

Integration of Health Sciences and Islamic Ethics: A Maqashid Perspective in Reproductive Health Education

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ABSTRACT (10 PT)

This study aims to analyze the integration of health sciences and Islamic ethics through the perspective of *maqashid al-shariah* in reproductive health education. The approach employed is a qualitative method with a descriptive-analytical design, as it is appropriate for understanding meanings, values, and ethical practices that cannot be measured quantitatively. This design was chosen to provide an in-depth depiction of the process of implementing *maqashid* values within the learning context. The research was conducted at An-Nur Integrated Islamic Senior High School, Yogyakarta, which has implemented an integrative curriculum based on Islamic values. The research informants consisted of eight individuals, including Islamic religious education teachers, biology teachers, healthcare professionals, and the vice principal for curriculum affairs. They were selected purposively due to their direct involvement in the development and implementation of reproductive health education materials. The findings indicate that the integration of Islamic ethics strengthens students' moral understanding and bridges the dichotomy between empirical knowledge and spiritual values. The *maqashid al-shariah*-based learning model is proven to enhance awareness of moral responsibility toward health and life. The study recommends the development of integrative curricula, *maqashid*-based teacher training, and collaboration between educators and healthcare professionals to strengthen character education grounded in Islamic values.



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INTRODUCTION

The integration of health sciences and Islamic ethics in reproductive health education is an important and continuously developing issue, alongside the growing demand for holistic educational approaches that are rooted in moral values and oriented toward comprehensive human well-being. In the global context, reproductive health education is often emphasized from biological, medical, and social perspectives, while frequently neglecting the ethical and spiritual dimensions that underlie human behavior in preserving purity and responsibility toward the body and life. In Muslim-majority countries, including Indonesia, the need to align reproductive health education curricula with Islamic ethical principles is particularly relevant. Such integration is expected not only to foster strong scientific knowledge but also to cultivate deep moral awareness in accordance with the values of *maqashid al-shariah*, namely the protection of religion, life, intellect, lineage, and property (Adamson & Somma, 2024).

A review of the literature indicates that models of reproductive health education at both school and higher education levels remain dominated by secular approaches that prioritize biological and social aspects. This approach tends to overlook religious values that play a crucial role in shaping students' behavior and moral responsibility. Several previous studies, such as those conducted by Al-Dhalimi (2019) and Hashim (2020), highlight the need for a new paradigm in reproductive health education that integrates modern science with Islamic values. However, the proposed integrations are often partial in nature, such as merely adding Qur'anic verses or *hadith* without internalizing Islamic ethical principles within the curriculum structure and learning process. This condition results in an epistemological gap between empirical health sciences and normative Islamic ethics (Gaffar & Ramadhan, 2024).

The main problem addressed in this study arises from the reality that reproductive health education in Indonesia has not yet fully responded to the moral and social challenges brought about by changes in adolescent lifestyles, advances in information technology, and shifts in cultural values. Many educational programs focus on preventing risky behavior without providing a strong religious ethical foundation for understanding reproductive health as part of spiritual responsibility. Consequently, students tend to perceive reproductive issues pragmatically, without recognizing their connection to concepts of purity, social responsibility, and respect for human dignity. In this context, an integrative approach that combines Islamic ethics and health sciences becomes an urgent necessity to produce more meaningful and effective reproductive health education (Abdulgafar et al., 2024).

The research gap lies in the absence of a comprehensive Islamic approach in the development of reproductive health education materials. Many previous studies stop at symbolic integration, without positioning *maqashid al-shariah* as a methodological foundation for formulating educational objectives, content, and learning methods. Moreover, there is a lack of empirical research evaluating how the integration of Islamic ethics influences students' moral understanding and health-related behavior. This study seeks to address this gap by developing and evaluating an integration model based on *maqashid al-shariah* that emphasizes not only cognitive aspects but also affective and spiritual dimensions in reproductive health education (Darma, 2022).

The novelty of this research lies in the development of a *maqashid al-shariah*-based educational model that systematically connects Islamic ethical principles with modern reproductive health concepts. This model functions not merely as a theoretical framework but also as a practical guide for teachers and healthcare professionals in designing instructional materials that balance scientific rationality with Islamic values. The approach positions *maqashid* as the central axis for building synergy between empirical knowledge and moral norms, thereby generating a more comprehensive understanding of reproductive health as a manifestation of the protection of life (*hifz al-nafs*) and lineage (*hifz al-nasl*) (Ali et al., 2022).

