



JLPH:
**Journal of Law, Politic
and Humanities**

E-ISSN: 2962-2816
P-ISSN: 2747-1985

<https://dinastires.org/JLPH> dinasti.info@gmail.com +62 811 7404 455

DOI: <https://doi.org/10.38035/jlph.v6i3>
<https://creativecommons.org/licenses/by/4.0/>

Harmonization Of State Law And Customary Law In Traditional Health Service Practices In Indonesia

Teguh Adi Partama¹, Ida Bagus Tatwa Yatindra², I Putu Hari Jaya Tirta³, Marsudi Dedi Putra⁴

¹ Wisnuwardhana University, Malang, Indonesia; teguhadipartama69@gmail.com

² Wisnuwardhana University, Malang, Indonesia; Idabagustatway@gmail.com

³ Wisnuwardhana University, Malang, Indonesia; tirthahari@gmail.com

⁴ Wisnuwardhana University, Malang, Indonesia; marsudiputra1976@gmail.com

*Corresponding Author: teguhadipartama69@gmail.com

Abstract: This study aims to analyze the harmonization between state law and customary law in traditional health service practices in Indonesia, identify the forms of incompatibility that occur, and formulate efforts to create harmony between the two legal systems through normative juridical research methods that focus on the study of legal norms, laws and regulations, and doctrines. The data collection technique is carried out through a literature study of primary, secondary, and tertiary legal materials which are then analyzed qualitatively to produce logical and structured legal arguments. The current arrangement of traditional health services has been transformed from Law Number 36 of 2009 to Law Number 17 of 2023 concerning Health which places the practice as an integral part of the national health system. Customary law acts as a living law that provides social legitimacy, regulates practitioner ethics through communal values, and maintains the authenticity of traditional knowledge that has been passed down from generation to generation. Efforts to harmonize are carried out through constitutional recognition of customary law communities and the integration of local norms into formal regulations to ensure security and service standards for communities without erasing cultural identity. This synergy creates dual protection for Indonesia's ethnobotanical wealth from exploitation by outsiders while ensuring that every health practice can be legally and empirically accounted for. Such alignment requires ongoing dialogue between governments, indigenous leaders, and health practitioners to address the challenges of the differences between modern medical methodologies and traditional healing techniques.

Keyword: Traditional Health Services, Customary Law, Legal Harmonization.

INTRODUCTION

Traditional medicine has been an integral part of the life of Indonesian people since ancient times, developing through hereditary knowledge passed down between generations. This practice includes the use of herbal herbs, healing techniques, and approaches based on local wisdom rooted in the culture of the community. The existence of traditional medicine is not only seen as an alternative, but also as the main choice for some people in maintaining

health and treating diseases. The use of traditional medicine such as herbal medicine shows the rich ethnobotany that Indonesia has and great potential in supporting the national health system.

Recognition of traditional medicine is also reflected in Indonesia's national legal system that provides space for such practices through various regulations, including the Health Law. Traditional medicine is defined as treatment efforts that use methods, tools, or materials sourced from hereditary experience and knowledge that can be accounted for according to the prevailing norms in society. This regulation regulates aspects of services, actors, and products used in traditional health practices so that they remain within the applicable legal corridor.

The existence of customary law as part of the legal system that lives in the community also affects the practice of traditional health services. Local values, beliefs, and customary norms are often the basis for the implementation of traditional medicine in various regions. Practices like this show the existence of legal pluralism, where state law and customary law run side by side. Customary law gives social legitimacy to traditional medicine practices that have long been trusted by the community, although they have not been fully accommodated optimally in formal law.

Problems arise when there is a discrepancy between the provisions of state law and the practices that develop in indigenous peoples. It is still found that traditional medicine practices do not meet licensing standards or do not have adequate supervision, so they have the potential to pose risks to the community. This condition shows that there is a gap between formal regulation and the social reality on the ground. Harmonization between state law and customary law is a necessity so that traditional health services can run safely, effectively, and still respect the cultural values of the community.

