



## From Charity to Healthcare Services: Transforming Islamic Philanthropy in Rumah Zakat Indonesia

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### ABSTRACT

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This study aims to determine public participation in health services at the Pratama Cita Sehat clinic, East Jakarta. This research was conducted by collecting qualitative data through in-depth interview techniques during October-December 2019. The study results indicate that community participation is relatively high. It is evidenced by the community's involvement during the permit process for the establishment of a clinic, building renovations, and cleaning the clinic location. This participation makes the clinic owned by Rumah Zakat, a philanthropic institution that houses it and belongs to the surrounding community. In addition, the clinic's existence is very beneficial, especially for the poor and the poor, who often find it difficult to access health services.

## Introduction

In Indonesia, the Islamic philanthropy movement started since Islam's teachings were spread and taught in the archipelago, which encouraged and obliged to give.<sup>1</sup> Amelia Fauzia explains this story in her book *Filantropi Islam: Sejarah dan Kontestasi Masyarakat Sipil dan Negara di Indonesia* (Islamic Philanthropy: History and Contestation

<sup>1</sup> Ahmad Fihri, "Harta dalam Pemanfaatan Filantropi Islam," *Al-Urban: Jurnal Ekonomi Syariah dan Filantropi Islam* 1, no. 2 (2017): 125-37.



of Civil Society and the State in Indonesia).<sup>2</sup> This book shows that the philanthropy or generosity movement has been taught as one of the pillars of Islam for Muslims that must be practiced, namely *Zakat*.<sup>3</sup> In addition, the history of philanthropy in Indonesia has quite long roots since Islam began to spread in the archipelago since the kingdom age, the colonialism era to independence, the New Order to the reform era.<sup>4</sup>

Although it has been developing for quite a long time, the Islamic philanthropy movement in Indonesia has not always run smoothly. This is influenced by the right strategy in each region, like Lazizmu Sragen, who succeeded in formulating the philanthropic movement with the human development index in the area.<sup>5</sup> The study explains that Lazizmu, as a philanthropic institution, reduces poverty and increases life expectancy through health programs, literacy by providing scholarship programs, and providing business funds.

Also, Rumah Zakat, one of the philanthropy-based non-governmental organizations, manages the people's funds or the wider community. The community empowerment program is realized through four main clusters, namely *Senyum Sehat/Healthy Smiles (Health)*, *Senyum Mandiri/Independent Smile (Economic Empowerment)*, and *Senyum Lestari/Sustainable Smile (Environmental Sustainability Initiatives)*. One of Rumah Zakat's health programs is

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<sup>2</sup> Mukhlis Rahmanto, "Berderma dan Sejarah Sosial Politik Islam Indonesia," *Afkaruna: Indonesian Interdisciplinary Journal of Islamic Studies* 11, no. 2 (2015): 268-72, <https://doi.org/10.18196/aiijis.2015.0052.268-272>.

<sup>3</sup> Faozan Amar, "Implementasi Filantropi Islam di Indonesia," *Al-Urban: Jurnal Ekonomi Syariah dan Filantropi Islam* 1, no. 1 (2017): 1-14, [https://doi.org/10.22236/alurban\\_voll/islpp1-14](https://doi.org/10.22236/alurban_voll/islpp1-14).

<sup>4</sup> Amelia Fauzia, "Faith and the State: A History of Islamic Philanthropy in Indonesia," *Faith and the State: A History of Islamic Philanthropy in Indonesia* 1, no. September 2008 (2013): 1-346, <https://doi.org/10.1163/9789004249202>; Hilman Latief, "Contesting Almsgiving in Post-New Order Indonesia," *American Journal of Islam and Society* 31, no. 1 (2014): 16-50, <https://doi.org/10.35632/ajiss.v31i1.292>; Zakiyuddin Baidhaw, "Lazizmu and Remaking The Muhammadiyah's New Way of Philanthropy," *Al-Jami'ah* 53, no. 2 (2015): 387-412, <https://doi.org/10.14421/ajis.2015.532.387-412>.

