

# Globethics Repository

The logo for Globethics, featuring the word "Globethics" in white, sans-serif font centered within a solid blue rectangular background.

## Islamic Bioethics

This page was generated automatically upon download from the Globethics Repository. More information on Globethics see <https://www.globethics.net>. Data and content policy of Globethics Repository see <https://repository.globethics.net/pages/policy>.

Item Type	Article
Authors	Syaefudin, Ali Akhmad;Rosita, Linda
Rights	With permission of the license/copyright holder
Download date	2026-06-24 11:18:15
Link to Item	<a href="http://hdl.handle.net/20.500.12424/188376">http://hdl.handle.net/20.500.12424/188376</a>

## Islamic Bioethics: The Art of Decision Making

Syaefudin Ali Akhmad<sup>a)</sup>

Linda Rosita<sup>a)</sup>

<sup>a)</sup>Faculty of Medicine, Islamic University of Indonesia

### ABSTRACT

In Islam, bioethical decision-making is carried out within a framework of values derived from the revelation and tradition. Islamic bioethics or Islamic medical ethics are referring to Islamic guidance on ethics and moral issues related to medical and scientific fields, especially those dealing with human, based from the *Quran* and *Hadith*. In Islam, human is one of the most sacred creatures of God. Therefore, he/she must be appreciated, respected and well protected. Apparently, Muslim doctors have always been facing dilemmas on bioethical decision making during their practices. There are so many conflicting issues coming from multiple points of views such as discipline, legal, ethical, *sharia*, social, cultural and financial aspects. Muslim doctors should answer the dilemmas on each diagnosis and treatment intervention by having a good decision making as their first step. By implementing Islamic framework on bioethical decision making, guided by *sharia* which includes *Quran*, *Hadith*, *Ijma*, and *Qiyas*, it is expected that this framework will be able to assist Moslem doctors to solve their dilemmas in this world and in the hereafter. A triangulation framework known as Islamic bioethics consisting of triangle I and triangle II will ease Moslem doctors to have the final decision for their daily medical practices. These triangle framework will be powerfull in use if combined with Prima Facie approach and a five-digit approach.

**Keyword:** *Islamic Bioethics, maqosidus-syariah, qowaidus-syariah, triangle framework, bioethical decision making*

### Introduction

Bioethics teaching and education is a must and becoming a necessity for all faculty of medicine in Indonesia including faculty of medicine Islamic university of Indonesia (FM IUI). Teaching bioethics in faculty of medicine in Islamic University of Indonesia (IUI) have been delivered in Block of Professionalism and Leadership in medicine in Indonesia called Blok Profesionalisme dan Kepemimpinan Kedokteran (blok KPK) and Medicolegal [1].

The purpose of bioethics teaching is to understand the principle of bioethics and to make student more sensitive with issues of bioethics in health services. On the end of bioethics teaching students can make bioethical decision making properly. In the simple way, education bioethics shall cover four points including **promotion** of bioethics in all area of interest, **prevention** of bioethical disruption on technology usage, **identification** of bioethical issues by various perspectives, **resolution** of bioethics problems using a good bioethics decision-making.

IUI is the oldest private Islamic University in Indonesia having 16.000 students. IUI was established since 1945 by founding fathers of Republic of Indonesia such as Soekarno, Hatta, Agus Salim, Wachid Hasyim, and Kahar Muzakkir etc. All of them have the same spirit in developing Indonesia by spirit Diversity/Plurality in Unity based on five principles (Pancasila). They want to create generation through education on IUI as wise Moslem sensitive with Indonesian culture. Islam and Pancasila have close relation like soul and body. As IUI having

Islamic vision & mission to be agent of da'wah (propagation) for Islamic value mentioned in slogan Rahmatallil'alam (mercy for all), FM IUI should create specific content as local wisdom for its student in order to translate its vision and mission. Therefore it is important to teach Islamic bioethics that guide decision-making process in increasing social welfare and human dignity.

In Islam, bioethical decision-making is carried out within a framework of values derived from the revelation and tradition. Islamic bioethics are referring to Islamic guidance on ethics and moral issues related to medical and scientific fields, especially those dealing with human, based from the *Quran* and *Hadith* [2].

