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**Journal of Law, Politic**  
**and Humanities**<https://dinastires.org/JLPH>✉ [dinasti.info@gmail.com](mailto:dinasti.info@gmail.com)

☎ +62 811 7404 455

E-ISSN: 2962-2816  
P-ISSN: 2747-1985DOI: <https://doi.org/10.38035/jlph.v6i1>  
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## Jambi City Government's Strategy in Overcoming Parental Rejection of Diphtheria Tetanus Immunization at The Talang Bakung Health Center In Jambi City

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**Abstract:** This study aims to identify the factors that cause parents to refuse Diphtheria Tetanus immunization for children's health at the Talang Bakung Health Center, Jambi City, and analyze the legal strategies implemented by the Jambi City Regional Government in overcoming these rejections. The research method used is empirical legal research with a qualitative approach. Data was collected through interviews, observations, and documentation of related parties such as health workers, parents, and local government officials. Data analysis was carried out in a descriptive analytical manner by relating relevant field findings and legal theories. The results of the study showed that immunization refusal by parents was caused by several factors, including concerns about Post-Immunization Adverse Events (AEFIs), lack of understanding of vaccine benefits, the influence of misinformation on social media, and low trust in health workers. Social, cultural, and religious factors also contribute to strengthening resistance to immunization programs. The Jambi City Regional Government implements a persuasive and educational legal strategy by emphasizing increasing public health literacy through integrated socialization, the involvement of religious and community leaders, and the affirmation of legal policies based on Law Number 17 of 2023 concerning Health and Government Regulation Number 28 of 2024. In addition, the Regional Government strengthens legal protection for health workers and regulates the mechanism for handling AEFIs in a transparent manner to foster public trust. This legal strategy has proven effective in reducing immunization refusal rates and increasing community participation, although ongoing efforts are still needed to strengthen legal awareness and overall public health.

**Keyword:** Immunization Refusal, Legal Strategies, Child Health

## INTRODUCTION

Immunization is an important preventive step in protecting the community from infectious diseases that can be prevented through vaccines (Fitriyani et al., 2020). This program has become a priority of national health policy and is supported by regulations such as Law Number 17 of 2023 concerning Health, which guarantees the right of every child to immunization. Even so, challenges still arise, especially due to the refusal of parents who are worried about the risk of Post-Immunization Adverse Events (AEFIs) (Hasibuan & Ginting, 2023). Lack of understanding of vaccine benefits, misinformation spread on social media, and personal or community experiences of experiencing side effects are the main causes of resistance to vaccination. Local governments have an important role in dealing with this problem, not only through a repressive legal approach, but also through education that emphasizes the importance of immunization as an effort to protect public health (Witri & Putra, 2025).

Legal strategies implemented at the regional level need to be adjusted to the social and cultural conditions of the local community. Affirmative policies such as providing incentives for parents who routinely immunize, as well as immunization arrangements as a condition for accessing public services, can be effective steps to increase vaccination coverage (Juanda, 2018). The involvement of community leaders, health workers, and religious leaders is also very necessary to build trust in vaccination in a society that is still skeptical (Ropii, 2024). The handling of AEFI cases must be carried out transparently and professionally so as not to cause excessive fear. The success of immunization programs requires good coordination between local governments, health agencies, and the community through firm, educational, and sustainable legal strategies to create a more reliable and inclusive health system (Mukhi & Medise, 2021).

The implementation of immunization is carried out in various health facilities, including at the Talang Bakung Health Center in Jambi City which has the scope of immunization services for children in the surrounding area. As a primary health service center, this Puskesmas plays a role in ensuring that every child gets the right to safe and quality immunization in accordance with national health regulations. However, in recent years, health workers at the Talang Bakung Health Center have faced challenges in the implementation of immunizations, especially related to the refusal of a number of parents. Concerns about Post-Immunization Adverse Events (AEFIs) are one of the main factors that cause obstacles in achieving optimal immunization coverage, as seen in the immunization refusal data in the following table:

**Table 1. Rejection Case at Talang Bakung Health Center, Jambi City**

Year	Goal	Injected	Refuse
2022	583	542	41
2023	551	351	200
2024	446	238	208

Source: Researcher's Processed Data, 2025

The data in the table shows a downward trend in the number of children receiving immunizations in the working area of the Talang Bakung Health Center in Jambi City, although the target target for each year is relatively stable. This decline reflects the increase in the rate of immunization refusal influenced by parents' concerns about post-immunization adverse events (AEFIs) and inaccurate information spread on social media. This situation has the potential to trigger Extraordinary Events (KLB) of preventable diseases such as measles, diphtheria, and polio, thus endangering children's health and increasing the burden on health services

To overcome these challenges, the Jambi City Regional Government has established policies that support the immunization program through public education and supervision at health facilities, as well as providing legal protection for health workers who carry out vaccinations. This approach is carried out persuasively and collaboratively with community leaders to build trust and ensure the public's right to accurate information related to immunization and handling AEFIs. Synergy between the government, health workers, and the community is the key to success in increasing immunization coverage and maintaining the sustainability of the health system in the region.

