

Juridical Aspects of Violation of Authority by Dental Handyman

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ABSTRACT – Dental handyman practices in Indonesia are a popular healthcare alternative, especially for low-income people. However, violations of authority by dental handyman, such as dental installation that hasn't comply the standard, create significant health risks for consumers. This study analyzes the juridical aspects related to these violations based on Law Number 8 Year 1999 on Consumer Protection and Minister of Health Regulation Number 39 Year 2014. This research uses a normative juridical approach with data from legal literature, laws and regulations, and official documents. The results show that the illegal practice of dental handyman is influenced by weak supervision, lack of understanding of regulations, and low consumer awareness. The government needs to strengthen regulations, improve supervision, and provide education to the communities to reduce the risks of the practice. Recommendations include developing training for dental handyman, more strict law enforcement, and consumer awareness socialization.

Keywords: Dental Handyman, Violations of Authority, Consumer Protection, Health of Law, Regulation, Supervision, Communities Education.

A. INTRODUCTION

Oral health is an important factor in maintaining the overall health of the public. Angraeni (2013) notes that communities often view oral health as a low priority, even when poor conditions in this area can trigger various systemic health problems. Achadiat (2006) emphasized that neglecting dental health can adversely affect a person's quality of life, socially and economically. However, access to professional dentists is often an obstacle, especially for the lower middle class. Arnesti (2017) revealed that most people in this condition choose dentists as an alternative due to more economically viable service.

The history of dental handyman in Indonesia is dated back to the Dutch colonial period. At that time, they were known as "dental shamans"

who provided dental health services to local communities, as dentists only catered to the needs of Europeans at a high cost (Dananjaya et al., 2013). In its development, dental shamans acted as traditional dental health service providers that helped communities overcome limited access to dentists. However, their practices do not always comply safe medical standards, creating health risks for the communities.

Dharmawan and Jonathan (2019) explained that dental handyman practices often exceed the authority regulated in regulations, such as the manufacture and installation of dentures that do not comply with health standards. This has become a main concern of the government, which then issued regulations such as the Minister of Health Regulation Number 39 Year 2014. This regulation emphasized that dental handymen are only allowed to make and install removable dentures that comply health standards, provided that the remaining radix dentis is not covered (Sari, 2019).

However, the implementation of these regulations has been challenging. Buamona (2015) noted that many dental handymen continue to operate without a license or exceed their authority. This could potentially pose health risks to the public and violate consumers' rights to safe healthcare (Arum et al., 2023). Kusumawardani and Novianto (2019) found that violations of authority by dental handyman are often caused by a lack of understanding of regulations and weak supervision from the authorities.

In the context of legal relations, patients who use dental handyman services are considered consumers, while dental handyman acts as a business practitioner. Sitohang et al. (2014) explained that this relationship is regulated in Law Number 8 Year 1999 on Consumer Protection. Business practitioners have an obligation to provide honest information, safe services, and compensation in the case of losses due to the services provided (Faridi et al., 2023).

However, in practice, Sari (2019) noted that many dental handymen do not comply with these obligations, so consumers are often disadvantaged.

Mokoginta et al. (2016) revealed that most people who use dental handyman services do not understand the risks they encounter. This suggests the need for further education to the communities on the importance of choosing standardized health services. In addition, the government needs to increase supervision of dental handyman practices to ensure that they comply with applicable regulations and harmless to communities's health (Yudistira et al., 2021).

The legal void regarding license renewal procedures for dental handyman is also a significant problem. Simanjuntak (2014) highlighted that since the revocation of the Minister of Health Regulation Number 339 Year 1989, there is no clear mechanism for the renewal of licenses for dental handyman who have had previous licenses. This creates legal uncertainty and makes it difficult for the government to regulate dental handyman. Overall, the existence of dental handyman in Indonesia remains a complex issue involving legal, health, and social aspects. Sunggono (1996) suggests that a multidisciplinary approach is needed to effectively address this issue, including strengthen regulation, improved public education, and stricter supervision of dental handyman practices. Thus, public health can be protected, and consumers' rights to safe health services can be fulfilled.