This study aims to analyze how the harmonization between state law and customary law in traditional health service practices in Indonesia, identify the forms of incompatibility that occur, and formulate efforts that can be made to create harmony between the two legal systems.

METHODS

The research method used in this study is a normative legal research method or normative juridical research. This method focuses on the study of law as a norm or rule that applies in society, which is sourced from laws and regulations, doctrines, and legal principles (Sugiyono, 2021). The normative approach is used to examine how state law arrangements related to traditional health services as well as how customary law is positioned in the national legal system. Normative legal research views law as a system that is logically and systematically arranged, so that an analysis is carried out on written norms and legal concepts that develop in the scientific literature.

The data collection technique in this study is carried out through *library research*, which is by collecting secondary data from various written sources such as books, scientific journals, articles, and legal documents relevant to the research topic. This process is carried out through reading, understanding, studying, and recording legal materials related to the harmonization of state law and customary law in traditional health services. The data used included primary legal materials in the form of laws and regulations, secondary legal materials in the form of books and journals, and tertiary legal materials as a complement to provide additional explanations of the legal materials used.

The data analysis technique used is qualitative analysis, which is by processing and interpreting the data that has been obtained systematically in the form of descriptive descriptions. The data that has been collected is then classified, compiled, and analyzed based on relevant theories and legal concepts to answer the formulation of research problems. The analysis is carried out through the process of study, interpretation, and drawing conclusions deductively, resulting in logical and structured legal arguments. Qualitative analysis in legal

research aims to give meaning to the data and produce conclusions that can be scientifically accounted for.

RESULTS AND DISCUSSION

State Law Regulation on Traditional Health Service Practices in Indonesia

The current state legal regulation of traditional health service practices in Indonesia no longer refers to Law Number 36 of 2009, but has been updated through Law Number 17 of 2023 concerning Health, which is the main legal umbrella in the national health system. This law emphasizes that the state is responsible for ensuring the public's right to obtain safe, quality, and affordable health services, as well as regulating all aspects of health care in an integrated manner, ranging from health workers, facilities, to types of services, including traditional health services (Budiyanti & Herlambang, 2023).

The existence of traditional health services is explicitly regulated in Law Number 17 of 2023 in its own section, which shows that this practice is recognized as part of the national health service system. Provisions regarding traditional health services are listed in Articles 160 to 164, which regulate the scope, type of personnel, and position of the practice in the health system. This arrangement emphasizes that traditional health services are not just a cultural practice, but have a formal legal basis that is binding and must be subject to state provisions.

The grouping of traditional health services in the latest regulation is divided into two main categories, namely traditional health workers and traditional health workers. Traditional health workers are individuals who obtain formal education in the field, while traditional health workers gain knowledge through hereditary experience or non-formal education. This division shows a differentiation in legal status between actors based on formal education and actors based on local wisdom, which has implications for competency standards and forms of supervision applied by the state (Dilaga et al., 2025).

The presence of Law Number 17 of 2023 also strengthens the integration of traditional health services into the national health system more systematically. These services are no longer positioned as separate alternatives, but rather as part of a series of complementary health efforts between modern and traditional approaches. This system places all types of health services in one large, integrated framework in order to provide optimal benefits to society and avoid practices that conflict with medical standards and patient safety.

More technical arrangements related to the implementation of traditional health services are regulated through implementing regulations, namely Government Regulation Number 28 of 2024 as a derivative of Law Number 17 of 2023. This regulation regulates in detail the service standards, types of personnel, and the mechanism for coaching and supervision by the government. The scope of the regulation is very broad because it covers aspects of health administration as a whole, including traditional health service techniques that must meet safety and benefit standards (Hasliani & Wulandari, 2023).

The licensing and supervision aspects remain the main instruments in controlling traditional health service practices. The state through the central and regional governments has the authority to conduct, supervise, and take action against practices that do not meet standards. This provision is intended to protect the public from potential losses due to irresponsible practices, while ensuring that any services provided have a scientific, experience, or skill basis that can be legally accounted for.

