

THE QUR'ANIC THERAPEUTIC SPIRITUAL COMMUNICATION ON THE PATIENT'S SPIRITUAL PROBLEMS IN NURSING CARE

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DOI 10.32505/at-tibyan.v7i1.3902		
Submitted: 06-03-2022	Revised: 01-06-2022	Accepted: 10-06-2022

Abstract

In suffering from illness, patients, in addition to needing medical treatment, also need help, guidance, and spiritual services to overcome the psychological shock they experience and support their illness's healing process. This paper discusses the Qur'anic therapeutic, spiritual communication, which is used as an approach to dealing with spiritual problems experienced by patients. This research is *library research* using a descriptive-analytical method. Research data is sourced from literature books, journals, books of interpretation, and others that correlate with the discussion. The results of this study indicate that the therapeutic Qur'anic spiritual communication becomes a model for healing the patient's spiritual problems. Delivery of messages containing Qur'anic spirituality by nurses to patients who are strengthened by the ability to express words that are clear, evocative, polite, gentle, helpful, and pleasant, as well as profound experiences of spiritual healing will be a healing power for patients' spiritual problems. Moreover, the spiritual maturity of nurses is no less critical, which is reflected when providing services to patients in the form of showing care, compassion, listening, sincerity, being friendly, smiling, and being patient with the patient's condition. Likewise, do not be arrogant, arrogant, rude, find fault, or indulge in patient disgrace and the like.

Keywords: *The Qur'an Therapeutic Communication, Nursing Care, Spiritual Problems*

Abstrak

Dalam penderitaan sakit, pasien, selain membutuhkan pengobatan secara medis juga memerlukan bantuan, bimbingan, dan layanan secara spiritual guna mengatasi goncangan kejiwaan yang dialaminya dan untuk menunjang proses penyembuhan sakitnya. Tulisan ini membahas tentang komunikasi spiritual terapeutik qur'ani yang digunakan sebagai pendekatan untuk menangani masalah spiritual yang dialami pasien. Penelitian ini adalah *library research* (riset kepustakaan) dengan menggunakan pendekatan deskriptif analitis. Data penelitian bersumber dari literatur buku, jurnal, kitab tafsir, dan lainnya yang memiliki korelasi dengan pembahasan. Hasil penelitian ini menunjukkan bahwa komunikasi spiritual terapeutik Qur'ani menjadi model pendekatan penyembuhan masalah spiritual pasien. Penyampaian pesan-pesan bermuatan spiritual Qur'ani oleh perawat kepada pasien yang dikuatkan dengan kemampuan mengungkapkan perkataan yang jelas, menggugah, sopan, lemah lembut, bermanfaat, dan menyenangkan, serta pengalaman mendalam tentang penyembuhan spiritual akan menjadi daya penyembuh masalah spiritual pasien. Dan yang tak kalah penting adalah kematangan spiritualitas perawat yang tercermin saat memberikan layanan kepada pasien berupa menunjukkan sikap peduli, kasih sayang, mau mendengar, ikhlas, ramah, senyum, dan sabar atas kondisi pasien. Begitupun tidak bersikap angkuh, sombong, kasar, mencari-cari kesalahan atau mengumbar aib pasien, dan sebagainya.

Kata Kunci: Komunikasi Terapeutik Qur'ani, Asuhan Keperawatan, Masalah Spiritual

Introduction

Communication plays an essential role in efforts to restore the psychological and spiritual health who are experiencing disorders. Contact done well will have a positive effect so that it becomes a spirit and motivation to achieve healing. This kind of communication can be therapeutic or have a healing impact on individuals who experience psychological and spiritual problems.¹

The world of health has recently begun to develop and practice the use of communication as a therapeutic approach for psychic and spiritual recovery for patients. In nursing care, interpersonal communication between nurses and patients is one of the supporting factors that can encourage the achievement of patient recovery. As stated by Davis Roganda in a study entitled "*Pola Komunikasi Interpersonal Terapeutik Dokter Terhadap Pasien Anak*," apart from drugs, a patient's recovery is

¹N. Khotimah, dkk., "Hubungan Komunikasi Terapeutik Perawat Dengan Kepuasan Pelayanan Keperawatan di Ruang Inayah Rumah Sakit PKU Muhammadiyah Gombong", *Jurnal Ilmiah Kesehatan* 8, no. 2 (2012): 73-80. Kasron, dkk., "Kepuasan Pasien Jamkesmas Terhadap Komunikasi Terapeutik Perawat dalam Pelayanan Asuhan Keperawatan di Ruang Kenanga RSUD Cilacap", *Prosiding Seminar Nasional PPNI Jawa Tengah* (2013): 105-108.

determined by the interpersonal communication skills carried out by medical personnel (nurses) with their patients.²

In line with Roganda's statement above, Suryani explained that the communication made by nurses could help the healing process of patients undergoing treatment because the communication made by the nurse with the patient is not ordinary social communication but rather a communication that contains elements of therapy for the patient. This kind of communication in nursing is known as *therapeutic communication*. Interaction using therapeutic communication that is carried out in a planned manner will make the patient feel comfortable during the treatment period, open to the problems at hand, and emotionally suggestive so that the healing process of the disease runs faster.³

Anjaswarni also explained that the communication made by nurses could encourage healing for patients. Communication as an element of therapy is carried out in caring for patients with psycho-social problems or mental disorders. The nurse's smile, patience, gentleness, motivational speech, soothing words, and conveys can influence the patient's behaviour to do better to improve his health status.⁴

However, regarding the effect of therapeutic communication on patient recovery, there are several slightly different views. For example, Ramlani Sinaulan believes that therapeutic communication as a mutual interaction between nurses and patients will be more meaningful and have a profound impact if nurses, in their interactions with patients, reinforce the spiritual dimensions. In this case, nurses make themselves part of therapy through various communication techniques. Likewise, nurses support spiritual values or religious teachings to change the patient's behaviour and *mindset* in a positive direction.⁵

Ramlani's view above is corroborated by Hasani, who argues that the content of therapeutic communication messages containing religious messages originating from the Qur'an and as-Sunnah can positively influence the patient's recovery. These religiously charged messages will touch the spiritual side of the patient so that it becomes a driving force, motivation, and suggestion for him to achieve optimal healing. Psychologically, this will make the patient feel cared for and supported, raising high motivation in trying to recover from his illness. The content of this kind of therapeutic communication message is a differentiator from the therapeutic communication that medical nurses in general usually do.⁶

Islam also discusses the influence of messages or communication media on physical and spiritual health. In the verses of the Qur'an, many discuss messages or

²Davis Roganda, dkk., "Pola Komunikasi Interpersonal Terapeutik Dokter Terhadap Pasien Anak", *Jurnal Bisnis dan Komunikasi* 2, no. 2 (2015): 183.

³Suryani, *Komunikasi Terapeutik: Teori dan Praktik*, (Jakarta: Kedokteran EGC, 2005), 12.

⁴Tri Anjaswarni, *Komunikasi dalam Keperawatan*, (Jakarta: Kementerian Kesehatan RI, 2016), 3.

