

## THE LEGAL AND ETHICAL CHALLENGES OF HUMAN ORGAN TRANSPLANTATION IN INDONESIA

### TANTANGAN HUKUM DAN ETIKA DALAM TRANSPLANTASI ORGAN MANUSIA DI INDONESIA

**Handina Sulastrina Bakhtiar<sup>1\*</sup>, Handar Subhandi Bakhtiar<sup>2</sup>**

<sup>1,2</sup> Fakultas Hukum, Universitas Pembangunan Nasional Veteran Jakarta,  
Jakarta, Indonesia

\* Correspondence : [handina.sulastrina@yahoo.com](mailto:handina.sulastrina@yahoo.com)

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#### Abstrak

Transplantasi organ manusia telah menjadi topik hangat seiring dengan perkembangan hukum dan teknologi. Melalui proses transplantasi, seseorang dapat memperoleh organ dari orang lain. Penelitian ini bertujuan untuk mengkaji perdebatan antara konsep kemanusiaan dan alasan ekonomi dalam pelaksanaan transplantasi organ serta konsep pengaturan hukum terkait transplantasi organ di Indonesia. Penelitian ini menggunakan metode penelitian hukum normatif dengan pendekatan konseptual dan perundang-undangan, serta menggunakan bahan hukum sekunder yang dianalisis secara kualitatif untuk menjawab isu utama terkait diskursus transplantasi organ di Indonesia. Hasil penelitian menunjukkan bahwa bahwa transplantasi organ manusia tetap kompleks secara etis, karena tekanan ekonomi dan kemiskinan sering memengaruhi persetujuan, yang mengarah pada eksploitasi dan komersialisasi. Meskipun ada larangan hukum, ketegangan antara tujuan kemanusiaan dan kebutuhan ekonomi tetap ada, yang menunjukkan adanya kesenjangan dalam memastikan donasi sukarela, keadilan, dan perlindungan martabat manusia. Pemerintah Indonesia melalui Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan Pasal 124 sampai Pasal 134 dan dalam Peraturan Pemerintah Nomor 28 Tahun 2024 Pasal 325 sampai Pasal 381, yang menegaskan tata cara, persyaratan medis, serta aspek etika dan hukum pelaksanaan transplantasi organ untuk kepentingan kemanusiaan dan pemulihan kesehatan, serta dinyatakan terlarang untuk tujuan komersial.

**Kata Kunci :** Transplantasi Organ Manusia; Kesehatan; Komersial

### Abstract

*Human organ transplantation has become a prominent topic alongside the advancement of law and technology. Through the transplantation process, an individual may obtain an organ from another person. This study aims to examine the debate between humanitarian principles and economic considerations in the practice of organ transplantation, as well as the legal framework governing organ transplantation in Indonesia. This study is a doctrinal legal study employing conceptual and statutory approaches, and using secondary legal materials analysed qualitatively to address the central issues concerning the discourse on organ transplantation in Indonesia. The findings indicate that human organ transplantation remains ethically complex, as economic pressures and poverty often influence consent, leading to exploitation and commercialisation. Despite existing legal prohibitions, the tension between humanitarian objectives and economic necessity persists, revealing gaps in ensuring voluntary donation, fairness, and the protection of human dignity. The Government of Indonesia, through Law Number 17 of 2023 on Health (Articles 124 to 134) and Government Regulation Number 28 of 2024 (Articles 325 to 381), stipulates the procedures, medical requirements, and ethical and legal aspects of organ transplantation for humanitarian and health recovery purposes, while explicitly prohibiting any form of commercialisation.*

