

Legalizing Cannabis as Medicine in Indonesia: Challenges and Regulations

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Abstract

Although marijuana is banned from use in healthcare in Indonesia, medical developments show its potential benefits. This research will examine Islamic views on the legalization of medical cannabis in the context of Indonesian positive law. This research will examine the regulation, legality, and implications of the use of medical cannabis in Indonesia, focusing on legal, religious, and health aspects. Given the gap between medical needs and existing regulations, this research aims to fill the knowledge gap regarding the regulation of medical cannabis in Indonesia. This research shows that regulations related to medical cannabis are contained in Law No. 35 of 2009. From a positive legal perspective, cannabis is recognized as having health benefits that are proven to help various diseases, as recorded in history. However, in the view of Islamic law, marijuana is considered haram, including for use as medicine, except in emergency conditions or for the sake of benefit. Some scholars allow the use of haram objects for treatment if there is no halal alternative available; however, if there is a halal option, it should be used. Therefore, further research on medical marijuana is needed to ascertain its benefits and conditions of use.

Keywords: Cannabis Legalization; Health Benefits; Legal Hurdles

Introduction

As a country that upholds the principles of law and democracy, Indonesia has a legal system that regulates various aspects of people's lives. However, Indonesia's regulations are highly diverse, reflecting its unique history, culture and political dynamics. With its rich cultural heritage and diverse values, Indonesia must carefully consider every consequence and legal implication of decisions regarding legalization (Parhusip et al., 2024). Health law has its own unique set of challenges, including the legalization of cannabis. Despite high global attention to the potential benefits of medical cannabis, Indonesia is still heavily regulated in preventing its use. On the one hand, we need access to treatment for patients, but on the other hand there are some questions about what causes it and what harm the right intervention might cause. Therefore, there should be scientific studies that scrutinize the whole issue to find a solution, whether everyone can stay safe and have treatment if necessary. The negative stigma attached to cannabis has limited the utilization of this plant for medical purposes. In Indonesia, cannabis is categorized as a class I narcotic, so its use is strictly prohibited. This policy not only limits people's access to alternative medicine, but also creates wide-ranging social impacts, including criminalization of cannabis users and stigma against certain groups. There is a need for a thorough evaluation of existing drug policies to ensure that these regulations do not conflict with the right to health and well-being (Carolin et al., 2020).

The Constitutional Court had previously rejected an application for the legalization of medical cannabis filed by the parents of a cerebral palsy patient. The Court argued that Indonesia has not ratified international treaties that require the legalization of medical cannabis. In addition, class I narcotics such as marijuana are only allowed for research, not for therapy. The Court also referred to a previous decision which stated that there was not enough scientific evidence to support the use of marijuana in medicine. Nevertheless, the Court encouraged the government to conduct a comprehensive study regarding the use of medical marijuana to answer the aspirations of the community. The Head of BNN also supports Case Number 13/PUU-XXII/2024 regarding the judicial review of Law Number 35 of 2009 concerning Narcotics on the grounds that excessive use

of marijuana can damage nerves and has not been proven to provide significant medical benefits (Rianida et al., 2025). In addition, BNN also highlights the potential dependence caused by marijuana. The dilemma between the potential medical benefits of marijuana and strict regulation is a major challenge in the health sector. On the one hand, there is a need to provide access to treatment for patients, but on the other hand, there are concerns about abuse and negative impacts. Therefore, in-depth scientific studies are needed to find a balanced solution (Alfarisyi et al., 2024).

Several countries, including China, the United States (particularly New York), and Thailand, have relaxed or even legalized the use of cannabis, especially for medical purposes. China, for example, has made huge investments in cannabis research and has a large number of related patents. In the United States, a number of states have legalized medical cannabis for various chronic diseases. Thailand has even gone so far as to legalize the widespread use of cannabis, including for personal consumption. On the other hand, Indonesia still maintains a very strict policy towards cannabis, although there are community groups such as Lingkar Ganja Nusantara that continue to advocate for the legalization of cannabis for medical purposes (Alfarizi, 2024). Amidst the government's efforts to eradicate drug abuse, it is important to periodically evaluate cannabis-related policies. A scientific evidence-based approach is needed to make the right decisions. Thus, the resulting policies not only protect the public from the negative impacts of drug abuse, but also open up opportunities for the development of effective and safe alternative treatments. The availability of medicines derived from cannabis can improve the quality of life for many patients suffering from chronic diseases. However, keep in mind that cannabis legalization is not the only solution to all health problems. It is important to formulate a comprehensive policy, involve various interested parties, and carefully consider the diverse social, cultural, and legal aspects (Poli et al., 2023).

