

## Maqasid al-Syariah as a Framework for Religious Affairs Offices' Role in Stunting Prevention

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**Abstract:** Stunting remains a critical multidimensional crisis in Indonesia, with Cenrana District in Maros showing a significant increase in cases despite national reduction efforts. Although previous studies have examined the role of religious actors in health, few have analyzed their interventions through the philosophy of systemic law. This study investigates the strategic role of the Religious Affairs Office (KUA) in Cenrana in preventing stunting using Jasser Auda's *Maqasid al-Syari'ah* System Approach. Using a qualitative field research design, data were collected through interviews with KUA officials, health center staff, and village heads, supported by document analysis. This study reveals that KUA interventions operationalize three key system features in the maqasid system approach, namely Cognition, which reconstructs public understanding of stunting from "fatalistic destiny" to a threat to reason (*Hifdz al-Aql*); second, the features of Interrelated Wholeness and Hierarchy, which strictly enforce the age limit of 19 for marriage by integrating biological readiness into the validity of a



legal marriage (*Hijdz al-Nash*); and finally, the feature of Openness, which is demonstrated through cross-sector collaboration in which religious policies are validated by medical data. This study concludes that the KUA has shifted the Maqasid paradigm from mere protection (*hifdz*) to active human development (*tanmiyah*), positioning religious institutions as important agents in public health outcomes.

**Keywords:** Office of Religious Affairs, Stunting, Framework Maqasid, Maqasid System

**Abstrak:** Stunting tetap menjadi krisis multidimensional yang kritis di Indonesia, dengan Kabupaten Cenrana di Maros menunjukkan peningkatan kasus yang signifikan meskipun ada upaya pengurangan nasional. Meskipun studi sebelumnya telah meneliti peran aktor agama dalam kesehatan, hanya sedikit yang menganalisis intervensi mereka melalui filsafat hukum sistemik. Studi ini menyelidiki peran strategis Dinas Agama (KUA) di Cenrana dalam mencegah stunting menggunakan Pendekatan Sistem *Maqasid al-Syari'ah* Jasser Auda. Dengan menggunakan desain penelitian lapangan kualitatif, data dikumpulkan melalui wawancara dengan pejabat KUA, staf puskesmas, dan kepala desa, yang didukung oleh analisis dokumen. Studi ini mengungkapkan bahwa intervensi KUA mengoperasionalkan tiga fitur sistem utama pada maqasid pendekatan sistem yaitu Kognisi, yang merekonstruksi pemahaman publik tentang stunting dari "takdir fatalistik" menjadi ancaman terhadap akal (*Hijdz al-Aql*); kedua fitur Keutuhan dan Hierarki yang Saling Terkait, yang secara ketat menegakkan batasan usia pernikahan 19 tahun dengan mengintegrasikan kesiapan biologis ke dalam validitas pernikahan yang sah (*Hijdz al-Nash*); dan terakhir fitur Keterbukaan, yang ditunjukkan melalui kolaborasi lintas sektor di mana kebijakan agama divalidasi oleh data medis. Studi ini menyimpulkan bahwa KUA telah menggeser paradigma Maqasid dari sekadar perlindungan (*hifdz*) menjadi pengembangan manusia yang aktif (*tanmiyah*), menempatkan lembaga-lembaga keagamaan sebagai agen penting dalam hasil kesehatan masyarakat.

**Kata Kunci:** Kantor Urusan Agama, Stunting, Kerangka Kerja Maqasid, Maqasid Sistem

## A. Introduction

Quality human resources are the first step in making Indonesia a developed country. Currently, the quality of human resources in Indonesia is still considered low. Data from Statistics Indonesia in 2022 shows that 39.10% of the workforce in Indonesia are elementary school graduates or below, which means they have never attended school, have not graduated from elementary school, or have graduated from elementary school. Indonesia is classified as a developing country due to the low quality of its human resources. Indonesia still faces various health problems, especially those related to nutrition, despite its efforts to develop quality human resources. The World Health Organization states that globally, 22.3% or 148.1 million children under the age of 5 suffer from stunting. The problem of stunting is a major concern in various countries, including Indonesia, due to its long-term impact on children's health and development. The Indonesian Nutrition Status Survey shows that the prevalence of stunting in Indonesia is still above 20% in 2019-2022. This figure means that the WHO target of 20% has not been met.<sup>1</sup>

