



# Feminist interpretation: Feminist perspectives on reproductive health in the Qur'an

Hari Fauji<sup>1\*</sup>, Abdul Ghoni<sup>2</sup>

<sup>1</sup> State Islamic University Sunan Gunung Djati Bandung, Jawa Barat, Indonesia;

<sup>2</sup> Telkom University, Bandung, Indonesia.

\* Corresponding Author: [harifauji101097@gmail.com](mailto:harifauji101097@gmail.com)

## ARTICLE INFO

### Keywords:

Feminist perspectives;  
Women;  
Reproduction;  
Al-Makhad;  
Yurdi'na.

### Article history:

Received 2025-05-03

Revised 2025-05-05

Accepted 2025-09-02

## ABSTRACT

Emphasizing the importance of reproductive health, especially for women, because reproductive health is a guarantee of their survival. The research is a qualitative and descriptive analysis using primary sources Q.S Maryam 22-26, Qs. al-Baqarah: 233, as well as secondary sources taken from tafsir books and other scientific works on the term *al-Makhad* and *yurdi'na*, which are reproductive organs. The results of the discussion showed that women cannot be free from the feeling of contractions during childbirth. This is also explained in the Qur'an when telling about the process of Jesus' birth that Maryam went through in (QS. Maryam: 22-26). Pronunciation of *al-Makhad* in this verse, it is better known as pain during childbirth or commonly known in contemporary terms, namely contractions. A woman's pain during childbirth should not be aggravated by adverse environmental conditions. Women who give birth must have the support of those closest to them, especially her husband, to reduce the burden of the pain she is experiencing. Then breastfeeding normally uses the term *yurdi'na*, in fact breast milk is a form of sustenance that fathers must give to their children through the mother through the act of *yurdi'na* (breastfeeding). This research is expected to contribute to new knowledge and not discriminate against women when experiencing the psychological burden of childbirth and breastfeeding, and is useful for Qur'anic researchers related to the discussion of women's reproductive health.

This is an open access article under the [CC BY-SA](https://creativecommons.org/licenses/by-sa/4.0/) license.



## 1. INTRODUCTION

The Qur'an discusses many things about women, and there is even one surah in the Qur'an called Surah An-Nisa (Ismail et al., 2024). Because of the importance of women in the Qur'an to be studied, many women need to be discussed, one of which is the issue of women's reproductive health. In international law, it began with the Declaration of Human Rights in 1968 in Tehran, continued with the Mexican Declaration in 1975 as a result of the 1st World Conference on the status of women and was strengthened with the 2nd World Conference on the status of women in Copenhagen, ranked 3rd in Nairobi and ranked 4th in Beijing (Bracke, 2022). Women's reproductive health rights are also guaranteed by Article 12 of the Convention on the Elimination of All Forms of Discrimination against Women, ratified by Law No. 7 of 1984 on July 24, 1984 (Failin et al., 2022). The main role of women that is considered normal is a maternal role that is masochistic, passive, feminine and unselfish. To accomplish this role, women must suppress or

deny all the aggressiveness and sensuality that exists in a woman's personality in order to develop a sense of motherhood.

Stereotypes about good women lead directly to cultural notions about the nature of women, namely, motherhood. Therefore, a society that supports this cultural discourse will idealize women's behavior in accordance with the character of a good mother who chooses to realize her commitment to love, nurture and care for her child. In other words, society will tend to stigmatize women who are considered less able to fulfill their mother's responsibilities. On the other hand, they will not stigmatize men, regardless of their character and temperament, since the responsibility of raising children is considered incompatible with their nature (da Costa & Miragaia, 2024). This social view of women causes women to be ambivalent about their future.

Many factors cause women to experience gender bias (inequality), so they are not equal. *First*, it has been rooted for so long in a patriarchal cultural society. *Second*, political factors do not fully support women. *Third*, the economic factor where the global capitalist system that has hit the world often exploits women. *Fourth*, the interpretation factor of religious texts that are gender-biased. *Fifth*, according to Nurofiah, Arabic, which is the language of Muslims, contains gender bias that has an impact on the textualization of God's word in the form of the Qur'an. This can be seen from Arabic grammar which reflects the culture and attitude of the Arab people towards women. It can be seen that when the Qur'an is revealed, the presence of girls can threaten the honor of Arab families, so burying girls alive is also used to cover up disgrace (Altohami, 2023). Therefore, the important thing used in the issue of reproductive health and rights is the equality of men and women that is free from all forms of coercion or violence and discrimination, and is aimed not only at married couples, but also at individuals. In addition, women's participation in all efforts and programs to realize reproductive health and human rights is also emphasized, both in leadership, planning, decision-making, management, implementation and organization, as well as in evaluating services at all levels of the health system (Villa-Torres & Svanemyr, 2015).

Women's awareness of reproductive rights, health and reproduction, rights are the power given to oneself to do or not do, accept or not accept something. Awareness of human rights and women's rights provides opportunities for women to engage in various activities for the benefit of themselves, their families and society. Health is not only related to physical discomfort, but also mental and social (Gruskin et al., 2021). These three aspects are interconnected with each other and affect each other whether a person is sick or healthy. Reproduction is the reproduction or ability of a woman to produce offspring repeatedly. In the Qur'an itself, matters that specifically discuss reproductive medical devices, especially regarding childbirth and breastfeeding, are found in Q.S Al-Ahqaf verse 15 and Q.S Maryam verses 22-26 about childbirth, as well as QS. al-Thalaq verse 6 and QS. al-Baqarah verse 233 about breastfeeding.