## METHOD

This research uses an empirical legal approach that focuses on the identification of the applicable laws in society and the observation of the application of these laws in practice (Soerjono, 2007). The focus of the research is on the implementation of local government policies in dealing with parental refusal to immunization caused by Post-Immunization Adverse Events (AEFIs) at the Talang Bakung Health Center, Jambi City. Data was collected through interviews, observations, and documentation to explore the facts on the ground and analyze how legal strategies are implemented to increase public confidence in the immunization program and address AEFI issues.

The approach of this research is qualitative, which allows for an in-depth understanding of the social and policy phenomena that live naturally in the Society (Moleong, 2010). This approach emphasizes the interaction between the researcher and the research object, so that the researcher can explore public perceptions, policies implemented by local governments, and challenges that arise in the implementation of immunization. A qualitative approach was chosen to support the analysis of legal strategies used to reduce immunization refusal and build public trust in the safety and benefits of immunization.

Data analysis techniques include three main stages, namely data reduction, data presentation, and conclusion drawing (Miles & Huberman, 2018). Data reduction is used to select, focus, and condense the data obtained to make it easier to analyze. The presentation of data is carried out by organizing and summarizing information so that it facilitates understanding and interpretation. Drawing conclusions is the final stage that aims to determine the results of research based on data analysis that has been carried out in order to gain a comprehensive understanding of the effectiveness of legal policies in increasing immunization coverage and overcoming rejections related to AEFIs.

## RESULTS AND DISCUSSION

### **Factors Causing Parents' Rejection of Diphtheria Tetanus Immunization at the Talang Bakung Health Center, Jambi City**

The rejection of some parents to immunization at the Talang Bakung Health Center in Jambi City is influenced by the belief that children's health can be maintained without vaccination. Some choose to build a child's immunity through a nutritious diet, adequate rest, and natural care. They feel that it is enough to provide an intake of vegetables, fruits, and foods that meet nutritional needs so that the child's immune system is maintained. Concerns about vaccine side effects, such as fever, make them even more determined not to allow children to be immunized. This was revealed by Mrs. Aria Fitriani who stated that:

*"We are from ourselves, let us give him his own immunity, he said that immunization will increase immunity, but because we as parents, we will also regulate their food, their health patterns, their rest, we have arranged it, God willing, bismillah."*

The factors of the child's health condition at the time of the immunization schedule also affect the decision of parents. Some refuse immunizations because the child is experiencing a cough and cold, accompanied by concern about side effects that may arise. These concerns

include shocking bodily reactions or causing discomfort to previously healthy children. This was conveyed by Mr. Resta who said:

*"Yesterday he was in a position with a cold cough... I'm afraid of the side effects, I'm afraid of being surprised, ma'am."*

Doubts about the safety and halalness of vaccines are the reason for rejection for some parents who consider that they need to know detailed information about vaccine ingredients and certification before deciding to allow children to be vaccinated. The lack of in-depth explanations makes them tend to be cautious. Mrs. Agustina, expressed her view that:

*"Even if we are hesitant, whether immunization is halal, for us what is the composition of immunization... must know in advance."*

There is also a refusal that is completely influenced by the decision of the family, especially on the part of the father or grandmother, who from the beginning prohibits children from being immunized. This belief has been applied from the first child to the next child, so that the decision becomes a consistent attitude in the family. Mrs. Mardiana said:

*"His father didn't allow it. From the first child to the fourth child, it is not allowed."*

Some parents believe that immunizations are enough to be given in the first two years of a child's life and do not need to be resumed when the child starts school. Concerns about side effects such as fever or the onset of certain diseases further strengthen the decision. They still pay attention to children's health through the administration of vitamins and consultation with doctors, but do not see the need for follow-up immunizations. This was stated by Kiki's mother who said:

*"I believe that two years is enough to have all kinds of immunizations... I am afraid that later the effects will be different, most of the effects depend on the child, some are sick, some are sick."*

