

**The Public Policy Implementation on The Pre-Marital  
Screening for Prospective Bride and Groom  
(A Study on The Implementation of The Regulation of The  
Regent of Pidie, Aceh, Number 54/ 2018)**

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**Abstract**

The goal is consequential, but it has not been implemented appropriately. The purpose of this research is to explain the implementation of the health examination policy for the prospective brides and grooms in Pidie, Aceh. This research is a qualitative study, located in Mutiara Timur District, Pidie. The data were obtained through observation, interviews, and document study which were then analyzed by using Gindle's theory of public policy. The results showed that the implementation of health examinations for the brides and grooms did not run well. The government has not prepared all the equipment needed for medical examinations which result in the inability of the screening procedures to detect certain diseases. Also, the community's low understanding of the noteworthiness of health examination persisted as the result of low socialization. They only considered it as sheer administrative requirements. In consequence, it caused a fiasco to achieve the goal of pre-marital screening, specifically to avoid every married couple contracted any disease, and as a preventive measure to decrease criminal behavior in the community. To get the desired outcomes, the Pidie Regency Government must provide all the instruments needed and carry out a joint movement to socialize this policy to the public.

**Keywords:** *Public Policy, Pre-marital Screening, Prospective Brides and Grooms*

**Implementasi Kebijakan Publik  
Pemeriksaan Kesehatan Calon Pengantin  
(Studi Terhadap Pelaksanaan Peraturan Bupati Pidie, Aceh,  
Nomor 54 Tahun 2018)**

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***Abstrak***

*Tujuan penelitian ini adalah untuk menjelaskan pelaksanaan kebijakan pemeriksaan kesehatan calon pengantin di Pidie, Aceh. Penelitian ini merupakan penelitian kualitatif, berlokasi di Kecamatan Mutiara Timur, Pidie. Data diperoleh melalui observasi, wawancara, dan studi dokumen yang kemudian dianalisis dengan teori kebijakan publik Grindle. Hasil penelitian menunjukkan bahwa implementasi pemeriksaan kesehatan bagi calon pengantin tidak sepenuhnya berjalan dengan baik. Pemerintah tidak menyiapkan seluruh perangkat yang dibutuhkan untuk pemeriksaan kesehatan yang berdampak pada tidak semua jenis penyakit yang harus diperiksa dapat terlaksana. Selain itu, rendahnya pemahaman masyarakat terhadap nilai penting pemeriksaan Kesehatan sebagai akibat rendahnya sosialisasi. Mereka hanya menganggapnya sebagai pemenuhan syarat administratif belaka. Dampak besarnya adalah tidak tercapainya tujuan pemeriksaan kesehatan, yaitu setiap pasangan yang berumah tangga terbebas dari penyakit, dan sebagai upaya preventif meningkatnya perilaku kriminal di tengah masyarakat. Untuk memperoleh capaian yang diinginkan, maka pemerintah kabupaten Pidie harus menyediakan segala instrumen yang dibutuhkan dan melakukan gerakan bersama mensosialisasikan kebijakan ini kepada masyarakat.*

**Kata Kunci:** *Kebijakan Publik, Pemeriksaan Kesehatan, dan Calon Pengantin*

## Introduction

This article discusses medical examinations for couples who are planning to get married. The Pidie Regency Government, Aceh Province, has specified the results of the screening as an administrative requirement that must be lodged to the district level of Office of Religious Affairs (KUA) officers in addition to other documents for marital purposes. These provisions are contained in the Pidie Regent Regulation Number 54/ 2018 on the Pre-marital Screening for the Prospective Bride and Groom. The Pidie Regency Government considers that pre-marital health examinations are indispensable, given the increasing number of drugs and HIV<sup>1</sup> cases occurring in Pidie. As a matter of fact, in 2017, the police succeeded in uncovering 120 cases of *Narkoba* (Narcotics, Psychotropics, and Other Addictive Materials), and in 2018, 146 cases were successfully revealed. From this data, it can be seen that there is an improvement number of offenders that have been successfully handled by the Pidie Police.<sup>2</sup>

The Chief of the Narcotics Unit at Pidie Police Department, Iptu Yusra Aprilia, said that drug cases in 2019 had increased compared to the previous year. From January to June 2019, 107 cases had been handled. The increase in drug cases in 2019 consisted of several age limits for users who have been detained by the Pidie Police Department, including 4 people aged 15 to 19 years old; 14 people aged 20 to 24 years old; 31 people aged 25 to 29 years old; and 30 years old and above as many as 104 people. Meanwhile, from January to December 2018, 146 drug cases were handled. This means there is an increase of about 60 percent.<sup>3</sup>

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<sup>1</sup> Based on the data from the Pidie Regency Health Office, the total number of HIV/ AIDS sufferers in Pidie since 2008 is 46 people and as many as 26 of them were declared dead. During 2018, 9 new HIV sufferers were found, said the Head of Disease Prevention and Control (P2P) Pidie Health Office Turno Junaidi. <http://waspadamedan.com/index.php/2018/12/03/ditemukan-sembilan-penderita-hiv-baru-di-pidie/>. Waspadamedan.com, accessed on 18 February 2019.

<sup>2</sup><http://prohaba.com/index.php/2019/01/18/206-gampong-terpapar-narkoba-di-pidie-dan-pijay/>. Prohaba.com, accessed on 31 August 2019.

<sup>3</sup><https://www.mediaadvokasi.com/2019/07/polres-pidie-ungkap-107-kasus-narkoba.html>? m=1. Mediaadvokasi.com, accessed on 31 August 2019.

Consequently, since 2018 the Pidie Government has begun to implement a mandatory pre-marital screening for every prospective bride and groom. The aim is to suppress and even eradicate the number of drug users in Pidie. The number of users is relatively large among adults who enter the marriageable age. It is hoped that prospective brides and grooms will abandon and break loose from the drug abuse. If they get caught as drug users by health examination, they will not be able to get married. For people who are indicated as drug users, of course, the doctor will not issue a health certificate.

