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Legal Review of the Administration of Aesthetic Clinics Consumer Protection and Legal Liability in the Administration of Aesthetic Clinics: A Normative Juridical Analysis under Indonesian Health Law

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Abstract

Background: The rapid growth of aesthetic clinics reflects changing lifestyles and increasing demand for beauty care services. However, consumers often face difficulties in selecting safe and trustworthy aesthetic services, resulting in complaints, legal disputes, and potentially fatal consequences.

Objective: This study analyzes Indonesia's legal framework governing aesthetic clinics, the gap between normative provisions (*das Sollen*) and their implementation (*das Sein*), as well as the forms of consumer protection and legal liability applicable to aesthetic clinic services.

Method: This normative juridical research employed statutory, conceptual, and case approaches. The primary legal materials included Law Number 17 of 2023 concerning Health, Law Number 8 of 1999 concerning Consumer Protection, and Minister of Health Regulation Number 17 of 2024. These materials were supported by secondary and tertiary legal sources, which were analyzed using descriptive and interpretive methods.

Results: Significant implementation gaps were identified, including noncompliance with licensing requirements, inadequate informed consent procedures, invasive aesthetic procedures performed by unqualified personnel, and weak supervision by regional health authorities.

Conclusion: Although the regulatory framework is normatively comprehensive, its implementation remains inadequate. Strengthening consumer protection requires improved public education, enhanced regulatory supervision, and consistent enforcement of civil, criminal, and administrative liability mechanisms to ensure consumer and patient safety.

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INTRODUCTION

The provisions of the 1945 Constitution of the Republic of Indonesia affirm the state's commitment to providing the best possible protection for society by establishing a proper and healthy living environment, including within the context of the public's right to health services. The state is obligated to provide adequate health services and public service facilities, while the public is entitled to access such rights. Furthermore, under positive law, Law Number 17 of 2023

concerning Health stipulates that everyone has the right to health (Presiden RI, 2023). This right is recognized as a fundamental human right and must be guaranteed without discrimination. Therefore, every individual has an equal right to access health service policies based on established parameters relating to safety, quality, and affordability, ultimately supporting the realization of the highest attainable standard of health as collectively expected by society. Legislation serves as a fundamental instrument connecting political governance with public policy objectives by defining both the authority and limitations of governmental power. Within this framework, laws constitute a hierarchically structured normative system in which lower-level regulations must remain consistent with higher-level legal norms (*das Sollen*) (Mdoda et al., 2024; Sutrisno & Jazilah, 2019).

Changes in public perspectives during the current post-truth era, together with advances in science and technology, have significantly influenced contemporary lifestyles. Certain segments of society have increasingly perceived beauty care services as a basic necessity. This condition has contributed to the growth of various beauty care service providers, resulting in an expansion of skin-care offerings and a significant increase in the number of aesthetic clinics. According to data from the Indonesian Ministry of Health, the number of registered clinics providing aesthetic services has increased substantially in recent years. The National Consumer Protection Agency (BPKN) has also recorded increasing consumer complaints related to beauty services, including adverse reactions and services performed by unqualified personnel (Nasional, 2023),. These indicators demonstrate the urgency of examining the legal framework governing aesthetic clinic administration. Certain groups within Indonesian society face difficulties in determining which aesthetic clinic services are safe and reliable in addressing their skin concerns while supporting their desired appearance. As consumers, individuals must be able to make informed choices because each person has different skin conditions and aesthetic concerns. Therefore, beauty care services require specialized expertise to address such issues appropriately. In this context, consumer trust in service providers becomes an essential foundation in establishing a contractual legal relationship between aesthetic service providers and consumers, thereby creating comfort, legal certainty, and optimal benefits from the services provided.

Treatment at aesthetic clinics also involves potential risks. Many consumers may experience incompatibility with aesthetic products or treatments recommended by physicians, even after undergoing consultation. Furthermore, patients may face risks arising from medical negligence during treatment procedures. If a patient experiences adverse effects after receiving products or treatments from a physician or believes that the physician has provided an inappropriate prescription or an inaccurate diagnosis, legal disputes may arise (Shafira & Simatupang, 2023). Various legal issues may occur, including misuse of business licenses, unauthorized medical practices, products without distribution permits, products with labels that fail to comply with applicable legal standards, malpractice cases, and aesthetic clinics distributing prohibited substances that may endanger human life.

