

Efficacy of Quranic Therapy and Spiritual Counselling on Death Anxiety & Spiritual Distress among Terminally Ill Patients: A Quantitative Analysis

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Abstract

The Islamic way of life provides a support mechanism and helps patients with terminal diseases. Patients being diagnosed with a terminal disease experience high levels of death anxiety and spiritual grief. It is needed for the patients dealing with death anxiety and spiritual distress to have proper guidance and help to develop positive coping strategies. For this purpose, the present study is designed. A sample of 100 patients diagnosed with grade IV cancer and HIV was selected from hospitals in Lahore, Okara, and Multan. Patients were assessed through the Death Anxiety Scale, the spiritual distress scale, and the brief-RCOPE Scale. After pre-assessment, patients were given 7 sessions of Qur'anic therapy along with positive Spiritual counseling by an Islamic scholar. A post assessment of the study variables was conducted using above mentioned scales. Descriptive analysis, Pearson correlation, t-test, and regression analysis were applied to obtain data using SPSS software. The results of the paired-sample t-test showed that, after receiving spiritual counseling, the levels of death anxiety and spiritual distress were significantly reduced. Moreover, spiritual counseling also enhanced religious coping. This study concluded that there is an overall positive impact on death anxiety, spiritual distress, and religious coping in patients with terminal illness.

Keywords: Quranic Therapy, Spiritual Counselling, Spiritual Distress, Terminal Illness

Introduction

1. Background

Death in Islam is considered a passage that leads one to self-examination, repentance, and achieving a higher spiritual state. Muslims pray Salah and recite the Quran to reinforce their bond with Allah and seek forgiveness from Him as well as from any people they may have wronged. Illness will teach the terminally ill patient faith in God; it will bring health (Sachedina 2005). The powerful force of disease often results in spiritual distress—an ultimate meaning of life disturbance that compromises the physical and psychosocial states of an individual (NANDA International 2021). Painful questioning about existence is involved; guilt is tracked with anger, depression, or alienation. This suffering can enhance pain because the sympathetic nervous system and inflammation are activated (Gouin et al. 2008). In Quranic therapy, spiritual relief is achieved through the recitation of Surah Al-Fatiha. This chapter is entitled “The Opening,” and it establishes a person's connection with Divine mercy and Divine guidance. Its recitation does help in emotional healing and decreases anxiety; recitation in general has been supported with research for its psychological benefits (Sulaiman et al. 2017). The Islamic teachings, along with Quranic therapy, would comprehensively support the spiritual and psychological needs of terminally ill patients.

2. Problem Statement

There is a research gap in the science of Islamic studies, and generally, researchers from the Islamic study field refrain from addressing the psychological and social aspects of human life. It is required that religious scholars come forward and play their role as guides for religious support to terminal illness patients.

3. Objective/ Aims of the Study

This study aims to look into the spiritual distress related to terminal illness. This study further examines the coping strategies implied by the patients to manage symptoms of death anxiety. But the major part of this research aims to see the effects of Quranic therapy and religious counseling to improve the coping strategies of these patients. Moreover, it is

also targeted to ease the suffering of terminally ill patients in the light of Islamic teachings as guided by the Quran and Hadith. The following objectives are designed to be achieved in the proposed study:

1. To assess the death anxiety and religious coping practices of terminally ill patients.
2. To assess the spiritual distress in terminally ill patients.
3. To compare the death anxiety and religious coping practices of cancer and HIV patients.
4. To identify the predictors and correlates of death anxiety, spiritual distress, and coping practices of terminally ill patients.
5. To enhance the religious coping skills to deal effectively with death anxiety experienced by terminally ill patients.

4. Research Questions or Hypothesis

It is hypothesized that:

1. Recitation of Surah Al-Fatiha along with Spiritual counseling decreases the level of death anxiety among patients with HIV and cancer.
2. Quranic therapy and spiritual counseling decrease the spiritual distress experienced by patients with HIV and Cancer.
3. Patients with terminal illness tend to use more positive religious coping strategies after Quranic therapy and spiritual counseling.
4. Quranic therapy and spiritual counseling positively correlate with the positive religious coping strategies used by the patients with HIV and Cancer.
5. There is a significant difference in the level of anxiety in the studied sample of patients between pre- and post-assessment.
6. There is a significant difference in the level of spiritual distress in the studied sample of patients between pre- and post-assessment.