The school's view shows that the refusal of immunization is not only due to the child's health reasons on the day of implementation, but also due to the principle of families who refuse immunization from the beginning. The principal emphasized that the number of refusers is relatively small, but their reasons are strong and have been going on since the child was born. This can be seen from the statement of Mrs. Eka Merdekawati, S.Pd as the Principal who explained:

*"If the first one is usually from birth, the parents have never been immunized... Some of them have a stance that they do not want immunization."*

Overall, the refusal to immunize at the Talang Bakung Health Center in Jambi City was triggered by a combination of personal factors, children's health, family beliefs, and perceptions of vaccine safety. Some parents feel confident that parenting and nutritional fulfillment are enough to maintain the child's immunity without the need for immunization. Concerns about side effects, doubts about the safety and halalness of vaccines, and the influence of the decision of the husband or extended family also strengthen the attitude of refusal. Even though the school and health center have conducted socialization, some parents still maintain their stance so that the immunization program has not been fully followed by all students.

Some parents view immunization as not the only most appropriate way to build their child's immunity. They choose alternative approaches that are considered more natural and safer, such as regulating a nutritious diet, getting enough rest, and treatments using natural ingredients. Concerns about vaccine side effects, uncertainty about vaccine safety and halal are also factors that affect this refusal attitude, in addition to the influence of binding family decisions in determining children's health choices (Frastika et al., 2020).

The belief that the child's body is able to form immunity naturally without immunization is the basis for the attitude of some parents in refusing vaccination. They believe that proper parenting, such as healthy feeding and regular sleep, is enough to maintain children's health. In fact, some parents rely on traditional medicine as a complement. The personal experience of

those who feel that their children are rarely sick even though they are not immunized is a strong reason to continue to refuse immunization, thus fostering confidence in these natural treatment methods. This shows that personal perception and experience are significant cornerstones in decision-making regarding immunization (Wahyuni & Hadi, 2022).

The health condition of children on the immunization schedule is also a reason for some parents to delay or refuse to administer the vaccine. Parents are worried that if the child is sick, such as cough, cold, or mild fever, then the immune system that is not in its prime is not ready to receive the vaccine, which is feared to worsen the child's condition or cause more serious side effects (Manungkalit et al., 2022). This concern led them to choose to delay immunization for the safety of their children, even though this decision was sometimes not supported by adequate medical information. This concern also affects the low immunization coverage in many regions, including Jambi.

Doubts about the safety and halalness of vaccines are the dominant factors that often appear as reasons for refusal to immunize. The lack of clear information and detailed socialization regarding the content of vaccines and their halal are the main obstacles for parents to receive their children's immunizations. Information that is unclear and circulating in the community or social media that is not necessarily accurate further strengthens this doubt. In addition, family decisions, especially those taken jointly by other family members, such as husbands or in-laws, are often a strong binder in determining the attitude of refusing immunization, so that socialization from health workers often has less influence in changing the decision (Salsabila & Syahrul, 2023).

The view that immunizations only need to be given in the first two years of a child's life is also another reason for parents to refuse follow-up immunizations. They assume that after this period the child's immune system is sufficiently formed. Instead, they prefer to take vitamin supplements, follow a healthy diet, and have regular health checkups. This principle is often passed down from generation to generation and is accompanied by previous negative experiences related to immunization. All of these reasons demand a more effective educational and communication approach so that the public gets accurate and complete information about the importance of immunization for children's health.

Parental rejection of diphtheria immunization often stems from doubts about the benefits of vaccines as well as concerns about the risk of Post-Immunization Adverse Events (AEFIs). This situation is an obstacle to the government's efforts to protect children through immunization programs. Based on the theory of legal utility, this rejection poses problems because it reduces the achievement of happiness and safety for the wider community (Noorsanti & Yudhanti, 2023). Laws that serve as policy instruments should bring the greatest benefits to as many people as possible, but if some parents refuse immunization, then the potential for an outbreak of infectious diseases could threaten collective well-being. From the point of view of utilitarianism, the act of refusing vaccines not only impacts the individual concerned, but also reduces the social benefits that should be felt by the community.

Public concerns about vaccine safety show the government's lack of communication and clear information distribution. Health law policy theory emphasizes that the law is used as a tool of intervention in maintaining public health, so that mandatory immunization policies cannot be separated from the state's obligation to regulate vaccine distribution, benefit socialization, and mechanism for handling AEFI in a transparent manner (Lawrence O, 2019). When people obtain misinformation from social media, health regulations and policies must be present not only in the form of threats of sanctions, but through strong educational interventions and scientific evidence. Regulations that affirm children's right to health protection provide a solid legal basis for the government to implement the immunization program widely, while convincing the public that the policy is not a baseless coercion, but an effort to maintain common health.