These problems indicate that although regulations governing aesthetic clinic practices in Indonesia have been established, their implementation and supervision remain inadequate. This situation creates potential risks for consumers and highlights the need to strengthen regulatory oversight and increase public awareness regarding consumer rights. The regulation governing aesthetic clinics in Indonesia is Law Number 17 of 2023 concerning Health, which stipulates that aesthetic procedures may only be performed by qualified medical personnel with appropriate competence and authorization. However, in practice, unauthorized aesthetic clinics continue to operate, while consumers' legal awareness regarding their rights remains limited (Presiden RI, 2023).

Aesthetic clinics, as non-hospital health service facilities, bear legal responsibilities similar to other healthcare providers in ensuring patient safety, particularly when performing invasive medical procedures or high-risk aesthetic treatments. In medical disputes, aesthetic clinics may incur civil and criminal liability if negligence or malpractice results in harm to patients. Such responsibility applies not only to medical personnel, including physicians and nurses directly involved in treatment, but also to clinic management, which is responsible for ensuring the qualifications of healthcare personnel and compliance with standard operating procedures.

Informed consent, or consent to medical treatment, represents an essential element of legal protection for both clinics and patients. Without valid informed consent, an aesthetic clinic may be deemed to have violated applicable legal obligations (Karni et al., 2023). Therefore, this research examines the forms of legal protection available to consumers in relation to aesthetic services provided by aesthetic clinics and the forms of legal liability applicable to violations occurring within such services.

Based on the foregoing description, aesthetic clinic operators are required to comply with applicable regulatory provisions, ensure the quality of the services and products offered, and assume responsibility for any negligence that occurs. These obligations are essential to protecting consumer rights, particularly because consumer awareness regarding legal protections remains limited and consumers often lack sufficient knowledge regarding the safety and legality of the products and treatments they receive. The government plays a crucial role as a policymaker and regulator. Its role is expected to balance the interests of aesthetic clinic operators and consumers while preventing harm to either party. Previous studies have primarily focused on individual malpractice cases or specific aspects of consumer protection (Karni et al., 2023; Shafira & Simatupang, 2023). However, comprehensive normative analysis examining the interaction between health law, consumer protection law, and administrative regulation within aesthetic clinic administration remains limited. This research distinguishes itself through a holistic normative juridical examination of the regulatory framework established under Law Number 17 of 2023 concerning Health, accompanied by an investigation into the gap between codified legal norms (*das Sollen*) and their practical implementation (*das Sein*) (Presiden RI, 2023). From a theoretical perspective, this study contributes to the development of health law and consumer protection discourse by identifying systemic weaknesses within the regulatory framework. Practically, the findings provide a foundation for policy recommendations aimed at strengthening supervisory mechanisms and improving informed consent standards. More specifically, this research pursues three objectives: (1) to examine the regulatory framework governing aesthetic clinic operations and identify discrepancies between normative provisions and their practical implementation; (2) to evaluate the forms of legal protection available to consumers; and (3) to determine the forms of legal liability applicable in cases of malpractice or negligence.

METHOD

This research adopted a normative juridical methodology, integrating statutory, conceptual, and case-based analytical frameworks within the Indonesian legal context. Relevant literature was utilized to contextualize the identified research problems. Legal materials were collected through documentary studies, comprising primary sources (Law Number 17 of 2023 concerning Health) (Presiden RI, 2023), Law Number 8 of 1999 concerning Consumer Protection (Presiden Republik Indonesia, 1999), and relevant Minister of Health Regulations), secondary sources (scholarly articles and academic publications), and tertiary sources (legal glossaries and encyclopedias) (Puri & Utari, 2026). A descriptive-analytical and interpretive approach was applied. The statutory framework was examined to evaluate the coherence, hierarchy, and consistency of regulations governing aesthetic clinics. The conceptual approach was used to analyze the theoretical foundations of consumer protection, informed consent, and legal liability. The case approach was employed to examine specific instances of aesthetic clinic violations, including the widely reported case of an illegal aesthetic practice resulting in a patient's death in Depok in 2024.

