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## Potential Abuse on The Issuance of Online Medical Certificates by Doctors: A Criminological Review

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### Abstract

This study evaluated the effect of online medical certificates on access to health care, service quality, and utilization in Indonesia. In this context, there are two formulations of the problem to be studied: First, can an online medical certificate be justified even though there is no face-to-face interaction? Second, how can the criminological approach be applied to the online medical certificate in Law Number 29 of 2004 concerning Medical Practice? Even though online medical certificate services make it easy for patients to get a sick note without coming to a clinic or hospital, there are concerns that this service can be misused and cause legal problems. In this context, it is essential to consider the impact of online sick notes on medical practices and public health. This study used normative legal research methods with statutory and conceptual approaches to examine applicable legal regulations and relevant criminological principles. This study concluded that issuing online sick notes is inconsistent with Law Number 29 of 2004 and violates the Indonesian Medical Code of Ethics. Therefore, it is necessary to reconsider using online sick note services regarding the legal implications and the impact on public health.

**Keywords:** Criminology, Medical Practice, Online Sick Note

### Abstrak

Studi ini dilakukan untuk mengevaluasi pengaruh dari pembuatan surat sakit secara online terhadap akses perawatan kesehatan, kualitas layanan, dan pemanfaatan surat keterangan sakit di Indonesia. Dalam konteks ini, terdapat dua rumusan masalah yang ingin dikaji: Pertama, apakah pembuatan surat sakit secara online dapat dibenarkan meskipun tidak ada interaksi tatap muka? Kedua, bagaimana pendekatan kriminologi dapat diterapkan pada surat sakit online dalam Undang-Undang Nomor 29 Tahun 2004 tentang Praktik Kedokteran? Meskipun layanan surat sakit online memberikan kemudahan bagi pasien dalam mendapatkan surat sakit tanpa harus datang ke klinik atau rumah sakit, terdapat kekhawatiran bahwa layanan ini dapat disalahgunakan dan menimbulkan masalah hukum. Dalam konteks ini, penting untuk mempertimbangkan dampak dari pembuatan surat sakit online terhadap praktik medis dan kesehatan masyarakat secara keseluruhan. Penelitian ini menggunakan metode penelitian hukum normatif dengan pendekatan perundang-undangan dan konseptual untuk mengkaji peraturan hukum yang berlaku dan prinsip-prinsip kriminologi yang relevan. Hasil penelitian ini menyimpulkan bahwa pembuatan surat sakit secara online tidak selaras dengan Undang-Undang Nomor 29 Tahun 2004 dan melanggar Kode Etik Kedokteran Indonesia. Oleh karena itu, perlu dipertimbangkan kembali penggunaan layanan surat sakit online dan implikasi hukum serta dampaknya terhadap kesehatan masyarakat.

**Kata kunci:** Kriminologi, Praktik Kedokteran, Surat Sakit Online

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## Introduction

The primary legal basis in Indonesia is based on Article 1 Paragraph (3) of the 1945 Constitution, which cannot conflict with these regulations. As a legal state (Rechtsstaat). Indonesia lives the state's life based on law, not politics or the economy, and is responsible for protecting the people (Hadi et al., 2020).

Every need of the community regarding these matters receives attention and guarantees from the government, one of which is contained in Article 28 of the

1945 Constitution, which regulates the rules related to the rights owned and enjoyed by the people of Indonesia. One of them is the right to health, both in the form of service and the practice process carried out by medicine must be based on the implementing regulations as applicable law.

Health is a significant factor in measuring the success of human development, and it can be said that humans will only live productively with health. Health is also part of Human Rights which must and must be protected by the Indonesian people as stated in the 1945 Constitution (Siswati, 2013). Based on Article 28 H Paragraph (1) of the 1945 Constitution, medical assistance and treatment are very important for human health, which is the basis for human beings to carry out their lives and the state's life. Thus, professional doctors who are experts in the health science field are needed to provide treatment and help to people who are sick or need health services (Isfandyarie et al., 2006).

