



CERTIFICATE

This Certificate is Presented To

Yovita Indrayati,SH.,M.Hum

as

Participant

Health Law International Online Seminar

COVID-19 VACCINATION:

HEALTH LAW, JUSTICE & HUMAN RIGHT PERSPECTIVES

Master of Health Law XXXII & XXXIII Soegijapranata Catholic University

Dean of
Faculty of Law and Communication



Dr. Marcella Elwina Simajuntak,
SH., CN., MHum

Chairman of
Committee Health Law Seminar



**Health Law
International Online Seminar
Magister Hukum Kesehatan
Angkatan XXXII & XXXIII**

Ns. Fajar Widhi Atmojo, S.Kep

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NO	ACCREDITATION NO	
1	IDI	Accreditation IDI No. 207/IDI/Wil-Jateng/SKP/V/2021 Participant 2 SKP Speaker 4 SKP Moderator 2 SKP Committee 1 SKP
2	PPNI	Accreditation PPNI No. 0622/DPP.PPNI/SK/K.S/V/2021 Participant 2 SKP Speaker 5 SKP Moderator 4 SKP Committee 4 SKP
3	IBI	Accreditation IBI No. 2891/PPIBI/VI/2021 Participant 3 SKP Speaker 4 SKP Moderator 3 SKP Committee 3 SKP
4	IAI	Accreditation IAI No. SKP.067/PP.IAI/1822/V/2020 Participant 5 SKP Speaker 4.5 SKP Moderator 1.5 SKP Committee 1.5 SKP Poster/Oral 3 SKP
5	IPAI	Accreditation IPAI No. 0070/DPP-IPAI/P2KB/SKP/IV/2021 Participant 4 SKP Speaker 3 SKP Moderator 2 SKP
6	HAKTI	Accreditation HAKTI No. 01.029/DPP.HAKTI/V/2021 Participant 3 SKP Speaker 3 SKP Committee 1 SKP



Health Law International Online Seminar **COVID-19 VACCINATION:**

HEALTH LAW, JUSTICE & HUMAN RIGHT PERSPECTIVES
MASTER OF HEALTH LAW XXXII & XXXIII SOEJIJAPRANTA CATHOLIC UNIVERSITY

**Call For
Paper**

INCLUDE SKP

TOPIC COVERAGE

- Emerging clinical data and impact for COVID-19 approval vaccines
- Challenges in COVID-19 vaccine implementation
- COVID-19 vaccination implementation and roll out in Indonesia and several countries
- Pre and post COVID-19 vaccination situation regionally
- Fairness, transparency and equity on COVID-19 vaccine distribution
- Fulfilment of citizen's rights in relation to COVID-19 vaccination

Saturday, 5th of June 2021
09.00 AM-03.00 PM

**Click Here
for Registration**



Registration Link : bit.ly/HEALTHLAWINTERNATIONAL



MC

dr. G. Ayu Amelinda
Hanjani



MODERATOR

dr. Hendry Luis

KEYNOTE SPEAKERS



WHO

Dr. Vinod Kumar Bura, MBBS., MPH
- Medical Officer at World Health Organization



Ministry of Health Indonesia

Dr. Siti Nadia Tarmidzi, M.Epid
- General Director of Disease Prevention & Control
of Ministry of Health Indonesia

INVITED SPEAKERS



India

Zafar Mahfooz Nomani, M.D., LL.M., Ph.D
- Aligarh Muslim University, India



Philippines

Dr. Chris Sorongon
- De La Salle University, Bicolod, Philippines



Australia

Prof. Gulam Khandaker, MBBS, MPH, DCH,PhD, FAFPHM
- Director of Public Health/Public Health Physician
- Director of Medical Research Central Queensland
Hospital and Health Service