In Islam, human is one of the most sacred creatures of Allah (God not Gold, Gospel and Glory). Therefore, he/she must be appreciated, respected and well protected. Islam has conception of human being completely as biopsychosocioreligius creature. Therefore all effort will be done in protecting, respecting and fulfilling humanity using completely approach of Islamic way of life [3].

### Islam and Bioethics

Islam literally means 'submission to the Will of Allah (God)'. Islam is both a religion and a complete way of life. It is a universal religion comprising all nationalities of the world, holding no distinctions based on color, race or ethnicity. Islam places the onus of practicing religion on the individual [3].

Islam is a religion of peace, mercy and forgiveness, and the majority of its teachings bear no relation to the extremely grave events that have come to be associated with the faith in the public mind. In Islam, human beings are the crown of creation and are God's vice-regents on earth [4]. Humans are endowed with reason, choice and responsibilities, including stewardship of other creatures, the environment and their own health. Muslims are expected to be moderate and balanced in all matters, including health [5]. Illness may be seen as a trial or even as a cleansing ordeal, but it is not viewed as a curse or punishment or an expression of Allah's wrath. Hence, the patient is obliged to seek treatment and to avoid being fatalistic [3].

Islamic bioethics is intimately linked to the broad ethical teachings of the Qur'an and the tradition of the Prophet Muhammad, and thus to the interpretation of Islamic law [4]. Bioethical deliberation is inseparable from the religion itself, which emphasizes continuities between body and mind, the material and spiritual realms and between ethics and jurisprudence. The Qur'an and the traditions of the Prophet have laid down detailed and specific ethical guidelines regarding various medical issues<sup>5</sup>.

**Framework of Islamic Bioethics**

Islamic bioethics is an extension of Shariah (Islamic law), which is itself based on 2 foundations: the Qur'an (the holy book of all Muslims, whose basic impulse is to release the greatest amount possible of the creative moral impulse and is itself "a healing and a mercy to those who believe" and the Sunna (the

aspects of Islamic law based on the Prophet Muhammad's words or acts). Development of Shariah in the Sunni branch of Islam over the ages has also required *ijmaa* (consensus) and *qiyas* (analogy), resulting in 4 major Sunni schools of jurisprudence. Where appropriate, consideration is also given to *maslaha* (public interest) and *urf* (local customary precedent). In the absence of an organized "church" and ordained "clergy" in Islam, the determination of valid religious practice, and hence the resolution of bioethical issues, is left to qualified scholars of religious law, who are called upon to provide rulings on whether a proposed action is forbidden, discouraged, neutral, recommended or obligatory [3]. If there is no rule in Qur'an and Sunnah, shoolar shall make effort by *ijtihad* (*ijmaa* and *qiyas* if possible) to give fatwa whether the resolution of those issues is *wajib* (obligatory), *sunah* (recommended), *mubah* (allowed for zero point/neutral), *makruh* (discourage but allowed with risk) or *haram* (prohibited) to implement in our society or our patient. *Wajib* means that action should be done and will ascertain full benefit (certain 100 %) in this life and hereafter. *Sunah* means that action recommended because will give much more benefit (approximately 90 %). *Mubah* means there is possibility to get benefit (50%) and just for this life not in here after. *Makruh* means that action has probable harm in our life and *haram* is certain full harm and evils for our life. From that point of view, principle of Islamic bioethics is triangle framework of Qur'an, Sunnah and *Ijtihad* to make final decision whether it is *wajib*, *sunah*, *mubah*, *makruh* or *haram* [2]. The consequence of various act in doing or not doing can be understood in table 1.

Table 1. The consequences of doing or not doing an action in Islam

Classification of act	Commission (action done)	Omission (action not done)	Benefit or harm
Wajib	Reward	Punishment	Sure 100 % benefit
Manduub, mustahabb, or masnuun	Reward	No punishment	Probable less than 100% benefit
Haram	Punishment	Reward	Sure 100 % harm
Makruuh	No punishment	Reward	Probable harm less than 100 %
Mubaah	No reward	No punishment	Neutral Possible harm or benefit

The principle of Islamic bioethics consist of pillars of islam, pillars of iman and pillar of ihsan. Pillars of islam include testimony of Tawhid (credo) and Rosul (as model for practicing), establishing sholat, fasting, spending Zakat and Hajj (Pilgrimage to Makkah and Madinah). Pillars of iman consist of conviction of Existence of Allah (Oneness), Rosulloh Muhammad, Angels, Holy Book, Resurrection Day, Determination of Allah (Taqrdir). Pillar of ihsan is Allah always getting involved in every part of our activity. The basic level of bioethics according to Holy book and Sunnah is Islam becoming outer dimension. The intermediate level of bioethics is Iman becoming inner dimension and the highest level of bioethics is Ihsan to do the best in everywhere.