The purpose of this study is to analyze in depth the juridical aspects related to violations of authority made by dental handyman in their practice. This study aims to identify the extent to which such violations impact the health of communities and the rights of consumers, as well as to evaluate the effectiveness of existing regulations, such as Minister of Health Regulation Number 39 Year 2014, in regulating dental handyman practices. In addition, this study also aims to examine the legal relationship between dental handyman as a business practitioner and patients as consumers based on Law Number 8 Year 1999 on Consumer Protection. By exploring various legal perspectives, this research is expected to provide recommendations for the regulator to strengthen regulations, improve supervision, and ensure the protection of the communities in obtaining safe and standardized health services.

B. METHOD

This research uses a normative juridical approach that focuses on analyzing legislation, legal literature, and relevant official documents. This approach was chosen to examine the legal aspects of the violation of authority by dental handyman based on applicable regulations, such as Minister of Health Regulation Number 39 Year 2014 and Law Number 8 Year 1999 on Consumer Protection.

This type of research is descriptive analytical, with the aim of systematically describing the violation of authority by dental handyman and its legal implications. This research also analyzes the suitability of dental handyman practices with applicable laws.

The research data sources are primary, secondary, and tertiary legal materials. Primary legal materials include the 1945 Constitution of the Republic of Indonesia, Law Number 36 Year 2009 on Health, and various other relevant regulations. Secondary legal materials were obtained from books, journals, and scientific articles such as the works of Alexandra (2012) and Bhekti (2013), which discuss legal aspects of health services. Meanwhile, tertiary legal materials in the form of legal dictionaries and encyclopedias were used to clarify the legal concepts used.

Data collection techniques were conducted by literature study and document analysis. Researchers reviewed various legal documents, reference books, and relevant scientific articles. Data analysis was carried out qualitatively, starting with the identification of relevant legal rules, data classification based on certain categories, legal interpretation, and deductive inference.

Data validity was guaranteed by the source triangulation method with comparing and verifying data from various sources. Data reliability was strengthened by adhering to scientific principles in data processing and analysis (Darmawan, 2015). The research location was non-physical, focusing on the analysis of legal documents and literature available nationally and internationally.

Using this method, the research is expected to provide a comprehensive overview of the juridical aspects of the violation of authority by dental handyman and present recommendations that are useful for regulators and the communities.

C. RESULTS AND DISCUSSION

The legal basis for dental handyman registration and licensing is regulated by Minister of Health Regulation No. 339/MENKES/PER/V/1989, which is a derivative of Law Number 9 Year 1960 on Health Principles and Law Number 6 Year 1963 on Health Workers. Based on Statute 10 of Law Number 9 Year 1960, the government has the authority to supervise health workers, including dental handyman, to ensure that health practices are carried out according to standards and harmless to communities's health.

Minister of Health Regulation Number 39 Year 2014 regulates the tasks and authority of dental handyman. Dental handymen only allowed to make removable dental prosthesis from heat curing acrylic material that is safe and comply with health standards (Nugroho, 2018). However, illegal dental handyman practices that exceed their authority, such as the installation of orthodontic appliances or tooth extraction, are prevalent (Suprpto, 2017). Based on Law No. 6/1963 on Health Workers, dental handyman are non-academic personnel without formal education in dentistry. Therefore, dental handyman does not have the authority to do health practices without strict supervision (Ismail, 2019).

Health workers must have relevant formal education. Dental handyman is not included in this category because does not have the appropriate educational background (Kurniawan, 2020). Supervision of dental handyman is carried out through the regional health office, with administrative sanctions such as disciplinary letters, temporary license revocation, or permanent license revocation for violations. Minister of Health Regulation Number 39 Year 2014 provides administrative sanctions to dental handyman who violate the provisions, with the aim of protecting communities from health risks due to non-standard practices (Pratama, 2021).

