

INCOMAR 2023
The 9th International Conference on Marketing and Retailing**HEALTHCARE DELIVERY AND THE ENVIRONMENT:
UNDERSTANDING MUSLIM PATIENTS AND THEIR
CAREGIVERS' NEEDS**

Shariff Harun (a)*, Azhan Rashid Senawi (b), Ibrahim Ahmad (c), Aizat Khairi (d)

*Corresponding author

- (a) Faculty of Business and Management, Universiti Teknologi MARA, Puncak Alam, Selangor, Malaysia, shariffharun@uitm.edu.my
- (b) Faculty of Business and Management, Universiti Teknologi MARA, Puncak Alam, Selangor, Malaysia, azhanrashid@uitm.edu.my
- (c) Royal College of Medicine Perak, Universiti Kuala Lumpur, Ipoh, Perak, Malaysia, ibrahima@unikl.edu.my
- (d) Malaysian Institute of Marine Engineering Technology, Universiti Kuala Lumpur, Lumut, Perak, Malaysia, aizat@unikl.edu.my

Abstract

On a global scale, the demand for Islamic-friendly hospitals that cater to Muslim patients' needs while preserving Islamic values is on the rise. As hospitals struggle to remain viable in a competitive industry while supplying the community with appropriate and high-quality healthcare services, management should be cautious of this shift in mentality. Hence, this study aims to dissect the acceptable Islamic-friendly hospital service delivery standards and the atmosphere that Muslim patients and their caregivers aspire, while fulfilling Islamic medical ethics and shariah requirement. To explore the suitable elements of Islamic-friendly hospital practices and their mechanism, a systematic literature review procedure was carried out. The patterns of the reviewed papers were then analyzed thematically, yielding eight potential themes which are Shariah compliance prescription, Islamic infrastructure, Islamic medical practices, compassion and support, competencies of Islamic medical services, conducive Islamic surroundings, reasonable and convenience services, and Islamic work culture. The findings are expected to spur policymakers in Malaysia, and other interested nations to put the recommended themes into practice by enacting more favourable legislative measures as well as useful promotion and education strategies to further improve the services and industry.

2357-1330 © 2024 Published by European Publisher.

Keywords: Muslim patients, Islamic-friendly hospital, Islamic medical ethics, systematic literature review

1. Introduction

Muslim-friendly hospitals have been making breakthrough improvements to become a truly practical and competitive alternative to the current conventional hospital at the global level. The growing demand for strict Shariah-compliant services is the outcome of several recent contributing factors such as spiraling oil prices worldwide, the prolonged boom in the Middle Eastern economies, product innovation, and sophistication, increasingly receptive attitude towards conventional service deliveries and information technology advancements (Mansoor Khan & Ishaq Bhatti, 2008). In place of this, Malaysia is one of the Muslim countries that is committed to not only providing halal products but also a complete Shariah-compliant service delivery system. This is the outcome of the increasing number of Muslim medical tourists coming to Malaysia in search of quality Muslim-friendly hospital services.

In place of this development, it is anticipated that the medical tourism market in Malaysia will continue to expand steadily reaching a projected annual revenue of RM2 billion in 2025 as opposed to RM1.7 billion in 2019 (Malaysia Healthcare Travel Council, n.d.). Therefore, in today's challenging environment, it is undoubtedly crucial that healthcare providers offer acceptable Islamic-friendly service delivery and atmosphere that fulfils the Muslim patients' and their caregivers' needs. This is also to ensure that the service offerings are Halal and in line with all principles of Islamic teachings guided by the Al-Quran and Sunnah. Al-Qaradawi (2013) explains that the term "halal" refers to something that is legitimately Shariah-compliant and in line with Islamic beliefs. According to Zailani et al. (2016), a Shariah-compliant service system specifically restricts needless touching, to the point that touching between individuals of different genders who are not related is forbidden. Muslim patients should only be treated by same-sex medical professionals, and if necessary, the opposite-sex patient should undergo examination or treatment in front of an adult relative (Al-Shahri, 2002).

