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THE INFLUENCE OF EDUCATION, HEALTH, SPENDING AND POVERTY ON THE HDI OF LAMPUNG 2010-2024: ISLAMIC ECONOMIC PERSPECTIVE

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ABSTRACT

Human development is an important indicator in measuring the success of regional development. The Human Development Index (HDI) measures the quality of life of the community through the dimensions of health, education, and a decent standard of living. Lampung Province experienced an increase in the HDI during 2010–2024, but still faces issues of poverty and the effectiveness of government spending in the education and health sectors. This study aims to analyze the effect of government spending in the education, health, and poverty levels on the HDI in Lampung Province in 2010–2024 from an Islamic economic perspective. The study uses a quantitative approach with an associative research type. Data are secondary time series data for the period 2010–2024 from the Central Statistics Agency (BPS) and the Directorate General of Fiscal Balance (DJPK). The analysis uses multiple linear regression with natural logarithmic transformation through EViews 12. The results show that education spending has a positive but insignificant effect on the HDI, with a coefficient of 0.007918 and a probability of 0.5449. Health spending has a positive but insignificant effect, with a coefficient of 0.000998 and a probability of 0.9366. Conversely, poverty has a negative and significant effect on the HDI, with a coefficient of -0.233484 and a probability of 0.0006. Simultaneously, all three variables have a significant effect on the HDI with a Prob(F-statistic) of 0.000004 and an R-squared of 0.914611. These findings indicate that nominal increases in education and health spending have not been a significant factor in increasing the HDI, while poverty alleviation has a stronger influence on human development. This research contribution emphasizes the importance of the effectiveness of public spending and poverty alleviation. From an Islamic economic perspective, these findings are in line with maqāṣid al-syarī'ah through the maintenance of reason (ḥifẓal-'aql), soul (ḥifẓal-nafs), and wealth (ḥifẓal-māl) to realize the welfare of society in a just and sustainable manner

A. INTRODUCTION

Human development is one of the main objectives of regional development because development success is measured not only by economic growth but also by the government's ability to improve the quality of life of the community. The Human Development Index (HDI) is one indicator used to describe human development achievements through the dimensions of health, education, and a decent standard of living. The human development theory developed by the UNDP explains that development success is measured not only by economic growth but also by improvements in the quality of human life. The United Nations Development Programme (UNDP) introduced the Human Development Index (HDI) as a composite indicator used to measure the quality of human development through three main dimensions: a long and healthy life, knowledge, and a decent standard of living. The higher the HDI value of a region, the better the quality of life of the people in that region (Programme, 2023).

Government spending on health is a crucial instrument for human development. Good health enhances an individual's ability to engage in economic activities, obtain education, and increase productivity. From the perspective of Human Capital Theory, health is a form of investment in human capital because healthy individuals have greater productive capacity. KPoverty is a crucial factor determining the quality of human development. Poverty can limit a community's ability to meet the needs of education, health, and a decent standard of living. This condition can create a mutually reinforcing relationship between low income, limited access to education and health, and the low quality of human resources. In this context, poverty reduction is not only a social policy objective but also an integral part of a human development strategy. Based on data from the Central Statistics Agency (BPS), the poverty rate in Lampung Province tended to decline from 18.94 percent to 10.62 percent between 2010 and 2024. However, this figure is still quite high compared to the average for several provinces on the island of Sumatra. During the 2020 Covid-19 pandemic, the poverty rate increased again due to the economic slowdown and rising unemployment (Lampung, 2025). High poverty rates make it difficult for people to access education and health services, resulting in a low quality of life (Mahendra, 2020). The vicious circle of poverty theory explains that poverty can form a cycle that is difficult to break because low income will lead to low education and health, which ultimately reduces community productivity (Nurkse, 1953).

In the concept of maqāṣid al-syarī'ah, development is not only directed at achieving material growth, but at realizing benefits and preventing harm to humans. Maqā thinkingṣid developed through the contributions of a number of scholars. Al-Ghazali identified five basic needs that must be protected, namely religion (*ḥifẓal-din*), soul (*ḥifẓal-nafs*), reason (*ḥifẓal-'aql*), descendants (*ḥifẓal-nasl*), and property (*ḥifẓal-māl*). This framework is one of the main foundations in the development of maqā theory.ṣid al-syarī'ah (Al-Ghazali, 1997). This idea was then developed more systematically by Al-Shatibi through the concept of levels of needs.*ḍarūriyyāt*,*ḥājiyyāt*, and ta*ḥsins*. For Al-Shatibi, maqāṣid is related to the objectives of sharia in realizing human benefit and preventing damage. Al-Shatibi's thinking was then studied and developed by Al-Raysuni who placed maqāṣid as a framework for understanding the goals and intentions of Islamic law in realizing human welfare (Al-Raysuni, 2005). The next development is seen in the thinking of Ibn Ashur who expanded the discussion of maqāṣid in order to respond to more complex social life issues. A contemporary