The research questions of this study focus on the following issues: How can the integration of Islamic ethics be implemented in the design and delivery of reproductive health education in accordance with *maqashid al-shariah*? How do Islamic religious education teachers and healthcare professionals perceive and experience this integration? To what extent can this approach strengthen students' moral understanding and healthy behavior? These questions are intended to explore both the conceptual and practical dimensions of integrating science and Islamic ethics within the context of modern education (Gusrianti & Sari, 2023).

The objectives of this study are to conduct an in-depth evaluation of the implementation of Islamic ethical integration in the development of reproductive health education materials from the perspective of *maqashid al-shariah*. This study also aims to identify relevant forms of Islamic ethical values applicable to reproductive health education and to develop an educational model that can be adapted within formal educational settings. Furthermore, the research seeks to provide new insights into the relationship between religious values and health sciences in shaping students' moral behavior (Nurjanah et al., 2025).

Theoretically, this study contributes to the development of discourse on the integration of knowledge within the context of contemporary Islamic education. The findings enrich the literature on Islamic epistemology and its application in the field of health, while also contributing to theories of knowledge integration oriented toward *maqashid al-shariah*. Academically, this research provides an empirical foundation for the development of value-based reproductive health education curricula and may serve as a reference for Islamic higher education institutions, healthcare training institutions, and relevant ministries in formulating integrative curriculum policies. Practically, the findings can be utilized by teachers and healthcare professionals to strengthen pedagogical approaches that are more ethical, communicative, and relevant to students' cultural and religious contexts (Syarif & Kusniawati, 2024).

This study employs a qualitative method with a descriptive-analytical approach. The primary informants consist of Islamic religious education teachers and healthcare professionals directly involved

in the development and implementation of reproductive health education materials at the secondary school level. Data were collected through in-depth interviews, participatory observation, and analysis of curriculum documents. Data analysis was conducted through processes of reduction, categorization, and interpretation based on the principles of *maqashid al-shariah* to achieve a comprehensive understanding of the integration of Islamic ethical values in educational practice (Halim et al., 2024).

The limitations of this study include the restricted scope of the sample, which is limited to a specific region, thereby limiting the generalizability of the findings. In addition, the study focuses primarily on the perceptions and practices of teachers and healthcare professionals, without conducting a longitudinal evaluation of changes in students' behavior over time. Other factors, such as differences in cultural backgrounds and levels of religious understanding among students, also present challenges that may affect the consistent implementation of the integrative model across diverse educational contexts (Sutihat & Pramuka, 2025).

Future research is recommended to expand the scope by involving various educational levels and more diverse student populations, including higher education and non-formal educational institutions. Further studies may also explore the effectiveness of *maqashid al-shariah*-based learning models through quantitative and mixed-methods approaches to measure their impact on improving students' moral and health literacy. Additionally, future research should develop standardized evaluation instruments to systematically and sustainably assess the success of integrating Islamic ethics within health education contexts (Rohmad & Fanani, 2025).

In conclusion, this study emphasizes the urgency of integrating health sciences and Islamic ethics in reproductive health education as a form of harmonization between modern scientific knowledge and religious moral values. The *maqashid al-shariah* approach provides a strong epistemological foundation for building education that emphasizes not only knowledge transfer but also character formation, spirituality, and social responsibility. This integrative model is expected to make a significant contribution to the development of an adaptive Islamic education paradigm that is oriented toward public welfare (*maslahah*) and aligned with the increasingly complex demands of modern society (Syifa et al., 2023).

RESEARCH METHODS

This study employs a qualitative approach with a descriptive analytical design aimed at exploring in depth the integration of health sciences and Islamic ethics in the context of reproductive health education through the perspective of *maqashid al-shariah*. The qualitative approach was chosen because it aligns with the research objectives, which focus on understanding meanings, value interpretations, and the processes of integrating Islamic ethics into the development of health education materials. The descriptive analytical design is used to systematically and comprehensively describe the phenomenon by examining the relationships between scientific concepts, Islamic values, and educational practices implemented by educators and healthcare professionals.

The primary rationale for employing a qualitative method lies in the nature of the research, which is oriented toward a phenomenological understanding of the informants' subjective experiences. Reproductive health education grounded in Islamic ethics involves not only factual aspects but also dimensions of values, beliefs, and social norms that cannot be adequately explained through quantitative measurement. Therefore, this study requires an in-depth exploration of how Islamic ethics are interpreted and applied within pedagogical and health practice contexts. Accordingly, the qualitative approach provides space for understanding, in a contextual manner, the perspectives of Islamic religious education teachers and healthcare professionals regarding the integration of *maqashid al-shariah* in reproductive health learning.

