Vol 12, Issue 7, (2022) E-ISSN: 2222-6990

Zakat Funds for Health and Medical Sector: Role and Strategy of Majlis Agama Islam Dan Adat Melayu Perak (MAIPk)

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To Link this Article: http://dx.doi.org/10.6007/IJARBSS/v12-i7/14168 DOI:10.6007/IJARBSS/v12-i7/14168

Published Date: 18 July 2022

Abstract

Medical costs in Malaysia have increased drastically and have affected not only the government and the private health sectors but also the asnafs. As for Perak, MAIPk is responsible for administering and managing all zakat matters in its respective state. Therefore, this study is conducted based on three objectives; to explain the collection and distribution of zakat to the asnaf group who are burdened with the cost of medical treatment managed by MAIPk, to identify the form of distribution by MAIPk to asnaf who need assistance in the form of medical or health and to analyze the role and strategy of MAIPk in allocating zakat funds for the health and medical sector. This study adapted a qualitative study design, in which data were collected through library research approach and involved secondary sources as well as analyzed using content analysis and thematic methods. The results of the study found that in term of zakat collection, MAIPk has received a lot of business zakat in its institution. Meanwhile, in term of distribution of zakat, people on behalf of the

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MAIPk visited the families involved with medical aid and provided the aid to the needy asnaf families without any third-party intervention to avoid any kind of fraudulent. Besides, the form of distributions of medical or health by MAIPk to asnaf who need assistance were categorized according to financial aid, medical items or equipment and aid for the asnafs group that affected with COVID-19 pandemic.

Keywords: Zakat Funds, Medical and Health Zakat, Majlis Agama Islam Dan Adat Melayu Perak (MAIPk)

Introduction

Zakat is defined as growing (in goodness) or 'increasing', 'purifying' or 'making pure'. So, the act of giving zakat means to purify one's property to get the blessings of Allah to make it better. As a term in the study of Islamic law or "Fiqh", zakat means withdrawing a certain rate from a certain property for the benefit of those who are entitled to receive it, as determined by Allah. In other uses, it also means the property issued itself. The zakat is distributed among eight asnaf (categories) of people, namely the poor, the needy, the zakat collectors, those who have converted to Islam and are in need, those in slavery, those in debt, those in the way of Allah and the traveller.

In the medical sector, according to the Centers for Disease Control and Prevention (CDC), there are top 8 diseases that require high cost treatment which are heart disease and stroke, cancer, diabetes, obesity, arthritis, Alzheimer's Disease, epilepsy and tooth decay. The chronic diseases have significant health and economic costs in the United States (CDC, n.d.). Then, more than 877,500 Americans die of heart disease or stroke every year, that's one-third of all deaths (CDC, n.d.). These diseases take an economic toll and costing the health care system \$ 216 billion a year 2 and causing \$ 147 billion in lost productivity while working (CDC, n.d.). Other than that, each year in the United States, more than 1.7 million people are diagnosed with cancer, and nearly 600,000 die as a result, making it the second leading cause of death (CDC, n.d.). The cost of cancer care continues to rise and is expected to reach almost \$240 billion by 2030 (CDC, n.d.). Furthermore, more than 34.2 million Americans have diabetes, and another 88 million adults in the United States have a condition called prediabetes, which puts them at risk for type 2 diabetes (CDC, n.d.). Then, diabetes can cause serious complications, including heart disease, kidney failure, and blindness (CDC, n.d.). In 2017, the total estimated cost of diagnosed diabetes was \$327 billion in medical costs and lost productivity (CDC, n.d.).

The obesity affects 19% of children and 42% of adults, putting them at risk of chronic diseases such as type 2 diabetes, heart disease, and some cancers (CDC, n.d.). Then, over 25% of young people aged 17 to 24 are too heavy to join the US military and the obesity costs the US health care system \$147 billion a year (CDC, n.d.). Moreover, Arthritis affects 58.5 million adults in the United States, which is about 1 in 4 adults (CDC, n.d.). It is a leading cause of work disability in the United States, one of the most common chronic conditions, and a common cause of chronic pain (CDC, n.d.). Other than that, the total cost attributable to arthritis and related conditions was about \$303.5 billion in 2013 (CDC, n.d.). Then, of this amount, nearly \$ 140 billion is for medical costs and \$ 164 billion is for indirect costs associated with loss of income (CDC, n.d.).

Furthermore, Alzheimer's disease, a type of dementia, is an irreversible, progressive brain disease that affects about 5.7 million Americans, including 1 in 10 adults aged 65 and older (CDC, n.d.). It is the sixth leading cause of death among all adults and the fifth leading cause for those aged 65 or older (CDC, n.d.). In 2020, the estimated cost of caring for and treating people with 3 Alzheimer's disease was \$305 billion (CDC, n.d.). Then by 2050, these costs are projected to be more than \$1.1 trillion (CDC, n.d.). In the United States, about 3 million adults and 470,000 children and adolescents under the age of 18 have active epilepsy, meaning they have been diagnosed by a doctor, have had a recent seizure, or both (CDC, n.d.). Then, adults with epilepsy report worse mental health, more cognitive impairment, and barriers in social participation than adults without epilepsy. In 2016, health care spending for epilepsy was \$8.6 billion in direct costs (CDC, n.d.).