In its implementation, every effort made to improve the degree and health of the community to the highest level is carried out based on the principles of participatory, non-discriminatory, sustainable protection (Ricky, 2020). These things are essential for the formation of Indonesian human resources in showing the resilience and competitiveness of the Indonesian nation. (Isriawaty, 2015). As prominent supporters in the health sector, doctors have an essential duty to provide health services. The duty is directly related to medical actions against a person (patient) as part of the science, technology, and competition that doctors have in their education and training (Soewono, 2006).

Popularly (sociologically), the definition of medical practice (the practice of medicine) is the application of medical or surgical agencies to prevent, relieve, or cure disease, or aid natural functions, or modify or remove the results of physical injury, which refers to the direction of activities (Afandi, 2021). In line with Law Number 29 of 2004 concerning Medical Practice, article 1 point 1 makes the legal definition of medical practice very general, namely a series of activities carried out by doctors and dentists for patients in carrying out health efforts. Combining these two definitions requires a professional relationship between doctor and patient.

In another definition, medical practice is a learned professional practice mastered by graduates of medical education to prevent and alleviate or cure diseases and wounds, referring to the competence of doctors as professionals providing medical services, as referred to in article 1 number 11 of the Medical Practice Act. It means that doctors must have a responsibility as the first party (obligation), which is the inherent responsibility, and prepare themselves before providing medical services they must be competent.

From the description above, health services carried out by doctors can be carried out if they have fulfilled the prerequisites and licensing requirements as outlined in Law No. 29 of 2004 concerning medical practice, to be precise in Article 29 paragraphs 1 and 3, which states:

1. Every doctor and dentist who practices medicine in Indonesia is required to have a doctor's registration certificate and a dentist's registration certificate;
3. The following requirements must be met to obtain doctor's and dentist's registration certificates.

- a. Having a doctor, specialist, dentist, or specialist dentist degree;
- b. Having a statement letter of having taken the oath/pledge from a doctor or dentist;
- c. Having a certificate of physical and mental health;
- d. Having a competency certificate;
- e. Willing to make a statement to comply with and implement the provisions of professional ethics.

Thus, it is evident that doctors provide health services according to applicable professional standards. Therefore, the medical profession belongs to someone with in-depth knowledge and skills to provide healing for someone diagnosed with an illness. A doctor is a person who knows about healing diseases and has the authority and license as stipulated in the health services law (Suganda, 2017).

It can be understood that the relationship between doctor and patient begins with an unequal relationship (Guwandi, 2003). This is because doctors have a higher position and status than patients regarding position, knowledge, and all scientific aspects of medicine. Meanwhile, patients have limitations in this field, so a balance is needed for both to get as good health services as they should.

The doctor-patient relationship is created when the patient contacts the doctor to request health services for their illness. And with that intention, the doctor is considered the most capable person to provide help and treatment (MUSTAJAB, 2013). On the other hand, this relationship is no longer over time. Because leading legal experts and doctors have developed the crucial aspects that a patient has, among them outlined in Article 25 paragraph (1) of the United Nations Universal Declaration of Human Rights (UDHR) 1948, the basic right to health care and the right to self-determination. From this aspect, it can be seen that the relationship between doctors and patients has continuously developed to be balanced with each other; This can be seen from the shift of the relationship to a partnership pattern where patients are no longer awkward and passive in consulting their health problems to doctors.

Article 50 Law no. 29 of 2004 concerning medical practice has explained that the minimum ability limits a doctor must master in carrying out his professional practice independently made by professional organizations are knowledge, skills, and professional attitude, which means knowledge, skills, and attitudes.

With all the above rules, it is known that doctors have the capacity and authority to provide help and treatment to patients. Along with the times when patients get health services, they are no longer awkward and passive. This is due to the amount of scientific information widely available about medical science and other scientific aspects.

With permission and authority, a doctor can examine a patient about the disease or whatever is felt or what is suffered by the patient. The doctor takes all forms of medical action that must be carried out according to medical knowledge to cure the patient. Then, if the doctor feels that the patient needs medical action in treatment and rest, he will provide a sick note following applicable regulations.

Doctors must be careful in issuing sick notes. Both general practitioners and dentists with a registration certificate have the authority to practice according to

their knowledge and abilities, one of which is issuing medical certificates. This is stated in Law Number 29 of 2004 at point 8 concerning Medical Practice. Various types of medical certificates based on their importance are as follows.