**Keywords :** Human Organ Transplantation; Health; Commercial

### Introduction

Over time, there are various transnational crimes that need to be addressed within a single multilateral framework, such as human organ trafficking or environmental crimes (Paminto, 2017). Although there is no consensus on the concept and definition of some of these crimes, in general these crimes endanger the safety of donors and also threaten future crimes (Ruslan A G, 2016). Each country needs to anticipate its organization and transcend national boundaries by preparing the justice system so that crime prevention can be carried out effectively (Vigar, 2020). The increasingly diverse and widespread crime, trafficking in human organs in various countries, has attracted attention and prompted countries around the world to work together to fight this crime at the bilateral, regional and multilateral levels (Gallagher & Holmes, 2008; Sulistyo et al., 2022). This has also come to the attention of the United Nations (UN) through the United Nations Global Initiative to Combat Trafficking in Human Beings (UN GIFT) which states that this crime is an organized crime, even UN GIFT has provided a number of international standard protocols on handling trafficking crimes. human organs that serve as guidelines for law enforcement (Aronowitz & Isitman, 2013; King, 2013). The latest data of 2022 from the Global Observatory on Donation and Transplantation indicate that more than 150 000 solid organ transplants ( $\leq$  10% of global needs) are performed worldwide annually, which is an increase of 52% compared with 2010 (World Health Organization (WHO), 2024). The 2023 data illustrate a significant disparity in the number of transplants performed by organ type. Kidney transplantation dominates overwhelmingly, with 27,332 procedures, making it the most frequently performed solid organ transplant. This is followed by liver transplants, recorded at 10,659 cases. Heart and lung transplants remain substantially lower,

numbering 4,545 and 3,026 respectively. Combined kidney-pancreas transplants total 812 procedures, whereas isolated pancreas transplants are comparatively rare, with only 102 cases undertaken. The 'Other' category including allograft transplants such as face, hands, and abdominal wall accounts for 153 procedures (Administration Health Resources & Services, 2025).

Over time, more and more technological developments have also led to rampant human trafficking, but this opens up opportunities for irresponsible people to trade human organs which are considered to be greater than the benefits of human trafficking (DeBellis, 2021). Human trafficking is not new on this earth, even big countries owe it to poor and weak countries where many people are forced to work in plants or factories because of poverty and legal loopholes that affect the emergence of organ trafficking (May, 2017). In certain circumstances, organ trafficking has a scope, namely the context of protection and welfare (Gawronska, 2019). In addition, human trafficking always leads to acts of violence, where many of the victims are women and children, who on the other hand become the weakest parties due to psychological, physical and economic conditions (Hopper & Hidalgo, 2006; J. Jordan et al., 2013). The rise of human trafficking contributes to the illicit trafficking of organs and/or body tissues (Bowden, 2013; O'Neill, 2024). There, trafficking in human organs is inevitable, because it is intended to meet the needs of those who desperately need healthy organs to replace their organs that are no longer functioning properly (F. Ambagtsheer, 2025; J. A. E. Ambagtsheer et al., 2014). Human organ and/or tissue transplantation is a very useful procedure for patients with severe organ disorders (Chen et al., 2016). Although organ and/or tissue transplantation has long been known and continues to develop in the medical world, this medical procedure cannot be done just like that because it still has to pay attention to non-medical aspects, namely religion, law, culture, ethics and morality (Handayani, 2021).

The high demand has made the trafficking of human organs on the black market even more explosive to this day (Bowden, 2013). The organ trade, which includes illegal organ transplants, generates significant income, with conservative annual estimates between USD \$840 million to USD \$1.7 billion and 12,000 illegal transplants. About 10% of all transplants are believed to be illegal transplants (Maginn, 2023). In this case, not only illegal factors are involved, but it is also possible that hospitals and medical staff are involved in the deal (Suparman, 2020). However, humanity is used as an excuse or basis to disguise the involvement of the related elements. Not only are individuals tempted to profit from the sale of human organs, this also causes people to deliberately sell their own organs, because for some people this method is a very easy and fast way to get financial benefits or very large profits (Sever et al., 2022). It is common knowledge that human organ transplants are now becoming more common (Sari, 2021). The transplanted organs are now not only human kidneys and hearts, but now extend to the liver and other organs of the body, including ligaments and nerves which are tissues in the human body (Machado, 2019). In organ and tissue transplantation, it is usually obtained from the patient's family. Specific provisions are usually made for donors, such as organ compatibility between donor and patient, donor health, blood type similarity,

immunity, and so on and reasons why donors must become Close Relatives for reasons of humanitarian ethics.

