

## Legal Politics of Regional Quarantine during the Covid-19 Pandemic with the Approach to Implementing Community Activities Restrictions (PPKM) Level 1-4

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### Abstract

*Politics of regional quarantine law with PPKM approach based on Level 1- 4 as an effort by the Government to suppress the increase in positive cases of the Coronavirus (Covid-19). The policy is decided, of course, by considering health, economic aspects, and social dynamics. Determine the status of the district/city level of the pandemic situation. It is based on indicators regarding the adjustment of public health efforts and social efforts in dealing with the pandemic, which was adapted from the recommendations of the World Health Organization (WHO).*

### Keywords

legal politics; regional quarantine; PPKM level 1-4; covid-19 pandemic



## I. Introduction

After witnessing that the Indonesian state is not doing well, hundreds of thousands and even millions of people are fighting against the suffering of an epidemic that is not yet known when it will end. The Coronavirus was first detected at the end of December 2019. It immediately became a disease outbreak that caused 4000 people in Wuhan, China, to die from an episode of a virus known as Covid-19. Due to this incident, the World Health Organization (WHO) has declared this virus outbreak a global pandemic. This WHO decision is based on the acceleration of the spread of a virus that knows no borders across nations/countries, a virus that does not recognize gender, age, profession, and social status.

In Indonesia, at first, it was very optimistic that it would not be affected by the spread of Covid-19, but in the end, it was also powerless to overcome the vicious attack on its space. In mid-March 2020, it was announced that there were two positive Covid-19 patients. Furthermore, the spread of this virus is increasingly massive, causing many fatalities, including fatalities from medical officers on the front line in the fight against Covid-19.

Covid 19 pandemic caused all efforts not to be as maximal as expected (Sihombing and Nasib, 2020). The outbreak of this virus has an impact of a nation and Globally (Ningrum et al, 2020). The presence of Covid-19 as a pandemic certainly has an economic, social and psychological impact on society (Saleh and Mujahiddin, 2020).

The term social Distancing is seen as a distance that eliminates physical distance (physical Distancing) and closes social space. The use of this term has drawn controversy among experts and social practitioners. WHO reacted to the rapid spread of Covid-19 by formulating social Distancing, it is namely maintaining social distance in public relations, at least to contain the space of Covid-19 between members of the community. The consequences of using the term social Distancing are widespread and widening in the scale of social relationships involving those mentally isolated by the distance. Not only physical

distance but also social life that has long developed in society must be closed by social space.

WHO then revised the term Social Distancing into Physical Distancing, namely physical distance that must be maintained when dealing with other people. This term is used to eliminate or avoid the mindset of limiting social space in social life. Physical Distancing does not eliminate the community's social area running and growth. The use of this term is acceptable to social experts and practitioners. However, people have already used the term social Distancing as an effort to prevent the spread of Covid-19.

In addition to implementing Social Distancing, the Government has also taken a policy of limiting community activities to suppress the spread of Covid-19, starting by implementing the PSBB, PPKM, Micro PPKM, and Emergency PPKM procedures to PPKM levels 1-4. These restrictions are carried out to overcome the spread of Covid-19 with various risks for people in Indonesia. With such government policies related to regional quarantine during the Covid-19 pandemic, the Government's legal politics is motivated. The Government considers the legal politics of regional quarantine with various designations to avoid mistakes in implementing policies to handle the spread of Covid-19.

Based on the background explanation above, the authors are interested in analyzing the legal politics of regional quarantine during the Covid-19 pandemic, especially when the Indonesian Government makes policies with the PPKM approach based on Levels 1-4. Through writing this law, it is hoped that the author can describe the legal politics behind the use or application of PPKM based on Levels 1-4 in the Government's efforts to deal with the spread of Covid-19. The policy is decided, of course, by considering health, economic aspects, and social dynamics.

### **Problem Formulation**

The legal issues to be studied in writing this law are:

What is the Politics of Regional Quarantine Law During the Covid 19 Pandemic With the Approach to Enforcement of Community Activity Restrictions (PPKM) based on Levels 1-4?

