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THE MALAY MUSLIM CANCER PATIENTS’ PERSPECTIVES ON ISLAMIC HEALING CANCER TREATMENT

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MASTER OF SCIENCE
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By

NORHASMILIA BT SUHAMI

Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia, in Fulfilment of the Requirements for the Degree of Master of Science

November 2014
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Norhasmizar binti Suhami
Hasmirul Azri bin Suhami
All cancer survivors
&
Muslimin and muslimat
Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fullfilment of the requirement for the degree of Master of Science

THE MALAY MUSLIM CANCER PATIENTS’ PERSPECTIVES ON ISLAMIC HEALING CANCER TREATMENT

By

NORHASMILIA BT SUHAMI

November 2014

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Faculty: Educational Studies

Cancer patients want to be treated as a whole person including their physical, emotional and spiritual dimensions. For Muslim, they tend to use healing methods that are related to their Islamic tenets. Therefore, there is a growing number of Malay Muslim cancer patients seeking Islamic healing, but little empirical work exists on the use of Islamic healing. The purpose of this study is to understand: (1) why Malay Muslim cancer patients seek Islamic healing, (2) Islamic healing treatment, and (3) Islamic healing benefit and role in cancer treatment.

A qualitative study was conducted using in-depth interviews with 15 Malay Muslim women cancer patients that sought both conventional system and Islamic healing from 4 different regions in Peninsular Malaysia. The participants were selected from purposive sampling and snowball technique. The following are the reasons cancer patients seek Islamic healing; (1) recommendation from family, friends and doctors, (2) belief in Islamic healing and (3) ineffectiveness or dissatisfaction with the conventional treatment. Islamic healing treatment can be categorized into two forms; (1) recitation of Quranic verses as a main method with du’a and Sunnah (voluntary) salat and (2) a combination of herbs with recitation of Quranic verses, du’a and healing water. Benefits and role of Islamic healing (1) provide physical and spiritual benefits and (2) as a complementary treatment to conventional medicine.

The evidences suggest that Islamic healing will continue to be as a popular healing choice among Malay Muslims. The use of Islamic healing as a complementary treatment has its own potential as it is a holistic and natural healing. This finding is the first formal research of this type of study and needs to be considered by policy makers in providing a better health care system for the country.
Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk ijazah Master Sains

PERSPEKTIF PESAKIT KANSER MELAYU ISLAM TERHADAP RAWATAN PENYEMBUHAN KANSER SECARA ISLAM

Oleh

NORHASMILIA BT SUHAMI

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Kajian kualitatif menggunakan temu bual terperinci dengan 15 pesakit kanser wanita Melayu Islam yang mendapatkan kedua-dua penyembuhan sistem konvensional dan penyembuhan secara Islam daripada 4 kawasan yang berbeza di Semenanjung Malaysia. Peserta dipilih daripada kaedah pensampelan bertujuan dan kaedah bola salji. Berikut merupakan sebab-sebab pesakit kanser ingin menggunakan penyembuhan secara Islam; (1) cadangan daripada keluarga, rakan-rakan dan doktor, (2) percaya dengan penyembuhan secara Islam dan (3) ketidakberkesanan atau ketidakpuasan hati dengan rawatan tradisional. Rawatan penyembuhan secara Islam boleh dibahagikan kepada dua bentuk; (1) bacaan ayat-ayat al-Quran sebagai kaedah utama dan disertai doa dan solat sunat dan (2) gabungan herba-herba dengan bacaan ayat-ayat al-Quran, doa dan air penawar.

Bukti-bukti menunjukkan bahawa penyembuhan secara Islam akan terus menjadi terkenal sebagai pilihan penyembuhan dalam kalangan masyarakat Melayu Islam. Penggunaan penyembuhan secara Islam sebagai sejenis rawatan komplementari mempunyai potensi kerana ia merupakan penyembuhan holistik dan semula jadi.
Dapatan ini merupakan kajian rasmi yang pertama yang perlu dipertimbangkan oleh penggubal dasar dalam menyediakan sistem penjagaan kesihatan yang lebih baik untuk negara.
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I certify that a Thesis Examination Committee has met on 21 November 2014 to conduct the final examination of Norhasniah binti Sulaiman on her thesis entitled “The Malay Muslim Cancer Patients’ Perspectives on Islamic Healing Cancer Treatment” in accordance with the Universities and University Colleges Act 1971 and the Constitution of the Universiti Putra Malaysia [P.U. (A) 106] 15 March 1988. The Committee recommends that the student be awarded the Master of Science.