1. Sick notes which states that someone is ill and needs to stay off from exams, work, or school and in court proceedings.
2. Health certificate to apply for a job or insurance
3. A birth certificate, to record the baby's data, contains when he was born and the names of his parents.
4. Death certificate to record patients who died in the hospital.
5. *Visum et ripertum* in the interest of justice, carried out at the request of the investigator to clarify a case.

Sick notes issued by doctors are sometimes misinterpreted and misused for certain purposes. Sick notes are sometimes used for personal interests, both at school and work. With more and more doctors who are experts in their fields and more clinics opening as treatment places, sick notes are easier to obtain.

The legal issues related to sick notes from doctors are not only those described above. There is a significant shift, along with technological advances, wider public access, and convenience in the era of globalization, in terms of the ease of obtaining sick notes. Sick notes that were initially only obtainable after direct diagnosis (face-to-face) can now be obtained by online examination. This activity can lead to aspects of criminal law violations.

Online forms of health services and sick notes have received attention from the wider community. By looking at data in October 2019, DR Search published a report on "understanding of the Wellness market," which clearly explains the use of health services in Jakarta. They explained that of the 600 respondents involved, 57.7% of respondents made Halodoc the top of mind of digital-based health services. The following consecutive positions are Alok Dokter at 28.5%, Klik Dokter at 10.5%, Mobile JKN at 8.3%, and Tanyadok at 7.3% in the fifth position. This explains that Halodoc has succeeded in creating awareness among users (Indriyarti & Wibowo, 2020).

Various health services in digital form through applications are very beneficial, especially during the Covid-19 Pandemic. These applications are useful during this period because people are prohibited from doing various activities outside the home. Such health services are certainly worth using. However, these services can also be detrimental to patients. This is because diagnostic activities carried out online certainly do not guarantee people get the desired results.

On the other hand, Law No. 29/2004 on Medical Practice requires a direct diagnosis or medical examination, not just a request to obtain one. Regarding activities like this, there needs to be a discussion about the legal status of the law or the legal basis for its implementation. Does it fulfill the material and formal aspects of criminal law? Or is it like a modern form of crime? If there is an online misdiagnosis, the patient is at a disadvantage. Ironically, sick notes can also be accessed by all parties to gain personal benefit from the letter, which is used to avoid work and many other things.

Crime is defined in the basic sense of criminal law (juridical normative). Crimes or harmful acts, in the normative juridical sense, are acts as realized (in-abstract) in criminal regulations. Meanwhile, crime in the criminological sense is a human action that violates the norms that concretely live in a society (Andrisman, 2009). Next, Moeljatno put forward the elements of a crime as follows: 18 (a) human actions; (b) complies with the formulation of the law, (c) is against the law. As for criminal law, there is a process of criminalization, the process of decriminalization, and process of depenalization (Alam & Assad, 2018).

Criminology in criminal law is the science of understanding the forms of crime from various deviant behaviors as a criminalistic means. As a pure science with an objective way of working, criminology can be used for practical purposes (Situmeang, 2021). Criminology is a science that investigates and discusses the origins of crime (criminal etiology, criminal etiology). Crime can be seen as something that is not only a violation of the law but a human action and a social phenomenon (Prakoso, 2017).

Crime often concerns aspects of social phenomena, which are old and continue to develop with the times. JE Sahetapi often states that crime is closely related to the development of society. It means that the higher the culture and the more modern a nation, the more modern the forms of crime committed, both in nature and how they are carried out. Efforts to eradicate crime become complicated (Situmeang, 2021).

Wolfgang, Savitz, and Johnston, in *The Sociology of Crime and Delinquency*, define criminology as a collection of knowledge about a crime that aims to gain knowledge and understanding of the symptoms of crime by studying and analyzing scientific explanations, uniformity, patterns, and causal factors. Criminology concerns crimes, criminals, and society's reaction to them.

Based on the explanation above, it is known that the rise of health service applications in online form has led to the issuance of sick notes online as part of health services. From the phenomenon that occurred, the legal aspects of issuing online sick letters must be examined. To obtain concrete legal certainty, it is necessary to study whether this is a criminal offense or a form of a modern criminal offense. Based on this background, the author wants to examine the practice of providing online sick letters in the view of criminological studies.