In discussing reproductive health, of course many people discuss it and have a tendency to study it. *First*, women's reproductive health in Indonesia from a gender perspective (Diarsvitri & Utomo, 2022). *Second*, women's reproductive health education in the Aisyiyah Turisari study (Ropitasari et al., 2020). *Third*, a critical study of the concept of women's reproductive health in the convention to eliminate all forms of discrimination against women according to Islamic views (Amroussia et al., 2022).

As a result of the emergence of Western culture that influenced Eastern culture, especially Islam, feminist Maryam Jameelah, Muslim women began to shift the role of health and pregnancy in relation to women. Maryam Jamee herself rejects patriarchy in Islam so that Islam remains pure and women remain healthy, as in the Qur'an (Abdullah, 2024). Looking at the existing reality, it is interesting to examine how orientalist Maryam Jameelah defends feminism based on the Qur'an, especially regarding the use of reproductive health devices and pregnancy. This research method is a descriptive qualitative method with literature review through data collection or scientific works to support primary sources from Q.S Al-Ahqaf 15 and Q.S Maryam 22-26, QS. al-Talaq 6, QS. al-Baqarah 233, as well as secondary sources taken from tafsir books and other scientific works on childbirth and breastfeeding of the reproductive organs.

## 2. RESULTS AND DISCUSSION

### 2.1. Women's Reproductive Health

The issue of women's reproductive health cannot be separated from a comprehensive understanding of the concept of health itself. As explained by WHO (1992), health includes complete physical, mental, and social well-being, not just the absence of disease (Krahn et al., 2021). In the context of reproduction, this means that reproductive health involves a body condition that allows a person, especially a woman, to carry out her biological function in producing offspring in a healthy, safe, and dignified manner, but also to have complete control over the process.

In a broader sense, reproduction is not only concerned with the biological ability to bear children, but also with the rights, freedoms, and quality of life of individuals. The term "reproduction" itself comes from the Latin root *re-* which

means to return, and *productio* which means to produce (Balibar & Broder, 2022). Thus, human reproduction is understood as a biological process to continue life, which has a very deep philosophical and social dimension: human survival and the dignity of the new generation.

However, the reality of women's reproductive health in various parts of the world, including in Indonesia, is still very complex. One of the main obstacles to achieving the ideal degree of reproductive health for women is structurally entrenched gender inequality (Newman et al., 2023). This inequality is evident in how women are often not given equal space in education, employment, and health services. In many cases, women are also victims of sexual and domestic violence, which directly impacts them physically and psychologically, especially in terms of reproductive health (Sabri et al., 2025).

Furthermore, patriarchal cultural norms often place women as creatures who are only seen from their biological functions of pregnancy, childbirth, and breastfeeding without giving room for the right to determine when, how, and whether they want to undergo the process (Nisha, 2022). The burden of reproductive responsibility that is entirely placed on women, even though the process is also a consequence of social relations with men, is a form of reproductive injustice that needs to be criticized.

No less important is the recognition that reproductive health is not just a medical issue, but also a human rights issue. The right to reproductive health means that every individual, especially women, has the right to make free and responsible decisions about their sexual and reproductive lives, as well as to access information and services that allow them to carry out those decisions safely and with dignity (Carter et al., 2022). In this context, reproductive health includes the right to contraception, safe pregnancy care, humane childbirth, and protection from sexually transmitted diseases.

This condition is further complicated by the fact that access to reproductive health information and services is often limited by socio-economic factors. Poor women, women with disabilities, young women, and those living in remote areas generally find it more difficult to get adequate services (Matin et al., 2021). This inequality shows that reproductive health policy must have a social justice perspective, not just medical services.

State involvement is important in ensuring the fulfillment of women's reproductive health rights. Health Law No. 36 of 2009 and the Child Protection Law, as well as various other implementing regulations, have indeed included the basic principles of reproductive health (Rokhim, 2023). However, its implementation still faces various challenges, ranging from a lack of gender-sensitive health workers, to resistance from conservative groups who consider reproductive health education to be contrary to moral values.

Therefore, sexuality and reproductive health education must be positioned not as a moral threat, but as a tool of protection and empowerment, especially for adolescent girls. Lack of knowledge about the body, menstrual cycle, and the risk of unplanned pregnancy leave many young women vulnerable to exploitation and violence (Tiwari et al., 2022). In the long run, this ignorance not only impacts their physicality, but also on their educational and economic future.

It is also important to realize that in the modern world, reproductive health issues have become a global battleground. The *Reproductive Health and Rights* agenda has become one of the important focuses of the Sustainable Development Goals (SDGs), particularly in the third and fifth goals related to good health and gender equality (Tazinya et al., 2022). The world recognizes that without good reproductive health and the right to control it, it is impossible to create a healthy and just society.

In this context, the female body is not only a biological field, but also a political and social field. Nancy Scheper-Hughes and Margaret Lock as quoted (Piro, 2021) call the concept of *body politics*, that women's body experiences including reproduction, childbirth, and breastfeeding are governed by social and political norms. In this context, the female body is often an object of control, not a subject who freely determines her reproductive experience.

However, in social practice, religious values are often bent by patriarchal culture. The perspective of Islamic feminism (e.g. Musdah Mulia) sees that the main problem is not in the teachings of Islam itself, but in the interpretation and the social system that encapsulates it (Nuraeni & Ariyanto, 2025). When patriarchal cultural norms force women to undergo reproductive functions without rights and freedoms, that's where reproductive injustice arises.

From this discussion, it becomes clear that women's reproductive health is an issue that does not stand alone. It is directly intersecting with social structures, legal systems, cultural values, and the education system. Therefore, efforts to improve the quality of women's reproductive health must be carried out holistically involving partisan policies, rights-based public education, and the empowerment of women as the main actors in managing their own bodies and lives.

