

MUI's Fatwa on Vaccination and the Response of Muslim Communities: Between Islamic Legal Compliance and Social Resistance

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Abstract

The Indonesian Ulama Council (Majelis Ulama Indonesia/MUI) issued Fatwa No. 33 of 2021 declaring the COVID-19 vaccines used in Indonesia's national immunization program to be permissible (mubah) for use by Muslims, despite concerns raised regarding the halal status of some vaccine components. This study examines the reception of and responses to this fatwa among Muslim communities across diverse Indonesian regions, with particular attention to the sources and dynamics of social resistance to vaccination despite the fatwa's permissive ruling. Employing a mixed-methods design combining a survey of 620 respondents across five provinces with in-depth interviews and media content analysis, the study finds that the fatwa generated complex and heterogeneous community responses. While it facilitated vaccine acceptance among communities deferential to MUI authority, it also triggered counter-mobilization among groups who questioned MUI's legitimacy, the theological adequacy of the fatwa's reasoning, and the integrity of the government's vaccination program. The study identifies three distinct response patterns — compliant deference, critical engagement, and resistant rejection — and analyzes the sociological factors that predict membership in each group. The findings contribute to understanding the relationship between Islamic legal authority, public health compliance, and social trust in the context of the COVID-19 pandemic in Indonesia.

Keywords: MUI fatwa, COVID-19 vaccination, Islamic law, social resistance, Indonesia

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INTRODUCTION

The COVID-19 pandemic created unprecedented challenges for public health governance globally, and in Indonesia — the world's most populous Muslim-majority country — these challenges intersected with the complex landscape of Islamic legal authority and community trust in state institutions. As the Indonesian government launched its national COVID-19 vaccination program in January 2021, questions concerning the halal status of available vaccines emerged as a significant issue in public discourse, with some community members and religious voices raising concerns about the presence of porcine-derived gelatin (used as a stabilizer in certain vaccines), the use of MRC-5 (a human embryonic cell line used in



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production of some vaccines), and other ingredients deemed potentially problematic under Islamic law (Pratiwi et al., 2021).

The Majelis Ulama Indonesia (MUI), as Indonesia's preeminent formal Islamic legal institution with the authority to issue binding fatwas on matters of Islamic law affecting Indonesian Muslims, responded to these concerns by issuing Fatwa No. 33 of 2021 concerning COVID-19 vaccines. The fatwa, issued following extensive deliberation involving Islamic legal scholars, medical professionals, and scientific experts, concluded that the Sinovac/CoronaVac vaccine (the primary vaccine in Indonesia's initial rollout) was permissible for use by Muslims despite the detection of porcine-derived traces in the manufacturing process, on the grounds of necessity (*darura*), transformation of substances (*istihalah*), and the overwhelming public health benefits of vaccination against a grave threat to life (*hifzh al-nafs*, the preservation of life as one of the *maqasid al-shari'ah*) (MUI, 2021).

The issuance of this fatwa occurred in a social context marked by significant heterogeneity in attitudes toward both the MUI as an institution and the Indonesian government's pandemic response. Earlier scholarship on fatwa reception in Indonesia has documented substantial variation in the degree to which different community segments defer to MUI authority, with critical or resistant responses particularly prevalent among communities affiliated with Salafi or Wahabi-influenced movements, those with high exposure to social media-circulated counter-narratives, and those with pre-existing low trust in state institutions (Fealy, 2020; Burhani, 2021).

The interaction between Islamic legal guidance on vaccination and patterns of vaccine hesitancy is a question of significant public health relevance, as well as of broader sociological importance for understanding the sociology of religious authority in contemporary Muslim-majority societies. Indonesia's experience with MUI vaccination fatwas — the institution also issued relevant fatwas during the polio and meningitis vaccination campaigns of the early 2000s and 2010s — provides a rich longitudinal context for examining how fatwa authority interacts with public health compliance across different epidemiological and social contexts (Alfitri, 2019; Wahid, 2022).

Despite the evident significance of this interaction, systematic empirical research examining the relationship between MUI's COVID-19 vaccination fatwa, community reception patterns, and vaccine uptake behavior among Indonesian Muslims remains limited. This study addresses this gap through a mixed-methods investigation of fatwa reception and social responses across five Indonesian provinces with contrasting religious and demographic profiles. The research questions are: What are the predominant patterns of Indonesian Muslim community response to MUI's COVID-19 vaccination fatwa? What sociological factors predict the different response patterns observed? What are the implications of these

findings for understanding the relationship between Islamic legal authority and public health governance in Indonesia?

