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Implementation of the right to health through vaccination

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ABSTRACT

Health is regarded as a basic human need Health is a fundamental right recognized in various international human rights instruments, such as the Universal Declaration of Human Rights and the International Covenant on Economic, Social and Cultural Rights. The World Health Organization (WHO) has declared COVID-19 a global public health pandemic on January 30, 2020. Based on the data collected, there are still members of the community who have not received the Covid-19 Booster vaccine even though it is urgently given as an antiviral. Therefore, as part of an effort to increase the coverage of vaccination, it is necessary to implement a Covid-19 public dedication as the fulfilment of the right to health. The method of community-based participatory research (Community Based Participatory Research, CBPR) is implemented. The results of the vaccination activities carried out at Tanjungpura University Faculty of Law can contribute to the vaccine coverage that exists in the community. As for the number of participants of the activity was 172 (one hundred seventy-two) people consisting of 117 (a hundred seventeen) students and 61 (sixty-one) the general public. In addition, there are students and members of the community who have not received the Covid-19 Booster Vaccine while the delivery is very urgent as an anti-virus, even there are those who have never received the vaccine at all.

INTRODUCTION

The right to health is a fundamental right recognized in various international human rights instruments, such as the Universal Declaration of

Human Rights and the International Covenant on Economic, Social and Cultural Rights. This right includes access to affordable and quality health services, as well as conditions that enable every individual to the highest attainable standard of health.

Health is regarded as a basic human necessity. However, there are some who argue that while health is not everything, without it everything is meaningless (Perwira in Japar et al., 2024). The right to health is the most important human rights. This is demonstrated in article 25 of the Constitution, which states that “every individual has the right to an adequate standard of living for his health, well-being, and for his family,” and article 28H of the 1945 U.S.C.U., which stated that “all citizens have the right of social security that supports the development of human dignity.” As a result, health is considered a human right (Latuharhary, 2021).

According to Siswati (2015) health is not just about being physically fit, but also includes mental, spiritual, and social so that one can be productive. Health is regarded as the primary capital for individuals and nations to thrive and survive. This is confirmed by Andayani Bs et al. (2021) which states that health has a central role in building a just, prosperous and prosperous society. Furthermore, Basuki (2020) argues that health is one of the most important components in the well-being of society that should be realized in accordance with the idealism of the Indonesian nation, as stated in the Opening of the UUD.

In Indonesia, the law is crucial to many things in society and the country, especially in the field of health. According to the Pancasila principles and the 1945 NRI UUD, health is considered a human right and an essential component of overall well-being (Hidayat, 2016). According to the Republic of Indonesia Act No. 17 of 2023 on Health, "any integrated and sustainable activity or set of activities aimed atining and improving public health through promotional, preventive, curative, rehabilitative, and/or palliative approaches" is a health effort (Saraswati et al., 2022). It is the responsibility of the State to ensure that the right to a healthy life for every individual, family, and society is fulfilled, including for the poor and disabled.

The State has an important role to play in meeting the basic needs of the people, especially in providing comprehensive health services. Health is one of the most important human rights, a right inherent in the reality and existence of man as a creature of the One God, and as a gift to be respected, cherished, and protected by the State, the law, the government, and every individual to preserve human dignity.

The principle of progressive realization states that states must fulfil and protect human rights, especially economic, social, and cultural rights. For example, the right to health does not guarantee everyone's right to access to health, but the state must establish and maintain a public health system that can essentially guarantee access to public health services.

Article 5 (3) of Act No. 39 of 1999 on Human Rights states that: “Everyone belonging to a vulnerable group of society is entitled to treatment and protection in accordance with his or her speciality.” Furthermore, the minimum core obligation number one to be ensured by States as contained in General

Comment No. 3 of the Committee on Ecological Rights is to guarantee access to non-discriminatory health facilities.

Health Rights Component: *first*, accessibility: Health services must be accessible to everyone without discrimination, regardless of location, financial resources, or the type of information they have. *Second,* availability: People must have access to adequate health services and medical facilities. *Third*, quality: Health services must have high standards, including medical equipment, trained medical personnel, and safe and effective medicines. *Fourth,* admission: Health services must take into account the culture, religion, and privacy of the patient.

The State has an obligation of conduct and an obligations of result. The obligation for action obliges the State to exercise its eco-friendly rights, while the obligations for results obliges it to certain results. Therefore, the results achieved from the implementation of State obligations are relevant to progressive realization. The right to health becomes all the more important when there are certain conditions that hinder health and unhealthy conditions can even be threatening.