## **Research Problems**

Based on the description and explanation above, the author wants to examine the following. First, to what extent can the issuance of medical certificates online be justified, even though they are made without face-to-face interaction? Second, how is the criminology approach to online sick notes in Law Number 29 of 2004 concerning Medical Practice in science?

## **Research Method**

This research is categorized into normative legal research based on the issues and themes raised as research topics. The research approach used is philosophical and analytical; research focuses on rational views, critical analysis,

and philosophy, and ends with conclusions that aim to produce new findings as answers to the main problems that have been determined (Ishaq, 2017). And will be analyzed with the descriptive analytical method by describing the applicable laws and regulations related to legal theory and positive law enforcement practices related to the matter (Marzuki, 2013).

## Discussion

### Legal And Ethical Validity of Issuing Medical Certificates Online

Health is a human right and an important means for realizing other human rights. Food health is one of the many aspects of human well-being necessary for fulfilling human rights. Health also plays an essential role in empowering people to carry out other activities that will improve welfare.

Can human rights be upheld? Theoretical, yes. Human rights are inherent in humans and empower individuals (right holders) to demand that the State (duty holders) comply with the obligations of these rights. However, a contrast is noted regarding the differences in enforcement between civil and political rights (e.g., rights to life, liberty, property, etc.) and economic, social, and cultural rights (ESCR) about living conditions and access to material and cultural goods. (including the right to health) (Nikken, 2010). Civil and political rights result in obligations, and there is no dispute that they can be enforced. The ESCR provides a means or conducts obligation and can be viewed as enforceable only to the extent that the State has sufficient resources; therefore, the right to health is often thought of as a "wish."

The right to health is a major task for all countries in the world. Health is inherent to human rights, as stated in Article 28H of the 1945 Constitution, which states that everyone has the right to live in physical and mental prosperity, have a place to live, have a good and healthy environment, and receive health services. Unfortunately, equitable distribution of health services for all Indonesians, as an archipelago with more than 17,000 islands, is not easily realized (Kuntardjo, 2020).

With the increasing popularity of the internet in recent years, all industries have focused on carrying out enterprise business operations through convenient, fast, and accessible applications and platforms. The development of the internet has also influenced the healthcare industry to digitize its business (Ye et al., 2022). With a rapidly developing economy, people's incomes are increasing yearly, increasing consumption power and demand for online health services.

Health services, as intended, are carried out directly or face-to-face. As described above, health services have now developed into services in online or digital form. This kind of activity benefits patients and doctors with access to different places. Service efforts in digital or online form sometimes need to be considered.

The health aspect is one of the most important things in its implementation. It is because health service activities are closely related to human life. On the other hand, many malpractice cases affect the doctors themselves. With the presence of health services in online or digital form, especially in Indonesia, there has been a shift or misalignment of existing regulations (Adeyani, 2019).



These four principles are equally not considered in online or digital-based services. The 2012 Indonesian Code of Medical Ethics (KODEKI) in Article 2 states that:

"A doctor must always make professional decisions independently and maintain professional behavior to the highest standard." Professional behavior here can be interpreted as doctors examining patients before providing therapy based on the diagnosis made".

Aspects and actions like this are certainly not implemented in online or digital-based services as the basic rules for implementing the medical code of ethics. It should be noted beforehand that the regulation of medical Practice is a series of activities that doctors and dentists carry out for a patient in making efforts in the health sector. Based on Article 3 of Law NO 29 of 2004 concerning Medical Practice, the regulation of medical practice aims to:

1. protect patients;
2. improve and maintain the quality of medical services provided by general practitioners and dentists;
3. provide legal certainty to the community, doctors, and dentists

Based on the description above, it can be concluded that doctors and dentists will carry out a series of activities in the form of examination, diagnosis, and treatment as intended and mandated by Law No. 29 of 2004. In Law No. 29 of 2004, they are mandated to carry out the intended practice. Doctors and dentists are professional doctors who have graduated from medical education from domestic and foreign universities, which are certainly recognized by the government of the Republic of Indonesia based on applicable laws and regulations.