According to Ministry of Health Malaysia (2020) there are several treatments for the diseases that cost quite high which is Cardiovascular Diseases, Diabetes and Cancer. This report measures productivity losses and disease cost burdens arising from the three largest categories of Non-Communicable Diseases (NCDs) in Malaysia (MOH, 2020). The cost estimate is the cost incurred as a result of NCDs in the 2017 Malaysian population (MOH, 2020). The three categories of NCDs, namely cardiovascular disease (CVD), diabetes and cancer, are estimated to have cost the Malaysian economy RM 12.88 billion, which is a high estimate in terms of productivity losses due to absenteeism, absenteeism or premature death among the working age group (MOH, 2020). The estimate or RM 302.37 billion which is in the high estimate (MOH, 2020). These intangible costs relate to the value placed by individuals on loss of life or loss of healthy living, while financial costs arising from loss of productivity involve significant costs to the economy to individuals, industry and government (MOH, 2020).

In addition to the impact of NCDs on the health care system and economic growth through loss of production, there is a health burden borne by individuals as a result of the loss of years of healthy living (MOH, 2020). The Disability-Adjusted Life Years (DALYs) due to ill health in the 4 2017 Malaysian population totalled an estimated 7 124 793 which is 57.78% males and 42.22% females (MOH, 2020). Some 2353023 DALYs were estimated as lost to CVD, diabetes and cancer (MOH, 2020). These DALY losses from the three NCD categories incurred by the 2017 Malaysia population totalled RM 100.79 billion when valued conservatively at one time Gross Domestic Product (GDP) per capita (MOH, 2020).

Then, Cardiovascular disease (CVD) refers to all diseases and conditions of the heart and blood vessels (MOH, 2020). The DALYs due to CVD in the 2017 Malaysian population totalled an estimated 1 397 311 which is 63.2% males and 36.8% females (MOH, 2020). In addition, DALY losses from CVD totalled RM 59.85 billion (MOH, 2020). The greatest proportion of the burden of CVD occurs between the ages of 50 and 80 years (MOH, 2020). This age group accounts for 67.4% of the CVD burden (MOH, 2020). Furthermore, DALYs due to diabetes mellitus in the 2017 Malaysian population totalled an estimated 238 394 with a reasonably even split between males which is 121 586 or 51.0% and females which is 116 808 or 49.0%. The DALY losses from diabetes mellitus totalled RM 10.21 billion (MOH, 2020).

Other than that, Neoplasms or cancer accounted for 717 318 DALYs in the 2017 Malaysian population which is 54.3% males and 45.7% females (MOH, 2020). The DALY losses from cancer totalled RM 30.73 billion (MOH, 2020). The DALY burden from cancer occurs primarily in the 50–69 years age group, which accounts for nearly one half (47.9%) of the attributable burden of disease costs (MOH, 2020). The largest burden of disease losses stem from trachea, bronchus and lung cancer, which accounts for 15% of the total DALY burden from neoplasms and primarily affects males (MOH, 2020). The next largest cancer categories were breast cancer and cancer of the colon and rectum, each of which accounts for approximately 11.5% of the total DALY burden 5 (MOH, 2020). The Breast cancer, however, is responsible for one quarter of the female burden (25.2%) (MOH, 2020).

Majlis Agama Islam Perak (MAIPk) has a lot of schemes to help the asnafs people. For the medical distribution schemes, the distribution is intended to help those who are experiencing difficulties due to pain or disability. The distribution is also given for the purchase of medicines, support equipment and fares for the transportation. The most important, this scheme can assist patients who cannot afford medical costs at any government or private medical centres.

Problem Statement

The total population of people in Malaysia is 32.7 million. It is divided into citizen and noncitizen, the total population of citizen is 30 million meanwhile the total population of noncitizen is 2.7 million (DOSM, 2021). There is a lot of new diseases and current diseases facing by the people nowadays. There is a cure for the diseases but the problem that facing by them is the cost of the treatment. In addition, the most affected group is the asnafs group which is poor even do not have job and even have job, but the salary is quite low. The treatment for the disease's costs quite high, thereby the asnafs people cannot afford to pay. Furthermore, many health care costs will increase over time and when a patient enters a private hospital, the patient does not just have to bear the cost of treatment. The patients also must pay the cost of consultation with the doctor, each nurse's services, medications and all medical equipment used. There is a huge different range cost of treatment to the diseases.

The rising in medical costs have been a major concern in Malaysia and in fact for almost all countries in the world. About Malaysia, medical costs have increased drastically and have affected the government and the people especially in the private health sector. The increase in medical costs has caused the rise of applications at the zakat centre (Danila et al., 2020). Furthermore, Danila et al (2020) highlighted this situation has made it difficult for the zakat institution to screen applicants who are truly eligible to receive assistance. Without financial support from other Muslims, the poor and needy face difficulties in receiving quality health care treatment since they cannot afford to bear the costs especially if they are diagnosed with chronic diseases or seek treatment at a private health facility (Kefeli et al., 2017). Patients claim that medical bills often change because different treatments are given during different visits. Most of them could not afford the rising medical cost and this makes it difficult for the lower income patients to pay for their medical expenses (Saripudin et al., 2018).

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Literature Review

The literature review is divided into several themes and subtopics with relevant emphasis of previous studies related to zakat namely the management and distribution of zakat based on economic, the impact on economic in distribution of zakat in COVID-19 pandemic, the zakat distribution to asnaf category, the adaption of technology in management and distribution of zakat, the effectiveness of the management and distribution of zakat to alleviate poverty and the risk management in zakat.

The Management and Distribution of Zakat based on Economic

Zakat is distributed to the impoverished community for not only fulfilling their necessities but also for imparting their shares in the community and economic development (Ahmad, 2019). From an Islamic perspective, some systems genuinely promote economic justice, equality, and social welfare by implementing redistribution mechanisms (Adachi, 2018). Zakat is no longer associated only with the religious aspect; it is also related to economic targets. According to Adachi (2018), zakat is an obligation *(ibadah mahdah)* with socio-economic objectives *(al-ibadah, al maliyyah, al-ijtimaiyyah),* such as redistribute income, reduce poverty, and achieve social welfare. According to Ahmad (2019), zakat can play its due role in the promotion and development of the economic and social well-being through better education, health, food, and nutrition facilities to the poor and needy individuals in the society. There are various studies explored the idea of zakat collection and distribution in different economies of the world (Ridwana et al., 2019). As Ridwana et al (2019) stated the fact that the zakat management system must be integrated with the courtesy, plan of integrity, loyalty and as social institutions for the better growth and economic output.