Stunting is a serious health problem experienced by children in Indonesia. Stunting occurs when children experience growth disorders due to chronic malnutrition, characterized by below-standard height or length, especially during the first thousand days

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<sup>1</sup> Auliya Rabbani, Charisma Eka Madinah, and Vindy Wahyu Arfianti, "Upaya Pencegahan Stunting Terintegrasi Melalui Edukasi Dan Pemberian Makanan Tambahan Pada Balita Di Desa Sukosari Kecamatan Trawas Kabupaten Mojokerto," *JPPM (Jurnal Pengabdian Dan Pemberdayaan Masyarakat)* 8, no. 2 (2024): 265–75.

of life. Children who experience stunting have shorter stature than their peers and are at risk of cognitive developmental delays. This phenomenon not only affects individual health, but can also impact a country's social and economic development potential.<sup>2</sup>

In terms of stunting rates, Indonesia ranks fifth highest among Asian countries.<sup>3</sup> making stunting a leading public health issue in Indonesia and a major concern for the Indonesian government. This is because stunting has short- and long-term effects on human capital development and the future productivity of individuals affected as they grow into adulthood.<sup>4</sup>

The prevalence of stunting in South Sulawesi as of August 2025 is relatively high at 23.3 percent. This figure is still above the national average of 19.8 percent.<sup>5</sup> Maros Regency has one of the highest rates of stunting in South Sulawesi.<sup>6</sup> As of April 2025,

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<sup>2</sup> Republik Indonesia, “Peraturan Presiden No 72 Tahun 2021 Tentang Percepatan Penurunan Stunting” (2021).

<sup>3</sup> Sofyan Sufri et al., “Child Stunting Reduction in Aceh Province: Challenges and a Way Ahead,” *Maternal and Child Health Journal* 27, no. 5 (2023): 888–901.

<sup>4</sup> Sukmawati Sukmawati et al., “Health Cadres’ Experiences in Detecting and Preventing Childhood Stunting in Indonesia: A Qualitative Study,” *BMC Public Health* 25, no. 1 (2025): 2987.

<sup>5</sup> “Prevalensi Stunting Sulsel Masing Tinggi, BKKBN Sulsel Gencarkan Program Genteng – Solusi Media,” Solusi Media, 2025.

<sup>6</sup> Renaldi Cahyadi, “Jenepono, Enrekang, Takalar, Maros, Dan Tana Toraja Catat Angka Stunting Tertinggi Di Sulsel - Tribun-Timur.Com,” *Tribun-timur.com*, 2025.

there were 3,444 cases of stunting.<sup>7</sup> Cenrana Subdistrict is one of the areas in Maros Regency that has shown a significant increase. The number of stunting cases rose in 2024. In February, there were 106 cases of stunting, and in August, that number increased to 122 cases. Stunting cases rose again in 2025. In April, the number of stunting cases increased again, reaching 128 cases. This shows that stunting still exists and has not been fully addressed. (Official document from the Cenrana Community Health Center). This situation makes Cenrana an attractive location for research related to stunting.

Although stunting is a health issue, its management in Indonesia involves all components of the government. One of them is religious counselors at the Ministry of Religious Affairs, who are mandated to be one of the important pillars in providing knowledge to individuals or communities who need their assistance.<sup>8</sup>

The role of religious counselors synergizes with the Office of Religious Affairs (KUA), which plays a strategic role in preparing prospective brides and grooms for a healthy and prosperous married life, including efforts to prevent stunting. The KUA is not only responsible for administrative matters related to marriage, but

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<sup>7</sup> Nurul Hidayah, "3.444 Kasus Stunting Di Maros, Masuk 5 Tertinggi Di Sulsel - Tribun-Timur.Com," *Tribun-timur.com*, 2025.

