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Necessity of Sharia Compliant Maternity Care System in Malaysia

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Abstract

Maternity care is a service provided to women throughout pregnancy, during childbirth and some periods after childbirth. Rapid developments in medical technology and improvements over time in ensuring the best services in maternity care indicate an ever-improving achievement. The target of minimizing the maternal mortality rate in Malaysia shows various measures taken by the Malaysian Government in general and the Ministry of Health Malaysia (MOH) in particular. However, there is still room for improvement when there are recommendations and suggestions for maternity care in Malaysia towards holistic and sharia-compliant care practices. There is still customer dissatisfaction in this sector when it comes to the level of current maternity care provided. Therefore, this study was conducted to identify the aspects that need to be given attention to make maternity care holistic. This study uses a qualitative approach and in the form of an exploratory study. Data were collected using documentation methods and semi-structured interviews. This interview method involved a physician and a sharia-compliant panel at the hospital. The data obtained were analysed using content analysis method. Findings show that there are four aspects that need to be strengthened to meet the needs of sharia-compliant maternity services, namely the empowerment of women's rights and privacy when receiving treatment, aspects of facilities that help the implementation of treatment according to sharia, service delivery by caregivers and their approach, and medical issue resolution from an Islamic perspective. Improvements in this aspect meet the needs and demands in the field of maternity services while further ensuring the sustainability of national maternity services.

Keywords: Sharia Compliant, Maternity Services, Maternity Care, Honourable Maternity Care

Introduction

Creating a sharia-compliant healthcare system is in line with Malaysia, which is at the forefront of introducing the sharia-compliant concept in other national governance such as in the hospitality industry (Hashim & Fauzi, 2019; Haque, 2019; Razalli, 2019; Qurtubi, et. al, 2021), finance (De Costa et. al., 2020) banking (Suzuki & Miah, 2020) and halal industry (Azam & Abdullah, 2020; Mas'ad & Wakil, 2020). Health services according to the perspective of

Islam is a superior service system by focusing on the physical aspects of medicine and psycho-spiritual aspects that practice universal Islamic values (Ismail, 2018).

The awareness of applying Islamic principles in life encourages people to create their life system in accordance with the comprehensive requirements of Sharia. Therefore, the step to create a health care system that complies with sharia is a necessity in the sovereignty of Islamic principles in life. The maternity service system should also not be isolated from this idea. Maternity services refer to services provided by the Ministry of Health Malaysia (KKM) in general and medical staff involved in the treatment of women during pregnancy, childbirth and after the birth of a baby. This service focuses on what a woman and her baby need (United Kingdom Department of Health, 2004) to achieve optimal health.

Research Background

Good and satisfactory health services are measured through the level of customers' satisfaction who obtain such services (Kourkouta et. al., 2021; Iliadis et. al., 2021). The efforts of each country in achieving the Millennium Development Goals (MDGs) in the aspect of maternity is to take measures that can reduce maternal mortality. This is because it is an indicator to measure the progress of a country. The failure to achieve the target indicates the need for action research to identify factors and follow -up. Maternal health policy factors (Mukuru, 2021), facilities and health personnel (Marthias, 2021) are among the factors that contribute to the failure to achieve this MDG target.

Apart from improving aspects of physical needs that support good services, the need for a health care system that takes into account aspects of sharia is also a matter that should be taken seriously by the government. Issues that often presented by patients such as privacy issues, gender of nurses, relationships with nurses, the way they are treated and the medical procedures that need to be done and the medicine received still arise (Ismail et. al., 2018) even though medical technology and treatment facilities are increasingly good.

Every Muslim needs to ensure that every aspect of their lives coincides with the Sharia including those related to health care (Zawawi & Othman, 2018). There is also a need to create a theoretical framework for health care centres in general and specifically in the context of maternity services. In relation to that, this article analyses aspects of the requirements in establishing a sharia compliant maternity care system in Malaysia.

Methodology

This study uses a qualitative approach and in the form of an exploratory study. Data were collected using documentation methods, semi -structured interviews and Focus Group Discussion (FGD). An analysis of medical articles and sharia studies as well as interviews with hospital sharia panel were conducted to obtain a comprehensive perspective on the current status of services. FGDs with service users are also made to look at the aspects they need when getting maternity care. The data obtained from this approach were analysed using content analysis method.

Findings and Discussion

Research on studies related to maternity services shows the need to establish fully sharia-compliant services. The following findings are the result analysis of maternity services in Malaysia, aspects that require improvement in maternity services as well as approaches that can be suggested to achieve a fully sharia compliant level.

1. Current Maternity Services

Current developments in maternity services show better progress than before. Aspects of system improvement and treatment modules become the main focus so that health services can reach an optimal level. This is also to achieve the Millennium Development Goals (MDG) target in the field of health by reducing the maternal mortality rate. Since 2000, the MDGs have provided a framework for global development efforts that have transformed one of the areas now known as global health (Marten, 2019).