Accordingly, the question of acceptable hospital practices and the atmosphere sought by Muslim patients and their caregivers that align with Shariah requirements remain fuzzy. In response to this gap, this study set out to assess the current norms in Muslim-friendly hospitals and to suggest Shariah-compliant guidelines that could be utilized to control the medical services provided by Muslim-friendly hospitals in Malaysia.

2. Problem Statement

Given the lucrative potential of this business sector, the biggest challenge for business operators is to comply with medical Islamic ethics as there are no known standard practices created and set by authoritative bodies in Malaysia. The need to produce a standard or guidelines that can be used to monitor the services delivered by Islamic-friendly hospitals is deemed important and timely to ensure that the service deliveries are in line with Islamic medical ethics. This is also to prevent any abuse from the business providers and ensure strict Shariah-compliant service. In place of this, Malaysia is one of the Muslim countries that is committed to not only providing halal products but also a complete Shariah-compliant service delivery system.

In addition, the foundation of the healthcare providers' creation must be based on the principles of Maqasid al-Shariah. Coherently, under the Maqasid al-Shariah concept, all of the facilities, services, and

administration provided by the service providers must adhere to the Shariah principles. Specifically, the overarching goal of Islamic law is to uphold the social order of communities and ensure their welfare (Department of Islamic Development Malaysia, 2015). The idea of Maqasid al-Shariah offers clear direction and a framework for the process of ijihad in resolving conflicts in a way that satisfies human interests while adhering to God's will.

According to Ashur and al-Tahir (2006), there are three levels of necessity under the traditional Maqasid al-Shariah classifications. The first one is necessities (daruriyat). It is the factors of necessity that are fundamental to human existence. The absence of these components could endanger and impair human life such as a place to live, food, and clothing. The second category is needs (hajiyat) and unlike daruriyat, needs are less crucial to human life. Certain needs such as the need for a spouse, effective methods of communication, healthy food, and a means of transport, are several needs that must be met for a person to live peacefully. However, the absence of any one of these needs does not endanger life or death. These needs, however, are supported and regulated by Islam. The last category is luxuries (tahsiniyat). It is related to achieving desirable additions such as designer clothing, high-end automobiles, and bungalows that make human existence perfect and full of added meaning in the right way.

Therefore, to comply with Maqasid al-Shariah, Islamic medical ethics and Shariah requirements, this study intends to analyze the proper Islamic-friendly hospital service delivery standards as well as the environment desired by Muslim patients and their caregivers. A comprehensive literature review technique is used to study the components and subcomponents of Islamic-friendly hospital practices and to identify the mechanisms supporting each component.

3. Research Methods

In order to thoroughly find and summarize relevant studies, a systematic literature review (SLR) strategy as described in Figure 1: PRISMA flow diagram was used to ensure an organized, transparent and rigorous technique at each stage of the process. Specifically, this study used the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) approach as its review protocol. Throughout the identification phase, keywords such as Islamic hospital, Shariah-compliant hospital, Muslim hospital, Islamic-friendly hospital, and Islamic medical care were used. Thus, a total of 239 articles were shortlisted based of the search from the Scopus, Web of Science, and Google Scholars databases. Subsequently, after a rigorous identification, screening, eligibility, and inclusion process, only nine articles as highlighted in Table 1: Journal details were found to fulfil the selection criteria. The nine papers were subjected to content analysis and from which, the study managed to discover the components and settings of Islamic-friendly hospitals environment desired by Muslim patients and their caregivers.