<sup>5</sup> Emaridial Ulza and Herwin Kurniawan, "Strategi Pemberdayaan Pembangunan Sosial melalui Gerakan Filantropi Islam," *Al-Urban: Jurnal Ekonomi Syariah dan Filantropi Islam* 2, no. 1 (June 30, 2018): 32-42, [https://doi.org/10.22236/alurban\\_vol2/islpp32-42](https://doi.org/10.22236/alurban_vol2/islpp32-42).

present at the Pratama Cita Sehat clinic, East Jakarta. Through these clinics, Rumah Zakat provides access to low-cost and accessible quality health services for the community. Moreover, this program is also an effort to support sustainable health services and support government programs improving public health quality.<sup>6</sup>

In article 5 of Law no. 36 of 2009, everyone has the right to access safe, quality, and affordable health. Therefore, to fulfill the rights of citizens to health services, the government seeks to implement the National Health Insurance/*Jaminan Kesehatan Nasional* (JKN) program organized by the Social Insurance Administration Organization/*Badan Penyelenggara Jaminan Sosial* (BPJS) according to the Law (UU), namely Law Number 40 of 2004 concerning the National Social Security System/*Sistem Jaminan Sosial Nasional* (SJSN).

Practically speaking, BPJS membership does not cover the entire community, especially informal workers and access to health services that affect the government's health services utilization.<sup>7</sup> However, this is related to the low health status of the poor and is closely related to the limited access to health services, both due to geographical constraints and cost constraints.<sup>8</sup>

Data from the Central Statistics Agency/*Badan Pusat Statistik* (BPS) in 2019 shows that poverty in September 2020 was 10.19 %, increasing 0.41 % compared to March 2020, raising 0.97 % compared to September 2019. The percentage of poor people in urban areas was 7.38 % in March 2020, growing to 7.88 % in September 2020. Meanwhile, the percentage of the rural in March 2020 was 12.82 %,

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<sup>6</sup> "Tentang Kami - Rumah Zakat," accessed February 26, 2021, Retrieved from <https://www.rumahzakat.org/tentang-kami/>.

<sup>7</sup> Debra S. S. Rumengan, J. M. L. Umboh, and G. D. Kandou, "Faktor-Faktor yang Berhubungan dengan Pemanfaatan Pelayanan Kesehatan pada Peserta BPJS Kesehatan di Puskesmas Paniki Bawah Kecamatan Mapanget Kota Manado," *JIKMU* 5, no. 2 (2015).

<sup>8</sup> Ernirita Ernirita et al., "Peningkatan Status Kesehatan Kaum Dhuafa melalui Pemeriksaan Kesehatan di Bantar Gebang Kota Bekasi," *Prosiding Seminar Nasional Pengabdian Masyarakat LPPM UMI* 0, no. 0 (December 7, 2019).

increasing to 13.20 % compared to September 2020.<sup>9</sup>

On the other hand, there is a potential for private health services and community-based health efforts to increase, but there have not been utilized properly.<sup>10</sup> Article 174 mentioned that the community participates as an individual and organization to accelerate the highest public health degree through community organizations or Non-Governmental Organizations (NGOs). NGOs emerge from the community, which takes action for community's rights and as alternative development.<sup>11</sup> The formation of NGOs is a form of community participation to improve the living and welfare, which focuses on self-help and independent services from government interventions.<sup>12</sup>

Moreover, research on non-governmental organizations that collect social funds or philanthropic institutions has been widely carried out in Indonesia. Research conducted by Arfandi on the Muhammadiyah movement states that its movement is an *amil*, *zakat*, *infaq*, and alms institution and developing a volunteer sector.<sup>13</sup> The volunteer sector has impacts: (i) strengthening the state's resources in times of crisis and in good economic times in providing social services, (ii) maintaining collective community solidarity, and (iii) suppressing community dependence on state social services.

Also, there is being check-balancing and supporting power when the government deliberately ignores its duties to provide welfare services to the community. The Prosperous Justice Party/

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<sup>9</sup> "Badan Pusat Statistik," accessed February 26, 2021, retrieved from <https://www.bps.go.id/pressrelease/2021/02/15/1851/persentase-penduduk-miskin-september-2020-naik-menjadi-10-19-persen.html>.

<sup>10</sup> Adisasmito, *Sistem Kesehatan Nasional* (Jakarta: PT Raja Grafindo Persada, 2017).

<sup>11</sup> Mansoer Fakhri, *Masyarakat Sipil untuk Transformasi Sosial: Pergolakan Ideologi LSM Indonesia* (Yogyakarta: Pustaka Pelajar, 2017).

<sup>12</sup> Herdiansyah, Ari Ginanjar, and Randi, "Peran Organisasi Masyarakat (Ormas) dan Lembaga Swadaya Masyarakat (LSM) dalam Menopang Pembangunan di Indonesia," *Sosioglobal: Jurnal Pemikiran dan Penelitian Sosiologi* 1, no. 1 (2016): 49–67, <https://doi.org/10.24198/j.sosioglobal.1.1.4>.