World Health Organization (WHO) declares COVID-19 a global public health pandemic on January 30, 2020 (BBC News, 2020). Everyone's health base is directly affected by the COVID-19 pandemic. Health power and management of health facilities such as hospitals, puskesmas, clinics, and others are under pressure and concentrated to prepare themselves for Covid-19. COVID-19 spreads quickly through droplet from the mouth or nose (WHO, 2020). It forces the need to maintain physical and social distancing to encourage the general public to stay inside the house.

The various parties, especially the experts, were asked to find a cure that would be a vaccine. In the end, there's a variety of vaccines to fight the COVID-19 virus. It becomes an important question of how the vaccine can be accepted by the entire society. This means that the role of various parties in successful vaccination becomes crucial, including in the Faculty of Law of Tanjungpura University. Vaccination becomes vital even though the emergency phase of COVID-19 has passed, but as a form of public health rights, vaccine delivery becomes urgent at the booster vaccine level, Because Covid-19 has spread all over the world including in Indonesia from 2019 to 2021. The Covid-19 pandemic comes from a virus called corona virus disease 2019 that is caused by serve acute respiratory syndrome coronavirus2 (SARS-Cov2) and has a relatively rapid rate of transmission (Sari et al., 2022).

Vaccination is a government effort to prevent the spread of the Covid-19 virus, with the vaccine program expected to stimulate antibodies in humans so that they are immune to disease (Astini et al., 2023). In addition, as Dono ND quoted Edi et al. (2023) vaccination is intended to give specific immunity against a particular disease so that if one time the disease is exposed, it will only have mild symptoms. On the contrary, if not vaccinated, then will not have specific immune to the disease that should be prevented by the administration of the vaccine, with us knowing the benefits and side effects of the vaccination then we can be more cautious and not affected by the news out there that is very

exaggerated. COVID-19 is a virus that is easily transmitted, and is capable of infecting with mild symptoms to severe and known to have high mortality (Khuluq et al., 2022).

A booster vaccination is a COVID-19 vaccination after a person has received a full-dose primary vaccination aimed atining the level of immunity as well as extending the duration of protection (Fauzia et al., 2023). One factor that plays a role in suppressing the rate of cases of COVID-19 is the provision of vaccines to the general public. Therefore, the purpose of the activities of Public Devotion to the community is to vaccinate, as follows: *first*, reduce the pain and death due to COVID-19, *second*, group immunity (*herd immunity*) to prevent transmission and protect public health, *third*, protect and strengthen the health system comprehensively, *fourth*, maintain productivity and minimize the social and economic impact.

METHOD

The method of community-based participatory research (*Community Based Participatory Research, CBPR*) involves members of the community, environmental representatives, organizations and the commitment executive. The activities were organized with socialization material and interactive dialogue in the form of legislation and continued with the delivery of booster vaccines. The objective of this socialization implementation consists of faculty, education, students, and society in general. The event will take place on September 27, 2022, in the Law Faculty Hall of Tanjungpura University.

RESULT AND DISCUSSION

The realization and realization of the right to health must basically be based on the principle of non-discrimination, including for vulnerable groups. The framework is based on the minimum core obligation number one established by the United Nations Committee on Economic, Social and Cultural Rights to guarantee access to health facilities and goods and services without discrimination, especially for vulnerable and marginalized groups.

The right to health is a human right regulated and recognized by various national and international conventions. Some laws, such as the Universal Declaration of Human Rights article 25, the Economic, Social and Cultural Conventions article 12, the International Covenant on Civil and Political Rights articles 6 and 7, and the Constitution of the Republic of Indonesia 1945 article 28 H para. 1, guarantee the recognition of this right to health.

The fourth amendment states that "the government has a responsibility to provide health care facilities and public service facilities that meet the appropriate standards." It shows that the state not only provides effective health care directly, but also ensures that the facilities meet reliable standards, which are called "qualified".

Since recognition, there have been many different opinions about how the right to health can be enforced. However, this belief does not affect the definition of "health" itself. According to the Health Act, health is defined as "the condition that allows every individual to live socially and economically productively with

well-being in the physical, mental, and social dimensions." This definition is consistent with the principle that health is a human right, which means that every person, family, and society is entitled to the protection of their health. Therefore, the government is responsible for providing health protection (Isriawaty, 2015).