The protection of the public as service users is also the focus of this arrangement through strengthening the aspect of legal responsibility for traditional health service actors. The perpetrator can be held accountable if there is negligence or error that harms the patient, either through administrative, civil, or criminal mechanisms. The regulation in Law Number 17 of 2023 shows the direction of state policies that seek to balance the preservation of traditional

practices as cultural heritage and the need for safe, measurable, and in accordance with scientific development standards.

The affirmation of the scope of traditional health services in Articles 160 to 164 of Law Number 17 of 2023 shows the recognition of practices based on local wisdom, but at the same time also raises potential inconsistencies with other provisions that regulate health service standards in general. Article 160 paragraph (2) recognizes that traditional health services are sourced from local knowledge and values, while Article 165 paragraph (3) in the same law requires all health service facilities to meet the health service standards set by the state. This condition creates a normative contradiction between tradition-based flexibility and the obligation of formal medical standards, so harmonization is needed so that traditional practices can continue to run without ignoring aspects of patient safety and service quality standards (Law of the Republic of Indonesia Number 17 of 2023 concerning Health).

The regulation in Article 163 paragraph (1) provides broad freedom to the community to develop and use traditional health services, while Article 163 paragraph (2) emphasizes the state's obligation to carry out supervision based on security and benefit aspects. Norm tensions arise when the freedom of development is not accompanied by strict limits on measurable safety parameters, especially for traditional health care based on hereditary experience. This situation has the potential to cause differences in interpretation in the implementation in the field, especially between the government's administrative approach and the community's empirical practice, so harmonization is needed to clarify the limits of the authority and responsibility of each party (Law of the Republic of Indonesia Number 17 of 2023 concerning Health).

Inconsistencies are also seen in derivative arrangements through Government Regulation Number 28 of 2024 which details the provisions of traditional health services in Articles 479 to 494, including the classification of traditional health workers and traditional health workers. In this regulation, traditional health workers are placed as part of health workers who must meet formal education and certain competency standards, while traditional health workers are still recognized based on non-formal experience. This difference has the potential to cause a dualism of legal standards because one group is subject to a formal certification system, while the other group remains in the space of tradition-based recognition, so it is necessary to align so that there are no inequalities in the aspects of legality, legal protection, and supervision.

The regulation of government obligations in Article 162 which states responsibility for the availability of traditional health services also needs to be harmonized with the provisions of licensing and standards of health service facilities in other articles, especially those that require operational permits and the fulfillment of certain standards for each health facility. The state's responsibility to provide services can clash with the fact that many traditional practices are carried out independently without formal permission. This condition creates a discrepancy between the state's obligation to ensure the availability of services and the actor's obligation to meet administrative requirements, so harmonization is needed so that regulations do not actually hinder people's access to traditional services that have been developed for a long time (Government Regulation (PP) Number 28 of 2024).

The Role of Customary Law in Traditional Health Service Practices in Communities

The role of customary law in traditional health service practices in society is firmly rooted in the existence of traditional knowledge that has been passed down from generation to generation. Customary law is a system of norms that governs how the knowledge is used, who has the right to practice it, and how the procedures are implemented in daily life. Practices such as the use of herbal herbs, healing rituals, and traditional massage techniques are not only

understood as a treatment method, but also as part of a value and belief system that is maintained through customary rules that live in society (Naipospos, 2025).

The existence of customary law also functions as a mechanism of social legitimacy for traditional health service actors. A traditional healer is not only recognized for his or her skills, but also for the recognition of indigenous communities who judge that the individual has the capacity and authority to carry out the practice. This recognition is often gained through certain inheritance, experience, or ritual processes that are part of the social structure of indigenous peoples. This system makes customary law an initial filter in maintaining the quality and authenticity of traditional medicine practices.

Protection of traditional knowledge is one of the main functions of customary law in traditional health service practices. Knowledge of certain herbs, healing techniques, and rituals is considered a communal wealth that cannot be possessed individually. Customary law stipulates that such knowledge is not misused or exploited by outsiders without the community's permission. This protection plays a major role in maintaining the sustainability of traditional health practices and preventing the loss of the cultural identity inherent in these practices (Nurdin et al., 2023).