<sup>13</sup> Hafidz Arfandi, "Motif dan Strategi Gerakan Filantropi Muhammadiyah," *Jurnal Muhammadiyah Studies* 1, no. 1 (2016): 127–55, <https://doi.org/10.22219/jms.v1i1.11413>.

Partai Keadilan Sejahtera (PKS) has also presented religious-based Islamic philanthropic institutions by initiating the Post Justice and Cares for the Ummah/*Pos Keadilan Peduli Ummat* (PKPU) in 1997. However, since 1999, PKPU has become an independent institution that manages social funds from within and outside the country. The institution distributes its assistance widely to victims of natural disasters, empowers underprivileged communities, orphans, and distributes various aids to several regions in Indonesia and the world.<sup>14</sup>

Based on previous research concerning these philanthropic institutions, however, this research focuses on investigating community participation in the existence of the Pratama Cita Sehat Clinic in East Jakarta. Therefore, researchers use qualitative research to understand what is experienced by research subjects such as behavior, perceptions, motivations, actions, and others holistically. Furthermore, the data will be conveyed through the description in words and language in a unique natural context. In order to understand the context, researchers also use case studies to examine a particular case or existing social phenomenon, in-depth study research to understand the background, circumstances, and interactions. In addition, case studies are carried out on a unified system that can be in the form of a program, activity, event, or group of individuals in specific circumstances or conditions.<sup>15</sup>

A qualitative approach was carried out to explore information on community participation in health services organized by Rumah Zakat through the Pratama Cita Sehat Clinic, East Jakarta. Qualitative data were obtained through in-depth interviews with

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<sup>14</sup> Amril Maryolo, "Filantropi Berbasis Faith Based Organization di Indonesia (Studi Kasus Program PKPU)," *Palita: Journal of Social Religion Research* 2, no. 1 (2017): 13-24, <https://doi.org/10.24256/pal.v2i1.64>.

<sup>15</sup> Lexy J Moleong, *Metode Penelitian Kualitatif* (Bandung: Remaja Rosdakarya, 2009).

informants,<sup>16</sup> namely the head of the clinic, the person in charge of the Rumah Zakat empowerment program, health workers, community leaders, and the community around the Pratama Cita Sehat Clinic, East Jakarta.

## Islamic Philanthropy in Health: Establishment, Service, and Social Participation

### The History of the Ummul Quro Social Wallet

The presence of Rumah Zakat is an initiative of the Taklim Ummul Quro recitation group, which agreed to form a social institution on providing social assistance to humanity. Therefore, on July 2, 1998, an organization called Ummul Quro Social Wallet or *Dompot Sosial Ummul Quro* (DSUQ) was formed. In 2003, DSUQ changed its name to Rumah Zakat Indonesia DSUQ in line with the issuance of the Decree of the Minister of Religion of the Republic of Indonesia No. 157 on March 18, 2003. The decree also marked the inauguration of Rumah Zakat as a national zakat institution.<sup>17</sup>

Sustainable Development Goals (SDGs) in the Millennium Development Goals (MDGs) United Nations in the 3rd goal of the SDGs (Sustainable Development Goals), namely Good Health and Well Being is to ensure health and well-being for all people at every stage of life and the SDGs Goals two is Zero Hunger, to end hunger and malnutrition by 2030. Rumah Zakat realizes this in an integrated *Senyum Sehat* or Healthy Smile program. *Senyum Sehat* is a program to improve the quality of public health based on individual, communal, and non-governmental organizations. The realization of the program is in the form of mass circumcision, free ambulance,

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<sup>16</sup> John W Creswell, *Qualitative Inquiry & Research Design: Choosing Five Tradition*, 2nd ed. (London: Sage Publication, 2007).

<sup>17</sup> Evi Nur Hidayah, "Efektivitas Program Superqurban di Yayasan Rumah Zakat Surabaya" (UIN Sunan Ampel Surabaya, 2013), retrieved from <http://digilib.uinsby.ac.id/11042/>.

healthy alert, health assistance, nutrition garden, and free clinic. Health services speaking, the primary purpose of establishing a free health service clinic is to bring people closer to access quality health services. These efforts are in providing health services, advocating for people who have difficulty paying for treatment, providing mobility health services to reach difficult areas, and providing transportation facilities in the form of free ambulances to overcome geographical access constraints. One of them is Pratama Cita Sehat Clinic, East Jakarta.