<sup>8</sup>Adelia Putri, "Peran Penyuluh Agama Dalam Mengurangi Terjadinya Stunting Di Kantor Urusan Agama (KUA) Kecamatan Ciputat Timur," 2023.

also functions as an educational institution that provides in-depth understanding of the importance of health in the family.<sup>9</sup>

With the percentage of the majority of Muslims in Indonesia, the aspect of Islamic law is considered as part of the Living Law which is very closely related to the percentage of Muslims who are the majority. So *Maqasid al-Syari'ah* was chosen as a framework, because of the role of *maqasid al-Syari'ah* in applying Islamic law to the appropriate legal object.<sup>10</sup>

Based on this, researchers consider it necessary to conduct further research in a study entitled “the role of the office of religious affairs in preventing stunting from the perspective of Maqasid al-Syari'ah (case study of Cenrana district, Maros regency)”.

The novelty of this research can be seen through the literature review, namely the results of previous relevant studies. Among the studies relevant to the role of the office of religious affairs in preventing stunting from the perspective of *Maqasid al-Syari'ah* (case study of Cenrana district, Maros regency), Auliyaur Rabbani et al. highlight Efforts to Prevent Stunting Through Education and Supplementary Feeding Sukosari Village, Trawas Subdistrict, Mojokerto Regency.<sup>11</sup> Sofyan Sufri et al. focuses on highlighting

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<sup>9</sup> “Asosiasi Penghulu Republik Indonesia - Website Resmi APRI Nasional,” Biro Humas APRI Banten, 2024.

<sup>10</sup> Abd Rauf Muhammad Amin, *Esai-Esai Maqasid Al-Syariah* (Depok: Rajawali Pers, 2022).

<sup>11</sup> Rabbani, Madinah, and Arfianti, “Upaya Pencegahan Stunting Terintegrasi Melalui Edukasi Dan Pemberian Makanan Tambahan Pada Balita Di Desa Sukosari Kecamatan Trawas Kabupaten Mojokerto.”

Child Stunting Reduction in Aceh Province: Challenges and a Way Ahead.<sup>12</sup> Meanwhile, Adelia Putri focus on highlighting The role of religious counselors in reducing stunting at the Religious Affairs Office (KUA) of East Ciputat Subdistrict.<sup>13</sup> On the other hand, Sofyan Sufri et al. highlight the current efforts of Aceh governments and relevant actors on child stunting reduction.<sup>14</sup> Adapun Sukmawati et al. Highlight Health workers' experience in detecting and preventing stunting in children in Indonesia.<sup>15</sup>

The fundamental idea presented in this paper focuses on the role of the Ministry of Religious Affairs in helping to prevent stunting, specifically in the Cenrana subdistrict in Maros. It is hoped that the results will provide a deeper understanding of the effectiveness of the programs implemented by the Ministry of Religious Affairs in supporting stunting prevention.

## **B. Method**

This study is a qualitative study. The research design is field research conducted in Cenrana Village, Maros Regency. Primary data was sourced from the KUA, Cenrana Village officials, and the Puskesmas, supported by secondary sources in the form of

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<sup>12</sup> Sufri et al., “Child Stunting Reduction in Aceh Province: Challenges and a Way Ahead.”

<sup>13</sup> Putri, “Peran Penyuluh Agama Dalam Mengurangi Terjadinya Stunting Di Kantor Urusan Agama (KUA) Kecamatan Ciputat Timur.”

<sup>14</sup> Sufri et al., “Child Stunting Reduction in Aceh Province: Challenges and a Way Ahead.”

<sup>15</sup> Sukmawati et al., “Health Cadres’ Experiences in Detecting and Preventing Childhood Stunting in Indonesia: A Qualitative Study.”

working documents and observations during the research in Cenrana Village. After the data is collected, it will be sorted and coded to match the features of Jasser Auda's maqasid system, in order to assess whether the Cenrana KUA program has been implemented in accordance with the common good desired in the prevention of stunting.