The differences in the structure of the zakat institution in the states of Malaysia will certainly bring about difference's zakat distribution in general and the productive distribution of zakat (Bahari & Doktoralina, 2019). These differences will inevitably lead to various types of economic approaches in zakat institutions as well as management and Standard Operating Procedures (SOPs). According to the Muslims' beliefs, the idea that muslims are obliged to give a specific amount of their wealth under the rules and conditions of zakat reflects Islam's concern with economic and social justice (Doktoralina et al., 2018). From an Islamic economic point of view, the zakat system differs from the taxation system in both the Capitalist and socialist systems in the sense that zakat serves a moral purpose and maintains a balance between the needs of the individual and society at the same status.

The Impact on Economic in Distribution of Zakat in COVID-19 Pandemic

In early 2020, a contagious virus from Wuhan City Province of Hubei, China called corona virus emerged (Hambari et al., 2020). The World Health Organization (WHO) declared COVID-19 pandemic status on March 11, 2020, as a global pandemic as the virus has spread to several countries in the world (WHO, 2020). Several reliable research institutions in the world predict the impact of COVID-19 on the global economy. According to Hambari et al (2020), malaysia is one of countries that was early affected by COVID-19. Then, Haris (2021) stated that zakat is a solution for economic recovery during a pandemic and the best alternative for the welfare of society in the era of COVID 19 and its implementation is based on zakat, infaq and shadaqah. The COVID-19 pandemic has a negative impact on the economy of Malaysians, especially in the Federal Territory as most of them live in urban areas and most of them earn from trade (Hasbulah et al., 2022a). Moreover, one of the economic sectors affected by the

COVID-19 epidemic is the management of zakat by zakat institutions which is the reason that muzakki income has decreased which affects the collection of zakat (Hasbulah et al., 2022b). According to Haris (2021) the COVID-19 pandemic has caused an increase in the number of zakat recipients.

The Zakat Distribution to Asnaf Category

In Malaysia, each state has their own department to manage zakat matters and all management aspects such as collection and distribution of zakat is managed by the Islamic Religious Council (Majlis Agama Islam) in each respective state (Muhamad et al., 2018). In addition, there are shortcomings that need to be rectified in terms of collection and distribution. According to Muhamad et al (2018), this can be seen on the prevailing scenario in the society particularly in the public and private sectors of the higher education. There are still many eligible candidates to further their studies at institutions of higher learning, but they lack financial support. Furthermore, zakat institutions should prioritize education to increase the amount of human capital as well as achieve and maintain economic development. Therefore, some zakat institutions consider students in university as one of the eight asnaf, part of *fi sabilillah* asnaf (Muhamad et al., 2018). Moreover, the distribution of zakat in higher learning institution is given from certificate up to Doctorate level (Takril & Othman, 2020). In addition, fund coverage includes tuition fees, accommodation and cost of living. According to Takril & Othman (2020) the students whom are under the categories of fisabilillah claimed that there were difficulties in the application of zakat fund due to the incomplete records or eligibility.

The roles of zakat in solving the problems of people from all aspects need to be scrutinized through the proper and effective distribution of zakat (Rosli et al., 2018). There are eight categories of asnaf in zakat which are stated by Allah SWT in the Qur'an should be observed as there are certainly wisdoms behind his command. According to Rosli et al (2018), one of the eight asnafs is asnaf *ar-riqab* which often becomes a dispute among the zakat bodies in distributing the zakat provisions to this asnaf group. The Quran 9: 60 mentions zakat beneficiaries are classified into categories (asnaf) namely, the poor (*fuqara*), the needy (*masakin*), zakat collectors (*amilin*), those newly converted to Islam (*muallaf*), ransoming of slaves (*riqab*), the debtors (*al-gharimin*), in the cause of Allah (*fi sabilillah*) and the wayfarers (*ibnu sabil*) (Ayuniyyah et al., 2020).

The Adaption of Technology in Management and Distribution of Zakat

The trend of digitalization and technological innovation has changed many fields including Islamic banking as well. Nowadays, the term 'Fintech' or also known as financial technology is a buzz word in the banking and financial industry, is on the rise (Yahaya & Ahmad, 2019). Moreover, technological innovation is not only happening in the mainstream financial sector but also in the public and non -financial sectors such as zakat Institutions to ensure successful financial inflows. Yahaya & Ahmad (2019) clarified that zakat payment and distribution method has evolved from desk or service counter to internet banking.

The technological changes in the method have also significantly improved the collection rate (Yahaya & Ahmad, 2019). Technology has assisted the zakat institution in keeping record of zakat collection, reaching asnaf for zakat distribution and managing zakat fund for investment purposes (Salleh & Chowdhury, 2020). According to Internet World Stats, there are

26,353,017 total internet users with 81.4% penetration are recorded in June/2019 in Malaysia (IWS, 2020). This number shows the adoption of information communication technology by individuals in Malaysia (Salleh & Chowdury, 2020). Therefore, the internet can be used by mobile phones as well as computers or other support devices. Internet or mobile banking, online shopping, and online commerce are increasing significantly around the world.