approach was also developed by Jasser Auda through a systems approach. Auda views maqāṣid through system characteristics such as wholeness, multidimensionality, openness, and purposefulness, so that maqāṣid can be used to read social issues more comprehensively and contextually (Ibn Ashur S El-Mesawi, 2006). Although these various theories provide a strong basis for understanding maqāṣid al-syarī'ah, this study chooses Umer Chapra's perspective because the focus of the research is on human development, public policy, economic welfare, and distribution of development benefits.

The choice of Chapra does not mean setting aside the idea of maqāṣid previously. On the other hand, Chapra's thought is positioned as a development of the maqā perspectiveṣid, which more directly links the objectives of sharia to economic development and human welfare. Chapra explains that development from an Islamic perspective cannot be reduced to economic growth alone. Development must be directed at fulfilling various elements of human well-being, including the human self, religion, reason, descendants, and wealth. This focus makes Chapra's theory relevant to research examining education, health, poverty, and the Human Development Index (HDI). Within Chapra's framework, human development is directed at achieving welfare through the maintenance of various basic human needs. Education spending is related to*ḥifẓal-'aql*because education plays a role in increasing knowledge, thinking skills, and the quality of human resources. Health spending is related to*ḥifẓal-nafs*because the provision of health services is part of the effort to maintain the life and health of the community. Meanwhile, poverty alleviation is related to*ḥifẓal-māl*Because poverty limits people's ability to meet basic needs and maintain economic well-being, the HDI can therefore be used as an empirical indicator to assess human development outcomes, encompassing the dimensions of education, health, and living standards. This framework allows Chapra's perspective to serve not only as a normative interpretation but also as a foundation for explaining the relationship betweenpublic policy, socio-economic conditions, and human development.

B. METHOD

This study uses a quantitative approach with an associative approach. This approach aims to examine the influence of government spending in the education sector, government spending in the health sector, and poverty levels on the Human Development Index (HDI) in Lampung Province. According to Sugiyono, quantitative research is a research method based on the philosophy of positivism to examine a specific population or sample using numerical data analyzed statistically. Meanwhile, associative research aims to determine the relationship or influence between two or more variables (Sugiyono, 2022).

The population in this study is all data on the Human Development Index, government spending in the education sector, government spending in the health sector, and poverty levels in Lampung Province. The research sample uses a saturated sampling technique (census), namely all annual time series data for the period 2010–2024 totaling 15 observations are used as research samples. The saturated sampling technique is used when all members of the population are used as research samples. The data used are secondary data in the form of time series for the period 2010–2024. Data on the Human Development Index and poverty levels were obtained from the publication of the Central Statistics Agency (BPS) of Lampung Province, while data on government spending in the education and health sectors were obtained from the

Directorate General of Fiscal Balance (DJPK) of the Ministry of Finance of the Republic of Indonesia.

Data collection techniques were conducted through documentation and literature studies. The documentation study was conducted by collecting statistical data published by the Lampung Province Central Statistics Agency and the Directorate General of Fiscal Balance. Meanwhile, the literature study was conducted by reviewing books, scientific journals, articles, and various literature relevant to the research topic to strengthen the theoretical foundation and discussion of the research. Data validation was carried out through source triangulation by comparing data obtained from various official government publications. The data used came from official and credible institutions, namely the Central Statistics Agency and the Directorate General of Fiscal Balance, thus having a high level of validity and reliability as research data sources (Sekaran S Bougie, 2019).

The primary analytical method used is multiple linear regression to determine the effect of government spending in the education sector, government spending in the health sector, and poverty levels on the Human Development Index in Lampung Province. The regression equation model used is as follows:

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + e$$

Information:
Y = Human Development Index (HDI)
α = Constant
β_1, β_2, β_3= Regression coefficient
X_1= Government spending on education
sector X_2= Government spending on health
sector X_3= Poverty level
e = error ter

Hypothesis testing is conducted using partial tests (t-test), simultaneous tests (F-test), and the coefficient of determination (R^2). The t-test is used to determine the effect of each independent variable on the dependent variable partially. The F-test is used to determine the effect of all independent variables on the dependent variable simultaneously. Meanwhile, the coefficient of determination (R^2) is used to measure the ability of the independent variables to explain variation in the dependent variable.

