



The Role of Local Authorities in Protecting Hajj Pilgrims in Indonesia: A Legal Protection Perspective

Muchammad Shidqon Prabowo¹⁾

¹⁾Faculty of Law, Universitas Wahid Hasyim (UNWAHAS), Semarang, Indonesia, E-mail: shidqonprabowo@unwahas.ac.id

Abstract. *Indonesia, as the country with the world's largest Hajj contingent, requires effective governance to ensure comprehensive legal protection for pilgrims. This study aims to analyze the roles of local authorities in Hajj protection, identify governance challenges, and formulate policy recommendations. This research employed a qualitative doctrinal legal approach combined with policy-oriented legal analysis and literature review. The analysis was based on Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage, Law Number 23 of 2014 concerning Regional Government, Law Number 17 of 2023 concerning Health, Law Number 34 of 2014 concerning Hajj Financial Management, and Minister of Health Regulation Number 15 of 2016 concerning Health Istitha'ah for Hajj Pilgrims. The findings show that local authorities play important roles in health protection, financial facilitation, regulatory compliance, and institutional coordination. However, regulatory fragmentation, uneven regional capacity, and weak coordination reduce implementation effectiveness. Strengthening regional governance and institutional coordination is therefore essential to improve legal protection for Indonesian Hajj pilgrims.*

Keywords: *Hajj Governance; Hajj Protection; Indonesia; Local Authorities; Legal Protection.*

1. Introduction

The Hajj pilgrimage represents one of the largest recurring human mobilizations in the world, involving complex logistical, health, financial, and regulatory arrangements. For Indonesia, which annually sends the largest contingent of Hajj pilgrims worldwide, Hajj governance extends beyond religious administration to encompass public administration, legal protection, public health, and consumer services. According to the Indonesian Ministry of Religious Affairs, Indonesia was allocated a Hajj quota of 221,000 pilgrims for the 2024 pilgrimage season, comprising 203,320 regular pilgrims and 17,680 special pilgrims, making Indonesia the country with the largest Hajj contingent worldwide and increasing the importance of effective coordination between central and local government institutions in protecting pilgrims (Fauzi, 2024). At the same time, recurring issues including long waiting lists that in several provinces exceed 30 years, unauthorized Hajj departures, visa misuse, health risks among elderly pilgrims, and fraudulent Hajj and Umrah travel schemes demonstrate that pilgrim protection remains a significant governance challenge requiring stronger local government involvement (Mariani & Press, 2020).

The legal foundation for Hajj governance in Indonesia is principally established through Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage, which emphasizes the principles of justice, transparency, accountability, professionalism, and the protection of pilgrims throughout the pilgrimage process (Alfian & Rafianti, 2023; Aljawi, 2024). The implementation of the law is further supported by Law Number 23 of 2014 concerning Regional Government, which allocates important administrative responsibilities to local governments in public health and public services, Law Number 17 of 2023 concerning Health, and Minister of Health Regulation Number 15 of 2016 concerning Health Istitha'ah for Hajj Pilgrims, which regulate health screening and preparedness as mandatory components of Hajj administration. Collectively, these legal instruments establish that protecting Hajj pilgrims is not solely the responsibility of the central government but also requires active participation from local authorities within Indonesia's decentralized governance system.

From a governance perspective, Hajj protection measures encompass efforts to ensure pilgrims' safety, legality, and well-being before departure, during the pilgrimage, and upon return. These measures include health screening and preparedness (*istitha'ah*), financial governance of Hajj funds, regulatory compliance, and public education. Existing studies indicate that local authorities contribute substantially to health administration by conducting examinations, verifying pilgrims' eligibility, and providing health guidance in line with regulatory standards (Wardhani et al., 2019; Ishom et al., 2024). The emphasis on good corporate governance and total quality management in Hajj administration also highlights the expectation that public services related to Hajj meet standards of accountability, efficiency, and quality.

Beyond health, financial management forms another crucial dimension of Hajj protection (Alfiyanti et al., 2019). Although the Hajj Financial Management Agency (*Badan Pengelola*

Keuangan Haji/BPKH) operates at the national level, local authorities remain relevant as facilitators, information providers, and supervisors at the community level. The management and investment of Hajj funds are expected to comply with Islamic legal principles (*siyasaḥ syar'iyah*) and to realize the Maqasid al-Shariah, balancing economic returns with pilgrims' spiritual interests (Wardhani et al., 2019; Siddiq et al., 2024). In practice, this creates a governance ecosystem in which local actors help ensure transparency, public trust, and proper dissemination of financial information.