Ihsan can not manifest without Iman and Iman can not manifest without Islam. Prophet Muhammad Peace be Upon Muhammad (PBUH) said that the most important of Iman is *La ila ha illallah* (there is no God who must be worshipped except Allah) and *La Ila ha Illallah* has seventy branch. The smallest branch of Iman (faith) is to remove thorns from the road. Therefore Islamic bioethics is combination of three pillars that make triangle framework to make final decision all issues on the basis of level of good such as in fig.1.

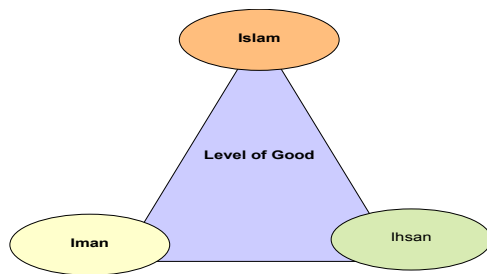


Fig. 1. Triangle Framework based on Level of Good

Issues on bioethics can be viewed from perspective Islam by using Maqosidush Shariah, and Qowaidush Shariah as well as Ta'li. Maqosiduh shariah mean the purpose of rule in Islam to protect morality and spirituality (religion/ad-din) in relation with The Creator, to protect life, to protect mind, to protect progeny, to protect wealth, and to protect environment. Medical intervention by medical doctor should take into account the purpose of religion. **Protection of religion (hifdh al ddiin)** essentially involves 'ibadat (religion service) in the wide sense that every human endeavor is a form of 'ibadat. Thus medical treatment makes a direct contribution to 'ibadat by protecting and promoting good health so that the worshipper will have the energy to undertake all the responsibilities of 'ibadat [6]. A sick or a weak body cannot perform physical 'ibadat properly. Balanced mental health is necessary for understanding 'aqidat and avoiding false ideas that violate true 'aqidat. Health service or medical treatment should avoid syirk (dualism) that Allah alone who cure any kind of disease. Ikhtiar (effort) is compulsory to looking for medicine. Therefore medicine can cure by permittdepend on Allah will's [7]. Medicine cannot cure without permit of Allah and Allah can cure without medicine [8]. **Protection of life (hifdh al nafs)** means that the primary purpose of medicine is to fulfill the second purpose of the Law, the preservation of life, *hifdh al nafs*. Medicine cannot prevent or postpone death since such matters are in the hands of Allah alone. It however tries to maintain as high a quality of life until the appointed time of death arrives. Medicine contributes to the preservation and continuation of life by making sure that physiological functions are maintained. Medical knowledge is used in the prevention of disease that impairs human health. Disease treatment and rehabilitation lead to better quality health. **Protection of progeny (hifdh al nasl)** means that Medicine contributes to the fulfillment of the progeny function by making sure that children are cared for well so that they grow into healthy adults who can bear children. Treatment of infertility ensures successful child bearing. The care for the pregnant woman, peri-natal medicine, and pediatric medicine all ensure that children are born and grow healthy. Intra-partum care, infant and child care ensure survival of healthy children. **Protection of the mind (hifdh al 'aql)** means that medical treatment

plays a very important role in protection of the mind. Treatment of physical illnesses removes stress that affects the mental state. Treatment of neuroses and psychoses restores intellectual and emotional functions. Medical treatment of alcohol and drug abuse prevents deterioration of the intellect. **Protection of wealth (hifdh al maal)** means that the wealth of any community depends on the productive activities of its healthy citizens. Medicine contributes to wealth generation by prevention of disease, promotion of health, and treatment of any diseases and their sequelae. Communities with general poor health are less productive than healthy vibrant communities. The principles of protection of life and protection of wealth may conflict in cases of terminal illness. Care for the terminally ill consumes a lot of resources that could have been used to treat other persons with treatable conditions [9]. The last one is **protection of environment** that now all material in our environment is loaned by our grandson in the next generation.