According to research on the Legalization of Marijuana in the Medical Sector from a Legal Perspective made by Syamsul Maliki, et al, shows that marijuana really has great benefits for the medical world and Indonesian law does not yet have the legality of using marijuana in the media. Syamsul Maliki, et al,

have an opinion to revise the regulatory regulations so that there is legal clarity for using marijuana in the media world (Malik et al., 2020). Meanwhile, research conducted by Rahmi Ayunda and Vina with the title Opportunities and Challenges for the Legality of the Use of Marijuana for Medical Purposes in Indonesia Viewed from the Perspective of the Health Law, has the results of an analysis that the Health Law does not specifically regulate the use of marijuana for medical needs and only regulates narcotics in general. Even though there has been research by WHO and the UN regarding the benefits of using marijuana in medicine, the Indonesian government has not followed up on this. Meanwhile, the legalization of marijuana in Indonesia can be done by revising the narcotics law and removing marijuana from narcotics class I (Ayunda & Vina, 2021). The challenges in Rahmi Ayunda and Vina's research are only limited to legal challenges, while in this study, the authors have other challenges in the use of marijuana in the media world, namely social views that come from religious views. Religion views marijuana as unclean and it should not be used by humans. This research article limits the research to the difficulty of legalizing medical marijuana as a legal and social challenge. The difference between the author's article and the previous research article is that the author will explore the regulation of medical marijuana and the challenges of legalizing marijuana in the medical world.

Research conducted by Aristo Pengaribuan explains that in the effort to legalize marijuana there are various factors behind it. This also happens all over the world, not only in Indonesia. Global politics influences through international conventions but it is still difficult to legalize marijuana as a medical drug. The paradigm shift towards marijuana will face very tough challenges. Most likely, with the current socio-political climate, there will be no significant changes in policy towards marijuana and narcotics in general. The main challenge cannot be separated from the values of communitarianism that underlie the policy towards marijuana plants. The values of communitarianism that position the state as a "moral guardian" are reflected in the legal policy towards marijuana itself (Pangaribuan, 2024). This study also looks for challenges in society in efforts to legalize marijuana.

These benefits are not a reason to legalize marijuana in Indonesia. This is proven by the legalization efforts by Santi Warastuti who fought for her child named Pika, a cerebral palsy sufferer, to be able to use marijuana as a medical drug. Santi Warastuti's struggle reached the point of a public hearing regarding the legalization of marijuana for medical purposes with Commission III of the DPR. However, the Constitutional Court still did not accept the judicial review of Law Number 35 of 2009 concerning Narcotics to legalize medical marijuana (Anugerah, 2022). There was the arrest of Fedelis Arie (FA) who used marijuana to treat his wife who had syringomyelia or a cyst disease in the bone marrow. After FA's wife used marijuana, there was an improvement in her condition. However, FA was arrested by the authorities for using marijuana. After FA's arrest, his wife did not consume marijuana and a month later FA's wife died (Farisa, 2022).

Laws are used as a tool to protect the interests of society. Laws are also used to provide protection for the actions of society. Marijuana as a medical drug is important for the health of some people in Indonesia (Flora, 2023). Therefore, there needs to be regulation of marijuana, either from health regulations or other regulations. If the community needs treatment from medical marijuana but the government has reasons for prohibiting the licensing of medical marijuana, then there needs to be a solution to this community's needs. The classification of marijuana as a class I narcotic in Indonesia has become the basis for an absolute ban on its use. This decision was made based on a limited understanding of marijuana in the past. However, with the increasing scientific evidence supporting the potential medical benefits of marijuana, a critical evaluation of existing policies is needed (Saputra et al., 2025).

This study focuses on finding the legal basis for the regulation of the prohibition of medical marijuana in Indonesia and its implications. The author will also present an analysis of the social benefits and challenges of legalizing marijuana. So this study is different from other studies because it provides an explanation of the focus of the research. Based on the above explanation that shows the difference between the strict regulation of cannabis in Indonesia and the practice in other countries, as well as the decision of the Constitutional Court

which provides an opportunity for a more in-depth study, this research will focus on two main issues that will be discussed in the problem formulation section. Based on the above background, the author will conduct research with the title **LEGALIZATION OF GANJA AS A MEDICINE IN INDONESIA: CHALLENGES AND REGULATIONS**.