⁵Ramlani Lina Sinaulan, "Komunikasi Terapeutik dalam Perspektif Islam", *Jurnal Komunikasi Islam* 6, no. 01 (2016): 129-157

⁶Ibin Hasani, "Komunikasi Terapeutik Perawat Rohani Islam dalam Proses Penyembuhan Pasien di RSUD Ciamis", *Communicatus: Jurnal Ilmu Komunikasi* 2 no. 2 (2018): 123-158.

communication media on physical and spiritual health. For example, the verse Maryam/19: 23-24 tells about Maryam, who is about to give birth. He was filled with sadness and anxiety due to what had happened. Then the Angel Gabriel came to convey words of comfort, motivation, and encouragement for Maryam to survive in her conditions by saying "*allā tahzanī*" (do not be sad).⁷

In line with the above verse is Surah al-Kahf [18]: 6, which contains Allah's attention to the Prophet Muhammad, who felt sad because his hopes for the faith of his people did not come true. So in this verse, Allah SWT gives a word of comfort and reminds him not to be sad because of the terms of his people "*We will never believe in you until you emit springs and the earth for us*" (al-Isrā'/17: 90). In this verse, Allah SWT says using the "*asafā*" (because of sadness) editorial. It means do not be sad.⁸

The two verses above were revealed in the context of providing reinforcement and motivation to rise from sadness. Deep sadness due to an experienced event significantly affects psychological and mental health, reducing a person's physical health. So among the therapies given to restore the situation is providing motivation and words of consolation. *The effect* of the reason and comfort given is to provide calm, peace, patience, rise from adversity, and build a healthy thinking paradigm.

Spiritual messages with therapeutic nuances (therapy) were also conveyed by the Prophet as advice and reminders to foster feelings of optimism and hope for healing in the sick. The words of the Prophet SAW: "*lā ba'sa thahinsyrunā Allāh*" means "not heavy" or "get well soon." His words are intended to foster optimism and hope and contain a prayer that the illness and suffering of the sick will disappear, replaced with healing and health. At the same time, eliminate the feeling of despair and hopelessness from Allah's mercy and His love. That way, spiritual messages like this can influence the psyche and emotions of the sick so that they feel calm and relaxed, are motivated to be patient and optimistic, and accept Allah's provisions.

From the explanation above, it can be seen that communication that influences psychological therapy fulfils the elements of communication. In Lasswell's theory, it is stated that five elements must exist in the communication process, namely: *who says what, in which channel* (using what media/means), *to whom*, and *what effect* (what is the effect/impact). Based on Lasswell's communication model, the therapeutic function in communication will depend on the abilities of the person (actor) who wants to change and improve it (communicator), the readiness of the object that is expected to change (communicant), the quality of the message content to be conveyed (message content). Moreover, the media/means transmit the message's contents.

This research is *library research* using a descriptive-analytical approach. Research data is sourced from literature books, journals, books of interpretation, and others that correlate with the discussion. The research tries to construct a therapeutic,

⁷M. Quraish Shihab, *Tafsir al-Mishbah, Pcsan, Kesan, dan Keserasian al-Qur'an*, Vol. 8, (Jakarta: Lentera Hati, 2002), 170.

⁸Abī Muḥammad ibn Jarīr ath-Thabarī, *Jāmi' al-Bayān fī Ta'wīl al-Qur'ān*, Jilid 17, (Beirut: Dār al-Kutub al-'Ilmiyyah, 1999): 14.

spiritual communication model based on the Qur'an. The study is directed at the philosophical foundation and practice of therapeutic, spiritual communication and the therapeutic aspects.

Spiritual Problems in Patients

Patients who suffer from chronic, acute, or critical illnesses experience cognitive, emotional, psychological, and spiritual disturbances. The inability to live an everyday life threatens independence and causes anxiety, deep sadness, prolonged grief, fear about the future, pessimism, to disappointment/anger at God.⁹ Dependence on others for regular care can also lead to feelings of helplessness, decreased inner strength, and a loss of meaning and purpose.¹⁰ Generally, it is often encountered when someone is sick, philosophical-spiritual questions will arise, such as "Why did this happen to me?", "Why did God give this disease to me?", "How can I overcome this?" and others.¹¹

Philosophical-spiritual questions like the above are certainly not easy to answer. In addition to the subjectivity of the answers, it is also because religious practices and spirituality are rarely an essential part of nursing practice. Therefore, in nursing care, the biggest challenge among medical personnel (nurses in particular) is to help find answers and solutions to expressing patients' spiritual needs. Illness is common for individuals, but finding meaning in life from the suffering experienced, for example, is difficult for patients and nurses.¹²

Spiritual care as part of patient care services must concern medical workers. The patient's spiritual needs must receive the same attention as the fulfilment of treatment in the physical aspect. The importance of meeting the spiritual needs of patients is based on the paradigm that patients are holistic beings consisting of various dimensions, namely: physical, psychological, social, and spiritual dimensions. Each of these dimensions needs to be met because the circumstances are interrelated and affect each other. If one of the human dimensions is disturbed, it will cause disturbances in different dimensions.

The holistic nature of the patient above is further strengthened by *psychosomatic*. *Psychosomatic* is a term for the relationship and dependence between the psychological and biological aspects of the patient. In the eyes of this

⁹Caldeira, *et al.*, "Spiritual Well-Being and Spiritual Distress in Cancer Patients Undergoing Chemotherapy: Utilizing the SWBQ as Component of Holistic Nursing Diagnosis", *Journal of Religions and Health* 56, (2017): 1489. Helga Martins, *et al.*, "Spiritual Well Being in Cancer Patients Undergoing Chemotherapy in an Outpatients Setting: a Cross-Sectional Study" *Journal of Holistic Nursing* 38, (2019):1-10.

¹⁰Phenwan, *et al.*, "The Meaning of Spirituality and Spiritual Well-Being Among Thai Breast Cancer Patients: a Quality Study", *Indian Journal of Palliative Care* 25 (2019): 119. Ahmad Rusydi, "Husn al-Zhan: Konsep Berfikir Positif dalam Perspektif Psikologi Islam dan Manfaatnya Bagi Kesehatan Islam", *Proyeksi* 7, no. 1 (2012): 1-31.

¹¹Melanie Rogers dan John Philip Wattis, "Spirituality in Nursing Practice", *Nursing Standart* 29, no. 39 (2015): 53. R. Gillilan, *et al.*, "Spiritual Distress and Spiritual Care in Advanced Heart Failure", *Journal Heart Fail Rev* 22, no. 5 (2017): 581.

¹²Taufiq Pasiak, *Tuhan dalam Otak Manusia*, (Bandung: Mizan, 2012), 277.

field, the physical illness suffered by the patient can be caused by psychological or spiritual disorders. On the other hand, the influence of disease and response to the physical condition will impact psycho-social-spiritual.¹³

Neglect of the patient's spiritual needs can cause more significant problems for the patient. Unfulfilled spiritual needs will lead to *spiritual deficit to distress*. The *spiritual deficit* is an imbalance condition caused by a lack of spiritual intake marked by the appearance of negative statements or verbal utterances as a form of expression to get spiritual intake, such as despair/lost hope of getting well, helpless, indifferent, apathetic, lonely statements, and other conditions that describe spiritual emptiness and emptiness. For example, the patient says, "I feel guilty because I should have told my family earlier about my illness." "I feel like life is meaningless. My disease is incurable." Alternatively, "In my old age, this disease is common."