## 2.2 *Al-Makhad* (Pain During Childbirth)

Women will experience a phase of childbirth in their life, this phase is the female reproductive cycle, which is the pain of childbirth or childbirth, or what is called the term *al-Makhad*. There is one proverb in the Qur'an, namely Qs. Maryam / 19:23 tells about the birth of the Prophet Jesus from the womb (Susanto & Nurrohm, 2024). Childbirth

is a process that begins with uterine contractions that cause progressive cervical dilatation, namely, the birth process of the baby and placenta (Tantengco & Menon, 2020). That is what is meant by *Al Makhad* childbirth, which is the process in which the fetus and amniotic fluid come out of the birth canal. It begins with the freezing and opening of the cervix due to contractions of the uterus with a regular frequency, duration and strength. This event is described through Mary giving birth alone, without anyone accompanying her. This procession is very transrational, narrated in Qs. Maryam/19:22-24 Allah SWT said (Meaning): And Mary conceived Jesus, and went with her womb to a far place. Then the pain of *al-makhad* made him lean against the palm tree, he said: "Oh, if I had died before, and would I have become an insignificant object, and forgotten. And Gabriel cried out to him from the flat place: "Do not be grieved, your Lord has made a river for you." (Maryam:22-24).

A woman's low status in the family and society will affect how a woman is treated, how she is respected and what actions are allowed. In the world community, women occupy a lower position than men (Hanmer, 2024). This low status results in discrimination, namely, mistreatment or denial of rights on the grounds that they are women. The form of discrimination varies from community to community, but it is always harmful to women's health. In addition, many families prefer men to women; women lack legal rights and decision-making powers, too many children and too many births. The right in the Qur'an is a solution to change for women for prosperity (Jafree et al., 2020).

Physical health is a condition in which the organs of the body function normally without feeling pain or complaints, and do not appear to be in pain objectively. So, physical health means that all organs of the body can function normally (Herlihy, 2017). According to Musdah Mulia in *Peeling Sexuality*, several important issues related to reproductive health were discussed. According to him, being physically healthy means that the body is protected from all diseases (Mulia, 2015). Including childbirth in family planning can be discussed between husband and wife so as not to burden the woman when *al makhad* (pain during childbirth) occurs.

If a woman is healthy, then she can worship her God and, of course, can fulfill her function as a human being who has a reproductive mandate, a wife, a mother, and a member of society who plays a role in the public sphere and collaborates with society to become a caliph on earth (Ara et al., 2022). The Qur'an pays great attention to all issues that touch women's issues.

According to Maryam Jameelah, feminists today strongly oppose any social role defined by gender. Feminists affirm absolute and unqualified equality between men and women, regardless of anatomical differences. They believe that women should play an active role in sexual relations like men, and not be passive (Jameelah, 1988). Similarly, in the matter of *al makhad*, he strongly opposes injustice to women so that they continue to give birth. So it needs to be discussed. In the study of religion, the body is not a neutral entity. It retains a theological meaning. Body theology in Islam sees the body as a mandate that must be maintained and respected. In this context, reproductive health is part of the realization of this mandate.

*Al-Makhad*, as mentioned in QS. Maryam, describes Maryam's suffering when giving birth in solitude (Susanto & Nurrohm, 2024). It's not just a biological story, but an existential experience. Mary complained of fatigue and humiliation, and God comforted her through angels. It contains a very deep psychological and spiritual dimension: that childbirth is a test and at the same time a form of devotion to a woman.

In the perspective of intersectionality, women's reproductive experiences must be understood in layers: there is a biological body, there is a social role, there is an economic context, and there is a religious ideology (Krull et al., 2020). So the pain of childbirth (*al-Makhad*) speaks not only of physical pain, but also of the social burden, cultural expectations, and ideological pressures that come with it. When women are forced to continue giving birth without consideration of health, economic, or mental conditions, it is not just a medical error, but also a structural injustice. Therefore, a *fair theology of the female body* must affirm that women have the right to determine when and how they want to undergo the reproductive process.

### 2.3. Yurdi'na (Breastfeeding)

Breastfeeding or *yurdi'na* is a part of the female reproductive function that is not only biological, but also loaded with social, psychological, and spiritual dimensions. In the Qur'an, the mention of the term *yurdi'na* and its derivatives emphasizes that breastfeeding activities are not ordinary activities, but a form of devotion and sacrifice of a mother to the life of her child who requires affection and the fulfillment of biological rights. Surah al-Baqarah verse 233 is the main reference that emphasizes that breastfeeding a child for two years is an encouragement as well as an ideal form of giving children rights by their parents, especially the mother (Siregar et al., 2025).

However, this obligation does not stand alone for women. The Qur'an emphasizes the importance of cooperation between husband and wife in breastfeeding. The role of the husband here is not just a passive companion, but must be a figure who actively supports and maintains his wife's emotional, physical, and spiritual stability during the



breastfeeding process. This shows that Islam views the relationship between husband and wife not in a subordinate frame, but as a partnership full of responsibility and sensitivity (Syed & Van Buren, 2014).

The term *rada'ah* in the Qur'an has the same root as *yurdi'na*, and is mentioned in various forms of the word ten times in the verses of the Qur'an. The variety of forms not only shows the richness of the Arabic language, but also expands the meaning of breastfeeding in a broader context. For example, the term *arda'naakum* in QS. an-Nisa: 23 indicates the context of the prohibition of marriage due to the relationship of breastfeeding, while *murdhi'atin* in QS. al-Hajj: 2 describes the emotional and dramatic situation when a breastfeeding mother forgets her child on the Day of Resurrection (Zulhamdi, 2020).