C. RESULTS AND DISCUSSION

This study aims to analyze the influence of government spending in the education sector, government spending in the health sector, and poverty levels on the Human Development Index (HDI) of Lampung Province in 2010–2024. The analysis method used is multiple linear regression with natural logarithm (LN) transformation using the EViews application. The regression model is used to determine the relationship between independent variables and dependent variables partially and simultaneously. The results of data processing are as follows.

1. Descriptive Statistical Analysis

Table 2.
Descriptive Statistical Analysis Results

Description of	LN_X1	LN_X2	LN_X3	LN_Y
Mean	29.09706	26.48738	7.200477	8.829178
Median	29.58904	26.70716	7.173192	8.819518
Maximum	29.85180	27.38398	7.546446	8.897409
Minimum	27.72846	25.60952	6.967909	8.759512
Std. Dev.	0.828722	0.627542	0.158769	0.045269
Observations	15	15	15	15

Source: E-views 12 output results, (data processed 2026)

Notes : LN_X1 Education
: LN_X2 Health
: LN_X3 Poverty
: LN_Y Human Development Index

Based on Table 2, the variable Government Expenditure in the Education Sector (LN X1) has an average value of 29.09706, a median of 29.58904, a maximum of 29.85180, a minimum of 27.72846, and a standard deviation of 0.828722. A standard deviation value smaller than the average indicates a relatively low variation in education expenditure during the study period. The variable Government Expenditure in the Health Sector (LN X2) has an average of 26.48738, a median of 26.70716, a maximum of 27.38398, a minimum of 25.60952, and a standard deviation of 0.627542. These results indicate that variations in health expenditure are relatively low and do not experience extreme fluctuations. The Poverty Level variable (LN X3) has an average of 7.200477, a median of 7.173192, a maximum of 7.546446, a minimum of 6.967909, and a standard deviation of 0.158769. These values indicate that the poverty level during the study period experienced relatively little change. Meanwhile, the Human Development Index (LN Y) has an average of 8.829178, a median of 8.819518, a maximum of 8.897409, a minimum of 8.759512, and a standard deviation of 0.045269. The smallest standard deviation value indicates that the HDI is the variable with the lowest level of variation and tends to be stable during the 2010–2024 period. Overall, all variables have a standard deviation smaller than their average value. This indicates that the data distribution is relatively low and the data tends to be homogeneous. These conditions support the use of data for further analysis, namely classical assumption testing and multiple linear regression.

2. Classical Assumption Test

a. Normality Test

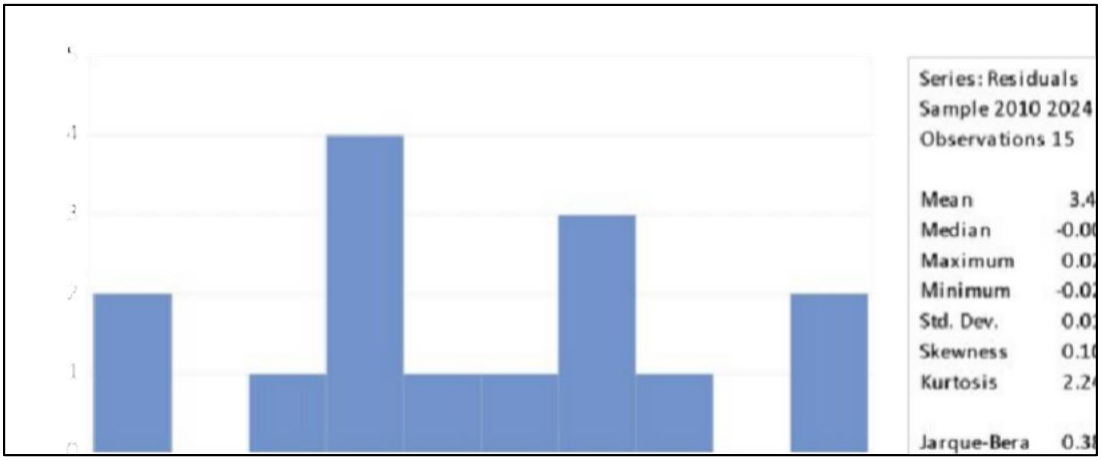


Figure 3.
Normality Test Results
Source: E-views 12 Output Results, (data processed 2026)

