



Legal Awareness of Traditional Medicine Microbusinesses Regarding Halal Certificate Ownership in Bojonegoro Regency

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Article	Abstract
<p>Keywords: Legal Awareness; Traditional Medicine Micro Business Sellers; Halal Certificate.</p>	<p><i>Traditional medicine micro business actors in Bojonegoro Regency have not registered their businesses with the Halal Product Assurance Agency (BPJPH). This research is empirical legal research with a problem formulation: First, what is the legal awareness of herbal medicine business sellers regarding halal certificates and second, what factors influence the legal awareness of business sellers regarding halal certificates? The aim of this research is to examine the legal awareness of traditional medicine micro-business sellers regarding ownership of halal certificates in Bojonegoro Regency and to find out what factors influence the awareness of traditional medicine micro-business sellers regarding halal certificates in Bojonegoro Regency. The method used in this research is empirical legal research. The results of the research show that the legal awareness of traditional medicine micro business sellers regarding ownership of halal certificates in Bojonegoro Regency is still relatively low, seen from four indicators, namely legal knowledge, legal understanding, legal attitudes, legal behavior patterns. There are internal and external factors that influence business seller' legal awareness regarding halal certificates.</i></p>

INTRODUCTION

Indonesia is one of the countries with the fourth largest population in the world after the People's Republic of China, India, and the United States. The Directorate General of Population and Civil Registration of the Ministry of Home Affairs of the Republic of Indonesia (Ditjen Dukcapil Kemendagri) states that the population of Indonesia in 2024 reached 282,477,584 people, with the majority of the population being Muslim (Diyah, Riyanti, and Madura 2022).

Nowadays, with the development of the global halal industry, Indonesians are becoming more selective in choosing the products they consume, whether it be food, beverages, cosmetics, or medicines. Products with halal certification provide

consumers with assurance that the goods or services they use align with the principles of Islamic sharia law (Adinugrah, 2019). This also applies to traditional medicine products, which are part of alternative medicine widely used in various regions, including in Bojonegoro Regency.

Table 1
Percentage of micro-businesses in the pharmaceutical sector that have obtained halal certification in East Java Province in 2023

Number of registrations for micro-business medicine certificates	Number of Micro Businesses in the Pharmaceutical Industry with Halal Certification	Percentage
34.309	268	13%

Source: Satu data Kementerian Agama Republik Indonesia

In 2023, data from the Ministry of Religious Affairs of the Republic of Indonesia recorded that the number of micro traditional medicine businesses in East Java Province that registered for Halal Certification was 34,309, and the number of micro traditional medicine businesses that were Halal certified was 268, which means that only 13% of businesses had Halal certification.

Regulation of the Minister of Health of the Republic of Indonesia Number 006 of 2012 concerning Traditional Medicine Industry and Business distinguishes traditional medicine businesses into two categories, namely Small Traditional Medicine Businesses (UKOT) and Micro Traditional Medicine Businesses (UMOT). The definition of a Micro Traditional Medicine Business is stipulated in Article 1, Point 6 of Minister of Health Regulation No. 006 of 2012 on the Traditional Medicine Industry and Business, which refers to a business that only produces traditional medicine preparations in the form of powders, ointments, pills, external medicinal liquids, and herbal extracts.

- Every traditional medicine industry and business is obliged to comply with the regulations that have been determined. This is regulated in Article 33 of the Regulation of the Minister of Health of the Republic of Indonesia Number 006 of 2012 concerning Traditional Medicine Industries and Businesses, which states that every traditional medicine industry and business is obliged to: Ensure the safety, efficacy/benefits, and quality of the traditional medicine products produced;
- Withdraw traditional medicine products that do not meet safety, efficacy/benefit, and quality requirements from circulation; and
- Compliance with other applicable laws and regulations.

Bojonegoro Regency is known as one of the regions with micro-businesses in the traditional medicine sector. According to Regulation of the Minister of Health of the Republic of Indonesia No. 06 of 2012 concerning the Traditional Medicine Industry and Business, Article 1 paragraph (1):

“Traditional medicine is a substance or mixture of substances consisting of plant materials, animal materials, mineral materials, galenic preparations, or a combination of these materials that have been used for medicinal purposes for generations and can be applied in accordance with the norms prevailing in society.”