The Pidie Government, which has a *taklif* (legal obligation) to manage public interests,<sup>4</sup> also has a responsibility to educate a drug-free generation. Theoretically, the next generation who are healthy and free from HIV / AIDS and drugs, are born from parents who are also healthy and free from drug abuse. The reason for this application is considered very logical and worthy of support, even though there is no *nash* (text) that explicitly mentions it. Besides that, from the argument of *maslahah mursalah*, this clause can be permitted (*mubah*). *Maslahah mursalah* is something that is considered *maslahat* but there is no legal firmness to manifest it, and there are also no specific arguments (the Quran, Hadith, and *Ijma'*) either for or against it.<sup>5</sup>

The permission to apply the rules for medical examinations for the prospective bride and groom would be based on *maslahah mursalah* since these rules do not create any contradiction in the *nash*. It is corresponding to the goal of *syara'*, which is the demand to engender strong generations (not *dhaif*). Allah reminds Muslims to worry about leaving a *dhaif* generation, as explained in the Quran, the ninth verse of Surah an-Nisā'.

Decent regulations would signify a mere bagatelle unless they can be implemented properly. For regulation to run well, various supports are needed. These aids include the adequacy of

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<sup>4</sup> At present there is the development of *mahkum alaih* (legal subject) from only individuals plus institutions, including state institutions.. See Analiasyah, "Pengembangan Subjek Hukum dalam Islam dan Pengaruhnya terhadap Pengembangan Fikih: Kajian terhadap Peraturan Perundang-undangan di Indonesia", Conference Proceeding – ARICIS I, 2017, p. 207.

<sup>5</sup> Satria Effendi, M. Zein, *Ushul Fiqh*, (Jakarta: Kencana, 2008), p. 149.

assisting regulations in terms of their implementation techniques, facilities and infrastructure, apparatus readiness, and so forth.

After the researchers conducting a literature review, several studies related to pre-marital screening for prospective brides and grooms were found, such as Zul Akhyar's thesis entitled: *Urgensi Pemeriksaan Calon Pengantin sebagai Salah Satu Syarat Perkawinan*.<sup>6</sup> There are other identical titles. In terms of the title, they look relatively similar to the researchers' title, but there are sharp differences in terms of the findings. A lot of the earlier discussions reviewed the significance of setting the terms. They had discussed them from the aspect of the matrimony purpose, especially to create a harmonious household, the theory of *maqāshid syarī'ah*, or to maintain *hifz al-nasl* as written by Armia Yusuf.<sup>7</sup> This paper describes the theory of policy implementation, which is to examine the implementation of a rule supported by various other instruments. It would be difficult to inspect the regulation implementation from the legal perspective itself because fundamentally, a regulation is enacted to be enforced.

Based on the description above, the purpose of the discussion in this article is to explain the implementation of the Pidie Regent Regulation No. 54/ 2018 on the Pre-marital Screening for Prospective Bride and Groom in terms of policy implementation theory. To achieve this objective, *descriptive-analytical* research was conducted.<sup>8</sup> In this case, the researchers would explain the existing regulation implementation. This research was conducted in Mutiara Timur District, Pidie Regency. The data were collected

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<sup>6</sup> Zul Akhyar, "Zul Akhyar, "Urgensi Pemeriksaan Calon Pengantin sebagai Salah Satu Syarat Perkawinan," *Thesis, (Padang: Universitas Muhammadiyah Sumatera Barat, 2013)*, Accessed on February 2020.

<sup>7</sup> Armia Yusuf, "Syarat Pemeriksaan Kesehatan dalam Perkawinan Islam sebagai Upaya Menjamin Kualitas Keturunan", *Al-Usrah*, Vol 5, No 1 (2017), <http://jurnal.uinsu.ac.id/index.php/alusrah/article/view/1345/0>, (Accessed on 16 January 2020).

<sup>8</sup> According to Sumadi Suryabrata, as quoted by Soejono and Abdurrahman, *descriptive research* is research that intends to describe the existing facts according to the investigated phenomena. According to Hadari Nawawi, this method does not only collect data, but it also includes data analysis and interpretation. Therefore this method is called *descriptive-analytical*. See Soejono and Abdurrahman, *Metode Penelitian; Suatu Pemikiran dan Penerapan*, Ed. II, (Jakarta: Rineka Cipta dan Bina Adiaksara, 2005), p. 21-22.

through observation, interviews, and documentation. Observations were made on the marriage registration process practiced by prospective bride and groom in a district-level KUA. Furthermore, open interviews were conducted with informants consisting of the head of the KUA, the head of the Puskesmas (Community Health Center) at the district level, the village head, the community, and the prospective bride and groom, the married couple, a Gynecologist at RSUD Tgk. Chik Ditiro Sigli, Pidie Regency. They could provide the information needed to determine the implementation of the Regent Regulation. Also, data collection was also carried out by archival records. The documents studied were containing the requirements for marriage at the KUA and documents on the results of medical examinations by doctors at the Puskesmas. Furthermore, the data were analyzed with Merilee S. Grindle's public policy theory. The Regent of Pidie Regulation Number 54 of 2018 is included in public policy. Public policy is the discussion of decisions and actions carried out by the government for the public interest.<sup>9</sup>

### **Public Policy Definition**

The term "public policy" consists of two syllables: "policy" and "public". Etymologically, the meaning of the word "policy" according to the KBBI (The Great Dictionary of the Indonesian Language) is intelligence; mastery; wisdom; or a series of concepts and principles that form the basis of schemes for the implementation of a job, leadership and how to act (regarding government, organization, etc.); statement of ideals, objectives, principles, or intent as a guideline for management in achieving goals; direction line.<sup>10</sup> Etymologically, the meaning of "public" is the crowd (general); all people who come (watch, visit, etc).<sup>11</sup> In simple terms, when the words *policy* and *public* are combined, it can be interpreted as the policy carried out by the government or organization concerning the interests of the crowd (general).

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<sup>9</sup> Surya Fermana, *Kebijakan Publik: Sebuah Tinjauan Filosofis*, (Jogjakarta: Ar-Ruzz Media, 2016), p. 34-35.