Furthermore, the collection methods have been transforming rapidly from over the years and from the traditional method of counter service to the use of internet banking and so on (Yahaya & Ahmad, 2019). However, technological innovations for zakat distribution are not at the same level as the collection process. Therefore, in this study mobile banking (m-banking) is suggested as the new distribution channel of zakat to the asnaf (Yahaya & Ahmad, 2019). Then, Yahaya & Ahmad (2019) clarified that mobile banking features which are mobility, user friendly, cost-saving, anytime, and anywhere could be one of the solutions to tackle the issue of inefficiency. In order to simplify the distribution of zakat, fintech provider would qualify to be termed uses technology to provide, to improve, the delivery of zakat funds, and receiving the financial transfer is significantly reduced for users of financial services (Azizah & Choirin, 2018).

As Rokmah, Utomo, Muqorobin & Muslihah (2020) stated that mapping the distribution of zakat is one of the solutions in the management of zakat distribution patterns. In addition, the rapid development of technology today can be used to help create mapping. This method is a fast and inexpensive way to gather information about the views and input of the target population and other stakeholders regarding geographical and socio-economic conditions, while the results of the distribution analysis will be mapped, where the mapping will be made using GIS (geographical information system) using mapping software that will produce a mapping of the distribution of Zakat, Infaq, and Shodaqoh, from the mapping description it can be seen which areas have not received the Zakat distribution , Infaq, and Shodaqoh and which regions have received Zakat, Infaq, and Shodaqoh funds from amil Zakat institutions (Rokmah et al., 2020).

Moreover, it is necessary to create an information system that can manage muzakki dan mustahiq data (Rahmayta & Wicaksono, 2018). A system is a group of components or procedures that are interconnected and interact so that they can achieve a goal. Information is a form of data that is processed and has meaning for the recipient. Information system is a set of components that are interconnected and work together to be able to produce information (Rahmayta & Wicaksono, 2018). In addition, local zakat amil (RW level) makes muzakki and mustahiq data collection easier. As Rahmayta & Wicaksono (2018) stated that, this information system model will manage data of *muzakki* and *mustahiq* and provide some reports such as receipt and distribution of zakat funds.

The Effectiveness of the Management and Distribution of Zakat to Alleviate Poverty

Zakat is fundamentally set out to achieve the objective of poverty reduction and fair wealth redistribution (Farouk et al., 2017). A zakat institution is the institution responsible for managing the collection and distribution of zakat funds (Al-Ayubi et al., 2018). Zakat as an institution is the third pillar of Islam sanctioned with the primary objective of fair and equitable redistribution of wealth to take care of the basic needs of all members of a given society and reduce the gap between the rich and the poor (Farouk et al., 2017).

A good corporate governance principle is a reference point for all regulators (government) in developing a good corporate governance principles framework in a corporate or organization (Firmansyah & Devi, 2017). The scope of the corporate or organization involves zakat institutions as charitable organizations that collect and distribute charitable funds. In addition, Firmansyah & Devi (2017) stated that the implementation of good corporate governance in zakat institutions are expected to enhance the quality management of zakat in internal management. The state is responsible for collecting and distributing zakat in a well-organized system as prescribed by Islam and thus zakat also involves the Muslim society (Al-Ayubi et al., 2018).

A good zakat management system focuses on the effective and efficient generation and utilization of zakat funds to achieve the desired set objective(s) of the Zakat system (Farouk et al., 2017). The productive zakat distribution has become one of the agendas in zakat institution by both government and non-government in order to eradicate the poor and needy beneficiaries of zakat (asnaf) from being a zakat recipient (Bahari & Doktoralina, 2019). Zakat can be implemented as a tool to overcome poverty in the form of income distribution from Muzakki to Mustahiq (Sastraningsih et al., 2020). In Malaysia, the government has implemented various programs in order to alleviate poverty (Mohamed et al., 2018). In addition to small-scale entrepreneurship programs set up by the government for the poor, zakat institutions also play their role in helping the poor by introducing entrepreneurship programs as an alternative to reducing poverty (Mohamed et al., 2018).

Mohamed et al (2018) pointed out the difference between entrepreneurship programs by zakat institutions and other entrepreneurship programs is that the source for capital given to the poor to start up with business is using zakat money. In addition, paying zakat is a major religious obligation which is one of the five pillars of Islam and is expected to be paid by all practicing Muslims who have excess wealth and income. It is a unique instrument for poverty alleviation as wealth is transferred from those with surplus earnings to eight zakat recipients known as asnaf (Mohamed et al., 2018). The distribution of zakat funds could help the government to generate economic multiplier effect through an increase in individual's purchasing power and finally help to alleviate poverty (Takril & Othman, 2020).

There are different views held by Islamic scholars as to the appropriate proportion of zakat to be distributed to recipients, especially the poor and the needy (Ahmed et al., 2017). The Hanbali and Shafi schools have opinions that the share that should be given to the poor and the needy must be enough to help them meet their needs. Meanwhile, Imam Abu Hanifah thought that zakat can be given in proportions and that there should not be a limit to the proportion (Ahmed et al., 2017). Imam Malik suggested that the share of zakat should depend on the ijtihad of the scholars. According to Imam Nawawi, the zakat proportions for the poor must consider the recipient's occupation and current living circumstances (Ahmed et al., 2017). Imam Nawawi suggested that the poor and needy asnaf must be helped based on their skills and with enough zakat so that they can be lifted out of poverty. However, Ahmed et al (2017) stated that all schools of thought agreed that zakat can be distributed by means of direct financial support to the poor and the needy who do not have the capacity or good health to sustain themselves. This form of support falls under the health-deprived recipients (Ahmed et al., 2017). As Sastraningsih et al (2020) mention that the health program is the

main sector in the distribution of Zakat because health is the basic resource for worshiping Allah, interacting with fellow human beings and realizing Islamic goals (maqashid syariah).