A spiritual deficit that is left untreated will escalate into *spiritual distress*. *Spiritual distress* is a nursing diagnosis of impaired ability to experience and integrate meaning and purpose in life through the individual's connection to self, others, art, nature, or a power greater than oneself. This condition is one of the causes of grief or a sense of loss marked by deep questions about self-existence, the meaning of life, or a significant change in how they view themselves and their lives.¹⁴

It can also be said that *spiritual distress* is a condition of disruption of spiritual needs due to various biological, psychological, and social disorders that impact fulfilling spiritual requirements. This condition is characterized by several diseases or changes in behaviour where the patient expresses his spiritual needs through emotional attitudes, such as: being angry over the results of the examination, looking anxious about the results of the study, depression, looking guilty, being unable to carry out practical worship that he believes in, refuse treatment, ask the nurse to pray for his recovery, asking religious leaders to visit for spiritual help, and expressing fear of death.¹⁵

In the context of Islam, spiritual problems such as the condition of the patient above are everyday things found in humans. In the Qur'an, for example, in Surah al-Ma'arij/70: 19-20, al-Isrā'/17: 82, and Yusuf/12: 84-85, most human behaviour is described when receiving favours will be proud, arrogant, and forgetting to thank the giver of the blessing. However, when afflicted by narrowness and distress, humans will surely complain, despair, regret deeply, be angry, sad, feel that life is meaningless, and even feel abandoned by Allah SWT. All this happens because humans lack awareness about the source of the pleasures and pains they experience. Humans experience

¹³Denise Gimenez Ramos, *The Psyche of The Body: A Jungian Approach to Psychosomatic*, (New York: Brunner Routledge, 2004), 26.

¹⁴Suzan Willemse *et al.*, "Spiritual Care in the Intensive Care Unit: an Integrative Research", *Journal of Critical Care* 57 (2020): 57. M. Schultz *et al.*, "Distinguishing Between Spiritual Distress, General Distress, Spiritual Well-Being, and Spiritual Pain Among Cancer Patients During Oncology Treatment", *Journal Pain Symptom Manage* 54, no. 1 (2017): 66–67.

¹⁵Amin Huda Nuarif dan Hardhi Kusuma, *Aplikasi Asuhan Keperawatan Berdasarkan Diagnosa Medis & NANDA, NIC-NOC*, (Jogjakarta: MediaAction, 2015), 253.

spiritual problems because they cut off their relationship with Allah, they lack faith in Him, and many sins and evil deeds.¹⁶

The construction of Qur'anic Therapeutic Spiritual

Communication is a conscious and planned interaction between nurses and patients, characterized by the delivery of spiritually charged messages from the Qur'an verses to overcome spiritual problems. Patients who arise as a result of pain. Nurses carry out the spiritual communication of the therapeutic Qur'an as a form of assistance and support for the spiritual needs of patients. The effect and the goal to be achieved from the nurse's interaction with the patient in restoring the patient's spiritual health. In the context of illness, the patient still has faith in the power of God in curing his disease, is patient, steadfast, and sincere about God's destiny, and can interpret the suffering of illness and the like.

In terms of the ongoing process of this communication, it can be seen that the Qur'anic therapeutic, spiritual communication has its characteristics, especially in terms of its philosophical and practical foundations as well as the therapeutic aspects contained in it. Here's the explanation.

Philosophical and Practical Basis in the Qur'an

In the perspective of the Qur'an, the service to fulfil the patient's spiritual needs can be said to be an effort to maintain the benefit of oneself, especially the protection of his soul (right to life). Islam strongly emphasizes that every Muslim supports the existence of the soul. One of the ways to protect the soul is by protecting it from things that damage it and seeking safety/health. Therefore, Islam forbids killing and physically harming, recommends treatment if sick, and treats illness. One of the normative foundations found in the Qur'an is the command that a person should not throw himself into destruction. Allah says:

وَأَنْفِقُوا فِي سَبِيلِ اللَّهِ وَلَا تُلْقُوا بِأَيْدِيكُمْ إِلَى التَّهْلُكَةِ وَأَحْسِنُوا إِنَّ اللَّهَ يُحِبُّ الْمُحْسِنِينَ ﴿١٩٥﴾

Translation: "Spend in God's way, don't contribute to your ruin and be charitable. God loves the charitable. (al-Baqarah [2]: 195).

The meaning of *at-tahlukah* is damaged or destroyed. The substance of this paragraph is an order to carry out all activities as anticipatory and solution steps to protect oneself from damage or destruction. This ready step includes efforts to preserve the soul (*hifzan-nafs*). In the context of health, it can be interpreted as activities to maintain personal health, improve physical and spiritual performance, and overcome/treat psychological, emotional, and spiritual problems.

Based on the philosophical level above, the Qur'anic therapeutic, spiritual communication in nursing care elaborates efforts to protect the soul (*hifzan-nafs*). The

¹⁶Hamka, *Tafsir al-Azhar*, jilid 6, (Singapura: Pustaka Nasional Pts Ltd, 1993), 4108. Wabbah az-Zuhaili, *at-Tafsir al-Wajiz 'ala Hamisy al-Qur'an al-'Azhim*, jilid 3, (Beirut: Dar al-Fikr, 1996), 436. Muhammad 'Utsman Najati, *Al-Qur'an wa 'Ilm an-Nafs*, (Kairo: Dar asy-Syuruq, 1992), 158.

main principle of the Qur'an therapeutic spiritual communication, is providing support, assistance, and assistance by nurses to patients, especially patients with acute, chronic, and near-death conditions. Through nursing intervention activities, nurses try to restore and re-strengthen the patient's spirituality so that it becomes a strong driver to achieve emotional and psychological stability and the ability to adapt to suffering from illness.

At the practical level, the therapeutic Qur'an spiritual communication is characterized by transforming spiritually charged messages by nurses to patients in their interaction. The power of the spiritual messages transformed by the nurse is expected to produce *effects* from changes in *mindset*, attitude, and the psychological and emotional state of the patient. This change in the patient's self is, at the same time, the general goal of doing Qur'an therapeutic, spiritual communication. Signs of the Qur'an therapeutic, spiritual communication as an approach to spiritual healing can be found in the Qur'an and the practice of the Prophet Muhammad. For example, Surah Maryam [19]: 22-25 reveals Maryam's spiritual condition and the efforts made by the Angel Gabriel to restore and strengthen her by transmitting spiritual messages through motivational advice and suggestions. Allah SWT says:

﴿ فَحَمَلَتْهُ فَانْتَبَدَتْ بِهِ ۖ مَكَانًا قَصِيًّا ﴿٢٢﴾ فَأَجَاءَهَا الْمَخَاضُ إِلَىٰ جِذْعِ النَّخْلَةِ قَالَتْ يَلَيْتَنِي مِتُّ قَبْلَ هَذَا وَكُنْتُ نَسِيًّا مَّوَسِيًّا ﴿٢٣﴾ فَنَادَاهَا مِن تَحْتِهَا أَلَّا تَحْزَنِي قَدْ جَعَلَ رَبُّكِ تَحْتَكِ سَرِيًّا ﴿٢٤﴾ وَهَزِيءَ إِلَيْكَ بِجِذْعِ النَّخْلَةِ تُسْقِطُ عَلَيْكَ رَطْبًا جَنِيًّا ﴿٢٥﴾ ﴾

Translation: "So she conceived and withdrew with him to a remote place. The pains of childbirth led her to the trunk of a date palm. She exclaimed, "I wish I were dead and forgotten long before this." A voice from below called out to her: "Don't worry; your Lord placed a stream beneath you. Shake the trunk of the date palm, and ripe dates will fall by you."(Qs. Maryam [19]:22-25)

The verse above provides a complete description of the therapeutic, spiritual communication process in the interaction between the angel Gabriel and Maryam. The angel Gabriel is a communicator who conveys spiritual messages, and Maryam acts as a communicant who receives messages. The contents of the message are loaded sentences. Which is transmitted using the media of the senses of hearing and oral, and subsequently eliminates Maryam's anxiety and sadness from experiencing a fantastic event (giving birth to a child without a husband).