Compliance and regulation also require strong local involvement. Problems such as unauthorized Hajj departures, misuse of visas, and misinformation often emerge at the grassroots level (Maram et al., 2024). Local authorities, in cooperation with religious leaders and central agencies, play a role in harmonizing regulatory enforcement and religious guidance, as well as educating the public about the legal and religious consequences of irregular Hajj practices (Rustika et al., 2020). At the same time, local governments face persistent challenges, including regulatory gaps, limited resources, misconduct risks, digital divides, and exposure to fraudulent Hajj and Umrah schemes (Setiawan, 2025; Sugeng et al., 2025).

Although previous studies have examined specific aspects of Hajj governance, they remain fragmented. Existing research primarily focuses on health preparedness (Ishom et al., 2024; Sugeng et al., 2025), health service quality (Wardhani et al., 2019), financial governance and Islamic legal principles (Siddiq et al., 2024), policy implementation (Rustika et al., 2020), or fraud prevention (Setiawan, 2025). Little attention has been devoted to examining how local authorities simultaneously perform legal, administrative, financial, and regulatory protection functions within an integrated legal governance framework. Consequently, the literature has yet to explain how decentralized governance can be translated into a coherent protection system that safeguards pilgrims before, during, and after the Hajj pilgrimage.

This study addresses that gap by proposing an integrated governance mapping that conceptualizes the role of local authorities across three interconnected dimensions health protection, financial protection, and regulatory protection from a legal protection perspective. Unlike previous studies that analyze these dimensions separately, this research develops a comprehensive framework illustrating the interaction between legal norms, administrative institutions, and local governance mechanisms in protecting Indonesian Hajj pilgrims. The study is important because strengthening local governance capacity directly contributes to improving legal certainty, public accountability, and the effectiveness of Hajj protection policies amid increasing pilgrimage demand and increasingly complex governance challenges.

Accordingly, this study is guided by three research questions: (1) What roles do local authorities play in Hajj protection measures in Indonesia across health, financial, and regulatory dimensions; (2) What challenges and governance gaps do local authorities face in implementing Hajj protection measures; (3) How can Hajj protection measures be mapped and what policy recommendations can be formulated to strengthen the role of local authorities. By addressing

these questions, this study seeks to contribute to the legal and governance discourse on Hajj administration by providing a comprehensive conceptual framework for understanding local authorities' protective functions and offering practical policy recommendations to strengthen legal protection for Indonesian Hajj pilgrims.

2. Research Methods

This study employed a qualitative research design using a doctrinal legal research approach combined with policy-oriented legal analysis and qualitative literature review. The research aims to examine the role of local authorities in protecting Hajj pilgrims in Indonesia by analyzing legal norms, public governance, and scholarly discussions related to health administration, financial governance, and regulatory compliance within Indonesia's decentralized governance system. The primary objects of analysis consisted of Indonesian legal instruments governing Hajj administration and local government responsibilities, including Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage, Law Number 23 of 2014 concerning Regional Government, Law Number 17 of 2023 concerning Health, Law Number 34 of 2014 concerning Hajj Financial Management, and Minister of Health Regulation Number 15 of 2016 concerning Health *Istitha'ah* for Hajj Pilgrims. These regulations were analyzed to identify the legal basis for the authority and responsibilities of local governments in protecting Hajj pilgrims. In addition, secondary legal materials consisted of peer-reviewed journal articles, policy reports, and official government publications discussing Hajj governance and pilgrim protection.

Data collection was conducted through documentary research using literature and legal document analysis. Academic literature was identified through the Scopus AI search interface as a structured discovery tool for retrieving peer-reviewed publications. A targeted search strategy was developed using Boolean operators to capture multidisciplinary perspectives on Hajj governance. The search query combined terms such as ("Hajj" OR "pilgrimage" OR "Islamic pilgrimage") AND ("protection" OR "safety" OR "security" OR "measures") AND ("Indonesia" OR "Indonesian" OR "Southeast Asia" OR "Asia") AND ("health" OR "risk" OR "emergency" OR "management") AND ("crowd control" OR "logistics" OR "transportation" OR "facilities") AND ("guidelines" OR "protocols" OR "regulations" OR "standards"). Legal materials were collected from official government legislation databases and ministerial regulations, while supporting policy documents were obtained from relevant government institutions.

The inclusion criteria were established to ensure the relevance and quality of the analyzed literature. Sources were selected if they (1) were peer-reviewed journal articles, (2) examined Hajj or Umrah governance in Indonesia, (3) discussed legal protection, health preparedness (*istitha'ah*), financial governance, regulatory compliance, or local government responsibilities, and (4) were published between 2019 and 2025. Based on these criteria, eight core journal articles, together with the relevant statutory regulations, were selected as the principal sources of analysis.