Qowaidush shariah mean the principle of rule in Islam consisting of intention principle, certainty principle, injury principle, hardship principle, and custom principle. **The principle of intention (qa'idat al qasd)** means that the Principle of intention comprises several sub principles. The sub principle 'each action is judged by the intention behind it' calls upon the physician to consult his inner conscience and make sure that his actions, seen or not seen, are based on good intentions. The sub principle 'what matters is the intention and not the letter of the law' rejects the wrong use of data to justify wrong or immoral actions. The sub principle 'means are judged with the same criteria as the intentions' implies that no useful medical purpose should be achieved by using immoral methods. **The principle of certainty (qa'idat al yaqeen)** means that medical diagnosis cannot reach the legal standard of absolute certainty, *yaqeen*. Treatment decisions are based on a balance of probabilities. The most probable diagnosis is treated as the working while those with lower probabilities are kept in mind as alternatives. Each diagnosis is treated as a working diagnosis that is changed and refined as new information emerges. This provides for stability and a situation of quasi-certainty without which practical procedures will be taken reluctantly and inefficiently. The principle of certainty asserts that uncertainty cannot abrogate an existing certainty. Existing assertions should continue in force until there is compelling evidence to change them. All medical procedures are considered permissible unless there is evidence to prove their prohibition. **The principle of injury (qa'idat al dharar)** means that medical intervention is justified on the basic principle is that injury, if it occurs, should be relieved. An injury should not be relieved by a medical procedure that leads to an injury of the same magnitude as a side effect. In a situation in which the proposed medical intervention

has side effects, we follow the principle that prevention of an injury has priority over pursuit of a benefit of equal worth. If the benefit has far more importance and worth than the injury, then the pursuit of the benefit has priority. Physicians sometimes are confronted with medical interventions that are double edged; they have both prohibited and permitted effects. The guidance of the Law is that the prohibited has priority of recognition over the permitted if the two occur together and a choice has to be made. If confronted with 2 medical situations both of which are injurious and there is no way but to choose one of them, the lesser injury is committed. A lesser injury is committed in order to prevent a bigger injury. In the same way medical interventions that are in the public interest have priority over consideration of individual interest. The individual may have to sustain an injury in order to protect public interest. In many situations, the line between benefit and injury is very fine. **The principle of hardship (*qaidat al mashaqqat*)** means that medical interventions that would otherwise be prohibited actions are permitted under the principle of hardship if there is a necessity. Necessities legalize the prohibited, *al daruuraat tubiihu al mahdhuraat*, and mitigate easing of legal rules and obligations. In the medical setting a hardship is defined as any condition that will seriously impair physical and mental health if not relieved promptly. Committing the otherwise prohibited action should not extend beyond the limits needed to preserve the purpose of the Law that is the basis for the legalization. The temporary legalization of prohibited medical action ends with the end of the necessity that justified it in the first place. **The principle of custom or precedent (*qaidat al urf*)** means that The standard of medical care is defined by custom. The basic principle is that custom or precedent has legal force. What is considered customary is what is uniform, widespread, and predominant and not rare. The customary must also be old and not a recent phenomenon to give chance for a medical consensus to be formed [9].

Another method to find out the rule regarding issues ethics that had never been happened in Rosululloh periode is ta'lili. *Ta'lili* is qiyas methods which include reasoning as a starting point, based on 'illat law. 'Illat is the nature of legal reasons. 'Illat can also be interpreted as a consideration behind of rulling. For example in the hadith there is no order to take zakat (alms) only from three types of crops are: wheat, dates (dried) and grapes. Some scholars who understand this tradition with the pattern of bayani supposed that only these three types of plants that are subject to rule of zakat according to the text explicitly. Most scholars have been working to find an 'illat to determine another kind of crops and then extend it to other plants that have similar an 'illat. Some scholars have argued that crops or plants can make satiety and grow on the cultivation to be basic reasoning and justification. This method applies to

the events that had never happened at the Messenger period. Then there is a new triangle framework to make Islamic bioethical decision-making for getting beneficence such as fig. 2.

