

THE FULFILLMENT OF THE RIGHT TO HEALTH FOR INDONESIAN CITIZENS ABROAD: A HUMAN RIGHTS AND ISLAMIC LAW PERSPECTIVE

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Abstract

This research aims to explore BPJS Kesehatan as a mechanism for fulfilling the right to health, Indonesia's responsibility in ensuring the fulfillment of the right to health, and to evaluate the realization of the right to health for citizens abroad in the context of human rights theory and Islamic law perspectives regarding health rights. This study employs a normative legal research method by examining various literature-based sources. The findings conclude that the social security system is implemented through a social insurance mechanism designed to ensure that all Indonesian citizens are protected under an insurance system, thereby enabling them to meet their basic health needs. The fulfillment of Indonesian citizens' health rights has been primarily focused on healthcare services. However, essential health prerequisites such as access to clean drinking water, adequate sanitation, sufficient nutrition, health-related information, environmental health, and workplace health still need to be fully met. Safeguarding life (hifzu nafs) is one of the maqasid al-shariah, where preserving life results from preventive and curative health efforts, allowing every citizen to maintain their well-being with a decent and mentally fulfilling life. It demonstrates that the state's fulfillment of the right to health is aligned with the concept of hifzu nafs, or the preservation of life.

Keywords: Human Rights, Right to Health, Maqasid al-Shariah, Social Security System, State Responsibility.

INTRODUCTION

The fulfillment of the right to health is a fundamental aspect of human rights that is internationally recognized. Regardless of geographic location, every individual has the right to adequate and quality healthcare services. For Indonesian citizens living and working abroad, fulfilling this right poses a unique challenge due to the varying healthcare systems, policies, and accessibility in their countries. This issue has become increasingly relevant with the growing number of Indonesian citizens migrating for various purposes, including employment, studies, and other personal reasons.

From a human rights perspective, the state holds the obligation to protect and fulfill the fundamental rights of its citizens, including the right to health, regardless of their location. The International Covenant on Economic, Social, and Cultural Rights (ICESCR) emphasizes the state's responsibility to ensure that everyone enjoys the highest attainable standard of health (Smith, 2008). In this context, the Indonesian Government is expected to take the necessary steps to ensure its citizens abroad can access the healthcare services they need (Abas, 2008).

The Islamic legal perspective also provides a strong foundation for fulfilling



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* Received: 12 July 2024, Received in revised form: 8 August 2024, Accepted: 16 August 2024

Doi: 10.3376/jch.v9i2.919

the right to health (Kumkelo, 2015). Islamic law emphasizes maintaining health as part of religious duty and social responsibility. These principles encourage Muslim-majority countries, such as Indonesia, to ensure that health policies and programs are aligned with religious teachings and provide adequate protection for all citizens, including those residing abroad.

However, implementing policies and programs designed to fulfill the right to health for Indonesian citizens abroad faces various challenges. Legal, logistical, and financial barriers often present significant obstacles. For instance, differences in health regulations across countries, limited resources, and the complexities of administration and bureaucracy can hinder access to healthcare services. Therefore, a comprehensive and integrated approach involving cooperation between governments, international organizations, and civil society is necessary to address these challenges (Agung & Jatmiko, 2023).

Logistical challenges also significantly impact the fulfillment of health rights for Indonesians abroad. Indonesian expatriates' diverse locations and conditions require tailored solutions to meet their unique healthcare needs. In collaboration with international organizations and host countries, the Indonesian Government must develop strategies to provide adequate healthcare services, including telemedicine, mobile clinics, and partnerships with local healthcare providers.

Financial constraints further complicate the provision of healthcare services for citizens abroad. Funding

healthcare services for a dispersed population requires substantial resources, necessitating innovative funding and resource allocation approaches. To support healthcare initiatives for citizens abroad, the Indonesian Government must explore sustainable financing mechanisms, including public-private partnerships, international aid, and remittances from diaspora communities.