The analytical process was conducted through three stages: a systematic inventory of relevant legal norms; interpretive analysis using grammatical, systematic, and teleological methods to identify normative gaps; and synthesis to assess legal protection and liability frameworks. Legal conclusions were drawn by comparing normative standards (*das Sollen*) with actual implementation conditions (*das Sein*) documented in case reports, government data, and secondary legal literature.

RESULTS AND DISCUSSION

Regulation of the Administration of Aesthetic Clinics

Regulations governing the administration of aesthetic clinics include Law Number 17 of 2023 concerning Health (Presiden RI, 2023); Government Regulation Number 28 of 2024 concerning the Implementing Regulation of Law Number 17 of 2023 concerning Health; and Minister of Health Regulation Number 17 of 2024 concerning the Second Amendment to Minister of Health Regulation Number 14 of 2021 concerning Business Activity and Product Standards in the Implementation of Risk-Based Business Licensing in the Health Sector. Aesthetic clinics fall within the scope of private clinics (Peraturan Pemerintah RI, 2024). According to Appendix B of Minister of Health Regulation Number 17 of 2024 concerning Clinic Business Standards, a private clinic is a clinic established by the community, either by an individual or a business entity. Private clinic activities are classified under the Indonesian Standard Industrial Classification (*Klasifikasi Baku Lapangan Usaha Indonesia*/*KBLI*) number 86105. This type of clinic business is categorized as a medium-high-risk business activity. The business licensing requirements cover location permits, operational permits, and technical permits related to the provision of healthcare and aesthetic services. Under this regulatory framework, clinics function as healthcare facilities that provide various medical services, ranging from primary healthcare to specialist-level services. Clinic ownership may be held by government institutions at both national and regional levels, as well as by private individuals and corporate entities.

The general business requirements for private clinics may be fulfilled by either individuals or business entities. The clinic profile document must, at a minimum, include the clinic name and complete address, vision, mission, organizational structure, service hours, practice schedules, types of procedures and examinations provided, scaled building layout plans, and photographs of the clinic building and service rooms. Clinics must provide facilities, infrastructure, and equipment necessary to ensure service quality; implement occupational safety and health measures for clinic personnel, including medical personnel, other healthcare workers, and supporting healthcare personnel; and establish procedures for controlling and managing hazardous and toxic medical and non-medical waste (*Bahan Berbahaya dan Beracun*/*B3*). Clinic buildings must be located in accessible areas, have strong and permanent structures, and comply with requirements concerning safety, comfort, and ease of service delivery. Furthermore, clinics must provide health and safety protection for all users, including persons with disabilities, children, and elderly individuals, and must operate within smoke-free areas. The determination of clinic locations is based on healthcare service needs, population ratios, and environmental health requirements in accordance with applicable statutory provisions. Specific clinic business requirements include a list of medicines and consumable medical materials; a list of human resources consisting of medical personnel, healthcare workers, and supporting healthcare personnel, including their names, educational qualifications, professional categories, and scope of work within the clinic; complete and valid practice licensing documents for all medical and healthcare personnel according to the clinic location; and cooperation agreement documents with managers of medical and/or non-medical hazardous and toxic (*B3*) waste management services.

Clinic businesses are categorized based on their service capacity into two types. Primary Clinics provide basic medical services, whether general or specialized, while Main Clinics provide specialist medical services or a combination of primary and specialist healthcare services. The term “aesthetic clinic” is not explicitly recognized as a separate category within the regulation, although the regulation provides that Primary Clinics may deliver aesthetic services. This regulatory ambiguity constitutes a significant normative gap: although aesthetic clinics have developed rapidly as a distinct healthcare service category, the existing regulatory framework places them under the broader classification of general Primary Clinics without establishing specific requirements concerning aesthetic procedures, specialized equipment, or professional competency standards. This regulatory *lacuna* weakens the foundation for effective supervisory mechanisms and enforcement.