## Legal Strategy of the Jambi City Regional Government in Overcoming Parental Rejection of Diphtheria Tetanus Immunization

The legal strategy implemented by the Jambi City Regional Government in overcoming parental rejection of immunization for children's health at the Talang Bakung Health Center, Jambi City involves various cross-sectoral and regulation-based approaches and socialization. Local governments work based on national regulations that are derived through technical policies that synergize with the Health Office, Education Office, and Ministry of Religious Affairs. This approach is not only carried out through the implementation of rules, but also through education, advocacy, and monitoring of immunization implementation in order to achieve optimal coverage targets. The role of community leaders and religious leaders is highly considered to overcome the challenges of rejection that still often arise in the field.

This is in line with the results of an interview conducted with dr. Rini Kartika Handayani M.Kes, as the Head of Disease Prevention and Control at the Jambi City Health Office who said that:

*"We made a circular letter to the education office, to the ministry of religion, and implementers at the health center. Then we encourage the health center to socialize immunization activities to schools, in order to support the implementation of the DT immunization program which must be carried out in schools. There is indeed a refusal, but we do not give an opportunity to the rejection because this is an obligation based on the Decree of 4 Ministers."*

The approach carried out at the Talang Bakung Health Center level is also carried out systematically with an immunization implementation mechanism that includes registration, data input, physical examination, and immunization measures. Coordination with schools and across sectors is an important part of ensuring the success of the immunization program. The Puskesmas team also took steps such as socialization, immunization sweeping, and involving community leaders and scholars to receive immunizations as an effort to protect against diphtheria and tetanus.

Confession from Daryanti, S.Tr.Keb, as the Person in Charge of Immunization of the Talang Bakung Health Center clarifies that:

*"We carry out socialization and coordination with cross-sectors. When there is rejection from parents, we take a persuasive approach with communication and counseling involving religious leaders so that the public understands better and is not affected by misinformation about vaccines. In addition, we are trying to implement immunization by conducting sweeping in schools so that immunization achievements can increase."*

Legal strategies are not only in the form of regulations or circulars, but also educational efforts that are carried out continuously through social media, direct counseling, and coordination with various parties. Dr. Rini Kartika Handayani M.Kes emphasized that:

*"Our policy refers to the regulation of the Ministry of Health and Law number 17 of 2023. We made a circular letter to the relevant agencies and asked the Diskominfo to help with education through social media websites. To deal with rejection, we also involve traditional and religious leaders in advocacy so that people understand the importance of immunization."*

Although there is no formal sanction for parents who refuse immunization, the Jambi City Health Office is pursuing an intensive strategy in the form of socialization, persuasive communication, counseling, and involving various elements of society. The use of immunization certificates as a form of consequence was introduced so that children who do not receive immunizations will not get certificates, thereby encouraging public awareness. The person in charge of immunization also emphasized that cross-sector support is urgently needed to overcome the obstacles of understanding and hoaxes that spread on social media.

The legal strategy implemented by the Jambi City local government is a combination of regulatory approaches, education, cross-sector advocacy, and strict monitoring so that the immunization program runs optimally. The approach carried out through circulars, the involvement of community and religious leaders, and targeted socialization are the keys to reducing rejection. The DT immunization coverage of school children which has reached around 90 to 95 percent shows the effectiveness of this strategy, although the challenge of some parents' refusal still has to be overcome by strengthening communication and continuous counseling. In conclusion, the legal strategy implemented emphasizes collaborative and educational efforts so that children's right to immunization protection can be fulfilled for the creation of a healthy and quality generation.

The legal strategy implemented by the Jambi City Regional Government in overcoming immunization refusal at the Talang Bakung Health Center shows that there is a direct link with the mandate of the 1945 Constitution of the Republic of Indonesia which guarantees the right of citizens to obtain optimal health services. The implementation of this policy combines regulations, education, cross-sector coordination, and the involvement of community leaders and religious leaders as a step to ensure that every child receives adequate health protection. The legal basis used is sourced from Law Number 17 of 2023 concerning Health, which provides a clear regulatory framework related to immunization as part of the state's preventive efforts to protect the younger generation from infectious diseases. The principle taken is not only on the application of the law, but also on the understanding that children's health is a long-term investment for the sustainability of the nation's development (Affandi, 2019).