The establishment of organizations and the existence of certain acts that set guidelines in the field of obstetrics and control the behaviour of medical practitioners also show serious attention in controlling the quality of services. Despite that, there are still things that violate treatment ethics, misconduct and patient dissatisfaction. This statement refers to a list of complaints received by the Malaysian Medical Council (MMC) such as not explaining treatment procedures, examining patients without the presence of chaperones (Nawi & Ngah, 2011), the aspect of preserving private parts during treatment (Focus Group Discussion, 2022).

From the ethics and work manual aspects, every treatment procedure and medical practitioner in Malaysia is governed by specific rules and ethical codes such as the Code of Professional Conduct, Duties of a Doctor and Ethical Guidelines in addition to being supervised by certain bodies such as the Malaysian Medical Council (MMC) and the Malaysian Medical Association (MMA). In special maternity treatment there are specific guidelines and manuals used such as the Labor Ward Manual and the nursing procedure manual. These two documents have outlined guidelines that every medical practitioner must follow (Rasnah & Salizar, 2005). Even so, there are recommendations to apply humanitarian elements when handling treatment (Gutschow et. al., 2021; Amatullah, 2022).

In Malaysia context, most hospitals generally use labels such as "worship-friendly hospital", "Muslim-friendly hospital", "halal-friendly hospital" and the like (Rahman MK. Et. al, 2018) to describe the concept of services offered based on Islamic principles. The introduction of worship-friendly hospitals concept (Zawawi & Othman, 2018) and sharia-compliant hospitals which are becoming more popular in Malaysia also led to the existence of medical centres for sharia-compliant mothers and children. This sharia compliant label is either given by a certain party such as the state government to An-Nisa Medical Center, Kota Bharu (Saniah, 2021) or through a standard process by the Standard and Industrial Research Institute of Malaysia (SIRIM) under the Quality Management System based General Sharia (MS 1900:2014) (Jasmani & Rahman, 2019)).

The establishment of treatment centres with a sharia-compliant concept such as An-Nur Specialist Hospital in Selangor (Amatullah, 2022) is a new perspective in medical services in Malaysia. The service provided is based on its own approach and has added value for the existing service system provided. The diversity of labels and approaches in this service requires an organized and coordinated system under an authoritative monitoring body to produce a sustainable and competitive maternity service system.

There are five components that are seen to be able to meet the needs of health services that are labelled as sharia compliant, which are services that understand the basic principles of sharia, principles of halal and haram, principle of *muamalat*, implement the concept of quality in Islam and create the core values of Islam (Shariff, 2016). This general component needs to be detailed in aspects that support it in the sub-field of medicine such as in the aspect of maternity services.

2. Aspects of Maternity Services that Need Improvement

Based on past studies and the current development of maternity services in Malaysia, there are four aspects that require improvement. The four aspects are the empowerment of women's rights and privacy when receiving treatment, aspects of facilities that help the implementation of treatment in accordance with sharia, service delivery by service providers (caregivers) and their approach, and solving medical issues from a sharia perspective.

Improving the quality of maternity services is an effective strategy in reducing the country's maternal mortality rate (Ngadan et. al., 2020). Measurement to a good level of quality is also illustrated through the satisfaction level of maternity services user. Previous studies have shown that this level of satisfaction is seen from various aspects, which involve the attitude of nurses (Dzomeku, 2011), the convenience of treatment equipment, interpersonal skills (Amentie et. al, 2016; Kebede et al., 2016) and the ability to preserve women's privacy (Amentie et al., 2016; Lumadi & Buch, 2011).

The reduction of maternal mortality is a benchmark for the progress and quality of services for a country. How the service is provided, treatment management approach and nursing issues are also aspects that need to be seen in providing a satisfactory service. The issue of humane elements application during birth control performed by shows that among the things that are often raised by women is related to the issue of private parts, getting female nurses and information on the use of non-halal medicine (Aziz et al., 2017). In addition, there is no detailed guidelines to determine the position of a medical procedure from a sharia perspective such as determining the limits of permission to expose the *aurat* during childbirth. The decision to protect patient privacy can be understood with a broad interpretation by nurses, while the level of need is different according to medical indications. For example, the need opening the aurat during the phase before birth (pre- childbirth), during childbirth and after birth (post-childbirth) have different limits (Khatijah, 2017). Accordingly, the establishment of sharia panels in hospitals is seen to have continuity with study that touches on the issue of halal and haram in the use of medicine and treatment performed by nurses of different genders (Adib et.al, 2015) as well as solutions to maternity issues from the aspect of sharia.

The management aspect of maternity treatment that applies the principles of sharia and humanitarian elements is also a requirement presented by women seeking treatment. This can be understood from the study by D'oliveira et. al (2002) who found that there are four forms of unethical behaviour by nurses when handling birth, namely neglect, verbal and psychological abuse, physical and sexual violence. In addition, the gender issue of nurses and the relationship between nurses and patients is also a question raised when seeking treatment at a maternity treatment centre (Locicero et al., 1993).