Based on the figure above, the probability value (Jarque-Bera) is greater than 0.05, namely 0.826, indicating that the residual data is normally distributed. Therefore, it can be concluded that the regression model meets the assumption of normality and is suitable for further analysis.

b. Multicollinearity Test

Table 3.
Multicollinearity Test Results

Variable	Coefficient Variance	Uncentered VIF	Centered VIF
C	0.361439	24343.45	NA
LN_X1	0.000161	9168.409	6.936200
LN_X2	0.000150	7104.440	3.720037
LN_X3	0.002385	8331.957	3.779161

Source: E-views 12 Output Results, (data processed 2026)

Based on the test results above, the probability value of each variable is still within the acceptable limit and the Centered VIF value of all variables is less than 10, namely LN_X1 of 6.936200, LN_X2 of 3.720037, and LN_X3 of 3.779161. Thus, it can be concluded that the regression model does not experience multicollinearity so that the model is suitable for use.

c. Heteroscedasticity Test

Table 4.
Heteroscedasticity Test Results

F-statistic	1.334530	Prob. F(3,11)	0.3131
Obs*R-squared	4.002632	Chi-Square Prob.(3)	0.2612
Scaled explained S	1.344047	Chi-Square Prob.(3)	0.7187

Source: E-views 12 Output Results, (data processed 2026)

It is known that based on the test results using the Breusch-Godfrey Serial Correlation LM Test, it was obtained that the Prob. value.*Obs*R-squared* of 0.2612, which is greater than 0.05. Therefore, it can be concluded that the regression model does not experience heteroscedasticity. This indicates that the residual variance is constant and the regression model is suitable for use.

d. Autocorrelation Test

Table 5.
Autocorrelation Test Results

F-statistic	1.842962	Prob. F(1,10)	0.2044
Obs*Rsqued	2.334250	Chi-Square Prob.(1)	0.1266

Source: E-views 12 Output Results, (data processed 2026)

The autocorrelation test was conducted using the Breusch-Godfrey Serial Correlation LM Test. The test results revealed a Prob Obs*R-Square value of 0.1266. This value is greater than 0.05, thus concluding that the regression model does not experience autocorrelation. This indicates that the regression model meets the classical assumptions.

3. Multiple Linear Regression Test Results

Table 6.

Variable	Coefficient	Std. Error	t-Statistic	Prob.
C	10.25354	0.601198	17.05517	0.0000
LN_X1	0.007918	0.012675	0.624704	0.5449
LN_X2	0.000998	0.012259	0.081426	0.9366
LN_X3	-0.233484	0.048836	-4.780988	0.0006

R-squared	0.914611	Mean dependent variable	8.829178
Adjusted R-squared	0.891323	SD dependent var	0.045269
SE of regression	0.014924	Akaike info criterion	-5.348574
Sum squared residual	0.002450	Schwarz criterion	-5.159760
Log likelihood	44.11430	Hannan-Quinn criter.	-5.350585
F-statistic	39.27393	Durbin-Watson stat	1.057185
Prob(F-statistic)	0.000004		

Based on the results of data processing, the following regression equation was obtained:

LN(Y)= 10.25354 + 0.007918LN (X1) + 0.000998LN (X2) – 0.233484LN (X3) + e

The interpretation of the regression equation is as follows:

The constant value of 10.25354 indicates that if the variables of government spending in the education sector, government spending in the health sector, and poverty rate are considered constant, then the HDI value is 10.25354. The regression coefficient of the government spending in the education sector variable of 0.007918 indicates that every 1% increase in government spending in the education sector will increase the HDI by 0.007918%, assuming other variables remain constant. The regression coefficient of the government spending in the health sector variable of 0.000998 indicates that every 1% increase in government spending in the health sector will increase the HDI by 0.000998%, assuming other variables remain constant. The regression coefficient of the poverty rate of -0.233484 indicates that every 1% increase in the poverty rate will decrease the HDI by 0.233484%, assuming other variables remain constant. These results indicate that the poverty rate variable has a negative relationship with the HDI, while government spending in the education and health sectors has a positive relationship with the HDI.