In line with the verse above is the delivery of spiritual messages through revelations sent by Allah SWT to the Prophet Muhammad Saw to stabilize the situation and his psychic and emotional state, stricken with deep sadness. The following verse describes:

وَيُنذِرَ الَّذِينَ قَالُوا اتَّخَذَ اللَّهُ وَلَدًا ﴿٤﴾ مَا لَهُمْ بِهِ مِنْ عِلْمٍ وَلَا لِآبَائِهِمْ كَبُرَتْ
 كَلِمَةً تَخْرُجُ مِنْ أَفْوَاهِهِمْ ۚ إِنَّ يَقُولُونَ إِلَّا كَذِبًا ﴿٥﴾ فَلَعَلَّكَ بِنَفْسِكَ عَلَى
 آثَرِهِمْ ۖ إِنَّ لَمَّا يُؤْمِنُونَ بِهَذَا الْحَدِيثِ أَسَفًا ﴿٦﴾ إِنَّا جَعَلْنَا مَا عَلَى الْأَرْضِ زِينَةً لَهَا
 لِنَبْلُوهُمْ أَيُّهُمْ أَحْسَنُ عَمَلًا ﴿٧﴾

Translation: "And to warn those who say, "God has begotten a son." They don't know this, nor did their ancestors. Outrageous is the word that comes from their mouths — they say nothing but a lie. You may destroy yourself with grief, chasing after them if they don't believe in this information. We made what's on earth a decoration for it, to test them, who's best in behaviour." (al-Kahf [18]: 4-7)

The word *bākhi'* taken from the phrase *bakha,*' means *slaughter*. This word is used to describe deep sorrow leading to death. This verse illustrates the sadness experienced by the Prophet Muhammad due to the rejection of his people. He wanted his people (the Meccan polytheists) to accept the invitation to believe in the teachings of the Qur'an. Still, they were reluctant and remained in polytheism, thanking Allah SWT had children. So, Allah SWT hopes he will not dissolve in the sadness of his heart. It can also be stated that the above verse is understood as a prohibition so that he does not destroy himself to death because they reject the verses of the Qur'an. This last understanding is in line with the words of Allah SWT in Surah Fāthir/35: 8, "*So do not perish because of sorrow for them.*"¹⁷

In verse above, there is a passive interaction in communication. Allah SWT (as a communicator) transmits spiritual messages to Rasulullah SAW (as communicant). Allah SWT explained that making them believe is beyond the ability of the Prophet Muhammad because He has created everyone with the potential to do good over evil and also provides a means of testing so that each person is welcome to take advantage of the potential and guidance of Allah SWT without coercion from anybody. In verse above also emphasizes the importance of the message contained in the Qur'an therapeutic, spiritual communication. The communicant will respond well to the content of a good message and positively influence his psyche.

Therapeutic Aspects in The Qur'anic Therapeutic Spiritual Communication

As an approach to meeting the spiritual needs of patients, Quranic therapeutic spiritual communication contains therapeutic aspects that can positively influence the patient's physical, psychological, and spiritual health. These therapeutic aspects are:

¹⁷Shihab, *Tafsir al-Mishbah: Pesan, Kesan, dan Keserasian al-Qur'an*, 10-11.

Parts of the Spiritual Quality of Nurses.

Nurses with good spiritual qualities will find it easy to perform spiritual nursing interventions, especially when assessing and diagnosing spiritual problems experienced by patients and determining the appropriate form of spiritual nursing intervention. Likewise, it will be easy to build therapeutic interactions with the patient and understand the patient about the content of the spiritual message he conveys. This aspect is the key to the nurse's success in overcoming the patient's spiritual problems.

The spiritual quality of nurses will also have a direct effect on healing the patient's spiritual problems. This relationship works as Ibn Qayyim that the soul of the person who treats will affect the soul of the person being treated. So there is a kind of mechanism of action and reaction as happens between drugs and disease. So when the nurse transmits spiritual values to the patient, the patient's soul becomes strong, and his stamina increases because these spiritual values will face and reject the spiritual problems suffered by the patient. In other words, the strength of the nurse's spiritual values is dealing directly with the patient's spiritual issues and then overcoming them / eliminating them. The greater the spiritual power of the nurse, the more perfect the level of healing potential is.

The basis of interpersonal relationships between nurses and patients is to establish a harmonious relationship and emotional closeness between the two. The spiritual quality of nurses will be reflected in their interaction patterns with patients. Nurses who can present and place themselves well in front of patients will find it easy to start conversations with patients. Likewise, patients who feel comfortable, familiar, believe in the ability of nurses to handle their illness, and are treated well by nurses will warmly welcome their presence.¹⁸ With this, the communication process, nursing services, and healing interventions will run effectively and successfully, i.e., the patient gets cured of the illness he is experiencing.

A practical tool to make interactions between nurses and patients run in harmony and get a positive response and good acceptance from patients is the nurse's personality (nature, attitude, and disposition). A good character is formed and manifested from spiritual values related to relationships with other people (social interactions). Nurses who discover these spiritual values and use them as the basis for interaction with others will have interpersonal intelligence, namely the ability to manage themselves positively in the process of interacting with others, which leads to a unification of feelings with others so that harmonization of behaviour is fostered.¹⁹ It can also be said of the ability to manage one's attitudes and behaviour to be able to understand the feelings, moods, and desires of others.²⁰ Nurses with interpersonal

¹⁸Abdul Hakim dan Rio Febriannur Rachman, "Komunikasi Terapeutik di Klinik NU Lumajang Dalam Perspektif Islam", dalam *METAKOM: Jurnal Kalian Komunikasi* 4, no. 2 (2020): 60-75.

¹⁹Alex Linley and Stephen Joseph, *Positive Psychology in Practice*, (Published by John Wiley & Sons. Inc., New Jersey, Hoboken, 2004), 305.

²⁰Darmiyati Zuchdi, *Humanisasi Pendidikan; Menemukan Kembali Pendidikan yang Manusiawi*, (Jakarta: Bumi Aksara, 2010), 28.

intelligence can establish harmonious, responsive, and dignified interactions with patients based on empathy, sympathy, friendship, and understanding of the patient's character, mood, and desires.

The Qur'an further elaborates on the main foundation in building interaction by teaching which traits, attitudes, and behaviours are allowed and not allowed as well as appropriate and inappropriate. The description in the Qur'an is, at the same time, an affirmation of something that nurses should have or do when interacting with patients, as follows:

Table 1; Good Attitudes, Traits, and Behaviors towards Others

No	Personality Aspect	Number of Letters & Verses	Directions Verse
1	Character & attitude towards others	3: 159, 31: 15, 17: 28, 20: 44	To be gentle and kind in dealing with people other.
		31: 18, 8: 47	Do not belittle or be arrogant in front of others.
		31: 17, 74: 7, 3: 200, 50: 39, 64: 14, 42: 36-37, 7: 199, 3: 134, 42: 40, 24: 22, 7: 199	Be patient with people's bad actions, not angry, generous, and likes to forgive the mistakes of others.
		59: 18	Introducing
		25: 63, 17: 37, 31: 18	Humble
		4: 8, 2: 195, 261, 9: 71, 5: 2, 49: 10, 17: 7, 99: 7-8	Empathetic and <i>caring</i>
2	Behavior towards others	49: 12, 10: 35-36, 4: 47, 10: 66	Avoid having evil thoughts, finding faults, and gossiping about people.
		30: 21, 48: 29, 2: 216	Treat others with genuine love and compassion.
		71: 7	Listen and pay attention to other people's conversations.
		5: 2, 8, 4: 86, 16: 126, 28: 77	Treat others well and professionally.
3	Speak to others	6: 54, 4: 86	Greet and return greetings in a better way.
		4: 148, 17: 23, 28, 53, 2: 263	Abstain from harmful speech. Speak kind words, not be rude, and not offend others.
		23: 3, 50: 18	Stay away from useless speech / off-topic and focus on the content of the conversation.
		17: 28, 20: 44, 31: 18-19	Be gentle and soften your voice, and do not speak arrogant words.