Indonesia

Dr. Y. Budi Sarwo, SH., MH
- Lecturer at Soeji Pranata Catholic University



United Kingdom

Dr. Keerti Gedela, BSc (Hons), MBBS, FRCP (MRCP), MSc,
DTM&H, Dip HIV, Dip GUM, DFSRH *
- Hon. senior lecturer and researcher from Imperial
College London
- NHS Consultant Physician at Chelsea Westminster
Teaching Hospital as an infectious diseases and HIV
physician

***To Be Confirmed**



Health Law International Online Seminar

COVID-19 VACCINATION:

HEALTH LAW, JUSTICE & HUMAN RIGHT PERSPECTIVES

MASTER OF HEALTH LAW XXXII & XXXIII SOEGIJAPRANTA CATHOLIC UNIVERSITY

TIME (WIB)	SCHEDULE	SPEAKER
09.00 - 09.30	Opening Ceremony	Chairman Dean of Law and Communication Faculty Soegijapranata Catholic University
09.30 - 09.45	Break	
09.45 - 10.25	1 st Session – Keynote Speakers	
	1. WHO 2. MoH RI	Dr. Vinod Kumar Bura, MBBS., MPH Dr. Siti Nadia, M.Epid
10.25 - 10.45	Q & A	
10.45 - 12.25	2 nd Session – Invited Speaker	
	1. India 2. Philippines 3. Australia 4. Indonesia 5. UK	Zafar Mahfooz Nomanj, M.D., LL.M., Ph.D Dr. Chris Sorongon Prof. Gulam Khandaker, MBBS, MPH, DCH,PhD, FAFPHM Dr. Y. Budi Sarwo, SH., MH Dr. Keerti Gedela, BSc (Hons), MBBS, FRCP (MRCP), MSc, DTM&H, Dip HIV, Dip GUM, DFSRH *
12.25 - 13.00	Panel Discussion	
13.00 - 13.30	Break	
13.30 - 14.45	Paper presentation and Discussion	
14.45 - 15.00	Closing Ceremony	Dean of Law and Communication Faculty Soegijapranata Catholic University

CONTRIBUTION

Local Presenter

- Student: 75,000 IDR
- Non-Student: 100,000 IDR
- Paper Presentation: 300,000 IDR

International Presenter

- Student: 10 USD
- Non-Student: 15 USD
- Paper Presentation: 25 USD

PAYMENT INFORMATION

Bank Name : BNI
Branch : Melawai Raya
Account No : 0866 3343 25
Account Name : Intan Suherman
Swift Code : BNINIDJAKBY



Information :
+62 821-1758-1979 (Sunita) | +62 813-9207-9079 (Hiacinta)

via  zoom

Paper Submission Guideline

ORAL PAPER PRESENTATION

INTRODUCTION

On behalf of organizing committees and Master of Health Law Soegijapranata Catholic University, we would like to invite you to submit paper and participate in oral paper presentation in our seminar "COVID-19 Vaccine: Health Law, Justice and Human Right Perspective".

THEME

The topic and scope of the paper can be from all subjects and disciplines within health law studies and issues and not necessary on COVID-19 or COVID-19 Vaccination related issues. Recent and updated issues around health law and health policy are most welcomed as well as original research manuscript.

LIVE PRESENTATION

Presenter is participant to the seminar in-person. Presenter must also submit Powerpoint presentation slides. Each presenter will be given 5 minutes for presentation followed by brief Q&A. further briefing and information on the presentation schedule will be provided later prior to the seminar commencement date.

LANGUAGE

Manuscript can be in Indonesian or English

SUBMISSION EMAIL ADDRESS

unikahukumkesehatan@gmail.com

ORAL PAPER PRESENTATION FEE

- Local Presenter 300 IDR
- International Presenter 25 USD

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CONTACT PERSON

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**Submission
Deadline
31st May 2021**