The Islamic legal perspective offers additional motivation and guidance for the Indonesian Government to prioritize the health rights of its citizens abroad. By aligning national policies with religious principles, the Government can enhance legitimacy and garner support from the Muslim-majority population. This alignment can also foster greater community engagement and cooperation in implementing health programs, as religious institutions and leaders play a crucial role in raising awareness and promoting healthcare services.

Ultimately, fulfilling the health rights of Indonesian citizens abroad requires a multifaceted approach that integrates human rights principles, Islamic law, legal frameworks, logistical planning, and financial strategies. By addressing these various dimensions, Indonesia can better ensure that its citizens receive the healthcare services they need, wherever they may be. This comprehensive approach not only upholds international and religious obligations but also enhances the welfare and dignity of Indonesian citizens worldwide.

This research focuses on fulfilling human rights for Indonesian citizens who are often neglected, particularly the right to health. Indonesians abroad do not have the health insurance rights they are

entitled to. This study offers a normative review from the perspectives of legal regulations, human rights theory, and Islamic law on fulfilling health rights for Indonesians living abroad.

Previous research on the right to health has been conducted extensively. For example, (Ardinata, 2020) concluded that the implementation of health rights based on the ICESCR in Indonesia has yet to be fully realized. Additionally, studies by (Tampubolon, 2022) and (Mangkey, 2022) found that the state's complete responsibility for health insurance began with issuing various international regulations, including the International Covenant on Economic, Social, and Cultural Rights. (Darmayanti, 2018) focused on occupational safety and health protection. The distinction between this research and previous studies lies in its focus on citizens abroad, which represents this study's novelty.

RESEARCH METHOD

This study is classified as normative legal research. Normative legal research examines various sources derived from literature materials (Soekanto & Mamudji, 2009). It analyzes the law from several theoretical, historical, comparative, and substantive perspectives, including the binding nature of legislation (Muhammad, 2004). It involves the analysis of legal principles, the discovery of concrete laws, and legal inventory. The first approach used in this research is the statutory approach, which focuses on the applicable legal provisions. The second approach is the conceptual approach, which focuses on various legal doctrines and concepts related to the studied issues (Ashofa, 2006).

RESULTS AND DISCUSSION

A. The BPJS Kesehatan as a Mechanism for Fulfilling the Right to Health

The fulfillment of the right to health is a fundamental human right recognized by the Indonesian Constitution and various international legal instruments. To achieve equitable and high-quality healthcare access for all citizens, the Indonesian Government has implemented several policies, one of which is the Social Security Administering Body for Health (BPJS Kesehatan) (Yadi, 2022).

BPJS Kesehatan, which began operation on 1 January 2014, is a national health insurance program that provides health protection for all Indonesians. This program originated from Law No. 40 of 2004 on the National Social Security System (SJSN) and was reinforced by Law No. 24 of 2011 on the Social Security Administering Body. BPJS Kesehatan is designed to ensure access to comprehensive healthcare services, ranging from promotive, preventive, and curative to rehabilitative care (Salim, 2020).

Through BPJS Kesehatan, the Government ensures that every citizen has equal access to healthcare services regardless of social and economic status. It includes services at primary healthcare facilities and referral hospitals across Indonesia. Additionally, the program promotes improvements in healthcare quality through the regulation and accreditation of healthcare facilities that collaborate with BPJS (Kambu, 2021).

The implementation of BPJS Kesehatan reflects the Indonesian Government's commitment to fulfilling its citizens' right to health. With extensive

service coverage and a solidarity-based financing system, BPJS Kesehatan is critical in reducing healthcare costs, particularly for vulnerable and low-income groups. However, financial deficits, uneven service distribution, and varying quality of care remain critical areas for improvement to ensure the program's sustainability (Zebua et al., 2024).

Thus, BPJS Kesehatan represents a strategic step toward fulfilling the right to health in Indonesia, highlighting the Government's efforts to realize an inclusive, fair, and sustainable healthcare system for all its citizens. Despite these efforts, medical personnel and healthcare facilities frequently neglect patients' rights. Discriminatory practices, including unprofessional treatment, long queues, inadequate medication, and room quota restrictions, are prevalent (Khalid, 2024).