Based on initial observations conducted by researchers, micro-businesses selling traditional medicines in Bojonegoro Regency have stated that their businesses are halal and do not contain any prohibited ingredients. According to the entrepreneurs, they obtain the raw materials for traditional medicine themselves, such as plants that have been processed by their ancestors for generations. Similarly, the community or consumers in Bojonegoro Regency believe that the products made by entrepreneurs in the village definitely use halal and harmless ingredients.

The researchers observed two micro-businesses selling traditional medicines that did not yet have halal certification: first, UD Suyatno, and second, Sri Aji traditional medicines. Suyatno's micro-business, which was established in 1970, does not yet have halal certification. According to the interview results, Suyatno mentioned that he was once visited by health officials who encouraged him to register his business with the Indonesian Ulema Council (MUI) to obtain a halal certificate. Suyatno refused to register due to various factors, such as the registration process being too complicated, the required documentation being excessive, and the cost of obtaining the halal certificate being too expensive for him.

Based on the background description above, the author is interested in conducting further research on the legal awareness of traditional medicine micro-business operators regarding halal certification and has developed this into an academic paper titled “Legal Awareness of Traditional Medicine Microbusinesses Regarding Halal Certificate Ownership in Bojonegoro Regency.”

METHOD

This study uses empirical legal research. The author analyzes the legal awareness of business actors regarding halal certification in Bojonegoro Regency, where in this study there are micro traditional medicine business actors Suyatno and Ibu Sri Aji who did not register their micro traditional medicine businesses with BPJPH to obtain halal certification.

This research was conducted in Bojonegoro District, Bojonegoro Regency. The selection of the research location in Bojonegoro Regency was due to the large number of traditional medicine micro-businesses that have not yet registered for halal certification with the BPJPH. The data collection techniques used in this study were three techniques, namely interviews, observation, and documentation. The data collection technique involved data collection, data presentation, and conclusion drawing/verification.

RESULTS AND DISCUSSION

Overview of Research Location

This study presents the results and findings obtained through interviews and observations of traditional medicine micro-businesses in Bojonegoro Regency that do not yet have halal certification. The study was conducted by asking questions based on legal awareness indicators, which include legal knowledge, legal understanding, legal attitudes, and legal behavior patterns.

Traditional medicine micro-businesses are businesses that provide traditional medicine as their primary product, offering various types such as traditional medicine for muscle aches, traditional medicine for coughs, traditional medicine for gout, traditional medicine for the flu, and traditional medicine for childbirth. In this study, the traditional medicine micro-businesses selected were Suyatno Traditional Medicine Micro-Business and Herbal Sri Aji Traditional Medicine Micro-Business.

Suyatno's traditional medicine microbusiness has been operating since 1970. Initially, he sold his traditional medicines by going door to door. Later, Suyatno opened a stall near his home and at the Bojonegoro City Market. At first, Suyatno made his own traditional medicines. However, over time, he recruited people to help him. Suyatno's traditional medicine microbusiness.

This traditional medicine microbusiness produces traditional medicines such as traditional medicines for muscle aches, coughs, gout, flu, cholesterol, diabetes, men's health, childbirth, and others. None of Suyatno's traditional medicine microbusinesses have Halal certification.

Background of Traditional Medicine Microbusiness Operators

The author conducted interviews with traditional medicine practitioners in Bojonegoro Regency, which will be presented in the form of a summary table of the background of micro traditional medicine practitioners in Bojonegoro Regency.

Table 2

Background of Traditional Medicine Microbusiness Operators

N o	Name of Business Operator	Age	Education	Job	Gender
1.	Suyatno	50	SD	Entrepreneurship	Male
2.	Sri Aji	45	SD	Entrepreneurship	Female

Source: Primary Data, 2024, compiled independently

Based on the interview results, traditional medicine micro-business owners have different age backgrounds. The micro-entrepreneurs in traditional medicine in Bojonegoro District, as shown in the table above, are both men and women and have the same occupation, namely entrepreneurship. This indicates a difference between the micro-entrepreneur in traditional medicine Suyatno and the micro-entrepreneur in herbal traditional medicine Sri Aji. Suyatno, the micro-entrepreneur in traditional

medicine, is 50 years old with a primary school education. Meanwhile, Sri Aji, the micro-entrepreneur in traditional medicine, is 45 years old.