**Click Here
for Download Paper Guidelines 2021**



Paper Guidelines Link : <http://bit.ly/paperguidelines2021>



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On Distributive Justice in the Vaccination Program for Indigenous Peoples in Indonesia

by

**Yovita Indrayati, SH., M.Hum.
Drs. Hermawan Pancasiwi, BA., M.Si**



Background

- **Vaccine is reserved for every citizen, whether they are urban or rural communities and even indigenous peoples, those who live isolated.**
- **Covid-19 is a pandemic that hit all human societies, breaking through national, regional, socio-economic strata, and other boundaries.**
- **This means that everyone has the potential to be infected by the disease.**



- **The State has made various efforts to fight the Covid-19 pandemic and has even done vaccination program since January 2021 to create herd immunity.**
- **Vaccine recipients are targeted at 181 million or 70 percent of the entire population for the creation of herd immunity.**
- **The fact, however, is that the number of vaccines available is very limited so that there should be a strict regulation in implementing the program.**

Fact



- **In a situation like this, usually those in big cities and close to the Central Government will be prioritized while those on the outskirts, including indigenous peoples, will be in a low priority scale.**
- **The problem is the extent to which the State has applied the principle of distributive justice to indigenous peoples in vaccination programs in order to create healthy communities.**

Fact



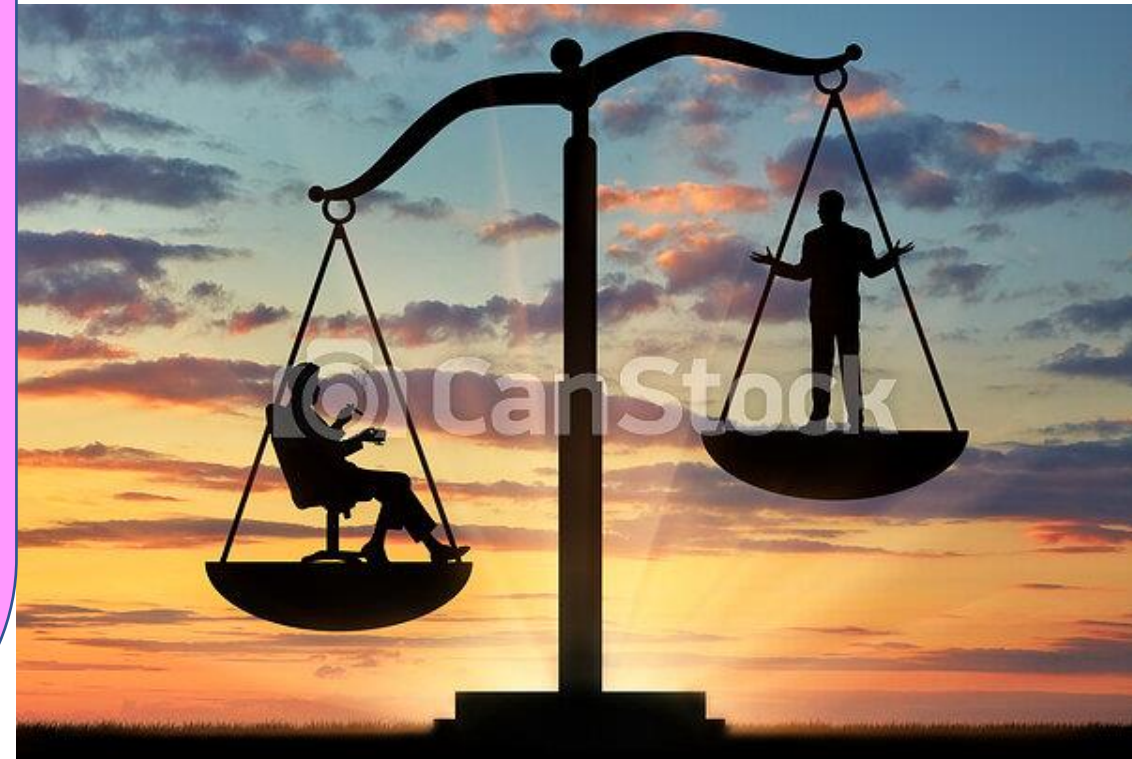
- **This study is a library study by applying a qualitative approach.**
- **The data are secondary and obtained from various sources, mainly from the Covid-19 offices in the areas where indigenous peoples live and Government Regulation in Indonesia.**