In addition to carrying out this medical science, general practitioners and dentists need other health training before practicing, and in practice, those who will practice in Indonesia are required to have a registration certificate known as (STR) issued or issued by the Indonesian medical council. Then, doctors and dentists are also charged with what a Practice Permit (SIP) must be owned by a doctor and issued by an authorized agency official in the area where the doctor's Practice is carried out. Then doctors and dentists are also charged with what a Practice Permit (SIP) means, which must be owned by a doctor and issued by an authorized agency official in the area where the doctor's Practice is carried out.

Problems with health services in digital or online form have received the attention of the wider community because there has been a shift in the practice dynamics from face-to-face to digital or online forms. This kind of Practice heeds or overrides the rules contained in Law No. 29 of 2004 concerning Medical Practice. Medical Practice does not have STR and SIP as the basis for doctors and dentists to practice.

Furthermore, if health services in digital or online form have violated the rules as intended, what about online sick notes? Given this, many advertisements appear in electronic media for 15 minutes (*Tuai Kontroversi, Surat Sakit Online Diperbolehkan Di Indonesia?*, n.d.). This ad and application guarantee that patients

can get sick notes in digital form and guaranteed data by consulting the doctor in question. as the first start of this kind of activity being carried out; indeed, in its implementation, the patient will be asked for proof of legal validation such as an ID card and driver's license. A doctor's certificate is a letter issued by the hospital, health center, or doctor explaining that the patient is sick. So it takes time to rest. A doctor's certificate can be used as an attachment to a permit when someone is absent from work or school due to illness.

The issuance of sick notes digitally or online also received a response from the CEO of PT Fast Healthy Indonesia, the parent company of SuratSakit.com, Eka S. Oktalianto, who explained that the 15-minute sick note does not mean it was made without an assessment process. Users still have to explain their symptoms of illness through a self-filled questionnaire. After that, the user can choose a rest period of one to three days before finally being assessed by a doctor, whether he is entitled to receive a sick note or not.

The legality of carrying out doctor examinations through applications or online is contained in Article 3 of the Indonesian Medical Council Regulation No 74 of 2020 concerning Clinical Authority and Medical Practice through Telemedicine during the Covid 19 Pandemic in Indonesia. The legal basis and activities like this are also only during the Covid pandemic. After the pandemic subsides, this kind of activity certainly does not need to be used. Many aspects are feared to threaten the patient's life and health if the examination is carried out online or through an application..

However, such activities are also risky. The government does not issue official standards of professionalism for doctors, so diagnosis enforcement is vulnerable. Another problem arises when the patient has a motive to use any means to obtain the sick notes, for example to avoid work or other activities that require a doctor's certificate. It will certainly be detrimental if there are patients who try to obtain sick notes in dishonest ways. Therefore, medical examinations should be conducted in person and face-to-face.

Activities like this can also be considered a form of modern crime. It violates the medical code of ethics and is subject to criminal penalties for providing and facilitating activities like this. Besides the dubious procedure, the legality of the sick note is also questionable. Violation of this activity is seen in CHAPTER I Article 7 KODEKI, which confirms that "Every doctor only provides information and opinions that have been checked for their truth"(*Surat Keterangan Dokter | IDI KOTIM*, n.d.).

In recent years, discussing the possibility of issuing illness certificates online in Indonesia has gained prominence. The influence of technology in many industries, including health care, is growing in today's information era (Strehle & Shabde, 2006).

One of the hot discussions is the possibility of issuing medical excuses electronically. With the Medical and Health Act governing the practice of medicine in Indonesia, the critical question is to what extent the justification of issuing sick notes online can be justified.



The Medical Act is the foundation for understanding how medicine is practiced in Indonesia. According to the first paragraph of Article 29 of the Medical Law, the doctor must personally examine each patient. Any necessary medical care, such as a physical checkup and an anamnesis, will be provided.

However, telemedicine is becoming increasingly mainstream and acceptable in many nations as technology improves. With telemedicine, both the doctor and patient are located in different locations but communicate with one another electronically to provide medical care. The Telemedicine Organization Regulation (Permenkes) No. 20 of 2019 is the governing document for telemedicine in Indonesia.