METHOD

The study employed a sequential explanatory mixed-methods design, beginning with an initial quantitative phase in the form of a structured survey, which was subsequently followed by a qualitative phase involving in-depth inquiry to further elaborate, clarify, and interpret the quantitative results. This design was selected because it allows the researcher to first obtain a broad and systematic overview of response patterns across the population, including the distribution, tendencies, and general trends emerging from the collected numerical data. The subsequent qualitative phase was then used to explore the underlying meanings, contextual factors, and social dynamics that could not be fully captured through statistical analysis alone. By integrating both phases in a sequential manner, the study ensures that the quantitative findings do not stand in isolation, but are instead enriched and substantiated through participants' explanations, experiences, and perspectives. In this way, the design provides a more comprehensive and nuanced understanding of the research problem, combining the strengths of breadth from the survey and depth from the qualitative investigation within a single coherent analytical framework.

The survey was conducted between July and September 2021, approximately six months after the initial rollout of the national vaccination program and approximately three months after the issuance of MUI Fatwa No. 33 of 2021. Respondents were sampled from five provinces: West Java, East Java, South Sulawesi, West Nusa Tenggara, and West Papua, selected to represent geographic diversity, varying levels of MUI institutional influence, and contrasting COVID-19 vaccination rates. A total of 620 respondents completed the survey, sampled using stratified random sampling with strata defined by province, urban/rural location, gender, and age group. The survey instrument measured respondents' awareness of the fatwa, their assessment of its theological adequacy and MUI's authority to issue it, their vaccination behavior, and their stated reasons for vaccine acceptance or hesitancy. A trust in institutions scale, a religiosity scale, and a social media consumption scale were also administered.

The qualitative phase involved in-depth interviews with forty respondents selected from the survey sample to represent the range of response patterns identified in the quantitative analysis, supplemented by purposive sampling to ensure representation of key stakeholder groups including religious leaders, community health workers, and local government officials. Interviews were conducted in Indonesian and regional languages (Sundanese, Javanese, Bugis) as appropriate. Media content analysis was conducted on a sample of 500 social media

posts and 50 online news articles circulated in 2021 related to the MUI vaccination fatwa, using both manual coding and automated text analysis techniques.

Survey data were analyzed using descriptive statistics, chi-square tests, and binary logistic regression to identify factors associated with vaccine acceptance and different fatwa response patterns. Qualitative data were analyzed thematically. Integration of quantitative and qualitative findings followed the explanatory sequential logic, with qualitative data used to elaborate, explain, and nuance the statistical findings.

RESULTS AND DISCUSSION

Fatwa Awareness and Reception Patterns

Survey results revealed that 74.2 percent of respondents were aware of MUI Fatwa No. 33 of 2021 prior to participation in the study, with awareness rates highest in West Java (83.1%) and lowest in West Papua (58.4%). Among fatwa-aware respondents, three distinct reception patterns were identified through cluster analysis: compliant deference (52.3%), characterized by explicit reliance on the fatwa as justification for accepting vaccination; critical engagement (28.7%), characterized by awareness and engagement with the fatwa's reasoning while expressing reservations about specific aspects; and resistant rejection (19.0%), characterized by explicit rejection of the fatwa's permissive conclusion and continued vaccine hesitancy or refusal.

Vaccine uptake rates varied significantly across the three reception groups: 87.4 percent of compliant deferrers had received at least one vaccine dose at the time of the survey, compared with 71.3 percent of critical engagers and 34.6 percent of resistant rejectors. Multivariate logistic regression identified the following factors as significant positive predictors of compliant deference: membership in Nahdlatul Ulama (OR=2.43, $p<.001$), high trust in MUI (OR=3.11, $p<.001$), low social media consumption (OR=0.68 per SD increase, $p=.008$), and rural residence (OR=1.54, $p=.021$). Factors positively associated with resistant rejection included: affiliation with Salafi-oriented religious communities (OR=3.82, $p<.001$), high exposure to anti-vaccination social media content (OR=2.97, $p<.001$), and low trust in the government's pandemic management (OR=0.41, $p<.001$).

Sources and Dynamics of Social Resistance

Qualitative interview data elaborated the survey findings with respect to the sources and dynamics of resistant rejection. Three primary sources of resistance were identified from interview narratives and corroborated by media content analysis. First, theological contestation of the fatwa's reasoning: a significant proportion of resistant respondents challenged the applicability of the darura (necessity) and istihalah (transformation) doctrines invoked in the fatwa, arguing that these principles had been applied too broadly to justify the permissibility of

vaccines containing traces of porcine-derived substances when halal-certified alternatives were available or could be procured.