5. Significance of the Study

A thorough study was conducted with the patients of cancer and HIV assessing their death anxiety, spiritual distress, and coping strategies before starting the intervention. Then, intervention in terms of Qur'anic therapy and Spiritual counseling was given to these patients. The same parameters of death anxiety, spiritual distress, and coping strategies were assessed post-intervention. The results were analyzed and discussed accordingly.

6. Structure of the Article

"The article is structured as follows: after a review of relevant literature, the methodology is discussed, followed by analysis of received data, and then the final section presents conclusions and recommendations."

1. Literature Review

Ruqyah spiritual healing is the act of reciting certain verses from the Quran together with prayers to ask for protection or healing from a range of conditions, such as mental, emotional, and spiritual problems. The poems are recited over the afflicted individual by a person known as a Raqī (healer), who performs the act frequently.

References from the Quran: Verses from the Quran: Some of the verses which are normally used in ruqyah are 2:255 (which is popularly known as Ayat al-Kursi), 1:1-7 (Surah Al-Fatiha), and the last two verses of Surah Al-Baqarah, which are 2:285-286.

Tafakkur (Reflective Thinking). It involves deep looking and thinking about the meanings of Quranic words. Individuals can select particular verses that address their woes and spend time reflecting on the guidance and wisdom in the Qur'an. Some of the verses that indicate to think are Surah Sad (38:29), Surah Al-Hashr (59:18-19), and Surah Al-Mumtahanah (60:6).

Daily meditation becomes a form of therapeutic exercise. It is written that one becomes more humble, at peace, or close to God when one bows and prostrates in prayer. It is important to remember that the success of the Quranic therapy may be erratic; the same formula may be successful for some patients, and for others, it may not work at all. Though most Muslims use Quranic therapy as an adjunct to stay healthy in body and mind, we do have to avail ourselves of competent medical and psychiatric help if and when we need to. Reading various verses of the Quran is a part of daily namaz. For example, some verses are read in different rakat when compared to Surah Al-Fatiha.

It is believed that cupping during daily prayers is a therapeutic exercise. It is to be imagined that after the bowing and prostration by prayer, a person wants to be humbler, at peace, and near to God. Remember that the effectiveness of Quranic healing can be relative and can vary from one person to another, and from one community to the other. Also, use of Quranic therapy for patients to adopt thriving like much of Muslims, Nebaben supplements to physical and mental health in general. If you saw a bloodied guy standing in front of you, you would probably be afraid for your life, too." Other articles addressing Blair's tweet have reminded readers and commenters that it can be important to get treatment and therapy, in both a medical and psychiatric way, when needed. In daily worship, various verses from the

Quran are also recited. For example, some verses are recited in one prayer unit while Surah Al-Fatiha is recited in every unit.

Dua (Supplication). This needs a profound meditation and contemplation about the meanings of the verses of the Quran. Individuals can select verses dealing with the issues that apply to them and then spend time reflecting upon the guidance it offers. (Al-Ghazaali) Other famous verses used in supplication are found in Surah Al-Fatiha (1: 1-7), Surah Al-Baqarah (2: 286), and Surah Al-Isra (17:109).

2.1 Classical and Foundational Works

The Holy Qur'an is a collection of healing for all, but some of those verses are healing in which the effectiveness of treatment of sufferings and diseases has been placed, as the Holy Prophet (PBUH) said. As the Holy Prophet (PBUH) said, there is a medication for each sickness, when a medication is appropriately applied to the disease, the patient becomes healthy by the command of Allah Ta'ala. We have to keep in mind that the Holy Qur'an is not a book of magic, practices, talismans, supplications, treatment, and medicine, but Allah has sent it as a guide for humanity, a guarantee of success in both worlds, and a source of knowledge. And this is the purpose of descent. Therefore, whoever accepts it practically, he is successful and proud; otherwise, a person can never achieve their destination after following the Quranic instructions. It is a special grace of Allah that He has also placed the blessings of healing from physical diseases within His Word of Guidance and those desperate and hopeless people who were exhausted after taking all the medicines and treatments of the world, the Quranic treatment brought them back to life and their withered faces shone with hope and happiness. Allah Almighty says:

Say O Prophet: "To the devotees, it is assistance and a recuperating;

Another ayah of Quran to express same meaning,

“وَنُنَزِّلُ مِنَ الْقُرْآنِ مَا هُوَ شِفَاءٌ وَرَحْمَةٌ لِّلْمُؤْمِنِينَ”

We have revealed the Qur'an whichever recuperating or a kindness to the devotees, In the same Context also describe in the hadith,

“عَنْ عَلِيٍّ قَالَ: قَالَ رَسُولُ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ: خَيْرُ الدَّوَاءِ الْقُرْآنُ”

It is narrated from Hazrat Ali, May Allah be delighted that the Envoy of Allah, God may bless and endowment him with peace, stated: "The Qur'an is the best medicine.