Under the Indonesian legal framework, organ transplantation is strictly limited to purposes of disease treatment and health recovery, as stipulated in Article 124, Paragraphs (1) and (3) of Law Number 17 of 2023 on Health. Specifically, Article 124(1) affirms that the transplantation of organs and/or bodily tissues is permitted exclusively for curative and restorative purposes, and must be grounded in humanitarian considerations. Furthermore, Article 124 (3) explicitly prohibits the commercialisation or trade of organs and/or tissues under any circumstances. This provision indicates that while the law allows organ or tissue transplantation within the context of medical care, it strictly forbids the commodification of human body parts (Bakhtiar & Maddussila, 2024). Complementing this provision, Government Regulation Number 28 of 2024, which serves as the implementing regulation of Law Number 17 of 2023, provides a more detailed framework governing the ethical, medical, and procedural aspects of organ transplantation. Chapter II, Part 17 (Articles 325 to 381) elaborates on the principles of voluntary donation, donor eligibility, medical evaluation, consent requirements, and post-transplant supervision. These articles emphasise that organ transplantation must be conducted based on free and informed consent, under professional medical supervision, and in accredited health facilities. Moreover, the regulation reinforces the prohibition of organ trading and imposes administrative and criminal sanctions for any violation thereof. Nevertheless, the reality is that the illicit trade in kidneys for transplantation purposes continues to persist. One of the primary contributing factors is the limited availability of living donors who are willing to donate organs without receiving some form of compensation. Consequently, the commercial transaction of kidneys has become a practical albeit illegal solution for many patients (Bakhtiar & Maddussila, 2024). The situation is exacerbated by the widespread circulation of advertisements in print media and online platforms offering human organs, predominantly kidneys, in exchange for financial reward. Despite the legal prohibitions, there remains a regulatory vacuum with regard to the protection of both donors and recipients in cases where rewards are offered or received as a form of “appreciation”. The absence of clear legal safeguards in this context raises significant ethical, legal, and public health concerns, warranting urgent policy attention (Susanto, 2019).

Although legislation prohibiting the trafficking of human organs is already in place, such practices remain prevalent in Indonesia, and in some instances are carried out openly. Furthermore, it is exceedingly rare for cases involving the trafficking of human organs to proceed to court or result in legal sanctions. In light of this reality, this article seeks to examine two main issues: first, the conceptual debate between humanitarian interests and economic justifications in the implementation of organ transplantation; and second, the legal regulatory framework governing human organ transplantation in Indonesia.

## Research Method

This study adopts a normative legal research method, employing both a conceptual approach and a statutory approach. The research relies on secondary data, primarily in the form of legal materials such as statutory regulations, academic research findings, and other relevant scientific publications. The collected materials are analysed qualitatively in order to formulate comprehensive answers to the central issues addressed in this article. Through this analytical framework, the study aims to contribute to ongoing academic discourse on the ethical, legal, and economic dimensions of organ transplantation in Indonesia.

## Results and Discussion

### A. Humanitarian Interests versus Economic Necessities

In recent decades, organ transplantation has emerged as a highly effective medical intervention for patients suffering from end-stage organ failure. Essentially, organ transplantation serves as a life-prolonging procedure, particularly for individuals facing severe health conditions such as heart, lung, and kidney disease (Kobashigawa et al., 2021). Clinically, however, the transplantation process is not without complications, especially as the recipient's body undergoes complex physiological adjustments post-operation (Han et al., 2022; Kastelz et al., 2015; Yang et al., 2020). From a psychological perspective, a successful transplantation fosters meaningful interactions between patients, donors, and medical personnel often representing a symbolic 'ritual' of medical success and compassion in the effort to preserve human life (Bradford & Boyd, 2020; Kögel, 2024; Leeper et al., 2024).