Research Method

This research was conducted using a normative legal research method using a literature study chosen by the author to be used as a method in finding data for writing purposes. In this research, data originating from primary law such as laws are also used as references for finding data (Hidayat, 2017). The author's approach was qualitative through a descriptive-analytical method (Niam et al., 2024). This approach was chosen to explore in depth the legislation and Islamic law perspectives on the issue of legalizing medical cannabis in Indonesia. The data in this study were obtained through literature studies and in-depth interviews with legal experts, medical practitioners, and scholars, in order to gather perspectives from various related fields. The desk study included legal documents, including Law No. 35/2009 on Narcotics and other literature discussing the medical benefits of cannabis. Additional data was collected through primary legal materials, namely Law Number 35 of 2009 on Narcotics and Law Number 36 of 2009 on Health, secondary legal materials consisting of books, articles, journals, and relevant publications, as well as tertiary legal materials such as the Big Indonesian Dictionary (KBBI), legal dictionaries, and information available on the internet. The data collection method uses document studies which include reviewing books, research results, writings of experts, and related regulations (Adriaman, 2024).

The data obtained was analyzed qualitatively with a descriptive-analytical framework, where interviews and literature studies were coded and categorized to identify relevant themes and patterns. This analysis aims to understand the challenges and opportunities in the legalization of medical cannabis as well as formulate comprehensive and relevant policy recommendations in the context

of positive law and Islamic law. This approach is expected to produce systematic, scientific, and accountable conclusions.

Results and Discussions

Juridical Analysis of the Form of Legal Regulation on Medical Marijuana and its Implications

The history of cannabis is heavily influenced by the policies of the United States (Hikmah, 2022). Initially used for industry and medicine, cannabis was later banned globally at America's instigation. Even so, some countries such as the UK have begun to allow the use of medical cannabis, while other countries such as China still utilize it for industry. Then, the history of cannabis prohibition began in the early 20th century and was later reinforced by international conventions. Indonesia, as one of the countries that signed the convention, has banned cannabis since colonial times. Despite numerous studies showing the potential medical benefits of cannabis, especially local varieties, the Indonesian government has maintained the prohibition policy. Meanwhile, despite several revisions, Indonesia's Narcotics Law still categorizes cannabis as a class I narcotic, contrary to WHO recommendations (Bahar et al., 2021). This total prohibition policy not only hampers people's access to alternative medicine but is also considered counterproductive in combating drug trafficking.

Law is basically made to protect the interests of society so that order emerges (Sugiarto, 2021). So if there is a problem of legalizing medical marijuana demanded by the community, there must be legal protection for the interests of the community, namely the legalization of medical marijuana. However, the reality is that medical marijuana remains prohibited by the government in accordance with the Narcotics Law to date. The use of marijuana in Indonesia is a criminal offense regulated in Law Number 35 of 2009. This law provides criminal sanctions for anyone who produces, distributes, or uses narcotics, including cannabis which is classified as class I narcotics, both for medical and recreational purposes (Triwulandari et al., 2024). Article 6 paragraph 1 letter a of the Narcotics Law explains that class I narcotics can only be utilized as science

and is not used as a therapeutic medium because of its dependence effect. The thing that has always been at the center of the provisions of the prohibition of marijuana is the effect of dependence, so if marijuana has great benefits for public health, it is necessary to make rehabilitation after treatment with marijuana. This is the same as rehabilitation for drug abuse. There is still a solution to the problem of using marijuana for medical purposes (Firdausi et al., 2022).

The protection of health that has occurred has given rise to the theory of protection. law on health rights in society. This protection theory emerged because of the importance of legal protection of health rights. Procurement of medical marijuana as a drug that has not been replaced is a right for patients. The theory of legal protection of health rights is protection of dignity and human rights based on legal provisions issued by the state (Armeilia, 2021). Legal protection is manifested in the form of efforts to provide legal certainty. So it is important to have regulations on patient rights including requests for the legalization of medical marijuana. This theory provides an explanation that patients have the right to access drugs for health based on applicable regulations. The 1961 Single Convention on Narcotic Drugs in the world also provides results in the form of a perspective that marijuana as medical marijuana is a health right for patients, but in Indonesia it is practically prohibited by applicable regulations (Ma'ruf & others, 2023).