Imam Hakim Also narrated his own Book Mustadrak,

“قَالَ رَسُولُ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ: عَلَيْكُمْ بِالتَّيَقَّاتَيْنِ: الْعَسَلُ وَالْقُرْآنُ”

Hazrat Abdullah (Allah may be satisfied with him) says that the Messenger of Allah (peace and endowments of Allah arrive) says: Take two recuperating things, honey and the blessed Holy Qur'an. Also, it has been said that whoever does not seek healing from the Qur'an, there is no healing for him. Therefore, considering the Holy Qur'an as a book of guidance and salvation, more than a book of treatment and medicine, we should keep it with us at every point of life. One should try to understand his teachings and should be engaged in conveying his universal and revolutionary message to others-

2.2 Contemporary Scholarly Perspectives

Before starting with the Qur'anic treatment, it is necessary to talk a little about its evidence. After searching the collection of interpretations and hadiths, it is estimated that in them, because of the service of the people, magic, sorcery, traumatic disturbances, earthly and heavenly events, and supernatural influences are mentioned. Many prayers and Qur'anic verses have been mentioned to remove sight, etc. Among them is the famous hadith with 33 verses, which has been recorded in many books of hadith and which was followed by Mashaikhs and Scholars in every era. They have also been involved in their routines, and through them, God's creation has also received relief from many spiritual and physical sufferings and confusions. That Hadith with evidence of Quranic treatment is also included in one of the important books of Sunan Ibn Majah, which is described here.

It is described on the power of Abu Laila Ansari, Allah may be satisfied with him, that he said: I was sitting close to the Prophet, harmony and favors have arrived, when a Middle Easterner came and expressed: Courier of Allah! My sibling is wiped out. He said: "What disease is your brother suffering from?" He said: He is complaining of insanity. He said, "Go, bring him to me." He went and brought him. The Prophet prepared him (the patient) to sit just ahead of him. I heard that the Prophet recited (and breathed) the following verses on it. Surah Fatiha, the first four verses of Surah Baqarah, two verses from the middle of this (Surat al-Baqarah) (Ayat: 163) and Ayat al-Kursi (Ayat: 255), and three verses from its end (284 to 286), a verse from Surah Aal Imran. Probably this verse was Shahid-Allah-an-nah-la-il-lah-il-la-huhu. (Ayat: 18) A verse of Surah Araaf. In your Lord is Allah. (Ayat: 54) A verse of Surah Mominun (And whoever prays with Allah, there is no proof for him). (Verse: 117) And it is God Almighty. (Verse: 3), the first I bn

Majah. Sunan Ibn Majah. Vol. 4, Edited by Muhammad Fuwad Abdul-Baqi. Beirut: Dar al-Kutub al-Ilmiyya, 1999 Hadith no. 3501. 33 ten verses of Surah Safat, the last three verses of Surah Al-Hashr, (Surah Ikhlas complete and Mu'awhidin) (Surah Falaq and Surah Naas complete), so the Arab recovered and stood up, he had no pain. Another similar hadith to this is in the Musnad of Ahmad bin Hanbal and Mustadrak al-Hakim, and the famous book "Al-Hasan al-Hussain" by Allama Ibn e Jazri, which has recorded the method of reciting these verses and the benefits obtained from it. Also, Shah Abd Al-Aziz Muhaddith Dehlavi has described it in detail in his book "Mamoolat-e-Aziz". These verses are also called Ayaat-ul-Hirs, Ayaat-ul-Harb, and Ayaat-ul-Khouf. Imam al-Haramain Hazrat Allama Abu Muhammad Abdullah Yamni known as Imam Yafi'i (765 AH) has written in his book that Hazrat Muhammad (peace and blessings of Allah be upon him) said: An individual who recites these verses once a day and night will be safe from all calamities, no beast will hurt him and no thief will harm him, and in these verses, there is healing for every disease, one of which is leprosy and vitiligo.