3. Hypothesis Testing

a. Partial Test (t)

Table 7.
t-Test Results

Variable	Coefficient	Std. Error	t-Statistic	Prob.
C	10.25354	0.601198	17.05517	0.0000
LN_X1	0.007918	0.012675	0.624704	0.5449
LN_X2	0.000998	0.012259	0.081426	0.9366
LN_X3	-0.233484	0.048836	-4.780988	0.0006

Source: E-views 12 Output Results, (data processed 2026)

Based on the results of the t-test, it is known that the variable of government spending in the education sector (LN_X1) has a probability value of 0.5449 > 0.05 so it does not have a significant effect on the HDI. The variable of government spending in the health sector (LN_X2) has a probability value of 0.9366 > 0.05 so it also does not have a significant effect on the HDI. Meanwhile, the variable of poverty level (LN_X3) has a probability value of 0.0006 < 0.05 so it has a negative and significant effect on the HDI. This shows that the higher the poverty level, the lower the HDI will be.

b. Simultaneous Test (f)

Table 8.
f Test Results

c.

R-squared	0.914611Mean dependent variable	8.829178
Adjusted R-squared	0.891323SD dependent var	0.045269
SE of regression	0.014924Akaike info criterion	-5.348574
Sum squared residual	0.002450Schwarz criterion	-5.159760
Log likelihood	44.11430Hannan-Quinn criter.	-5.350585
F-statistic	39.27393Durbin-Watson stat	1.057185
Prob(F-statistic)	0.000004	

Source: E-views 12 Output Results, (data processed 2026)

Based on the regression results, the Prob (F-statistic) value was 0.000004 < 0.05. Thus, it can be concluded that the variables of government spending in the education sector, government spending in the health sector, and poverty levels simultaneously have a significant effect on the human development index in Lampung Province in 2015-2024.

c. Coefficient of Determination Test (r2)

Table 9.

Results of the Coefficient of Determination (r2)

d.

R-squared	0.914611Mean dependent variable	8.829178
Adjusted R-squared	0.891323SD dependent var	0.045269
SE of regression	0.014924Akaike info criterion	-5.348574
Sum squared residual	0.002450Schwarz criterion	-5.159760
Log likelihood	44.11430Hannan-Quinn criter.	-5.350585
F-statistic	39.27393Durbin-Watson stat	1.057185
Prob(F-statistic)	0.000004	

Source: E-views 12 Output Results, (data processed 2026)

Based on the table above, the R-squared value is 0.914611, or 91.46%. This indicates that government spending on education, government spending on health, and poverty levels can explain 91.46% of the variation in changes in the HDI, while the remaining 8.54% is explained by other variables outside the research model.

Analysis/Discussion

1. The Influence of Government Spending in the Education Sector on the Human Development Index (HDI)

The regression results show that government spending in the education sector has a coefficient of 0.007918 with a probability value of 0.5449, meaning that government spending in the education sector has a positive coefficient, but does not have a significant effect on the Human Development Index (HDI) of Lampung Province for the 2010–2024 period. This result indicates that an increase in the education budget has not been able to directly increase the HDI. Thus, the first problem formulation regarding the effect of government spending in the education sector on the HDI can be answered that education spending has not had a significant effect on increasing the HDI of Lampung Province. Theoretically, this result is not fully in accordance with the Human Capital Theory proposed by Theodore W. Schultz and Gary S. Becker, which states that investment in education will improve the quality of human resources, productivity, and community welfare (Becker, 1993). However, the benefits of education are generally long-term so that its impact on human development is not always visible in the same period. In addition, the effectiveness of budget use, the quality of education programs, and equal access to education between regions also determine the success of human development.

In the perspective of maqāṣid al-syarī'ah, the results can be analyzed through*ḥifẓal-'aql,*namely, the maintenance of reason. Education serves to increase human knowledge, skills, and capacity. However, research results show that education spending as a fiscal input has not been proven to significantly increase the Human Development Index (HDI). This means that the policy issue is not simply a lack of budget, but how that budget is converted into educational outcomes. The intersection with maqāṣThe concept of id becomes broader when

education is not solely focused on academic ability. Quality education can also include character building, ethics, and religious education.