On the one hand, the drug issue is often used as a political tool to achieve certain goals. Levine notes that drug prohibition can unite political opponents and provide legitimacy for repressive measures. This shows that drug policy is not always based on public health interests, but rather on political and economic interests (Sulaiman, 2022). The above problems have of course been regulated in Law No. 35/2009 placing the National Narcotics Agency (NNA OR BNN In Indonesian Language) as the main coordinating agency in drug eradication. BNN has broad authority, including investigation and prosecution, as well as representation in the regions. However, the focus of eradication should be on big dealers and dealers, not just users. The rehabilitation approach for addicts also needs to be improved to break the chain of drug abuse (Willy, 2024).

Law No. 35 of 2009 calls drug users victims who must be rehabilitated, but the reality in the field is that there are still many cases of people dying because of the difficulty of accessing marijuana for medical purposes. The case of Fidelis Ari, who was arrested for growing marijuana to treat his sick wife and eventually died after his treatment stopped, illustrates this (Mahatamtama, 2019). Peter Dantovski's case is also similar, he was arrested while trying to obtain marijuana for health (Haikal, 2021). The absence of medical marijuana regulation actually ends up in punishment for those seeking treatment. Although, the Special Criminal Code in Law No. 35/2009 on Narcotics has mentioned the use of narcotics for health, it only allows class II and III narcotics, while class I is prohibited for medical use (Nasional, 2012).

The development of legalization of marijuana for medical needs in Indonesia cannot be separated from the Constitutional Court Decision Number 13/PUU-XXII/2024. The applicants who submitted a review of Article 6 paragraph 1 of the Narcotics Law were Santi Warasyuti, Dwi Pertiwi, and Nifiah Murhayati. The reasons for the applicants to submit this Narcotics Law testing are related to the prohibition of the use of Class I Narcotics for health treatment, the prohibition of the use of Class I Narcotics inhibits narcotics research so that people cannot enjoy the development of knowledge and technology as stipulated in the constitution, although Class I Narcotics has a high dependence effect but if Class I Narcotics has health benefits then the state needs to regulate it, the application was submitted in order to utilize, research, and regulate Class I Narcotics for health treatment, and encourage guarantees for health services that can be maximally utilized by all Indonesian people (Trinanda, 2021).

However, all petitions were rejected by the Judges with several considerations. First, that the Constitutional Court recognizes the benefits of certain types of narcotics for health but there are still effects of dependence, and the high risk of narcotics abuse is fatal to the detriment of the nation's life because can damage the nation's generation. Second, that the reason for the experience of other countries that use narcotics as medicine does not necessarily make other countries able to make narcotics as a health drug. This is because there are differences in the characteristics of the types of narcotics, legal structure and

culture, as well as supporting facilities and infrastructure and the Constitutional Court Judges considered that Indonesia was not ready to implement a policy of legalizing the use of marijuana. Third, the Constitutional Court judges considered that Article 6 paragraph 1 of the Narcotics Law remains relevant and constitutionally applicable because this article classifies narcotics into several types according to the effects of these narcotics and this classification is also related to the effects of narcotics abuse which endanger one's life and social life. Fourth, that Article 8 paragraph 1 of the Narcotics Law remains constitutional because the Judge stated that Article 6 paragraph 1 of the Narcotics Law remains constitutional. Fifth, that the legal facts obtained in the trial state that there is no evidence that comprehensive and in-depth scientific studies and research have been conducted in Indonesia. In the absence of evidence of such comprehensive studies and research, the wishes of the Plaintiffs are difficult to consider and justified by the Court to be accepted their rationality, whether medically, philosophically, sociologically, or juridically (Prasetyo, 2022).

Solving the problem of criminal use of marijuana must be seen through the Narcotics Law. According to Anang Iskandar in his book *Politik Hukum Narkotika*, there is an explanation of how the position of narcotics abuse in the Narcotics Law. Narcotics users are classified as criminals, as victims of narcotics abuse, and as addicts. It is clear that this regulation does not explain marijuana users for health as an act of narcotics abuse. It is also said that the Narcotics Law is a modern regulation that prohibits drug possession from two sides, namely the health side and the legal side. From the health side, the Narcotics Law protects acts of drug abuse in the medical field. Meanwhile, from the legal side, the Narcotics Law tackles the circulation of narcotics (Iskandar et al., 2021). However, efforts to legalize marijuana for health are not in accordance with the modernity of the Narcotics Law which seeks to protect drug abuse in the medical field. The government's fear of marijuana abuse remains even though it has been guaranteed by the government itself with the Narcotics Law. This is a challenge to the legalization of marijuana for medical purposes in Indonesia.