Table 3
Religion of Micro Traditional Medicine Practitioners in Bojonegoro Regency

No	Name Business Operator	Religion
1.	Suyatno	Islam
2.	Sri Aji	Islam

Source: Personal Documents

Based on the results of research on traditional medicine micro-businesses in Bojonegoro Regency from the table above, it can be seen that both businesses are Muslim. There were no non-Muslim businesses or businesses of Catholic, Hindu, Christian, Buddhist, or Confucian faiths.

Table 4
Income of Micro Traditional Medicine Businesses in Bojonegoro Regency

No	Name of Business Operator	Income
1.	Suyatno	>Rp. 3.000.000,00
2.	Sri Aji	>Rp. 3.000.000,00

Source: Personal Documents

The table shows that both Suyatno, a traditional medicine micro-business operator, and Sri Aji, a herbal traditional medicine micro-business operator, earn more than Rp 3.000.000,00 per month.

Results of Interviews with Micro Traditional Medicine Business Operators

Micro traditional medicine businesses have specific characteristics in terms of how they sell their products. Currently, many micro traditional medicine businesses have emerged with attractive concepts in terms of location, sales, and packaging. In this study, the author conducted interviews with two business owners who sell traditional medicines in Bojonegoro Regency.

The interviews were conducted by asking each informant questions based on legal awareness indicators, including legal knowledge, legal understanding, and legal attitudes. Questions based on legal indicators aimed to determine the level of legal awareness of traditional medicine micro-business operators as informants regarding halal certification. Questions related to legal knowledge indicators are presented in the following table:

Table 5
Legal Knowledge of Micro Traditional Medicine Business Operators
Regarding Halal Certification in Bojonegoro Regency

No	Question	Interview Results	
		Knowing	Not Knowing
1.	Are you aware of Law No. 33 of 2014 concerning Halal Product Guarantee?	2	0

Source: Compiled independently, 2024

In this study, the author asked one question to determine the legal knowledge of the informants regarding the laws and regulations governing halal product certification. The first question asked was about their legal knowledge of Law No. 33 of 2014 concerning Halal Product Certification. Based on the results of the interviews conducted, there were two micro-business operators in the traditional medicine sector who stated that they were aware of the Law concerning Halal Product Guarantees through the media, but they only heard the term "halal product guarantee" and did not know exactly what the Law on Halal Product Guarantees entailed.

Table 6
Understanding of the Law by Micro Traditional Medicine Businesses
Regarding Halal Certification in Bojonegoro Regency

No	Question	Interview Results	
		Understand	Not Understanding
1.	Do you understand the purpose of Law No. 33 of 2014 concerning Halal Product Guarantee?	2	0
2.	Do you understand that under Law No. 33 of 2014 concerning Halal Product Guarantees, all businesses are required to have halal certification?	0	2
3.	Do you understand which institutions have the authority to issue halal certificates?	1	1

Source: Compiled independently, 2024

Based on questions regarding legal understanding provided by two traditional medicine micro-business operators, both responded that they had a general understanding of the purpose of Law No. 33 of 2014 concerning Halal Product Guarantee.

The second question regarding the requirement for all businesses to have halal certification was asked to two micro-business owners of traditional medicine. The results showed that the two micro-business owners did not understand that all

businesses are required to have halal certification, arguing that traditional medicine is made from natural ingredients and does not contain any prohibited elements.

The third question regarding the institution authorized to issue halal certificates was asked to two micro-businesses selling traditional medicines. One micro-business was aware of the institution, mentioning the Indonesian Ulema Council, commonly known as MUI, while the other micro-business was unaware.

Table 7
Legal stance of traditional medicine microbusinesses regarding halal certification in Bojonegoro Regency

No	Question	Interview Results	
		Agree	Disagree
1.	Do you agree with the enactment of Law No. 33 of 2014 concerning Halal Product Guarantee?	2	0
2.	Do you agree that businesses should be required to have halal certification?	0	2
3.	Do you agree that businesses that are not halal certified should be penalized?	0	2

Source: Compiled independently, 2024

The first question was about the government's objective in issuing Law No. 33 of 2014 concerning Halal Product Guarantee. A number of micro traditional medicine business actors who were interviewed agreed with the reasoning that it was to guarantee that the products marketed to the public were halal and to protect them from the use of non-halal ingredients and processes in the production process.