The use of these various forms of the word shows that breastfeeding is not only a biological process, but also a social and spiritual process that has a great impact on human relationships, both family and society. It is part of the value and ethical system in the lives of Muslims (Abutaleb, 2023). Therefore, the breastfeeding process is placed in a space of moral and social responsibility, not just a natural function of the female body.

Emphasizes that female reproduction, including breastfeeding, should not be understood solely in a biological framework (Subramani, 2024). The psychological dimension and the right to protection in sexual relations should be part of reproductive health thinking in Islam (Jannat et al., 2023). This means that a woman should not be forced into sexual activity or breastfeeding without her willingness and physical-psychological readiness. Violence, oppression, and coercion must be eliminated from the process of domestic relations. Islam, in this case, provides a normative basis for upholding respect for women's conditions and choices.

In this context, the role of the husband is crucial. The husband is not only required as a breadwinner, but also as a protector, companion, and provider of psychological support. When a mother faces difficulties breastfeeding, either due to physical health factors, psychological conditions, or social pressure, it is the husband who must take the initiative to ensure that the child's needs are met. If necessary, finding a breastfeeding mother who is physically and mentally healthy is an option that is allowed in Islam as a practice that has been practiced since the time of the Prophet Muhammad (Mohidem & Hashim, 2023).

The Qur'an emphasizes that breastfeeding for two years is a form of providing sustenance and love to children. However, what is interesting about this interpretation is that the responsibility of breastfeeding does not only lie on the shoulders of women (Al-Hawary et al., 2023). Breastfeeding, even though it is done by the mother, is a mandate that is also substantially the obligation of the father. In this case, the husband is required to ensure that the mother has a nutritious food intake, sufficient rest time, and a supportive environment to carry out breastfeeding tasks optimally.

According to (Sukmawati et al., 2024), attention to meeting the needs of breastfeeding mothers must be seen as part of a family system that supports each other. Husbands who understand the complexity of their wife's needs in the breastfeeding phase will be able to create a healthy, harmonious, and loving family ecosystem. This responsibility includes physical, psychological, and spiritual aspects. Providing healthy food, decent housing, and emotional attention are part of the provision of sustenance that is commanded in Islam.

The concept of giving (*infaq* and *nafqah*) in Islam has a broad meaning. It not only means providing material, but also providing attention, affection, and protection (Kakar et al., 2022). In the context of breastfeeding, this provision includes the provision of optimal conditions for the mother and child. Giving in this context also means creating a safe, peaceful, and healthy family environment, both physically and spiritually.

Sustenance in the form of breast milk is a gift from God that must be managed responsibly by parents, especially husbands (Karacan et al., 2024). This sustenance is not only limited to the substance of the milk itself, but also the quality and process of its giving. Therefore, fathers as the head of the family must actively ensure that the quality of breast milk is maintained, including by providing nutritional and emotional support to mothers. Islam strongly emphasizes the aspects of halal and the blessing of sustenance. This means that the food consumed by breastfeeding mothers must come from halal sources, because it will affect the quality of breast milk and child development. This shows the close relationship between spirituality, economics, and health in Islam.

In the modern era, various social, cultural, and economic dynamics present their own challenges in breastfeeding practices (Tomori, 2022). Fast-paced lifestyles, work pressures, and changing values in society often keep women away from breastfeeding naturally. Many working mothers have to face a dilemma between professional responsibilities and reproductive responsibilities. In this situation, the support of the husband and family is the determinant of whether the practice of breastfeeding can take place optimally or is actually disrupted.

In addition, the intervention of the formula milk industry also affects the public's perception of the importance of breast milk. Many families easily replace breast milk with formula without understanding the impact on health and the emotional bond between mother and child. Therefore, an understanding of Islamic values related to breastfeeding needs to be continuously instilled so that Muslims are not trapped in the logic of capitalism and modernity, which sometimes ignore moral and spiritual aspects (Giladi, 2022).

The well-being of the mother and child during the breastfeeding process is an important foundation in the formation of a strong family. The Qur'an explicitly directs that the breastfeeding process should not be a heavy burden for the mother. This shows that the psychological and physical well-being of the mother is a matter of great concern in Islamic teachings (Rasip et al., 2024). A mother who is emotionally depressed or physically deficient will not be able to provide optimal breastfeeding, and this will have an impact on the growth and development of the child.

The role of the state and society is also important in creating an ecosystem that supports breastfeeding mothers. The provision of adequate maternity leave, lactation rooms in the workplace, and public education about the importance of breastfeeding are concrete steps that can strengthen Islamic values in contemporary social practice. Islam encourages the creation of a caring and empowered society, in maintaining a balance in family life (Jahan et al., 2023).

Breastfeeding is a biological act that is full of spiritual, social, and psychological meaning. In the Qur'an, this activity is mentioned in various forms of words that show the complexity and importance of the role of breastfeeding in the life of mankind (Khalaf et al., 2025). Islam provides clear guidelines that the process of breastfeeding is not only a woman's task, but also a collective responsibility of the family, especially the husband.

In the context of fast-paced and changing modern life, understanding Islamic values regarding breastfeeding is very relevant. Maternal health, quality of breast milk, emotional support, and husband's responsibility are the main pillars in building family well-being. By returning to the values of the Qur'an, Muslims can maintain the practice of breastfeeding as an important part of raising children who are physically, mentally, and spiritually healthy (Bensaid, 2021).

This concept is in line with *gender partnership*, which emphasizes the importance of cooperation between men and women in household and social relations. Breastfeeding is not a biological task attached to women alone, but a humanitarian process that requires the full support of partners and society (Guiso & Zaccaria, 2023). When a mother is unable to breastfeed, Islam does not blame her. In fact, the Qur'an gives the option to use the services of breastfeeding mothers. This signifies the flexibility of Islamic law and the recognition of women's biological and social realities. In this context, Islamic law supports the fulfillment of children's rights while protecting mothers from pressures that exceed their capacity.