To overcome this, the author proposes concrete steps that include several actions. First, a revision of the Narcotics Act needs to be made, by moving

marijuana from class I to class II or III, so that it can be used for treatment. Second, the state needs to take over control of the production and distribution of medical marijuana through supervision by BPOM to ensure quality, quality, and guaranteed prices. Furthermore, the Ministry of Health needs to regulate the dosage of medical cannabis and require the use of a doctor's license for patients who need it. In addition, BPOM should conduct supervision of the distribution and use of medical marijuana, in collaboration with the community and law enforcement. Finally, socialization to the public is essential so that they understand the use of medical cannabis and the applicable rules, so that abuse can be avoided. With these steps, it is hoped that medical cannabis can be utilized according to health needs without violating existing regulations. Furthermore, the debate on the legalization of medical cannabis is also driven by unmet medical needs. The request for a fatwa to MUI shows the hope that religion can provide support for efforts to improve the quality of human life through access to effective treatment.

Ismail, et al, in his book *Opportunities for Legalizing Marijuana in Indonesia*, provide recommendations for ways that can be taken by the public in the interests of health to use marijuana in accordance with applicable law. People who feel the need for medical marijuana can apply to the District Court by making a Voluntair Lawsuit. A voluntair lawsuit is a petition submitted by someone to the court which is for the benefit of one party and without disputes with other parties related to a problem that requires legal certainty to take some action. One of the supporters of this petition is the right to life guaranteed by the 1945 Constitution (Ismail et al., 2024). Judicial Power Law Article 5 paragraph 1 provides an explanation if the judge is obliged to explore, follow, and understand the value of law and a sense of justice that lives in the community (Pemerintah Republik Indonesia, 2009) This means that in assessing the case of legalizing the use of marijuana with a voluntair petition, the judge needs to assess the interests and urgency of the applicant. Judges need to pay attention to several things to handle voluntary petitions for the use of medical marijuana, namely first, proof of the urgency of using marijuana by the applicant and there is a recommendation of approval from a medical expert. Second, in the interests of

using medical marijuana, it does not profit by abusing the use of marijuana. Third, the interests of patients who need medical marijuana are served in the aspect of the right to health (Ismail et al., 2024).

The process of legalizing medical cannabis will then continue in the process of using cannabis by patients in need. Indonesia can look at Malaysia regarding the process of providing medical marijuana to patients while still under state supervision. Malaysia has a system of recording products containing marijuana called the Drug Control Authority (DCA). Patients who need marijuana as medicine need to apply and provide scientific evidence to the state through the DCA application then the Malaysian government will evaluate the patient's application (Ahzan, 2023). Of course, the legalization of marijuana for patients in need will be troublesome for the government but the government is obliged to provide the rights of the people to live.

Analysis of Health Benefits and Social Challenges of Legalizing Medical Cannabis in the Indonesian Health System

The issue of medical marijuana use in Indonesia is of great concern. There are several cases of people who have asked the state to legalize medical marijuana because of the health of their family members. An example of this case is the case of Fedelis Arie (FA) who used marijuana to treat his wife who had syringomyelia or cyst disease in the bone marrow. After the use of marijuana by FA's wife, there was an improvement in her condition. However, FA was arrested by the authorities for using marijuana. After FA's arrest, his wife did not consume marijuana and a month later FA's wife died (Farisa, 2022). Tempo.com notes that BNN responded to the case of legalizing marijuana as a medical drug with a ban and encouraged the public not to be strange. BNN also responded to FA's case by asking for scientific evidence of the benefits of marijuana for his wife's treatment and underlining that if the public wants to legalize medical marijuana it is not in accordance with Indonesian law (Waseso & Winarko, 2020). Another case came from Santi Warastuti who fought for her son named Pika with cerebral

palsy to be able to use marijuana as a medical drug. Santi Warastuti's struggle led to a public hearing related to the legalization of medical marijuana with Commission III of the DPR. However, the Constitutional Court still did not accept the judicial review of Law Number 35 of 2009 concerning Narcotics to legalize medical marijuana (Anugerah, 2022).