[Haque, (2004)] interpreted that Muslims turned to the Quran for wisdom and direction, reflecting on its passages to learn about morality, the meaning of life, and the essence of existence. [Sabry, Walaa M., and Adarsh Vohr (2013)] argue that modern technology facilitates widespread access to Quranic teachings, enabling individuals to engage in Quranic therapy through online resources, applications, and virtual communities. [Mulla Ali Qari, Ali bin Sultan and Sharah Ain-ul-Ilm Wa Zain-ul-Hilm (1989)] interpreted the definition of spirituality as multifaceted, with diverse interpretations across various cultures, races, and communities. It is a concept that defies a singular definition, adapting to the unique perspectives of individuals from different backgrounds. As William James (1902) explored in 'The Varieties of Religious Experience,' spirituality encompasses a range of beliefs, practices, and experiences that connect individuals to something beyond the material world. Additionally, Carl Jung (1933), in 'Modern Man in Search of a Soul', emphasized spirituality as an inner journey of self-discovery and transformation. This highlights the dynamic and subjective nature of spirituality, illustrating its adaptability to cultural and individual contexts. According to [Contemporary issues in medicine: Communication in medicine (1999)], definitions of spirituality are diverse and encompass a range of perspectives. One common understanding involves a belief in a transcendent power that surpasses individual existence, emphasizing a sense of connection with all living beings. Additionally, spirituality and otherworldliness include a familiarity with life's motivation and importance, adding to the advancement of individual, outright qualities. It serves as a framework for finding meaning, fostering hope, seeking comfort, and cultivating inner peace in one's life. This multifaceted definition underscores the significance of spirituality in providing individuals with a sense of purpose, interconnectedness, and a source of comfort and guidance. According to the British Association for Counseling and Psychotherapy (2022), "Psychotherapy and counselling are general phrases that encompass a variety of talking therapies. They are communicated via trained professionals who work with people either temporarily or permanently to help them achieve positive transformation or increase their wealth.

2.3 Thematic Gaps

There is a scarcity of well-structured, evidence-based research examining the actual **impact** of Quranic therapy and spiritual counseling on terminally ill patients. Most existing literature is theoretical or anecdotal, lacking **quantitative data** or measurable psychological, emotional, and physical outcomes. Modern palliative care often emphasizes physical symptom management, with **restricted inclusion** of spiritual or religious therapies. This gap indicates a need to explore how Quranic therapy can be incorporated into **integrated care approaches** in healthcare systems for terminally ill patients.

2.4 Contributions of the Study

The study highlights the importance of Quranic therapy in terminal illness. It is found that the Islamic belief is that seeking medical treatment is not only permissible but also encouraged. Furthermore, Islam acknowledges the role of adversity and suffering in shaping one's character and strengthening their faith. Muslims are encouraged to view their illnesses and terminal conditions as tests from Allah, opportunities for spiritual growth, and a means of expiating their sins. Allah states that He will test believers with dread, appetite, defeat of prosperity and existence, and illness is included in this list of tests. Additionally, the Quran teaches that those who patiently persevere in the face of illness will be rewarded by Allah. Those who endure their illnesses with patience and rely on Allah's mercy will be granted glad tidings and forgiveness. According to Islamic teachings, illnesses and terminal conditions should not lead believers to despair or lose hope. Rather, Muslims are encouraged to turn to Allah for solace and seek remedies for their ailments. The Quran and Sunnah provide guidance on how believers should cope with terminal illnesses. They emphasize the importance of maintaining tolerance and seeking solace in Allah's mercy. In a study, religious coping was assessed in patients with terminal cancer. It was found that religion helps the coping process of the patients with end-stage cancer as well as the terminal disease impairs one's ability to perform religious rituals. This study concluded that religion is an entirely individual experience, and religious coping needs to have a personalized approach for patients and counselors.

This review of literature emphasized the academic progression and diverse interpretations related to the Quranic therapy and spiritual counseling. It also shed light on a significant thematic and empirical gap, particularly the limited integration of culturally rooted spiritual interventions within terminal care frameworks. The study highlights the gap through evaluating the efficacy of Quranic therapy and spiritual counseling in enhancing the psychological and emotional well-being of terminally ill patients, thereby contributing to an in-depth study and culturally appropriate model of palliative care.

3. Research Methodology

For the investigation of the efficacy of Quranic therapy and spiritual counselling on terminally ill patients in the province of Punjab, the methodology of research is designed carefully to ensure the study's objectives.