The collected legal materials and literature were analyzed using qualitative content analysis supported by thematic analysis. The analysis began with identifying legal norms governing Hajj protection, followed by coding and categorizing the literature into three principal governance dimensions: health protection, financial protection, and regulatory protection. Subsequently, a conceptual mapping approach was employed to synthesize the relationships between legal provisions, governance practices, and the roles of local authorities. Rather than conducting statistical meta-analysis, this study produced an integrated legal-governance framework that explains how local authorities contribute to protecting Indonesian Hajj pilgrims and identifies governance gaps requiring future policy improvement.

3. Results and Discussion

3.1. The Roles of Local Authorities in Hajj Protection across Health, Financial, and Regulatory Dimensions

Local authorities occupy a strategic position in the governance of Hajj protection in Indonesia because they operate at the interface between national policy and community-level implementation. While the Hajj is nationally regulated and internationally coordinated with the Saudi Arabian authorities, many preparatory, supervisory, and protective measures are implemented through Indonesia's decentralized governance system (Aljawi & Santiago, 2025). Consequently, the effectiveness of Hajj protection depends not only on national policymaking but also on the administrative capacity of local governments to implement legal mandates and public services (Kamal et al., 2025). This institutional arrangement reflects the decentralization principle embodied in Law Number 23 of 2014 concerning Regional Government, which assigns local governments substantial responsibilities in public health administration, public services, and community empowerment (Giantoro et al., 2024). Within this framework, local governments function as frontline actors responsible for translating national legal norms, administrative standards, and religious guidance into practical services that directly affect prospective pilgrims. Their responsibilities can therefore be understood through three mutually reinforcing dimensions: health protection, financial facilitation, and regulatory compliance.

The legal foundation for local government involvement is further strengthened by Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage, which establishes that Hajj administration must be implemented according to the principles of justice, accountability, transparency, professionalism, and protection of pilgrims (Aljawi & Santiago, 2025). Although the Ministry of Religious Affairs retains primary authority over Hajj administration, the implementation of these statutory principles inevitably requires active participation from provincial, regency, and municipal governments because many administrative functions including health examinations, public information dissemination, and coordination with local stakeholders occur before pilgrims depart for Saudi Arabia. Therefore, local authorities should not merely be viewed as administrative executors but as institutional actors responsible for

ensuring that the legal rights of pilgrims are effectively protected throughout the pilgrimage process.

The first and most significant dimension concerns health administration and pilgrim safety. Health protection represents one of the core responsibilities delegated to local authorities because Indonesian pilgrims often include elderly individuals and people with chronic medical conditions (Ishom et al., 2024). The concept of health *istitha'ah*, which refers to the physical and mental capability to perform the pilgrimage safely, constitutes an essential legal and medical prerequisite for Hajj participation (Sugeng et al., 2025). This requirement is formally regulated under Minister of Health Regulation Number 15 of 2016 concerning Health *Istitha'ah* for Hajj Pilgrims and reinforced by Law Number 17 of 2023 concerning Health, which emphasizes preventive healthcare and equal access to health services.

Accordingly, local health offices, community health centers (*Pusat Kesehatan Masyarakat/Puskesmas*), and regional hospitals undertake comprehensive health assessments that include medical examinations, chronic disease screening, vaccination programs, laboratory testing, physical fitness assessments, and continuous health counseling. These preventive measures are intended not only to determine pilgrims' eligibility but also to minimize morbidity and mortality risks during one of the world's most physically demanding religious gatherings. In this regard, local authorities function as preventive health regulators rather than merely healthcare providers. Their intervention begins long before departure through systematic identification of health risks and preparation of pilgrims to safely undertake religious obligations.

Existing studies support this institutional role. Ishom et al. (2024) emphasize that health *istitha'ah* should be understood within Indonesia's decentralized health governance framework, where local governments become the principal implementers of preventive healthcare policies. Likewise, Wardhani et al. (2019) argue that maintaining the quality of Hajj health services requires consistent implementation of quality assurance mechanisms at the district level. These findings demonstrate that effective Hajj protection depends not solely on medical facilities but also on institutional governance characterized by accountability, coordination, and service quality. Consequently, principles of good governance and total quality management become integral to local Hajj administration because they ensure procedural consistency, transparency, and public trust throughout the health certification process (Hafiz & Setyadi, 2025; Musaddad et al., 2026).

Beyond health protection, local authorities also perform important functions within the financial governance dimension. Although Law Number 34 of 2014 concerning Hajj Financial Management assigns responsibility for managing Hajj funds to the Hajj Financial Management Agency (*Badan Pengelola Keuangan Haji/BPKH*), local governments continue to perform facilitative and supervisory roles that contribute indirectly to pilgrims' financial protection (Kamal et al., 2025). Their responsibilities include disseminating accurate information regarding

Hajj registration, payment procedures, waiting-list administration, and official financial mechanisms, thereby reducing opportunities for misinformation and financial exploitation at the community level (Aljawi & Santiago, 2025).