<sup>10</sup> Kamus Besar Bahasa Indonesia (KBBI), *Online Version Dictionary*, <https://kbbi.web.id/bijak>

<sup>11</sup> Kamus Besar Bahasa Indonesia (KBBI), *Online Version Dictionary*, <https://kbbi.web.id/publik>

In addition to the etymological understanding, experts define public policy in terminology. Budi Winarno quoted several expert opinions as quoted in the Samodra Wibawa book as follows:<sup>12</sup>

- James E. Anderson (1979) argues that policy is a direction of action that has a purpose, which is determined by one or several actors to solve a problem.<sup>13</sup>
- Amir Santoso (1993) categorizes the opinions of experts into two groups: *firstly*, all government actions are public policies. *Secondly*, public policy is a government decision that has a specific purpose and intention, and has predictable consequences.

Starting from the aforementioned definition, it can be understood that public policy is a government action related to public affairs. Public policy is also interpreted by various government decisions. The government decides to manage the public interest as the government functions itself. All government decisions must have certain goals and objectives to create a desired condition and mutual benefit.

Furthermore, public policy focuses on "the public and its problems". Public policy is the study of "what the government does, why the government takes these actions, and what are the consequences of those actions. More specifically, public policy is the study of government decisions and actions designed in the public interest.<sup>14</sup> In this paper, we will look at the implementation of the Pidie Regency Government's public policy on pre-marital screening for the prospective bride and groom.

### **Grindle on Policy Implementation**

The theory of policy implementation by Merilee S. Grindle is described in her book: *Politics and Policy Implementation in the Third World*. Regarding the implementation of the policy, she wrote in part one of the book. This book is the result of her studies in Africa, Asia, and Latin America which are known as the third

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<sup>12</sup> Samodra Wibawa, *Politik Perumusan Kebijakan Publik*, Ed. I, (Yogyakarta: Graha Ilmu, 2011), p. 2-3.

<sup>13</sup> Also Cited by Sahya Anggara, *Kebijakan Publik*, Ed. I, (Bandung: Pustaka Setia, 2014), p. 35.

<sup>14</sup> Surya Fermana, *Kebijakan Publik: Sebuah Tinjauan Filosofis*, p. 34-35.

world.<sup>15</sup> Grindle states that implementation is a general process of administrative action that can be investigated at a specific program level. A program is implemented when the goals and objectives have been set, the activity program has been structured, and the funds are ready and distributed to achieve the goals.<sup>16</sup> According to her, the measurement of the implementation success can be seen from the process, by firstly questioning whether the implementation of the program is following with what has been determined, specifically by scrutinizing at the program actions of individual projects and secondly whether the program objectives are achieved.<sup>17</sup>

According to Grindle, successful implementation is determined by the degree of implementability of the policy itself.<sup>18</sup> Grindle creates a chart depicting the successful implementation of a policy. According to her, the success of implementing a policy is influenced by the content of the policy and the context of implementation, which is explained as follows:<sup>19</sup>

1. Policy content
  - a. Affecting interests
  - b. Type of benefits
  - c. Extent of envisioned change
  - d. Decision-makers standing
  - e. Program implementers
  - f. Deployed resources
2. Implementation context
  - a. Power, interest, and strategy of involved actor

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<sup>15</sup> Merilee S. Grindle, *Politics and Apolicy Implementation in the Third World*, (New Jersey: Princetown University Press, 2017 Edition), p. 5.

<sup>16</sup> Haedar Akib, Implementasi Kebijakan; Apa, Mengapa, dan Bagaimana, *Jurnal Administrasi Publik*, Volume 1, No. 1, 2010, p. 2.

<sup>17</sup> Leo Agustino, *Dasar-dasar Kebijakan Publik*, (Bandung: Alfabeta, 2006), p. 138.

<sup>18</sup> Samodra Wibawa, *Evaluasi Kebijakan Publik*, (Jakarta: RajaGrafindo Persada, 1994), p. 22-23; Abdul Aziz dan Humaizi, Implementasi Kebijakan Publik Studi tentang Kajian Pusat Informasi pada Dinas Komunikasi dan Informatika Provinsi Sumatera Utara, *Jurnal Administrasi Publik*, Program Pascasarjana Magister Administrasi Publik, Universitas Medan Area, Vol. 3, No. 1 Juni 2013, h. 7.

<sup>19</sup> Merilee S. Grindle, *Politics and Apolicy Implementation in the Third World*, p. 11.

- b. Institution characteristic and regime
- c. Compliance and responsiveness

In this paper, the researchers utilized the Grindle theory to analyze the implementation of the Pidie Regency Government policy on the obligation of pre-marital screening for prospective bride and groom, including what have and have not been done by the government in implementing the policy. The results of this study would also become an evaluation material for the Pidie Regency Government's policy implementation.

### **Regent Regulation Policy No. 54/ 2018 on Pre-Marital Screening for Prospective Bride and Groom**

Screening comes from the word "*periksa*" which means to look carefully, to investigate something (to learn, to seek knowledge, etc).<sup>20</sup> While the bride and groom in the first Chapter, Article 1, number 7, Regent Regulation No. 54/ 2018, it is written that the prospective groom and bride are a man and a woman who are willing to have a matrimony in the Pidie Regency area.<sup>21</sup> It can be concluded that the pre-marital screening of the prospective bride and groom is an investigation, examination or screening of the physical condition of the bride and groom (male and female) which is carried out before or during a wedding.

In terms of sharia, contemporary scholars have two views on this issue. *Firstly*, health examinations are forbidden and unnecessary. Among those with this opinion was Ibn Baz. According to him, the examination made people no longer have positive assumption against Allah SWT and often results in an incorrect diagnosis.<sup>22</sup> *Secondly*, the examination may be performed as long as it does not conflict with Islamic law. This opinion was expressed by the majority of scholars. According to them, this practice does not

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<sup>20</sup> <https://kbbi.web.id/periksa.html>. Accessed on 24 April 2019.

<sup>21</sup> Chapter 1 Article 1 point 7 Regent Regulation No. 54/2018 concerning Medical Examination of the Prospective Bride.