The issuance of circulars that bind related agencies is a concrete form of the implementation of the authority of local governments in carrying out the mandate of the law. This circular refers to Government Regulation Number 28 of 2024 which regulates the technical implementation of the Health Law, so that each work unit such as the education office, the ministry of religion, and the health center has the same reference in overseeing the implementation of immunization in schools and health facilities (Hilala, 2025). The clarity of the regulation provides legal certainty, minimizes potential differences in interpretation, and ensures that immunization programs can run uniformly across regions. This administrative affirmation also sends a strong signal that the immunization program is not an option, but rather an obligation that is protected by law and must be carried out consistently.

The educational efforts carried out by the local government are not only formal through counseling in schools, but also utilize online media such as official websites and social media accounts to reach the community more widely. This approach refers to the mandate of the Minister of Health Regulation Number 12 of 2017 which underlines the importance of providing correct, complete, and easy-to-understand information related to immunization. This education is directed to form public awareness of the benefits of immunization, break doubts about its safety and halalness, and remove the influence of misleading or hoax information. The use of these various communication channels provides opportunities for the public to acquire knowledge repeatedly, so that the message conveyed can be firmly embedded in public understanding (Wicaksono & Kusumaningrum, 2023).

Cross-sector coordination is one of the key elements of the success of this legal strategy, where the Health Office collaborates with the Education Office, the Ministry of Religious Affairs, schools, and traditional leaders to ensure the smooth implementation of immunization. The involvement of community leaders and religious leaders shows that health policy cannot stand alone without considering local social and cultural aspects. These figures have a strong influence in shaping public opinion, so their presence in supporting the immunization program can accelerate public acceptance. The persuasive approach taken by the health center team, including direct counseling to parents who refuse immunization, helps build trust and open up a healthy space for dialogue.

The implementation of immunization sweeping in schools is an operational step to ensure that all children get the right to immunization even though they were behind the previous schedule. Immunization certificates are used as a form of administrative consequence that encourages parental participation without the use of direct coercion, considering that these certificates are often a requirement for other educational and administrative needs. Periodic monitoring and evaluation shows the commitment of local governments in maintaining the quality of health services and adjusting strategies if obstacles are found in the field. The entire series of strategies is in line with the national legal framework, including Law Number 17 of 2023, Government Regulation Number 28 of 2024, and Minister of Health Regulation Number 12 of 2017, which affirms the state's obligation to protect children's health. This comprehensive approach shows a serious effort by the regions to synergize legal and social aspects in order to achieve national health targets.

The legal strategy of local governments in overcoming immunization refusal departs from the view that every child has the right to receive health protection guaranteed by law. Legal protection theory emphasizes that the state is obliged to provide a guarantee of security and justice, including for children who are vulnerable to infectious diseases (Sudrajat, 2020). The efforts of the Jambi City government in the form of education, socialization, and immunization policy enforcement show the function of law as a preventive protection so that rejection does not spread. If parental resistance persists and has the potential to endanger the public interest, then repressive mechanisms can be applied through binding rules, such as making immunization a certain administrative requirement. This step is still based on the principle of protecting children's right to health, not just restricting parental freedom.

The implementation of the legal strategy is also in line with the theory of health law policy, where the government uses the law as an instrument to regulate immunization services, handle AEFI cases, and ensure that vaccine distribution runs effectively. The Jambi City Government seeks to strike a balance between the protection of individual rights and the public interest through clear regulations. The immunization obligation affirmed in the law and its implementing regulations provides a basis for government intervention so that the community complies with the vaccination program. Education that is integrated with regulations shows that the law is not only repressive, but also a means of communication that ensures the security and transparency of health information.

The success of legal strategies in overcoming immunization refusal is also closely related to the theory of legal functions. The law acts as a social control mechanism to change people's behavior to be in line with public health goals. When parents refuse immunization, the government uses the law to lead the community towards compliance, not only through sanctions, but also through socialization and collaboration with community leaders (Suko, 2020). The function of law can be seen from its ability to create social order through rules that balance personal interests and collective interests (Santiago & Asnawi, 2024). Through a structured strategy, the Jambi City government seeks to ensure that the immunization program is implemented effectively, provides broad protection for children, and closes the space for outbreaks that are detrimental to the community.

## CONCLUSION

In conclusion, the refusal of immunization by some parents is influenced by personal beliefs, the health condition of the child, doubts about the safety and halalness of vaccines, and the decision of families who refuse immunization. The Jambi City Regional Government overcomes this through a legal strategy that combines regulations and persuasive approaches, such as socialization, cross-sector coordination, involvement of community and religious leaders, personal counseling, sweeping in schools, and the provision of immunization



certificates as incentives, with regular monitoring and evaluation to ensure immunization coverage is achieved.

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