## 2.4. Capitalism, Modernity, and the Crisis of Meaning in Reproduction

In modern civilization based on capitalism, the female body, especially in its role as a reproductive subject, has undergone a profound shift in meaning. From being considered a sacred and spiritually meaningful entity in various religious traditions, women's bodies are now often commodified and exploited through products and services that wrap themselves in the guise of "care," "protection," or even "empowerment." Maternity hospitals, the formula milk industry, and postpartum cosmetics are the real faces of the capitalistic economic system that no longer just trades goods, but also trades symbols, identities, and experiences of the female body itself (Dube et al., 2021).

Marxist feminist critique of capitalism provides an important bright spot in reading this phenomenon. In their view, the capitalist economic system does not work neutrally, but rather creates new structures of inequality that make women's bodies a means of production and consumption at the same time (Cusato & Jones, 2024). The reproductive role of women, which is supposed to be a private and spiritual domain, is drawn into the logic of the market. Contraceptives are sold as a lifestyle; childbirth packaged as an exclusive service at a high price; even the practice of breastfeeding began to be reduced in meaning with the presence of an aggressive formula milk industry instilling a discourse that breastfeeding could be replaced for efficiency and comfort.

In the Islamic perspective, this reduction of meaning cannot be taken for granted. QS. al-Baqarah: 233 affirms that breastfeeding is part of the sacred responsibility of parents, a form of sustenance and divine trust that not only provides biological benefits but also strengthens the emotional and spiritual bond between mother and child. In this verse, breast milk is not just a nutritious liquid, but a symbol of love, sustainability of life, and blessings. So when the breastfeeding industry begins to encourage Muslim families to abandon breastfeeding for convenience or market trends, there is actually a deconstruction of the noble Qur'anic values (Sorensen et al., 2024).

In this context, *the approach of Islamic ecofeminism* is important to raise. Islamic ecofeminism combines criticism of capitalism and patriarchy while offering solutions based on Islamic values that are gender-fair and in line with *sunnatullah* (Malik et al., 2025). Islamic ecofeminism emphasizes that women's bodies and nature are equally vulnerable to exploitation by greedy and masculine economic logic (Villal, 2020). The practice of natural breastfeeding, respect for the biological cycle of women, and rejection of unnecessary medical or industrial intervention are forms of resistance to a capitalistic system that ignores spiritual and ecological values. In Islam, respecting the laws of nature also means respecting the nature of women as subjects who have full authority over their bodies and roles.

Nevertheless, the struggle to restore spiritual meaning in reproductive practice cannot be separated from the broader social and political context. This is where the state has a moral and legal responsibility to be present as a

protector of women's rights, not as a passive spectator in the fight between capital and women's bodies. In the welfare *state* theory, the government is not only obliged to provide health services, but also to ensure fairness in access to these services, including in the realm of reproductive health (Riggirozzi, 2021).

Unfortunately, in many cases, public policies are still patchy and lack gender sensitivity (Leal Filho et al., 2023). Maternity leave is often too short or unpaid; lactation rooms in the workplace are still considered as additional facilities, not basic needs; and public education about the importance of breastfeeding and reproductive health is still hampered by moral stigma, conservatism, or even systemic discrimination. In fact, the existence of these facilities is part of women's basic rights guaranteed by the constitution and the principles of *maslahah* in Islamic law.

The concept of *maslahah* in Islam teaches that good policies are not those that benefit a few people or are subject to market forces, but that bring benefits to the entire society, especially those who are most vulnerable (Ali & Al-Aali, 2015). Therefore, policies that protect breastfeeding mothers, support women's mental health after childbirth, and provide access to free health services for pregnant women are concrete forms of applying the principle of *maslahah* in the modern world.

### 3. CONCLUSION

Based on the results of a study of classical *mufasssir* works such as Fakhruddin al-Rāzī's *Mafātīḥ al-Ghayb* and Al-Biqā'ī's *Naẓm al-Durar*, it was found that reasonableness has a significant contribution in uncovering the thematic and structural connections between verses and surahs. This knowledge not only serves as an interpretive tool, but also strengthens the spiritual and theological dimension in understanding the Qur'an. In the context of tafsir learning, a reasonable approach is able to increase students' analytical power to the structure and relationship of verses, as well as encourage more integrative and holistic learning. The main contribution of this research lies in strengthening the argument on the importance of reasonable science as a methodology of interpretation that is able to bridge the textual understanding and the meaningful context of the Qur'an, so as to enrich the treasure of tafsir studies both academically and pedagogically. In general, the Qur'an proves the recognition of differences between men and women, but these differences are not discriminatory differences to benefit one party and negatively affect the other. These differences are meant to contribute to the Quran's hope of creating a harmonious relationship based on love (*mawaddah al-rahmah*).

The gender perspective is not applied to the tradition of Islamic interpretation, meaning that women do not have reproductive or reproductive rights to control their reproductive organs. Therefore, efforts are needed to rethink reproductive rights to pay attention to gender equality. In Islam, women's reproductive rights are different from the right that their reproductive functions must be protected and guaranteed. These rights are qualitatively balanced with the rights of men as the bearers of the production function.