<sup>22</sup> Harian Al-Muslimun, Edition 597, 11 July 1996, on Abu Malik Kamal's book, *Fiqih Sunnah Wanita 2*, Translator Ghozi M, dkk, Ed. 1, (Jakarta: Pena Pundi Aksara, 2007), p. 166.

contradict the principle of belief in Allah SWT because it is part of human efforts to achieve virtues in their life.<sup>23</sup>

From a medical point of view, pre-marital screening of the prospective bride and groom have positive sides including: it can be an essential way to prevent the inheritance and transmission of various dangerous diseases, prevent the spread of infectious diseases in the community, and reduce the chance of damage to future generations, and so forth.

In Indonesia, pre-marital screening has been implemented through Tetanus Toxoid Immunization (TT). Its implementation is carried out based on the Joint Instruction of the General Director of Islamic Community Guidance and Hajj Affairs of the Ministry of Religion, and the General Director of Communicable Diseases Eradication and Environmental Health in the Ministry of Health No. 02/1989 on Tetanus Toxoid Immunization for Prospective Bride and Groom. This provision is a follow-up to the Law No. 1/ 1974 on Matrimony, Government Regulation No. 9/ 1975 on the Implementation of Law No. 1/ 1974, Presidential Decree No. 1/1991 on the Compilation of Islamic Law on various matrimony to engender a high quality generation. However, the implementation of the TT injection regulation only applies to prospective brides, while Regent Regulation No. 54/ 2018 states that pre-marital screening applies to both prospective brides and grooms.

Regent Regulation No. 54/ 2018 on the Pre-Marital Screening of the Prospective Bride and Groom has clear goals, objectives and legal basis. The target of this policy is all prospective bride and groom, both male and female, who will conduct a wedding at the KUA.<sup>24</sup> For the implementation of public health coaching, especially maternal and child health, and to get a healthy generation, it is necessary to carry out medical examinations for the prospective bride and groom including health guidance<sup>25</sup>. The following states the objectives of the pre-marital screening for prospective bride and groom policy:

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<sup>23</sup> Abu Malik Kamal, *Fiqih Sunnah Wanita 2*, trans. Ghazi M, et al., Jakarta: Pena Pundi Aksara, 2007, p. 166.

<sup>24</sup> Regent Regulation Guidelines No. 54/ 2018 on Pre-Marital Screening of the Prospective Bride and Groom, p. 10.

<sup>25</sup> Regent Regulation No. 54/ 2018 on Pre-Marital Screening of the Prospective Bride and Groom, p. 1.

- a. In general: providing reproductive health<sup>26</sup> information materials for marriage counseling officials.
- b. In particular:
  - 1) Increasing the knowledge of the bride and groom about reproductive health.
  - 2) Providing pre-marital motivation and counseling to prospective brides and grooms to have their health checked at a health facility.<sup>27</sup>

The medical examination is an obligation for the prospective bride and groom to carry out their health screening to create a quality generation through a healthy family. The obligations of the prospective bride and groom have been mentioned in Chapter II Article 2 (1) Regent Regulation No. 54/ 2018, specifically: "Every prospective bride and groom who is getting married is required to have their health examined."<sup>28</sup>

Based on the aforementioned article, it can be seen that since the enactment of the Pidie Regulation on the medical examination of the prospective bride and groom before entering a marriage, it is mandatory to check their health. The meaning of being obliged to carry out a health check in the Regent Regulation is explained below. Obligatory is *an absolute demand commanded by Allah SWT—there are rewards for those who are doing it, and sins for those who neglect it.*<sup>29</sup> The researchers can conclude that this definition of obligation is associated with reward and sin. However, in the Regent Regulation No. 54/ 2018, the sanctions can be related to 'earthly' punishment. Therefore, obligatory is *something that is an absolute order by the government/ ruler and the sanctions will be given for those who leave it.*

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<sup>26</sup> Reproductive health as stated in the above objectives, is also described in Government Regulation No. 61/2014 concerning Reproductive Health and in Article 126 of Law No. 36/2009 concerning Health states that maternal health efforts are aimed at maintaining maternal health. Therefore, they can give birth to a healthier and a high-quality generation and reduce maternal mortality.

<sup>27</sup> Regent Regulation Guidelines No. 54/2018 concerning Medical Examination of the Prospective Bride, p. 10.

<sup>28</sup> Chapter II, Article 2 Paragraph (1) Regent Regulation Pidie No. 54/2018 on Pre-Marital Screening of the Prospective Bride and Groom.

<sup>29</sup> Ansari, *Hukum Syara' dan Sumber-sumbernya: Sebuah Pengantar Memahami Kajian Ushul Fikih*, Ed. 3, (Jakarta: Menara Buku, 2013), p. 35.

Talking about punishment, the Regent Regulation does not mention sanctions for prospective brides and grooms who do not carry out pre-marital screening. This is one of the shortcomings of the Regent Regulation. It should mention the sanctions for the bride and groom who disregard it. However, regarding the sanctions for not conducting medical examinations for the bride and groom, it is under the authority of the KUA. The Head of Mutiara Timur District KUA said: "*A health certificate has become a requirement and it must be submitted. If it is not lodged, the KUA will not process it.*"<sup>30</sup> This means that the KUA will not process the documents of the prospective bride and the groom who are not equipped with a health certificate. This provision becomes an obstacle to marriage for prospective bride and groom who do not complete the requirements. Thus, every bride and groom must have their health checked first before registering their marriage at the KUA.

The existence of this regulation has forced the prospective bride and groom to know the reproductive health. They can improve their lives healthier after receiving a doctor's suggestion during health examination. It is hoped that they can prevent dangerous diseases that will affect their future offspring. Also, the provision of immunization or TT injection for the prospective bride is one of the rights that must be given to her. It will relate to women's reproduction, so that the safety and health of mothers and children are guaranteed. Therefore, health services for mothers and children are necessary for their survival.

If the result of the diagnosis is positive, then based on the interview result: "*If the prospective bride and groom are positive for a disease, it is advisable to seek treatment first, and then the marriage will continue afterwards.*"<sup>31</sup> This is as stated in Article 5 (2): "The prospective bride and groom, who are declared unhealthy according to a doctor's examination to move into a matrimonial phase, are required to seek treatment until they recover without hindering the marriage process."