Despite clear regulations, the reality is that there are still many dental handymen who practice without going through the administrative licensing procedures required by the government. They are frequently opening practices independently without official licenses, even exceeding the authority regulated in the laws and regulations. This clearly violates applicable regulations, both in the context of health law and consumer protection.

According to the Minister of Health Regulation Number 1871/MENKES/PER/IX/2011, the authority of dental handyman is limited to making dental prosthesis with materials that comply with health standards and are safe to use. They are not authorized to perform actions such as tooth extraction, installation of orthodontic appliances, or other medical procedures that require professional expertise in the field of dentistry.

To supervise the practice of dental handyman, the local government via the health office has the authority to impose administrative sanctions on practitioners who violate the regulations. These sanctions include disciplinary letters, temporary license revocation, and permanent license revocation.

These regulations aim to protect communities from health risks due to non-standard practices and encourage dental handyman to comply with applicable regulations. The existence of dental handyman in Indonesia is still an alternative for the community to get economically viable dental health services. However, this practice must be carried out within the established limits of authority and under the supervision of the government. With the implementation of strict regulations and effective supervision, the risk of loss for communities can be minimized, and trust in health services can be increased (Lethy et al., 2023).

Despite clear regulations, dental handyman practices that exceed their authority still happen. For example, many dental handymen install orthodontic appliances or extract teeth, which should be the authority of dentists. This violates Statute 73 Clause 2 of Law Number 29 Year 2004 and Statute 6 Clause 2 of Minister of Health Regulation Number 39 Year 2014 (Nugraha, 2020). Such practices are not only illegal but also harm consumers' health. The risk of infection, tissue damage and other complications are frequently the consequences of actions that do not comply with medical standards. Existing regulations need to be enforced with stricter supervision to prevent these violations.

In a legal perspective, dental handyman who exceeds the authority is responsible for the harm caused to consumers. Based on Statute 1365 of the Indonesian Civil Code, any unlawful act that causes harm is obliged to provide compensation. In addition, Statute 19 of the Consumer Protection Law regulates that consumers are eligible for compensation if the goods or services received are not in accordance with the agreement (Suryani, 2021).

However, in practice, many dental handymen do not show responsibility for the harm caused. For example, the use of unsterilized tools or non-standard materials frequently leads to serious health complications for consumers. Strict law enforcement is needed to improve dental handyman compliance with applicable regulations.

The responsibility of dental handyman towards consumers is regulated in Statute 1 Clause 2 of Law Number 8 Year 1999 on Consumer Protection. In this article, a consumer is defined as any user of goods or services available in the community, which are used for personal, family, or other purposes, and not for resale. Consumer protection law is not only aimed at communities as consumers, but also includes rules aimed at the welfare of business practitioners. Consumers and dental handyman as business practitioners have their respective rights and obligations. However, many dental handymen practices today have exceeded the authority regulated in the Minister of Health Regulation Number 39 Year 2014.

Dental handyman practices that should only serve denture installation now often involve activities outside of their authority, such as orthodontic appliance, tooth filling, tooth bridging, and tooth extraction. These activities should be the authority of dentists. An example is a tooth extraction conducted by a dental handyman. There was a case where a consumer experienced severe hemorrhage after a tooth extraction by a dental handyman, and had to be admitted to the hospital. Mistakes like this have the potential to cause tooth destruction, tissue damage around the oral cavity, and even the spread of infection. Such incidents clearly violate consumers' rights to comfort, security, and safety in using the services they receive. These violations cause not only material but also physical losses, which frequently require follow-up medical treatment.

Dental handyman who given services resembling dentists without adequate competence are very risky for consumers' health. Dental handyman does not have a dental education background that complies with medical standards. This allows for mistakes and negligence that can disadvantage consumers.