3.1 Research Design

This investigation involves a mixed-methods design that associates quantitative and qualitative approaches. The quantitative part consists of the method for measuring the efficacy of Quranic therapy through predefined outcomes, while the qualitative part involves exploring patients' and caregivers'

The study is based on subjective experiences through interviews. Moreover, this assessment will be carried out in hospitals, hospices, or homes in Punjab where terminally ill patients are admitted and are receiving care.

3.2 & 3.3 Sources of Data and Data Collection Methods

A non-probability convenience sampling technique was used for the sample selection of the study, as randomization of the sample is not possible for the proposed study. Purposive sampling will be used for qualitative aspects (interviews with patients, families, counselors), and random sampling may be used for selecting participants for quantitative outcomes. **Participants Recruitment.** The proposed study was conducted on 100 patients diagnosed with a terminal illness. The required sample of terminally ill patients is based on screening criteria or inclusion criteria such as willingness to participate in Quranic therapy, age, gender, type of illness, and stage of disease. Caregivers or healthcare professionals may also be included in interviews. The sample has been divided into two groups, i.e., 50 patients diagnosed with grade IV cancer and 50 patients diagnosed with HIV were carefully chosen from public and private sector hospitals treating HIV and cancer patients from Lahore, Okara, and Multan. The age range of the sample was kept between 18-60 years.

3.4 Analytical Tools and Techniques

For determining the efficacy of Quranic therapy and spiritual counselling on terminally ill patients, including patients with AIDS and cancer in the province of Punjab following 110 scales will be used such as death anxiety scale, the spiritual distress scale, and the brief RCOPE Scale. I. The Religious Coping Scale (RCOPE) is a psychological assessment tool designed to measure how individuals use their faith-centered approaches for managing life's difficulties and circumstances with patience. The religious coping scale involves both the positive and negative coping scales with Quranic elements.

3.5 Limitations of the Study

Since the study focuses on a specific cultural and religious context, the findings may not be generalizable to other populations or religions.

- The data is collected at one point in time, so it won't capture long-term effects of Quranic therapy.
- Reliance on questionnaires and interviews might introduce bias, as patients may report outcomes based on how they feel in the moment

3.6 Ethical Considerations

- Right to Withdraw: There will be no repercussions if participants decide to leave the research at any point.
- Confidentiality: Ensure that patient information is anonymized, and data is securely stored.
- Cultural Competence: Since the study deals with spiritual and religious practices, researchers must be sensitive to the beliefs and customs of the participants.

Voluntary Consent: All participants will be completely conversant regarding the purpose of the research and provide consent to participate

4. Data Analysis and Discussion

Descriptive statistics involving patient characteristics (age, gender, type of illness, etc.) sum and responses to standardized scale were collected along with the Inferential Statistics involving paired t-test or ANOVA for pre- and post-intervention comparisons to evaluate the impact of the therapy on pain, anxiety, and spiritual well-being was applied on the data collected and the results obtained were analyzed. Considering the preliminary focus of this study, a significance level of $p < 0.05$ was applied. With a statistically substantial outcome ($p < 0.01$), the data indicate that Quranic therapy could have a tangible effect on the outcome, advocating for additional research and potential integration in supportive care practices. Spearman correlation coefficients were assessed as follows: $r > 0.5$ denoted a significant relationship, r from 0.3 to 0.5 represented a moderate relationship, r from 0.2 to 0.3 indicated a weak

correlation, and $r < 0.2$ was viewed as negligible or no correlation (Sohail & Büssing, 2022). Regression analysis for correlating Quranic therapy sessions with lower death anxiety while controlling for demographic variables was done through statistical analysis. Our study is an attempt to provide a way to ease the pain and give a relaxing remedy to those with terminal illness. This study shows how a person who is attending to a sick patient or visiting him can use the words of the Quran to ease the suffering of this patient. And how a sick person himself can recite the Surah Fatiah to relax and decrease the pain and anxiety he has.

Results of the study:

Cohen's d of 1.57584 and Hedges' correction of 1.58803 signify a large positive effect of the intervention, with confidence intervals ranging from 2.962 to 4.545 and 2.939 to 4.510, respectively. This suggests a significant improvement in the assessed condition.

SDS Total:

Cohen's d of 11.02652 and Hedges' correction of 11.11181 represent an exceptionally large effect, with confidence intervals from 3.421 to 5.215 and 3.395 to 5.175. This indicates a substantial positive impact of the intervention.

