

Conduct of an ideal healthcare worker towards effective service delivery: the Islamic perspective

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Abstract

Background: As the moral decadence of the society becomes the scourge of today's modern health practices, service deliveries in the health sectors is now more compromised. This is despite the shortage of health service providers in Nigeria. The decadence and its consequent harms more especially in the health sector is in big conflict with the Islamic aim of life, which is to worship Allah (SWA) by living healthily and peacefully with your lord and fellow human beings. By extension, the health sector's decadence is a deviation from Islamic prescription and practice of good conduct. The place of good conduct in Islam is understood by it forming 1/25th of the prophethood and being symbolized as the crown of the prophets, truthful and pious people. Hence, this paper identified as its main objective the practice of good conduct as a panacea to the moral decadence scourging the health sector.

Methodology: In cognizance of this study, searches on literature on the topic from library desk, publications and online resources were carried out. The reviews of such literature therefore form the theoretical framework of the paper.

Results: The paper identified Prophet Muhammad (SAW) as the model of utmost good conduct. This approach is highly crucial to the understanding of universal value that facilitates the development, maintenance and Muslim healthcare workers play a crucial role in the development, maintenance and evaluation of the art and practice of the healing profession. The paper further illustrated the role of tolerance, perseverance, sincerity and good interpersonal relationship among the patient, carer and the healthcare provider. Current evidence showed how all these are intertwined to foster quick recovery for patients.

Conclusion: The paper concluded that good conduct rituals incorporated in the healthcare service provisions by ways of Islamic values will foster not only recovery from illness but also limit and/or curtail the often associated psychological and spiritual ailments.

Key words: Healthcare workers, good contact, Islamic perspective.

Introduction

Health status of Nigeria

Nigeria rank 187 out of the 191 countries ranked by WHO in term of the performance of the global health systems.¹ This might be accounted for by dearth of modern healthcare providers in the country. As at April 24th 2019, Nigeria's Medical and Dental Council has registered 88,692 of which 45,000 are

currently practicing in the country.² This gave a ratio of 1 doctor to over 4,000 Nigerians across all the 36 states and FCT. A ratio far below the current WHO recommendation of 1:600, thereby suggesting Nigerians need about 237,000 doctors to serve its population medically. This picture is similar for other vital members of the clinical team. For instance, Nigeria has

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less than 150,000 registered nurses accounting for a ratio of 1:1066.³ This is against 1:700 recommended by WHO. Yet, some of the RNs & RMs are unemployed which practically makes the statistics worse. This pattern seems to be the rule for laboratory scientists, pharmacists, radiographers, optometrists, physiotherapists, CHEWs, general medical technicians and other members of the healthcare team. Do we have them enough?

Apart from poor manpower, other factors that are contributing to the low health status of Nigerians are poor funding, low health literacy level among the populace and undesirable attitude of healthcare workers. In terms of resources allocated to health, the annual budget provides for less than 5% instead of the 15% recommended by WHO. This hence affects the provision of health education to increase health literacy that will change the populace orientation towards seeking health care the right way. Of particular focus, this paper discusses the impact of healthcare providers' undesirable attitude as a major factor that affects the seeking of health services by the populace. And when health services are sought after several delays, it affects recovery from the illness and the often associated psychological and spiritual ailments. To reverse this trend, the paper hereby emphasizes the Islamic

paradigm to good conducts in ensuring healthcare workers' attitude approaches that of the ideal.

Methodology

In cognizance of this study, searches on literature on the topic from library desk, publications and online resources were carried out. The thematic reviews of such literature therefore form the theoretical framework of the paper. The review specifically focused on identifying the Islamic model of good conduct, illustration of the model and recommended emulation to reverse the current immoral and dangerous trends in the attitude of healthcare providers in Nigeria.

Results

The paper painted portraits of the Nigerian patients, sculptured scenarios of bad conducts among healthcare workers, and identified Prophet Muhammad (SAW) as the model of utmost good conduct. This approach is highly crucial to the understanding of universal value that facilitates the development, maintenance and the crucial role good behavior healthcare provider will be playing in the development, maintenance and evaluation of the art and practice of the healing profession. The paper further illustrated the role of tolerance, perseverance, sincerity and good interpersonal relationship among the patient, carer-related to the sick and the healthcare provider. Current evidence

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showed how all these are intertwined to forester quick recovery for patients.

Scenario of Nigerian patients

Most Nigerian are still illiterate health wise. Hence, coming to the hospital is with lots of reluctance as most patients' belief is that without favoritism, they will not be attended to as at when due. This makes following protocol very difficult.

Scenario of some bad health care workers in Nigeria

The patient is a commercial entity (i.e. seen as a client) and medicine a commodity to offer to the highest bidder. Aggressiveness is the pattern of behavior towards the patients, as the patients are rationalized into objects needing control and not tender loving care. Lying is rampant that objective collection of medical data is rare and patients' variables are just arbitrarily generated. Self-monitoring is almost non-existing and as such, there is poor compliance with regulations guiding the healthcare profession. This is worsened by the indolence of the regulatory individual and/or institutions. As such, many patients and some healthcare providers thought that healthcare services are not measuring up to change service-users' behavior towards seeking help early and providers giving the right services early too. In summary, badly behaving healthcare workers have the type of personality described in the hadith as that of

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hypocrisy with three defining features of: whenever he speaks, he tells a lie; whenever he promises, he breaks his promise; and whenever he is entrusted, he commits treachery (proves to be dishonest & disloyal)" (Mishkat Ul-Masabih Vol: One Hadith 150).