The second question asked to business operators was about the requirement for all business operators to be halal certified. The results of the above question revealed that two micro-businesses in the traditional medicine sector disagreed, citing the reasons that obtaining a halal certification is difficult and complicated, and that as micro-businesses in the traditional medicine sector, they do not have the time to travel to relevant institutions such as the Indonesian Ulema Council (MUI) or the Indonesian Halal Product Certification Agency (BPJPH). Additionally, if the process is done online, the businesses face difficulties accessing the website due to their educational background, which only extends to elementary school (SD).

The third question concerned sanctions imposed on businesses that are not halal certified. Two micro-businesses selling traditional medicines disagreed with this, arguing that the Bojonegoro district government had not yet provided any information about the obligation to obtain halal certification, so imposing sanctions would be unfair and could harm the economy of micro-businesses selling traditional medicines.

Results of Observations with Micro Traditional Medicine Business Operators

Based on interviews conducted by researchers with traditional medicine micro-businesses regarding halal certification in Bojonegoro Regency, this study continued by seeking facts in the field regarding halal certification for traditional medicine micro-businesses. To ensure that the information was accurate, the researcher conducted direct observations in the field by observing the mixing or blending process at two traditional medicine micro-businesses in Bojonegoro Regency.

In this study, the researchers selected two traditional medicine micro-businesses using purposive sampling, namely two traditional medicine micro-businesses that did not have halal certification. The researcher positioned themselves as a buyer purchasing traditional medicine in packaged form; however, not all types of traditional medicine formulations were purchased by the researcher. Instead, the researcher requested permission from the traditional medicine micro-entrepreneurs to take photographs of specific parts of the traditional medicine. The researcher purchased one type of traditional medicine that is highly sought after by the community, which does not have a halal certification. The following observations were conducted by the researcher in Bojonegoro Regency.

Table 8
Observation Sheet for Micro Traditional Medicine Businesses Related to
Halal Certificate Ownership in Bojonegoro Regency

No	Name of Business Operator	Product	Halal	Not Halal
			Certified	Certified

V

1. Suyatno



V



Available Online at <http://ejournal.unesa.ac.id/index.php/novum>

2. Sri Aji

Source: Compiled independently, 2024

From the above observations, it was found that many traditional medicine micro-businesses do not have halal certificates or halal labels on their product packaging. The lack of halal certificates or halal labels is due to a lack of legal awareness among business operators regarding this issue, and business operators prioritizing demand over the quality of traditional medicines.

Legal Awareness of Micro Traditional Medicine Businesses Regarding Halal Certification in Bojonegoro Regency

Legal awareness is an awareness that arises from within oneself without any pressure or coercion from anyone else. Legal awareness is an awareness or value inherent in human beings. In its application, legal awareness has several indicators that serve as guidelines for the level of legal awareness.

Legal awareness, at its core, pertains to humanity in general, not just individuals. It applies to people in specific environments or professions such as judges, prosecutors, police officers, and others. This is because the concept of legal awareness encompasses values that have been internalized by society from a young age and have become institutionalized and deeply ingrained (Wulandari, 2019).

In this regard, as quoted by Soerjano Soekanto, legal awareness is related to the enforcement of the rule of law (Ihsani, 2021). Law enforcement lies in legal compliance. Efforts made include fostering legal awareness. According to Soekanto, the factors that influence and serve as benchmarks for law enforcement are the legal factors themselves, the parties that formulate and implement the law, the means or facilities that support law enforcement, and cultural factors, which are the result of human creativity and sensibilities in social interactions (Jasin 2019).

Another factor closely related to L.M. Friedman's legal consciousness is legal culture. The aim is to understand the values associated with the law and its substance (Rahayu & Yusup, 2022).