## C. RESULTS AND DISCUSSION

### 1. Intervention of the Maqasid al-Syariah Framework in Health Issues

Historically, the discourse on *Maqasid al-Syari'ah* has evolved from a protectionist paradigm to a developmental framework. Abu Ishaq al-Shatibi, often revered as the founding father of this discipline, codified the objectives of Islamic law into the preservation of five essentials (*al-daruriyyat al-khamsah*): faith, life, intellect, lineage, and property. While Al-Shatibi's classical formulation provided a robust foundation for legal stability, contemporary scholars argue that it tends to be static. In the modern era, Jasser Auda has revitalized this discipline by introducing a "Systems Approach," shifting the paradigm from mere preservation (*hifdz*) to development (*tanmiyah*) and human rights. Auda's framework reinterprets the Maqasid not as a closed hierarchy, but as an open, multidimensional system capable of addressing complex modern challenges that the classical definitions were not originally designed to encompass.<sup>16</sup>

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<sup>16</sup> Jasser Auda, "Systems as Philosophy and Methodology for Analysis," *Maqasid Al-Syariah as Philosophy of Islamic Law*, 2019, 26–55, <https://doi.org/10.2307/j.ctvkc67tg.8>.



Without this paradigm shift, Islamic jurisprudence (*fiqh*) risks falling into a state of stagnation, particularly when addressing multifaceted societal issues. A strictly textual or atomistic approach—one that isolates legal rulings from their social contexts often fails to provide adequate solutions for contemporary crises. When *fiqh* is limited to binary classifications of *halal* and *haram* without considering the broader systemic impact, it becomes disconnected from reality (*waqi'*). This rigidity is particularly problematic in the realm of public welfare, where complex issues require more than just legal validity; they require ethical teleology and social efficacy. Without a systems-based perspective, religious institutions may find themselves legally correct but socially irrelevant, unable to contribute meaningfully to urgent humanitarian problems.<sup>17</sup>

To bridge the gap between abstract legal theory and pressing social realities, a methodological reconciliation is required. The Systems Approach offers this bridge by viewing Islamic law as a holistic entity with cognitive features such as wholeness and interrelatedness. Instead of treating a health crisis in isolation, this approach mandates that legal scholars consider the interconnected network of causes and effects. It moves the discourse from "what is the ruling on this act?" to "what is the ultimate purpose of this intervention?" By adopting this lens, the *Maqasid* are no longer just tools for legal deduction but become a philosophical framework

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<sup>17</sup> TEGUH ANSHORI, "MENUJU FIQIH PROGRESIF (Fiqh Modern Berdasarkan Maqashid Al Syariah Perspektif Jaser Auda)," *Al-Syakhsiyah: Journal of Law & Family Studies* 2, no. 1 (2020): 168–81, <https://doi.org/10.21154/syakhsiyah.v2i1.2166>.

for social engineering, allowing religious directives to align seamlessly with scientific and sociological imperatives.<sup>18</sup>

In the context of public health, specifically regarding stunting and malnutrition, the Systems Approach necessitates a re-evaluation of *Hifdẓ al-Nafs* (protection of life) and *Hifdẓ al-Nasl* (protection of lineage). Under the classical view, protection might be limited to the prohibition of killing or physical harm. However, through Auda's developmental lens, *Hifdẓ al-Nafs* expands to include the active promotion of quality of life, nutritional sufficiency, and physical well-being.<sup>19</sup> Health is viewed not merely as the absence of disease, but as a fundamental human right necessary for the fulfillment of religious and social duties. The "multidimensionality" feature of the systems approach recognizes that stunting is not just a biological issue but a systemic failure involving economics, education, and sanitation, thus requiring a holistic religious response.

Consequently, this theoretical expansion compels religious institutions, such as the Office of Religious Affairs (KUA), to transcend their traditional administrative roles. By operationalizing the Systems Approach, these institutions become active agents in the preventive health sector. The prevention of stunting

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<sup>18</sup> Arina Haqan, "Rekonstruksi Maqasid Al-Syari'ah Jasser Auda," *Jurnal Pemikiran Dan Ilmu Keislaman* 1, no. 1 (2018): 1–2, <http://jurnal.instika.ac.id/index.php/jpik/article/view/72>.