Concurrent scenario

Poverty has affected patient coming to seek health services in hospital due to out of pocket payment. So patronage of native healers and charlatans become the robust alternatives. Greed has made healthcare providers to cross professional lines and as such there is usurping of professional responsibility and carrying out duties beyond one's professional competency.

The above scenarios are exemplification of moral decadence in the society and the scourge of today's modern health practices, that have compromised service access, deliveries and utilization in the health sectors. This is despite the shortage of health service providers in Nigeria. The decadence and its consequent harms more especially in the health sector is in big conflict with the Islamic aim of life, which is to worship Allah (SWA) by living healthily and peacefully with your lord and fellow human beings. By extension, the health sector's decadence is a deviation from Islamic prescription and practice of good conduct. Hence, this paper

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identified as it main objective the practice of good conduct as a panacea to the moral decadence scourging the health sector.

The Islamic perspective of good conducts - an overview

Conduct in Islam is defined as a bundle of virtues and vices. When a person is noted with elevated virtues, he/she is referred to as a person of good conduct. On the other hand, if vices are the representing description of any individual, such a person conduct is termed as bad. The status of good conduct in Islam is so desirable that it is described as contributing 1/25th of the prophethood.⁵ Hence, good conduct is symbolized as the crown of the prophets, and all truthful and pious people. Hence, the emphasis that a man of bad conduct shall not enter paradise, while the one with good conduct shall have a Mansion in the loftiest place in paradise. Such explains why Prophet Muhammad (SAW) always prays for good conduct and peace of mind. Furthermore, the Qur'an talks of good conduct in many of its verses e.g. in Suratul Muominun (1-11):⁶ "Successful indeed are the believers, who are humble in their prayers. They strictly guard their five daily prayers in congregation and at affixed time. They also turn away from vain talks. They are those who pay zak'kat, and guard their private part. Except for their wives and those slave whom they possess, so there is no

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blame on them. Whoever seeks beyond that then is a transgressor. And those who faithfully fulfill their trusts and promises. They strictly guard their five daily prayers in congregation and at affixed time. Those are indeed the inheritors. They shall inherit the paradise and reside there forever.

Islamic panacea to bad conduct among healthcare workers

Model of good conducts

The development of good conduct in any spheres of life is hinged on learning and emulating great models of such conducts. To this end, learning the ways of life and emulating the habits of the ideal man ever to life, Prophet Muhammad (SAW) will be the best advantage to all. Hence, the proclamation by our creator, Allah (SWT) that: "*And indeed, (O! Muhammad) SAW you have fastidious manners and "marvelous character". Qur'an (Al-Qalam 68: 4). (O! Muhammad) "so by the mercy of Allah, you are gentle with them (your companions). If you are severe and harsh hearted, they would have broken away from you. Hence pardon their mistakes, ask (Allah's) for their forgiveness and consult them in affairs..."*"⁵ The summary of why we should model ourselves after Prophet Muhammad (SAW) is that he ... "was sent to complete, to fulfill the good manners."

The Prophet (SAW) modeling good conduct

All healthcare providers will be able to learn about and practice good conduct by modeling themselves after the Prophet of Islam, Muhammad (SAW).⁴ This will be by embodying TKD (T=tolerance including patience and hospitality; K=kindness with mercy, empathy and sympathy; and D=dedications to honesty and sincerity) and avoiding AIA (A=arrogance with grandiosity; I=indifference with negligence; and A=anger and/or aggression). This will facilitate living and practicing with kindness, cleanliness, generosity, charity, caring for the sick empathically, helping the poor, avoiding suspiciousness/envy and other matters central to the life of sick and healthy individuals in society.

Emulation of good deeds – establishing good rapport and engagement with patients

The following are principles to help establish good rapport and engage with our patients. These principles regarding rapport and engagement can be seen illustrated in the following Prophetic good deeds and actions. The manner of speech goes a long way in reaching out to our patients and that should facilitate good engagement or not. Hence, our manner of speaking should live up to this deed of “He who believes in Allah and the

last day should speak good word or be silent.”⁴ And, when we have erred we should also live up to, “Fear Allah, where-ever you are and follow bad deeds with good affairs, (this will efface evils) and contact people with good conducts.”⁴

Conclusion

In conclusion, to become and continue to be a good healthcare worker, one should always be aware of and live to demonstrate the embodying of TKD (T=tolerance including patience and hospitality; K=kindness with mercy, empathy and sympathy; and D=dedications to honesty and sincerity) and the avoiding of AIA (A=arrogance with grandiosity; I=indifference with negligence; and A=anger and/or aggression). Such Islamic values will facilitate the practice of good conduct rituals incorporated in to the provision of healthcare service provisions. This will not only foster recovery from illness but also limit and/or curtail the often associated psychological and spiritual ailments.

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Conflict of interest: Nil