantine in the form of restrictions on someone in the hospital who is infected with the disease so it is not contagious. The three quarantine areas of population restrictions in an area including the entrance area and its contents are suspected of being infected in such a way as to prevent the possibility of spreading the disease.

Seeing epidemiological studies in various regions that determine LSSR and the spread of regional quarantine option viruses are rational enough to be implemented as a response to public health emergencies because this virus has spread massively both with symptoms and without symptoms so that the action of stopping human mobility connected between regions is a determining factor to stop the transmission process. Regional quarantine determination must be supported by Covid-19 mitigation strategies and socioeconomic impacts that arise during quarantine. The author tries to formulate the strategic steps that become the key to the quarantine of the region as follows:

First, the Government must ensure that during quarantine all residents are at home by deploying police officers, the Indonesian National Armed Forces, Civil Service Unit and other related parties and ensure there is no interaction whatsoever for 14 days starting from the determination of quarantine. During the quarantine takes place for positive patients to be treated intensively in the hospital so as to get optimal medical help, the cure rate is believed to increase because doctors and health workers can treat it in a conducive situation, because in health the principle is known that patients must want to get good health care [15]. So far, hospitals cannot treat patients with health protocols because there are too many positive cases while there are few Covid-19 referral hospitals with limited health facilities and doctors plus patients coming in with chronic conditions causing very high mortality rates.

Second, regional quarantine measures must be carried out at the entrance through locking and monitoring of diseases and risk factors for people, goods, transportation equipment and the environment, prohibiting all activities except health services and food/logistical supply for quarantine needs. During the quarantine period the government needs to make massive tests using rapid tests and VCR methods as much as possible to map the spread of the virus throughout Indonesia so that local governments can examine the

position of their respective regions. With a mass test the government will know each infected person and immediately carry out isolation without having to wait for symptoms because it is very dangerous especially for those who are elderly and have a carrier disease. South Korea managed to find out the distribution of positive cases by using rapid tests at various traffic points of the population and immediately isolating those who were positively infected, this method is not easy to apply in Indonesia with a population much larger than South Korea but at least a massive rapid test needs to be done for DKI Jakarta, West Java and Banten, which are believed to be the epicenter of the virus in Indonesia.

Third, during the quarantine period the government is obliged to prepare a social safety net for the quarantined population in the form of fulfilling medical and food needs because this is an order in Article 8 of the Health Quarantine Act which stipulates that "Everyone has the right to obtain basic health services in accordance medical needs, food needs and other daily necessities during quarantine. " The current social safety net policy is realized in the form of direct cash assistance, assistance of nine basic necessities (basic necessities), pre-employment cards and others sourced from the central and regional governments. This policy has been very good only requires speed and accuracy in its distribution. The facts experienced by the weak economic community today they are afraid of the dangers of Covid-19 but they are more afraid of losing income and starving to death. This is what makes LSSR not effective.

The above conditions illustrate that LSSR cannot control transmission because it must be understood that LSSR does not stop the activities of the population but only limits it so that the potential spread still occurs plus the fear of loss of income keeps the community out of the house and does not protect themselves from virus threats, while the regional quarantine policy demanding that the government not only impose restrictions but stop interactions between people and goods in certain areas except health services and other activities that are very urgent by implementing strict procedures.

This form of regional quarantine has been applied in Wuhan City with 11 million people quarantined since January 23, 2020 with almost different standards in various countries the difference is the level of community awareness and compliance. Wuhan residents are aware of the danger of this pandemic, they obey the regional quarantine rules and all medical needs, food supplied by the government. Quarantine in Wuhan shows that there are no significant positive cases of infection. There are currently no positive cases in Wuhan, meaning they have made it past the peak of the pandemic. In contrast to quarantine in Lombardy, Italy, reported by the South China Morning Post, the awareness of Italian people is very low to keep themselves from seriously addressing quarantine so that the number of positive cases in a short period of time jumps up with a high mortality rate.

Starting from the experience of the two countries, Indonesia must learn that regional quarantine must be supported by a variety of strategic policy responses and high public awareness to be the key to successfully deciding the spread of Covid-19. The government can learn from historical experience, in the historical records of Indonesia, it was the first time to apply quarantine to the territory of the Dutch East Indies in 1911-1916. At that time the islands of Java and Sumatra were affected by the Pes outbreak centered in Malang and claimed 1911 lives, so that the Dutch East Indies government quarantined several areas on the islands of Java and Sumatra, the results of which were very significant were gradually decreasing and disappearing [16].

Historical records provide lessons that the Indonesian nation had experienced a difficult time due to infectious disease outbreaks and could get out by applying regional quarantine. Thus regional quarantine is a rational and measurable scenario to be applied with various health, economic, policy support, utilizing scientific and technological advances and discipline of the whole community believed to be able to bring Indonesia out of the Covid-19 pandemic in a short time.

IV. Conclusion

Law No. 6 of 2018 concerning Health Outrage. Provides several alternatives to deal with disease outbreaks. The Indonesian government adopted the LSSR policy to address covid 19 based on epidemiological considerations including the source of disease, the distribution and health status of the local community, the magnitude of the threat, resource readiness and socioeconomic considerations. To establish LSSR, the government sets two criteria that must be met by local governments, namely the number of cases and deaths due to disease increased and spread significantly and have epidemiological links with similar incidents in other regions or countries. LSSR policy brings widespread implication in all social sectors, all social activities are canceled, even activities in places of worship are abolished, the economic sector was hit hard with almost no economic growth in the second quarter, the tourism, investment, industry and trade sectors dropped dramatically resulting in a surge in unemployment and the state budget deficit, however, cannot suppress or stop Covid-19. Government policy in the form of regional quarantine is a rational option to overcome Covid-19 in public health emergencies in anticipation if LSSR is not effective in breaking the chain of transmission. The consequences of this policy are in accordance with the provisions of Law No. 6 Year 2018 on Health Quarantine, firstly, the government must work together with the security forces to ensure that all residents adhere to quarantine rules, namely to protect themselves at home. Positive patients are treated intensively in hospitals, increasing the capacity of hospitals and medical personnel as well as personal protective equipment that meets health standards. Second, locking the entrance to the area except health services and quarantine supply logistics needs followed by rapid tests and VCRs to map positive cases. Third, prepare a social safety net to cover the basic needs of the affected community. Suggestions from researchers to the Government of Indonesia are to prepare a regional quarantine scenario in anticipation if the LSSR carried out by the local government is unable to break the Covid-19 transmission chain by making a Government Regulation to regulate the procedures and implementation of regional quarantine and strategic steps in the form of resource readiness in the health sector and social safety net to meet the basic needs of the population during quarantine.

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