### REFERENCES

- Abdullah, Z. (2024). *The Routledge Handbook of Islam and Race*. Routledge.
- Abutaleb, S. (2023). Breastfeeding Values: An Exploratory Study on the Sociocultural Values of Brotherhood in Egypt. *Strengthening Citizenship Education in Times of Conflict*, 144. <https://doi.org/978-84-09-56245-9>.
- Al-Hawary, S. I. S., Kumar, T., Pallathadka, H., Alshahrani, S. H., Al-Tamimi, H. A. N. M., Muda, I., & Singer, N. (2023). The education of children in an Islamic family based on the Holy Qur'an. *HTS Teologiese Studies/Theological Studies*, 79(2), 8273.
- Ali, A. J., & Al-Aali, A. (2015). Marketing and Ethics: What Islamic Ethics Have Contributed and the Challenges Ahead. *Journal of Business Ethics*, 129(4), 833–845. <https://doi.org/10.1007/s10551-014-2131-x>
- Altohami, W. M. A. (2023). A cross-cultural linguistic analysis of the gendered representations of "Wife" in Egyptian Arabic and American English Proverbs. *Cogent Arts & Humanities*, 10(1), 2174481. <https://doi.org/10.1080/23311983.2023.2174481>
- Amroussia, N., Holmström, C., & Ouis, P. (2022). Migrants in Swedish sexual and reproductive health and rights related policies: a critical discourse analysis. *International Journal for Equity in Health*, 21(1), 125. <https://doi.org/10.1186/s12939-022-01727-z>
- Ara, I., Maqbool, M., & Gani, I. (2022). Reproductive Health of Women: Implications and attributes. *International Journal of Current Research in Physiology and Pharmacology, SE-Review Articles*, 8–18.

- Balibar, É., & Broder, D. (2022). Reproductions. *Rethinking Marxism*, 34(2), 142–161. <https://doi.org/10.1080/08935696.2022.2051389>
- Bensaid, B. (2021). Breastfeeding as a Fundamental Islamic Human Right. *Journal of Religion and Health*, 60(1), 362–373. <https://doi.org/10.1007/s10943-019-00835-5>
- Bracke, M. A. (2022). Women's Rights, Family Planning, and Population Control: The Emergence of Reproductive Rights in the United Nations (1960s–70s). *The International History Review*, 44(4), 751–771. <https://doi.org/10.1080/07075332.2021.1985585>
- Carter, A., Strnadová, I., Waffern, C., Pebdani, R., Bateson, D., Loblinzk, J., Guy, R., & Newman, C. (2022). The Sexual and Reproductive Health and Rights of Young People with Intellectual Disability: A Scoping Review. *Sexuality Research and Social Policy*, 19(1), 372–390. <https://doi.org/10.1007/s13178-021-00549-y>
- Cusato, E., & Jones, E. (2024). The 'imbroglio' of ecocide: A political economic analysis. *Leiden Journal of International Law*, 37(1), 42–61. <https://doi.org/DOI: 10.1017/S0922156523000468>
- da Costa, C. D. M., & Miragaia, D. A. M. (2024). Female entrepreneurship in a sport context: unveiling the barriers perceived by women in leadership positions in a society of stereotypes! *Managing Sport and Leisure*, 1–22. <https://doi.org/10.1080/23750472.2024.2411997>
- Diarsvitri, W., & Utomo, I. D. (2022). Medical perspective of reproductive health education in Indonesian schoolbooks. *Frontiers in Public Health*, Volume 10.
- Dube, L., Yugar, T. A., Robinson, S. E., & Hinga, T. M. (2021). *Valuing Lives, Healing Earth : Religion, Gender, and Life on Earth*. Peeters Publishers CN - BR.
- Failin, F., Yuserlina, A., & Ibrahim, E. (2022). Protection Of Children's Rights And Women's Rights As Part Of Human Rights In Indonesia Through Ratification Of International Regulations. *JCH (Jurnal Cendekia Hukum)*, 7(2), 312–328. <https://doi.org/Doi: 10.3376/jch.v7i2.557>
- Giladi, A. (2022). *Infants, parents and wet nurses: medieval Islamic views on breastfeeding and their social implications* (Vol. 25). Brill.
- Gruskin, S., Zacharias, K., Jardell, W., Ferguson, L., & Khosla, R. (2021). Inclusion of human rights in sexual and reproductive health programming: Facilitators and barriers to implementation. *Global Public Health*, 16(10), 1559–1575. <https://doi.org/10.1080/17441692.2020.1828986>
- Guiso, L., & Zaccaria, L. (2023). From patriarchy to partnership: Gender equality and household finance. *Journal of Financial Economics*, 147(3), 573–595. <https://doi.org/https://doi.org/10.1016/j.jfineco.2023.01.002>
- Hanmer, J. (2024). Community action, women's aid and the women's liberation movement. In *Women in the Community* (pp. 91–108). Routledge.
- Herlihy, B. (2017). *The Human Body in Health and Illness-E-Book: The Human Body in Health and Illness-E-Book*. Elsevier Health Sciences.
- Ismail, N., Firdaus, M., & Darmawijaya, E. (2024). Gender equality in the Qur'an: An Analysis of surah an-Nisa' verses 1 and 34 in the exegesis of al-Tabari and al-Rāzī. *Gender Equality: International Journal of Child and Gender Studies*, 10(2), 224–234. <https://doi.org/https://doi.org/10.22373/equality.v10i2.25932>
- Jafree, S. R., Zakar, R., & Anwar, S. (2020). *Women's Role in Decision-Making for Health care in South Asia BT - The Sociology of South Asian Women's Health* (S. R. Jafree (ed.); pp. 55–78). Springer International Publishing. [https://doi.org/10.1007/978-3-030-50204-1\\_4](https://doi.org/10.1007/978-3-030-50204-1_4)
- Jahan, R., Uddin, A., Osmani, N. M., & Sulaiman, K. U. (2023). The Role of Women in Achieving Sustainable Development Goals (SDGs) In Islam: An Analysis of Gender Equality and Women Empowerment in the Modern World. *Al-Burhān: Journal of Qur'ān and Sunnah Studies*, 7(2), 110–124. <https://doi.org/https://doi.org/10.31436/alburhn.v7i2.329>
- Jameelah, M. (1988). *Islam and the Muslim woman today*. Mohammad Yusuf Khan.
- Jannat, S., Sifat, R. I., & Khisa, M. (2023). Sexual and Reproductive Health Conditions of Women: Insights from Rohingya Refugee Women in Bangladesh. *Sexuality Research and Social Policy*, 20(3), 855–868. <https://doi.org/10.1007/s13178-022-00758-z>
- Kakar, S. H., Zaenal, M. H., & Jalil, F. Y. (2022). Islamic Social Welfare and the Role of Zakat and Islamic Charity