Article 14 of Law No. 24 of 2011 on BPJS stipulates that "every individual, including foreign nationals working in Indonesia for at least six months, is required to participate in the social security program." This state-administered social security system aims to provide protection and social welfare for all Indonesians.

The state is responsible for fulfilling its citizens' rights, as articulated in Article 28H (1) of the 1945 Constitution, which states that "every person has the right to obtain healthcare services." By embedding the right to health in the Constitution, this right becomes a legally protected positive right, obligating the Government to fulfill it through concrete and tangible actions.

To ensure the fulfillment of the right to health, Article 34(3) of the 1945

Constitution states, "The State is responsible for providing healthcare facilities." Article 28H(3) also affirms that "Every person has the right to social security, which enables the full development of themselves as a dignified human being." This provision is related to Article 34(2), which states, "The State develops a social security system for all people and empowers the disadvantaged and vulnerable by human dignity" (Affandi, 2017).

The Constitution mandates that the provision of healthcare facilities is the responsibility of the State, which must also ensure that people can access these facilities. The social security system was established based on this constitutional mandate, operating under principles such as solidarity, non-profit orientation, transparency, prudence, accountability, portability, mandatory participation, entrusted funds, and the full utilization of social security fund management for program development and the benefit of participants (Mustaqim et al., 2024).

Based on the explanation above, participation in BPJS Kesehatan is mandatory. Therefore, all Indonesian citizens, including those living abroad, are BPJS Kesehatan participants. However, the primary issue in fulfilling the right to health for Indonesian citizens abroad is that foreign healthcare facilities need to collaborate with BPJS Kesehatan, as the regulations concerning healthcare facilities are limited to Indonesian territory.

B. The Indonesian State's Responsibility in Fulfilling the Right to Health

The right to health is a fundamental human right (HAM) recognized internationally (Arifin et al., 2019). From a human rights approach, the state is obligated to respect, protect, and fulfill the health rights of its citizens. Indonesia has a significant responsibility to fulfill the health rights of all its citizens, as enshrined in the 1945 Constitution. Article 28H(1) of the Constitution states, "Everyone has the right to live in physical and mental well-being, to reside, and to obtain a good and healthy environment, and has the right to healthcare services." Article 34(3) further emphasizes that "The state is responsible for providing adequate healthcare and public service facilities."

The Government, at the central and regional levels, is responsible for fulfilling the right to health. This responsibility includes:

1. **Healthcare Services:** The Government is responsible for providing equitable and accessible healthcare services to all segments of society, including basic healthcare, referral services, and specialized healthcare services. As stipulated in Law No. 36 of 2009 on Health, Article 5(1): "The Government is responsible for the planning, regulation, administration, and supervision of equitable and affordable healthcare for the community." Additionally, Law No. 23 of 2014 on Regional Government, Article 12(2), states: "Regional governments implement governmental affairs within their authority, including healthcare."
2. **Healthcare Financing:** Through the National Health Insurance (JKN) system managed by BPJS Kesehatan,

the Government ensures that all citizens can access healthcare services without financial barriers. It is outlined in Law No. 40 of 2004 on the National Social Security System, Article 19: "The Government is obliged to implement National Health Insurance for all Indonesian people." Presidential Regulation No. 82 of 2018 on Health Insurance, Article 3, further emphasizes: "The Government guarantees the administration of health insurance for all residents of Indonesia."

3. **Development of Human Resources in Healthcare:** The Government is obligated to ensure the availability of sufficient and qualified healthcare workers through education, training, and improving their welfare, as stipulated in Law No. 36 of 2009 on Health, Article 10: "The Government is responsible for organizing education and training for healthcare workers."
4. **Supervision and Empowerment:** The Government is responsible for overseeing the provision of healthcare services and empowering the community to become more aware of their health, as stated in Law No. 36 of 2009 on Health, Article 5(2): "The Government supervises the administration of healthcare."