Customary law also governs the relationship between traditional health care providers and communities as service users. The relationship is not solely transactional, but is based on the values of trust, moral responsibility, and social balance. Violations of customary norms, such as practices that harm patients or the use of methods that are considered deviant, may be subject to customary sanctions aimed at restoring harmony in society. The dispute resolution mechanism is usually carried out through deliberations involving traditional leaders or community leaders (Rahmita et al., 2025).

The existence of customary law also plays a role in maintaining a balance between humans, nature, and spirituality in traditional health service practices. Many traditional medicine methods not only focus on the physical aspect, but also pay attention to the human relationship with the environment and spiritual beliefs. Customary rules direct that the use of natural resources, such as medicinal plants, is carried out wisely and does not damage the balance of the ecosystem. This value shows that customary law not only regulates social aspects, but also has a strong ecological dimension.

The interaction between customary law and state law in traditional health service practices shows the existence of legal pluralism in Indonesia. Customary law remains alive and well in society, while state law provides a formal framework that governs standards and supervision. These relationships are often complementary, although in some cases tensions can arise when customary practices do not conform to national legal standards. The recognition of customary law in the constitution provides space for the continuation of this practice as long as it does not conflict with laws and regulations (Riyanto et al., 2023).

The development of the times brings its own challenges to the role of customary law in traditional health service practices. Modernization, globalization, and the development of science have influenced the way people view traditional medicine and the customary laws that govern it. Customary law is required to be able to adapt without losing its basic values in order to remain relevant in regulating traditional health practices. This role shows that customary law is not static, but continues to evolve according to the needs of the community while maintaining the cultural heritage that is its foundation.

The Position of Customary Law in the Practice of Traditional Health Services in the Community

The position of customary law in the practice of traditional health services in the community occupies a distinctive position in the Indonesian legal system because its existence is recognized as part of the living law that develops in the midst of social life. Customary law

is not in the form of written rules that are codified like laws and regulations, but in the form of norms, values, and habits that are inherited from generation to generation and obeyed by the community as a code of behavior. The existence of customary law as a living law shows that the Indonesian legal system does not only rely on written law, but also recognizes the norms that live in society as a source of law that has social binding. This recognition is strengthened by the principle of the state respecting customary law communities and their traditional values as part of the nation's identity (Tan & Sinaga, 2023).

This position is increasingly seen through the state's recognition of the existence of customary law communities that have the right to maintain a value system, including in traditional health practices. This recognition provides legitimacy that customary law remains valid as long as it does not conflict with laws and regulations and state principles. Indonesia's system of legal pluralism allows customary law to coexist with state law, so that traditional health service practices rooted in customary practices still have a living space. Customary law is not positioned as a separate system, but as part of an overall national legal system that complements each other in regulating people's lives.

In traditional health service practices, customary law has a position as a normative basis that regulates the procedures for the implementation of treatment as a whole, starting from procedures, ethics, to accompanying spiritual values. These rules often include the use of natural resources such as medicinal plants, skill-based healing techniques, and certain rituals that are believed to have therapeutic value. This position makes customary law the main guideline that not only regulates the technical aspects of medicine, but also maintains a balance between humans, nature, and the beliefs held by the community. Customary norms are a reference in determining what is considered right or deviant in traditional health practices (Partama et al., 2025).

The relationship between customary law and state law shows that customary law has a recognized position within the formal legal framework, although it is not always stated in written form. The development of national law has even begun to accommodate the concept of living law as part of legal considerations, which shows the recognition of the values that live in society as a source of law. This can be seen in various policies that provide space for customary norms to remain valid as long as they meet the principles of justice and do not conflict with national law. Such a position shows that customary law is not outside the legal system, but rather an integral part that enriches the diversity of legal sources in Indonesia.