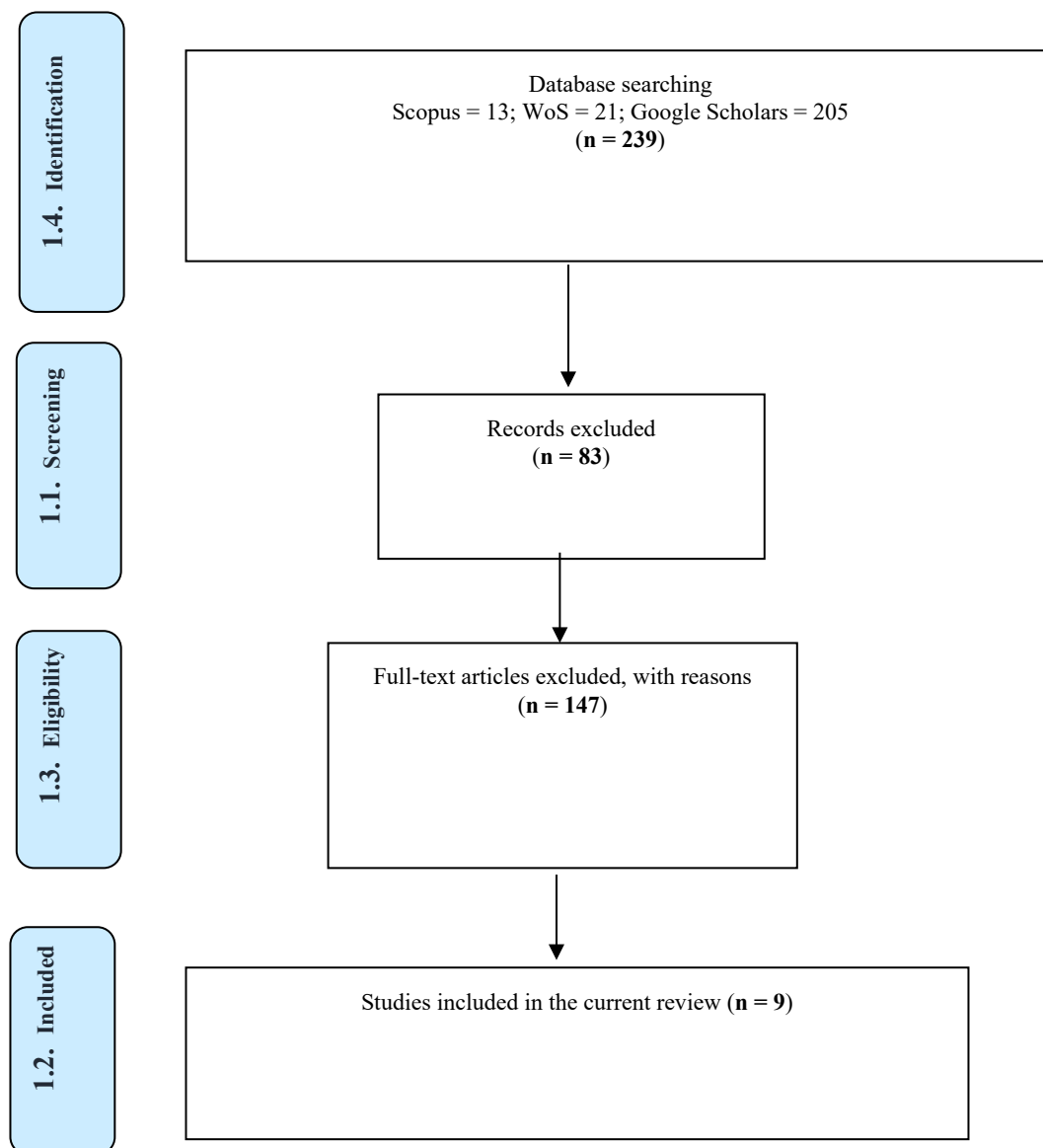


Figure 1. PRISMA flow diagram

Table 1. Journal details

Authors	Year	Database	Scope of Research
Zailani et al.	2016	WoS	Predicting Muslim medical tourist satisfaction
Rahman et al.	2021	WoS	Patient satisfaction and loyalty towards healthcare services
Md Shariff et al.	2018	Scopus	Shariah-compliant hospital a practical journey
Rahman et al.	2018	Scopus	Islamic medical care practice
Ratnawati et al.	2021	Scopus	Improving satisfaction and loyalty
Rahman et al.	2017	Scopus	Muslim-friendly medical tourism market
Zawawi and Othman	2018	Scopus	Shariah-compliant healthcare services
Ramli	2021	Google Scholars	Halal medical tourism
Masud et al.	2021	Google Scholars	Ibadah friendly hospital