## **II. Research Method**

This research is legal research using a statutory approach. The legal materials used are primary, secondary, and tertiary, analyzed using an analytical description.

## **III. Results and Discussion**

### **3.1 COVID-19**

Pandemic is a global disease outbreak. According to *the World Health Organization* (WHO), a pandemic is declared when a new disease spreads beyond limits. A pandemic is a condition that indicates the spread of an unknown illness that extends to several countries. According to the KBBI, the term pandemic is interpreted as an epidemic that spreads simultaneously everywhere, covering a wide geographical area. In the most classic sense, when an epidemic spreads to several countries or regions of the world. A pandemic is generally classified as an epidemic in which the disease spreads rapidly from one area to a particular site. Disease outbreaks that fall into the pandemic category are infectious diseases and have a continuous line of infection. So, if a case occurs in several countries other than the country of origin, it will still be classified as a pandemic.

Based on epidemiology, disease patterns are determined with several levels, namely:

- a. Endemic;  
The course of the disease is at the same level. Prevalence (number of sick people) can occur in one area.
- b. Hyperendemic;  
Indicates the presence of an infectious disease with a high incidence rate and usually exceeds the average prevalence rate in one group.
- c. Holoendemic;  
Describes a disease that occurs in a large population and targets children.
- d. Epidemic  
An outbreak or emergence of a particular disease originating from a single source. Epidemic occurs when new cases exceed the prevalence of a disease. Extraordinary Events (KLB) can also be said to be an epidemic.
- e. Pandemic;  
An epidemic spreads widely across a country, continent, or large population, possibly the entire world.

There are many examples in the history of pandemics around the world. The following is the history of pandemics in the world:

1. Black Death;  
One of the most famous pandemics in human history is the Black Death. The global epidemic of bubonic plague was between 1346 and 1353. It was caused by the bacterium *Yersinia pestis* and caused the death of somewhere between 30 percent and 60 percent of the European population during the middle of the 14th century.
2. Cholera Pandemic;  
This pandemic occurred in 1817 and originated in Russia, where one million people died. This bacterium was transmitted to the British army, who brought it to India and spread worldwide.
3. Russian Flu;  
The Russian flu of 1889 is considered the first significant flu pandemic. It likely started in Siberia and Kazakhstan before heading to Europe and across the Atlantic Ocean to North America and Africa. By 1890, an estimated 360,000 people had died from the Russian flu.
4. HIV;  
HIV is the virus that causes AIDS, possibly evolving from a chimpanzee virus that moved to humans in West Africa in the 1920s. The virus spread worldwide, and HIV/AIDS became a pandemic at the end of the 20th century. But the treatment that continues to develop until now allows people with this disease to have a long and average life span.
5. Spanish Flu;  
The deadliest modern flu pandemic in history was the Spanish flu of 1918. This virus infected about a third of the world's population and caused 2-50 million deaths. The virus did not originate in Spain, but the country was the first to report the flu outbreak.
6. Asian Flu;  
Then the Asian flu pandemic in 1957-1958 was triggered by a new type of influenza A (H2N2) virus that emerged in East Asia. This virus killed about 1.1 million people worldwide. Hong Kong flu The 1968 Hong Kong flu pandemic was caused by a new strain of the H3N2 virus that emerged in Southeast Asia. The Hong Kong flu killed

about 1 million people worldwide. Swine flu the 2009–2010 H1N1 swine flu pandemic was caused by a new strain of the virus that causes the Spanish flu.

7. Swine Flu;

About 700 million to 1.4 billion people were infected, in absolute value compared to the Spanish flu.

8. Seasonal Flu;

Seasonal flu is a worldwide burden of disease. Even though the vaccine is effective, deaths from the flu still occur. WHO estimates that seasonal flu typically causes 290,000 to 650,000 deaths yearly.