With these regulations in place, the central and regional governments are expected to collaborate to fulfill the health rights of all Indonesian citizens, leading toward a healthier and more prosperous society.

To meet this obligation, the State must provide adequate healthcare facilities and services, including the construction of hospitals, community health centers (puskesmas), and the provision of competent medical personnel. Ensuring accessibility and affordability of healthcare services for all citizens, regardless of economic status, is

also a priority. The National Health Insurance (JKN) program, through BPJS Kesehatan, is one of the efforts undertaken to achieve this goal (Berdame, 2024).

Additionally, the State is responsible for disease control and health promotion through immunization programs, health campaigns, and regulations that support a healthy environment. Adequate budget allocation for the health sector in the State Budget (APBN) and formulating policies that prioritize public health improvement are also part of the State's responsibility.

Research by (Ulfah Nugroho, 2020) highlights that, despite Indonesia having various health policies and programs, challenges still need to be addressed regarding access to essential healthcare services, particularly in rural areas. The conclusion emphasizes the importance of improving accessibility and the quality of healthcare services to fulfill the right to health.

Overall, the Indonesian State has a significant responsibility in fulfilling the health rights of its citizens, as mandated by the 1945 Constitution. Implementing inclusive and equitable health policies, providing adequate healthcare facilities, and appropriately allocating resources are essential steps that the Government must take. Although considerable efforts have been made, challenges and areas still need improvement to ensure that health rights are equitably fulfilled for all citizens.

C. Fulfillment of Health Rights for Indonesian Citizens Abroad

The right to health is a fundamental human right recognized internationally. Everyone can access adequate healthcare services, including Indonesian citizens (WNI) living or working abroad. In the current era of globalization, international mobility has increased, resulting in a growing number of Indonesians living abroad. Therefore, fulfilling health rights

for WNI abroad has become a critical and urgent issue.

In this context, the Indonesian Government is responsible for ensuring that WNI abroad can access the necessary healthcare services. This responsibility is based on moral and ethical obligations and is regulated by various international and national laws and policies. The 1945 Constitution, particularly Article 28H(1), affirms that everyone has the right to a prosperous life, including the right to healthcare services. Furthermore, Article 34(3) states that the Government is responsible for providing adequate healthcare facilities.

The Indonesian Government must protect and fulfill the health rights of its citizens, including those residing abroad. The fulfillment of these rights encompasses several key aspects:

1. **Provision of Healthcare Services:** The Government provides access to healthcare services through cooperation with local healthcare facilities and deploying healthcare personnel at Indonesian diplomatic missions abroad. It is supported by Law No. 37 of 1999 on Foreign Relations, Article 18, which states: "The Government endeavors to protect the interests of Indonesian citizens abroad, including their health."
2. **National Health Insurance Program:** Indonesian citizens abroad can access healthcare services through the National Health Insurance (JKN) program if they independently register and pay the premiums. As stated in Presidential Regulation No. 82 of 2018 on Health Insurance, Article 7: "JKN participants include Indonesian citizens residing abroad."
3. **Emergency Medical Assistance:** Indonesian embassies and consulates provide emergency medical assistance and evacuation services for Indonesian citizens needing immediate care. According to the

Ministry of Foreign Affairs Regulation No. 5 of 2018 on the Protection of Indonesian Citizens Abroad, Article 11: "Indonesian representatives are required to provide emergency assistance to WNI in need."

4. Facilitation of Healthcare Access: The Government facilitates access to healthcare for Indonesian migrant workers (TKI) abroad through bilateral agreements with host countries and by providing healthcare facilities at integrated service centers. Law No. 18 of 2017 on the Protection of Indonesian Migrant Workers, Article 39, states: "The Government is obligated to provide healthcare facilities for Indonesian migrant workers abroad."

Through these measures, the Indonesian Government strives to ensure that the health rights of Indonesian citizens abroad are well-fulfilled despite being far from their homeland.