Globally, the demand for organ transplants continues to grow exponentially, with waiting lists for patients requiring life-saving organs increasing daily (Cohen, 2017; Fakkert et al., 2015). The latest data of 2022 from the Global Observatory on Donation and Transplantation indicate that more than 150 000 solid organ transplants ( $\leq 10\%$  of global needs) are performed worldwide annually, which is an increase of 52% compared with 2010 (World Health Organization (WHO), 2024). This unmet demand has contributed to the proliferation of organ trafficking, which has become one of the most pressing transnational crimes of the 21st century. According to the World Health Organization (WHO), approximately 10,000 kidneys are illegally sold across the globe each year equivalent to one illegal transplant occurring every hour (Jafar, 2009). It is estimated that organ trafficking accounts for 5–10 per cent of all kidney transplants performed annually. The Transnational Crime Report further indicates that there are approximately 11,966 illegal organ transplants per year, generating illicit profits ranging from USD 600 million to USD 1.2 billion (F. Ambagtsheer et al., 2013).

Despite the advancement of medical science and the liberalisation of policies such as the acceptance of brain stem death as a legal basis for organ donation these measures have not adequately addressed the global problem of organ trafficking (Amahazion, 2016; Gardiner et al., 2021; Manara & Thomas, 2020). The scarcity of



legally available organs persists due to various factors, including inadequate legal frameworks, persistent human trafficking crimes, prohibitive medical costs, and premature death (Greenbaum et al., 2017; Langran, 2021). In some cases, this shortage has led to the extreme criminal acts of abduction and murder for the purpose of forced organ harvesting (Duan, 2022; Obani & Okunrobo, 2022). Reports from several countries reveal that medical professionals and hospitals have, at times, been complicit in illegal organ trade networks, further complicating ethical and legal accountability (Rudge et al., 2012). Such involvement undermines public trust and limits the availability of organs for genuinely humanitarian purposes, exposing the fragility of moral boundaries in the practice of transplantation (Kierans, 2016).

In contemporary ethical discourse, human dignity remains the central tenet in evaluating the acceptability of biotechnological practices, including organ transplantation (M. C. Jordan, 2010). While every effort to save a life or alleviate suffering should be viewed as a morally justified act, the commercialisation of organ donation framed as "buying and selling life" raises profound ethical concerns (Gillespie, 2022). Some arguments suggest that compensating donors may serve the dual purpose of preserving two lives: that of the recipient and the financially struggling donor (Shaw & Bell, 2015). In more extreme rationalisations, individuals claim that selling organs is preferable to allowing their families to endure poverty a poverty perceived as a prolonged and painful demise (Rowley et al., 2021). However, such reasoning reflects a flawed paradigm that reduces human dignity to mere economic transaction (Dierksmeier, 2015). Organ retrieval from deceased individuals, with prior consent or after a legal declaration of brain stem death, is not inherently a violation of human dignity (Gardiner et al., 2021). On the contrary, prohibiting such practices may indirectly exacerbate the problem by fuelling the black market and incentivising illegal trade. In effect, moral prohibitions without realistic legal alternatives may drive vulnerable individuals into situations where their bodies become commodities. The situation is even more concerning when law enforcement authorities, who should act as custodians of the law, are found to be complicit in commercialised transplants. What was initially a humanitarian medical act becomes, under such circumstances, a transactional and legally reprehensible violation of human dignity.

On the other hand, the assertion that consent is unnecessary and that individuals should be free to undergo organ transplantation without restriction is equally unfounded (Robertson, 2017). Fundamentally, such a proposition contradicts the principle of autonomy. When referring to the consideration of conditions, the consequences and even the possibilities that a person's decision to sell his organs cannot be separated by reason of referring to the context that the organ transplant is the result of improper influence or inducement. From an ethical standpoint, it is often argued that an individual is the primary authority in determining what is best for themselves, provided that such decisions are made freely and without external coercion. If in a condition the donor does not give consent for organ transplantation

voluntarily or is based on an incentive to get economic benefits, the patient as an organ transplant recipient will also not give consent for an organ transplant even though the nature of the patient has urged him to save his life. On the other hand, in a condition where the donor does not give consent but due to compelling conditions such as poverty and saving the lives of other dependent family members, is this also a violation of the principle of freedom to give consent? Then is it only the donor who must be criminalized due to the encouragement and efforts to save the life of his family from the threshold of poverty which in fact is also a way to achieve a sustainable life?. Where is the position of the patient who receives an organ transplant who is willing to give anything in order to save his life in a medical context only by means of an organ transplant that is able to save the patient's life. Questions like these provide an overview of the ethical conditions for evaluating whether or not an organ transplant is based on the principle of autonomy.

