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BAZNAS in Free Healthcare Program in Karanganyar Regency

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Abstract:

Free healthcare program established by Karanganyar's Regent this time has not been effective and undergone by all community's member. Otherwise, Karanganyar Moslem's awareness to distribute some of their income or wealth in the form of *zakat* through BAZNAS keeps increasing. Therefore, as an institution managing community's *zakat*, BAZNAS, potentially collect the zakat in a huge number. Thus, it is a social responsibility of BAZNAS to facilitate the collecting, distribution and the use of zakat to give free healthcare for the community. This research aimed to analyze BAZNAS in free healthcare program. This research used qualitative method. The sampling technique used in this research was purposive sampling. The data in this research was collected by interview and documentation. The data was analyzed by using interactive technique. The result of this research shows that the free healthcare program conducted in Karanganyar Regency as a realization of BAZNAS's social responsibility in a form of program assistance enabled to build credibility, to strengthen togetherness, and to optimize *zakat*'s collection.



1 INTRODUCTION

As a biggest Moslem population country in the world, Indonesia, has a potential to collect *zakat* in a huge number. However, there was still a difference between the potential and the reality,according to researches conducted by UIN Syarif Hidayatullah and Ford Foundation in 2005, Public Interest Research and Advocacy Centre/PIRAC in 2007, IPB's Economy and Business Faculty and BAZNAS in 2011 (PIRAC, 2007; Infoz, 2011).

Recently, Indonesia applies *zakat* management based on Act No. 23 of 2011 (UU No. 23/2011) substituting Act No. 38 of 1999 (UU No. 38/1999) on *zakat* management as *zakat* institution's operational foundation. According to Malaysian Selangor Zakat Institution (LZS), the standard of poor community is determined by the ability of a family to fulfill their basic needs (*daruriyyah*) comprising food, clothes, house, health, and education. Thus, if they apply that *al kifayah*, a family that has a right to receive *zakat* fund is the one who has an income less than RM 165. 03 (US\$ 39. 84). Furthermore, if there is someone in bad shape, the minimum limit will increase to RM 224 (US\$ 54. 07)/month/family (Rasool *et al*, 2011).

In a case happened in Indonesia, a study conducted by Beik (2009), Anriani (2010), Purnamasari (2010) and Beik & Tsani (2015), it is a thing. For instance, Beik (2013) concludes that *zakat* distribution program done by BAZNAS, DKI Jakarta Bazis, and *dompet dhuafa* in the area of Jabodetabek (Jakarta, Bogor, Depok, Tangerang, and Bekasi) can lower the number of poverties with average growth of 16. 79%. This program can also decrease the discrepancy of poverty and income for 13. 90% and 13. 72% for each. Thus it can also lower the level of serious poverty for 26. 69% and increase the income for 36. 70%.

Some of previous researches conclude that the *zakat* distribution can increase poor community's income and people's health level by giving to appropriate receiver through extra capital and productive business guidance. This research aimed to analyze the strategy of free healthcare run in Karanganyar Regency and BAZNAS' social responsibility. This research also studies the social approach appropriate to Karanganyar community's characters.

2 THEORETICAL

Zakat is the first fiscal system in the world. The rule of zakat was amazingly complete, preceded by zakat supplier as a subject, the standard that determines someone must give the zakat or not (nishab), someone's period to own the wealth up to the allocation of zakat that must be distributed. On the one hand, zakat also has some important and significant, characteristics and social economy implication which is the reason why it is socially needed. Furthermore, zakat concerns not only on fiscal and economy system, but also on social, political, moral, and religious system (Qardawi, 2010).

Mannan (2000) said that *zakat* is a tool to activate unused asset in economy. The responsibility of zakat is gold, for instance, Mannan thought that Islam cares on productivity of the available asset. If the asset stays passive or unproductive, it will generate bad implication on economy system.

2.1 Zakat Organization

The law aspect concerned on Act No. 23 of 2011 legalized on October 27th, 2011 consisting of 11 chapters and 47 articles. The heart of this regulation is especially concerning *zakat* organization consisted in the new regulation of *zakat*: (a) *Zakat* management is an authority from the government. The community can manage the *zakat* if government give a permit. (b) *Zakat* management done by BAZNAS operating from the national level to local level (then BAZNAS receives it from zakat collecting unit) (c) BAZNAS' member consists of eight people representing the community and three people from the government.

2.2 Zakat Management

The activity collecting *zakat* is called funding. This activity to collect the fund from various sources in community (such as individual, group, organization, company or government) is used to fund numerous program and institutional activities in accordance with vision and mission of the organization (Thedam, 2012).

3 METHOD

The method used in this research was qualitative method using descriptive research. The sampling technique used in this research was purposive sampling technique. The data were collected by doing interview, observation, and documentation. The data were analyzed using interactive technique. The samples taken in this research were the zakat receivers (*Mustahih*) enlisted in Karangnyar BAZNAS. This research was conducted from June 2018 until January 2019. The copyright form is located on the authors' reserved area.