- in the Family-Resilience: the Theoretical Review. *Indonesian Conference of Zakat-Proceedings*, 82–98. <https://doi.org/https://doi.org/10.37706/iconz.2022.449>
- Karacan, E., Çelikkanat, Ş., & Güngörmüş, Z. (2024). Beliefs and views of breastfeeding mothers regarding human milk banking: A qualitative study. *Nutrition*, 119, 112299. <https://doi.org/https://doi.org/10.1016/j.nut.2023.112299>
- Khalaf, A., Mathew, R., & Ny, P. (2025). Breastfeeding transition in Oman: A generation shift or a product of social development? A qualitative study on three generations of Omani mothers. *PLOS ONE*, 20(4), e0319789. <https://doi.org/https://doi.org/10.1371/journal.pone.0319789>
- Krahn, G. L., Robinson, A., Murray, A. J., Havercamp, S. M., Havercamp, S., Andridge, R., Arnold, L. E., Barnhill, J., Bodle, S., Boerner, E., Bonardi, A., Bourne, M. Lou, Brown, C., Buck, A., Burkett, S., Chapman, R., Cobranchi, C., Cole, C., Davies, D., ... Witwer, A. (2021). It's time to reconsider how we define health: Perspective from disability and chronic condition. *Disability and Health Journal*, 14(4), 101129. <https://doi.org/https://doi.org/10.1016/j.dhjo.2021.101129>
- Krull, L. M., Pearce, L. D., & Jennings, E. A. (2020). How religion, social class, and race intersect in the shaping of young women's understandings of sex, reproduction, and contraception. *Religions*, 12(1), 5. <https://doi.org/https://doi.org/10.3390/rel12010005>
- Leal Filho, W., Kovaleva, M., Tsani, S., Țircă, D.-M., Shiel, C., Dinis, M. A. P., Nicolau, M., Sima, M., Fritzen, B., Lange Salvia, A., Minhas, A., Kozlova, V., Doni, F., Spiteri, J., Gupta, T., Wakunuma, K., Sharma, M., Barbir, J., Shulla, K., ... Tripathi, S. (2023). Promoting gender equality across the sustainable development goals. *Environment, Development and Sustainability*, 25(12), 14177–14198. <https://doi.org/10.1007/s10668-022-02656-1>
- Malik, I., Karimullah, S. S., & Okur, H. (2025). Gender Analysis in the Islamic Law-Based Ecofeminism Movement for Ecosystem Protection. *El-Mashlahah*, 15(1), 101–124.
- Matin, B. K., Williamson, H. J., Karyani, A. K., Rezaei, S., Soofi, M., & Soltani, S. (2021). Barriers in access to healthcare for women with disabilities: a systematic review in qualitative studies. *BMC Women's Health*, 21(1), 44. <https://doi.org/10.1186/s12905-021-01189-5>
- Mohidem, N. A., & Hashim, Z. (2023). Integrating environment with health: an Islamic perspective. *Social Sciences*, 12(6), 321. <https://doi.org/https://doi.org/10.3390/socsci12060321>
- Mulia, M. (2015). *Peeling Sexuality*. Jakarta: Opus Press.
- Newman, C., Nayebare, A., Gacko, N. M. N. N., Okello, P., Gueye, A., Bijou, S., Ba, S., Gaye, S., Coumba, N., Gueye, B., Dial, Y., & N'doye, M. (2023). Systemic structural gender discrimination and inequality in the health workforce: theoretical lenses for gender analysis, multi-country evidence and implications for implementation and HRH policy. *Human Resources for Health*, 21(1), 37. <https://doi.org/10.1186/s12960-023-00813-9>
- Nisha, Z. (2022). The Medicalisation of the Female Body and Motherhood: Some Biological and Existential Reflections. *Asian Bioethics Review*, 14(1), 25–40. <https://doi.org/10.1007/s41649-021-00185-z>
- Nuraeni, A., & Ariyanto, M. A. (2025). Women as Heads of Families: An Analysis of Musdah Mulia's Thoughts and Interpretation Methods on Women's Leadership. *Strata Social and Humanities Studies*, 3(1), 39–47. <https://doi.org/https://doi.org/10.59631/sshs.v3i1.354>
- Piro, V. (2021). *The Body at Work BT - Migrant Farmworkers in 'Plastic Factories'* : *Investigating Work-Life Struggles* (V. Piro (ed.); pp. 113–138). Springer International Publishing. [https://doi.org/10.1007/978-3-030-74509-7\\_5](https://doi.org/10.1007/978-3-030-74509-7_5)
- Rasip, Z. M., Hamzah, A. H., Ibrahim, H., Tan, N. A. M., & Pao, A. (2024). A Comprehensive Examination of Exclusive Breastfeeding Through Quranic and Hadith Perspectives Alongside Scientific Insights. <https://doi.org/http://dx.doi.org/10.6007/IJARBSS/v14-i6/21419>
- Riggirozzi, P. (2021). Everyday Political Economy of Human Rights to Health: Dignity and Respect as an Approach to Gendered Inequalities and Accountability. *New Political Economy*, 26(5), 735–747. <https://doi.org/10.1080/13563467.2020.1841144>