From an Islamic legal perspective, Hajj financial management is expected to comply with the principles of *siyasaḥ syar'iyah* while realizing the objectives of the *Maqasid al-Shariah*, particularly the protection of wealth (*hifz al-mal*) and public welfare. Investments generated from Hajj funds are therefore expected to balance financial sustainability with the spiritual interests of pilgrims (Wardhani et al., 2019; Siddiq et al., 2024). Although local governments possess no authority to determine investment policies, they significantly influence public confidence by ensuring that pilgrims receive transparent information regarding financial procedures. This communicative role is increasingly important because misinformation concerning Hajj financing frequently becomes a source of public distrust and creates opportunities for fraudulent practices targeting prospective pilgrims.

The third-dimension concerns regulatory compliance and legal protection. Hajj administration operates within a comprehensive regulatory framework requiring strict compliance with registration procedures, visa regulations, travel documentation, health certification, and official pilgrimage policies (Abdillah et al., 2026). Under Law Number 8 of 2019, pilgrim protection encompasses not only physical safety but also legal certainty throughout every stage of the pilgrimage. Consequently, local governments assume responsibility for ensuring that prospective pilgrims understand and comply with applicable legal requirements before departure (Hamzani et al., 2018).

In practice, local authorities frequently act as intermediaries connecting national regulations with local communities (Darmadi, 2026). Through coordination with local offices of the Ministry of Religious Affairs, healthcare institutions, and religious organizations, they facilitate document verification, administrative registration, dissemination of regulatory information, and public education regarding lawful pilgrimage procedures. These responsibilities are particularly important in preventing unauthorized Hajj practices, visa misuse, and participation in illegal travel arrangements that expose pilgrims to significant legal and personal risks.

Unauthorized Hajj practices not only violate administrative regulations but also undermine the legal protection guaranteed under Indonesian law. Pilgrims travelling outside official procedures may lose access to government protection, health assistance, and emergency support while abroad. Therefore, preventive legal education constitutes a crucial component of local government responsibilities. Rustika et al. (2020) demonstrate that collaboration between local governments, health institutions, and religious leaders strengthens compliance by integrating legal enforcement with religious guidance. Disseminating official regulations together with relevant religious fatwas enables local authorities to enhance public understanding while reinforcing both legal certainty and religious legitimacy (Holis et al., 2026).

In general, the three dimensions discussed above illustrate that local authorities perform a multidimensional governance function extending far beyond administrative assistance. Their role encompasses protecting pilgrims' health, facilitating financial transparency, ensuring regulatory compliance, and fostering institutional coordination among government agencies, healthcare providers, religious organizations, and local communities. From a legal protection perspective, these responsibilities demonstrate that effective Hajj governance depends upon the ability of local governments to operationalize national legislation into accessible, accountable, and citizen-oriented public services. Accordingly, local authorities should be regarded not merely as implementers of central government policies but as essential legal protection actors whose institutional performance substantially determines the realization of pilgrims' rights before, during, and after the Hajj pilgrimage.

3.2. Challenges and Governance Gaps in the Implementation of Hajj Protection Measures

Local authorities in Indonesia hold a strategic and multifaceted role in the governance of Hajj protection measures. Their involvement extends across health administration, financial oversight, regulatory compliance, and inter-institutional collaboration, all of which are essential to safeguarding pilgrims before, during, and after the pilgrimage (Subandi & Machmudi, 2022). Within Indonesia's decentralized governance system, local governments function as the closest administrative actors to citizens, placing them in a critical position to operationalize national Hajj policies at the local level (Indra, 2025; Kamal et al., 2025). Nevertheless, despite the existence of an extensive legal framework governing Hajj administration, the implementation of pilgrim protection remains affected by several governance gaps that reduce the effectiveness of legal protection. These challenges are not merely operational but also institutional, reflecting inconsistencies between normative regulations and their implementation at the local level.

One of the principal governance challenges concerns the implementation of health protection policies. Local authorities are responsible for ensuring that prospective pilgrims satisfy the requirements of health *istitha'ah*, referring to the physical and mental capability required to safely perform the pilgrimage (Huda, 2021; Saputra & Nasution, 2024). This responsibility includes organizing comprehensive medical examinations, issuing health certificates, conducting vaccination programs, and providing preventive health education in accordance with Minister of Health Regulation Number 15 of 2016 concerning Health *Istitha'ah* for Hajj Pilgrims. Furthermore, Law Number 17 of 2023 concerning Health places greater emphasis on preventive healthcare, early detection, and equitable access to health services, thereby reinforcing the obligation of local governments to prioritize preventive rather than curative approaches in preparing Hajj pilgrims (Imamah et al., 2024).