Initially, this clinic was named *Bersalin Gratis Rumah Zakat* (Free Service Pregnancy House) Clinic. However, concerning licensing that must comply with government regulations, this clinic was later named the Pratama Cita Sehat clinic, East Jakarta. Pratama Cita Sehat clinic is located in Cipinang Muara Village, Jatinegara District, East Jakarta. The services provided at the Pratama Cita Sehat Clinic include examinations and consultations with general practitioners (GP), circumcision, family planning, minor surgery, metabolic checks, pharmacies, and ambulance services.

The vision of the Pratama Cita Sehat Clinic in East Jakarta is to become an excellent and trusted clinic in realizing inclusive healthy for Indonesian society. Meanwhile, the mission of the Pratama Cita Sehat Clinic is to provide quality health services, to provide promotive, preventive, curative, and rehabilitative health services. Furthermore, the clinic supports access to sustainable health services and supports the improvement of government health status programs. The purpose of the Pratama Cita Sehat Clinic in East Jakarta is to provide comprehensive health services oriented to patient safety and low-cost and free treatment.

The free treatment program at the Pratama Cita Sehat Clinic can be followed by patients who are registered as participants or members at the Pratama Cita Sehat clinic in East Jakarta with

several requirements. Some terms and conditions, namely filling out the registration form and completing the citizenship identity and a letter of recommendation from the local mosque or *mushola* administrator, are categorized as disadvantaged people. After that, the Pratama Cita Sehat clinic manager in East Jakarta conducted a site survey to prospective participants. After passing the selection stage, prospective participants will get a membership card to get free health services. Meanwhile, patients who are not members can get low-cost and affordable services. Currently, there are around 50 members who get free health services at the Pratama Cita Sehat Clinic, East Jakarta, with community outreach around the Cipinang Muara sub-district.

### Low Cost and Free Health Services Based on Philanthropy

Through the Pratama Cita Sehat Clinic in East Jakarta, Rumah Zakat has made efforts to build a system of providing low-cost and accessible health services for the surrounding community. The regulatory guidelines used by the East Jakarta Cita Sehat clinic in implementing cheap and free health services refer to the Indonesian Minister of Health Regulation No. 9 of 2014 concerning the Implementation of Clinics.<sup>18</sup> According to the Minister of Health, the criteria for a primary clinic are those that provide essential medical services served and led by general practitioners. In this case, the Pratama Cita Sehat clinic is sufficient to meet the requirements with six general practitioners and one doctor in charge of medical services.

In addition, licensing issues are vital in the operation of the clinic. Pratama Cita Sehat Clinic in East Jakarta is trying to fulfill the licensing requirements according to the Minister of Health Regulation No. 9 of 2014 under the supervision of the local health sub-

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<sup>18</sup> Kementerian Kesehatan RI, "Peraturan Menteri Kesehatan Nomor 9 Tahun 2014 Tentang Penyelenggaraan Klinik" (Kementerian Kesehatan RI, 2014).



department. Article 27 states that in order to obtain an operational permit, clinic operators must meet technical and administrative requirements. These technical requirements include location, buildings, infrastructure, personnel, equipment, pharmaceuticals, and laboratories.

After the technical requirements, the health services provided are in-building health services and outside health services. Services in the building that have been carried out include examinations by doctors such as anamnesis, metabolic checks such as uric acid, blood sugar, and cholesterol. Giving drugs and assistive devices such as oxygen and referring to the hospital if there is a patient with an emergency case. Services outside the building are in counseling, collaboration with local health centers, and other institutions such as universities. For patients who are members or beneficiaries of free health services must show a member card to get health services, including free medicine.

Meanwhile, financing for low-cost and accessible health services allocation comes from Rumah Zakat, channeled through the Cita Sehat foundation to manage health service programs. Rumah Zakat functions as an institution that collects funds from individuals and companies in Corporate Social Responsibility. The collected funds are then allocated to the health empowerment program, namely "Healthy Smile." Every month the East Jakarta Cita Sehat Clinic sends Expenditure Budget Plan / *Rencana Anggaran Perencanaan Belanja* (RAPB), then they get the transfer of funds every month. In addition, every month, the East Jakarta Cita Sehat clinic must make financial reports regarding incoming and outgoing money.

### Social Participation Low Cost and Free Health Services

Based on the study results, it is known that the community empowerment aspect has received strong enough capital in support

from community leaders and the surrounding community. Therefore, it will impact the success of the empowerment efforts carried out. Also, this program is under the Regulation of the Minister of Health of the Republic of Indonesia No. 65 of 2013, which states that one of the strategies in implementing and fostering community empowerment in the health sector is the utilization of potential and resources based on local wisdom, both funds, human resources, and community culture.