4 RESULT AND DISCUSSION

The effort in explaining and analyzing standardization of *zakat* receiver according to *asnaf* is expected to give significant contribution for further *zakat* development. This standard analysis was based on a case in Indonesia, by making *mustahiq* according to *asnaf* to be criteria applied by BAZNAS, as a highest *zakat* institution owned by Indonesian government. Karanganyar BAZNAS had distributed the ZIZ as BAZNAS' work program and always being *asnaf*-oriented, and another program, *pentashorupan* (distribution), had been in accordance with the program that can be seen in the following table:



Table 1. Pentashorufan Allocation (in percent).

Alloca	Program	The Receiver Group
tion		
26%	Karang	Fakir, Poor, Ghorim dan Ibnu Sabil, Mualaf
	anyar	
	Peduli	
7%	Karang	Fakir, Poor, Mualaf
	anyar	
	Sehat	
14%	Karang	Fakir, Poor, Mualaf, Fisabilillah
	anyar	
	Cerdas	
16%	Karang	Fakir, Poor, Mualaf, Fisabilillah dan Ibnu
	anyar	Sabil
	Makmur	
37%	Karang	Fisabilillah, Mualaf
	anyar	
	Taqwa	

Source: BAZNAS Kabupaten Karanganyar, Program Kerja, September 2018.

According to result of the research either from interview with respondent or from document-checking on some documents containing Free Healthcare in Karanganyar information, and through the role of social responsibility, Karanganyar BAZNAS paid attention on poor community especially the ones in free healthcare program in Karanganyar Regency by providing some free healthcare to poor families either for toilet procurement facility, deep well facility and sanitation, free ambulance service, and free mud feces pumping for mosque and *mushola* which were all integrated with Karanganyar Government's program and the role of Local Company, Bank Jateng branch Karanganyar as Coorporat Social Responsibility (CSR)'s role matched with the acquired result on the following

Table 2. Data of development and the role of zakat by BAZNAS in providing sanitation facilities in Karanganyar Regency

	Regency							
No	Types of Facility	Before	After 2014					
		2014	Governmen t's Fund	BAZNA S'fund	CSR 's fund	TOTAL		
1	Communal Toilet	970 familie s	2,006 families	-	-	2, 006 families		
2	Family Toilet	1, 000 familie s	6,365 families	443 families	523 familie	8,331 families		
3	Deep Well Sanitation	214 spots	171 spots	12 spots	-	397 spots		
4	Mud Feces Pumping	-	2,000 families	1,700 mosque	1	3,700 spots		
5	Polyclinic (s)	public health center	22 Puskes mas	1 polycli nic	-	23 Puskesmas		
6	Ambulance (s)	29 units	29 units	1 unit	-	30 units		
7	Specific Ambulan ce (s)	-	-	1 unit	1	1 unit		

Source: Health Service and Environmental Service Karanganyar, September 2018.

In executing this free healthcare program, according to the research's result, there is an institution or a team, scheduled program socialization/evaluation and an assistance for grant receivers especially in clean toilet building and mud feces pumping. If a member of community needs a consultation about specific illness, they will be accommodated to specialist or to competent hospital with assistance and funding from BAZNAS.

Thus, people will acknowledge how far BAZNAS' role and responsibility to manage ZIS fund and to execute the work programs is. It will encourage the *muzakki* to trust BAZNAS as an institution managing *zakat* that has an achievement as the biggest fund collector in Central Java which was in 2016 made it to collect Rp 7, 609, 089, 157,-/ US\$ 1, 836, 758, 031. 61,- and in 2017 successfully collected Rp. 13, 260, 551, 131,- / US\$ 3, 200, 964, 437. 51,-(Karanganyar BAZNAS' 2017 annual report) and from *mustahiq*'s side, it will generate satisfaction for the service and from government's side, by BAZNAS' social responsibility, it has been an evidence of synergy and be able to achieve healthcare program in Karanganyar Regency.

5 CONCLUSION

1. The results showed that the work program of BAZNAS which was synergistic with the free health program of the Karanganyar Regency Government, was able to trigger changes in people's attitudes to no longer defecate carelessly, from 2013 of 78% to 98% in 2018 exceeding the national target of 90% in the year 2018. and the collection of zakat funds can provide various health services managed by BAZNAS such as; family toilet assistance, boor well assistance, sludge suction and polyclinic, through the program and service, according to the Karanganyar District Health Office report, there has been an increase in the level of public health with indicators of decreasing numbers of infectious diseases and diarrheal diseases from 2013 to 2018. From On the other hand, the BAZNAS program which is a cosmetics company adds to Muzakki's confidence to continue to deposit zakat funds to BAZNAS. 2. Zakat distribution is a key indicator to determine the success of zakat development.

3. It is required for the institution managing zakat fundto implement criteria of zakat receiver.

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