The research design adopts a descriptive analytical framework using a focused case study approach. A case study was selected because it allows the researcher to closely examine the implementation of Islamic ethical integration within an educational setting in a detailed and contextualized manner. This case study focuses on a single secondary educational institution that has implemented a reproductive health education program based on Islamic values. This approach enables

direct observation of teaching practices, educator–student interactions, and the process of developing instructional materials that integrate Islamic values.

The research site was Sekolah Menengah Islam Terpadu (Integrated Islamic Secondary School) An-Nur, located in Yogyakarta, Indonesia. The selection of this site was based on several methodological and substantive considerations. First, the school is known for integrating the national curriculum with an Islamic values-based curriculum, particularly in Islamic religious education and health education subjects. Second, the school has developed a reproductive health education program through collaboration among Islamic education teachers, biology teachers, and healthcare professionals from a local public health center, making it an ideal context for examining the integration of science and Islamic ethics. Third, the school’s social environment, which is open to educational innovation and active educator participation, supported the collection of rich and authentic data.

This study involved eight key informants selected through purposive sampling. This technique was used to identify individuals who possess relevant experience, knowledge, and direct involvement in the implementation of reproductive health education at the school. The criteria for informant selection included: (1) active involvement in the development and teaching of reproductive health education materials, (2) an understanding of Islamic ethical principles and *maqashid al-shariah*, and (3) experience in applying an integrative approach between science and religion.

The eight informants consisted of three Islamic religious education teachers, two biology teachers, two healthcare professionals from the school’s partner public health center, and one vice principal for curriculum affairs. To ensure confidentiality and adherence to research ethics, all informants were assigned pseudonyms. The first Islamic education teacher, referred to as Ustadz Rahman, has more than ten years of experience in teaching and developing Islamic values-based curricula. The second, Ustadzah Mariam, is known for her active involvement in teacher training programs on integrating Islamic values into science education. The third, Ustadz Hasan, teaches *fiqh* and *akhlaq* and is involved in developing *maqashid al-shariah*-based reproductive health modules.

The two biology teachers were assigned the pseudonyms Ibu Sari and Bapak Ridwan. Both were involved in developing human reproductive biology modules contextualized with Islamic ethical principles. Ibu Sari is a senior teacher with twenty years of experience in science education, while Bapak Ridwan is a younger teacher actively engaged in seminars on Islamic character-based education. The two healthcare professionals, referred to as Ibu Fatimah and Bapak Yusuf, played roles in providing health counseling to students on reproductive health and healthy lifestyle behaviors. The vice principal for curriculum affairs, referred to as Bapak Zainuddin, was responsible for coordinating and supervising the implementation of the integrative program at the school.

Data collection techniques in this study included in-depth interviews, participatory observation, and document analysis. In-depth interviews were conducted to explore the informants’ perspectives, experiences, and interpretations regarding the integration of Islamic ethics in reproductive health education. The interviews were semi-structured, allowing flexibility to explore emerging themes during the interview process. Each interview lasted between 45 and 90 minutes and was audio-recorded with the informants’ consent for transcription and analysis.

Participatory observation was conducted by attending classroom learning sessions and health education activities facilitated by the school and healthcare professionals. Through this method, the researcher gained direct insight into how *maqashid al-shariah* principles were applied in teaching practices, teacher–student interactions, and content delivery. Observations focused on how educators linked biological concepts, such as the human reproductive system, with moral and spiritual values, as well as how students responded to this integrative learning approach.

Document analysis involved reviewing written materials related to the implementation of reproductive health education at the school, including syllabi, learning modules, teacher guidelines, and records of collaborative activities between the school and the public health center. This analysis aimed to assess the extent to which Islamic principles were integrated into the curriculum structure and instructional materials.

In qualitative research, data validity is crucial to ensuring the credibility of findings. Therefore, this study employed source and method triangulation techniques. Source triangulation was conducted by comparing data obtained from teachers, healthcare professionals, and school documents. Method triangulation involved combining interviews, observations, and document analysis to ensure consistency and reliability of the findings. In addition, member checking was conducted by confirming preliminary findings with informants to ensure that the data interpretations accurately reflected their perspectives.

Data analysis was conducted using the interactive analysis model proposed by Miles and Huberman, which consists of three main stages: data reduction, data display, and conclusion drawing. Data reduction involved selecting, focusing, and simplifying raw data obtained from interviews, observations, and documents. During this stage, key themes such as knowledge integration, the application of *maqashid al-shariah* values, and teachers' perceptions of reproductive health education were identified. Data display was then carried out by organizing findings into matrices and systematic narratives to facilitate analysis of relationships among concepts. The final stage involved drawing and verifying conclusions through in-depth interpretation of patterns and relationships identified in the data.