The facts so far provide an illustration that people who are in conditions of brutal poverty will become a way and a strong impetus to sell organs which are economically very high in value. With the condition of severe poverty, and the social deprivation that has occurred in the public lately, people who are in this position will think that their whole body can be handed over to others in order to save their lives from the threshold of poverty (Mohamed et al., 2022). In addition, also that in conditions of severe poverty, they are in a situation of endless suffering such as poverty, hunger and humiliation of social status. So far, the context of the problem of poverty has not been able to be answered in real terms for the global public so that people who are in the poor category are willing to sell their organs which are the answer to the suffering they feel. This fact is clear evidence that exploitation of the poor has been going on for generations and it seems that it will become a culture that will not disappear from public life, both today and in the future. The poor will continue to sell everything they have in order to make a living. It is precisely the global public that does not provide them with a clear and dignified means for people in poverty to seek humane measures to sustain their lives. For this reason, in the context of prohibiting the sale of organs for the poor, it will raise the question that what is the reason for them to prohibit the poor from trying all means to sustain their lives in ways and arrangements that they think are good and available to do? But if in the end, they should not take action to sell their organs in order to sustain their lives. Therefore, the empty spaces that separate the rich and the poor should not be visible so as to provide an excuse for the poor not to take action in the form of selling their organs.

In another argument which states that it is permissible to carry out organ transplantation, if it places restrictions on those who can buy organs, it is permissible to carry out organ transplants. This concept is also not the best way because on the one hand, organ transplantation does not rule out the possibility that it can take place from the family circle itself. Basically, the family performs organ transplants based on love for family members and they are willing to do anything to save family members who

are under certain conditions.

## **B. Regulating The Practice of Organ Transplantation in Indonesia**

The sale and purchase of human organs is not a novel phenomenon within the framework of Indonesian law. In practice, both the facts and underlying motives associated with the trade in human organs can be observed across digital platforms, where actors either individuals or organised networks operate with relative ease. The problem of organ trafficking is not unique to Indonesia, and several key issues observed globally may provide further insight into the complexity of this phenomenon (Andorno, 2018; Aronowitz & Isitman, 2013; Crowley-Matoka & Lock, 2006):

- 1) Human organs are often treated as economic assets, particularly when the donor is a living individual. This raises substantial ethical concerns, as the commodification of the human body conflicts with core principles of biomedical ethics, bioethics, and human dignity. In many cases, the media trivialises or misrepresents these concerns, contributing to the perception that fears surrounding organ trafficking are unfounded or exaggerated. Such narratives obscure the real ethical dilemmas posed by the trade in human organs, especially when consent is influenced by socio-economic vulnerability.
- 2) The increasing demand for human organs continues to outpace the available supply. Since the first successful kidney transplant in 1954 for a patient with renal insufficiency, medical advancements have expanded the scope of organ transplantation to include the liver, eyes, heart, and other vital organs. However, the imbalance between growing demand and the limited number of donors remains a pressing issue. This persistent shortage has created a market in which the illicit procurement and sale of organs are driven by desperation and opportunism alike.
- 3) The sale of human organs is a direct violation of prevailing legal norms in Indonesia. While cases of living organ donation are rarely publicised domestically, international attention on illegal transplants has been significantly more pronounced. Indonesian law clearly prohibits the commercialisation of organs and bodily tissues. Under Law No. 17 of 2023 on Health, organ transplantation must be conducted solely for therapeutic purposes and within a humanitarian framework, with any form of sale or trade explicitly forbidden.