2. The Influence of Government Spending in the Health Sector on the Human Development Index (HDI)

The results of the study indicate that government spending in the health sector has a positive but insignificant effect on the Human Development Index (HDI) in Lampung Province. Therefore, the second research question can be answered by stating that increased health spending has not significantly impacted the HDI during the study period. According to Human Capital Theory, health is a form of investment in human resources that plays a role in increasing productivity and the quality of life of the community. Theoretically, increased health spending should be able to increase life expectancy, which is one of the indicators that form the HDI. However, the results of the study indicate that the increase in the health budget has not been fully able to directly improve human development. This finding is in line with MI Pratama's research which states that the health sector has a relationship with human development.(Primary, 2025). Within the framework of maqāṣid al-syarī'ah, health is related toḥifẓal-nafs, namely the preservation of the soul. Health spending is essentially directed at ensuring the public receives adequate health services. However, the insignificant coefficient indicates that budget increases alone are not sufficient to generate improvements in the HDI. Maqā analysisṣid also needs to be expanded onḥifẓal-nasl, namely the maintenance of offspring or the continuity of generations. Maternal and child health policies, stunting prevention, nutritional fulfillment, reproductive health, and basic health services are the meeting point between health spending and*ḥifẓal-nasl*. Thus, the effectiveness of health spending is not only assessed by the amount of funds spent, but also by its ability to protect the health of the community and future generations. These findings have important implications. The government needs to direct health spending toward preventive and promotive programs, particularly maternal and child health, nutrition, sanitation, disease prevention, and equitable distribution of health services to the poor. Such policies are closer to the objectives of the maqā (lawful)ṣid because it places the protection of life and generations as the outcome to be achieved.

3. The Influence of Poverty Level on Human Development Index

The poverty rate has a coefficient of -0.233484 with a probability of 0.0006. These results indicate that poverty has a negative and significant effect on the Human Development Index (HDI) of Lampung Province. Thus, increasing poverty has been shown to be a major obstacle to human development..This finding is consistent with Ragnar Nurkse's Vicious Circle of Poverty theory, which explains that poverty leads to low levels of education, health, and productivity, thus hindering development (Nurkse, 1953). From a maqā perspective,ṣid al-syarī'ah, the findings are mainly related toḥifẓal-māl, because poverty limits people's ability to meet basic needs and obtain economic resources. However, its impact does not stop at the aspect of wealth. Poverty can also hinder*ḥifẓal-nafs*through limited access to health,*ḥifẓal-'aql*through educational limitations, and*ḥifẓal-nasl*through the low ability of families to meet children's needs.

4. The Simultaneous Effect of Education Spending, Health Spending, and Poverty on the Human Development Index (HDI)

The F-test results show an F-statistic value of 39.27393 with a probability of 0.000004. This means that education spending, health spending, and poverty levels simultaneously have a significant effect on the HDI of Lampung Province. The R^2 value of 0.914611 indicates that 91.46% of the variation in the HDI can be explained by these three variables. This finding demonstrates that human development cannot be understood from just one dimension. Education, health, and the economic conditions of the community are interrelated. Within the maqā frameworkṣid al-syarī'ah, education represents*ḥifẓal-'aql*, health represents*ḥifẓal-nafs*, while poverty alleviation is related to*ḥifẓal-māl*. These three dimensions support each other in achieving human well-being.

This recommendation arises because education and health spending are not yet partially significant, while poverty has been shown to have a negative and significant effect on the Human Development Index (HDI). This integration can be achieved through three channels. First, ZISWAF for education is directed towards scholarships for the poor, providing educational facilities, and improving the quality of learning. Second, ZISWAF for health is directed towards health services for the poor, nutrition, maternal and child health, and stunting prevention. Third, productive zakat and waqf are directed towards economic empowerment of the poor. This recommendation does not mean that ZISWAF has been statistically proven in this study.

D. CONCLUSION

Based on the research results, government spending in the education and health sectors has a positive but insignificant effect on the Human Development Index (HDI) of Lampung Province, while the poverty rate has a negative but significant effect on the HDI. Simultaneously, education spending, health spending, and the poverty rate have a significant effect on the HDI. Scientifically, this study contributes by showing that increasing government spending in the education and health sectors does not automatically increase the HDI. The insignificance of these two variables indicates that the size of the budget allocation does not guarantee the achievement of human development if it is not supported by effective implementation, accurate targeting, and equitable distribution of public services. This finding reinforces the importance of examining the quality of budget use, not just the amount of budget allocated. The policy implication of these findings is that the Lampung Provincial government needs to shift its policy orientation from an approach that focuses on budget size (input) to an approach based on output and outcomes. From an Islamic economic perspective, the success of public spending is not only measured by the size of the allocated funds, but also by its ability to generate benefits and support the achievement of maqāṣid al-syarī'ah (objectives). Education spending can be directed to realize*ḥifẓal-'aql*, health spending for*ḥifẓal-nafs*, and poverty alleviation to strengthen*ḥifẓal-māl*. Health and education policies are also related to*ḥifẓal-nasl*, while strengthening moral values and religious education is part of the support for*ḥifẓal-din*.

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