In the framework of a sick note, telemedicine services comprise examinations, consultations, monitoring, and other medical acts carried out electronically per Article 4 paragraph (1) of the Minister of Health's No. 20 of 2019. Whether or not sick time is considered part of telemedicine services is still being determined by this legislation.

The Health Care Reform Act is our next topic of inquiry. According to Article 4 of the new health law, everyone should access affordable, high-quality medical treatment. For people who have trouble getting to the doctor's office, online sick note services may be an appropriate and practical option for providing the care they need. However, online sick notes are not explicitly regulated in the article.

Medical ethics, legality, and the quality of healthcare provided to patients should all be part of the discussion regarding issuing sick notes online. The following points need to be considered.

1. When diagnosing and treating patients, medical ethics dictate that physicians must first perform a physical examination (*WMA - The World Medical Association-WMA International Code of Medical Ethics*, n.d.). Ethical concerns arise when a sick note is issued online rather than in person since the doctor needs to examine the patient thoroughly. Patients and any third parties relying on such sick notes also risk the information being misused or manipulated.
2. Validity in Law  
Any health-related activity in Indonesia must comply with the country's legal requirements. The medical legislation and the health code mandate physicians perform in-person examinations before making treatment recommendations or prescriptions. Doctors risk legal repercussions if they issue an online certificate of illness without first meeting with the patient in person.
3. The Standard of Medical Care
4. The standard of care a patient receives is an essential factor in determining whether or not to issue an online sick note. Good medical care requires the doctor to diagnose and provide appropriate treatment, considering the patient's condition. One crucial step is to have the doctor conduct a complete physical examination. If a doctor issues a sick note online without

seeing the patient personally in the first place, they may not be able to provide the best care possible (Sood et al., 2007).

However, there are good reasons to issue a sick note online, such as:

1. Convenience of Use
2. Online sick note services may be more beneficial for those living in rural areas with mobility issues. With this service, patients can get medical advice from a doctor without having to visit a clinic or service physically. (Richard, 2001)
3. Service quality, price, and turnaround time  
Both patients and doctors can benefit from the time and money savings of electronic sick notes. Patients save time by not traveling to clinics, and doctors gain flexible schedules by providing care digitally (Richard, 2001)

Nonetheless, it is still hard to explain the online issuance of sick notes in Indonesia without a face-to-face examination, given the principles of law and medical ethics that require doctors to perform direct examinations of patients. More work is required to clarify the laws around issuing sick notes online and to guarantee that patients can benefit most from this trend without compromising medical ethics or the quality of health services.

Here are some possible next steps to facilitate the online issuance of Indonesian medical certificates.

1. Analyze the current rules.  
The government should review medical and health laws and relevant stakeholders to account for technological advances and societal needs. This may involve establishing standards for the online issue of the medical certificate, as reviewing existing regulations ensures that they adequately protect patient privacy and uphold medical ethics.
2. Establishing benchmarks for service excellence  
To guarantee that patients will keep receiving high-quality care, it is necessary to apply online healthcare quality standards. Some examples of such regulations include ensuring the platform has a solid security system and requiring doctors to perform a thorough virtual examination before issuing a sick note.
3. Medical school and residency programs  
To provide services that align with ethical norms and professionalism, doctors who wish to offer online sick note services need specialized training. virtual consultation management, disease diagnosis via remote examination, and data security are all topics that could be included in such courses.
4. Control and assessment  
A monitoring and evaluation system must be implemented for the online sick note services to continue to comply with applicable standards and to deliver maximum advantages to patients and doctors. Communities, professional groups, and even governments can participate in this kind of monitoring.

Thus, to issue online sick notes in Indonesia, there needs to be extensive research involving multiple stakeholders (the government, professional groups, and the general public). To ensure that online sick leave services can provide maximum benefits for patients and doctors without compromising medical ethics or healthcare quality, it is necessary to review regulations, implement service quality standards, provide education and training for doctors, supervise, and evaluate. The issuance of online sick notes has the potential to be an efficient and successful solution, especially in the recent technical developments, provided it is adequately regulated and adheres to the norms of medical ethics.

### **Criminology Approach to Online Sick Notes in Law Number 29 of 2004 Concerning Medical Practice**

As explained above, health services using online application media are a form of crime. It is not following the Code of Medical Ethics in terms of service and the issuance of online sick notes. For this reason, the author wants to study it by using criminology as a legal science approach to understand the factors that influence the perpetrator in committing the act.