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CHAPTER 1

INTRODUCTION

1.1 Background

This chapter presents a review in the context of cancer in Malaysia, as well as complementary and alternative treatments (CAM), including traditional medicine (TM) and Islamic healing.

1.1.1 Cancer in Malaysia

Malaysia is a developing country that consists of 28.3 million populations, with Malay as the major ethnic, followed by Chinese and Indian. Cancer is most common among Chinese, followed by Indian and Malay (National Cancer Registry Report, 2007). Chinese women have the highest percentage of 5-year survival rate among breast cancer patients, which is 63 %, followed by Indian women (57 %) and Malay women (46 %). This matter is caused by several factors such as health seeking behavior, treatment compliance, health resources and different types of screening available (Taib, Yip, Ibrahim, Ng, & Farizah, 2007).

In 2007, according to the Ministry of Health Malaysia, cancer was the third common cause of death after heart diseases & diseases of pulmonary circulation and septicaemia (National Cancer Registry Report, 2007). The National Cancer Registry Report (2007) documented that breast, colorectal, cervix, ovary, and lung are the five most common parts to be affected by cancer. Despite the growing number of cancer cases, there are several conventional treatments available including surgery, radiotherapy, chemotherapy, hormonal therapy, immune therapy, as well as symptomatic and supportive therapy (Lim, 2002), but the access to treatment has a long waiting time and is also restricted (Yip, 2008).

The need of oncologists is very critical as the ratio of oncologists to patients is very low, which is 1: 650,000 and equivalent to 35 oncologists (Yip, 2008). According to the Deputy Health Minister, Datuk Rosnah Hj. Abdul Rashid Shirlin as stated in 2012, the number has increased to 64 oncologists (21 women) practicing in government, university hospitals and private sector. She added that Malaysian population will grow to 30 million people in 2015, and the ratio of oncologists required increases to 12 per million populations, hence, about 360 oncologists are needed (Chin, 2012). This shows that the oncologists available are still not adequate with the number of patients that are increasing every year.
1.1.2 Complementary and Alternative Medicine (CAM)

Complementary and Alternative Medicine (CAM) refers to health care practices that are not offered in conventional system, which uses terms like “natural remedies”, “non-conventional medicine” and “holistic medicine” (WHO, 2002).

The National Centre for Complementary and Alternative Medicine (NCCAM) identifies five major categories to standardize these types of medicines, which are: 1) alternative medicines including homeopathic, naturopathic, and Eastern medicine; 2) mind-body interventions, from cognitive-behavioural therapy to meditation, prayer, and mental healing; 3) biologically-based therapies such as herbs, foods, and vitamins; 4) manipulative and body-based methods like chiropractic and massage; and 5) energy therapies including qi gong, reiki, and therapeutic touch (Vapiwala, Mick, Hampshire, Metz, & DeNittis, 2006, p. 471).

More than 50% of the world population have been using CAM at least once in Europe, North America and other industrialized regions. According to WHO (2000), 158 million of adult population are reported to utilize complementary medicine in the United States. A study in the US reported that 91% of patients used at least one form of CAM and mostly were prayer, relaxation and exercise (Yates et al., 2005).

1.1.3 Traditional medicine

Traditional healing is one form of the CAM that has been used for thousand years and maintained its popularity worldwide. The 1978 Alma Ata Declaration on primary health care acknowledged the potentially positive role of traditional indigenous practitioners (Muller & Steyn, 1999). According to Tovey, Broom, Chatwin, Hafeez, & Ahmad (2005), 80% of the world’s population continuously utilized traditional medicine.

1.1.4 Traditional medicine in Malaysia

Malaysia established its own National Policy on Traditional and Complementary Medicine (TCM) in 1999. The first legislation of TCM was introduced in public hospital in 2001 (Jayaraj, 2010). The practice of traditional healers, locally known as “bomoh” (Malay traditional healers), is an important component in health care. It is estimated that more than 80% of Malaysians consult “bomoh” at some time in their life for health-related issues (Razali & Yassin, 2008). They mostly consult them for primary traditional health, physical and also psychological in conjunction with conventional medicine (Heggenhougan, 1980).