The most recent pandemic is the COVID-19 pandemic. A COVID-19 pandemic is an event that spreads the Coronavirus Disease 2019 (English: *Coronavirus disease 2019*, abbreviated as COVID-19) worldwide in all Countries. A new type of Coronavirus causes this disease called SARS-CoV-2. The COVID-19 outbreak was first detected in Wuhan City, Hubei Province, China, on December 1, 2019, and was designated a pandemic by the World Health Organization (WHO) on March 11, 2020. As of November 14, 2020, more than 53,281,350 cases have been reported. It has been reported in more than 219 countries and territories worldwide, resulting in more than 1,301,021 people dying and more than 34,394,214 people recovering.

### 3.2 Legal Politics

Legal politics consists of the words "politics" and "law." According to Sudarto, the term politics is used with various meanings, namely: (1) the word *politiek* in Dutch means something related to the state; (2) means to talk about state issues or those related to the state; (3) another meaning of politics is a policy which is a synonym for *policy*. On that basis, Sudarto argues that legal politics is a state policy through authorized bodies to implement authorized regulations to implement the desired rules, which are expected to be used to excrete what is contained in society and achieve what is aspired to Aspire.

The relationship between politics and law, Mahfud MD argues that:

Law is a product of politics. Law is seen as a *dependent variable* (influenced variable) and politics as *an independent variable* (influential variable). With such an assumption, legal politics is a legal policy that will be or has been implemented nationally by the Government; It also includes an understanding of how politics influences the law by looking at the configuration of power behind the Act and enforcement of the law. Here the law cannot only be seen as articles that are imperative or mandatory but must be viewed as a sub-system which, in reality, is not impossible to be determined by politics, both in the formulation of the material and articles in their implementation and enforcement.

According to Solly Lubis, Legal politics is: "a political policy that determines what legal regulations should apply to regulate various matters of social and state life." Thus it can be concluded that legal politics is an effort to realize laws and regulations based on the circumstances and situations at a time and in the future. The formation of rules is a critical social and political process and has vast influence because it will shape and regulate or control society. This law is used by the authorities to achieve and realize specific goals. This means the Act has two functions: (1) a function to express values; and (2) an instrumental function.

### 3.3 Legal Politics of Application of Regional Quarantine During the Covid 19 Pandemic

Mahfud MD interprets legal politics as *legal policy* or official and legal policy lines regarding laws that will be enforced by making new laws or changing old rules to achieve state goals. In determining the laws that have been and will be enacted, legal politics gives legislative authority to state administrators while still taking into account the goals of the state as contained in the 4th paragraph of the 1945 Constitution. This includes legal politics that the Government must implement in handling the Covid-19 pandemic, whether have met the country's goals or not.

To prevent the spread of Covid-19, the Government of Indonesia has made legal politics by issuing various legal products, including:

- a. Law Number 2 of 2020 concerning Stipulation of Perppu 1 of 2020 concerning State Financial Policy and Financial System Stability for Handling the Covid-19 Pandemic and in the Context of Threats That Endanger the National Economy or Financial System Stability. The issuance of the Perppu is a legal policy taken by the Government to stabilize state finances and prevent the spread of the Covid-19 outbreak.
- b. Government Regulation Number 21 of 2020 concerning Large-Scale Social Restrictions in the Context of Accelerating Handling of *Corona Virus Disease 2019* (Covid-19). PSBB is a restriction on specific activities of a resident in an area or area suspected of being infected with Covid-19 to prevent a wider spread as determined by the Minister of Health or by the Regional Government based on the approval of the Minister of Health. With the implementation of the PSBB, activities such as schools and workplaces are closed, religious activities are carried out in their homes, and activities are restricted in public places. Article 3 of the Government Regulation provides criteria for an area that can apply PSBB, namely (1) The number of cases and the number of deaths due to the disease increases and spreads significantly and rapidly to several areas, (2) There is an epidemiological link with similar events in other regions.
- c. Decree of the President of the Republic of Indonesia Number 11 of 2020 concerning the Determination of a Public Health Emergency of *Corona Virus Disease 2019* (Covid-19). There are two critical points in the Presidential Decree, namely the first to establish Covid-19 as a pandemic that causes a public health emergency. Second, to show a public health emergency due to Covid-19, it is mandatory to take countermeasures to the applicable laws and regulations.