<sup>19</sup> Mohammad Ali G. Al Zuraib and Waleed Khalid Al-Qahtani, "A Jurisprudential Analysis of the Maqasid of Preserving Life and Its Impact on Formulating Health Policies in Islamic Countries," *Journal of Neonatal Surgery* 14, no. 26S SE-Original Article (May 23, 2025): 811–13, <https://www.jneonatsurg.com/index.php/jns/article/view/6369>.

transforms from a secular medical agenda into a religious mandate rooted in the preservation of future generations. This perspective empowers religious officials to advocate for pre-marital health screening and nutritional education as acts of piety (*ibadah*). Ultimately, integrating *Maqasid al-Syari'ah* into health policy ensures that interventions are not only scientifically sound but also culturally and spiritually resonant with the community.

## **2. Strategy of the Cenrana Subdistrict Religious Affairs Office in preventing stunting**

### **a. Socialization to the Community**

As explained by Ash Abd.Rasyid, head of the Religious Affairs Office of Cenrana Subdistrict, Maros Regency, regarding the extent of public attention to the issue of stunting so far.

“Actually, because many of them do not understand the dangers of stunting, they are simply unaware that stunting has a huge impact on children's physical development, intellectual development, and personality. As a result, there is still a high level of indifference among the community towards stunting, which requires socialization efforts in the community.”<sup>20</sup>

The statement by the Head of the Cenrana Religious Affairs Office emphasized the low level of public understanding of the dangers of stunting, resulting in a lack of awareness of its significant impact on children's physical condition, intellectual development, and personality. This is in line with research that reveals a significant correlation between public knowledge of

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<sup>20</sup> “Hasil Wawancara Dengan Kepala Kantor Uruan Agama Kecamatan Cenrana-Muhammad Ash-Maros, 04 Juni 2025,” n.d.

stunting and the prevalence of stunting cases in the community.<sup>21</sup> These outreach efforts are aimed at raising public awareness of the serious issue of stunting, which is why intensive and sustained outreach on various aspects is essential.

#### **b. Pre-marital education**

In efforts to prevent stunting at the KUA, there is a term called *suscatin* or premarital education. Premarital education conveys many messages, ranging from how to be a husband/wife and at the same time a father/mother to children, to understanding how to have a good married life<sup>22</sup>.

Based on information obtained by researchers from Patahuddin, a functional advisor at the Cenrana subdistrict KUA, regarding the preaching material delivered to the community as an effort to prevent stunting at the family level.

“The material for his preaching is the 1974 marriage law on preventing underage marriage, so people under the age of 19, both male and female, cannot be married. Efforts to prevent underage marriage and its implications, and then we will publicize our preaching efforts everywhere. For example, as an extension worker, I visit remote areas to provide information about the requirements for marriage. In this sub-

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<sup>21</sup> Fani Cahya Wahyuni et al., “Hubungan Literasi Gizi Dan Pengetahuan Gizi Terhadap Kejadian Stunting: A Scoping Review,” *Amerita Nutrition* 7, no. 3SP (2024): 71–85.

<sup>22</sup> Winny Kirana Hasanah et al., “Analisis Pelaksanaan Edukasi Pranikah Terkait Kesehatan Reproduksi Pada Pasangan Calon Pengantin Muslim (Narrative Literature Review),” *HEARTY: Jurnal Kesehatan Masyarakat* 10, no. 2 (2022): 53–66.

district, there are seven villages where people are not yet aware of the requirements for marriage, even though they are not yet 19 years old, which is the minimum age for marriage. Therefore, our efforts extend to the most remote areas to ensure that the marriage age aligns with existing regulations. Next, we coordinate with the village head, who is the responsible authority regarding age, to ensure that no one is permitted to marry before reaching the age of 19. So, those are some of the things we do to prevent early marriage and pregnancy, as this is also a challenge. However, there is a note of progress that if the requirements are not met, we can refuse<sup>23</sup>.