People around the Pratama Cita Sehat Clinic, East Jakarta, prefer to call the clinic the name of the Rumah Zakat clinic. Because, when the clinic was first established, called the Rumah Zakat Clinic. In the process of its establishment, the management of the Rumah Zakat clinic involved the surrounding community. Since the beginning, there has been participation from the community to socialize about health services at the Pratama Cita Sehat Clinic. This makes the community feel that they own the clinic. This condition can be seen from one resident willing to make his stall as a registration place when other residents want to seek treatment at the clinic.

“If someone is sick on behalf of the Rumah Zakat clinic, the address is at my shop. If (someone) suddenly gets sick, we can help if the ambulance cannot be ready. In the past, at the shop (given) leaflets for anyone who wanted to register. As far as I know, yesterday there was no fixed cost (because) we are helping.”<sup>19</sup>

In addition, participation in the form of working is also provided by the surrounding community. The community took part in dismantling old buildings and took part in several renovations of old buildings.

“What we can help, we help. We help with cleaning. Starting from dismantling, renovated, I knew from the start. This used to be a private house, mostly bulkheads. The cost of dismantling it was higher, how many months I can see and monitor. It is a shame that this has been

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<sup>19</sup> WA, *Interview*, 9 November 2019.

cut because the funds are lacking.”<sup>20</sup>

The most crucial participation for the existence of the Pratama Cita Sehat clinic in East Jakarta is the participation of community leaders during the licensing process. Because, in its development, the clinic has faced licensing problems.

“Especially asking for permission, we are ready to ask permission from all *Rukun Tetangga* (RT)/*Rukun Warga* (RW); Neighbourhood/Community Association. I asked the village what the problem is? Apparently, the obstacle is related to the parking space that must be adequate, while this is not sufficient. From the urban village to the subdistrict head, I know all of them to take care of permits. Asking for support from every RT, I collect photocopies from all residents so that the clinic continues to stand and get permission. This is to state the existence of the clinic. This clinic is very supportive, even to the governor, Fauzi Bowo.”<sup>21</sup>

The community leader statement is in line with the head of the clinic during an in-depth interview. According to the clinic head, community support is going to the clinic for health purposes and other things such as borrowing an ambulance to carry the body.

“There is support from the community here. Usually, there are mosque administrators. Usually, RT/RW does not just go to the clinic, (but also) borrows an ambulance to bring bodies from the people around here.”<sup>22</sup>

In addition to the direct participation, the Pratama Cita Sehat Clinic accepts participation in donations into the Rumah Zakat building fund. The donations are divided into two, donations from individuals and companies or institutions in Corporate Social Responsibility (CSR) conveyed by the person in charge of the program from Rumah Zakat.

“Rumah Zakat as a fundraiser. Donations can be received from individuals through accounts, as well as from companies or CSR.”<sup>23</sup>

<sup>20</sup> WA, *Interview*, 9 November 2019.

<sup>21</sup> WA, *Interview*, 9 November 2019.

<sup>22</sup> RS, *Interview*, 6 November 2019.

<sup>23</sup> NY, *Interview*, 20 November 2019.

The Pratama Cita Sehat Clinic in East Jakarta is a community empowerment program from the Rumah Zakat institution as a part of movements in health services. Sources of funds are used in free health services operations for poor people, both individuals and institutions or companies that Rumah Zakat collects. It can then be said that free health services for the indigent elderly are from the community for the community.

Community leaders are expected to support the implementation of health empowerment efforts through free health services for the elderly and poor people by providing social support done by community leaders around the Pratama Cita Sehat Clinic, East Jakarta. Social support from community leaders can be in the form of concern, caring, and protection against the consequences faced by its citizens.<sup>24</sup>

Community participation can be interpreted as participation or involvement both physically and non-physically from an individual or community. Participation is spontaneous involvement with awareness accompanied by responsibility for group interest to achieve goals. Based on this opinion, one's participation should be based on one's awareness, belief, and free will because it will be helpful for themselves, not being forced to participate and carried out voluntarily.<sup>25</sup>

Types of participation include: (1) Thought involvement in the form of contributions of ideas, opinions, or constructive notions, both to formulate programs and facilitate program implementation and realize by providing experience and development knowledge for participant activities. (2) Working participation is given

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<sup>24</sup> Tuti Restuastuti et al., "Analisis Pemberdayaan Masyarakat di Bidang Kesehatan," *Jurnal Kesehatan Melayu* 1, no. 1 (2017): 14–19, <https://doi.org/10.26891/jkm.v1i1.2017.14-19>.