Legal Protection for Consumers of Aesthetic Clinics

As providers of medically grounded cosmetic services, aesthetic clinics carry substantial legal obligations toward their clientele. The inherently elevated health risks associated with aesthetic interventions make robust consumer safeguards imperative, necessitating rigorous regulatory oversight. Within Indonesia's legal framework, consumers engaging aesthetic clinic services are protected by Law Number 8 of 1999 concerning Consumer Protection (Presiden Republik Indonesia, 1999; Puri & Utari, 2026). This statute enshrines several fundamental rights, including access to accurate and transparent information, assurance of personal safety and security, and the ability to submit complaints concerning goods or services received. More broadly, the law guarantees consumers' rights to safe and comfortable use of products and services, to select offerings that correspond with stated terms and value, to receive truthful disclosures, to lodge complaints, and to obtain legal protection and dispute resolution mechanisms. Within the healthcare setting, aesthetic clinic patients are specifically entitled to receive comprehensive information regarding the qualifications of attending medical practitioners, the nature of proposed procedures, anticipated outcomes, inherent risks, and potential adverse effects. The doctrine of informed consent, which must be obtained prior to any clinical intervention, further reinforces these protections (Hadjon, 1987; Ruron et al., 2026).

The doctrine of informed consent embodies a critical safeguard for patients' fundamental rights and reflects the duty of care incumbent upon medical practitioners. Within aesthetic clinical settings, this consent process must encompass several specific dimensions, including whether the procedure is invasive or non-invasive, the professional qualifications and credentials of the practitioner, realistic treatment expectations and limitations, foreseeable risks and adverse reactions, available alternative interventions, and projected financial obligations. Viewed through the perspective of administrative law, the doctor–patient relationship transcends a purely private arrangement and involves the state's obligation to ensure consumer protection within healthcare services.

In practice, many aesthetic clinics still fail to comply with operational and licensing standards under Minister of Health Regulation Number 17 of 2024, which stipulates that aesthetic services may only be provided by primary clinics that satisfy regulatory requirements and employ medical personnel holding valid practice licenses. According to the Ministry of Health, supervisory inspections have revealed that a significant proportion of aesthetic clinics lack complete licensing documentation or employ personnel without valid practice licenses (Indonesia, 2024). Such non-compliance creates various legal issues, particularly in cases involving medical malpractice, procedural negligence, and services performed by unauthorized personnel. Many aesthetic clinics continue to provide invasive procedures, such as Botox injections, dermal fillers, thread lifts, and laser resurfacing, without fulfilling applicable medical and legal standards, including procedures conducted without physician involvement or without the required official permits.

Consumer protection in the aesthetic clinic sector may be pursued through multiple mechanisms, including submitting complaints to Health Office authorities, initiating civil proceedings for compensation, and pursuing criminal prosecution against negligent operators where applicable. Strengthening supervisory mechanisms, expanding public awareness initiatives, and improving clinic operators' compliance with regulatory obligations are essential to ensuring effective protection of consumer rights. Given that aesthetic services directly involve bodily integrity and health outcomes, the protection of consumer rights under prevailing legislation, particularly Law Number 8 of 1999 concerning Consumer Protection, assumes significant importance (Presiden Republik Indonesia, 1999; Puri & Utari, 2026).

In their capacity as business operators, aesthetic clinics are obligated to provide accurate, transparent, and non-misleading information regarding available services and to ensure the safety of all clinical interventions. Failure to comply with these obligations may result in administrative, civil, or criminal liability. These continuing legal concerns demonstrate weaknesses in supervisory enforcement and limitations in public understanding of consumer rights. A considerable number of clinics continue to operate without fulfilling licensing requirements, employ practitioners who lack appropriate qualifications, or fail to implement adequate informed consent procedures. Consumers seeking legal remedies may submit

complaints through the Indonesian Consumers Foundation (Yayasan Lembaga Konsumen Indonesia [YLKI]), relevant Health Office authorities, or the Ministry of Health; initiate civil litigation to seek compensation; or file criminal reports where evidence of fraudulent practices or medical malpractice exists.