		49: 11-12, 9: 79	You are calling people with a good calling, not making fun of, and reproaching.
4	Appearance	7: 26, 7: 31, 24: 30-31, 33: 59, 74: 4	Adorn and wear appropriate/beautiful clothing and cover the genitals.
		80: 1-2, 27: 19	Do not be grumpy and turn away when in front of people. Adorn the face with a smile and joy
		31: 18, 17: 37, 25: 63	Do not swagger and turn away (reflection of arrogance)

Furthermore, the spiritual quality of the nurse is also reflected in her personality when interacting with patients. Interpersonal relationships will run in harmony when built based on sincerity and a clean heart from arrogance. In the context of spiritual nursing, these two are the basic foundations of spiritual healing. For nurses, the attitude of sincerity and not arrogance displayed in their daily behaviour will be a source of therapeutic relationships with patients. While for the patient to be a source of coping for the cure of the disease.

The essence of sincerity is purity and sincerity of heart. Regarding seriousness and sincerity of heart, Allah SWT alludes in the following verse:

قُلْ إِنِّي أُمِرْتُ أَنْ أَعْبُدَ اللَّهَ مُخْلِصًا لَهُ الدِّينَ ﴿١١﴾

Translate: "Say (O Muhammad): Lo! I am commanded to worship Allah, making religion pure for Him (only)". (Az-Zumar/39: 11)

قُلْ إِنَّ صَلَاتِي وَنُسُكِي وَمَحْيَايَ وَمَمَاتِي لِلَّهِ رَبِّ الْعَالَمِينَ ﴿١٦٢﴾

Translate: "Say: Lo! my worship and my sacrifice and my living and my dying are for Allah, Lord of the Worlds". (al-An 'ām/6: 162)

The two verses above contain a call to the believers to purify the faith (belief), worship (slavery), and the motive to do a job solely aimed at Allah SWT. Mujib explained that the indicator of a *sincere* is his motive to perform an act of worship/deed only to seek the pleasure of Allah SWT, to cleanse himself from deviant motives such as the desire to be praised by others, the desire for lust, or wealth (economy), the consistency of deeds shown by which is hidden so as not to be considered Riya '(show off), considers the worship performed as devotion to Him, and is sincere in doing a good deed.²¹

In the process of spiritual healing, the implementation of the above sincere spirituality values will encourage nurses to build the involvement of God in providing healing, rely on the healing of patients on the power and help of God, sincerely serve

²¹Abdul Mujib, *Tecori Kepribadian Perspektif Psikologi Islam*, Edisi Kedua, (Depok: RajaGrafindo Persada, 2019), 301.

patients, be careful and meticulous in performing healing interventions, happy can help the patient, patience in dealing with the patient's condition and attitude, and consistent/not easy to give up during therapy even though the treatment that the patient is undergoing takes a long time.²²

Meanwhile, in the patient, sincere spiritual values will awaken resilience in accepting the pain because he believes there is pleasure and reward of God in pain, relying on the hope that God heals his pain and the spirit to continue treatment as a form of his will. Furthermore, the patient's sincere attitude will encourage him to maintain his closeness to God through religious activities, prayers, and good deeds. The effect of this action is that the patient achieves a sense of security, gains peace of mind, and finds meaning in the face of suffering on the provisions of Allah SWT.²³

Furthermore, the nature of arrogance in a person will affect the quality of his treatment of others. Usually, vanity will be followed by contempt for others, disrespect for the role of others, and reluctance to accept *feedback* (response) in the form of input or advice from others. Regarding this, the Qur'an states:

وَإِذْ قَالَ لُقْمَانُ لِابْنِهِ ۖ وَهُوَ يَعِظُهُ ۖ يَا بُنَيَّ لَا تُشْرِكْ بِاللَّهِ ۚ إِنَّ الشِّرْكَ لَظُلْمٌ عَظِيمٌ ﴿٣١﴾

Translate: "And (remember) when Luqman said unto his son when he was exhorting him: O my dear son! Ascribe no partners unto Allah. Lo! to ascribe partners (unto Him) is a tremendous wrong". (Luqmān [31]: 12).

The above verse is the content of Luqman's advice to his son to maintain an attitude when interacting with others. One is not to be arrogant, haughty, and proud in front of the other person. One form of arrogance when communicating with others is to turn his face when the other person is talking and look down on or insult the other person.²⁴ Pride is also reflected in the attitude of *mukhtāl*, which means a person who is proud of what he has, even though he is proud of what he does not have. *Mukhtāl* reflects the arrogant attitude seen in behaviour, for example, an arrogant gait or impressive body language of contempt. *Mukhtāl* is different from *fakhūr* (pride), which means arrogance heard from utterances.

In the process of communicating, both *mukhtāl* and *fakhūr* reflect unethical attitudes in sharing. Both of these attitudes will disrupt the communication process due to a wrong perception of the interlocutor that has been awakened in mind.²⁵ People who are arrogant or proud tend to say things that offend others, do not respect the opinions of others, be indifferent, sour-faced, reluctant to respond, and so on. All this will hinder the reciprocal process of communication so that the information/message of

²²Taufiqurrahman, "Ikhlās dalam Perspektif al-Qur'an (Analisis Terhadap Konstruk Ikhlās Melalui Metode Tafsir Tematik)", *Jurnal EduProf* 1, no. 2 (2019): 279-312. Hana Nur Arini, *dkk*, "Hubungan Spiritualitas Perawat dan Kompetensi Asuhan Spiritual", *Jurnal Keperawatan Soedirman* 10, no. 2 (2015): 130-140.

²³Injilina Luzia Janetha Pattinasarany, *dkk*, "The Description of Nurses' Spiritual Support for Patients of Different Religions in Hospital", dalam *Jurnal Keperawatan Soedirman* 16, no. 1 (2021): 14-19.

²⁴Abī al-Fidā Ismā'īl ibn Katsīr, *Tafsīr al-Qur'ān al-'Azhīm*, jilid 3, (Kairo: Maktabah al-Īmān, 2006), 556.

²⁵Herri Zan Pieter, *Dasar-dasar Komunikasi Bagi Perawat*, (Jakarta: Kencana, 2017), 37.

communication can not be well understood and does not produce the expected effect of change.

Aspects of Nurse Skills in Communication.