<sup>25</sup> Sulistiyorini et al., "Partisipasi Masyarakat dalam Pengelolaan Sampah di Lingkungan Margaluyu Kelurahan Cicurug," *Share: Social Work Journal* 5, no. 1 (2015), <https://doi.org/10.24198/share.v5i1.13120>.

implementing efforts and support the success of a program. (3) Skill participation is encouraging the skills it possesses to other community members who need it. With the intention, the person can carry out activities and improve his social welfare. (4) Goods participation is participation in the form of donating goods or property, usually in the form of work tools. (5) Money participation is to facilitate efforts for the achievement of needs communities that need help.<sup>26</sup>

To describe information from informants, there are the types of participation by the community based on the theory, described in the following table:

Table. 1 Type of Community Participation in Pratama Cita Sehat Clinic, East Jakarta

No.	Type of participation	Realization	Description and Information
1.	Work Participation	Socialization	<ul style="list-style-type: none"> <li>In distributing leaflets and delivering information directly from community leaders to the surrounding community regarding the existence of free health services at the Rumah Zakat Clinic, which conducted by the community around the clinic</li> </ul>
		Permissions process support	<ul style="list-style-type: none"> <li>Collecting residents' ID cards for clinical legal requirements and assisting the licensing process from the kelurahan to the provincial level.</li> <li>Conducted by the community around the clinic</li> </ul>

<sup>26</sup> Santoso R.A Sastropetro, *Partisipasi, Komunitas, Persuasi, dan Disiplin dalam Pembangunan Nasional* (Bandung: Alumni, 1986).

No.	Type of participation	Realization	Description and Information
1.	Work Participation	Infrastructure	<ul style="list-style-type: none"><li>• Conducted by the community around the clinic</li></ul>
2.	Fund Participation	Donation	<ul style="list-style-type: none"><li>• Donations (<i>zakat, infaq, and sodaqoh</i>) collected by Rumah Zakat, there are then allocated for health empowerment programs, one of which is health services at the Pratama Cita Sehat Clinic, East Jakarta</li><li>• Conducted by the general public, outside the clinical environment</li></ul>

Source: Fieldwork, 2019.

Community participation itself can be in the form of works, properties, and thoughts. Although there is mainly directed at the planning level, many people participate in the implementation stage, such as implementing health services participation at the Cita Sehat Pratama clinic, East Jakarta. It indicates that there is still an attachment between the community and the existence of health services at the Pratama Cita Sehat Clinic, East Jakarta.<sup>27</sup>

Community participation in health services at the Pratama Cita Sehat clinic in East Jakarta has been ongoing since the clinic was established until at present. This condition occurs because of mutual need so that a sense of belonging arises, provides benefits residents, they can feel directly.

“As someone who has been here for a long time, it has been beneficial

<sup>27</sup> Sriwulan Ferindian Falatehan, “Pendekatan Psikologi Komunitas dalam Memprediksi Peranan Rasa Memiliki Komunitas terhadap Munculnya Partisipasi Masyarakat,” *Manasa-Old* 6, no. 1 (July 1, 2017): 66–90. Sriwulan Ferindian Falatehan, “Pendekatan Psikologi Komunitas Dalam Memprediksi Peranan Rasa Memiliki Komunitas Terhadap Munculnya Partisipasi Masyarakat,” *Manasa-Old* 6, no. 1 (2017).

because I need help. If someone dies, they will be helped (by) an ambulance. If someone is sick, they can get treatment." "Alhamdulillah, being a member there, it is really nice that BPJS made it first, but we are also making members here. Mom and Dad are easier if you have anything; routine once a week."<sup>28</sup>

It aligns with Falatehan's research (2017), which shows a relationship between a sense of belonging and participation. Participation is involving the community from the beginning of the clinic's existence to several operational activities.

In addition, the personal closeness between patients and health or non-health workers makes patients and the surrounding community feel comfortable with the health services provided by the Pratama Cita Sehat Clinic, East Jakarta, as stated by the informant who became a patient receiving free health services.