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<sup>30</sup> Interview with AM, Head of KUA Kec. Mutiara Timur, on July 8<sup>th</sup> 2019.

<sup>31</sup> Interview with LD, Head of Administration for Community Health Center of Mutiara Timur District, on July 8<sup>th</sup>, 2019.

Policy content is one of the criteria for measuring policy implementation according to Grindle which includes six aspects:

### 1. Affecting interests

It can be seen that public policy is not a single decision but consists of several layers of actions or strategies produced to achieve certain goals for the public interests. As for the process of enactment and practice, public policies accommodate various interests, and of course possess an impact or influence.

At this point, the researchers can explain that the medical examination of the prospective bride and groom as mentioned in Regent Regulation No. 54 of 2018 is a very essential matter for the target group or prospective brides groom before continuing to the next level, given the increasing number of drug cases occurring in the district. Pidie as explained in the discussion above, underwent a difficult situation, including the decreasing of women health status as indicated by the high percentage of Chronic Energy Deficiency (KEK)<sup>32</sup> in Women of Childbearing Age (WUS) of 20.8%; the anemia in women was 23.9%; and 37.1% in pregnant women; 48/1000 pregnancies in adolescents aged 15-19 years; most cases of AIDS occurred at productive age 20-49 years, 68% occurred in women, and pregnant women with HIV 2,067 cases (Ministry of Health's 2015 quarter IV report data).<sup>33</sup> Therefore, the enactment of Regent Regulation No.54/ 2018 is a very significant influence on the social conditions in Pidie Regency, especially in Mutiara Timur District.

### 2. Type of Benefits

The medical examination of the prospective bride and groom has considerable benefits: "*This policy would be very beneficial for the bride and groom because before they get married, they would get*

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<sup>32</sup> KEK is a problem of malnutrition status that can occur in women of childbearing age (WUS) and pregnant women. KEK conditions usually occur in women of childbearing age (15-45 years old). Kemenkes RI, *Riset Kesehatan Dasar 2013*, Badan Penelitian dan Pengembangan Kesehatan. Accessed at 1 December 2019.

<sup>33</sup> Regent Regulation Guidelines No. 54 of 2018 on Pre-Marital Screening of the Prospective Bride and Groom, p. 9.

*diagnosed first for the potential of contracting HIV, HBSAG, and so forth.*"<sup>34</sup>

The researchers conclude that the importance of medical examinations for the prospective bride and groom because it provides considerable benefits for them, specifically to ensure their health condition because nowadays various kinds of infectious and dangerous diseases have developed and they can affect the fertility of the couple and the health of the fetus, such as drug addiction, HIV/AIDS, and other diseases. Through the pre-marital screening, they can find out the health of each individual, especially the health of the reproductive organs which is closely related to hereditary issues. The main objective of conducting pre-marital screening is to build a healthy and prosperous family by knowing the possible health conditions of the future and the medical history of the couple, including genetics, chronic diseases, and infectious diseases, that can affect the health conditions of the offspring.

### 3. Extent of Envisioned Change

The Regent Regulation Pidie No. 54/ 2018 is a policy regarding mandatory pre-marital screening for prospective brides and grooms. Each policy has an achievable target. At this stage, the researchers will explain the potential changes that can be achieved by this policy.

Following the objectives of health development as stated in the fifth point of *Nawacita*, namely improving the quality of human resources, efforts are needed to create a high-quality generation through a healthy family. The 2015-2019 health development agenda aims to create access and excellent health services, which means that everyone has the right to have access and to relish a high-quality health services including reproductive health. Efforts to improve reproductive health are carried out at every stage of human life through an effective continuum of care.<sup>35</sup> Based on this explanation, it can be seen that Regent Regulation No. 54/ 2018 has targets to be achieved in the health development aspect as mentioned

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<sup>34</sup> Interview with LD, Head of Administration for Community Health Center Kec. Mutiara Timur, on Monday, on July 8<sup>th</sup> 2019.

<sup>35</sup> Regent Regulation Guidelines No. 54/2018 on Pre-Marital Screening of the Prospective Bride and Groom, p. 9.

earlier in the Guidelines for Regent Regulation No. 54/ 2018 explanation above.

#### 4. Decision-Makers Standing

The position of policymakers, as the main actor, is essential in terms of creating policy accuracy which is examined from the following points: to what extent the policies can solve the problem. The next question is whether the policy has been formulated under the character of the problem. Furthermore, a policy is formulated by an institution that has the authority (institutional mission) in accordance with the character of the policy.<sup>36</sup> From these questions, it can be seen that Pidie Regency is the right environment to enforce the Regent Regulation on pre-marital screening of prospective brides and grooms, as the problems that exist in the regency is mainly related to drugs.

#### 5. Program Implementers

The main actors in the implementation of this government policy are the bureaucrats, specifically the executive officers along with other employees in the administrative or bureaucratic administration system, including several related agencies<sup>37</sup> such as the KUA and Puskesmas. However, it should also be noted that the actor implementing policies is not only the government but also the cooperation between the government and the community,<sup>38</sup> including the prospective bride and groom.

Human resources or program implementers in the implementation of Regent Regulation No. 54/ 2018 is quite adequate both at the KUA and Puskesmas. Among the program implementers involved in the KUA are administrative officers, marriage counselors, *penghulu*, administrators, and the head of the KUA.<sup>39</sup>

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<sup>36</sup> Rahayu Kusuma Dewi, *Studi Analisis Kebijakan*, Ed. I, (Bandung: Pustaka Setia, 2016), p. 174.

<sup>37</sup> Soekarno Sd, *Public Policy: Pengertian Pokok untuk Memahami dan Analisa Kebijakan Pemerintah*, Cet. 3, (Surabaya: Airlangga University Press, 2003), p. 196.

<sup>38</sup> Rahayu Kusuma Dewi, *Studi Analisis Kebijakan...*, p. 175.

<sup>39</sup> Interview with AM, Head of Mutiara Timur District KUA, on July 8<sup>th</sup> 2019.