The right to health is "the right of every individual to enjoy the highest attainable standard of physical and mental health." But this definition does not cover the provision of health services. Furthermore, the article states that States parties to the Covenant are expected to take certain measures to ensure that such rights are fully realized. Some important measures must be taken to an optimal level of health for the entire population: (1) Preserving future generations, reducing birth deaths and infant mortality and ensuring healthy children in growth and development. (2) Building a healthy environment. Improving the health of the environment and industry as a whole. (3) Combating disease. Preventing, treating, and controlling infectious, endemic, and workplace diseases. (4) Facilitating access to health services. create an environment in which medical services and care are easily accessible and available to everyone when needed (Alston, 2016).

In the categories of social, economic, social, and cultural rights, the right to health falls within the category of civil and political rights. In the concept of human well-being, health and human rights are complementary approaches.

Important and related factors relate to the right to health in all its forms and levels. Certain state conditions will greatly affect proper implementation, namely: *first*, *availability, second, accessibility, third*, *adaptability and fourth*, *quality.*

Human rights mechanisms can be seen in three ways based on state responsibilities (Limbong et al., 2020), *First,* respect (obligation to respect): It is the obligation of the State not to interfere in the administration of its citizens when exercising their rights (Limbong et al., 2020), for example (UN Economic and Social Council CESCR General Comment No. 14): a) The obligation to respect equal access to available health services and not to prevent individuals or groups from accessing available services. b) The obligation to avoid activities that are detrimental to health, such as activities that damage the environment. In addition, the State has a duty of honor to avoid the ban on traditional preventive care, healing, and medicines, the marketing of unsafe drugs, and the coercive application of health care, except for basic exceptions for the treatment of mental illness or the prevention and control of communicable diseases.

Next*, second,* protect, (obligation to protect): It is the duty and responsibility of the State to act actively by interfering to protect its citizens' rights (Komnas HAM), for example (Kontras): a) The obligation to make additional regulations and measures to ensure that people have equal access to health services if provided by third parties. b) The obligation to take legislative and other measures to protect people from health violations by third parties.

Last, third, fulfill, (obligation to fulfill): It is the duty and responsibility of the State to act actively to ensure the realization of the rights of all its citizens (Limbong et al., 2020), for example: a) The obligation to adopt a national health policy and to provide an adequate share of the available health funds.b) The

duty to provide the necessary health services or to create conditions under which citizens have adequate and adequate access to health services, including health care services as well as decent drinking water and sanitation.

The ultimate obligation to provide does not mean that the state must provide all goods and services for free. However, it means that essential services such as housing, food, water, sanitation, health, and education must be available at an affordable price so that one has access to them and does not jeopardize one's ability to enjoy other rights, (for example, a lack of housing can compromise a person's capacity to enjoy his right to water, hygiene, and personal and family life) (AGE Platform Europe, 2017).

Based on this, it becomes important to implement the right to public health in the form of vaccination as a cure for a disease in this case of COVID-19 in the future. Following are socialization activities as well as interactive dialogue in the form of law enactment and continued with the delivery of booster vaccines at the Faculty of Law of the Universitas Tanjungpura, Pontianak, West Borneo.

Initial activities with the provision of vaccine-related material in order to provide insight into thinking and open understanding. These include the reasons for vaccination, the fulfilment of the right to health in the form of vaccines, the legal basis for vaccine as part of human rights. As for the material of the initial activity, as in Figure 1.

Figure 1. Materials of socialization

Further, related material was also presented how the role of students in efforts to accelerate vaccination. Among them the important role of students as part of the academic civilisation of the Faculty of Law of Tanjungpura University and related Tridharma College. It's shown in Figure 2 below.

Figure 2. Materials of socialization

In the vaccination activities, the students involved are also helping to smooth the process of vaccination activity that is ongoing, for example, also help with filing, registration and a number of other technical matters. This activity can be seen in Figure 3 below.

Figure 3. Student role

The ongoing series of activities can be carried out smoothly and successfully thanks to the support of all parties such as Faculty Leaders, Committees, Lecturers, Education Force, Students, Society, as well as the Police. As far as that matter is concerned, you can see Figure 4 below.