COPING Total:

Cohen's d of 3.86803 and Hedges' correction of 3.89795 demonstrate a large effect, but the confidence intervals (from -2.006 to -1.519 and -1.991 to 1.508) suggest a decrease in scores, indicating a negative change in coping strategies.

Table

Paired Sample t-test Comparing Death Anxiety, Spiritual Distress, and Religious Coping.

Across Pre and Post Assessment of Spiritual Counselling (NI-00)

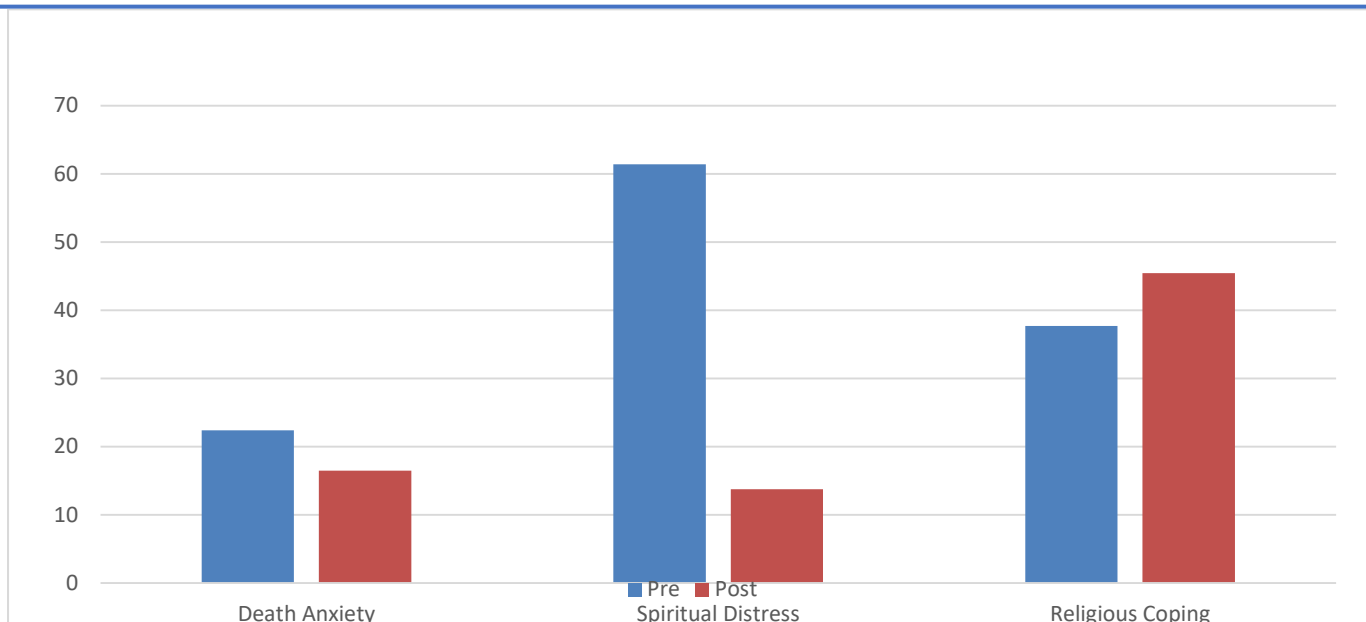
| Variable | Pre | | Post | | $t(49)$ | $p <$ | Cohen's d |
|--------------------|-------|------|-------|------|---------|-------|-------------|
| | M | SD | M | SD | | | |
| Death Anxiety | 22.40 | 1.60 | 16.48 | 0.76 | 26.56 | .001 | 1.57 |
| Spiritual Distress | 61.40 | 7.78 | 13.76 | 7.31 | 30.55 | .001 | 11.02 |
| Religious Coping | 37.68 | 2.86 | 45.44 | 2.11 | -14.18 | .001 | 3.86 |

Note: M = mean, SD = standard deviation, effect size = *Cohen's d*

The results of the paired-sample t -test showed that, after receiving spiritual counseling treatment, the levels of death anxiety and spiritual distress were significantly reduced in post-assessment for HIV and cancer patients. Moreover, spiritual counseling also enhanced religious coping in the post-assessment for HIV and cancer patients. The results further showed that spiritual counseling had a large impact in terms of effect size on the reduction of death anxiety and spiritual distress, as well as the enhancement of religious coping.