Despite this comprehensive legal framework, implementation remains uneven across regions. Regulatory fragmentation persists because many provincial and district governments have yet to establish implementing regulations or technical guidelines specifically addressing Hajj protection beyond administrative and transportation arrangements. As a result, health

screening procedures, referral mechanisms, and public education programs frequently differ among regions, creating unequal standards of protection for prospective pilgrims (Wardhani et al., 2019; Ishom et al., 2024). This situation illustrates that the existence of national legislation alone does not automatically ensure effective implementation without adequate local regulatory instruments capable of translating statutory obligations into operational procedures.

A second governance challenge concerns the alignment between national and local regulatory frameworks. Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage establishes the principles of justice, accountability, professionalism, transparency, and pilgrim protection as the normative foundation of Hajj administration (Qosim & Atmaja, 2026). However, implementing these principles requires continuous coordination between the Ministry of Religious Affairs and local governments responsible for carrying out many administrative functions before departure. In practice, variations in institutional capacity often lead to differences in how regulations are interpreted and implemented at the regional level.

This challenge is particularly visible in managing the national Hajj waiting list system and enforcing policies designed to promote equitable access to pilgrimage opportunities. Local governments assist in verifying administrative documents, maintaining registration records, and implementing national policies, including restrictions on repeated Hajj participation within specified periods (Murnika et al., 2025). Such mechanisms are intended to ensure procedural fairness by providing opportunities for first-time pilgrims while preventing administrative irregularities (Siddiq et al., 2024). Nevertheless, differences in administrative capacity and coordination may reduce the consistency of implementation, thereby affecting legal certainty and public confidence in the Hajj management system. Consequently, local authorities perform not only administrative functions but also serve as guardians of procedural justice within Indonesia's Hajj governance framework.

Another significant governance issue concerns inter-institutional coordination. Effective Hajj protection depends upon collaboration among multiple institutions, including the Ministry of Religious Affairs, the Ministry of Health, regional health offices, hospitals, community health centers (*Pusat Kesehatan Masyarakat/Puskesmas*), immigration authorities, local governments, and religious organizations. Such coordination is consistent with the decentralization principles embodied in Law Number 23 of 2014 concerning Regional Government, which encourages cooperation among governmental institutions in delivering public services (Salmon & Lekipiouw, 2024; Widyaningsih et al., 2026).

In practice, local governments routinely cooperate with health authorities to organize health screening programs, vaccination campaigns, emergency preparedness training, and health education initiatives. Collaboration with religious organizations also strengthens policy implementation because religious leaders possess considerable influence in communicating both legal obligations and religious guidance to local communities. Rustika et al. (2020) and Sugeng et al. (2025) demonstrate that coordinated health education significantly improves

pilgrims' preparedness, while Prabowo and Sulistianingsih (2020) emphasize that effective Hajj administration requires institutional governance characterized by accountability and cross-sectoral collaboration. However, coordination mechanisms often remain dependent upon informal institutional relationships rather than standardized operational procedures, limiting their sustainability and consistency across different regions.

Resource limitations constitute another persistent governance gap affecting local implementation. Although local governments bear important responsibilities for protecting pilgrims, their institutional capacities vary considerably. Budgetary constraints frequently limit the ability to conduct comprehensive health examinations, establish integrated information systems, organize continuous public education programs, or provide adequate medical personnel. Regional disparities in healthcare infrastructure also affect the quality of services available to prospective pilgrims, particularly in geographically remote areas where access to specialized healthcare facilities remains limited (Wardhani et al., 2019; Rustika et al., 2020). These disparities demonstrate that decentralization, while enhancing local autonomy, may simultaneously produce unequal implementation outcomes when institutional capacities differ substantially among local governments.

Administrative integrity and digital governance also represent important implementation challenges. Increasingly, Hajj administration relies upon digital systems for registration, document verification, waiting-list management, health monitoring, and communication between government institutions and pilgrims (Hayani, 2024; Januratmo & Vic, 2025). Nevertheless, not all local governments possess sufficient digital infrastructure or technical capacity to implement these systems effectively. Weak utilization of official government websites, limited digital literacy among pilgrims, and inconsistent integration between local and national databases reduce the accessibility, transparency, and efficiency of Hajj-related services (Setiawan, 2025). Administrative misconduct, insufficient supervision, and weak internal coordination further risk undermining public trust in government institutions (Prabowo & Sulistianingsih, 2020; Sugeng et al., 2025). Consequently, strengthening digital governance should be regarded not merely as a technological objective but also as a legal governance strategy aimed at improving transparency, accountability, and administrative effectiveness.