The general purpose of the Qur'an therapeutic, spiritual communication is to meet the spiritual needs of patients through spiritual nursing care activities performed by nurses. At the same time, the specific goal is to address the spiritual problems experienced by patients due to their pain. Success in achieving this goal is highly dependent on the nurse's skills in communicating with patients. Sharing the spiritual therapeutic Qur'an well and effectively will make the patient feel calm, optimistic, noticed, and supported. This condition will also evoke enthusiasm in the patient's response to the message conveyed by the nurse, cultivate high motivation in the pursuit of healing, and bring about changes in *mindset*, attitude, and behaviour. While from the aspect of health services, it will increase the degree of patient satisfaction.²⁶

In therapeutic, spiritual communication, communication skills are closely related to how nurses convey spiritual messages to patients well, accurately, and effectively. The communication skills that nurses should have can be summarized as follows: *First*, use words that are *sadīq* and that terms that are clear, honest (revealing the facts), helpful, accurate, and logical (according to the situation and conditions) or comments that are not hurt the other party.²⁷ Such terms in spiritual nursing care as indicated and exemplified by the following two verses:

وَلْيَخْشَ الَّذِينَ لَوْ تَرَكَوْا مِنْ خَلْفِهِمْ ذُرِّيَّةً ضِعْفًا خَافُوا عَلَيْهِمْ فَلْيَتَّقُوا اللَّهَ وَلْيَقُولُوا
قَوْلًا سَدِيدًا ﴿٩﴾

Translate: "And let those fear (in their behaviour toward orphans) who if they left behind them weak offspring would be afraid for them. So let them mind their duty to Allah, and speak justly". (an-Nisā' [4]: 9)

يَا أَيُّهَا الَّذِينَ ءَامَنُوا اتَّقُوا اللَّهَ وَقُولُوا قَوْلًا سَدِيدًا ﴿٧٠﴾

Translate: "O ye who believe! Guard your duty to Allah, and speak words straight to the point". (al-Ahzāb [33]: 70)

The substance of the two verses above contains instructions to Muslims to say the right and proper words, stay away from words or information that is not biased, and there is an element of lies, let alone false accusations. In surat an-Nisā'/4: 9, such

²⁶Dewi Mustika Ningsih, *dkk.*, "Perilaku Perawat dalam Pelayanan Keperawatan Syariah", dalam *Jurnal SMART Keperawatan* 7, no. 1 (2020): 40-46.

²⁷Muhammad Mutawalli asy-Sya'rāwī, *Tafsīr asy-Sya'rāwī*, jilid 4, (Kairo: Akhbar al-Yaum, 1411 H/1991 M), 2029. Abī al-Fidā Ismā'il ibn Katsīr, *Tafsīr al-Qur'ān al-'Azhīm*, jilid 3, 650.

words are used in the context of being vigilant about things that may be feared to happen concerning the future or the impact that may arise from a choice that has been decided. While in surat al-Ahzāb/33: 70, it is used in the context of positioning an issue in the right place or making a more appropriate choice because previously, the option was considered inappropriate.

In spiritual nursing care, the words "*sadī and*" require a nurse to:

- a. Communicate information honestly and by facts. For example, when the nurse informs the results of the diagnosis of spiritual problems experienced by patients based on the results of data examination or when conveying the development of the patient's condition after spiritual treatment.
- b. Provide accurate information according to the patient's needs. For example, when the nurse informs the *treatment* that will be done to address the spiritual problems experienced by the patient. By receiving complete information, it is hoped that the patient or his family can make the right decision and work with the nurse in caring for the patient.
- c. Deliver the word vividly, and do not cast doubt on the patient. In the condition of a patient experiencing psychic, emotional, and spiritual difficulties and stress, the words *sadī and* those delivered by the nurse serve not only to strengthen the soul but also to be a comforter for the patient's heart. Sick patients have more sensitive feelings, require more careful treatment, and have more selected sentences. Not only is the content correct, but also appropriate.
- d. Delivering constructive criticism, in the sense that the information conveyed must be good, correct, and educating. For example, when the nurse finds the patient reluctant to take medical advice or action against him. In this situation, the nurse should invite the patient to discuss by presenting good arguments so that the patient is willing to follow what the nurse wants.²⁸

Second, using a persuasive communication style (*balīghan*). Conveying messages using appropriate, gentle, impressive, evocative, and practical expressions to hit the mind and leave a profound mark on the patient's soul. With this kind of communication style, it is hoped that the interlocutor will again realize the error in their mindset, attitude, or behaviour and voluntarily follow what the communicator expects. The use of the word *balīghan* in interpersonal communication is confirmed by the Qur'an as follows:

أُولَئِكَ الَّذِينَ يَعْلَمُ اللَّهُ مَا فِي قُلُوبِهِمْ فَأَعْرِضْ عَنْهُمْ وَعِظْهُمْ وَقُلْ لَهُمْ فِي أَنْفُسِهِمْ
قَوْلًا بَلِيغًا ﴿١٣﴾

²⁸M. Quraish Shihab, *Tafsir al-Mishbah Pesan, Kesan, dan Keserasian al-Qur'an*, vol. 2, 355-356.

Translate: "Those are they, the secrets of whose hearts Allah knoweth. So oppose them and admonish them, and address them in plain terms about their souls".
(an-Nisā' [4]: 63)

The context of the above verse is to refute the confession of the hypocrites that they want the guidance of truth from the Prophet SAW when their hearts deny it. So Allah SWT guided the Muslims on how to face the lies of such hypocrites. The way to go is to ignore their words and advise them with touching advice to regain consciousness of the mistakes made.²⁹

The word *balighan* in spiritual nursing care is very relevant to be used for patients with spiritual disorders in the aspect of the relationship with God. Patients who experience spiritual disturbances in this aspect show a depressive state. Therefore, facing patients who have this kind of problem, the nurse should try to convince the patient to be willing to behave and behave appropriately by persuading them gently and without forcing them. Among the steps that nurses can take are:

- a) Nurses invite patients to talk in a family atmosphere and open and relax the patient about the nature of his pain. Give the patient free time to express what they are feeling and experiencing. The nurse should listen actively and respond positively to the expressions conveyed by the patient.
- b) Next, the nurse gives the patient an understanding of the events in human life. All things that happen to human beings are a decree from Allah SWT. Allah SWT constantly rotates pleasures and misfortunes among human beings. However, all things set by Allah SWT must contain goodness and according to the limits of each person's ability. The pain that Allah SWT destined for the patient will abort the sins and mistakes of the past so that later when facing Him, the patient's mental condition is clean.
- c) Nurses also invite patients to reflect on their lives. Although the patient is rotated to suffer from pain not commensurate with the favours He has been, Even amid pain, Allah SWT still overflows patients with many blessings; age, support from family or friends, and the opportunity to increase worship of God and others. Therefore, the best attitude that patients should do is not to regret the sick condition but willingly, patiently, and surrender to Allah SWT. In the context of mental health, all these commendable attitudes will make the patient's soul feel calm, free from anxiety, fear, shock, despair, and depression when the desired healing efforts do not bear fruit.³⁰

Third, use the word *ma'rūfan*, which is a word expressed using language that is polite, courteous, clear (does not cause multi-interpretation), not rude, pleasant, not

²⁹Departemen Agama RI, *Al-Qur'an dan Tafsirnya*, (Jakarta: Departemen agama RI, 2007), jilid 1, 47.

³⁰M. Amin Syukur, "Sufi Healing: Terapi dalam Literatur Tasawuf", *Walisongo: Jurnal Penelitian Sosial Keagamaan* 20, no. 2 (2012): 391-412.

offensive,³¹ and easily understood by the patient.³² The necessity of dealing with patients in a *ma'rūfan* can be referred to in the verses of the Qur'an, including the following words of Allah:

وَلَا تُؤْتُوا السُّفَهَاءَ أَمْوَالَكُمُ الَّتِي جَعَلَ اللَّهُ لَكُمْ قِيَمًا وَارْزُقُوهُمْ فِيهَا وَاكْسُوهُمْ وَقُولُوا لَهُمْ قَوْلًا مَعْرُوفًا ﴿٥﴾

Translate: "Give not unto the foolish (what is in) your (keeping of their) wealth, which Allah hath given you to maintain; but feed and clothe them from it, and speak kindly unto them". (an-Nisā' [4]: 5)

The substance of the above verse is to guide the guardian to treat orphans well, one of them by not giving the right to manage the property left by his parents. The guardian should manage the property for the benefit of the orphans. It is hoped that the management of the assets of the orphans by the guardian will not run out because the control of the assets is not reasonable, and the orphans are not yet mature. If that happens, it will cause them to be a burden to those around them. And when doing that action, the guardians should convey it to the orphans with kind words.³³

The moral message in the above verse generally applies to anyone with a relationship pattern similar to that described in the above verse. Save the author, included in it is the relationship pattern between nurses and patients. A patient experiencing physical, psychological, and spiritual stress due to pain needs a nurse's help to regain their health. So in this kind of patient condition, the communication between the nurse and the patient is done using the word *ma'rūfan*.