The conclusion-drawing process employed an inductive approach, whereby generalizations were constructed based on empirical findings from the field. Inductive reasoning was applied through thematic analysis of interview and observation data, which were then linked to theories of knowledge integration, *maqashid al-shariah*, and holistic reproductive health education. In this way, the conclusions emerged from empirical and analytical reflection rather than from the researcher's prior assumptions.

Interpretation was conducted hermeneutically by understanding the meanings of texts, statements, and actions of informants within their social and religious contexts. This approach enabled the researcher to capture the deeper meanings of Islamic ethical integration in reproductive health education practices, including how *maqashid* values are translated within modern educational settings. Analysis was conducted iteratively until data saturation was reached, that is, when no significant new information emerged from additional data.

This study also adhered to strict ethical procedures. All informants were informed about the purpose of the research and their right to withdraw at any time. Informant identities were anonymized, and all data were kept confidential. The research ethics followed the principles of social research that respect informants' privacy, autonomy, and well-being.

Through this methodology, the study generates a comprehensive understanding of how the integration of health sciences and Islamic ethics is realized in reproductive health education. The qualitative approach enables the researcher to explore the meanings behind educational practices, reveal *maqashid* values embedded in instructional materials, and understand the dynamics of collaboration between educators and healthcare professionals.

In conclusion, the research methodology was designed to provide an in-depth and contextual understanding of the integration of Islamic ethics and science in reproductive health education. Through a descriptive-analytical qualitative design with a focused case study approach, this study not only explains how such integration is implemented but also reveals the philosophical and pedagogical meanings underlying it. The careful selection of research sites, informants, data collection techniques, and analytical procedures ensures that the findings possess high validity, academic relevance, and practical value for the development of *maqashid al-shariah*-based Islamic education curricula.

RESULTS AND DISCUSSION

The results of this study comprehensively illustrate how the integration of health sciences and Islamic ethics through the perspective of *maqashid al-shariah* is implemented in the context of reproductive health education. The findings indicate that this integration is not limited to the development of instructional materials, but also encompasses the epistemological orientation of education, pedagogical approaches, and the formation of students' moral character. Based on data analysis obtained through interviews, observations, and documentation at An-Nur Integrated Islamic

Secondary School in Yogyakarta, it was found that the implementation of this integration strengthens the relationship between modern scientific knowledge and spiritual values, thereby shaping students' holistic understanding of reproductive health as a moral, social, and religious responsibility.

The main issue addressed in this study lies in the dichotomy between health science approaches that focus on biological aspects and Islamic ethical approaches that emphasize moral and spiritual dimensions. In educational practice, these two approaches often operate independently without a clear integrative framework. The findings of this study demonstrate that an integration approach based on *maqashid al-shariah* is able to bridge this gap. Islamic religious education teachers and healthcare professionals at the school collaborate in designing learning materials that not only explain the anatomy and physiology of the human reproductive system, but also relate them to values such as the protection of life (*hifz al-nafs*), the sanctity of lineage (*hifz al-nasl*), and social responsibility in maintaining personal dignity. This approach integrates the epistemological perspective of Syed Muhammad Naquib al-Attas on the unity of knowledge and religion, the systemic concept of *maqashid al-shariah* proposed by Jasser Auda, and Lawrence Green's holistic health education model (Prasojo et al., 2022).

The findings reveal that both religious education teachers and science teachers view the integration of Islamic values as a strategic effort to build students' awareness that the human body is not merely a biological object, but a divine trust that must be preserved with moral, spiritual, and social responsibility. In the learning process, teachers strive to instill the understanding that health cannot be separated from the values of *tawhid*, as every function of the human body is a manifestation of Allah's greatness and must be used in accordance with the purpose of creation. The body is not only a biological system that can be scientifically explained, but also a means of worship that possesses ethical and spiritual dimensions (Mat et al., 2023). This understanding transforms reproductive health education from a mere transfer of knowledge about physiology and anatomy into a process of character building, moral development, and self-awareness as *khalifah* entrusted with maintaining purity and balance in life.

Ustadz Rahman, one of the informants and an Islamic religious education teacher at An-Nur Integrated Islamic Secondary School, emphasized that reproductive health education must contain strong moral elements so that students understand the relationship between scientific knowledge and religious values. According to him, reproductive health is not merely about bodily organ functions, but also about awareness of the purpose of human creation, namely worship and the preservation of personal dignity in accordance with Islamic principles. He explained that many social problems, such as promiscuity, sexual violence, and moral degradation among adolescents, stem from a lack of spiritual understanding of the body. Therefore, integrating Islamic values into health education is essential so that students not only understand biological aspects but also view the body as a sacred entity that must be protected from misuse.