Financial protection constitutes another area requiring stronger local involvement. Although Law Number 34 of 2014 concerning Hajj Financial Management assigns responsibility for managing Hajj funds to the Hajj Financial Management Agency (*Badan Pengelola Keuangan Haji/BPKH*), local governments remain important actors in protecting prospective pilgrims against financial fraud occurring at the community level (Jumali, 2018; Zulkarnain et al., 2025). Fraudulent Hajj and Umrah travel agencies, Ponzi investment schemes, misinformation regarding registration procedures, and unauthorized pilgrimage packages continue to expose pilgrims to substantial financial losses (Setiawan, 2025). These risks demonstrate that financial protection extends beyond fund management to include preventive governance through public education, administrative supervision, and law enforcement coordination. Local authorities

therefore play a preventive role by disseminating verified information, encouraging the use of officially registered Hajj service providers, and cooperating with law enforcement agencies to identify fraudulent practices before they affect larger numbers of citizens.

Comprehensively, these governance challenges reveal that the effectiveness of Hajj protection depends not only upon the existence of comprehensive national legislation but also upon the institutional capacity of local governments to implement those legal norms consistently. Regulatory fragmentation, uneven regional legal frameworks, limited financial and human resources, insufficient digital capacity, and weak inter-institutional coordination collectively create governance gaps that may reduce the quality of legal protection provided to Indonesian pilgrims. From a legal protection perspective, these findings suggest that strengthening Hajj governance requires more than additional regulations; it requires harmonization between national and regional legal frameworks, stronger institutional coordination, greater administrative accountability, and sustained investment in local governance capacity. Only through such integrated improvements can local authorities effectively fulfill the protective functions envisioned under Indonesia's Hajj governance framework.

3.3. Mapping Hajj Protection Measures and Formulating Policy Recommendations to Strengthen the Role of Local Authorities

The findings of this study indicate that strengthening Hajj protection in Indonesia requires a comprehensive governance approach that integrates legal, administrative, financial, and public health dimensions. Although Indonesia already possesses a relatively comprehensive national legal framework governing Hajj administration, implementation remains uneven because local governments differ significantly in institutional capacity, regulatory readiness, and resource availability (Aljawi & Santiago, 2025; Kamal et al., 2025). Within Indonesia's decentralized governance system, local authorities are not merely administrative implementers but adaptive governance actors responsible for translating national legal norms into practical protection measures that respond to local conditions. Consequently, improving Hajj protection requires both normative refinement and governance innovation at the regional level so that legal protection guaranteed under national legislation can be implemented consistently throughout Indonesia.

From a legal perspective, the foundation for strengthening local governance already exists within Law Number 8 of 2019 concerning the Organization of Hajj and Umrah Pilgrimage, which establishes that Hajj administration must be conducted according to the principles of justice, accountability, transparency, professionalism, and protection of pilgrims (Alfian & Rafianti, 2023; Hartama & Dewi, 2025). These principles, however, require further operationalization through local regulations and administrative guidelines because many protective functions including health examinations, public education, document verification, and community coordination are implemented directly by provincial and district governments. Similarly, Law Number 23 of 2014 concerning Regional Government provides the legal basis for regional

governments to exercise authority in public services and health administration, thereby legitimizing stronger local involvement in Hajj governance (Hadita, 2020; Zain & Aswadi, 2026).

A primary policy recommendation is therefore the development of more comprehensive regional regulations specifically addressing Hajj protection (Hamzani et al., 2018). While existing regional policies frequently focus on logistical preparation or transportation arrangements, relatively few establish detailed standards governing health preparedness, emergency response, digital administration, financial information services, or inter-agency coordination. Developing regional legal instruments consistent with national legislation would strengthen legal certainty by clarifying institutional responsibilities, procedural requirements, and minimum service standards applicable before, during, and after the pilgrimage (Januratmo & Vic, 2025). Such harmonization would also reduce regulatory fragmentation identified in the previous section and ensure more uniform implementation across Indonesia (Ishom et al., 2024). Rather than creating new legal obligations, regional regulations should function as implementing instruments that translate national statutory provisions into locally applicable governance mechanisms.