Meanwhile, those involved in the Puskesmas are doctors, midwives, laboratory staff, and administrators.<sup>40</sup>

## 6. Deployed Resources

The resources used in a policy implementation consist of humans and non-humans. Non-human resources are including funds, tools, owned facilities, and information. These resources are used in a series of activities to achieve goals. These resources must be planned, procured, used/ utilized, and controlled in a professional manner in order to be economical, efficient, and effective in carrying out work.<sup>41</sup>

It can be concluded that resources play an important role in determining the success of policy implementation. If the implementer has a lack of the resources to implement the policy even though the content of the policy is clear and precise, then the policy will not run effectively. In implementing the pre-marital screening policy, the prospective bride and groom in the area of Mutiara Timur District, experience a lack of availability of non-human resources. At the Puskesmas there are no facilities and infrastructure in the form of medical equipment and supporting facilities which causes the failure of a policy implementation because the objectives of a policy made by the government are not achieved.

## **Implementation Context of Regent Regulation No. 54/ 2018 on Pre-Marital Screening Prospective Brides and Grooms**

It can be analyzed from the problems that exist in the Pidie Regency regarding the increasing number of drugs and HIV cases, the regency is the right environment for Regent Regulation to enforce the medical examination of prospective brides and grooms. This can also be seen from the increase in HIV/ AIDS cases from 2006-2019, the Pidie Health Office noted that 54 Pidie residents were HIV/ AIDS positive.

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<sup>40</sup> Interview with LD, Head of Administration for Community Health Center of Mutiara Timur District, on Monday, on July 8<sup>th</sup> 2019.

<sup>41</sup> Em. Lukman Hakim, *Pengantar Administrasi Pembangunan*, Ed.I, (Jogjakarta: Ar-Ruzz Media, 2011), p. 159.

In the context of implementation, Grindle divides it into three aspects:

### 1. Power, Interest, and Strategy of Involved Actor

In a policy, it is also necessary to take into account the strengths or powers, interests, and strategies used by the involved actors to expedite the implementation of a policy implementation. If this is not carefully calculated, the program will likely be far from the previous implementation and target.

The researchers makes an example of a policy implementation budget. In Article 9<sup>42</sup> Chapter VI Regent Regulation No. 54/ 2018, it is mentioned about the budget for the implementation of pre-marital screening for the prospective bride and groom. The involved actors have the authority to make strategies, and regulate the budget for implementing policies so that they can acquire the facilities and infrastructure (such as drug inspection tools (Narcotics, Psychotropics, and Other Addictive Materials)) that are not available in the Puskesmas, to facilitate the implementation of policies for the benefit of the prospective bride and groom.

### 2. Institutional Characteristic and Regime

The institutions or agencies involved both at the KUA and Puskesmas have carried out the tasks and responsibilities assigned to each of their institutions according to the procedures in the regulations, even though their implementation at the Puskesmas has not been optimal. Characteristics possessed by the implementer including honesty and commitment. When the implementers have a different character or perspective from the policy maker, the policy implementation process is not effective.<sup>43</sup> Therefore, it can be concluded that if the implementation of a policy is meant to be successfully effective and efficient, the implementers must have the attitude and commitment to implement the policy.

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<sup>42</sup> Article 9 Regent Regulation No.54/2018 states that: The budget for the implementation of health services for the bride and groom is borne by the Social Security Administering Body Budget, the State Revenue and Expenditure Budget, the Aceh Revenue and Expenditure Budget, the Regency Revenue and Expenditure Budget as well as other legal sources of funds and not binding.

<sup>43</sup> Rahayu Kusuma Dewi, *Studi Analisis Kebijakan...*, p. 158.

According to information obtained in the field, the KUA and Puskesmas of Mutiara Timur District, have carried out the Regent Regulation for pre-marital screening of the prospective bride and groom since the Regent Regulation was enacted.<sup>44</sup> This means that until the research is performed, the KUA and the Puskesmas have the attitude and commitment to continue implementing the Regent Regulation. It is recommended that local governments provide sufficient facilities and infrastructure resources, so that officials in the field can implement a policy well.

### 3. Compliance and responsiveness

At this point, it is necessary to explain the level of compliance and responsiveness of the implementers in responding to a policy. The KUA, Puskesmas, and the prospective bride and groom have carried out a Regent Regulation regarding the pre-marital screening of the prospective bride and groom. This means that the program implementers have complied with the policies that have been enacted.

Several couples in Gampong Simbe and Pulo Drien, Mutiara Timur District, responded to the implementation of Regent Regulation No. 54/ 2018 on the Pre-Marital Screening of Prospective Brides and Grooms. Based on information obtained from the bride and groom, the researchers found that they had lack of understanding of Regent Regulation No. 54/ 2018 on Pre-Marital Screening of Prospective Brides and Groom. Some of them considered the health examination at the Puskesmas as a sheer formality fulfill the requirements of marriage registration at the KUA. The examination of the prospective bride and groom is very important for the couple. Through examination, they can find out the health status of their partner, whether the bride and groom have chronic, contagious diseases that can hinder the growth of the fetus or endanger the future of bride and groom themselves.

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<sup>44</sup> Interview with LD, Head of Administration for Community Health Center of Mutiara Timur District and with AM, the Mutiara Timur District Head of KUA, on July 8<sup>th</sup> 2019.

**Implementation Procedure of Regent Regulation No. 54/ 2018 on Pre-Marital Screening of Prospective Brides and Groom at the KUA and Puskesmas of Mutiara Timur District**

Marriage Registration Procedure at the Mutiara Timur District KUA

Several brides informed that before registering at the KUA, they must lodge several requirements, including: copy of National ID card of the prospective bride and groom and parents; photocopy of Family Card, Birth Certificate, passport photo, health certificate from the Puskesmas, and NA from the Village Head (*Keuchik*).<sup>45</sup>

The Head of Mutiara Timur District KUA explained that the marriage registration procedure at the KUA must be passed by the prospective bride and groom. Before they went into a registration process, the couple must firstly meet the Village Head to take N1-N4 form, then go to the Puskesmas to obtain a health certificate. After that, the prospective bride and groom return to the KUA to register with complete requirements.<sup>46</sup> The marriage registration procedure at the KUA mentioned above is following the procedure stated in Regent Regulation No. 54/ 2018.