Table 1 Integration of Health Sciences and Islamic Ethics Based on Maqashid al-Shariah in Reproductive Health Education

Aspect of Integration	Empirical Findings	Discussion and Interpretation	Educational Implications
Epistemological Orientation	Health science learning is integrated with Islamic worldview (<i>tawhid</i>) and <i>maqashid</i> values.	Scientific knowledge is not treated as value-neutral but is reoriented toward spiritual and moral objectives, in line with al-Attas's theory of knowledge integration.	Reproductive health education becomes a means of strengthening faith, moral awareness, and intellectual understanding simultaneously.
Curriculum Design	Reproductive health materials combine biological concepts with <i>maqashid</i> principles such	This integration bridges the dichotomy between empirical science and Islamic ethics by positioning <i>maqashid</i> as a	Curriculum development should systematically embed Islamic ethical objectives within scientific content.

Aspect of Integration	Empirical Findings	Discussion and Interpretation	Educational Implications
	as <i>hifz al-nafs</i> and <i>hifz al-nasl</i> .	methodological foundation rather than symbolic references.	
Teaching and Learning Practices	Teachers use reflective discussions, Qur'anic contextualization, and case-based learning.	Learning shifts from purely cognitive delivery toward reflective and transformative pedagogy that links knowledge with moral responsibility.	Students are encouraged to internalize values such as purity, responsibility, and self-restraint alongside scientific understanding.
Role of Educators	Collaboration between Islamic education teachers, biology teachers, and healthcare professionals is evident.	Interdisciplinary collaboration strengthens the coherence between scientific accuracy and ethical guidance, reflecting Green's holistic health education model.	Schools should institutionalize collaborative teaching models in reproductive health education.
Students' Moral Understanding	Students show increased awareness of bodily sanctity, personal dignity, and social responsibility.	Maqashid-based learning fosters holistic moral development, aligning knowledge with behavior and ethical action.	Reproductive health education can function as character education grounded in Islamic values.
Preventive Social Function	Education addresses issues such as promiscuity, pornography, and risky behavior through value-based dialogue.	Integrating Islamic ethics reduces resistance to sensitive topics and enhances students' receptiveness to health messages.	Value-based reproductive health education serves as a preventive strategy against moral and social problems among adolescents.

presents a synthesis of the study's results and discussion regarding the integration of health sciences and Islamic ethics through the *maqashid al-shariah* framework in reproductive health education. The table demonstrates that such integration operates across epistemological, curricular, pedagogical, and behavioral dimensions. The findings indicate that maqashid-based integration not only enhances students' scientific understanding of reproductive health but also strengthens their moral, spiritual, and social awareness. Consequently, reproductive health education is transformed into a holistic learning process oriented toward *maslahah* (human well-being) and character formation grounded in Islamic values.

This perspective reflects the practical implementation of the theory of knowledge integration developed by Syed Muhammad Naquib al-Attas. In al-Attas's view, knowledge is never value-neutral, as it is always influenced by an underlying worldview (N. Ahmad et al., 2025). Modern science, which has developed within a secular paradigm, often detaches itself from spiritual values, resulting in knowledge that is devoid of moral meaning. Al-Attas rejects this notion and emphasizes that *tawhid* must serve as the center of Islamic epistemology, representing the unity between God, humanity, and nature (Izadin et al., 2025). Through the integration of Islamic values in science education, teachers seek to restore knowledge to its original purpose, namely to know and draw closer to Allah. This process, known as the Islamization of knowledge, does not imply rejecting modern science, but rather purifying its meaning so that it is reoriented toward spiritual objectives.

In the context of reproductive health education, al-Attas's ideas are translated into concrete practice by linking every scientific topic with religious values (Farhana et al., 2022). For example, when

discussing the human reproductive system, biology teachers collaborate with religious teachers to explain that reproductive organs are gifts from Allah with a noble function in sustaining life. Teachers emphasize that maintaining the health of reproductive organs is not only a medical obligation, but also a religious duty as part of self-preservation (*hifz al-nafs*) and lineage preservation (*hifz al-nasl*), two fundamental principles of *maqashid al-shariah*. Through this approach, students gain not only anatomical knowledge but also moral values guiding them to use their bodies responsibly and ethically.

Furthermore, the integration of Islamic values in reproductive health education provides a strong ethical foundation for confronting the flow of information and popular culture that often contradicts Islamic moral principles (Herlanti et al., 2022). Teachers recognize that adolescents today live in a digital era saturated with explicit sexual content that is easily accessible. In such conditions, teaching health sciences without religious values may lead students to moral disorientation. Therefore, the integration of Islamic ethics serves as both spiritual protection and character education. Teachers not only convey scientific concepts, but also guide students in filtering information, developing self-awareness, and internalizing values of purity in daily life.