"At the clinic, I understand Mba Tyas, Mba Uci, Ma Ros. S has been good to them. I came immediately reprimanded them. At that time, I pushed my father to close, but he was told to come in. If you are sick at home, you can call them from the clinic. He said if you do not know why later, we will come to the house when the patient is quiet. He said, do not be shy. We aim to help. Doctor Agung, Doctor January are all good. The waiters are all good. I am confused about what to give back, and I just buy fried food."<sup>29</sup>

The approach taken by health and non-health workers personally to the beneficiaries of health services makes the community comfortable. This condition creates a sense of wanting to participate in activities in the health services provided by the Pratama Cita Sehat Clinic in East Jakarta.

In addition, health workers and non-health workers at the Pratama Cita Sehat Clinic in East Jakarta are volunteers who have full commitment. In addition to treating, also help and serve wholeheartedly. The motivation of health and non-health workers

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<sup>28</sup> JH, *Interview*, 12 December 2019.

<sup>29</sup> TI, *Interview*, 20 November 2019.

who work at the Cita Sehat Clinic is not just looking for income. It can be seen from the results of interviews with doctors in charge of medical services as follows:

“Because this is a social institution, many *mustahik* patients are in need. So, we all work to help people. What was previously a non-profit, we are paid professionally, but this is a non-profit with good quality but still affordable, which makes many friends here. They stay here for a long time because there is also a feeling of sharing at the clinic and when working on projects outside, such as social services during the flood. This is *Rumah Zakat* with the empowerment of the health sector, and the target is people who cannot afford it.”<sup>30</sup>

The level of community willingness to activity participation is determined by individual psychological factors, such as expectations of program benefits and motivation for involvement in the program. However, they have the motivation to get certain benefits or rewards, especially in relation to meeting the basic needs of life and low-cost and accessible health services in Pratama Cita Sehat Jakarta Clinic.<sup>31</sup>

Community participation is an important part of community empowerment efforts, which is a manifestation of the community’s awareness and concern, and responsibility to improve the quality of life.<sup>32</sup> The Ministry of Health has issued Minister of Health Regulation No. 8 of 2019 concerning Community Empowerment, which can open opportunities to increase support and active participation of philanthropic groups in health development. Empowerment, according to Permenkes, is the process of increasing the knowledge, awareness, and abilities of individuals and families as well as to improve the welfare of the community and play an active role in health service efforts in an educative and participatory and

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<sup>30</sup> AG, *Interview*, 20 December 2019.

<sup>31</sup> Siti robiah Nurbaiti and Aziz nur Bambang, “Faktor-Faktor yang Mempengaruhi Partisipasi Masyarakat dalam Pelaksanaan Program Corporate Social Responsibility (CSR),” *Proceeding Biology Education Conference: Biology, Science, Environmental, and Learning* 14, no. 1 (2018): 224–28.

<sup>32</sup> Totok Mardikanto, *Model-Model Pemberdayaan Masyarakat* (Solo: Sebelas Maret University Press, 2010).



take advantage of local social and cultural potential.<sup>33</sup> Therefore, community participation is an important component as a trigger for independence and empowerment processes. The process is carried out accumulatively so that the more skills or, the higher the competence a person has, the higher its ability to participate.<sup>34</sup>

### Transforming Islamic Philanthropy: From Charity to Healthcare Services

Rumah Zakat is philanthropy characterized by Islam in Indonesia. Philanthropy is an awareness to overcome difficulties and improve the welfare of society at large in various fields of life, such as education, economy, health, housing, and others. In Islam, philanthropy is a very noble act. These activities constitute a significant part of the piety of a Muslim and actions that will invite the blessings, mercy, and help of Allah and actions and save lives at large.<sup>35</sup> The term philanthropy comes from the Greek word meaning love of fellow human beings. Philanthropy is an activity in giving funds and time to help other people's lives better. A more in-depth definition explains that philanthropy is an idea, activity, or action on a humanitarian basis and involves sacrifices, whether it is the sacrifice of time, money, experience, skills, networks, to make the world a better place.<sup>36</sup>

It is undeniable that Indonesia is one of the countries with an unfortunate population living in conditions. Far from that, social

<sup>33</sup> Pusat Analisis Determinan Kesehatan, *Analisis Kebijakan Peran Filantropi dalam Pembangunan Kesehatan* (Policy Brief. Kementerian Kesehatan RI, 2019).

<sup>34</sup> Rustika Rustika, Noor Edi Widy Sukoco, and Tety Rachmawati, "Pemberdayaan Masyarakat melalui Corporate Social Responsibility (CSR) dalam Pengendalian Penyakit Tidak Menular (Studi Agen Perubahan di Kecamatan Cicurug, Kabupaten Sukabumi)," *Media Penelitian dan Pengembangan Kesehatan* 28, no. 2 (2018): 73–82, <https://doi.org/10.22435/mpk.v28i2.179>.