However, WNIs abroad face various challenges in fulfilling health rights. Factors such as differences in healthcare systems, language barriers, legal status, and access to information and healthcare services can hinder WNI from receiving the care they need. Additionally, discrepancies in health standards between the home country and the host country can present obstacles to ensuring health rights.

The Indonesian Government has taken various steps to support WNI abroad, including through diplomatic missions such as embassies and consulates that provide healthcare assistance. International health insurance programs have also been initiated to protect WNI working or studying abroad. Furthermore, bilateral and multilateral cooperation with other countries continues to be strengthened to ensure that WNI's health rights are fully realized.

Despite these efforts, significant challenges remain in ensuring that all WNI abroad can fully enjoy their health rights. Improving coordination among Government agencies, providing better information, and strengthening international health insurance programs are some of the steps that can be taken to address these obstacles.

So far, the fulfillment of health rights for Indonesians has primarily focused on healthcare services, explicitly treating and healing illnesses. The state intervenes when a citizen falls ill, providing medical care and recovery. However, the essential health prerequisites, such as access to clean drinking water, adequate sanitation, sufficient nutrition, health-related information, environmental health, and workplace health, have not been fully met.

The state must still provide these essential health prerequisites for all its citizens. Access to clean drinking water is not available to all; adequate sanitation and sufficient nutrition, as well as health information, are accessible primarily to the middle and upper classes, while the lower-income groups lack access to these resources. Furthermore, environmental and workplace health still need to be fully addressed, as the state needs to provide sufficient positive intervention to guarantee a healthy environment and workplace. Access to workplace health services is mainly available to workers in hazardous occupations, focusing on safety, while physical and mental health are not yet fully accommodated.

Participation in BPJS Kesehatan is mandatory. Thus, it can be concluded that all Indonesian citizens, including those residing abroad, participate in BPJS Kesehatan. However, the main issue in fulfilling the health rights of Indonesian citizens abroad lies in the fact that healthcare facilities overseas do not collaborate with BPJS Kesehatan, as the regulation of healthcare facilities is

limited to those within Indonesia's territory.

Every country that ratifies the International Covenant on Economic, Social, and Cultural Rights (ICESCR) must fulfill its citizens' right to health. Problems arise when foreign nationals living, working, or studying in these countries demand their right to healthcare, as not all countries provide access to healthcare facilities for foreign nationals.

Many Indonesians living abroad need to receive health insurance from their host countries. For example, Indonesian students in Turkey and Egypt do not have access to health insurance from these countries. As a result, many must pay out-of-pocket when seeking medical treatment from doctors or hospitals (Ardafillah et al., 2016).

Mandatory participation in BPJS Kesehatan implies that all Indonesian citizens, including those residing abroad, are entitled to healthcare services. However, they cannot claim these services or utilize the facilities, as BPJS Kesehatan does not cover healthcare facilities outside Indonesia.

Access to healthcare facilities should be available to citizens within Indonesia and those residing abroad. By doing so, the Government would be fulfilling its obligation to respect, protect, and fulfill the health rights of Indonesian citizens.

From the above explanation, the following conclusions can be drawn:

1. Fulfilling the right to health is a fundamental human right recognized internationally. Indonesia is responsible for ensuring that all its citizens, including those living or working abroad, have adequate access to healthcare services. However, fulfilling the health rights of Indonesians abroad faces complex challenges.
2. Although the Indonesian Government has taken various steps to support its citizens abroad, such as through diplomatic missions and international

health insurance programs, significant obstacles still need to be overcome. These challenges include differences in healthcare systems, language barriers, legal status, and limited access to information and healthcare services. Additionally, healthcare facilities abroad generally need to collaborate with BPJS Kesehatan, meaning Indonesians abroad cannot benefit from this service.