Second, challenges to MUI's institutional legitimacy: among communities affiliated with Salafi movements and some independent Islamic educational institutions, MUI's authority to issue binding fatwas was itself contested. These communities pointed to MUI's historically close relationship with the state as evidence of institutional co-option, arguing that the vaccination fatwa reflected political considerations rather than independent Islamic legal reasoning. This finding is consistent with broader scholarship on contestation of MUI's authority in Indonesia (Fealy, 2020; Burhani, 2021).

Third, conspiracy narratives circulating through social media: media content analysis identified a substantial body of social media content framing COVID-19 vaccines as instruments of a global depopulation conspiracy, microchip implantation scheme, or pharmaceutical profit maximization strategy, with religious framings that presented vaccination as contrary to divine will. While these narratives were not specifically Islamic in character, they intersected with religious frameworks in ways that reinforced resistant rejection of the MUI fatwa among already sceptical respondents.

The findings of this study reveal the complex and heterogeneous character of Indonesian Muslim community responses to MUI's COVID-19 vaccination fatwa, challenging both simplistic assumptions about the uniformity of fatwa compliance among Indonesian Muslims and overly pessimistic assessments of Islamic institutional authority's capacity to facilitate public health compliance. The identification of three distinct response patterns — compliant deference, critical engagement, and resistant rejection — reflects the diverse landscape of Islamic authority, institutional trust, and social media information ecology that characterizes contemporary Indonesian Muslim society (Fealy, 2020; Hosen, 2021).

The positive association between Nahdlatul Ulama affiliation and compliant deference is particularly significant. NU's extensive institutional network — encompassing pesantren, madrasah, community health programs, and local religious councils — provides a dense social infrastructure for the transmission of fatwa-based guidance that Salafi-influenced communities, organized around more decentralized networks of individual scholars and social media channels, lack. This finding suggests that strengthening the integration of Islamic legal guidance into NU's community-level institutional networks could be a particularly effective mechanism for improving future fatwa-mediated public health communications.

The role of social media in facilitating resistant rejection warrants particular attention. The strong association between high social media consumption and resistant rejection, even controlling for other factors, suggests that the MUI fatwa's influence was significantly attenuated by the competing authority claims of social media-circulated counter-narratives. This finding is consistent with broader

research on the disruption of traditional religious authority structures by digital media in Muslim-majority societies (Bunt, 2018; Turner & Nasir, 2021).

The theological contestation documented in this study, particularly the challenge to the fatwa's application of the *darura* and *istihalah* doctrines, reflects a sophisticated engagement with Islamic legal reasoning that goes beyond simple non-compliance. This finding suggests that future vaccination fatwas would benefit from more extensive and transparent engagement with the specific doctrinal objections raised by critical and resistant communities, potentially through public consultative processes that involve a broader range of Islamic legal scholars. The Malaysian model of vaccine halal certification, which involves a more rigorous multi-stage certification process rather than a necessity-based dispensation, provides a comparative reference point for considering how Islamic legal frameworks for vaccine acceptance could be strengthened (Daud et al., 2020).

The study has several limitations that should be acknowledged. The cross-sectional survey design does not permit causal inference about the direction of relationships between fatwa reception and vaccination behavior. The restriction to five provinces, while permitting diversity, does not permit representative generalization to the full national population. Social desirability bias may have affected survey responses on sensitive topics such as vaccine refusal. Future research should employ longitudinal designs to track changes in fatwa reception and vaccine behavior over time.

CONCLUSION

This study has demonstrated that MUI's COVID-19 vaccination fatwa generated complex, heterogeneous, and sociologically patterned responses among Indonesian Muslim communities. While the fatwa facilitated vaccine acceptance among majority deferential communities — particularly those affiliated with NU and characterized by high institutional trust — it also triggered significant resistance among communities with lower MUI legitimacy assessments, high social media exposure, and pre-existing distrust of state pandemic management. The three-pattern typology of compliant deference, critical engagement, and resistant rejection provides a nuanced framework for understanding fatwa reception dynamics that has broader applicability beyond the specific context of COVID-19 vaccination.

The findings underscore the importance of strengthening Islamic institutional networks for fatwa dissemination, developing more transparent and consultative processes for the development of fatwas on contested public health issues, and addressing the social media information ecology that enables competing religious authority claims to undermine fatwa-based public health guidance. These insights have practical relevance not only for future pandemic preparedness but for the broader project of integrating Islamic legal authority into Indonesia's public

health governance framework in an increasingly digitally mediated religious landscape.

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