The sale and purchase of human organs constitutes a serious criminal offence under Indonesian law, as clearly regulated in Law No. 17 of 2023 on Health. This legal framework responds to growing concerns over the exploitation of vulnerable individuals through illegal transplant practices (Salmah et al., 2021). Notably, Article 124 paragraph (1) of the law explicitly states that the transplantation of organs and/or body tissues shall be conducted solely for the purpose of curing illness and restoring health, and must be grounded exclusively in humanitarian purposes. The legal emphasis on humanitarianism reflects Indonesia's normative commitment to uphold medical ethics and prevent the commodification of human body parts. To remove any



ambiguity, Article 124 paragraph (3) unequivocally prohibits any form of commercialisation or trade involving organs or body tissues, thereby ensuring that all transplantation practices are governed by ethical and non-commercial motives.

Further strengthening this prohibition, Article 432 of Law No. 17 of 2023 introduces specific criminal sanctions aimed at deterring violations in this area. The article distinguishes between two key offences: the commercialisation of transplantation procedures and the direct trade in organs. Paragraph (1) provides that any person engaged in the commercialisation of transplantation may face imprisonment for up to five years or a fine of up to Rp 500,000,000. This provision targets intermediaries such as brokers or facilitators who profit from referring or organising transplant procedures. Meanwhile, paragraph (2) imposes harsher penalties up to seven years' imprisonment or a fine of Rp 2,000,000,000 for any person who sells or purchases human organs or tissues, regardless of the reason. The phrase "for any reason" signals a zero-tolerance approach by the legislature, indicating that economic hardship or alleged altruism under duress cannot justify the trade in human organs. Offenders and the entire chain involved in organ trafficking can also be subject to criminal law (Jones, 2019). Ironically, transplants for humanitarian purposes are actually traded. In Law 17 of 2023 does not explain and define the concept of human value in organ transplantation. However, commercial kidney transplants run counter to human values, which are the main focus of organ transplantation, especially for living donors. The word "commercial" according to the online Indonesian dictionary is an activity that is related to or intended to be traded and has a commercial value that sometimes sacrifices other values, including humanity (Indonesia, 2025). In relation to trade, it must be associated with a profit. Therefore, anyone who becomes a donor but seeks profit by buying and selling to get money or by taking advantage of the patient's debt to get rewards or compensation after donating his kidney to a patient in need can be classified as commercial. This fulfills the element of a commercial definition that sacrifices social values, namely the sacrifice of the value of will. Police are also expected to take firm action to enforce the law in this area. Apart from donors and syndicate members, the police should not hesitate to investigate the alleged involvement of other parties, including health workers, doctors, or hospitals, in the kidney buying and selling chain. The principle of presumption of innocence will of course still be adhered to in the investigation (Wulandari et al., 2020). In addition, all health stakeholders are also challenged to address this problem with solutions that do not conflict with morals, laws and ethics (Berwick, 2020; Morley et al., 2021; Shekhani & Lanewala, 2021).

The phenomenon of kidney trafficking in Indonesia sends a compelling message to the government to intensify its supervision and regulatory response, particularly with regard to the health sector's legal framework. The promulgation of Government Regulation No. 28 of 2024 which repealed Government Regulation No. 53 of 2021 and its predecessor Government Regulation No. 18 of 1981 reflects the state's renewed commitment to establishing a comprehensive and ethically grounded organ and tissue

transplantation system. As stipulated in Article 325, organ and/or tissue transplantation may only be performed in the context of curing disease and restoring health. Furthermore, Article 326 affirms that such procedures must be carried out solely for humanitarian purposes, and that under no circumstances shall organs and/or tissues be commercialised or traded.

A critical provision, Article 4 paragraph (1) of the former regulation, is effectively maintained and expanded in Article 326, which underscores that the central and regional governments bear full responsibility for organising and implementing organ and tissue transplantation programmes. The aim of this regulatory structure is to guarantee public access to safe, voluntary, equitable, and ethically administered transplantation services. It further seeks to enhance the availability of organs and tissues to meet therapeutic needs, while simultaneously protecting the dignity, privacy, and health of both donors and recipients.