3. So far, the fulfillment of health rights has focused more on healthcare services when individuals fall ill. In contrast, essential health prerequisites such as clean water, adequate sanitation, sufficient nutrition, and environmental health have yet to be optimally addressed. It highlights the urgent need to improve the quality and accessibility of basic healthcare services in Indonesia and ensure that all Indonesian citizens, both at home and abroad, can fully enjoy their health rights.
4. Mandatory participation in BPJS Kesehatan suggests that all Indonesian citizens, including those abroad, should have the right to healthcare services. However, this right often cannot be realized due to the lack of collaboration between overseas healthcare facilities and BPJS Kesehatan. Thus, breakthroughs such as establishing partnerships with foreign healthcare facilities and better coordination with local Indonesian embassies are needed.
5. By improving access to and the quality of healthcare services domestically and abroad, the state can fulfill its obligation to respect, protect, and fulfill the health rights of Indonesian citizens. It will not only enhance the welfare of its citizens but also reflect Indonesia's commitment to the comprehensive fulfillment of human rights.

As a recommendation, to ensure that these participants continue receiving their health rights, especially regarding healthcare, the Government-through BPJS Kesehatan-should establish partnerships with healthcare facilities abroad and coordinate with local Indonesian embassies. It would allow Indonesian citizens to access healthcare facilities through the system administered by BPJS Kesehatan in Indonesia.

D. Islamic Law and the Fulfillment of Health Rights

Health is an integral part of human rights and is universally recognized. From an Islamic legal perspective, health holds significant value and is considered one of Allah's blessings, which must be preserved and maintained. The principles of Islamic law, derived from the Quran, Hadith, Ijma (scholarly consensus), and Qiyas (analogical reasoning), emphasize the importance of health as both an individual and communal responsibility.

Islamic law teaches that maintaining health is a duty, as stated in several verses of the Quran and Hadith of Prophet Muhammad SAW, which encourage physical care and disease prevention. For instance, in the Quran, Surah Al-Baqarah verse 195 states, "And do not throw [yourselves] into destruction," which can be interpreted as a recommendation to maintain health and avoid harmful actions.

In fulfilling health rights, Islamic law also guides the state's and society's responsibilities. According to Islamic law, the state is obligated to provide adequate healthcare services for its citizens and to ensure fair and equitable access to healthcare facilities. It aligns with the *maslahah* (public welfare) concept in Islamic law, which stresses that Government policies and actions must aim at the well-being of the people.

Moreover, Islamic law underscores the importance of cleanliness, a healthy diet, and a balanced lifestyle in disease

prevention. These principles are reflected in the daily practices of Muslims, such as maintaining personal and environmental hygiene, avoiding harmful and unhealthy food, and performing physical acts of worship, like *salat*, which also serve as physical exercise.

Governments in countries that apply Islamic law principles strive to integrate these values into their healthcare systems to fulfill health rights. It includes the provision of healthcare services that adhere to Shariah principles, such as hospitals offering halal services and facilities that accommodate religious practices (Harahap, 2017).

Thus, Islamic law provides a solid ethical and moral framework for fulfilling health rights at the individual and state levels. Integrating Islamic legal principles into healthcare policy can help ensure that health rights are fulfilled in a manner that respects Muslim societies' religious and cultural values.

The fulfillment of health rights within the framework of Islamic law is rooted in the principles of *maqashid al-shariah*, which emphasizes the preservation of the welfare of humankind. In this context, health is one of the essential aspects that must be protected and preserved. Al-Syathibi explained that all Islamic law is established to realize the welfare of humanity, both in this world and the hereafter. The objectives of Shariah encompass five key elements: the preservation of religion, life, lineage, intellect, and property. According to Al-Syathibi, establishing these five fundamental human needs is based on the evidence from the Quran and Hadith (Ma'u, 2016).