Zakat management is not an easy obligation and can be done individually, given the importance of Zakat in income distribution and tackling poverty, the Prophet Muhammad has given examples of procedures for managing zakat. For the mission to realize the objectives of zakat, namely the distribution of welfare and poverty alleviation, the management and distribution of Zakat must be fulfilled through institutions and well-structured system (Sastraningsih et al., 2020). The efficiency and effectiveness of zakat funds collection and distribution is crucial as it is the substance in Islamic economic which can be the mechanism in improving the lives of the poor and the needy (Takril & Othman, 2020).

Medical zakat is zakat given to patients who cannot afford the cost of treatment expenses (Danila et al., 2020). The main objective of the zakat centre is to help alleviate the burden of the poor and needy who cannot afford to cover medical costs either at the government hospitals or private medical centres (Danila et al., 2020). Furthermore, medical zakat can be applied directly at zakat centres and hospitals and zakat medicine are limited to asnaf al-gharimin only. Al-gharimin is also referred to as persons in debt to solve society problems and needs and on the condition that the debtor is unable to settle his debt (Danila et al., 2020). Malaysia's health care system is also affected by these developments whereby Malaysians must pay higher medical costs especially in the private health sector (Kefeli et al., 2017). Kefeli et al (2017) pointed out that muslims identified as asṇāf are entitled to receive medical coverage from zakat allocation and zakat is the most important economic source for Muslims other than waqf and māl. The Islamic state needs to manage its zakat resources efficiently to build a strong economy and for social development.

The Risk Management in Zakat

The future of zakat institutions will be largely determined by the ability of zakat management to deal with various rapid changes that occur at this time (Kholiq and Hartono, 2021). As Kholiq and Hartono (2021) highlighted is the inevitability of globalization, the rapid information, and technology as well as commercial financial innovations and social finance become increasingly complex, dynamic, and competitive. The risk management is targeted at identifying, measuring, monitoring, and controlling the process of zakat management with a reasonable risk in a directed, integrated and sustainable manner (Kholiq and Hartono, 2021). Therefore, risk management has a serve as a filter or early warning system for zakat management activities.

The development of an increasingly inevitable era, as well as the rapid advancement of technology and information as well as the increasingly complex financial sector will demand that zakat managers can manage their institutions. The potential risks that will be faced by zakat institutions must also be managed with a structured management system (Hayati et al., 2019). As Hayati et al (2019) pointed out that there are two important things related to the risk of distribution of zakat funds, namely those found on the side of zakat managers themselves or institutions and also on the negative impact of zakat distribution to beneficiaries (*mustahik*).

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Research Methodology

Research methodology was in qualitative form encompassing primary data supported by several other sources (Wahid et al., 2021). The analysis of the data in the qualitative research was a process of seeking and systematically arranging the data obtained from interview results, field notes, and documentations by way of organizing the data into categories, breaking them down into units, making syntheses, constructing them into patterns, selecting the data that were important and to be studied, and drawing conclusions (Fahlefi et al., 2019). In addition, several other materials were also used in this study. All sources were used to obtain detailed information relevant to the study and then reinforce further the results of the study.

The researcher uses library research method to collect data. Library research is a technique of collecting data by learning and understanding data which has close relation with the problems from books, theories, notes, and documents and also an important component of research projects in most academic settings. In collecting data by using library research method, a step by step process in acquiring and analyzing the existing data from the institutions (Kurnia, et. al., 2020). For instance, in this research, the researcher collect data from MAIPk official website to be used in analyzing the objectives of the research. Moreover, researchers should constantly keep track of various sources of information while documenting when and where material was discovered since research projects work from general concept ideas to more specific academic conclusions.

The methods that had been using in this research are content analysis and thematic analysis. By analyzing the data, the researcher can achieve the objectives of this research. Content analysis is a research tool used to determine the presence of a word, theme or concept in some specific qualitative data (i.e. text). By using content analysis, researchers can measure and analyze the presence, meaning and relationship of such particular words, themes or concepts. Researchers can then draw conclusions about the message in the text, the author, the audience, and even the culture and time around the text. Other than that, sources of data could be from interviews, open-ended questions, field research notes, conversations, or literally any occurrence of communicative language (such as books, essays, discussions, newspaper headlines, speeches, media, historical documents). A study can analyze various forms of text in its analysis. To analyze text using content analysis, the text must be encoded, or broken down, into manageable code categories for analysis (i.e. "code"). Once the text is encoded into code categories, the code can then be further categorized into "code categories" to further summarize the data. The Thematic Analysis means examining the patterns of themes in data and it is a method of qualitative data analysis. It defines as, this method can be used to analyze non-numerical data such as audio, video, text, etc. For instance, an interview transcript. Researchers need to examine the entire transcript and find meaningful patterns in themes across the data. Patterns can be analyzed by repeated data reading, data coding, and theme creation.

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Discussion and Findings

Background Of Majlis Agama Islam Dan Adat Melayu Perak (MAIPk)

The State of Perak is one of the "Federated Malay States" established by the Treaty of Federation on 1 July 1896. At that time, Majlis Raja-Raja Melayu bagi Negeri-Negeri Melayu Bersekutu (Perak, Pahang, Selangor and Negeri Sembilan) were established to discuss common affairs and interests between the Malay Rulers and the British Government. The State of Perak hosted the first meeting of the Majlis Raja-Raja Melayu bagi Negeri-Negeri Melayu Bersekutu or better known as the Durbar Meeting, which was held on 13 to 17 July 1897 at Istana Bukit Chandan, Kuala Kangsar, Perak. As had been agreed with the British, from the Treaty of Pangkor on 20 January 1874, to the establishment of the Negeri-Negeri Melayu Bersekutu, a resolution was mutually agreed, that, all matters relating to Islamic Affairs and Malay Custom shall be under the jurisdiction of the Malay Ruler. Thus, the Head of Islam and Malay Customs who had full power in Perak at that time, was Duli Yang Maha Sultan. This practice is maintained to this day. Historically, the oldest law on Islamic religious affairs that has been enforced in the State of Perak is the Ninety-Nine Laws of Perak which has been practiced until 1900. However, it cannot be ascertained exactly the effective date of the law. It is believed that the law has been implemented since the reign of Al-Marhum Sultan Idris Murshidul A'azam Shah ibni Al-Marhum Raja Bendahara Alang Iskandar (1887 to 1916).