In addition to making legal politics by issuing various legal products, the Government also makes legal politics related to implementing regional quarantine during the Covid-19 pandemic to prevent the spread of Covid-19 in Indonesia. As for the legal politics of implementing regional quarantine that the Government has implemented during the Covid-19 pandemic, namely:

1. Application of Regional Quarantine with the PSBB Approach;

The Government decided to implement large-scale social restrictions (PSBB), which were officially announced on March 31, 2020. The PSBB policy was based on the public health emergency status due to the Coronavirus, which refers to Law Number 6 of 2018 concerning Health Quarantine. After announcing the adoption of the PSBB policy, the Government issued Government Regulation Number 21 of 2021 as the implementing regulation. The technical implementation of PSBB is regulated through the Regulation of the Minister of Health (Permenkes) RI Number 9 of 2020 concerning Guidelines for Large-Scale Social Restrictions in the Context of Accelerating Handling of *Corona Virus Disease 2019* (Covid-19).

As for the understanding, PSBB is a restriction on specific activities of residents in an area suspected of being infected with Covid-19 in such a way as to prevent the possibility of its spread. This step is taken to avoid the space of public health emergencies among people in a particular area. However, when the PSBB was implemented, not all regions implemented the PSBB policy.

The policy mechanism, starting with the governor, regent, or mayor, proposes PSBB in their area by the stipulated conditions. Then, the minister determines the approval. The PSBB is carried out for two weeks but can be extended if necessary. Implementing quarantine with the PSBB concept approach is more stringent because several activities are limited. They cover school holidays and workplaces, stopping religious activities in places of worship, restrictions on activities in public areas or facilities, restrictions on socio-cultural activities, and restrictions on transportation modes.

Based on the explanation above, it can be concluded that the legal politics of implementing regional quarantine with the PSBB approach is carried out based on:

- a. Epidemiological considerations;
- b. The magnitude of the threat to effectiveness;
- c. Resource support;
- d. Operational technical;
- e. Economic considerations;
- f. Social considerations;
- g. Cultural considerations; and
- h. security considerations.

## 2. Application of Regional Quarantine with Micro PPKM Approach;

The Government has taken policy steps to impose restrictions on micro-based community activities (PPKM Mikro) in all provinces in Indonesia starting on February 9, 2021. The regional quarantine policy with the Micro PPKM approach is based on the Instruction of the Minister of Home Affairs (Inmendagri) Number 03 of 2021. Micro PPKM is a PPKM approach micro-based organization that regulates up to the Neighborhood Association (RT)/Rukun Warga (RW) level, which has the potential to cause Covid-19 transmission. In its implementation, restrictions on community activities must consider the development of regional risk zoning in each region.

Based on the explanation above, it can be concluded that the legal politics of implementing regional quarantine with the Micro PPKM approach is based on reasons to prevent the spread of Covid-19 based on spikes in cases in each region in Indonesia (development of risk zoning). This means that the implementation of this policy limits community activities at the micro-level. PPKM is carried out per region experiencing a high spike in Covid-19 cases. The rate of spread of points is seen at the RW/RT level of the number of houses exposed to the coronavirus pandemic.

## 3. Application of Regional Quarantine with Emergency PPKM Approach;

After the Micro PPKM, the policy of quarantine law decided by the next Government is the implementation of Emergency PPKM on July 3-20, 2021, which is based on the Instruction of the Minister of Home Affairs Number 19 of 2021. Emergency PPKM includes restrictions on community activities that are more stringent than what has been applied. Initially, the two-week policy was applied to regencies/cities in Java and Bali. After that, however, the areas that implemented Emergency PPKM were added to 15 regions outside Java-Bali.