- Rokhim, A. (2023). *Regulasi Pertanggungjawaban Pidana Terhadap Tenaga Kesehatan Yang Melakukan Malpraktik Medis (Medical Practice) Ditinjau Dari Perspektif Uu No. 36 Tahun 2009 Tentang Kesehatan Dan Uu No. 36 Tahun 2014 Tentang Tenaga Kesehatan. in Indonesia (Regulation of*. Universitas Islam Sultan Agung Semarang.
- Ropitasari, R., Rahayu, R. F., & Ramadhana, R. T. A. (2020). Edukasi Kesehatan Reproduksi Wanita pada Pengajian Aisyiyah Turisari, Desa Palur Kulon, Kecamatan Mojolaban, Kabupaten Sukoharjo In Indonesia (Women's Reproductive Health Education at the Aisyiyah Turisari Islamic Study Group, Palur Kulon Village, Mojolab. *AgriHealth: Journal of Agri-Food, Nutrition and Public Health*, 1(2), 106–110. <https://doi.org/http://dx.doi.org/10.20961/agrihealth.v1i2.43622>
- Sabri, B., Khan, N. A., Tahir, M., Khan, M. A., & Khan, M. N. (2025). Impact of Domestic Violence on Maternal and Child Health and Well-Being in Rural India. *Journal of Family Violence*, 40(3), 435–450. <https://doi.org/10.1007/s10896-023-00598-4>
- Siregar, G. T., Siregar, H. R., Ramlan, A. A., Batubara, N. S., Simamora, A. A., Harahap, M. A., & Sagala, N. S. (2025). Role of Islamic Religious Figures in the Success of Exclusive Breastfeeding in Padangsidempuan: Qualitative Study. *Age (Years)*, 36(45), 46–55. <https://doi.org/doi:10.22442/jlumhs.2025.01314>
- Sorensen, J., Moore, R., Donati, M., Parsons, K., Roach, R., Stringfellow, S., Rodríguez Martin, G. A., Fallow, C., Zhou, W., Losasso, M., & Wheatley, D. (2024). XIVModern Literature. *The Year's Work in English Studies*, 103(1), 916–1018. <https://doi.org/10.1093/ywes/maae016>
- Subramani, S. (2024). Beyond Public Health and Private Choice: Breastfeeding, Embodiment and Public Health Ethics. *Asian Bioethics Review*, 16(2), 249–266. <https://doi.org/10.1007/s41649-023-00259-0>
- Sukmawati, E., Wijaya, M., & Hilmanto, D. (2024). Participatory Health Cadre Model to Improve Exclusive Breastfeeding Coverage with King's Conceptual System. *Journal of Multidisciplinary Healthcare*, 17(null), 1857–1875. <https://doi.org/10.2147/JMDH.S450634>
- Susanto, A. S., & Nurrohm, A. (2024). Mental Resilience in the Story of Maryam in QS. 19: 23-26. *Proceeding ISETH (International Summit on Science, Technology, and Humanity)*, 895–902. <https://doi.org/https://doi.org/10.23917/iseth.5478>
- Syed, J., & Van Buren, H. J. (2014). Global Business Norms and Islamic Views of Women's Employment. *Business Ethics Quarterly*, 24(2), 251–276. <https://doi.org/DOI:10.5840/beq201452910>
- Tantengco, O. A. G., & Menon, R. (2020). Contractile function of the cervix plays a role in normal and pathological pregnancy and parturition. *Medical Hypotheses*, 145, 110336. <https://doi.org/https://doi.org/10.1016/j.mehy.2020.110336>
- Tazinya, R.-M. A., Hajjar, J. M., & Yaya, S. (2022). Strengthening integrated sexual reproductive health and rights and HIV services programs to achieve sustainable development goals 3 and 5 in Africa. *Reproductive Health*, 19(1), 223. <https://doi.org/10.1186/s12978-022-01535-2>
- Tiwari, A., Wu, W.-J., Citrin, D., Bhatta, A., Bogati, B., Halliday, S., Goldberg, A., Khadka, S., Khatri, R., Kshetri, Y., Rayamazi, H. J., Sapkota, S., Saud, S., Thapa, A., Vreeman, R., & Maru, S. (2022). “Our mothers do not tell us”: a qualitative study of adolescent girls' perspectives on sexual and reproductive health in rural Nepal. *Sexual and Reproductive Health Matters*, 29(2), 2068211. <https://doi.org/10.1080/26410397.2022.2068211>
- Tomori, C. (2022). Overcoming barriers to breastfeeding. *Best Practice & Research Clinical Obstetrics & Gynaecology*, 83, 60–71. <https://doi.org/https://doi.org/10.1016/j.bpobgyn.2022.01.010>
- Villa-Torres, L., & Svanemyr, J. (2015). Ensuring Youth's Right to Participation and Promotion of Youth Leadership in the Development of Sexual and Reproductive Health Policies and Programs. *Journal of Adolescent Health*, 56(1, Supplement), S51–S57. <https://doi.org/https://doi.org/10.1016/j.jadohealth.2014.07.022>
- Villal, J. L. (2020). *Margaret Fuller : a Proto-Ecofeminist*.
- Zulhamdi, Z. (2020). Radha'ah in the Perspective of Tafsir Al-Misbah. *Samarah: Jurnal Hukum Keluarga Dan Hukum Islam*, 4(2), 545–567.