Legal Responsibility in Aesthetic Malpractice

Aesthetic interventions performed in clinical settings entail considerable risks given their direct physical impact on patients. When malpractice occurs, accountability may arise across civil, criminal, and administrative dimensions (Abra, 2025; Soeprapto, 2007; Kaharuddin, 2025). These forms of liability encompass civil compensation remedies, criminal prosecution for professional misconduct, and administrative consequences relating to licensing compliance and professional ethics. These three forms of liability are particularly relevant because aesthetic services occupy a unique intersection between health care services and commercial activities. Civil liability addresses contractual and tort-based obligations; criminal liability responds to the potential risk of bodily harm and public safety violations; while administrative liability ensures compliance with professional standards, licensing requirements, and institutional regulations. In legal terminology, a sanction constitutes a punitive or coercive measure imposed as a consequence of violating established legal obligations. Black's Law Dictionary (Seventh Edition) characterizes a sanction as a penalty or enforcement mechanism imposed upon individuals or entities that violate statutory or regulatory provisions.

a. Civil Liability

From a civil law perspective, aggrieved consumers may invoke Article 1365 of the Indonesian Civil Code, which regulates tort liability (*onrechtmatige daad*). Where patients suffer losses due to aesthetic treatments that fail to comply with procedural standards or are performed by inadequately qualified practitioners, they may have legal grounds to seek compensation. Such claims may include compensation for physical injuries, psychological harm, and economic losses experienced by the affected patients.

b. Criminal Liability

Where malpractice results in bodily injury, criminal prosecution may be pursued under Article 468 of Law Number 1 of 2023 concerning the Criminal Code (*Kitab Undang-Undang Hukum Pidana*), which regulates serious bodily injury and provides penalties of up to three years of imprisonment or a category IV fine. For less severe injuries, the maximum penalty is nine months of imprisonment or a category II fine. In cases resulting in death, Article 467 provides for imprisonment of up to five years or a category V fine. Aesthetic procedures conducted by individuals without medical qualifications or proper professional authorization may also constitute unlawful medical practice under Law Number 17 of 2023 concerning Health. Furthermore (Presiden RI, 2023), if procedures are performed by unauthorized individuals or persons without valid professional licenses, criminal liability may arise under Articles 320–324, which prohibit health professionals from practicing without valid registration certificates (*Surat Tanda Registrasi*/*STR*) and practice licenses (*Surat Izin Praktik*/*SIP*), prohibit health workers from exceeding their authorized scope of practice, and provide for imprisonment, monetary penalties, and permanent revocation of professional licenses for violations.

c. Administrative and Ethical Liability

Clinics or practitioners found to have violated procedural standards may be subject to progressive administrative sanctions imposed by the Health Office, including written warnings, temporary suspension of licenses, and revocation of practice or operational permits. Professional organizations, particularly the Indonesian Medical Association (*Ikatan Dokter Indonesia*/*IDI*), also possess disciplinary authority over members who violate professional ethical standards. Government authorities may impose additional administrative measures against non-compliant clinics or health workers, including official warnings, administrative fines, suspension of operational permits, and revocation of practice or business licenses. Clinics operating without the required permits or violating regulatory standards may face significant legal, financial, and reputational consequences. Under Articles 138 and 439 of Law Number 17

of 2023 concerning Health, serious violations may result in imprisonment of up to twelve years or fines of up to IDR 5 billion (Presiden RI, 2023). The severity of these sanctions demonstrates the legislative intention to treat unauthorized health practices as serious threats to public safety. However, the effectiveness of these sanctions depends heavily on consistent enforcement, which remains a significant challenge as demonstrated in the supervisory analysis above.

The simultaneous application of these three forms of liability is essential to establish a deterrent effect, strengthen legal certainty, and safeguard patient safety. However, in practice, proving aesthetic malpractice cases remains challenging due to inadequate documentation, limited supervision, and insufficient legal awareness among consumers and business operators.

Medical procedures performed without proper authorization may constitute violations of health service standards and may endanger patient safety. Patients who experience losses, injuries, or even death due to procedures that fail to meet professional standards may initiate civil claims against aesthetic clinics. Informed consent constitutes a mandatory legal and ethical requirement before any medical procedure, including aesthetic interventions. The absence of valid informed consent may provide grounds for legal action because it represents a violation of patient autonomy, patient rights, and the principle of professional prudence. This obligation is recognized under Indonesian health regulations and medical ethical principles.