The services provided by dental handyman frequently does not meet medical standards because haven't never formally studied the science of human dental anatomy and related medical procedures. Also haven't sufficient

knowledge regarding the use of tools that resemble dental instruments. This poses a significant potential harm to consumers who receive such services.

Violations committed by dental handyman in providing services without their authority not only injure consumers' rights but also harm their safety. Therefore, stricter supervision and law enforcement are needed to ensure that dental handyman practices are in accordance with the provisions of Ministry of Health Regulation Number 39 Year 2014, as well as to ensure consumer protection.

In this context, patients who use dental handyman services can be considered as consumers, while dental handyman acts as a business practitioner. Statute 1 Clause 3 of the Law on Consumer Protection states that a business practitioner is any person, whether in the form of a business entity or an individual, whether a legal entity or not, who carries out business activities in the jurisdiction of the Republic of Indonesia, either independently or collaboratively within an agreement to carry out business activities in the economic sector.

Law Number 8 Year 1999 also provides rights to consumers that must be respected by business practitioners, including dental handyman. Dental handyman as a business practitioner is obliged to fulfill these consumer rights in every practice implementation. Violations of consumer rights may be subject to sanctions based on the provisions in the Consumer Protection Law. This includes the obligation to give compensation or damages if the services are not as agreed or are detrimental to consumers.

However, dental handyman practices are still found in communities, frequently without official licenses from the Ministry of Health. This practice includes actions that go beyond their authority, such as orthodontic treatment, extractions, and dental fillings. Ministry of Health Regulation Number 39 Year 2014 on the Guidance, Supervision, and Licensing of Dental Handyman Work, Statute 2, explicitly states that dental handymen are only allowed to make dental prosthesis from safe materials and according to health standards.

The importance of consumer protection can be seen from the need for a balance between the position of consumers who are frequently on the weaker side compared to business practitioners. For this reason, regulations that can protect both sides are needed. Consumer

protection efforts are meant to create a balance of positions by positioning consumers in a more independent and critical position in dealing with business practitioners. Therefore, the need for consumers to have a better understanding of their rights is very important. Meanwhile, business practitioners, including dental handyman, must be responsible for any actions that harm consumers in accordance with applicable laws.

The work of dental handyman requires guidance and supervision because they use methods and tools that have many similarities with dentistry, but has no formal education in dentistry. Therefore, clear regulation is needed to prevent harm or danger to the communities.

Supervision of dental handyman by the health department is not optimal. This is due to limited resources and lack of reports from communities. In fact, effective supervision is very important to ensure that dental handyman practices comply with the laws (Hidayat, 2022). Periodic supervision and guidance by the health department should be increased to provide a deterrent effect to violators.

The government has an important role in protecting consumers from the risks of non-standard dental handyman practices. In addition to regulation, the government must educate communities about the dangers of using unlicensed dental handyman services. Socialization of consumer rights and the limits of dental handyman authority also needs to be improved so that communities are more critical in choosing health services (Lestari, 2021).

D. CONCLUSIONS

Dental handyman are non-academic personnel without formal education in dentistry. This lack of formal education is a main challenge in ensuring the competence of dental handyman to give services in accordance with health standards. Dental handyman practices that exceed their authority violate various regulations and endanger public health. For this reason, stricter supervision, strict law enforcement, and education to communities and business practitioners are needed to increase awareness of the importance of complying with legal standards. With these measures, it is hoped that consumer protection can be improved, and dental handyman practices can be operated in accordance with applicable laws.

The government and relevant organizations can develop special training or certification programs for dental handyman to improve their competence. This program can also provide knowledge about the limits of authority regulated by law.

The government and health workers are expected to provide economically viable dental services so that communities do not need to rely on unlicensed dental handyman. Strict supervision by the Ministry of Health and regional health offices is needed to ensure compliance with regulations. Enforcement of administrative sanctions, such as reprimands or license revocation, is an important move to control dental handyman practices to remain in compliance with applicable laws.

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