**The Procedure For Pre-Marital Screening of the Prospective Bride and Groom at The Mutiara Timur District**

Regent Regulation No. 54/ 2018 on Pre-Marital Screening of the Prospective Bride and Groom mentions the procedures for the pre-marital screening as described in Chapter III Articles 3, 4 and 5. The medical examination of the prospective bride and groom is carried out by a doctor during working hours. Health examination are carried out at the Community Health Center (Article 4 paragraph 1) after the prospective bride and groom show a National Identity Card or Certificate from the *Keuchik* (Village Head) (Article 3 paragraph 1). After the examination is held, the doctor will give a health certificate to the prospective bride and groom who is declared

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<sup>45</sup> Interview with NH, CM, WY, MN, MLN, and ML, at Gampong Simbe, Mutiara Timur District, on July 18<sup>th</sup> 2019.

<sup>46</sup> Interview with AM, Head of Mutiara Timur District KUA, on July 8<sup>th</sup> 2019.

healthy (Article 5 paragraph 1), and the cost of treatment will be paid by the couple (Article 5 paragraph 3).<sup>47</sup>

One of the couples explained that to get a health certificate from the Puskesmas, the bride and groom must go through several steps, specifically: the bride and groom take a registration card. Then, they will go to the Maternal and Child Health (KIA) room to get asked with several questions. After that, they will visit the laboratory for blood check and urine. Once it finished, they will return to the KIA room for a TT (*Tetanus Toxoid*) injection. That is the last procedure before the health certificate is issued.<sup>48</sup>

Information obtained from the Mutiara Timur District Puskesmas also explained the similar findings regarding the procedures that the prospective bride and groom must undergo, specifically: *firstly*, the couple take a registration card; next, they will go to the KIA room for an interview; next, they will visit the laboratory for urine, blood, and lab results; then, they will return to the KIA room to get the TT injection for the bride; after it finished, the health certificate will be issued.<sup>49</sup> It can be concluded that to get a health certificate from the Puskesmas, the prospective bride and groom are advised to check their health at the Puskesmas and have to go through several steps as mentioned above under the procedure mentioned in Regent Regulation No. 54/ 2018.

The Suitability of The Type of Health Examination at The Mutiara Timur District Puskesmas with the Regent Regulation No. 54/ 2018

Regent Regulation No. 54/ 2018 on the Pre-Marital Screening of the Prospective Bride and Groom, mentions the types of medical examinations performed at the Puskesmas, as mentioned in Chapter III Articles 6 and 7 of Regent Regulation No. 54/ 2018. These articles mention several types of diseases that must be carefully examined, such as: blood tests, blood sugar levels, urine tests, detection of sexually transmitted infections, HIV, hepatitis,

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<sup>47</sup> Chapter III, Articles 3, 4 and Article 5 Regent Regulation No. 54/2018 on Pre-Marital Screening of the Prospective Bride and Groom.

<sup>48</sup> Interview with DN Future Bride in Gampong Pulo Drien, Mutiara Timur District, on July 8<sup>th</sup> 2019.

<sup>49</sup> Interview with LD, Head of Administration for Community Health Center of Mutiara Timur District, on July 8<sup>th</sup> 2019.

TORCH (Toxoplasma, Rubella, Cytomegalovirus, and Herpes simplex virus), and drugs.<sup>50</sup> However, after the research was carried out at the Puskesmas, there are several types of health examinations on the prospective groom, specifically: HIV, syphilis, HBSAG and blood type. Whereas for the prospective bride there are several types of medical examination, including: plano test, HIV, syphilis, HBSAG, STIs, and blood type.<sup>51</sup>

Based on the explanation above, it can be concluded that the types of examinations for prospective brides and grooms at Mutiara Timur Puskesmas are mostly following those stated in Regent Regulation No. 54/ 2018. However, several types of examinations that are not examined at the Puskesmas, including blood sugar tests, TORCH as mentioned in the Article 7 (2) b, and drugs as mentioned in the Article 7 paragraph (2) c.

In this study, the focus was on drugs. Drugs are not examined at the Puskesmas caused by a lack of available resource, including the absence of tools for drug inspection. Resources have a very important role in implementing a policy. If the personnel responsible for implementing the policy is only having limited resources, the implementation of the policy will not be effective. It can be concluded that the Mutiara Timur District has implemented Regent Regulation No. 54/ 2018 on Pre-Marital Screening of Prospective Brides and Grooms, but the implementation is not yet comprehensive as mandated by Regent Regulation No. 54/ 2018.

When the Grindle theory is applied to the policy implementation at the Mutiara Timur District Puskesmas, then it can be found that several types of audits are not examined because they do not have adequate facilities, so the implementation of the policy has not been successful. Because according to Grindle, *the policy implementation will be successful if the implementation of the policy is following the content of the policy, and the success in implementing the policy is occurring when the regulations made have achieved the desired goals*. But the pre-marital screening at the Mutiara Timur Puskesmas did not comply with the content of the

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<sup>50</sup> Chapter III Articles 6 and 7 Regent Regulation No. 54/2018 on Pre-Marital Screening of the Prospective Bride and Groom.

<sup>51</sup> Documentation data in the form of a Health Certificate for the Bride and Groom at the Puskesmas of Mutiara Timur District.

policy. Broadly speaking, Regent Regulation has been implemented, but not maximally. This means that the implementation of this policy has not been successful since one of the goals of the issuance of the Regent Regulation as stated by the Regent of Pidie (to create a Pidie generation that is physically and mentally healthy, without drugs, and HIV) has not been attained.

In terms of Islamic law, the Quran and Hadith do not explicitly mention the pre-marital screening of the prospective bride and groom. Regent Regulation No. 54/ 2018 is included in *siyasah syar'iyah*<sup>52</sup> which is a policy of the ruler/ government that is enforced in society to create benefits under the goals of Sharia. Consequently, the policy must be obeyed and followed by the community.