The rules applied during emergency PPKM after revision include:

- a. 100% *Work from Home* for the nonessential sector;
- b. All teaching and learning activities are carried out online/online;
- c. For essential sectors, a maximum of 50% of *Work from Office* (WFO) staff is applied with a health protocol, and for critical sectors, a maximum of 100% of WFO staff is allowed with a health protocol. The coverage of important sectors is finance and banking, capital markets, payment systems, information technology and communications, non-COVID-19 quarantine handling hotels, and export orientation industries. Meanwhile, critical sector coverage is energy, health, security, logistics and transportation, food, beverage, and beverage industry its supports, petrochemicals, cement, vital national objects, disaster management, national strategic projects, construction, essential utilities (such as electricity and water), as well as industries that fulfill basic daily needs of the community;
- d. For supermarkets, traditional markets, grocery stores, and supermarkets that sell daily necessities, operating hours are limited to 20.00 local time with a visitor capacity of 50% (fifty percent);
- e. Pharmacies and drug stores can be fully open for 24 hours;
- f. Shopping centers/malls/trade centers are closed;
- g. The implementation of eating/drinking activities in public places (restaurants, restaurants, cafes, street vendors, hawker stalls) both in separate locations and those located in shopping centers/malls only accept *delivery* or *take away* and do not accept food on the spot (*dine-in*);
- h. Implementing construction activities (construction sites and project sites) operates 100% (one hundred percent) by implementing more stringent Health protocols.

### **3.4 Legal Politics of Regional Quarantine Application with PPKM Approach Based on Levels 1-4**

Determine the status of the district/city level of the pandemic situation; it is based on indicators on the adjustment of public health efforts and social efforts in dealing with the pandemic, which was adapted from the recommendations of the World Health Organization (WHO). The Government uses various terms in setting rules for coping with Covid-19. Most recently, the Government used the time Enforcement of Tightening Community Activities (PPKM) at a level. Use of this term to replace the word Emergency PPKM.

A spokesperson for the Covid-19 Vaccine Ministry of Health, dr. Siti Nadia Tarmizi explained, "The level assigned to an area will describe the adequacy of the response capacity of the health system. Such as the capacity of testing, tracing, and treatment relative to the transmission of virus in the area." Referring to the WHO decision, the following is the definition of PPKM Level 4 and the difference up to level 1 and the assessment of a Covid-19 case in an area:

- a. Level 1 (Low Incident);

At this level, the number of positive confirmed cases of Covid-19 is less than 20 people per 100,000 population per week. The incidence of hospitalization in hospitals is also less than five people per 100,000 population. Then the death rate is less than one person per 100,000 population.

- b. Level 2 (Moderate Incident);

The number of positive confirmed cases of Covid-19 is between 20 and less than 50 people per 100,000 population per week. The hospital's hospitalization incidence is between five and less than ten people per 100,000 population per week. The death rate due to Covid-19 is less than two people per 100,000 population.

- c. Level 3 (High Incident);  
Level 3 shows that an area has several positive confirmed cases of Covid-19 between 50-100 people per 100,000 population per week. The incidence of hospitalization in hospitals is 10-30 people per 100 thousand inhabitants per week. The death rate due to Covid-19 is between two and five people per 100,000 population.
- d. Level 4 (Very High Incident);  
WHO states that the level 4 category is specifically for an area with several positive confirmed cases of Covid-19 of more than 150 people per 100,000 population per week. The hospital's hospitalization incidence is more than 30 people per 100,000 population per week. And the death rate due to Covid-19 is more than five people per 100,000 population in the area.