Etymologically, criminology comes from Greek crime and logos (science). Thus criminology is the study of crime (Bosu, 1982). Criminology in science is a science that studies related aspects of criminals or crimes and intends to study criminal methods of committing crimes, then try to find out the main factors causing crime and how to seek and find ways to prevent and overcome it (Alam & Assad, 2018). Forms of crime in health services by application or online will be studied in criminology using the Differential Association theory.

The theory of Differential Association criminology, born and developed from social conditions (social heritage) in the 1920s and 1930s, saw that crime had become part of a field in sociology. And for the first time, a US sociologist named Edwin Sutherland, in 1934, in his book *Principles of Criminology* put forward the theory of Differential Association. This theory is heavily influenced by William I. Thomas, the influence of Symbolic Interactionism by George Mead, Park, and Burgess and the ecological school by Clifford R. Shaw and Henry D. McKay, and Culture Conflict by Thorsten Sellin (Santoso & Achjani Zulfa, 2003) which is divided into two versions, in 1939 and 1947 (Darmawan & Purnianti, 1994)

Criminology is a branch of public law that seeks to prevent crime by defining acts or omissions that cause public disorder and determining the legal reaction to those actions. In addition, if a crime is committed, public law will determine the degree of responsibility of the perpetrator and how to select and prosecute these reactions based on the actual personality of the perpetrator (Fathi, 2016). Finally, criminology will determine the suitable means of correction for the offender.

Edwin Sutherland in 1939 put forward theories of systematic criminal behavior, cultural conflict, social disorganization, and differential association. According to Romli Atmasasmita, the notion of systematic is career criminal or organized crime practices. The definition of the organized practice of crime is behavior that supports the norms that have developed in society. Then in 1947, Edwin Sutherland replaced the term "social disorganization" with "differential

social organization." By replacing these terms, Sutherland shows various social conditions with internal values and goals, each to be used as a different means of achieving the goal (Atmasasmita, 2007). This theory can be used for children and adults. This can be seen in the following explanation, which explains the presence of crime in all elements of social structure. Explains why some people in high-crime areas refrain from criminality. It can apply to adults and juveniles (Siegel, 1989). In the case above, if health services and sick notes are issued in the form of applications or online, the perpetrators have committed an organized crime.

The Differential Association Theory, which developed in 1939 in this problem, is seen from the word systematic criminal or structured crime that can be found in the perpetrators in placing advertisements, then seen by all people who need health services online and can be reached very quickly. All aspects of the application make it easy for perpetrators to attract patients' attention to consult about their health. Then the development of this theory in 1947 with the term "social disorganization" with "differential social organization." Social factors are developing rapidly, so actors with this development look for media facilities, such as facilities in health services, to achieve their goals.

The theory also wants to find and discover how these values and norms are communicated or transferred to other groups. Ronald L. Akers and Christine S. Seller stated the following (Akers & Seller, 2004):

*The differential association has both behavioral-interactive and normative dimensions. The interactional dimension is the direct association and interaction with others engaging in certain kinds of behavior, as well as the indirect association and identification with a more distant reference group. The normative dimension is the different pattern of norms and values an individual is exposed to through this association.*

According to Akers' opinion, the theory has two significant dimensions. First, the interactional dimension of behavior governs interactions and associations made with other people in certain behaviors. Second, the norms dimension focuses on exemplary patterns of different norms and values that direct individuals.

Furthermore, Edwin Sutherland defines Differential Association as "the contents of the patterns presented in the association would differ from individual to individual. In this sense, good patterns are introduced between individuals to other individuals. Not in the sense that association with evildoers alone causes evil, but what is most important and primary is the content of communicating with this person (Widodo & Triwanggono, 2018).