Policy No. 54/ 2018 issued by the Pidie Regional Government as one of the administrative requirements at the KUA, by attaching a health certificate from the Puskesmas when registering a marriage, in fact it is not included as the matrimonial requirements in Islamic fiqh. However, the presence of Regent Regulation No. 54/ 2018 on Pre-Marital Screening of Prospective Brides and Grooms in the Pidie Regency is an obligation for the Pidie people to obtain the health benefit as human being. It is reasonable as the world encounters more issues in the vast development of diseases, and the increasing numbers of drug users.

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<sup>52</sup> The word "siyasah" comes from the word *sasa*. This word in the dictionary of *al-Munjid* and *Lisan al-'Arab* means *to organize, administer, and rule*, also means *government and politics, or making wisdom*. See, Sayuthi Pulungan, *Fiqh Siyasah: Ajaran, Sejarah, dan Pemikiran*, Is. I, Ed. 3, (Jakarta: RajaGrafindo Persada, 1997), p. 22-23. This linguistic understanding implies that the purpose of *siyasa* is to organize, manage, and make policy on something that is political to achieve something. See, Muhammad Iqbal, *Fiqh Siyasah: Kontekstualisasi Doktrin Politik Islam*, Ed. 2, (Jakarta: Gaya Media Pratama, 2007), p. 3. In terminology, according to Ibn 'Aqil, it is all actions that bring people close to benefit and avoid adversity. *Siyasah Syar'iyah* is the management of general matters for the Islamic government which ensures the creation of benefit and avoidance of harm from the Islamic community, by not contradicting the provisions of Islamic law and general principles, although it is not in line with the opinion of the *mujtahid* scholars. See, A. Djazuli, *Fiqh Siyasah: Implementasi Kemasslahatan Ummat dalam Rambu-rambu Syariah*, Ed. Rev (2), (Bogor: Kencana, 2003), p. 42-43.

Regent Regulation No. 54/ 2018 contains two values of *maqāshid syarī'ah*,<sup>53</sup> specifically: maintaining reason (*hifzl aql*) and maintaining offspring (*hifzl nasb*). The presence of Regent Regulation No. 54/ 2018 is to prevent unwanted medical consequence for the benefit of humans, so that they can protect their offspring (*hifzl nasb*) by giving birth to healthy generations and decreasing the rate of having children with disabilities.

### Failure to Achieve *Maqāshid Syarī'ah* in the Application of Islamic Law

*Maqāshid syarī'yah* is the goal of the establishment of Islam as a religion. Ulemas agree on two objectives of sharia: to obtain benefits; and to avoid damages. In Islamic law, there is a method of legal stipulation called *maslahah mursalah*. As stated in the background of the problem, that *maslahah mursalah* is something that is considered *maslahat* but there is no legal firmness to make it happen and there are also no specific arguments (al-Qur'an, Hadith, and *Ijma'*) to either support or reject it.<sup>54</sup>

It is difficult to locate the provisions of pre-marital screening for the prospective bride and groom, either in the verses from the Quran, hadith, or *ijma'*. However, by using the *istinbath maslahah mursalah* method, the Regent Regulation can be permitted because it is in line with *maqāshid syarī'ah*, which is to give birth to a generation of healthier and stronger Muslims.

According to the research findings, as explained above, the *maqāshid syarī'ah* cannot be implemented because the established regulations are not equipped with supporting elements, including the aspects in the Grindle theory. From the results of the study, it can be seen that the unsuccessful implementation of Islamic law is caused

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<sup>53</sup> *Maqāshid al-syarī'ah* consists of two words, namely *maqāshid* and *al-syarī'ah*. *Maqāshid* is the plural form of '*maqsid*', which denotes a goal, object, thing of interest, or final goal. See, Jaser 'Audah, *Al-Maqasid*, trans. 'Ali 'Abdelmon'im, Ed. 1, (Yogyakarta: Suka Press UIN Sunan Kalijaga, 2013), p. 6. Meanwhile, *Shari'ah* etymologically means the way out of which water comes out for drinking. In terms of *syarī'ah* according to the Manna 'Al-Qattan is everything that Allah says to his servants, whether it is related to faith, moral worship or mu'amalah. See, Fathurrahman Djamil, *Filsafat Hukum Islam*, (Jakarta: Logos Wacana Ilmu, 1999), p. 7.

<sup>54</sup> Satria Effendi, M. Zein, *Ushul Fiqh*, (Jakarta: Kencana, 2008), p. 149.

by a lack of mandatory elements as explained before. In the study of Usul al-Fiqh, it is stated that the perfection of the implementation of an act must be accompanied by the law of *taklifi* and *wadh'i*. In terms of determining *wadh'i*, the implementation of a policy must be accompanied by terms and conditions. The provisions expressed by Grindle can be included in the category of required conditions, specifically the availability of resources, the existence of adequate facilities and infrastructure. Also, besides the perfection of the rules, the public's understanding of the content and purpose of rules is urgently required.

### **Conclusion**

The pre-marital screening of the prospective bride and groom in Pidie has been carried out by the appointed Puskesmas. It is expected however, that all Puskesmas implement the policy, so that all Pidie residents can get the same treatment, and it can become a standardized form of health examination. The screening program for prospective brides and groom has a clear target group. Furthermore, it also has benefits to prevent diseases and to maintain the health of married couples and their offspring which has relations in terms of escalating the quality of human resources in Pidie. From the aspect of policy makers, the Regent of Pidie is very competent in enacting policies because the government can provide all the facilities and infrastructure needed and has competent officials. As seen from the aspect of resource availability, in this case, there are no adequate facilities and infrastructure. As the result, many types of diseases cannot be detected, including the absence of drug examinations. Meanwhile, from the aspect of the program implementers, specifically doctors and the KUA officers, they are ready to implement the program. Additionally, there are other problems, including the lack of understanding and readiness of the entire community to run the program due to their weakness in understanding the importance of medical examinations for the prospective bride and groom. To obtain optimal results, it is recommended that the Pidie regional government equips all the facilities needed to carry out medical examinations for the prospective bride and groom, as well as conduct systematic socialization to the public regarding the importance of pre-marital screening and disease prevention. Lastly, it is also recommended for

further researchers to investigate the standardization of policies imposed by all KUAs in Pidie Regency.

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