Figure 4. All team

The vaccination activities carried out at the Faculty of Law of Tanjungpura University can contribute to the vaccine coverage that exists in the community. That means it can raise the community that's got the first vaccine to the vaccine booster. The government has encouraged stakeholders to contribute to the Covid-19 vaccination programme so that the coverage of the population that has received the vaccine can be increased. This means that there are still low coverages of the community in terms of coverage from both geographical aspects, age groups, occupational groups, vulnerable groups and specific demographics. As for COVID-19 vaccination coverage in West Kalimantan, as shown in Figure 5 below.

CAKUPAN VAKSINASI COVID-19 KALIMANTAN BARAT BERDASARKAN KTP
SAMPAI DENGAN TANGGAL 5 JANUARI 2022

NO	KABUPATEN/ KOTA	SASARAN (ORANG)	VAKSINASI I		VAKSINASI II		PERSENTASE RATA-RATA
			JUMLAH	PERSENTASE	JUMLAH	PERSENTASE	
1	KAB. MELAWI	166.797	160.107	95,99	91.716	54,99	75,49
2	KAB. LANDAK	282.111	226.865	80,42	125.665	44,54	62,48
3	KAB. SEKADAU	151.502	116.786	77,09	71.716	47,34	62,21
4	KAB. SAMBAS	446.672	332.918	74,53	222.351	49,78	62,16
5	KOTA SINGKAWANG	164.965	110.811	67,17	91.553	55,50	61,34
6	KAB. BENGKAYANG	203.263	144.387	71,03	103.785	51,06	61,05
7	KOTA PONTIANAK	473.070	313.174	66,20	256.983	54,32	60,26
8	KAB. SANGGAU	350.360	254.320	72,59	158.627	45,28	58,93
9	KAB. KAPUAS HULU	180.327	133.019	73,77	68.185	37,81	55,79
10	KAB. MEMPAWAH	217.123	130.576	60,14	91.594	42,19	51,16
11	KAB. KAYONG UTARA	90.570	58.192	64,25	31.353	34,62	49,43
12	KAB. KUBU RAYA	432.686	262.943	60,77	163.094	37,69	49,23
13	KAB. KETAPANG	414.520	234.931	56,68	138.499	33,41	45,04
14	KAB. SINTANG	298.511	165.621	55,48	95.717	32,06	43,77
	TOTAL	3.872.477	2.644.650	68,29	1.710.838	44,18	56,24

SUMBER : KPC PEN 05 JANUARI 2022, PUKUL 09.00 WIB
DINKES PROVINSI KALIMANTAN BARAT

Figure 5. Vaccination coverage

As for the outcome of the COVID-19 Vaccination Community Commitment activities carried out at the Tanjungpura University Law Faculty, COVID-19 vaccine coverage has been contributed. There were a hundred seventy-two of them, and one hundred seventeen of them; and the rest of the people were sixty-one. It can be seen on the diagram (Figure 6) below.

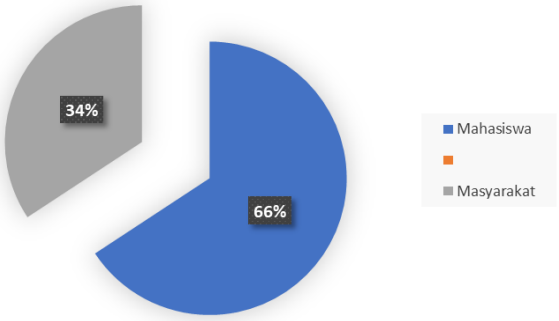

Figure 6. Number of vaccine participants

CONCLUSION

Based on the data collected that, the number of participants in the activity was 172 (one hundred seventy-two) people consisting of 117 (a hundred seventeen) students and 61 (sixty-one) the general public. If given a

percentage, then about 66 (sixty-six) percent of vaccination participants were students, while 34 (thirty-four) percent were the general public. Besides, there are a number of teachers and educational forces who also follow vaccination activities.

Through the activities carried out, it is known that there are students and members of the community who have not received the COVID-19 Booster Vaccine while the administration is very urgent as an antiviral, even there are those who have never received the vaccine at all, as evidenced by some participants who were present to get the first-stage vaccine.

Therefore, the continued socialization can focus on the role of students to engage in disseminating information related to the importance of the COVID-19 vaccine to the general public in the hope of increasing public participation to obtain the vaccine. In addition, the activities can be carried out outside the Faculty on the activities of devotion to the next community so that they can more reach the wider community, for example around the district that borders directly with the town of Pontianak with close travel distances such as Kubu Raya district.

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