4. Findings

Even though Islamic or Shariah healthcare services compliance has been acknowledged as a key factor in luring and attracting Muslim travelers across the globe, this area of study has not been well investigated. Through the identification of the correct components of Muslim-friendly hospitals that satisfy Shariah standards, this study was able to close the gap while fulfilling the Muslim patients' and their caregivers' desires. Initially, the study had chosen 156 publications relating to Islamic hospital services, subsequently, through the PRISMA approach, the study was able to reduce the numbers to just nine journal articles that are pertinent to the context of Muslim-friendly hospitals.

Subsequently, following the thematic analysis conducted, eight potential components and viewpoints relevant to an Islamic-friendly hospital environment desired by Muslim patients and their caregivers were established from the patterns of work reviewed. The identified elements serve as the cornerstones of the proposed Muslim-friendly medical framework. The identified components are:

- i. Shariah compliance prescription.
- ii. Islamic infrastructure.
- iii. Islamic medical practices.
- iv. Compassion and support.
- v. Competencies of Islamic medical services.
- vi. Conducive Islamic surroundings.
- vii. Reasonable and convenient services.
- viii. Islamic work culture.

5. Conclusion

The research methodology utilized by this study in identifying the elements of Muslim-friendly hospital practices in meeting the demands of Muslim patients and their caregivers was the same as that used in other prominent systematic literature review studies. The study demonstrated in a very insightful manner that implementing Muslim-friendly hospital services that prioritize Shariah compliance prescription, Islamic infrastructure, Islamic medical practices, compassion and support, competencies of Islamic medical services, conducive Islamic surroundings, reasonable and convenience services, and Islamic work culture tends to favorably affect patients' experiences and will significantly influence the healthcare system.

From the results obtained, there are eight key takeaways that need to be fulfilled by the Hospitals. Firstly, it is proven that one of the most important needs of Muslim patients is to have their prescriptions for Halal medications and Halal medical equipment filled. Patients must also be informed of the components of the prescription medication and any potential side effects by the healthcare provider. Secondly, it was found that it is necessary for the hospitals to fulfil the patients and caregivers need for an Islamic infrastructure that provides comfortable praying amenities and facilities such as a tayammum kit, praying mat, and guidelines.

Thirdly, the ability of the medical professionals to provide care for patients of the same gender or when different gender treatments are necessary, family members or nurse presence throughout the

process, should be thoroughly practiced. The fourth element of the paradigm entails showing empathy and support to patients and their families. The hospital should also assign nurses or staff to help patients who are bedridden or who have urine bags attached to them to clean themselves before praying.

The fifth element is about ensuring that the medical services provided by the hospital are capable of meeting the standards for Islamic medical care. This requires the top management's commitment and engagement to ensure compliance and supportive hospital policy. Subsequently, the sixth element focuses on developing hospitable Islamic environments. Accordingly, making Halal meals, products, and services available should be given top attention.

Services that are affordable and convenient make up the seventh element that should be practiced by Muslim-friendly hospitals. Hospitals that welcome Muslims, must charge fair and appropriate costs for medical services. To enable patients to make an informed choice, access to treatment information and costs must also be provided. The last elements are related to Islamic workplace culture. To enhance the standard of care and the satisfaction of Muslim medical tourists, healthcare organizations must be able to recruit qualified, encouraging, sympathetic, helpful, and attentive physicians, nurses, and administrators in a setting that can foster a Muslim-friendly hospital culture.

The highlighted elements entail a comprehensive set of components that are essential determinants to the establishment of a Muslim-friendly hospital as desired by Muslim patients and their caregivers. These elements serve as the backbone of the existence of Muslim-friendly hospitals and the key attractions in enticing patients and their family members to come back for future treatment or consultations.

Regarding the study's limitation, it should be highlighted that because of the distinctive characteristics of the determinants, it might be expensive to implement all practices at once. Future research is therefore required to identify and rank the most important aspects of Islamic-friendly hospital practices that are significant and appropriate with the size, type, and resources that the hospitals are ready to commit.