Individuals without adequate medical training, as well as licensed professionals operating without valid authorization, may face legal consequences. The widely reported 2024 incident involving the death of a social media personality at an aesthetic clinic in Depok illustrates such risks, as the individual performing the procedure was subsequently reported to lack appropriate medical qualifications. Article 439 of Law Number 17 of 2023 concerning Health specifically addresses this conduct by stipulating that individuals who falsely present themselves as authorized health professionals may face imprisonment of up to five years or fines of up to IDR 500,000,000.00 (Presiden RI, 2023).

Law enforcement against aesthetic clinics in Indonesia faces various challenges that affect consumer protection and regulatory effectiveness. These challenges must be examined in relation to the regulatory framework discussed above. The issue does not solely arise from legislative limitations but is also influenced by institutional weaknesses and procedural constraints. One significant challenge is inadequate supervision by health authorities, particularly regional Health Offices. Numerous aesthetic clinics continue to operate without complete licensing requirements or without qualified medical personnel who satisfy professional standards. Furthermore, limited legal and health literacy among the public remains a major obstacle. Many patients lack awareness of their rights as consumers of health services, including the right to obtain accurate information, receive safe procedures, and demand accountability from clinic operators. Consequently, cases involving malpractice or procedural violations are frequently underreported or fail to proceed through legal mechanisms due to consumers' limited legal understanding or reluctance to pursue complaints.

Another challenge concerns the weakness of regulatory enforcement and administrative sanction mechanisms. Although licensing and operational standards have been established through Minister of Health Regulation Number 17 of 2024, practical compliance remains inconsistent. The imposition of sanctions, including license revocation and administrative penalties, continues to be implemented inconsistently and lacks sufficient deterrent effect.

From the perspective of law enforcement authorities, the lack of coordination between health regulators and legal institutions also constitutes a significant obstacle. For example, proving aesthetic malpractice frequently requires expert testimony, which is not always readily available or accessible during legal proceedings (Noviandini, 2026; Margono, 2026; Syarief, 2018). The rapid expansion of the aesthetic industry without corresponding regulatory adaptation has created legal gaps that may be exploited by irresponsible service providers. This situation creates tension between economic liberalization within the health sector and the imperative to protect consumers. Comparatively, South Korea regulates aesthetic medicine through a specialized regulatory framework that requires professional certification and mandatory adverse-event reporting. Meanwhile, the United Kingdom's Care Quality Commission

exercises direct oversight over non-surgical cosmetic procedures. Indonesia's current regulatory approach, which places aesthetic clinics within the broader framework of general clinic regulations, differs from these models and highlights the need for more specific regulatory reform (Ahn et al., 2025; Organization, 2021).

CONCLUSION

The administration of aesthetic clinics is currently not fully aligned with applicable legal provisions that establish standards and requirements for clinic operations, including those specifically applicable to aesthetic clinics. A gap remains between regulatory requirements and practical implementation, particularly regarding compliance with the delivery of basic medical services by aesthetic clinics. Legal protection for consumers of aesthetic clinic services remains inadequate and requires strengthening through consumer education, rigorous supervision by health authorities, and effective law enforcement against violations. The legal responsibilities of aesthetic clinics encompass civil liability (including compensation claims), criminal liability (including malpractice-related offenses), and administrative liability (including licensing compliance and adherence to professional ethical standards). The primary contribution of this study lies in demonstrating that the regulatory gap does not arise from the absence of legal norms, but rather from a multi-level implementation deficit involving normative ambiguity, institutional capacity limitations, and inconsistent enforcement of sanctions. Future research should prioritize empirical investigations into supervisory practices at the regional level, comparative studies with jurisdictions that have developed specific aesthetic medicine regulatory frameworks, and longitudinal research examining the long-term impact of Law Number 17 of 2023.

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AUTHOR CONTRIBUTION STATEMENT

Sri Primawati Indraswari was responsible for conceptual development, compilation of legal sources, normative evaluation, interpretation, and drafting of the initial manuscript. Dadan Taufik Fathurohman assumed responsibility for methodological design, supervisory oversight, legal verification, critical appraisal, and manuscript enhancement. Both authors examined and endorsed the completed manuscript, accepting full accountability for its content.

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