There is a clear link between early marriage and stunting. This is particularly evident in adolescents' knowledge of the risks of pregnancy, their lack of insight into the responsibilities of pregnancy, and their understanding of how to care for their children's growth.<sup>24</sup> Lack of knowledge leads to poor health practices among pregnant women, which ultimately results in children lacking the support they need for healthy growth and development, leading to stunting.

Based on the above description, it can be concluded that the preaching material (included in suscatin/pre-marital education) delivered on the prevention of stunting is material related to the

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<sup>23</sup> “Hasil Wawancara Dengan Penyuluh Fungsional KUA Kecamatan Cenrana-Patahuddin-Maros, 04 Juni 2025,” n.d.

<sup>24</sup> Indah Dwi Ayuni et al., “Hubungan Pengetahuan Remaja Putri Terhadap Bahaya Kehamilan Pada Usia Remaja,” *Indonesia Journal of Midwifery Sciences* 1, no. 2 (2022): 47–52.

1974 Marriage Law, particularly regarding efforts to prevent marriage for men and women under the age of 19. Various efforts have been made to raise public awareness, especially in remote areas, about the official requirements for marriage. In addition, extension workers collaborate with village heads to determine the age of residents so that they do not grant marriage permits to those who have not reached the minimum age. Marriages can be rejected if the age requirement is not met. The age of marriage is closely related to physical and mental readiness, including the risk of early pregnancy, so this prevention is important.

### **c. Cross-Sector Collaboration**

As explained by Musniar Muhusini, the person in charge of nutrition at the Cenrana Community Health Center, regarding the health center's efforts to prevent stunting.

“The strategy is that we coordinate with the National Population and Family Planning Agency (BKKBN) and the Religious Affairs Office (KUA) in relation to the village. Why the village? Because the budget for stunting is all in the village, so we coordinate this. How can we hold meetings in the sub-district or cross-sector in the community health center (PKM) related to stunting prevention”<sup>25</sup>.

Based on this explanation, it can be concluded that the budget for handling stunting is mostly at the village level. The stunting prevention strategy is implemented through cross-sectoral agencies such as the National Population and Family Planning Agency (BKKBN), the Religious Affairs Office (KUA), and the village

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<sup>25</sup> “Hasil Wawancara Dengan Penanggung Jawab Gizi Puskesmas Cenrana-Musniar Muhusini-Maros, 11 Juni 2025,” n.d.

government. The goal is to encourage cross-sectoral agencies to improve synergy in preventing stunting.

In cross-sector collaboration, KUA Cenrana also conducts visits to affected families as part of its prevention program. These visits are a manifestation of cooperation among relevant stakeholders to provide concrete and targeted assistance.

### **3. Analysis of the Maqasid Framework System Approach in the Stunting Prevention Program**

The interview with the Head of the Cenrana Religious Affairs Office revealed that the main problem with stunting is a lack of understanding among the community. People are unaware that stunting damages children's physical, intellectual, and personality development. This lack of understanding has led to stigmatization of children suffering from stunting, without any effort to improve the situation.<sup>26</sup>

The Cenrana KUA program, when analyzed using the maqasid system, has adopted two important features, namely Cognition & Purposefulness. From Auda's perspective, the feature of Cognition requires a distinction between revelatory texts and human understanding. This finding shows that KUA is undertaking efforts to reconstruct the community's cognition. Until now, the community may have understood stunted/malnourished children as mere destiny. However, KUA has changed this narrative into a harm that must be avoided.

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<sup>26</sup> Agus Riyadi and Heni Fitrianti, "Konstruksi Sosial Masyarakat Desa Cranggang Kecamatan Dawe Kabupaten Kudus Tentang Stunting," *Komunitas* 14, no. 1 (2023): 100–119.

The socialization carried out by the KUA shifted the focus of Maqasid from merely *Hifdẓ al-Nafs* (preservation of the soul) to *Hifdẓ al-Aql* (preservation of the mind). When the Head of the KUA mentioned the impact of stunting on children's intellectual level, he was emphasizing that stunting is a threat to the future of the Muslim generation's minds. Therefore, this socialization is not merely health education, but a purposeful effort to save the intellectual capacity of the *ummah* in the future.