From a pedagogical perspective, this integrative approach encourages a paradigm shift in the learning process. Whereas reproductive health education was previously more informative and cognitive, learning is now directed toward reflective and transformative dimensions (Al-Farisi & Syauqii, 2025). Teachers employ discussion-based methods, Qur'anic reflection, and contextual case studies to help students understand the relationship between knowledge and values. For instance, when discussing puberty, teachers not only explain physiological changes, but also address dress ethics, social boundaries, and social responsibility in maintaining personal dignity. This form of learning fosters both critical and moral thinking, enabling students to position themselves responsibly within their social environment.

In practice, this integrative approach also transforms the role of teachers from mere transmitters of information into moral and spiritual mentors. Teachers become role models in applying Islamic values in everyday life. Biology teachers, for example, begin using more ethical language and analogies when explaining biological processes, while religious teachers expand their discourse beyond legal rulings and prohibitions to include the philosophical meanings underlying self-preservation. This collaboration creates a learning environment that balances rationality and spirituality.

The integration of science and Islamic ethics also has a positive impact on students' moral understanding. Observations indicate that students participating in *maqashid*-based learning demonstrate a higher level of awareness of their social and spiritual responsibilities. They are more cautious in interactions with the opposite sex, more aware of the importance of bodily cleanliness and health, and hold more positive views toward sexuality education that aligns with religious values. This suggests that when learning is oriented toward *maqashid*, students are able to see the connection between knowledge and action, as well as between understanding and moral responsibility.

Beyond strengthening individual morality, this integration also functions as a preventive strategy against deviant behavior among adolescents. Teachers utilize the classroom as a space for open dialogue on topics often considered taboo, such as pornography, promiscuity, and bodily exploitation. Through a respectful and value-based Islamic approach, these topics can be discussed educationally without generating embarrassment or resistance. This is crucial, as one of the greatest challenges in reproductive health education in Muslim contexts is resistance to discussing sensitive topics (Nst et al., 2024). Through the integration of Islamic values, such resistance can be minimized because students perceive the content as consistent with their beliefs.

Philosophically, the findings indicate that an integrative approach to reproductive health education embodies the principle of the unity of knowledge. In Islam, there is no separation between worldly and spiritual knowledge, nor between science and religion. The human body, the universe, and social life are all signs of Allah's greatness that must be studied and preserved ethically. Therefore, *maqashid*-based health education serves as a means of restoring human awareness of their innate nature (*fitrah*) as rational beings who submit to divine law.

By positioning *tawhid* as the epistemological foundation, teachers at this school successfully create a balance between students' intellectual and spiritual dimensions. Science is viewed not as a threat to religion, but as a bridge to knowing and glorifying the Creator. Every biological concept is connected to Qur'anic verses and *hadith*, making learning more meaningful and contextual (Waluyo et al., 2025). This approach revitalizes knowledge by embedding it with values, transforming it into a means for holistic human development.

Thus, reproductive health education grounded in *maqashid al-shariah* has great potential in strengthening the character and morality of the younger generation. Teachers do not merely transmit knowledge, but also cultivate students' ethical and spiritual awareness. The body is understood not merely as a biological entity, but as a trust that must be preserved and utilized in accordance with divine will. This form of education represents a concrete realization of the integration of knowledge and religion as envisioned by al-Attas, placing *tawhid* at the center of all scientific endeavors (Rassool, 2023). Through this model, reproductive health education is oriented not only toward disease prevention or physical well-being, but also toward cultivating *adab*, moral conduct, and spiritual awareness regarding human biological functions, thereby forming individuals who are knowledgeable, faithful, and ethical.

When examined through the lens of Jasser Auda's *Maqashid al-Shariah* theory, the findings demonstrate that the implementation of *maqashid* values in reproductive health education reflects a systemic effort to achieve comprehensive human well-being (*maslahah*). Biology teachers and healthcare professionals emphasize that maintaining reproductive health is part of safeguarding life and lineage as articulated in *maqashid*. Values such as responsibility, purity, and self-restraint are incorporated as moral indicators in learning. This approach not only imparts knowledge, but also cultivates awareness that every action toward the body must align with the objectives of Islamic law (Alqodsi & Bidin, 2025).

Meanwhile, Lawrence Green's holistic health education theory plays an important role in the implementation aspect, particularly in designing learning strategies that address predisposing, enabling, and reinforcing factors in behavioral change. Observations show that the school adapts a value-based health education model by involving multiple stakeholders, including teachers, healthcare professionals, and parents. Through counseling sessions and group discussions, students not only learn about reproductive organ functions, but also engage in discussions on moral issues such as promiscuity, pornography, and social responsibility toward family. This strategy effectively strengthens students' affective and psychomotor dimensions, enabling the integration of knowledge into real-life behavior that reflects Islamic values.