Customary law also has a strategic position as a guardian of the sustainability of traditional knowledge that is the basis for traditional health service practices. Knowledge of herbs, healing techniques, and the philosophical values that come with them are seen as communal wealth that must be protected from misuse or unilateral claims. Customary norms govern how knowledge is inherited and used responsibly, so that its authenticity is maintained in the midst of modernization. This position reinforces the role of customary law not only as a system of social norms, but also as an instrument of cultural protection that ensures that traditional health practices remain alive and relevant in people's lives.

In the social aspect, customary law has a position as a very effective behavioral control tool in traditional health service practices because it is directly rooted in the values that are alive and believed in by the community. Customary norms not only technically govern the relationship between healers and patients, but also instill moral responsibility, ethics, and the need to maintain the trust given by society. Any action that deviates from these norms can be subject to customary social sanctions, such as reprimands, the obligation to apologize, exclusion, and forms of restoration of social relations through customary deliberation mechanisms. This sanction not only aims to punish the perpetrator, but also to restore the social balance disturbed by violations, so that harmony in society is maintained as the main function of customary law in maintaining social order (Wicaksono, 2025).

The development of the national legal system has consequences for the position of customary law which is required to adapt in order to remain relevant in the midst of changing times and scientific advances, especially in the field of health. Modernization and integration of the health service system encourage adjustments between customary norms and medical standards set by the state, so that traditional health practices are not only based on trust, but also pay attention to aspects of safety, benefits, and accountability. The position of customary law remains as part of cultural identity and an irreplaceable source of local value, but its application is conditional because it must be in harmony with national law and the principle of protection of the community. This situation shows that customary law continues to undergo an adjustment process in order to continue to coexist with the state legal system without losing its original character as a law that grows from the community.

Efforts to Harmonize State Law and Customary Law in Traditional Health Service Practices in Indonesia

The effort to harmonize state law and customary law in traditional health service practices in Indonesia departs from the fact that society lives in a system of legal pluralism that recognizes the existence of multiple sources of norms at once. Customary law, religious law, and state law develop side by side and influence each other in forming the national legal system, so that every social practice, including traditional health services, cannot be separated from the interaction of the three. This situation requires a continuous alignment process so that there are no clashes of norms that can harm society, especially since traditional health practices are firmly rooted in cultural values, beliefs, and empirical experiences that are passed down from generation to generation. This legal pluralism is even recognized as a characteristic of the Indonesian legal system that requires harmonization in order to create certainty and justice for all levels of society (Bagiastra, 2020).

One form of harmonization can be seen through the recognition of customary law within the framework of national law that provides a living space for traditional practices without ignoring the role of the state as the main regulator. The Constitution recognizes the existence of customary law communities and their rights as long as they are in accordance with the development of society and the principle of a unitary state, so that traditional health service practices can still be carried out as part of cultural identity. This recognition does not mean unlimited freedom, as the state still sets certain standards regarding security, benefits, and legal responsibilities. This relationship shows that customary law and state law do not eliminate each other, but complement each other in regulating people's lives so that they remain in harmony between local values and public interests.

The integration of norms is a real step in uniting the two legal systems, where the values that live in society are accommodated into formal regulations so that they have a wider legal force. Traditional health practices such as the use of medicinal plants, skill-based healing techniques, and holistic approaches that pay attention to physical, mental, and spiritual aspects are maintained, but directed to meet accountable standards. This process not only aims to maintain cultural sustainability, but also ensures that the services provided do not pose a risk to the community. This kind of harmonization is often carried out through the adjustment of customary norms into the national legal system so that it can run effectively and have stronger legitimacy (Kartika et al., 2017).

The formation of locally-based public policies is also part of harmonization efforts that provide space for local governments to accommodate local cultural characteristics in the regulations made. Regional policies that regulate traditional health services are often drafted through a process involving indigenous leaders and communities, so that the resulting rules are more in line with the needs and values of those living in the environment. This approach reflects that harmonization is not always one-way from the central to the regions, but can develop

through interaction between the government and the community. Practices such as the drafting of local regulations that take into account the rights of indigenous peoples show that harmonization aims to create harmony between local norms and national laws so that there is no overlap in policies and still provides clear legal protection.