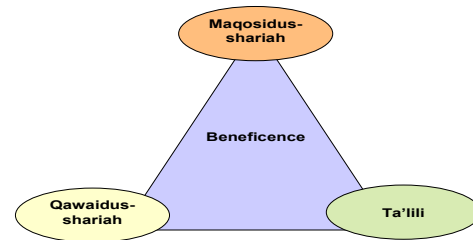


Fig. 2. Determination of beneficence according to Islam

On the practical dimension of islamic bioethics in making of decision, the Moslem Doctor need Prima Facie Approach for selecting the most important value, duties, obligation, Muhammad tradition and Mashlahah (social benefit). Prima facie approach also can do for selecting the less mafsadat (harm) among all kinds of harm. According to William D. Ross Prima Facie means on the first sight that obligation for temporary applies untill arising more important obligation that can beat the first obligation for a while applies. Ross arrange the seven obligation of prima facie consisting of obligation to keep the loyalty when make promises freely, obligation of indemnification, obligation to thank, obligation to do justice, obligation to do good, obligation to develop our-self, and obligation to do no harm [10]. In Islam, obligation divided into two category that is obligation to Allah (Creator) and Obligation to the Creature. Obligation to Allah in the normal condition should be punctual and prioritized but in the emergency condition can be postponed to make priority to do obligation to the creature. Based on Qur'an Chapter 9 verses 24 the most important obligation is to Allah, Rosululloh and religious struggle compare with 8 others thing such as fathers, sons, relatives, mates, kindred, wealth that you have gained, the commerce in which you fear a decline, or the dwelling in which you delight [11]. Every human being has intuition about obligation to do in real situation but most of human have no intuition to choose the best obligation in real situation among another obligation. For that reason people need to use the intellec to weighing and prioritizing the most important obligation in real situation. Pratiknyo A.W. (1986) propos the five digit model to make consideration for determining the most important obligation on prima facie approach as the best way in decision making based on Sharia Islam [12]. This model has benefit to uphold humanity function in the world according to islamic point of view consisting of service function of human (*fungsi pengabdian*) to worship, leadership function (caliph function) or *fungsi kekhalifahan* to utilize all facilities in this world to create peace and well being, treatise function to convey all message from Allah in the Holly Qur'an to human being, and

virtue function to develop the qualities of human being.

This model consist of phylosophies value as first digit, motivation value as second digit, prognostic value as third digit, Technic value as forth digit and paratechnic value as fifht digit.

First digit is the highest hiraercy for assessment and become basic value for other digit. By first digit medical doctor will make consideration on phylosophical basis to draw clear deliberation regarding the issues. To draw the best deliberation medical doctor also will use tiangle framework I dan II. Then the result of digit one is the best argument and reasoning to select the most worthy of value and the most beneficence or valuable purpose of action.

Second digit based on doctrin that every person's deeds before God depend on the intention. Second digit evaluate the motivation of action conducted by medical doctor whether there is self interest or personal purposes not pure lofty goals based on first digit. Sometimes somebody can do good deeds for

evil intention even in the name of God could become justification to claim good deed but for harm result.

The third digit related the probability to succeed for every intervention by medical doctor either treatment intervention, diagnostic intervention or surgical intervention. The third digit will assist to determine the certainty of good result and the risk for patient and operator also. The third digit is dynamic according to condition and situation influenced by digit four and five.

The fourth digit is related to technical aspects of the implementation of procedures technology itself. Medical doctor should master how to do, in what way, feasibility and other technical issues.

The fifth digit is included no technical aspects relating to the implementation of these technology or procedures impact such as financing capabilities, social and cultural rights. Following a five-digit schematic approach to analyze the problem of bioethics guided Islamic Doctrin according to Pratiknyo [12].

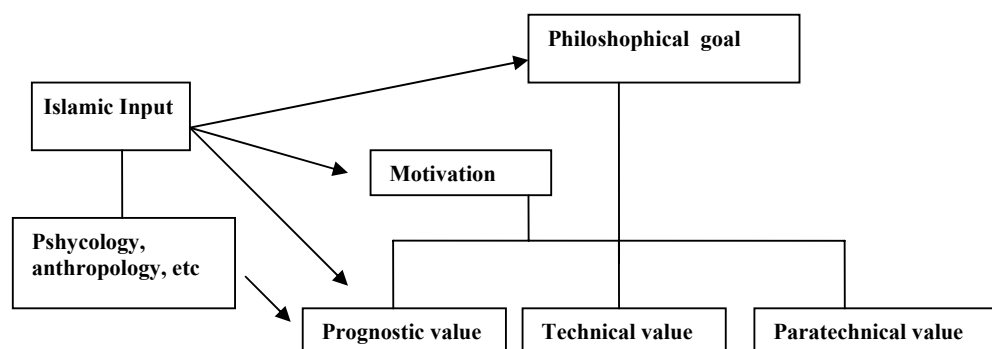


Figure 3. A Five-Digit Schematic Diagram by Pratiknyo [12]