From the explanation above, the relationship between legal compliance and legal awareness cannot be separated, as the two are closely intertwined. In its application, legal awareness according to Soerjono Soekanto consists of several indicators, namely:

- a. The first indicator is legal knowledge
- b. The second indicator is legal understanding
- c. The third indicator is legal attitude
- d. The fourth indicator is legal behaviour patterns

In reference to the aforementioned indicators, when applied to assess the level of legal awareness among traditional medicine micro-enterprise actors regarding halal certificate ownership in Bojonegoro Regency, based on interviews and observations conducted by the researcher, it can be concluded that these actors exhibit a low level of legal awareness. This is evident from the fact that the four key indicators of legal awareness are not fulfilled. These indicators include legal knowledge, comprehension of regulatory content, legal attitude, and legal behavior patterns concerning the ownership of halal certification.

a. Legal Knowledge of Traditional Medicine Micro-Enterprise Actors Regarding Halal Certificate Ownership in Bojonegoro Regency

Based on the research conducted by the researcher, there were two traditional medicine micro-enterprise actors in Bojonegoro Regency who were aware of the halal product assurance regulations. However, the majority of the traditional medicine micro-enterprise actors who served as informants in this study were generally unfamiliar with the prevailing halal product assurance regulations. The halal certificate holds significant importance for both business actors and consumers. This is stipulated in Article 135 of Government Regulation Number 39 of 2021 concerning the Implementation of the Halal Product Assurance Sector, which states that:

“Products that are required to be halal-certified consist of:

- a. Goods, and/or
- b. Services.

As stipulated in Article 135 paragraph (1) of Government Regulation Number 39 of 2021, goods that must be halal-certified include:

- a. Food;
- b. Beverages;
- c. medicine.

The elucidation of Article 135 paragraph (1) letter (c) states that “*the term ‘medicine’ includes traditional medicines, health supplements, and quasi-drugs.*” This provision implies that traditional medicines are classified as products that are required to be halal-certified, even though a phased implementation period is applied.

The aforementioned article also implies that traditional medicines being traded must possess halal certification. This has become an obligation for traditional medicine micro-enterprise actors to register or apply for certification through the Halal Product Assurance Organizing Agency (BPJPH). However, many of these business actors lack legal knowledge; they are unaware of the regulations mandating halal certification due to their limited legal literacy. Moreover, they tend to disregard the need to understand such regulations, as they prioritize profit over consumer protection.

b. Legal Understanding of Herbal Medicine Micro-Enterprise Actors Regarding Halal Certificate Ownership in Bojonegoro Regency

According to Soerjono Soekanto, legal understanding refers to the amount of information possessed by an individual regarding the content, purpose, and benefits of a given regulation (Soekanto 2011). In the case of traditional medicine micro-enterprise actors in Bojonegoro Regency, the first indicator of legal understanding shows that they understand the purpose behind the enactment of Law Number 33 of 2014 concerning Halal Product Assurance.

The second indicator of legal understanding is the awareness that all businesses are required to obtain halal certification. Based on interviews conducted by the researcher, it was found that two traditional medicine micro-enterprise actors did not possess this understanding. As a result, these two business actors did not hold halal certification.

The third indicator of legal understanding is knowledge of the institution authorized to issue halal certificates. Based on the research findings, one traditional medicine micro-enterprise actor demonstrated an understanding of the institution with such authority, identifying it as the Indonesian Ulema Council (Majelis Ulama Indonesia/MUI). Meanwhile, the other actor did not possess any understanding regarding which institution holds the authority to issue halal certification.

In the research conducted on traditional medicine micro-enterprise actors regarding halal certificate ownership in Bojonegoro Regency, the researcher employed the theory of legal knowledge to analyze their level of legal understanding. The findings indicate that the level of legal knowledge among these business actors is considerably low. While they may recognize the benefits of halal certification, this understanding does not translate into legal behavior. Most business actors do not understand the procedures for obtaining halal certification, the requirements involved, and they have not undertaken the certification process.

c. Legal Attitude of Traditional Medicine Micro-Enterprise Actors Regarding Halal Certificate Ownership in Bojonegoro Regency

Based on interviews conducted with two traditional medicine micro-enterprise actors, it was found that their legal attitude, particularly the first indicator, demonstrates agreement with the existence of Law Number 33 of 2014 concerning Halal Product Assurance. Both actors expressed their support for the regulation.