In its implementation, the word *ma'rūfan* can be used by nurses by choosing the proper diction, affectionate call, apology/regret, polite, pleasant, encouraging, and hopeful words. Words delivered in a *ma'rūfan* will make the patient feel comfortable, calm, free from anxiety, respect the nurse, and avoid misunderstandings.

Communication *Ma'rūfan* can be done by the nurse when conveying the results of the diagnosis of the patient's illness, performing necessary nursing actions (such as surgery), or explaining the patient's condition. In its implementation, nurses should use concise but clear words, then follow them with encouragement and hope that patients remain enthusiastic and motivated to achieve recovery. For example, the nurse says, "*Mother, the current condition requires surgery. But do not worry, with the equipment and facilities we have, the mother's operation will go well and be successful*", or

³¹Muhammad Fakhr ad-Dīn ar-Rāzī, *Tafsīr al-Kabīr aw Mafūtih al-Ghaib*, jilid 5, (tp: Dār al-Kutub al-'Ilmiyah, 2000), 193.

³²Muhammad ath-Thāhir ibn 'Āsyūr, *Tafsīr at-Taḥrīr wa at-Tanwīr*, jilid 4, (Tunīs: Dār Suḥnūn, t.th.), 252. Ismāil Haqqī al-Istanbulī, *Tafsīr Rūh al-Bayān*, jilid 2, (Beirut: Dār Ihyā at-Turāts al-'Arabī, t.th.), 133.

³³Sayid Quthub, *Tafsīr fī Zhilāl al-Qur'ān*, jilid 2, 283.

"Mother, the examination results show you are depressed. We will do some treatment so that you recover quickly ", and others.

Fourth, communicate *karīman*, i.e., use words that make others remain in glory or terms that benefit others without any critical element.³⁴ Allah SWT describes the word *karīman* in the following verse:

﴿ وَقَضَىٰ رَبُّكَ أَلَّا تَعْبُدُوا إِلَّا إِيَّاهُ وَبِالْوَالِدَيْنِ إِحْسَانًا ۚ إِنَّمَا يُبَلِّغَنَّ عِنْدَكَ الْكِبَرَ أَحَدُهُمَا أَوْ كِلَاهُمَا فَلَا تَقُلْ لَهُمَا أُفٍّ وَلَا تَنْهَرَّهُمَا وَقُلْ لَهُمَا قَوْلًا كَرِيمًا ۝﴾

Translate: "Thy Lord hath decreed, that ye worship none save Him, and (that ye show) kindness to parents. If one of them or both of them attain old age with thee, say not "Fie" unto them nor repulse them, but speak unto them a gracious word". (al-Isrā' [17]: 23).

The substance of the above verse contains guidance to use dignified, polite, and ethical words, especially if the speaker is older. Therefore in the context of nursing care, the above paragraph requires nurses to interact with patients using gentle speech, low intonation and politeness, etiquette, respect, and without any critical elements, especially with older patients. Even if the nurse's words are delivered to remind the patient of his mistakes, he does not feel cornered, taught, insulted, or offended. The opposite is harsh, inappropriate, insulting, protesting, or even sarcastic.

Fifth, use the word *layyinan*, which is a gentle word. A *soft word* is a speech delivered to make the other person understand the content of the communication message and be aware of the truth of the content of the message. The word *layyinan* describes Allah's command to Moses and Aaron to preach to Pharaoh, who had transgressed, brutally oppressed the Children of Israel and even claimed to be God.³⁵ Even though Pharaoh's behaviour exceeded the limit, Allah SWT still ordered Prophet Musa and Prophet Harun to preach it using *layyinan* (gentle) words.³⁶

Sixth, use the word *maisūran*, a nice word, to not upset the other person. Allah SWT says:

﴿ وَإِنَّمَا تَعْرِضنَّ عَنْهُمْ أَبْتِغَاءَ رَحْمَةٍ مِّن رَّبِّكَ تَرْجُوهَا فَقُلْ لَهُمْ قَوْلًا مَّيْسُورًا ۝﴾

Translate: " But if thou turn away from them, seeking mercy from thy Lord, for which thou hopest, then speak unto them a reasonable word". (al-Isrā' [17]: 28).

In the context of communication, the above verse guides a person to convey subtle words and good hope. It is primarily done when a person is asked for help by

³⁴Abū Qāsim Ḥusain ibn Muḥammad ar-Rāghib al-Ishfahānī, *Muʿjam Mufradāt Alfāz al-Qurʾān*, (Beirūt: Dār al-Fikr, t.th.), 429.

³⁵Lihat surat Thāhā/20: 44

³⁶Abī al-Fidā Ismāʿīl ibn Katsīr, *Tafsīr al-Qurʾān al-ʿAzhīm*, jilid 3, 195. Abū 'Abdillāh al-Qurthubī, *al-Jāmi' al-Ahkām al-Qurʾān*, jilid 6, (Kairo: Dār al-Ḥadīts, t.tt.), 182.

another person while he has not been able to fulfil the other person's wishes. So in order not to cause disappointment, the rejection should be conveyed using subtle words and accompanied by the hope that it can provide the desired help in the future.³⁷

Thus, the word *maisûran* is related to ethics in treating people who ask for help while the party who asked for assistance has not been able to meet it—also related to the content of sentences that can cultivate hope. In its implementation in nursing care, the word *maisûran* is delivered by the nurse when the patient wants a specific nursing action, facility, or drug that will prolong the healing process of the disease. Therefore, in the face of this kind of thing, the nurse should still show a good attitude -such as not showing a sour face -and say words that are soft, pleasant, and hopeful to make relief while getting rid of the frustration of patients who do not meet their demands.

Aspects of Nurse Experience in Spiritual Healing Practice.

Having experience in spiritual healing is very important for nurses because it helps determine the success of any spiritual nursing activities. The importance of the nurse's knowledge is seen from the initial process of her interaction with the patient, where she is required to examine the disorders suffered by the patient through good interview techniques. Furthermore, nurses must establish a diagnosis of the problem suffered by the patient based on the complaints felt by the patient. Often the patient's emotional state varies with the outcome of the diagnosis; some show angry emotions with the condition of their illness, some *denial* (deny experiencing the reality of pain) and prolonged grief, and some also show deep remorse. Of course, different techniques and *treatments* are also required to face these other patient conditions.