1.1.5 Islamic healing

Islamic healing has been defined as Islam itself that is based on a belief in a universal, divine, and source (God). God is not only being in the healing equation,
but He is the ultimate healer (York, 2011). An important element in Islamic healing is the use of verses in the Quran, in which Islamic healers believed to have “Baraka”, a blessing power. All healers refer to passages from the Quran and hadith in their treatment (Hoffer, 2000).

Based on the hadith by the Prophet (PBUH) recorded by Imam Bukhari in his Kitab al-Tibb (book of medicine), healing is in three things: 1) a gulp of honey, 2) cupping and 3) branding with fire (cauterizing) (Deuraseh, 2004). Prayer and spiritual healing are the most common methods used by cancer patients as a complementary to conventional cancer treatment in Iran (Rezaei, Hajbaghery, Seyedfatemi, & Hoseini, 2008). In Malaysian context, cancer patients seek spiritual healers to receive special prayers or blessings for their treatment (Merriam & Muhamad, 2013). There is also a healing method called “ruqyah” that uses Quranic verses and prayer, as well as ruqyah with Mu'awwidhat verses that are used as a protection and cure for any disease caused by Jinn and Devil (Deuraseh, 2009).

1.2 Problem Statement

Traditional healing is being increasingly used as a complement to conventional medicine including in cancer disease. A study indicates that patients with life-threatening diseases use complementary and alternative medicine (CAM) including spiritual healing (Barlow, Lewith & Walker, 2008). Based on studies across the globe, researchers are discovering that spiritual healing is becoming more mainstream. In Iran, prayer and spiritual healing are the most commonly used methods of complementary therapy among cancer patients (Rezaei, Hajbaghery, Seyedfatemi & Hoseini, 2008). Islamic teaching stated that no disease can be cured without the kindness and approval of Allah, the Most Merciful. According to Jamil, (2014), Islamic healing is based on the Quran, as well as the sayings and actions of the Prophet Muhammad (PBUH). Using Quran recitation is the most popular form of Islamic healing. This is because the Quran is a holy book for Muslim and has a direct healing effect on their spirit, soul and mind (Carter & Rashidi, 2004). It is practiced in various Muslim communities (Adib, 2004).

The increasing number of cancer cases with acknowledging the role of traditional practices in developing countries by WHO policies (WHO, 2002) shows the need to conduct a formal research of Islamic healing in cancer treatment among Malaysians. In the Malaysian context, Muslim perceives illness by accepted the illness as a God’s plan. Patients receive conventional medical treatment and also seek spiritual healers to receive special prayers or blessings that they believe are able to help them cope with the treatment (Merriam & Muhamad 2013).

Many Malaysian cancer patients delayed or refused to seek treatment at hospital due to reliance on Islamic healing with limited understanding of Islamic healing (Merriam & Muhamad, 2013). It indicates that cancer patients jeopardize their life by delaying or not getting any treatment from conventional medical approach.
Despite these initial findings, the use of Islamic healing or spiritual healing as a form of cancer treatment is mainly conducted in Western countries. There is little documented study regarding reasons for cancer patients to seek Islamic healing either in compliment to conventional medicine or exclusively in South East Asia, especially in Malaysia. Thus, a research needs to be conducted in order to avoid any harm that can threaten patient’s life. To understand these factors, this study was conducted to identify why cancer patients seek Islamic healing, Islamic healing treatment and how such healing helps in their cancer treatment.

1.3 Research Questions

The questions that guide this study are as follows:

1. Why do Malay Muslim women cancer patients seek Islamic healing?
2. How is Islamic healing as a treatment for cancer practiced?
3. What benefit and role do Islamic healing play in cancer treatment?

1.4 Significance of the Study

This study contributes to the growing research on Islamic healing especially among Malay Muslim women cancer patients. The significance of this study can be categorized into two: 1) research implication, and 2) practical implication.

In terms of research implication, the findings that we obtain from this study will enrich our understanding about the health seeking behavior among cancer patients, healing approaches and the role of Islamic healing from a non-Western perspective, specifically in Malay Muslim women.