Based on the description above, Edwin Sutherland, in the theory of Differential Association, proposes nine framework propositions that contain the process of occurrence of evil behavior, namely (Atmasasmita, 2007):

1. *Criminal behavior is learned. In other words, this means that criminal behavior is not inherited.*
2. *Criminal behavior is learned in interaction with other persons in the process of communication. This communication is verbal in many respects but also includes "the communication of gestures".*

3. *The principal part of the learning of criminal behavior occurs within intimate personal groups. This means that interpersonal communication agencies, such as movies and newspapers, play a relatively unimportant part in the genesis of criminal behavior.*
4. *When criminal behavior is learned, the learning includes (a) techniques of committing the crime, which are sometimes very complicated, sometimes very simple. (b) the specific direction of motives, drives, rationalization, and attitudes.*
5. *The specific direction of motives and drives is learned from definitions of the legal codes as favorable on unfavorable. Some societies and individuals are surrounded by persons who invariably define the legal codes as rules to be observed. In contrast, in others, he is surrounded by persons whose definitions favor violating legal codes.*
6. *A person acts badly because of an excess of definitions that support law violation, rather than definitions that do not support law violation.*
7. *Differentiation Association may vary in frequency, duration, priority, and intensity.*
8. *The process of learning criminal behavior by association with criminal and anticriminal patterns includes all the mechanisms involved in any other learning.*
9. *While criminal expresses general needs and values, it is not explained by those general needs and values since non-criminal behavior represents the same needs and values.*

Through the 9 propositional frameworks above, the writer's attention is: First, at point 2. The activities of actors as online health services are carried out in the form of online communication with patients. This facility can indirectly be an advantage for actors to gain profit. Second, on point 4. By implementing good techniques or behavior in terms of language easily understood by patients, encouragement, and efforts to get sick notes online as the patient's wish, conditions are fulfilled. Third, in point 6, actors in this matter use legal aspects such as having a legal basis for practice, with this legal basis, giving the perpetrators get the opportunity to get what they want, even though this violates the code of ethics in question.

In addition to several framework propositions above, the theory of *differential association* also has strengths: First, it can explain the causes of a crime arising from social ills. Second, being able to explain how someone, due to their existence/through the learning process, becomes evil. Third, this theory is based on facts and is rational (Atmasasmita et al., 2011)

As described above, Edwin Sutherland emphasized that evil behavior can be learned from others by using communication and interaction methods. His basic premise was that delinquency, like any other behavior, is a product of social interaction. Evil behavior plays a role in the behavior process in social interaction, both from individual to individual, in the form of mass media and other intermediaries.

The pattern of perpetrators spreading health care services online and their sick notes can make the perpetrators want to attract patients who do not necessarily have the disease but to make it easier to get sick notes online for purposes that are not supposed to be carried out. Actors as professionals in carrying out health services can lead to double crimes in terms of online health service actors who are not by the medical code of ethics and patients with online mechanisms. It is difficult to find the legitimacy of the patient's illness. So, actors can benefit from this aspect,

Next, as actors, the medical profession will get an advantage by not using medical equipment in online examinations; there is also very little to get the patient's certainty. Because activities like this only use online media and do not use medical equipment. So it will be very detrimental to patients, and vice versa can benefit criminals.

Based on the description above, it is reiterated that criminology itself is a branch of the auxiliary science of law to examine legal aspects from the point of view of the perpetrators of crimes. With this, online-based health services and sick letters are carried out to benefit and attract patients to achieve their desired goals.

## Conclusion

In conclusion, issuing online sick notes in Indonesia poses ethical, legal, and quality of care concerns, as doctors must perform a physical examination before issuing such certificates. However, online sick notes can be convenient and cost-effective for patients and doctors. To address these issues, the government must review and establish regulations, implement service quality standards, provide education and training for doctors, and supervise and evaluate the online sick certificate service. Furthermore, the theory of differential association by Edwin Sutherland can be applied to explain how online health service actors can benefit from this practice and attract patients who do not necessarily have the disease. Thus, it is important to consider both the legal and ethical implications of online sick notes and ensure that the issuance of such certificates adheres to medical ethics and healthcare quality standards.

## Suggestion

Doctor's certificates must be made based on professional ethics, doctor's oath, and circumstances without intimidation or bribery. The issuance of a doctor's certificate must be based on applicable laws and regulations. In addition, the Medical Ethics Honor Council is needed to maintain the quality of the medical profession. If, in the doctor's certificate, things are found inappropriate and meet the elements of a criminal offense, there must be criminal liability.

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