In spiritual nursing, nurses must know quickly and precisely the nature of the patient's spiritual problems and then provide appropriate healing interventions to the patient's needs because it may be that the disease experienced by the patient shows several symptoms at once or has more than one causative factor. Thus Ibn Qayyim said that the reaction that appears in the human body is the result of the response of one's psyche and heart, and vice versa. So the medical staff's experience with psychological illness, liver disease, and therapy are very much needed. If the medical staff knows enough about psychiatry and liver disease and its treatment, he can be said to be an excellent medical staff.³⁸

Experience in healing is directly proportional to the knowledge possessed and the healing practice performed. Thus, nurses who have a deep theoretical understanding of healing and often practice it will gain new experiences about the effectiveness of a drug and the proper *treatment* for patients. In verse Yûsuf [12]: 93, As-Sa'di explained that Yusuf, who knew his father had blindness due to deep sadness, left him, asked his

³⁷Sayid Quthub, *Tafsîr fî Zhilâl al-Qur'ân*, jilid 7, 250. Muḥammad al-Musthafâ al-Marâghî, *Tafsîr al-Marâghî*, juz 15, 39.


³⁸Muḥammad bin Abî Bakr ibn al-Qayyim al-Jauziyyah, *ath-Thibb an-Nabawî*, 175.

brothers to bring his robe and rub it on his father's face, and indeed his father would be able to see again.³⁹

From the practice of healing of Prophet Yusuf (as) above, the author catches that Prophet Yusuf (as) knew firsthand that when his father received his robe stained with blood by his brothers, he experienced extreme sadness that caused his eyes to go blind. So, Yusuf wanted his father to smell the scent of his body and know that he was still alive so that his spirit and soul stability would recover again. Such a condition will give a natural effect in the form of the return of his father's sight. From here, it can be understood that the knowledge and experience of Yusuf's life became a factor in triggering the effectiveness of the healing he performed on his father's ailing condition.

Aspects of the Quality of Spiritual Messages.

The spiritual message conveyed by the nurse contains elements of healing or therapy for the patient. The spiritual message that qualifies as healing the patient's spiritual problems is sourced from the Qur'an. Ibn Qayyim argued that the verses of the Qur'an are the best medicine, optimal protection, and guiding light.⁴⁰ The revelation of the Qur'an itself has several functions, one of which has been stated by Allah SWT, namely as a *shifā'*. The word *shifā'* usually means healing or medicine and is also used in the sense of freedom from deficiency or the absence of obstacles in obtaining grace.⁴¹ The function of the Qur'an as a healer /medicine can be found in verses that use the term *shifā'* al-Isrā:


 وَنُنزِّلُ مِنَ الْقُرْآنِ مَا هُوَ شِفَاءٌ وَرَحْمَةٌ لِّلْمُؤْمِنِينَ وَلَا يَزِيدُ الظَّالِمِينَ إِلَّا خَسَارًا

Translation: "And We reveal of the Qur'an that which is a healing and a mercy for believers though it increases the evil-doers in nought save ruin. ". (al-Isrā [17]: 82).

Ibn Qayyim explains that the word *min* in the above verse is to describe types (*li bayān al-jins*), not to indicate division (*tab'dh*). Ibn Qayyim explained that the description of the verse above provides an understanding that the entire verse of the Qur'an functions as a healer. In fact, according to him, Allah has never sent down from the sky a healing medicine that is comprehensive, more functional, and more productive in eliminating disease than the Qur'an.⁴²

In terms of the healing intervention process, Surah Yunus [10]: 57 illustrates how the healing function of the Qur'an is applied in healing spiritual ailments. Allah SWT says:

³⁹Abd ar-Rahmān bin Nāshir as-Sa'dī, *Taisīr al-Karīm ar-Rahmān fī Tafīr Kalām al-Manān*, juz 3, (Riyādh: Mamlakah al-'Arabiyyah as-Su'ūdiyyah, 1404 H), 36.

⁴⁰Muhammad bin Abī Bakr ibn al-Qayyim al-Jauziyyah, *ath-Thibb an-Nabawī*, 224.

⁴¹M. Quraish Shihab, *Tafsīr al-Mishbah: Pesan, Kesan, dan Keserasian al-Qur'an*, vol. 7, 532.

⁴²Muhammad bin Abī Bakr ibn al-Qayyim al-Jauziyyah, *Mukhtashar Zād al-Ma'ād*, terj. Kathur Suhardi, (Jakarta: Pustaka Azzam, 2000), 9.

يَأْتِيهَا النَّاسُ قَدْ جَاءَتْكُمْ مَوْعِظَةٌ مِّن رَّبِّكُمْ وَشِفَاءٌ لِّمَا فِي الصُّدُورِ وَهُدًى وَرَحْمَةٌ
لِّلْمُؤْمِنِينَ

Translation: "O mankind! There hath come unto you an exhortation from your Lord, a balm for that which is in the breasts, a guidance and a mercy for believers.." (Yunus [10]: 57)

The word *shifā* In the verse above is coupled with the words *mau'izhah* (advice), *hudan* (guidance), and *Rahmat* (grace/affection). *Mau'izhah* is taken from the word *wa'azha*, a warning regarding goodness that stirs the heart and causes fear. Meanwhile, *grace* is a pain in the heart because it sees the helplessness of the other party, so it encourages those who are sad to help get rid of that powerlessness. Allah's grace bestowed upon believers is the happiness of life in its various aspects, such as knowledge of true divinity, noble character, good deeds, quality life in this world and the hereafter, including the acquisition of heaven and His pleasure.⁴³

About the healing function of the Qur'an, al-Maraghi explained that the verse above emphasizes the role and purpose of the revelation of the Qur'an, namely as advice, healing, guidance, and mercy. The Qur'an conveys advice and instructions by delivering good news and threats through sentences that arouse to do or leave a case. While in terms of healing, the Qur'an treats diseases lodged in the chest. So that those who want to follow it are in solid faith. Thus, everything contained in the Qur'an becomes a blessing for believers, where its influence makes them always want to do good things, *obey*, avoid disobedience, and be happy in this world and hereafter.

Regarding the practical side of the function of the Koran as a healer, Hamka explained that among heart diseases are pride, prejudice, revenge, despair, prolonged sadness, loss of trust in fellow human beings because they have been disappointed, and others. If not treated, these liver diseases make the liver lose its function and can affect physical health. The effects of liver disease can cause physical ailments, such as high blood pressure, shortness of breath, and diabetes. Therefore, when a person suffers from heart disease, such as prolonged sadness due to the death of a loved child, he should take medicine from the Qur'an. Then he will find that everything that has life must die and that it is God who determines death. Likewise, if a person suffers from a disease of pride, he should look for the cure in the Qur'an, and he will find that everything on this earth belongs to Allah. It is not proper for humans to boast about something that does not belong to them. That way, pride will disappear from his soul.

Internalization of four aspects of spiritual communication therapy Qur'an therapeutic in nurses is expected to be able to have a positive influence on the patient. Nurses are expected to be able to assist patients in responding to illness, change their

⁴³M. Quraish Shihab, *Tafsir al-Mishbah: Pesan, Kesan, dan Keserasian al-Qur'an*, vol. 6, 102.

behaviour in a positive direction, be adaptive, have patience, steadfastness, and acceptance of the disease, and achieve optimal health status.

Conclusion

Quranic therapeutic, spiritual communication is a type of interpersonal communication that nurses do with patients in nursing care. The main goal is to restore the patient's spiritual problems (spiritual distress) due to his illness. The Qur'anic therapeutic, spiritual communication approach is formulated from the philosophical foundations and practices in the Qur'an and the Sunnah of the Prophet and the therapeutic aspects contained therein. In nursing care, the effectiveness of Qur'an therapeutic, spiritual communication as an approach to healing patients' spiritual problems depends on the fulfilment of four therapeutic aspects in it, namely: the quality of the spirituality of the nurse, the nurse's communication skills, the experience of the nurse in the practice of spiritual healing, and the quality of the spiritual message transmitted to the patient.

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