Aspects of the position of the treatment procedure and its management from a sharia perspective should also be considered in establishing a sharia-compliant maternity service. This is because although the use of technology and advanced maternity treatment facilities now has a positive impact on the reduction of morbidity and mortality rates in the world in general and in Malaysia in particular, there is still a study Azlina et al (2017) also explains that poor development involves handling nurse at birth. Religious and spiritual aspects are two elements that give meaning to human behaviour, values and experiences. Applying the elements of sharia to nurses will help in creating comprehensive or holistic maternity care, no aspect of care is neglected (Ohaja et. al., 2019). Such matters can be resolved when the principles of sharia during treatment are fully understood in sharia-compliant services.

A study on the level of satisfaction of 238 Muslim medical tourists who had visited Malaysia showed that the behaviour of health service providers, sharia compliance practices, health care ethics and safety had a positive effect on their attitudes and satisfaction. Therefore, Malaysia needs to introduce and promote Muslim-friendly medical tourism services that attract more Muslim patients from different Muslim and non-Muslim countries.

Efforts and steps in developing the country have no meaning if there is no health delivery system and the best public health to the community. Current developments show that there are certain aspects of maternity services that can be improved including how health care services are provided to the target group.

Suggested Improvements

Based on the current reality of maternity services, aspects that require improvement as well as the need for a sharia-compliant maternity service system, the following recommendations are put forward to draft a concept of maternity services that is fully in line with the requirements of sharia.

Empowerment of women's privacy rights

The issue of privacy rights is highlighted a lot when getting maternity services. Therefore, this aspect should be improved further through the formation of a treatment management model that applies the principles of *syarak* touching on women's privacy rights, especially when they have to be treated by male nurses. This step is aimed at creating an approach that is an honourable maternity care. Sharia compliance has a significant relationship with the level of satisfaction with health services in general (Rahman et. al., 2020).

Complete facilities and equipment that support treatment management

Just as the aspect of facilities and equipment is a factor in satisfaction with health services, the same factor deserves more attention in maternity services. Aspects of facilities in maternity services need to focus more on supporting women in preserving their privacy such as treatment rooms that avoid exposure of private parts to individuals who are not involved during treatment. In addition, clothing that meets the requirements of covering the *aurat* should also be worn when in the ward and receiving treatment. This discomfort related to the right to privacy is an issue that is often presented and prompts the recommendation that research be done from the aspect of convenience.

Staff Development

The role of caregivers in maternity services plays an important role because they are directly involved with women receiving treatment. Therefore, the generic skills possessed alone are not sufficient in handling sharia-compliant treatment. The aspect of preserving life is a priority in treatment. However, the aspect of preserving dignity should also be improved. The application of humanitarian elements, treating with a pure heart and considering the treatment process as an act of worship makes the service provided more soulful and honourable. The sharia compliant care centre model should see the spiritual healer aspect as one aspect of the service provided (Ramizah, 2018). The role of this spiritual healer is to help and give support and encouragement to the patient. In addition, the patient's religion and beliefs are also seen need to be handled well by nurses when in the process of handling medical procedures. Studies in Sweden show that continuous support from caregivers,

good relationships and a pleasant environment in maternity care centres help women achieve a good level of satisfaction (Waldenstrom et al., 2006).

Therefore, a treatment management manual should be created to apply pure and humanitarian elements apart from the existing treatment procedure manual. This approach will make nurses who are involved in quality maternity services from the spectrum of skills, knowledge and moral values as well as shown humanity.

Integrating medical facts with sharia in solving current medical issues

Advances in technology and innovation in the world of medicine today contribute to the emergence of new issues that touch on legal issues. This requires efforts and collaboration between various parties so that the development that takes place is in line with the demands of syarak (Abdul Monir, 2004). Therefore, an advisory body or legal consultant that oversees aspects of sharia compliance should be established. This advisory body can help in forming and evaluating compliance standards for solving current maternity medicine issues, the medical tourism sector and health services with Islam uniformly and can bring this issue to a global level (Kamassi et. al., 2020). A comprehensive solution for each question will provide a solution to the problems that arise holistically and provide comprehensive benefits.

Conclusion

The approach of applying syar'ik elements in the four scopes of handling maternity treatment, namely the empowerment of women's rights and privacy when receiving treatment, aspects of facilities that help the implementation of syar'ik treatment management, service delivery by service providers (caregivers) and their approach, and solving medical issues from a syar'ik perspective will make current services are more competitive by meeting the needs of the parties involved. The ability to make these improvements will guarantee its sustainability aspect when the need to provide a health service that complies with sharia is successfully met in a country with the status of an Islamic country that is Malaysia and further boosts the national economy with the concept of Islamic medical tourism which is becoming more popular now.

The concept of sharia-compliant healthcare services can be defined as healthcare services offered by healthcare institutions that meet the needs of Muslim patients while meeting the specific requirements of sharia. Not only that, the establishment of the institution must be based on maqasid sharia. Therefore, the entire hospital "eco-system" must be sharia compliant. This means that management, services, products and facilities offered must comply with sharia principles.

Establishing a sharia-compliant maternity service is now a necessity that can finally realize the aspect of realizing the maqasid of syariah in the national health service. Next, this step helps achieve Malaysia's Sharia Index (ISM) at the national level and the MDGs at the global level.

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