The second indicator of legal attitude concerns the obligation for traditional medicine micro-enterprise actors to obtain halal certification. The findings show that all interviewed business actors expressed disagreement with this obligation. Their main reasons were the complexity of the certification process

and the additional costs involved, particularly before the implementation of the government's Sehati (One Million Halal Certificates) program.

The third indicator of legal attitude concerns the stance of business actors toward sanctions imposed on those who do not possess halal certification. In this case, both traditional medicine micro-enterprise actors expressed disagreement with the imposition of such sanctions. Their primary reasoning was the absence of prior socialization or adequate dissemination of information regarding the halal certification obligation.

d. Legal Behavior of Traditional Medicine Micro-Enterprise Actors Regarding Halal Certificate Ownership in Bojonegoro Regency

Legal behavior refers to the extent to which a law is effectively applied and observed within society. It concerns whether a legal norm is upheld, to what degree it is enforced, and the level of compliance it receives from the public. Legal behavior serves as a crucial indicator in assessing the level of legal awareness within a community.

Based on observational research conducted with two traditional medicine micro-enterprise actors, it was found that their legal behavior regarding halal certificate ownership in Bojonegoro Regency remains very low in terms of adherence to existing regulations. All business actors stated that, in their view, it is unnecessary to obtain halal certification when selling traditional medicines. They believe that consumers are already aware that traditional medicines are made using recipes passed down from ancestors, and therefore it is unlikely that these products contain any prohibited or non-halal substances.

During the interview, one of the traditional medicine micro-enterprise actors, Mr. Suyatno, stated that he was once approached by representatives from the Ministry of Religious Affairs regarding halal certification. However, at that time, the Ministry of Religious Affairs in Bojonegoro Regency requested a substantial amount of money for the certification process. As a result, Mr. Suyatno decided not to proceed with obtaining the halal certification.

In contrast, another business actor, Sri Aji, stated that she had never been approached by the Ministry of Religious Affairs at all. The behavioral patterns of traditional medicine micro-enterprise actors in selling their products demonstrate a lack of attention to the inclusion of halal labels and the importance of consumer protection. This reflects a limited understanding of the regulations related to halal certification. In this case, Law Number 33 of 2014 concerning Halal Product Assurance and its derivative regulations have not yet been effectively enforced or implemented within this sector.

Both regulations have not been fully acknowledged or understood by the public, particularly by traditional medicine micro-enterprise actors in Bojonegoro Regency. This lack of awareness has given rise to behavioral

patterns in which products are sold without recognizing that business actors are prohibited from offering goods or services that do not comply with halal production standards, as implied by the term halal.

Factors Influencing Legal Awareness of Traditional Medicine Micro-Enterprise Actors Regarding Halal Certificate Ownership in Bojonegoro Regency

The legal awareness of business actors is influenced by several factors, both internal, stemming from the individual traditional medicine micro-enterprise actors themselves, and external, originating from the relevant government ministries. The first factor hindering legal awareness among traditional medicine micro-enterprise actors in Bojonegoro Regency regarding halal certificate ownership is the lack of knowledge and understanding concerning halal product assurance. Additionally, their limited awareness of the prohibitions imposed on business actors under the Halal Product Assurance Law results in their failure to undertake halal certification.

The second factor influencing legal awareness stems from external sources, the lack of socialization and guidance regarding halal certification by the Ministry of Religious Affairs or the local Halal Product Assurance Organizing Agency (BPJPH). The absence of consistent outreach and educational initiatives has contributed to the limited understanding and engagement of traditional medicine micro-enterprise actors in the halal certification process.