From the practical perspective, this study is the first attempt in a formal research that provides insights to health policy makers and the Ministry of Health of Malaysia about the need of patients to be healed holistically. By understanding the significance of involving spiritual and emotional healing, they may consider implementing Islamic healing in hospital settings. Moreover, this study will be able to help cancer supporting groups to develop an effective program applicable regarding the importance of the spiritual aspect of healing and provide additional choice of treatment for Muslim cancer patients.

1.5 Limitation of the Study

At first, the researcher identified potential informants through various support groups and Islamic healers but it was difficult to get the participants especially men. This is the limitation of study that was unplanned, where only women cancer patients were willing to be interviewed. The perspectives and personal experiences of each participant that was interviewed affect the accurateness of the data collected. This
matter is influenced by several factors that cannot be controlled by the researcher, such as the ability of participants to express their reasons in seeking Islamic healer, their healing experiences, and the outcome gained from the healing treatment. With regard to this matter, the researcher had to interpret the study based on her knowledge and experiences in traditional and Islamic healing.

1.6 Definition of Terms

The following definitions are used for the purpose of this study:

**Complementary and Alternative Medicine** – A group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine (National Centre for Complementary and Alternative Medicine, 2002).

**Islamic healing** – Islamic healing is synonymous to Islamic spiritual healing that is based on the knowledge derived and extracted from the Quran and the sayings and actions of the Prophet Muhammad (PBUH) (Jamil, 2014).

**Islamic medicine** – A medicine system that encompasses theoretical and philosophical principles of the temperamental and humoral theory from the Quran (revealed by Allah to the Prophet Muhammad (PBUH) and “Sunnah” (recorded and authenticated saying, as well as traditions of the Prophet Muhammad (PBUH)) (Kasule, 1997, p. 1). In addition, it is a practice of medicine that does not contravene Sharia laws, hence encompasses an Islamic ethos that addresses the physical, mental, emotional and spiritual needs of an individual in ensuring an enhanced quality of life (Bhikha, 2007).

**Islamic healer/practitioner** – A person who bases his or her work on the power inspired by Islam, has an Islamic vision with reference to the work, and describes himself or herself as a healer either informally (via family and acquaintances) or formally (via advertisements) (Hoffer, 2000).

**Traditional medicine** – A sum total of knowledge, skills and practices based on the theories, beliefs and experiences indigenous to different cultures, whether explicable or not, which are used in the efforts of maintaining good health, as well as prevention, diagnosis, improvement, or treatment of physical and mental illness. The definition is defined by the World Health Organization (WHO) (Siti, Tahir, Farah, Fazlin, Sondi, & Azman, 2009).

**Traditional healer/practitioner** – “Unofficial” health worker in developing countries and are frequently consulted and trusted for their therapeutic methods (Asefzadeh & Sameefar, 2001).

**Cancer patients** – Malay Muslim women cancer patients that have practiced Islamic healing and conventional treatment.
**Jinn and devil** – Creatures created by Allah from fire that are already known as khadam, qarin, syaitan, iblis, ghost, and rijaalul ghaib (Garis panduan amalan pengubatan Islam, 2011)

**Quran** – It is a holy book of Muslims. It was written and recited in the Arabic language, with translations have been made in various languages. The original Arabic text has been recorded and memorized by Muslims (Yucel, 2007).

**Sunnah** – The way of the Prophet Muhammad (PBUH) including actions, sayings (hadith) and actions of others approved by the Prophet. In Islamic jurisprudence, Sunnah is the second source of religion (Yucel, 2007).

**Ruqya** – Du’a based on the Quran and hadith that are in line with Islamic tenet used in treatment (Garis panduan amalan pengubatan Islam, 2011)

**Prayer** – Based on Islamic texts, prayer refers to salat and du’a (Yucel, 2007).

**Salat** – A religious practice: a form of ritual prayer that involves specific movements and invocations (Yucel, 2007).

**Du’a** – A verbal prayer in the forms of formal and informal supplication (Yucel, 2007).

**Mu’awwidhat verses** – According to Ibn Hajar, the mu’awwidhat verses consisted of three major surah in the Quran, namely Surah al-Falaq, Surah al-Nas and Surah al-Ikhlas (Deuraseh, 2009).
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