Graph

Histogram of the mean scores on Pre and Post Assessments of Death Anxiety and Spiritual Distress and Religious Coping in HIV and Cancer Patients.



The figure above illustrates that, after receiving spiritual counseling, the average scores for death anxiety and spiritual distress decreased, while the average scores for religious coping improved.

4.1 Thematic Presentation of Findings

The Quranic therapy and spiritual counselling in Qur'anic Discourse

Ibn 'Abbas stated: It is Sunnah to visit a sick person for the first time, but any follow-up visits are optional (good deeds). According to Abu Musa, the Prophet, peace be upon him, commanded, Visit the sick, feed the hungry, and release the prisoners. The Prophet, peace be upon him, said: A Muslim owes another Muslim six duties. They questioned, What are these? He responded, When you see another Muslim, you should welcome him, answer his invitations, and provide your (true) counsel when he asks for it. To visit him when he becomes unwell, to attend his burial after his death, and when he sneezes, to say May Allah have mercy upon you, and may Allah be praised. According to Abu Hurairah, the Messenger of Allah, peace be upon him, said: A caller from heaven says, 'You are excellent and your route is good,' to the one who pays a visit to a sick person. I hope you get into your Paradise home.

4.2 Relation to previous studies

According to Thawban, the Prophet (peace be upon him) stated, when a Muslim comes to his debilitated Muslim sibling, he is, in a manner of speaking, in one of the nurseries of Heaven (partaking in its ready natural products) until he gets back to his home. Ali said: I heard the Messenger of Allah, harmony arrive, saying: 'When a Muslim visits a wiped-out Muslim in the first part of the day, 70,000 holy messengers petition God for him, and they keep appealing to God for him until that night. At the point when one visits the debilitated at night, the heavenly messengers appeal to God for themselves and keep petitioning God for him until the following morning. Also, he will be compensated with the choicest products of Heaven.

Al-Bukhari, Abu Dawud, An-Nasa'i, and Ibn Majah also recorded this Hadith. Additionally, Abu Hurayrah was quoted by Imam Ahmad as saying, As Ubayy bin Ka'b was praying, the Messenger of Allah went out and said, (O Ubayy!) Ubayy didn't respond to him. (O Ubayy!) The Prophet said. O, Ubayy, Peace be unto you, O Messenger of Allah! After concluding his prayer more quickly. Peace be unto you, he said. What stopped you from responding at the point I called you, O Ubayy? He answered, O Messenger of Allah! I was in prayer. Have you not read between the things Allah has sent down to me? He asked.

”اسْتَجِيبُوا لِلَّهِ وَلِلرَّسُولِ إِذَا دَعَاكُمْ لِمَا يُحْيِيكُمْ”

(Respond to Allah (by following Him) and His Messenger when He summons you to the thing that provides living to you. He responded, Yes, O Messenger of Allah! I'm not going to repeat it. The Prophet stated

”أَتُحِبُّ أَنْ أَعْلَمَكَ سُورَةً لَمْ تَنْزَلْ لَ فِي التَّوْرَةِ وَلَا فِي الْإِنْجِيلِ وَلَا فِي الزَّبُورِ وَلَا فِي الْفُرْقَانِ مِثْلَهَا؟”

(Would you want to learn a Surah from me, in which the Tawrah, the Injil, the Zabur (Psalms), or the Furqan (Qur'an) reveal nothing? Yes, he responded, O Messenger of Allah! Until you have learnt it, I hope I won't depart via this door, said the Messenger of Allah. As the Messenger of Allah spoke to me, he (Ka'b) grasped my hand. In the meantime, I was slowing down out of concern that he might get to the door before he had completed speaking. As we got closer to the entrance, I said, O Messenger of Allah! Which Surah have you promised to teach me, exactly? (In the prayer, what do you read?) He asked. So I recited Umm Al-Qur'an to him, Ubayy recalled. He stated,

By Him, my soul is in His hands! Such a Surah has never been disclosed by Allah in the Tawrah, the Injil, the Zabur, or the Furqan. It's the seven verses that I was granted repeatedly.

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By Him, my soul is in His hands! Such a Surah has never been disclosed by Allah in the Tawrah, the Injil, the Zabur, or the Furqan. It's the seven verses that I was granted repeatedly.