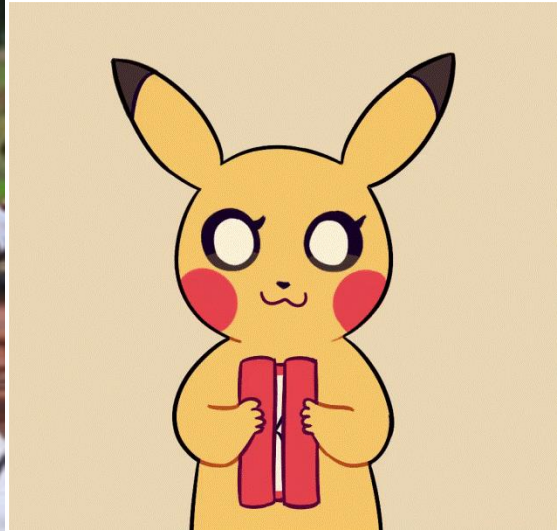
Method



- **The principle of supply and demand has made it difficult for the State to run the vaccination programs quickly.**
- **The slow and limited supply of vaccines is an obstacle to the creation of quick herd immunity while the demand for vaccines which has reached 181 million must be met immediately.**
- **As a result, the State has to make arrangements and priorities and indigenous peoples tend to be at the lowest priority, not to say they have been forgotten.**

Result





On Distributive Justice in the Vaccination Program for Indigenous Peoples in Indonesia

by

Yovita Indrayati, SH., M.Hum. and Drs. Hermawan Pancasiwi, BA., M.Si.

Abstrak

Vaksin itu untuk setiap warganegara, entah itu masyarakat perkotaan, pedesaan, juga masyarakat adat, termasuk mereka yang tinggal terasing di pedalaman. Sementara itu, Covid-19 adalah pandemi yang melanda seluruh masyarakat manusia, menembus batas-batas negara, wilayah, strata sosial ekonomi, dan batas-batas yang lain. Artinya, setiap orang berpotensi terinfeksi penyakit tersebut. Negara telah melakukan berbagai upaya untuk melawan pandemi Covid-19, bahkan telah melakukan vaksinasi sejak Januari 2021 untuk menciptakan herd immunity. Penerima vaksin ditargetkan 181 juta atau 70 persen dari seluruh populasi untuk terciptanya herd immunity tersebut. Tetapi, faktanya jumlah ketersediaan vaksin sangat terbatas sehingga perlu ada pengaturan yang ketat dalam program vaksinasi. Dalam situasi seperti ini, biasanya mereka yang berada di kota-kota besar dan dekat dengan Pusat Pemerintahan akan lebih didahulukan sementara mereka yang berada di pinggiran, termasuk masyarakat adat, akan berada dalam skala prioritas yang rendah. Ada banyak alasan mengapa masyarakat adat seperti dilupakan, diantaranya akses yang sulit karena jarak, wilayah, eksklusifisme, adat dan kepercayaan, dll. Padahal, di jaman modern seperti ini wilayah adat dan masyarakatnya semakin terbuka bagi pergaulan dengan masyarakat umum sehingga potensi terinfeksi tetap tinggi. Permasalahannya adalah sejauh mana negara telah menerapkan prinsip keadilan distributif kepada masyarakat adat dalam program vaksinasi demi menciptakan masyarakat sehat, termasuk mereka yang tinggal di wilayah-wilayah adat.

Studi ini adalah studi pustaka dengan menerapkan pendekatan kualitatif. Data bersifat sekunder dan didapatkan dari berbagai sumber, utamanya dari kantor Gugus Covid-19 di wilayah di mana masyarakat adat tinggal. Prinsip supply and demand telah membuat negara kesulitan melaksanakan program vaksinasi secara cepat, Supply vaksin yang lambat dan terbatas menjadi hambatan bagi terciptanya herd immunity sementara demand vaksin yang mencapai 181 juta harus segera dipenuhi. Akibatnya, negara harus melakukan pengaturan dan skala prioritas dan masyarakat adat cenderung berada di prioritas terbawah, untuk tidak mengatakan telah dilupakan.