Health governance constitutes the second major area requiring policy enhancement. Minister of Health Regulation Number 15 of 2016 concerning Health Istitha'ah for Hajj Pilgrims and Law Number 17 of 2023 concerning Health emphasize preventive healthcare as an essential component of public health policy (Idris & Nurwahyuni, 2024). Accordingly, local governments should strengthen preventive approaches by expanding health screening, chronic disease management, vaccination programs, and continuous health counseling throughout the pilgrimage preparation period. Such measures are particularly important considering that a substantial proportion of Indonesian pilgrims are elderly and present multiple health risk factors. Strengthening preventive healthcare would reduce avoidable medical complications during the pilgrimage while simultaneously lowering the burden placed upon healthcare services in both Indonesia and Saudi Arabia (Shafi et al., 2016).

Public health education should therefore become an institutional priority rather than merely a supporting activity. Local governments possess extensive access to community-based institutions such as community health centers (*Pusat Kesehatan Masyarakat/Puskesmas*), religious organizations, village administrations, and Hajj guidance groups. These institutions provide effective channels for disseminating information regarding physical preparation, medication management, nutrition, environmental adaptation, hygiene practices, and emergency response procedures. Wardhani et al. (2019) demonstrate that improved health education contributes significantly to service quality, while Sugeng et al. (2025) emphasize that pilgrims' health preparedness is strongly influenced by continuous education rather than one-time medical examinations. Consequently, shifting policy emphasis from reactive healthcare toward preventive public health education would strengthen overall Hajj protection.

Another strategic recommendation concern strengthening evidence-based governance through integrated monitoring and evaluation systems. Effective legal protection requires more than procedural compliance; it requires measurable outcomes demonstrating that governance interventions successfully improve pilgrim safety and administrative performance. Local governments should therefore establish standardized performance indicators measuring health *istitha'ah* certification rates, vaccination coverage, emergency response effectiveness, morbidity and mortality trends, administrative processing times, complaint resolution, and public satisfaction. Institutionalizing periodic monitoring and evaluation would enable policymakers to identify implementation weaknesses and formulate corrective policies based on empirical evidence rather than administrative assumptions (Sugeng et al., 2025).

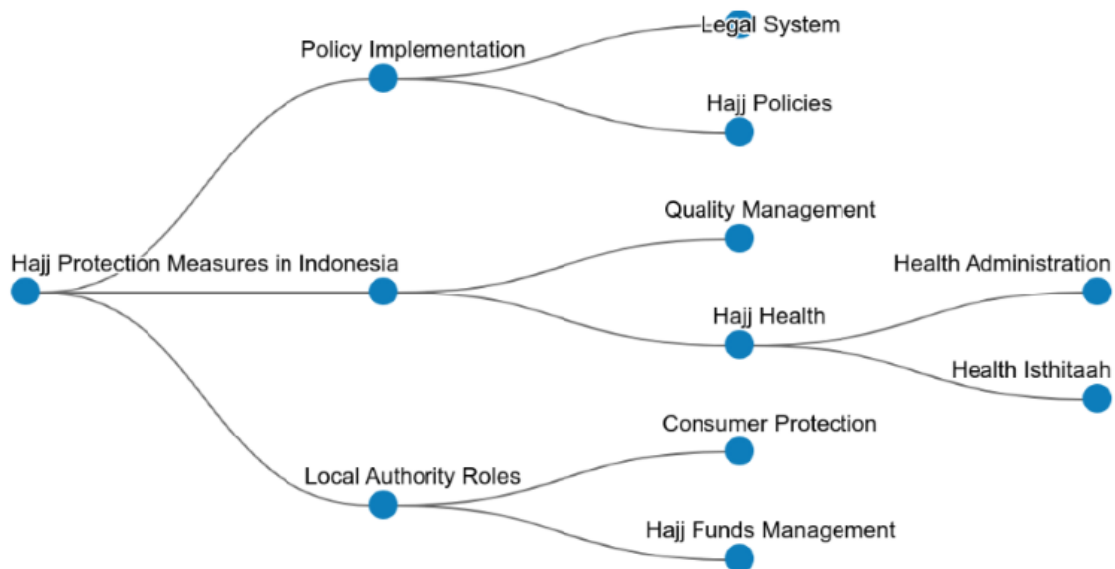


Figure 1. Systematic Mapping of Hajj Protection Measures in Indonesia

Assessment of policy effectiveness also depends upon systematic collection and integration of administrative and health data. Local governments should compile comprehensive information regarding morbidity, mortality, hospitalization rates, chronic disease prevalence, emergency incidents, and health outcomes experienced by pilgrims. When integrated into national information systems administered by the Ministry of Religious Affairs and the Ministry of Health, these data enable cross-regional comparison, early identification of emerging risks, and continuous refinement of health policies. Pane et al. (2019) and Rustika et al. (2020) demonstrate that epidemiological evidence provides valuable guidance for improving screening protocols, vaccination strategies, and preventive interventions. Accordingly, strengthening data governance should become an integral component of legal protection because evidence-based policymaking enhances accountability, transparency, and institutional responsiveness.