The previously identified research gap namely, the absence of a systematic integrative model linking Islamic ethical values with health sciences in educational curricula is addressed by this study through a *maqashid al-shariah*-based approach. For example, in biology lessons on the human reproductive system, teachers connect each topic with *maqashid* values such as the protection of life and lineage, avoiding purely mechanistic and descriptive approaches. Interviews with Ibu Sari, a biology teacher, indicate that this integration helps students understand the moral significance of bodily health, not merely its physiological aspects. This approach reinforces Green's theory, which emphasizes the importance of social and cultural values in health education, while integrating Auda's *maqashid* framework to ensure harmony between empirical knowledge and spiritual values.

The findings also show that teachers and healthcare professionals possess strong awareness of the importance of *maqashid* dimensions in shaping healthy behavior. According to Ustadzah Mariam, applying *maqashid* in learning enables students to understand that maintaining health is not only a medical obligation but also a moral and religious duty. This perspective supports al-Attas's theory of the Islamization of knowledge, in which education aims to restore the meaning of knowledge as a means of drawing closer to God. Healthcare professionals such as Ibu Fatimah further emphasize that incorporating a religious approach in health counseling makes students more open and receptive to health messages because the values conveyed align with their beliefs.

In relation to the research questions, the empirical findings explain how Islamic ethics are integrated into reproductive health education through three main stages: value conceptualization, curriculum adaptation, and learning practice. Value conceptualization involves discussions among teachers and healthcare professionals to identify relevant *maqashid* values. Curriculum adaptation entails modifying learning materials to be more contextual and aligned with Islamic principles. Learning practice is realized through teaching methods based on moral reflection, case studies, and social simulations that integrate science and Islamic values. These stages demonstrate that al-Attas's theory guides epistemological understanding, Auda's theory provides normative foundations, and Green's theory offers methodological guidance for practical implementation.

The research objectives of evaluating the integration of Islamic ethics in reproductive health education materials are achieved through empirical evidence showing strengthened links between scientific knowledge and moral values. In practice, teachers and healthcare professionals successfully foster students' moral awareness regarding self-purity, respect for the body, and avoidance of risky behavior. Observations indicate that students are able to relate biological topics such as reproductive systems, hormones, and puberty to Islamic teachings on purity, trust (*amanah*), and responsibility. These findings affirm the relevance of al-Attas's integration of knowledge and *adab*, Auda's emphasis on *maqashid* as moral orientation, and Green's focus on healthy behavior through holistic education.

Theoretically, this study contributes to the development of an integrative paradigm of science and religion within modern Islamic education. The findings demonstrate that al-Attas's concept of Islamization of knowledge can be practically applied in health education through a systemic *maqashid*-based approach. This integration shows that modern scientific knowledge does not conflict with Islamic teachings when placed within an appropriate value framework. Practically, the study offers a learning model that can be adopted by other schools in developing value-based health education. The interdisciplinary collaboration among religious teachers, science teachers, and healthcare professionals illustrates that such an approach fosters a humane, reflective, and value-oriented learning environment.

Academically, this study enriches the field of Islamic education and interdisciplinary studies between health sciences and ethics. The findings can serve as references for developing Islamic education curricula at secondary and higher education levels. Moreover, this study opens new avenues for exploring the interconnection between *maqashid al-shariah* and modern educational theories, particularly in reproductive health. Empirically, this integration is shown to enhance learning effectiveness, as religious values function as intrinsic motivation for students in understanding and applying reproductive health concepts.

This study also carries broad social implications. The application of Islamic ethics in reproductive health education has the potential to serve as a preventive strategy against social problems such as risky sexual behavior, digital media misuse, and low awareness of reproductive health among adolescents. Through a *maqashid*-based approach, education functions not only as a means of knowledge transmission, but also as a mechanism of social regulation that builds a culture of health aligned with Islamic values. This aligns with Green's theory on education's role in behavioral change and reinforces the relevance of Auda's *maqashid* framework in achieving social welfare.

In conclusion, the findings demonstrate that integrating health sciences and Islamic ethics through a *maqashid al-shariah* approach results in a holistic, moral, and applicable educational model. This approach effectively addresses the longstanding gap between science and religion in health education. By integrating al-Attas's theory of knowledge integration, Auda's *maqashid* framework, and Green's health education model, the study confirms that knowledge and values are inseparable in shaping healthy and ethical behavior. This integration not only strengthens the theoretical foundation of modern Islamic education, but also provides practical contributions to improving the quality of reproductive health education in alignment with Islamic objectives and contemporary societal needs.