The purpose of the Narcotics Law in health terms is to ensure the availability of narcotics for the benefit of health, science, and technology as well as to prevent, protect, and save people from narcotics abuse because it has bad consequences. The Narcotics Law in Indonesia, whose main purpose is to protect public health, still has shortcomings, namely some of its provisions are not based on adequate medical knowledge and logic. The classification of substances in the law still causes confusion, as some substances such as alcohol, which affects consciousness and causes effects such as loss of pain, are not included in the narcotics classification, while cannabis is placed in class I along with cocaine and opium. This reflects the lack of adequate understanding of cannabis, although research shows that it does not cause overdose or dangerous physical dependence like cocaine or heroin. Health Law Number 36 emphasizes that health is a human right and part of the welfare that the nation aspires to, in accordance with Pancasila and the 1945 Constitution. Data from the Ministry of Law and Human Rights states that more than 50% of the residents of detention centers and correctional institutions are drug offenders. The application of punishment to drug users without considering the amount possessed often results in longer sentences than other crimes, such as murder or corruption (Bangun, 2021).

Medical cannabis, also known as medical cannabis, contains active compounds such as THC and CBD. Research shows that the human brain produces endocannabinoids, molecules that have an important role in various physiological functions and are similar to cannabinoids found in cannabis (E. A. Iqbal, 2022). . THC is known to have euphoric effects. Based on literature sources about the cannabis plant, there are about 34 types of diseases that can be treated with medical cannabis, namely first, Amyotrophic Lateral Sclerosis (ALS): Cannabinoids in cannabis can protect nerve cells from oxidation damage,

slow the progression of ALS, and reduce symptoms. Secondly, Cancer and Leukemia: Cannabinoids help inhibit the development of cancer cells and can even trigger death in leukemia cells in a short time. Third, HIV/AIDS: Cannabis can reduce pain, anxiety, nausea, and loss of appetite in people with HIV/AIDS. Fourth, Alzheimer's: THC in cannabis can help reduce anxiety and promote weight gain in Alzheimer's patients, thereby helping to reduce some of the symptoms of this disease.

Rita Komalasari examined the effects of cannabis on parkinson's patients with a literature review of clinical trials and found that there are positive effects of using cannabis for parkinson's patients. These positive effects include the neuroprotective properties of cannabinoids that protect neurons from injury, the anti-inflammatory and antioxidant effects of cannabis can protect brain cells, increased dopamine production by CBD and THC can relieve clinical PP symptoms, decreased muscle tone reduces muscle tension and stiffness, stops tremors and makes movement easier. In addition, since some prescription antipsychotics can worsen PP, medical cannabis, particularly CBD, may help reduce the need for antipsychotic drugs (Komalasari, 2023).

The relationship between humans and psychoactive substances is so complex that cannabis cannot be classified as only a depressant or stimulant, as it has both effects. Cannabis, which contains cannabinoids and is used as a medicinal ingredient, continues to show potential as advances in economics, politics, regulation, and the integration of scientific institutions. In Indonesia, some compounds in cannabis are known to have medicinal benefits, although they still cause side effects. Medical evidence is also still not strong enough to make marijuana the main choice in the treatment of pain or epilepsy, because until now there has been no disease that makes medical marijuana the main drug. Therefore, the government needs to conduct further research on the cannabis plant (Hakim, 2023).

In accordance with Rio Rinaldy Supandi's research, which states that marijuana in the medical world is able to provide social welfare for the community because of its benefits in curing various diseases. However, this contradicts the opinion of BNN, which states that social welfare is difficult if

there is abuse of the marijuana. The dose of marijuana use can deprive the patient of consciousness because there has been no research regarding the dose of marijuana used. This will have a bad effect by damaging the patient's brain nerves and the impact is on the slow speed of one's thinking. The disadvantages of legalizing marijuana are considered not worth the benefits of curing someone's illness because the legalization of marijuana if misused can be circulated widely in the community and this will damage the nation's children (Supandi, 2020).