Government Regulation No. 28 of 2024 also mandates that healthcare facilities play a proactive role in facilitating ethical donation systems by encouraging public participation through structured donor movements. In line with this, Article 327 delineates the procedural requirements for living and deceased donors. For living donors, the regulation requires that they be in good health, as verified by a medical certificate, be at least 18 years of age, and provide a written declaration expressing their willingness to donate voluntarily and without expectation of compensation. The donor must also obtain formal consent from their next of kin, demonstrate understanding of the risks, contraindications, medical procedures, and post-operative lifestyle adjustments, and declare that no commercial transaction or agreement implying remuneration has taken place between themselves and the recipient. The strict administrative and ethical standards set out in Articles 327 and 337 aim to eliminate any avenue for exploitative or coercive practices and uphold the integrity of the donation process. By embedding these provisions into national regulation, Government Regulation No. 28 of 2024 not only codifies the prohibition of organ trade, but also institutionalises safeguards that affirm the principle of human dignity and promote a transplantation system based exclusively on humanitarian considerations.

The primary rationale behind the prohibition of human organ sales lies in the restriction of absolute individual autonomy in making life choices and, more importantly, in the protection of human dignity. This prohibition is intended to prevent individuals particularly those in socio-economically vulnerable positions from being compelled, either by force or circumstance, to commodify their own bodies for financial gain. Allowing such practices would blur the boundary between moral autonomy and economic desperation, thereby reducing the human body to a mere object of trade. Although organ donation is permitted under ethical and legal provisions, especially when it aims to save lives or restore health, such acts must always be grounded in humanitarian values. Organ donation should be performed voluntarily, without coercion or financial compensation, and solely for the benefit of those in need. The

ethical foundation of organ donation rests upon altruism the willingness to give without expectation of return. Introducing commercial incentives undermines this altruistic principle, transforming what should be an act of compassion into one of economic exploitation. Permitting commercial organ transactions not only erodes the moral integrity of altruism but also poses serious risks to the health and life of donors, particularly where consent is uninformed or procedures are conducted in unsafe, unregulated conditions. In many instances of organ trade, donors are inadequately informed of the long-term medical consequences or are pressured into agreements by financial hardship. As a result, their consent cannot be considered genuinely voluntary. Such exploitation is most prevalent among the poor, who are disproportionately targeted by organ trafficking networks operating outside legal and medical oversight.

Human organs are not commodities and therefore must not be treated as tradable goods. Their sale is prohibited because such practice gives rise to profound ethical, legal, and public health concerns. Ethically, the commodification of the human body violates the intrinsic value of personhood; legally, it contravenes both domestic and international human rights principles; and from a public health perspective, it endangers both donors and recipients by encouraging unsafe medical practices and unregulated transplants. For these reasons, the prohibition on organ sales must be strictly enforced. Illegal organ trade not only threatens the lives of donors but also undermines the fundamental principles of human rights and medical ethics. Upholding this ban reaffirms that the human body is sacred, not a marketable asset, and that respect for human dignity must always prevail over economic interest.

## Conclusion

The regulation of human organ transplantation in Indonesia continues to evolve in response to ethical, legal, and social challenges posed by the illicit trade in organs. Despite advancements in medical technology and legislative reforms, such as the enactment of Law No. 17 of 2023 on Health and Government Regulation No. 28 of 2024, the practice of commercial organ trafficking persists. These legal instruments provide a clear framework that permits organ and tissue transplantation exclusively for therapeutic and humanitarian purposes, while strictly prohibiting any form of commercialisation. The classification of donors, the procedural requirements, and the imposition of criminal sanctions are all intended to reinforce ethical medical practices and safeguard human dignity. However, the reality of poverty, unequal access to healthcare, and the high demand for transplants continue to fuel exploitative transactions, particularly involving vulnerable individuals. The commodification of the human body undermines the foundational principles of autonomy and voluntariness in donation. This dilemma necessitates a more robust, multidimensional approach beyond criminalisation that addresses structural inequalities, provides socio-economic support, and fosters a transparent, ethical donation system. Law enforcement must be proactive and consistent in investigating and prosecuting trafficking cases, including those

involving health professionals and institutions.

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