Beyond quantitative indicators, participatory governance should also be strengthened through structured feedback mechanisms involving pilgrims themselves. Surveys, complaint management systems, public consultations, and post-Hajj evaluations provide qualitative evidence concerning the effectiveness of health services, administrative procedures, financial information, and regulatory implementation. Such participatory mechanisms are consistent with the principles of transparency and accountability established under Law Number 8 of 2019, while simultaneously promoting greater public trust in government institutions. Prabowo and Sulistianingsih (2020) emphasize that institutional accountability cannot be achieved solely through internal supervision but also requires continuous engagement with service users. Consequently, incorporating pilgrims' experiences into governance evaluation enables local governments to identify practical implementation gaps that may not be visible through statistical indicators alone.

Financial governance likewise requires stronger preventive measures at the local level. Although Law Number 34 of 2014 concerning Hajj Financial Management assigns responsibility for managing Hajj funds to the Hajj Financial Management Agency (*Badan Pengelola Keuangan Haji/BPKH*), local authorities remain essential actors in protecting prospective pilgrims from misinformation and financial fraud. Public education regarding official registration procedures, payment mechanisms, and licensed travel operators should therefore become a routine component of local Hajj administration. Collaboration with financial institutions, law enforcement agencies, and the Ministry of Religious Affairs would further strengthen preventive supervision against fraudulent Hajj and Umrah schemes that continue to exploit prospective pilgrims (Setiawan, 2025).

The systematic mapping presented in Figure 1 synthesizes these governance relationships into an integrated conceptual framework. "Hajj Protection Measures in Indonesia" functions as the central governance objective supported by three mutually interconnected dimensions: policy implementation, quality and health management, and local authority functions. Policy implementation represents the normative foundation established through national legislation governing Hajj administration, regional government responsibilities, health regulation, and Hajj financial management. The quality and health management dimension demonstrate that effective health *istitha'ah* depends upon integrated administrative systems, preventive healthcare, and continuous quality assurance. Meanwhile, the local authority dimension illustrates that effective pilgrim protection encompasses regulatory enforcement, public education, financial transparency, and community engagement. Rather than functioning independently, these three governance dimensions interact continuously to produce an integrated legal protection system for Indonesian pilgrims.

Therefore, strengthening Hajj protection requires regulatory harmonization, preventive public health strategies, integrated digital governance, evidence-based monitoring, financial transparency, and participatory evaluation. Local authorities occupy a central position because they translate national legal norms into practical public services directly experienced by pilgrims.

When supported by coherent regional regulations, adequate institutional capacity, integrated information systems, and sustained collaboration among government agencies, healthcare institutions, religious organizations, and local communities, local governments can move beyond their traditional administrative role to become strategic legal protection actors. Such an integrated governance model not only enhances the effectiveness of Hajj administration but also ensures that the legal rights, safety, and welfare of Indonesian pilgrims are protected consistently throughout every stage of the pilgrimage.

4. Conclusion

Local authorities occupy a strategic and multifaceted position in the protection of Indonesian Hajj pilgrims. Their responsibilities extend beyond administrative facilitation to encompass health protection, regulatory enforcement, financial oversight coordination, and community engagement. The implementation of health *istitha'ah* demonstrates how local governments directly influence pilgrim safety through screenings, guidance, and preventive measures. At the same time, their alignment with national regulations and religious guidelines ensures that pilgrimage management remains legally and normatively grounded. However, the effectiveness of these roles is shaped by structural and operational constraints. Regulatory fragmentation, uneven local legal frameworks, limited resources, and digital capacity gaps can weaken implementation. The presence of fraudulent practices in Hajj and Umrah services further underscores the need for stronger local supervision and public education. Collaboration with ministries, health agencies, and religious organizations has proven essential in addressing these limitations and enhancing legitimacy.

Moving forward, strengthening Hajj protection requires clearer local regulations, data-driven monitoring systems, and sustained public health education. When supported by robust governance and inter-institutional collaboration, local authorities can function not merely as implementers but as key guardians of pilgrim welfare. Their role is therefore central to ensuring that the Hajj is conducted safely, lawfully, and in accordance with both public policy and Islamic principles. Theoretically, this study contributes to the legal governance literature by developing an integrated framework that conceptualizes the protective functions of local authorities across health, financial, and regulatory dimensions within Indonesia's decentralized Hajj governance system. From a policy perspective, the findings provide practical guidance for policymakers to strengthen regional regulatory frameworks, institutional capacity, and inter-agency coordination to enhance the effectiveness and legal coherence of Hajj protection measures.

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