Dialogue mechanisms between stakeholders have a central role in creating alignment between state law and customary law, especially in traditional health care practices that involve a variety of different interests and values. The involvement of indigenous leaders, traditional health practitioners, modern health workers, and the government in one communication space allows for a more open and equal exchange of ideas. Such a process not only aims to produce mutually acceptable policies, but also builds mutual trust between parties who previously had different approaches to health. Experience in various harmonization forums shows that multi-stakeholder engagement is capable of producing policies that are more inclusive and responsive to the needs of the community, as each group has the opportunity to convey aspirations and maintain values that are considered relevant in practice.

Strengthening the protection of traditional knowledge is an integral part of the harmonization process, especially when traditional health practices are increasingly confronted with economic and globalization interests. Customary law functions as a guardian of the values, ethics, and authenticity of knowledge that is inherited from generation to generation, while state law provides formal legitimacy through more systematic arrangements, including in the form of communal intellectual property protection. The synergy between the two creates a stronger protection system, because it not only maintains the existence of traditional knowledge from the cultural side, but also provides legal certainty for its use so that it is not misused by outsiders. The challenges that still arise are related to the lack of optimal regulations that are able to accommodate all aspects of justice, respect for local wisdom, and the sustainability of these practices in the national legal system (Utami & Alawiya, 2018).

The challenge of harmonization continues to evolve as social change and scientific advances, especially when there are fundamental differences between modern medical standards and traditional practices based on beliefs and people's empirical experiences. These differences often raise a dilemma between maintaining cultural values and ensuring the safety and accountability of health services. The harmonization process requires a balance that is not easy, because each legal system has a different basis for legitimacy, both scientifically and culturally. Efforts to achieve harmony do not stop at the drafting of rules, but require an ongoing process that involves adaptation, compromise, and strengthening coordination between institutions and communities. The experience of harmonization of regulations in various regions shows that the alignment of norms requires continuous evaluation so that there is no overlap of rules and remains relevant to the needs of the ever-evolving society.

CONCLUSION

The regulation of traditional health services in Indonesia has now shifted to Law Number 17 of 2023 which integrates practices based on local wisdom into the national health system. Customary law occupies a position as a living law that provides social legitimacy and regulates practitioner ethics through communal values and procedures that are inherited from generation to generation. The harmonization of these two systems is carried out through the recognition of the rights of indigenous peoples and the accommodation of local norms into formal regulations to ensure the safety of patients without erasing cultural identity. This synergy creates dual protection for traditional knowledge from being exploited while ensuring that ongoing practices can still be accounted for scientifically and empirically.

Local governments need to formulate more contextual public policies by involving traditional leaders and traditional practitioners in the rule-formulation dialogue process. Standards of surveillance must be improved to bridge the gap between modern medical

methodologies and traditional trust-based healing techniques. Traditional health service actors are expected to continue to adapt to the safety standards set by the state in order to protect the public as service users. Strengthening regulations related to communal intellectual property is a crucial step to maintain the sustainability of Indonesia's ethnobotanical heritage in the midst of modernization.