Maqashid al-shariah, according to Imam al-Syatibi, refers to the objectives or goals intended by Islamic law in formulating its rulings. He defined *maqashid al-shariah* as the efforts to preserve and protect the welfare of humankind in this world and the hereafter (Al-Syatibi, 2003). Al-Syatibi categorized

maqashid al-shariah into three primary levels: 1) *Dharuriyyat* (necessities): These are the essential needs for human life, without which destruction and harm will occur, such as the preservation of religion, life, intellect, lineage, and property. 2) *Hajiyyat* (complementary needs): These are needs that, if unmet, do not cause harm but will result in hardship and difficulty. Examples include things that facilitate worship and daily life. 3) *Tahsiniyyat* (embellishments): These relate to comfort, aesthetics, and ethics in life, such as manners and etiquette that enhance human life (Al-Syatibi, 2003).

The preservation of religion (*hifz al-din*) is the foremost *maqashid al-shariah*. The primary objective of Islamic law is to protect the existence of religion, its teachings, and its followers (Sofian, 2023). In relation to fulfilling health rights, protecting religion requires mentally and physically healthy individuals. This interpretation reinforces that an Islamic state's fulfillment of health rights is consistent with the concept of *hifz al-din*, or the preservation of religion (Jalili, 2021).

Preserving life (*hifz al-nafs*) is considered the most important of the *maqashid al-shariah*, as the right to life is the most fundamental human right. One of the primary purposes of Shariah is to safeguard life (Haqan, 2018). In Islam, a single life holds immense value, and the loss of one life is likened to the loss of all humanity. In terms of fulfilling health rights, preserving life is achieved through providing preventive and curative healthcare, ensuring that every citizen can maintain their life in dignity and mental well-being. It demonstrates that the fulfillment of health rights by the state aligns with the concept of *hifz al-nafs*, or the preservation of life.

The preservation of lineage (*hifz al-nasl*) is another objective of Islamic law, which ensures that lineage is maintained through children's rights to proper sustenance and education (Kasdi, 2014).

In the context of health rights, preserving lineage can be achieved by providing adequate nutrition from the prenatal stage and offering healthcare facilities for pregnant women, thereby reducing maternal and child mortality during childbirth. Thus, the fulfillment of health rights aligns with the principle of *hifz al-nasl*, or the preservation of lineage.

In Islamic law, maintaining health is the responsibility of individuals and the state. Integrating *maqashid al-shariah* principles into national health policy, including for Indonesian citizens abroad, ensures that health rights are comprehensively fulfilled. It includes preventive and curative measures necessary for preserving life and addressing essential health prerequisites that are often unmet. Thus, the joint efforts of the Government and society in fulfilling health rights according to Islamic values will contribute to the welfare and safety of all citizens, both at home and abroad.

CONCLUSION

The fulfillment of the right to health is a fundamental human right recognized by the Indonesian Constitution and various international legal instruments. Through BPJS Kesehatan, which began operation in 2014, the Indonesian Government strives to ensure equitable and high-quality healthcare access for all citizens.

Indonesia has a significant responsibility to fulfill the health rights of its citizens through various policies, including BPJS Kesehatan, which guarantees equal and quality access to healthcare services. This responsibility encompasses providing fair healthcare services, financing healthcare through the National Health Insurance (JKN), developing healthcare human resources, and supervising and empowering communities.

The mandatory participation in BPJS Kesehatan implies that all Indonesian

citizens, including those living abroad, are entitled to healthcare services. However, their participation cannot be claimed or utilized as they are abroad and need access to healthcare facilities collaborating with BPJS Kesehatan.

From the perspective of Islamic law, maintaining health is a responsibility shared by both individuals and the state. Integrating *maqashid al-shariah* principles into national health policy, including for Indonesian citizens abroad, is essential. Preserving life (*hifz al-nafs*) is one of the most critical objectives of *maqashid al-shariah*, as the right to life is the most fundamental of human rights. One of the primary aims of Shariah is to protect life. In Islam, the loss of a single life is considered equivalent to the loss of all humanity. Regarding the fulfillment of health rights, they preserve life results from preventive and curative efforts to ensure every citizen can live a dignified and mentally healthy life. It demonstrates that the state's fulfillment of health rights aligns with the concept of *hifz al-nafs*, or the preservation of life.

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