Later, in 1900, a law called the Undang-Undang Pentadbiran Perkahwinan Orang-Orang Islam Bab 197 Negeri-Negeri Melayu Bersekutu was introduced and enforced. Following that, a building was erected in the area of the Kuala Kangsar Regional Kadi Office to be used as an Islamic administrative headquarters named as Balai Syara '. A Chief Kadi has been appointed to lead the Regional Kadis and is stationed here. At that time, the kadi provinces that were enforced were Kuala Kangsar, Taiping, Simpang Lima, Selama, Lenggong, Ipoh, Batu Gajah, Parit, Sitiawan, Teluk Intan, Tapah and Tanjong Malim. The first Kadi Besar to be appointed was Tuan Habib Abdullah. In 1917, the Perak Quran Committee was established to control and monitor the conduct of Islamic teaching in the State of Perak. The first chairman appointed was Sultan Iskandar Shah Ibni Al-Marhum Sultan Idris Ramatullah Shah (1918-1938), who was the Raja Bendahara Perak at the time. The Perak Quran Committee also acted as the Perak Syariah Committee, which was responsible for all matters related to the administration of Islam in general at that time, including issuing permission for the publication of religious books, teaching accreditation and so on.

By the middle of 1947, when the homeland was in great turmoil with the struggle against the Malayan Union (1946), several movements, organizations and associations had emerged fighting the spirit of national nationalism against British colonialism. Among the associations that were so vocal in Perak at that time was the Perak Malay Association. On the initiative of this association, a meeting of religious scholars was held on 10 August 1947 at the Madrasah Iskandariah Kuala Kangsar. At the meeting, Dato Seri Ali Zaini bin Haji Muhamad Zain, former Speaker of the Perak State Assembly, came up with a thoughtful idea to officially establish a religious center to administer Islamic religious affairs in Perak. In January 21, 1948, was a very significant historic moment for the State of Perak when His Majesty Musa (1938-1948) signed an agreement with Sir Gerard Edward James Gent (British High Commissioner/Governor-General of the Malayan Union) representing the British Government. The agreement, called the Perak State Agreement 1948, led to the formation of the Perak State Government Constitution. The first part of the Perak State Government Constitution was enforced on 1

February 1948 under the rule of the sultan. With the enactment of the State Government Constitution, the desire to establish an Islamic religious administrative center in Perak can finally be realized. The power to establish the Majlis Agama Islam dan Adat Melayu Perak is clearly stated under Clause VI. (1) The First Part of the Perak State Government Constitution, namely:

"Kepala Ugama negeri ini ialah Yang Maha Mulia, dan Yang Maha Mulia akan memerintah supaya diadakan Undang-undang untuk mengaturkan perkara-perkara ugama dan menubuhkan sebuah Majlis Ugama Islam dan 'adat Melayu bagi menolong dan menasihatkan Yang Maha Mulia berkenaan dengan perkara-perkara yang bersabit dengan Ugama Negeri ini dan 'adat Melayu."

After the death of Sultan Abdul Aziz Al-Mu'tasim Billah Shah on March 29, 1948, the throne of Perak was inherited by His Majesty Shah (1948-1963). The State Government at that time was led by the Most Honorable Menteri Besar of Perak, Orang Kaya-Kaya Panglima Bukit Gantang Seri Amar Diraja, (Abdul Aziz, 1948-1957).

During the reign of Sultan Yussuf Izzudin Shah, then, the State Government officially established Majlis Agama Islam dan Adat Melayu Perak (MAIPk) on 1 Muharam 1369 Hijrah equivalent to 23 October 1949. The specific laws regarding the administration of Islam and Malay customs in the state have officially approved on May 1, 1952.

Furthermore, with the establishment of the Majlis Agama Islam dan Adat Melayu Perak (MAIPk), the administration of Balai Syara' and the Perak Quran Committee located in Kuala Kangsar, was consolidated under the Perak Islamic Religious and Malay Customs Council and moved to Ipoh. Meanwhile, the administration of the existing Balai Syara 'has been absorbed under the administration of the Kuala Kangsar Kadi Office. The first official office of the MAIPk has been housed in the Office of the State Secretary.

In addition to further streamline the administration of Islam and Malay customs in Perak, the relevant laws have been revised, amended and enacted several times. In 1965, a law named the Islamic Religious Administration Law 1965 (Enactment No. 11 of 1965) was enacted to replace the 1952 law. Then, on 13 January 1993, the Islamic Religious Administration Law 1965 has been replaced by the Administration of the Religion of Islam Enactment 1992 (Enactment No. 2 of 1992). Then, under Enactment No. 2 of 1992, the Islamic Religious Council and Malay Customs was officially incorporated as a government statutory body. For the purpose of uniformity with other states throughout Malaysia, the Religious Administration (Perak) Enactment 2004 (Enactment No. 4 of 2004). The Enactment No. 4 of 2004 came into force on 15 September 2004 and remains in force to this day. The entity of the Majlis Agama Islam dan Adat Melayu Perak (MAIPk) is also still maintained as a government statutory body.