## Conclusion

Islam has own concept about bioethics. Islamic bioethics is an extension of Shariah (Islamic law), which is itself based on 2 foundations: the Qur'an and the Sunna. Development of Shariah in the Sunni branch of Islam over the ages has also required *ijmaa* (consensus) and *qiyas* (analogy) produced by *Ijtihad* of the scholar of Sahabah, 4 famous Imam and other mujtahid. The level of benefit in regard with principle of Islamic bioethics consist of Pillars of islam, Pillars of Iman and Pillar of Ihsan (perfect beneficence) as triangle framework I.

Issues on bioethics can be viewed from perspective Islam by using Maqosidush Shariah, and Qowaidush Shariah as well as *Ta'lili* approach. Maqosiduh shariah mean the purpose of rule in Islam to protect morality and spirituality (religion/ad-din) in relation with The Creator, to protect life, to protect mind, to protect progeny, to protect wealth, and to protect environment. Qowaaidush shariah mean the principle of rule in Islam consisting of intention principle,

certainty principle, injury principle, hardship principle, and custom principle. If there is new issue that there is no information clearly in all source of Islamic law, Moslem doctor can use *Ta'lili* approach. The combination of Maqosidush shariah, Qowaaidushariah and *Ta'lili* will create triangle framework II. Implementation of these triangle will be effective if combined with prima facie approach and a five-digit approach.

## Reference:

- [1]. Akhmad, A.S., Rosita, L., Sunarto, Dahlan,Z., 2009, Tutorial Guide Book of KPK for Student, Faculty of Medicine IUI.
- [2]. Akhmad,A.S., Kurniawan,T., Rosita,L., 2009, Skill Practice Guide Book for Student, Faculty of Medicine, IUI.
- [3]. Abdallah S. D., and A. Khitamy, 2001, Bioethics for clinicians: Islamic bioethics. Canadian Medical Journal Association, 1: 164
- [4]. Younis, H., 2008, Islamic Bioethics, O&G Magazine Winter: 24, accessed via

- [http://www.ranzcog.edu.au/publications/orig\\_pdfs/O&G-Winter-2008/Islam-%20Bioethics-Huda-Younis.pdf](http://www.ranzcog.edu.au/publications/orig_pdfs/O&G-Winter-2008/Islam-%20Bioethics-Huda-Younis.pdf)
- [5]. Qur'an 2:30
  - [6]. Al Khayat M H, 1995, Health and Islamic behaviour. El Gindy A R, (Ed). Health policy, ethics and human values: Islamic perspective. Islamic Organization of Medical Sciences, Kuwait, pages: 447-50.
  - [7]. Al Faruqi IR, 1982, *Tawhid: its implications for thought and life*. Kuala Lumpur: International Institute for Islamic Thought. Proceeding
  - [8]. Shomali, M., 2008, Islamic Bioethics: A General Scheme, *Journal of Medical Ethics and History of Medicine*. 1(1): 4.
  - [9]. Kasule, O.H., 2004, Medical Ethico-Legal-Fiqhi Issues: an Islamic Perspective. Paper presented on Workshop Islamic Medical Education, at FM UNISMA, Proceeding
  - [10]. Bertens, 2002, *Etika*, Gramedia Pustaka Utama, Jakarta
  - [11]. Akhmad, A. S., 2011, Komitmen Nabi Muhammad dalam Al-Islamiah dalam Media Kajian dan Dakwah DPPPAI, No. 01 Tahun XVI, hal.15-30
  - [12]. Pratiknyo A.W. and A. S. Sefro (Eds), *ETIKA, Islam dan Kesehatan: Sumbangan Islam dalam menghadapi Problema Kesehatan Indonesia tahun 2000-an*, Rajawali, Jakarta, 1986, hal. 49-58