Acknowledgments

The authors would like to acknowledge the funding of the research by the Faculty of Business and Management, Universiti Teknologi MARA (UiTM), Malaysia (600-TNCPI 5/3/DDF (FPP) (013/2021)). The authors are also thankful and grateful to the editors and reviewers for their invaluable contribution.

References

- Al-Qaradawi, Y. (2013). *The lawful and the prohibited in Islam*. Islamic Book Trust.
- Al-Shahri, M. Z. (2002). Culturally Sensitive Caring for Saudi Patients. *Journal of Transcultural Nursing*, 13(2), 133-138. <https://doi.org/10.1177/104365960201300206>
- Ashur, S. M. a.-T. I., & al-Tahir, M. (2006). *Maqasid al-Sharia al-Islamiah* [The meaning of Islamic poetry]. Dar al-Islam.
- Department of Islamic Development Malaysia. (2015). *Indeks Syariah Malaysia: Model Tadbir Urus Berteraskan Maqasid Syariah* [Malaysian Shariah Index: A Governance Model Based on Shariah Objectives]. https://www.islam.gov.my/images/ePenerbitan/pengenalan_ism.pdf
- Malaysia Healthcare Travel Council. (n.d.). *Malaysia Healthcare Travel Industry Blueprint 2021 – 2025*. <https://www.mhtc.org.my/malaysia-healthcare-travel-industry-blueprint/>

- Mansoor Khan, M., & Ishaq Bhatti, M. (2008). Islamic banking and finance: on its way to globalization. *Managerial finance*, 34(10), 708-725. <https://doi.org/10.1108/03074350810891029>
- Masud, I., Halim, S. A., Shafi, S. M., Ramli, N., Awang, M., & Subhan, I. A. (2021). What Is Ibadah Friendly Hospital. *Journal of the British Islamic Medical Association*, 7(3), 53-60.
- Md Shariff, S., Mohtar, S., & Jamaludin, R. (2018). A Practical Journey in Implementing a Shari'ah Compliant Hospital: An Nur Specialist Hospital's Experience. *IIUM Medical Journal Malaysia*, 17(2). <https://doi.org/10.31436/imjm.v17i2.934>
- Rahman, M. K., Bhuiyan, M. A., & Zailani, S. (2021). Healthcare Services: Patient Satisfaction and Loyalty Lessons from Islamic Friendly Hospitals. *Patient Preference and Adherence*, 15, 2633-2646. <https://doi.org/10.2147/ppa.s333595>
- Rahman, M. K., Zailani, S., & Musa, G. (2017). Tapping into the emerging Muslim-friendly medical tourism market: evidence from Malaysia. *Journal of Islamic Marketing*, 8(4), 514-532. <https://doi.org/10.1108/jima-02-2016-0014>
- Rahman, M. K., Zailani, S., & Musa, G. (2018). The perceived role of Islamic medical care practice in hospital: the medical doctor's perspective. *Journal of Islamic Marketing*, 9(1), 2-18. <https://doi.org/10.1108/jima-01-2016-0006>
- Ramli, N. (2021). Halal Medical Tourism: Emerging Opportunities. *Asian Journal of Multidisciplinary Research & Review*, 3(5), 64-86.
- Ratnawati, A., Mislani Cokrohadisumarto, W. b., & Kholis, N. (2021). Improving the satisfaction and loyalty of BPJS healthcare in Indonesia: a Sharia perspective. *Journal of Islamic Marketing*, 12(7), 1316-1338. <https://doi.org/10.1108/jima-01-2020-0005>
- Zailani, S., Ali, S. M., Iranmanesh, M., Moghavvemi, S., & Musa, G. (2016). Predicting Muslim medical tourists' satisfaction with Malaysian Islamic friendly hospitals. *Tourism Management*, 57, 159-167. <https://doi.org/10.1016/j.tourman.2016.05.009>
- Zawawi, M., & Othman, K. (2018). An overview of Shari'ah compliant healthcare services in Malaysia. *Malaysian J Consum Fam Econ*, 3(1), 91-100.