Article 6 paragraph 1 letter a of the Narcotics Law explains that class I narcotics can only be utilized as science and not used as a therapeutic medium due to the effects of dependence. The thing that has always been at the center of the provisions of the prohibition of marijuana is the effect of dependence, so if marijuana has great benefits for public health, it is necessary to make rehabilitation after treatment with marijuana. This is the same as rehabilitation for drug abuse. There is still a solution to the problem of using marijuana for medical purposes (Firdausi et al., 2022). Research conducted by Ismansyah, et al, explained that the rehabilitation process after treatment with marijuana aims to break marijuana dependence, addiction, minimize the side effects of using marijuana, and also as an effort to clean the patient's blood against narcotics contamination. This rehabilitation of medical marijuana will take refuge in the Narcotics Law and the Health Law by cooperating with the Provincial National Narcotics Agency to carry out rehabilitation and supervision of rehabilitation patients (Ismansyah et al., 2023).

The Constitutional Court Decision Number 13 / PUU-XXII / 2024 related to the judicial review of the law on Article 6 paragraph 1 of the narcotics law explains that the Judge is of the opinion that there is still no research related to the benefits of marijuana for medical drugs clearly so that the reason for legalizing medical marijuana cannot be accepted (Putusan Mahkamah Konstitusi Nomor 13/PUU-XXII/2024, 2024). Even though the government, especially the Ministry of Health, did not act to test marijuana as a medical drug. Of course, this marijuana research will be difficult for the community because it is constrained by a license to use marijuana according to the Narcotics Law. The Ministry of Health is addressing issues related to medical marijuana research by

collaborating with universities to conduct research studies. Research on marijuana for medical drugs will be carried out at the Health Research and Development Agency in the Tawangmangu area (Wicaksono & Leonardi, 2023).

Countries that legalize medical cannabis have various patterns of medical rehabilitation and healing processes for drug-dependent users. Therefore, diverse strategies and therapies are needed and adapted to the context of each country. Some of the indicators that need to be considered in developing such strategies and therapies are the religious and cultural values that live in the community, the legal system and institutions that exist in the country, the basis and form of the state that can affect rehabilitation policies and implementation, the economic stability of the nation and efforts to realize public welfare. By considering these indicators, the state can develop strategies and therapies that are effective and in accordance with the needs of the community. Legal and health development can also be carried out in an integrated manner to support rehabilitation efforts and realize community welfare. In developing strategies and therapies, it is necessary to conduct in-depth analysis of the country and community context, as well as continuous evaluation to ensure the effectiveness and safety of rehabilitation programs. Thus, the state can provide appropriate support for drug-dependent users and help them to recover and reintegrate into society (Ismansyah et al., 2023).

In Islam, marijuana is known as al-hasyusy (M. M. Iqbal, 2017), a term that originated in the Middle East because of its effects that cause numbness and floating sensations. The laws regarding marijuana have long been discussed in Islam, both among Sunnis and Shiites. In Arab culture, al-hashusy is not considered a cigarette or alcohol, but is still generally considered haram. Marijuana is forbidden both because of the nature of the substance (*lidzatihi*) and because of its potential danger (*lidlararini*). The decision to forbid marijuana is based on the argument that prohibits intoxicating or debilitating substances. The Prophet Muhammad said, "Everything that intoxicates and weakens is haram." Ulama also include marijuana in the haram category because it is considered a *mufattir*, a substance that weakens the body (Sumarwoto, 2014).

Imam Izzuddin Ibn Abd al-Salam provided an explanation regarding the use of marijuana for medical purposes, despite its classification as an impure (najis) or prohibited (haram) substance under Islamic law. He stated: "It is permissible to use impure substances for treatment if no lawful alternative is available. In such cases, the benefit (maslahah) of preserving health and ensuring safety takes precedence over the benefit of avoiding impurity." So, there must be clarity regarding whether there are drugs that patients can still use besides using marijuana to get well. The health sector needs to provide an explanation regarding this in order to encourage whether or not the legalization of marijuana as a medical drug (Nur'han, 2023).

In Islamic criminal law, drug abusers are punished by ta'zir, because the Qur'an and As-Sunnah do not specify a specific punishment for them; hence, the punishment is left to the leader or ulil amri. The use of marijuana for treatment is allowed in Islam as long as it is not abused, because the dosage and limits have been regulated. MUI can also legalize medical marijuana, while its abuse will still be punished by ta'zir. Marijuana may be used if the purpose is to save lives or in an emergency, but for recreation, marijuana is still forbidden. This is a social challenge to legalize marijuana in Indonesia because community entities reject the use of marijuana (Ariyanti, 2017).