According to Soerjono Soekanto, the fundamental factors influencing legal awareness include knowledge of the content of regulations, which, on the one hand, is affected by variables such as age, level of education, length of residence, and economic status. These factors can be explained as follows:

1. Education is a key determinant of legal awareness; the higher a person's level of education, the greater their tendency to be aware of legal norms compared to those with lower levels of education. Based on the interviews conducted, it was found that the behavior of traditional medicine micro-enterprise actors showed a general lack of concern regarding the inclusion of halal labels. This is reflected in the educational background of the two informants, Mr. Suyatno and Ms. Sri Aji, both of whom completed only elementary school. This suggests that the level of education attained by these business actors significantly affects the breadth and depth of their knowledge and understanding of legal regulations. However, it is important to note that merely knowing about a regulation does not necessarily equate to having sufficient legal awareness.
2. Economic factor, the relationship between economic status and legal awareness is highly significant. A person's level of income or economic capability—derived from their occupation—often determines their ability to

access goods and services, as well as their attitude toward managing them. Based on the research findings, it was revealed that both traditional medicine micro-enterprise actors interviewed were self-employed entrepreneurs. In this case, both actors reportedly earned a net monthly income of more than Rp 3.000.000,00. This suggests that, financially, these actors have sufficient means and should not face significant difficulties in managing the administrative costs associated with obtaining halal certification.

3. Age factor, age is also a determining factor in legal awareness. As individuals grow older, the processes of imitation and identification with the content of legal regulations increasingly influence their behavior. Based on interviews conducted by the researcher, it was found that both traditional medicine micro-enterprise actors showed no concern whatsoever regarding halal certification. In this context, age appears to play a significant role in shaping the attitudes of the two business actors in Bojonegoro Regency, contributing to their lack of legal awareness.

Length of Residence, the duration of residence is another factor that can influence legal awareness, as it reflects an individual's level of acceptance of the legal regulations applicable in a specific region. In this study, the length of residence is related to the regional origin of the business actors as informants. The traditional medicine micro-enterprise actors involved in the research have resided in Bojonegoro Regency for a relatively long period. Both informants are native residents of Bojonegoro. However, the findings indicate that length of residence and regional origin do not significantly impact their legal awareness. This is evidenced by the fact that both actors, despite being long-term residents, have not obtained halal certification for the sale of their traditional medicine products.

CONCLUSION

Based on the research and analysis conducted by the researcher regarding the Legal Awareness of Traditional Medicine Micro-Enterprise Actors Concerning Halal Certificate Ownership in Bojonegoro Regency, the following conclusions can be drawn:

1. The legal awareness of traditional medicine micro-enterprise actors regarding halal certificate ownership in Bojonegoro Regency remains relatively low. This is evident from all four indicators of legal awareness, namely:
 - a. Legal Knowledge: The two traditional medicine micro-enterprise actors were aware of the existence of the Halal Product Assurance Law through media sources. However, their knowledge was limited to

- merely hearing the term “*halal product assurance*,” without fully understanding the actual content or meaning of the law.
- b. Legal Understanding: Legal understanding among the business actors cannot be considered deep or comprehensive. Although some actors claimed to have an understanding of the law, their comprehension remains inadequate, as it is not accompanied by legally aware behavior. This gap between stated understanding and actual conduct highlights a lack of genuine legal awareness.
 - c. Legal Attitude: This indicator was assessed through three questions. While the respondents agreed with the enactment of Law Number 33 of 2014, this agreement alone does not reflect a genuine form of legal awareness. Their attitude has yet to translate into concrete compliance or responsible legal behavior.
 - d. keempat adalah perilaku hukum yang mana pada indikator ini melihat bagaimana aturan belum ditaati sebagaimana mestinya.
2. The legal awareness of traditional medicine micro-enterprise actors regarding halal certificate ownership in Bojonegoro Regency is influenced by both internal and external factors. Internally, the lack of knowledge and understanding concerning halal product assurance, as well as limited awareness of the prohibitions outlined in the Halal Product Assurance Law, serve as major obstacles. Externally, factors such as education, economic status, age, and length of residence also play a significant role in shaping their level of legal awareness.

Recommendations

Based on the research findings, the researcher offers the following recommendations:

1. For traditional medicine micro-enterprise actors in Bojonegoro Regency: It is expected that they will fulfill the obligation to obtain halal certification in accordance with the prevailing laws and regulations governing halal product assurance.
2. For consumers of traditional medicine products: It is important to develop behavioral patterns that prioritize and consider halal labeling or certification on product packaging, as halal is a fundamental principle in Islamic law.

For the Halal Product Assurance Organizing Agency (BPJPH) in Bojonegoro Regency: This research is expected to contribute to improving the agency's performance in facilitating the halal certification process in accordance with the applicable legal framework.

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