MAIPk Zakat Assistance Schemes

MAIPk provides a lot of zakat assistance schemes to asnafs group such as *Skim Bantuan Kecemasan/Segera, Skim Bantuan Perubatan, Skim Bantuan Haemodialisis, Skim Bantuan Bina Rumah, Skim Bantuan Baik Pulih Rumah, Skim Bantuan Kewangan Bulanan, Skim Bantuan Penyelesaian Hutang, Skim Bantuan Bencana, Skim Bantuan Tambang Perjalanan*

Domestik, Skim Bantuan Hari Raya, Skim Bantuan Am Pelajaran, Skim Bantuan Dermasiswa Dalam/Luar Negara, Skim Bantuan Tambang Perjalanan Pergi Sehala/ Balik Sehala, Skim Bantuan Dermasiswa Pelajar Tajaan/ Bantuan Am (Mesir dan Jordan), Skim Bantuan Persekolahan, Skim Biasiswa Pelajaran Baitumal, Skim Bantuan Modal, Skim Latihan dan Kursus Program Pembangunan Usahawan Asnaf, and Skim Latihan Kemahiran Asnaf.

The Collection And Distribution Of Zakat To The Asnaf Group Who Are Burdened With The Cost Of Medical Treatment Managed By MAIPk.

In terms of zakat collection, zakat institution can encourage muzakki to issue zakat at the beginning, so that they can immediately get zakat benefits during the COVID-19 pandemic. For distribution, zakat institution can also distribute zakat to *mustahik* who are in dire need during a pandemic such as the poor (Haris, 2021). The Sultan of Perak, Sultan Nazrin Muizzuddin Shah ibni Almarhum Sultan Azlan Muhibbuddin Shah Al-Maghfur-Lah, received business zakat payments amounting to RM3,006,108.54 from six corporate companies to the Majlis Agama Islam dan Adat Melayu Perak at Istana Kinta, Ipoh Perak (MAIPk, 2021). Furthermore, Sultan of Perak also agreed to accept business zakat payments amounting to RM6,424,999.77 from five corporate companies to the MAIPk at Istana Perak Bukit Changkat Persekutuan (MAIPk, 2021). Other than that, Sultan of Perak indeed agreed to accept another business zakat payments amounting to RM7,809,259.80 from six corporate companies to MAIPk at Istana Perak Bukit Changkat Persekutuan (MAIPk, 2021). The McDonald's Malaysia distributed business zakat payments amounting to RM2 million to all 14 states in Malaysia (MAIPk, 2021). His Majesty Paduka Seri Sultan of Perak Darul Ridzuan, Sultan Nazrin Muizzuddin Shah received business zakat from 8 corporate agencies worth RM14,435,071.94 (MAIPk, 2021). The Felcra Malaysia Berhad Participants Cooperative paid Business Zakat amounting to RM47,803.09 for the year ended 2019 (MAIPk, 2021). Permodalan Nasional Berhad Group (PNB) give business zakat with the total RM2,141, 250.00 million (MAIPk, 2020). The submission of business zakat from Percetakan Nasional Malaysia Berhad Company (PNMB) amounting to RM10,610.00 (MAIPk, 2020).

In addition, Sultan of Perak, Sultan Nazrin Muizzudin Shah agreed to accept the handover of business zakat from 20 agencies amounting to RM25,846,760.80 on behalf of MAIPk (MAIPk, 2020). His Majesty Paduka Seri Sultan of Perak Darul Ridzuan, Sultan Nazrin Muizzuddin Shah received business zakat from five agencies worth RM667,889.50 at Istana Perak, Changkat Persekutuan (MAIPk, 2020). Then, His Majesty Paduka Seri Sultan of Perak Darul Ridzuan, Sultan Nazrin Muizzuddin Shah agreed to accept the handover of business zakat from six agencies worth RM2,762,151.26 at Istana Perak, Changkat Persekutuan (MAIPk, 2020). Next, His Majesty Paduka Seri Sultan of Perak Darul Ridzuan, Sultan Nazrin Muizzuddin Shah agreed to accept the handover of business zakat from six agencies worth RM2,762,151.26 at Istana Perak, Changkat Persekutuan (MAIPk, 2020). Next, His Majesty Paduka Seri Sultan of Perak Darul Ridzuan, Sultan Nazrin Muizzuddin Shah also agreed to accept the handover of business zakat from five agencies worth RM6,385,278.66 at Istana Perak, Changkat Persekutuan (MAIPk, 2020)

The Form Of Distribution By MAIPk To Asnaf Who Need Assistance In The Form Of Medical Or Health.

i. Aid in Terms of Financial

There are many asnafs who face medical problems, but they are not treated because of financial problems. Some of them, refuse to take the treatment because of the medical cost and other expenses in hospital. The MAIPk has contributed Special Assistance Fund during

PKP 3.0 in Perak Darul Ridzuan for health and medical equipment amounting to RM606,000.00 (MAIPk, 2021).

ii. Aid in terms of Medical Items and Equipment

The aid for medical items includes amounting to RM6,000.00 to En. Othman who suffers from intestinal disease and has just undergone surgery at Slim River Hospital (MAIPk, 2021). Then, assistance in the form of medical items amounting to RM3,000.00 to 13 -year -old Intan who suffered from intestinal and kidney disease which caused her to be unable to defecate properly (MAIPk, 2021). MAIPk Bagan Serai handed over three sets of Hospital Manual Bed 2 Function to three recipients of Medical Aid, namely Mr. Roslan bin Omar, Mr. Mohd Shukor bin Sharom and Bidin bin Abas (MAIPk, 2020).

iii. Aid to Affected Asnaf from COVID-19

During this pandemic period, the Amil Zakat Body and the Amil Zakat Institution must be able to overcome the economic problems of the community, especially the lower classes. Zakat is devoted to eight groups, but in the Covid-19 pandemic situation, it has an impact on many things (Haris, 2021). As Haris (2021) highlighted is one of the economic sectors affected by the COVID-19 pandemic is the management of zakat by zakat institutions. In addition, the COVID-19 pandemic has led to an increase in the number of zakat recipients.

