Implementation of Sharia Law on Patient Medical Services in Certified Sharia Hospitals: A Literature Review

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INTRODUCTION

Spirituality in medical care has recently appeared as an important topic in the providence of health care. Spirituality and religion are considered as important part of almost all medical codes of ethics. An individual's spirituality and religious beliefs have been shown to have a major impact on how an individual patient copes with serious and life-threatening illnesses and stresses. Therefore, a patient's religious beliefs should be considered in any clinical setting (Hossein, 2012).

Spiritual aspects in several studies show that cancer patients in dealing with their illness are supported by increasing resilience indicators so that patients can be more easily in controlling emotions, adopting a more adaptive mindset, applying Islamic views in coping mechanisms, and understanding how to avoid negative though (Rosyadi, et al 2019).

In Indonesia, there are currently many Islamic-based healthcare centers, but in practice, service standards and management standards that are in accordance with the demands of Islamic law have not been established or implemented. Hospitals with Islamic labels are currently an economic trend and have great potential to be developed. Sharia services provided by Islamic-based hospitals are not only shown for people who are Muslims, but these services can also be shown for people of all sectors. In the implementation of Islamic-based hospitals, some crucial questions may arise such as; What is meant by Islamic health services?, What is the difference between services in Islamic-based hospitals and hospitals in general?, Who has the responsibility to create these Islamic-based services? and of course many other questions (Ismail, 2018).

The development of hospitals that have principles in accordance with Islamic Sharia in Indonesia goes in line with the increasing needs and enthusiasm of the community for...
Islamic-based health services, especially the majority of Indonesia’s population is Muslim even with the largest Muslim population in the world, so this shows the high awareness of the community to get health services that are different from general, where Islamic Hospital services provide guarantees that not only focus on medical services to patients but also include sharia-based hospital management and an the effort in saving Islamic faith in various hospital services based on the concept of sharia law (MUI & MUKISI, 2017).

The aim of this study is to find out how the implementation of Sharia Law in patient services in certified Sharia Hospitals. Through this research, it can be seen how the hospital is implementing Sharia Law comprehensively in its services.

METHODS

The data search starts by defining keywords and expanding them into several related keywords. In this study, the keywords focused on Sharia Law, Sharia Hospital, and medical services/medical care. This review covers articles published between 2011-2022. The data search was conducted in four databases including: Pubmed, ScienceDirect, Mendeley and Google Scholar. The articles used were published in Indonesian and English.

The data were extracted according to the format specified by the reviewer. The extracted data consisted of specific details ranging from context, research concepts, research methods, and key findings related to the review question.

RESULTS AND DISCUSSION

The initial search of articles on 4 databases resulted in a total of 184 articles from databases including Pubmed, Mendeley, ScienceDirect and Google Scholar. Out of 184 articles, 57 of them were duplicates which were the result of Zotero software duplication, then there were 87 irrelevant articles based on the screening results by adjusting the inclusion and exclusion criteria.
The implementation of Sharia Law focuses on the implementation of Maqashid Sharia which consists of five main points which are in accordance with the standards that are imposed by MUKISI and DSN-MUI for Sharia Hospitals in Indonesia. In the articles that have been reviewed, it is also found that the implementation of sharia law is not only limited to patient services, both medical and non-medical, but also includes management and managerial which also apply sharia principles in the system.

In almost all articles and in general mention that the implementation of Sharia Law in Hospitals is based on the application of Maqashid Sharia which consists of 5 main points which are Hifdz Ad-Din, Hifdz An-Nafs, Hifdz Al-Aql, Hifdz An-Nasl, and Hifdz Al-Mal.

A study conducted by Sulistiadi in 2017 at Sultan Agung Islamic Hospital showed that the hospital has been eligible to be awarded the title of Sharia Hospital because it has implemented Maqashid Sharia in hospital services comprehensively. The examples of the application of maqashid sharia provided by the hospital include the holding of spiritual assessments for each patient, spiritual assistance, the use of contraception according to sharia with patient consent and sharia standards applied in financial management (Sulistiadi, 2017).

The implementation of sharia law in nursing services in hospitals has a positive relationship in improving patient satisfaction. In a study conducted by Abdurrouf in 2018 at Sultan Agung Islamic Hospital with total 130 respondents who participated, the correlation coefficient result was 0.416, which shows that between sharia services in the nursing field and the level of patient satisfaction has a moderate level of relation. This is also supported by research conducted by Iqmi in 2018 at the same hospital but focusing on services for outpatients. In this study, it was found that increasing in patient satisfaction has a positive correlation with the implementation of sharia law based on maqashid sharia in outpatient patient services. In the research conducted at Sebelas Maret University Hospital Surakarta, it shows that the quality of hospital services that implement Sharia Law has a significant effect on the level of patient satisfaction as evidenced by the significance level of 0.0009, meaning that the significant value is smaller than the probability value of 0.05 (Sumadi S., et al, 2021).

In the literature study written by Ismail in 2018, it is state that implementation of sharia law in hospitals must reflect several aspects from the understanding of the basic principles of sharia, the understanding of the principles of halal and haram, the understanding of the principles of muamalat, and the application of Islamic principles in hospital organizations (Ismail, 2018).

The implementation of Sharia Law in hospitals in Malaysia also applies the 5 main points in maqashid sharia. The application of Sharia law in Malaysian hospitals includes five aspects including; management systems based on Sharia law, Sharia-based patient services, products that are guaranteed halal and thoyyib, hospital facilities that make it easier for patients and families to perform daily prayers and hospital services according to gender (Zawawi, 2018).

LIMITATION OF THE STUDY

In this research, the articles are limited to studies that conducted in Indonesia and Malaysia. The research would be more beneficial if the articles can be varied from many other countries, especially countries with a majority Muslim population so that we can get a better picture of the implementation of sharia law in hospitals.
CONCLUSIONS AND SUGGESTIONS

The implementation of Sharia Law on patient services or patient care in hospitals is based on the implementation of Maqashid Sharia which consists of five main points; Hifdz Ad-Din, Hifdz An-Nafs, Hifdz Al-Aql, Hifdz An-Nasal, and Hifdz Al-Mal. In both Indonesia and Malaysia, the implementation of sharia law has the same basis which is then adjusted to aspects of both direct service to patients and the management system. In Indonesia itself, the public demand for hospital services with the implementation of sharia law is quite significant and has received a positive response, especially because the majority of Indonesia’s population is Muslim.

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ETHICAL CONSIDERATIONS

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Conflict of Interest Statement

According to the author, there is no potential conflict of interest in the creation and publication of this work. The research was conducted independently and carried out after observing the high demand of halal products including healthcare services.

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