<sup>35</sup> Didin Hafidudin, "Filantropi dalam Perspektif Islam," *Republika Online*, March 18, 2018, retrieved from <https://republika.co.id/share/p5qn6r396>.

<sup>36</sup> Tahir Tahir, "Meningkatkan Mutu Pelayanan Kedokteran, Kesehatan Masyarakat dan Kemanusiaan melalui Filantropi," 2016, retrieved from <https://repository.ugm.ac.id/136607/>.

development issues in the form of philanthropic movements are in great demand by community groups because they are synonymous with strengthening social capital and empowering communities. The movement responds to the realization of pro-people development. The government has not optimally implemented philanthropic activities, either through the Ministry of Social Affairs or the Ministry of Health, manifested in merely many temporary social development programs.<sup>37</sup>

Moreover, the resolution of social problems is still resolved on the surface, not at the root of the problem. Indonesia's role as a recipient of funds and as an initiator of ideas is still low compared to other countries. The potential for philanthropic activities in the health sector is still quite significant, and if it can be appropriately utilized, it will have a significant impact on efforts to develop health development.<sup>38</sup> Therefore, community empowerment efforts in the health sector through low-cost and accessible health services can reach the poor who cannot access health services that the government has provided. The lack of access to health facilities and infrastructure is partly due to geographical conditions, physical conditions, especially for the elderly, or incomplete demographic identity. Thus, low-cost and accessible health services organized by Rumah Zakat through the Pratama Cita Sehat Clinic can meet these needs.<sup>39</sup>

Through professional institutions, philanthropy management usually emphasizes community assistance or empowerment, compared to charity program activities. It is done because

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<sup>37</sup> Zainal Abidin, "Manifestasi dan Latensi Lembaga Filantropi Islam dalam Praktik Pemberdayaan Masyarakat: Suatu Studi di Rumah Zakat Kota Malang," *Jurnal Studi Masyarakat Islam* 15, no. 2 (2013): 197–214.

<sup>38</sup> Dedy Arisjulyanto and Muhammad Syukran, "Peran Filantropi dalam Pendanaan Program Kesehatan Ibu dan Anak dalam Mengatasi AKI dan AKB di Indonesia," *Berita Kedokteran Masyarakat* 34, no. 5 (2018): 5–4, <https://doi.org/10.22146/bkm.37483>.

<sup>39</sup> Amelia Fauzia, "Islamic Philanthropy in Indonesia: Modernization, Islamization, and Social Justice," *Austrian Journal of South-East Asian Studies* 10, no. 2 (2017): 223–36, <https://doi.org/10.14764/10.ASEAS-2017.2-6>.

community empowerment is long-term. Community participation plays an essential role in the implementation of sustainable health services.<sup>40</sup> Therefore, what needs to be considered is that efforts to reduce poverty and increase health status. However, it also should solve the root of the problem. Thus, participation grows because the community has felt the benefits and vice versa as an extension of the health empowerment program from Rumah Zakat.

## Conclusion

The advantages of low-cost and accessible health services, especially for members, including free ambulance services, have made residents feel helped. It creates a sense of belonging to the surrounding community towards the Pratama Cita Sehat Clinic in East Jakarta. Since its establishment, the community has been involved, starting from socialization, licensing, cleaning to facilities and infrastructure. Broadly, people outside the clinic's coverage area are involved in financing donations in the form of *zakat*, *infaq*, or *shodaqoh* collected by Rumah Zakat. However, the efforts of philanthropic institutions cannot run independently. The agency needs to increase cooperation with various institutions. In addition, the government needs to play a role in the existence of philanthropic institutions, both in regulation and support for existing health empowerment programs. This support can be in the form of training to improve the competence of health workers in health services based on the philanthropy institution. Good relations with the surrounding community should continue to be maintained so that the purpose of benefiting from low-cost and accessible health services for the community can be sustainable, and there will be more beneficiaries. Hopefully, this research can open

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<sup>40</sup> Ayu Restianti, "Evaluasi Pelayanan Kesehatan dan Pendidikan Program Keluarga Harapan (PKH)," *Jurnal Pemberdayaan Masyarakat: Media Pemikiran dan Dakwah Pembangunan* 1, no. 2 (2017): 405-26, <https://doi.org/10.14421/jpm.2017.012-10>.

new research on philanthropy-based health services in Indonesia.

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