REFERENCES

- Bagiastra, I. N. (2020). Hak Pengelolaan Kesehatan oleh Kesatuan Masyarakat Hukum Adat. *Jurnal Majelis Ed, 2*.
- Budiyanti, R. T., & Herlambang, P. M. (2023). Perlindungan Hukum Pasien dalam Layanan Kesehatan Tradisional Empiris di Indonesia. *CREPIDO, 5*(2), 174–183. <https://doi.org/10.14710/crepido.5.2.174-183>
- Dilaga, R. K., Auliansyah, D., Prayuti, Y., Herjunaidi, Purawijaya, H. R., Jollis, & Aswan. (2025). Tinjauan Yuridis Perlindungan Hukum Pasien dalam Pelayanan Kesehatan Tradisional Empiris sebagai Pengobatan Komplementer pada Masyarakat. *Jurnal Ilmu Multidisiplin, 4*(2), 1085–1091. <https://doi.org/10.38035/jim.v4i2.1025>
- Hasliani, H., & Wulandari, A. S. R. (2023). Analisis Yuridis dalam Perlindungan Hukum bagi Pasien Layanan dan Pengobatan Kesehatan Tradisional. *Gema Keadilan, 10*(1), 22–34. <https://doi.org/10.14710/gk.2023.20071>
- Kartika, D., Sewu, P. L. S., & W., R. (2017). Pelayanan Kesehatan Tradisional dan Perlindungan Hukum bagi Pasien. *SOEPRA, 2*(1), 1. <https://doi.org/10.24167/shk.v2i1.805>
- Naipospos, G. (2025). Kajian Hukum Praktik Pengobatan Tradisional Berbasis Metafisik dalam Perspektif Regulasi UU Nomor 1 Tahun 2023 dan UU Nomor 17 Tahun 2023. *Jurnal Hukum Caraka Justitia, 5*(2), 223–237. <https://doi.org/10.30588/jhcj.v5i2.2331>
- Nurdin, A. R., Alawiya, N., & Utami, N. A. T. (2023). Implementasi Hukum Pengawasan terhadap Praktik Pelayanan Kesehatan Tradisional (Studi di Dinas Kesehatan Kabupaten Banyumas). *Soedirman Law Review, 5*(1). <https://doi.org/10.20884/1.slr.2023.5.1.1370>
- Partama, T. A., Witri, R., Yatindra, I. B. T., & Putra, M. D. (2025). Tanggung Jawab Hukum Pelaku Usaha Pelayanan Kesehatan Tradisional: Studi Systematic Literature Review dalam Perspektif UU No. 17 Tahun 2023. *SEHATMAS: Jurnal Ilmiah Kesehatan Masyarakat, 4*(3), 718–730. <https://doi.org/10.55123/sehatmas.v4i3.5589>
- Peraturan Pemerintah (PP) Nomor 28 Tahun 2024.
- Rahmita, D., Muthi'ah, M., Hardiansyah, I., Rambe, W. S., & Lubis, M. A. (2025). Analisis Komparatif Sistem Hukum Adat dan Hukum Positif dalam Harmonisasi Kebijakan Publik di Indonesia. *Presidensial: Jurnal Hukum, Administrasi Negara, Dan Kebijakan Publik, 2*(1), 107–120. <https://doi.org/10.62383/presidensial.v2i1.456>
- Riyanto, O. S., Fuad, F., & Chrisjanto, E. (2023). Pelayanan Kesehatan yang Berkeadilan: Peran Tenaga Kesehatan dalam Menjamin Hak Setiap Pasien. *Juris Humanity: Jurnal Riset dan Kajian Hukum Hak Asasi Manusia, 2*(2), 77–87. <https://doi.org/10.37631/jrkhm.v2i2.30>
- Sugiyono. (2021). *Metode Penelitian Kuantitatif, Kualitatif dan R&D*. Alfabeta.
- Tan, S., & Sinaga, W. (2023). Tinjauan Yuridis tentang Kepastian Hukum terhadap Tenaga Kesehatan Tradisional Akupunktur di Negara Indonesia. *Jurnal Hukum To-Ra : Hukum Untuk Mengatur Dan Melindungi Masyarakat, 9*(1), 1–9. <https://doi.org/10.55809/tora.v9i1.187>
- Undang-Undang Republik Indonesia Nomor 17 Tahun 2023 Tentang Kesehatan.

- Utami, N. A. T., & Alawiya, N. (2018). Perlindungan Hukum Terhadap Pelayanan Kesehatan Tradisional di Indonesia. *Volksgeist: Jurnal Ilmu Hukum dan Konstitusi*, 1(1), 11–20. <https://doi.org/10.24090/volksgeist.v1i1.1605>
- Wicaksono, E. N. (2025). *Integrasi Pengobatan Tradisional Masyarakat Adat dalam Sistem Hukum Kesehatan: Tinjauan UU No 17 tahun 2023 tentang Kesehatan*.