In addition to support by the health sector, religious leaders also need to provide education to their followers. What is known to the islaah community is that marijuana is a haram item but in urgent conditions, what is the legal explanation of Islamic law for the use of marijuana by patients in need (Sobirin & Mukhlas, 2023). Encouragement by religious leaders can at least provide opportunities for the legalization of medical marijuana in Indonesia. The Indonesian state itself places religion as the basis for making laws, so according to the author, one of the important factors for the legalization of marijuana as a medical drug must come from religion. Research related to the obstacles to the legalization of marijuana in Makassar City made by Salsabila Layla Putrihasan found a bright spot and showed that the response of the people of Makassar City to the struggle for the legalization of medical marijuana is divided into two, namely those who oppose and those who support the legalization of medical

marijuana. Resistance to the legalization of cannabis is often based on concerns about the social and health impacts it causes, however, those who support the legalization of medical cannabis are people who know and have experienced the positive benefits of cannabis. Hemp Makassar faces various complex obstacles in its efforts to campaign for the legality of medical cannabis, namely misconceptions about medical cannabis circulating in the community, related regulations, and the role of the media in reporting news about cannabis (PutriHasan, 2024).

If the country wants to legalize medical marijuana, it needs strong laws to prevent its misuse. Law enforcement must be carried out effectively; otherwise, the initial intention for benefit could turn into harm. Islam teaches to always prioritize the benefit in order to avoid the harm. Some scholars allow the use of marijuana as medicine in emergencies. They also argue that unclean and haram objects can be used for treatment if there is no pure substitute, although if there is a halal alternative, that is what should be chosen. Ma'ruf Amin, the Vice President, also claimed that marijuana is prohibited in Islam and gave a warning regarding the use of medical marijuana (Prastiwi, 2022). This means that there are still Indonesian officials who do not agree with the legalization of medical cannabis and clearly this will be a factor in the difficulty of legalizing medical cannabis.

Conclusion

Based on the description above, it can be concluded that the regulation of medical cannabis in Indonesia is contained in Law No. 35 of 2009 concerning Narcotics, specifically Article 8, which prohibits the use of class I narcotics, including cannabis, as health services except in limited quantities for technological development. Law No. 36 of 2009 on Health also affirms that health is a human right and part of welfare that must be realized in accordance with the ideals of the nation in Pancasila and the 1945 Constitution. Support for the legalization of medical cannabis is reinforced by research showing that cannabis has medical potential, and around 40 countries have legalized it for

health needs. In Indonesia, there are communities urging the regulation of medical cannabis, including a coalition that submitted a judicial review of the Narcotics Law to the Constitutional Court, with the aim of encouraging evidence-based policy. In Indonesia, there are challenges to the legalization of cannabis as medicine from several aspects, including the absence of positive legal support gaps either by revising the law or applying to the Constitutional Court. In terms of health, there is no support by conducting research on the benefits of marijuana on medical and social aspects such as religion, there is still a lack of literacy provided by religious leaders on the case of legalizing marijuana.

Therefore, the author will recommend some ideas that include some important steps in responding to the need for legalization of cannabis for medical purposes in Indonesia. First, the government needs to conduct in-depth research on medical cannabis, given the absence of comprehensive research related to its use in the health sector in Indonesia, while several countries such as Thailand and Malaysia have already legalized medical cannabis. This research needs to involve health experts, BPOM, MUI, relevant ministries, members of Parliament, and people who need marijuana for medical purposes. Second, the DPR is expected to revise Law No. 35 of 2009 concerning narcotics, specifically changing the status of the Cannabis genus plant from class I to class II or III, so that it can be used for medical purposes, supported by various research evidence that reveals the benefits of cannabis in the health sector. Third, the MUI is expected to immediately issue a fatwa related to the legalization of medical marijuana to serve as a guideline for the DPR in overhauling related laws and creating criteria for the permissibility of using marijuana for health. Finally, the Minister of Health must regulate the dosage and limits of medical cannabis use, which should only be carried out by health workers or doctors, while BPOM needs to strictly supervise the distribution, production and sale of medical cannabis. This strict supervision must involve the participation of the community, law enforcement officials such as the BNN, the police, and all elements of the state.

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Competing Interest

The authors declare that there are no competing interests.

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