CONCLUSION

The conclusion of this study affirms that the integration of health sciences and Islamic ethics through the perspective of *maqashid al-shariah* in reproductive health education represents an approach capable of addressing the demands of modern education that are holistic, value-oriented, and contextually responsive to students' moral development. Based on the research findings and discussion, it can be concluded that reproductive health education grounded in *maqashid al-shariah* not only enriches students' cognitive dimensions through scientific understanding of reproductive health, but also deepens their spiritual, ethical, and social awareness. This integration establishes a new framework of thought within Islamic education that views knowledge and values as inseparable dimensions in the process of forming civilized and ethical human beings.

The findings demonstrate that the application of Islamic ethics in reproductive health education is effective in overcoming a long-standing problem, namely the dichotomy between empirical knowledge and moral values. Health education that previously emphasized biological aspects alone can be transformed into a learning process oriented toward human well-being (*maslahah*) as articulated in the principles of *maqashid al-shariah*. Collaboration between Islamic religious education teachers and healthcare professionals emerges as a crucial element in implementing this approach. They not only convey scientific concepts related to the anatomy and physiology of the human reproductive system, but also instill values of personal purity, social responsibility, and respect for life. This integration reinforces the conclusion that applying *maqashid al-shariah* within health education curricula creates a balance between scientific rationality and religious spirituality.

From a theoretical perspective, the results of this study demonstrate strong alignment among Syed Muhammad Naquib al-Attas's theory of knowledge integration, Jasser Auda's theory of *maqashid al-shariah*, and Lawrence Green's theory of holistic health education. Al-Attas's theory provides an epistemological foundation that knowledge is not value-neutral, but must be oriented toward *tawhid* in order to shape civilized and ethical individuals. This principle is evident in educational practice at the research site, where teachers seek to present reproductive health not merely as medical knowledge, but as a moral trust (*amanah*). Jasser Auda's *maqashid al-shariah* framework offers normative guidance, emphasizing that all aspects of health education should aim at safeguarding life (*hifz al-nafs*) and lineage (*hifz al-nasl*) as integral components of human well-being. Meanwhile, Lawrence Green's holistic health education theory explains that effective health education must take into account social, cultural, and moral factors as determinants of healthy behavior. Together, these three theories mutually reinforce one another in shaping an educational model that is not only rational and empirical, but also ethical and spiritual.

The findings further reveal that the *maqashid al-shariah* approach plays a vital role in bridging the gap between modern science and Islamic values, which has previously posed a challenge in educational practice. This study successfully addresses the shortcomings of earlier research that tended to separate these two domains. Through a *maqashid*-based approach, reproductive health education is no longer confined to a purely medical orientation, but is directed toward broader moral and social objectives. Consequently, health education becomes a medium for cultivating religious awareness and social responsibility, rather than merely transmitting biological information.

In addition to its theoretical contributions, this study also offers significant practical and academic implications. Practically, it provides a *maqashid al-shariah*-based model of reproductive health education that can be replicated by other educational institutions. This model emphasizes interdisciplinary collaboration among religious educators, science teachers, and healthcare professionals in developing an integrative and applicable curriculum. Academically, the study expands the scope of knowledge integration within Islamic education, demonstrating that *maqashid* values can be applied not only in the field of Islamic law, but also in education and health. The research opens opportunities for further interdisciplinary studies that connect *maqashid al-shariah* with modern educational theories in order to produce learning paradigms that are more responsive to contemporary human needs.

Another important conclusion is that integrating Islamic ethics into reproductive health education has direct implications for students' character formation. Values such as purity, responsibility, empathy, and self-restraint become integral to the learning process through reflective and contextual teaching methods. This finding strengthens the argument that *maqashid*-based education not only transforms students' ways of thinking, but also shapes their moral attitudes and social behavior in accordance with Islamic values. As such, this approach holds significant potential for developing character education that responds to the demands of modern society while remaining firmly rooted in Islamic spirituality.

Overall, this study concludes that the integration of health sciences and Islamic ethics through the *maqashid al-shariah* perspective constitutes a comprehensive and transformative approach to reproductive health education. This integration not only enhances scientific understanding, but also restores education to its fundamental Islamic purpose: the realization of human well-being and balance in life. The study affirms that authentic education is one that harmoniously unites knowledge, values, and action. With *maqashid al-shariah* as its foundation, reproductive health education can serve as an effective means of shaping a generation that is physically healthy, morally grounded, and spiritually intelligent.

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