Furthermore, KUA Counselor (Patahuddin) emphasized the enforcement of Marriage Law No. 1/1974 (revised by Law 16/2019) regarding the age limit of 19 years. The KUA's measures in rejecting underage marriages and conducting outreach (preaching in remote areas) to prevent them are based on the risks of pregnancy and unpreparedness for parenting. This program is also in line with the features of Wholeness & Interrelated Hierarchy. The KUA's intervention in prohibiting early child marriage is a perfect manifestation of the feature of Wholeness. In classical atomistic fiqh, the validity of marriage is often viewed solely in terms of the fulfillment of the pillars (guardian, witnesses, *ijab kabul*). However, Auda's systemic approach seeks to view Islamic law as a unified whole, where marriage is the gateway to creating a society that is physically healthy and spiritually pious.

The Cenrana KUA applies the principle that the legal validity of marriage, particularly in relation to fiqh, cannot be separated from biological and mental readiness. The rejection of marriage under the age of 19 shows that *Hifdẓ al-Nasl* (preserving offspring) has an interrelated hierarchy with reproductive readiness. The KUA redefines the concept of *Istitha'ab* (capability) in marriage as not only the ability to provide a dowry, but also a matter of age (19



years) and uterine readiness in order to prevent stunting. If these systemic requirements are not met, the marriage is rejected for the greater good.

The latest analysis based on interviews with Mrs. Musniar from the Community Health Center (Puskesmas) shows close collaboration between the KUA, Puskesmas, BKKBN, and the Village Government (budget holder). They conducted joint field visits to affected families. This is in line with the openness and multidimensional features of the maqasid system. The findings in Cenrana prove that the KUA is no longer an ivory tower that only deals with prayers and record keeping. The KUA is open to input from the health system (Puskesmas) and the population system (BKKBN). The KUA recognizes medical authority in determining stunting criteria, showing that religious law is validated by science. The last feature seen is also used in the KUA program to prevent stunting, namely multidimensionality. The problem of stunting is addressed multidimensionally. There are theological dimensions (KUA preaching), medical dimensions (Puskesmas nutrition), and economic/political dimensions (village budgets). This collaboration confirms that the achievement of Maqasid cannot be done by one institution alone. Joint visits to residents' homes are operational evidence that religious protection (*Hifdz al-Din*) goes hand in hand with social and health security.

#### **D. Conclusion**

This study concludes that the Office of Religious Affairs (KUA) in Cenrana District has effectively transcended its traditional administrative boundaries to become a pivotal agent in stunting prevention. By analyzing the KUA's interventions through

the lens of Jasser Auda's Maqasid al-Syari'ah Systems Approach, this research reveals a significant paradigm shift in how Islamic law is applied to public health crises.

Three key findings substantiate this conclusion. First, through the feature of Cognition and Purposefulness, the KUA has successfully reconstructed public perception regarding stunting. The socialization programs have shifted the community's mindset from viewing malnutrition as a fatalistic destiny to recognizing it as a preventable threat to the preservation of intellect (*Hifdz al-Aql*). Second, the application of Wholeness and Interrelated Hierarchy is evident in the strict enforcement of the 19-year marriage age limit. The KUA has integrated biological readiness into the legal validity of marriage, thereby redefining the protection of lineage (*Hifdz al-Nasl*) to prioritize the quality and health of future generations over mere legitimacy. Third, the KUA operates as an open system (Openness and Multi-dimensionality) by establishing cross-sectoral collaborations with the Community Health Center (Puskesmas) and local government. This synergy demonstrates that religious authority acts as a validator for medical science, creating a comprehensive support system for family resilience.

Theoretically, this research confirms that Maqasid al-Syari'ah is a dynamic developmental framework (*Tanmiyah*) capable of addressing contemporary "living law" issues. Practically, the study implies that integrating religious institutions into national health strategies is not only viable but essential. It is recommended that policymakers further institutionalize this collaborative model, ensuring that religious leaders are systematically equipped with health literacy to maximize their role in the national agenda of stunting reduction.

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