Kata kunci: vaksinasi, masyarakat adat, prinsip supply and demand

Abstract

Vaccine is reserved for every citizen, whether they are urban or rural communities and even indigenous peoples, those who live isolated. Meanwhile, Covid-19 is a pandemic that hit all human societies, breaking through national, regional, socio-economic strata, and other boundaries. This means that everyone has the potential to be infected by the disease. The State has made various efforts to fight the Covid-19 pandemic and has even done vaccination program since January 2021 to create herd immunity. Vaccine recipients are targeted at 181 million or 70 percent of the entire population for the creation of herd immunity. The fact, however, is that the number of vaccines available is very limited so that there needs to be strict regulation in implementing the program. In a situation like this, usually those in big cities and close to the Central Government will be prioritized while those on the outskirts, including indigenous peoples, will be in a low priority scale. There are many reasons why indigenous peoples are forgotten, among others, difficult access due to distance, territory, exclusivity, customs and beliefs. In fact, in modern era, indigeneous communities and their territories are increasingly open to association with the general public so that the potential for infection remains high. The problem is the extent to which the State has applied the principle of distributive justice to indigenous peoples in vaccination programs in order to create healthy communities.

This study is a library study by applying a qualitative approach. The data are secondary and obtained from various sources, mainly from the Covid-19 offices in the areas where indigenous peoples live. The principle of supply and demand has made it difficult for the State to run the vaccination programs quickly. The slow and limited supply of vaccines is an obstacle to the creation of quick herd immunity while the demand for vaccines which has reached 181 million must be met immediately. As a result, the State has to make arrangements and priorities and indigenous peoples tend to be at the lowest priority, not to say they have been forgotten.

Keywords: vaccination, indigenous peoples, the principle of supply and demand

CALL FOR PAPER LIST

NO	PENULIS	JUDUL	ROOM C	PANELISTS
1.	Yovita Indrayati, SH., M.Hum, Drs. Hermawan Pancasiwi, BA., M.Si.	Menyoal Keadilan Distributif dalam Program Vaksinasi bagi Masyarakat Adat di Indonesia	C p HERM AWAN	Dr. Mega
2.	Henrita Ernestia	REGULATION AND ONLINE SHOPING OF ILLEGAL DRUGS DURING THE OUTBREAKS OF COVID-19 PANDEMIC	C	Dr. Nirmala
3.	Leonardus Reynald Susilo	A LITERATURE REVIEW, TELEMEDICINE REGULATION URGENCY AND IMPLEMENTATION FOR HYPERTENSION IN INDONESIA	C	Kak Fajar
4.	Monica Djaja Saputera ^{1, 2}	ANALISIS SITUASI PENANGANAN LIMBAH B3 INFEKSIUS DARI MASYARAKAT SELAMA PANDEMI COVID-19 DI INDONESIA	C	Kak Fajar
5.	Firna Novi Anggoro, S.H., M.H.	DOKTER SEBAGAI EKSEKUTOR HUKUMAN KEBIRI KIMIA (Sebuah Telaah Hukum dan Etik)	C	Dr. Ferdinand
6.	Ade Armada Sutedja, Satiyo	PARADIGMA FAKTA SOSIAL DAN ASPEK HUKUM VAKSINASI DALAM PERSPEKTIF MEDIKALISASI MASYARAKAT DALAM UPAYA PENANGANAN COVID 19	C	Dr. Mirna
7.	Kusmayadi*, Edy Lisdiyono**, Sri Mulayani	Regulasi Pengelolaan Sampah Rumah Tangga Berwawasan Lingkungan yang Berbasis Kesehatan Masyarakat	C	Dr. I Ketut Adi Nugraha Susila