The Selama District MAIPk led by the District Baitulmal Officer has visited the family of Encik Mohd Azrul Azhar in Sungai Bayor who has stopped working due to constraints due to the COVID-19 pandemic and MAIPk provided emergency assistance of RM200.00 (MAIPk, 2021). The Special Assistance Fund during PKP 3.0 in Perak Darul Ridzuan, contributions for COVID-19 Frontline Officers amounting to RM400,000.00 and COVID-19 MAIPk Vaccination Program amounting to RM200,000.00 (MAIPk, 2021). MAIPk Lenggong District has visited five houses of the asnaf group around Lenggong where the villagers were affected by the COVID-19 pandemic. Thereby, contributions in the form of cash along with follow-up aid required to be considered such as Rental Aid, Medical Aid, Home Building Aid and Home Repair Aid (MAIPk, 2020).

The Role And Strategy Of MAIPk In Allocating Zakat Funds For The Health Or Medical Sector

Firstly, the Medical Assistance amounting to RM5,000.00 under the MAIPk Medical Assistance Scheme in Kg. Kurnia Slim River to Mr. Azman who has a stroke (MAIPk, 2021). Other than that, a person that loss meat in his calf after the accident, the Zakat Perak-MAIPk Muallim district went to visit him. After being assessed, he is eligible for assistance under the Medical Assistance Scheme, MAIPk provides medical aid of RM10,840.40 to him (MAIPk, 2021). The zakat assistance handover program is a cooperation between MAIPk Daerah Seri Iskandar and Pharmaniaga Berhad Seri Iskandar Branch for Business Zakat Return, and 4 houses visited and courtesy covering recipients of emergency aid as well as medical aid (MAIPk, 2021). Welfare Contribution of the Majlis Agama islam Dan 'Adat Melayu Perak to the National Cancer Council (MAKNA) which is Medical Assistance of 700,000.00 (MAIPk, 2020).

According to Danila, Saat, Khairuddin, Rosli & Saad (2020), zakat is a command from Allah SWT that a Muslim must fulfil after meeting sufficient conditions. Other than that, zakat obligation is mentioned several times in the Qur'an and the hadith clearly shows that zakat worship is in line with other obligations that must be upheld by Muslims. The firman of Allah

in Surah Al-Baqarah, verse 110 means: *'...And establish prayer and pay zakat. And whatever good you do for yourselves, surely you will be rewarded by Allah. Surely Allah sees all things you do'.* There are various types of zakat assistance given to asnafs or applicants including monthly financial assistance, small business capital, livestock capital, management of heirs without heirs, medical cost assistance and many others (Danila et. Al., 2020). However, this research focuses more into the zakat assistance from the medical aspect. In addition, the medical zakat is zakat given to patients who cannot afford the cost of treatment expenses. The main objective of the zakat centre is to help alleviate the burden of the poor and needy who cannot afford to cover medical costs either at the government hospitals or private medical centres (Danila et. al., 2020).

MAIPk also provides a lot of zakat assistance schemes to asnafs. Among all zakat assistance schemes, MAIPk provides 3 zakat assistance schemes to help the asnaf in the medical or health sector which is *Skim Bantuan Kecemasan/Segera, Skim Bantuan Perubatan,* and *Skim Bantuan Haemodialisis*. In term of zakat collection, the MAIPk has received a lot of business zakat in their institutions. Thereby, MAIPk can help the asnafs in need to lighten their burden. Meanwhile, in term of distribution of zakat, people behalf of MAIPk visit the families involved with medical aid. They provide the aid to the needy asnaf families without any third-party intervention to avoid any kind of fraudulent. MAIPk has distributed the zakat fairly to the asnafs group who are burdened with the medical issues.

Other than that, the form of distribution of medical or health by MAIPk to asnaf who need assistance in the form of medical or health are categorized to financial aid, medical items or equipment and aid for the asnafs group that affected with COVID-19 pandemic. MAIPk has studied the background of asnaf to distribute medical assistance according to their needs. Thereby, MAIPk can help a lot of asnafs by providing them the aid that they needed. Then, the role and strategy of MAIPk in allocating zakat funds for the health or medical sector is the haemodialysis zakat centres that are provided to the asnaf groups.

However, MAIPk prioritizes the distribution of zakat to the education sector and other sectors more. As for this, MAIPk should improvise their official website because there is limited information about the schemes provided by them. The MAIPk also should increase the distribution of medical zakat to the asnaf group whom are burdening with the cost of the treatment, the transportation, the cost of medical items to consume and other medical expenses. The health sector is very important to guarantee and provide long-term benefits to society.

Conclusion

Zakat is an Islamic finance term referring to the obligation that an individual must donate a certain proportion of wealth each year to charitable causes. Then, zakat is one of the instruments in Islamic finance and an obligatory process for Muslims considered a form of worship. By giving money to the poor is said to clean up annual income that exceeds what is needed to provide essential needs for a person or family. Zakat has a positive impact in the development of a country including in health and medical sector. This research is about the collection and distribution of zakat funds to medical or health problems in Perak with special reference to MAIPk. The researcher has successfully analyzed the data and achieved the objectives of this research. For future research, the researcher would like to suggest other

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method of data collection to be applied such as field study involving interviews, so that the data are more holistic.

Acknowledgement

The authors would like to acknowledge the grant provided by Kolej Universiti Islam Perlis (KUIPs) for this study. Grant reference No: KUIPs/RMIC/200.1/STG/2020(21). Code of study STG-021.

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