4.3 Implication of the study

The study emphasizes the importance of addressing not only physical but also spiritual and emotional needs of terminally ill patients, focusing on a more comprehensive and culturally informed approach to end-of-life care. This research involves the support findings related to Quranic therapy and Islamic spiritual counseling in palliative care settings, especially in Muslim-majority societies, to ensure religiously and culturally relevant support. The study and research elaborate and offer key evidence about healthcare policies, appreciating hospitals and hospice centers to integrate qualified spiritual care providers into interdisciplinary teams.

4.4 Summary of key points

It is impossible to imagine a society without illness. Health and disease are the two most important aspects of human life. Islam is a complete code of life, and it provides complete guidance about every problem faced by a man in his lifetime. As it has already been discussed that seeking treatment for a disease is not only allowed but also encouraged for the followers of Islam. We have already seen how Prophet Muhammad (Peace be upon Him) not only allowed his companions but He got medical treatment for various ailments. Medical sciences were not much evolved at that time, which made a lot of diseases and health issues untreatable, and once a person caught such a disease, it was thought to be terminal and often ended with the demise of the person. We have references to such diseases, for example, plagues and the Black Death in all ancient scriptures. Our beloved Prophet Muhammad (peace be upon Him) gave very specific guidance to deal with such outbreaks and diseases to minimize the spread of the diseases and also minimize the death count due to the spread of this disease. Even after more than fourteen centuries, the words of Prophet Muhammad (peace be upon Him) were recalled, repeated, and implemented in the whole world during the recent COVID-19 pandemic by believers and nonbelievers alike. Surah Al-Fatiha, also known as Ash-Shifa (The Cure), is extremely important in Islamic healing traditions, particularly Ruqyah, a type of petition and recitation used for protection and healing. Many academics and practitioners think that reading Surah Al-Fatiha with sincerity and solid conviction can provide relief for bodily and spiritual ailments, including chronic diseases like cancer and HIV. While modern medicine is still necessary for treating these problems, incorporating Ruqyah as a complementary spiritual therapy can offer patients emotional strength, inner calm, and a sense of heavenly assistance. Numerous Islamic traditions stress the remarkable healing qualities of this Surah, as Prophet Muhammad (PBUH) personally confirmed its efficacy when employed as a treatment. Thus, for those battling life-threatening illnesses, reciting Surah Al-Fatiha regularly with unwavering faith can be a source of comfort, hope, and potential healing by the will of Allah.

Conclusion

When dealing with terminal illness, the guidance of the medical community revolves around palliative management of the disease. Palliative management means to ease the pain and suffering of the patient and make end-of-life care easier for the patient and caregivers together. The Islamic school of thought also encourages calming and trying to reduce stress in an ill person. It is already discussed above that many verified Hadith and actions of Prophet Muhammad (peace be upon Him) guide us to visit an ill person and provide any kind of moral, physical, or social support to the ill, to make sure the ill person is well taken care of. Visiting a sick Muslim, offering emotional support, and ensuring their well-being are all part of Islamic etiquette. Our study also showed that providing moral and religious support to the patients fighting with terminal illness can be further enhanced with the help of Quranic therapy as prescribed by the teachings of our Beloved Prophet (peace be upon Him).

Recommendations

In the light of the findings of our study, we can make the following recommendations:

1. Islam is a religion of hope and belief in the destiny as written by Almighty Allah. One should accept his destiny and should be patient when faced with a terminal illness.
2. Use of Surah Fatiha and other Quranic verses is recommended by Prophet Muhammad (Peace be upon Him) for the patients of terminal diseases.
3. Currently, the medical profession has distanced itself from the religious aspect of life. But religion and belief are an integral part of a person's life. So, medical professionals should also consider and include the religious aspects in their treatment plans.
4. Religious aspects of diseases and the Quranic and Hadith approach to various illnesses should be a part of the curriculum of medical students.
5. The role of religious scholars in the end-of-life management of terminally ill patients is undeniable.
6. There should be a religious scholar appointed at health care institutes who can provide religious guidance and spiritual support to terminally ill patients.
7. When a person is terminally ill, he may face certain religious dilemmas and confusions. Only a religious scholar who has profound knowledge and experience of Islamic jurisprudence can cater to the questions that arise in the mind of a terminally ill patient.

Limitations and Future Research Directions

The study has limited generalizability due to a small sample of terminally ill patients and cultural constraints. This also involves difficulties in quantifying deeply personal spiritual experiences and a short-term focus. For future directions, larger and more diverse samples across multiple regions should be studied with the sustained effects of spiritual counseling and Quranic therapy and comparative research.

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