There are two different rules related to PPKM level 4, namely through the Instruction of the Minister of Home Affairs (Inmendagri) No. 39 of 2021 and the Instruction of the Minister of Home Affairs (Inmendagri) No. 40 of 2021, which can be described as follows:

1. PPKM rules according to the Ministry of Home Affairs 39 of 2021;  
PPKM level 4 regulations in the Java-Bali region contain several things, namely:
  - a) Face-to-face Learning (PTM) is still prohibited, meaning that the teaching-learning process must still be carried out remotely (online/online);
  - b) Supermarkets, supermarkets that sell daily necessities can operate until 21.00 local time with a capacity of 50 percent of visitors;
  - c) The people's market operates at 50 percent capacity and operating hours until 17.00 local time;
  - d) Street vendors, grocery stores, voucher agents/outlets, *barbershops*/barbershops, *laundry*, hawkers, small workshops, vehicle washers, and others are allowed to open until 21.00 local time.
  - e) Food stalls and water may be open until 20.00 local time. Maximum diners eat at the place of 3 people with a full meal time of 30 minutes;
  - f) Restaurants/cafes located in malls or closed locations only accept *delivery*. Meanwhile, open areas are allowed to be available until 20.00 local time with a maximum capacity of 25 percent, one table for a maximum of 2 people, and a full meal time of 30 minutes;
  - g) Malls and trading centers are temporarily closed;
  - h) In Bali, the activities of malls and trade centers were piloted with 50 percent capacity from 10:00 to 21:00 local time;
  - i) Places of worship are opened with a maximum of 50 percent capacity;
  - j) Public facilities for art activities and sports are still temporarily closed.
2. PPKM Rules According to Inmendagri 40 of 2021;  
In implementing PPKM level 4 outside Java-Bali, the following rules are applied:
  - a) Face-to-face learning (PTM) is still prohibited, meaning the teaching-learning process must still be carried out remotely (online/online).
  - b) Supermarkets, supermarkets that sell daily necessities can operate until 20.00 local time with a capacity of 50 percent of visitors;
  - c) markets, street vendors, grocery stores, voucher agents/outlets, *barbershops*/barbershops, *laundry*, hawkers, small workshops, vehicle washes, and others of the like are allowed to open according to health protocols and regulations in each region;
  - d) Food stalls and water may open with health protocols;



- e) Restaurants/restaurants and cafes can serve *dine-in* until 20.00 local time, with 25 percent capacity for visitors with two people per table;
- f) Malls and trade centers are opened with 50 percent capacity from 10:00 to 20:00 local time by implementing the PeduliLindung application;
- g) Places of worship are opened with a maximum of 25 percent capacity;
- h) Public facilities for art activities and sports are allowed to operate at 25 percent capacity;
- i) Wedding receptions and celebrations are permitted at a maximum of 25 percent capacity and do not provide on-site dining.

Furthermore, how do we determine the level of each region in Indonesia? A spokesperson for the Covid-19 Vaccine Ministry of Health, dr. Siti Nadia Tarmizi explained that:

1. An assessment to determine the level of the situation of an area by comparing two things. Namely, the transmission level with the response capacity of the health system in the region. The measurement of the transmission rate of the Coronavirus is also divided into seven groups. Starting from no transmission, imported or sporadic cases, clustered cases, and community transmission;
2. Community transmission is further elaborated into four levels, namely level one to level four community transmission. In determining the level of community transmission, the Ministry of Health uses three leading indicators, namely: the number of cases, the number of hospitalized patients, and the number of Covid-19 deaths calculated per 100,000 population per week;
3. The Government has set threshold values for each indicator to be able to categorize these indicators into certain transmission levels. For example, confirmed cases under 20/per 100,000 population/week are classified as level one community transmission. Meanwhile, deaths above 5/100,000 population/week are classified as level four community transmission;
4. Then conclusions about the community transmission rate are drawn based on the indicator with the highest transmission rate.

#### **IV. Conclusion**

From the explanation above, it can be concluded that the legal politics of regional quarantine with the PPKM approach is based on Levels 1-4 as the Government's effort to suppress the increase in positive cases of the Coronavirus (Covid-19). The policy is decided, of course, by considering health, economic aspects, and social dynamics. There are some changes in regional quarantine with the PPKM Level 1-4 approach, especially related to loosening small businesses such as street vendors. PPKM Level 4 means that it is almost the same as emergency PPKM, which is currently no longer used. The Government still prohibits the operation of shopping centers or malls. However, the Government allows access to *delivery* or *take away* at restaurants and supermarkets that serve critical matters by observing the provisions.

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