



Integration of Islamic Values in the Medical Professional Education Curriculum

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Abstract

The separation between scientific knowledge and Islamic values remains a significant challenge in medical education, particularly in preparing physicians who are clinically competent, ethically responsible, and spiritually sensitive. This study aimed to examine the integration of Islamic values into the medical professional education curriculum and identify its implications for clinical practice, medical ethics, and physician professionalism. An integrative literature review was conducted using relevant national and international journal articles published primarily within the previous five years, extended to ten years when recent evidence was limited. Eligible full-text publications in English or Indonesian were selected based on their relevance to Islamic values, medical education, curriculum, ethics, and professionalism. The selected literature was critically reviewed and synthesized thematically. The findings identified three principal domains of integration. First, Islamic values in clinical practice include trustworthiness, honesty, justice, patience, and reliance on Allah. Second, Islamic medical ethics are grounded in the Qur'an, Sunnah, ijma', and qiyas, with Maqasid al-Shariah providing an important framework for ethical decision-making. Third, Islamic values contribute to the formation of Muslim physicians who combine intellectual competence, moral integrity, professional responsibility, and sensitivity to patients' spiritual needs. The integration of Islamic values should therefore extend beyond adding religious content to the curriculum. It requires systematic incorporation into learning outcomes, teaching activities, clinical training, faculty development, and student assessment to support the development of competent, ethical, and spiritually responsive physicians.

Introduction

The word integration is rooted in English, namely integration, which literally means wholeness or perfection. (Jannah et al., 2025; Aminah, 2020) In the world of science, integration refers to the process of uniting a number of disciplines that have previously stood alone and even been considered contradictory to form a unified and comprehensive body of knowledge. Aghar et al. emphasized that integration in the context of science is basically an effort to bring together scattered parts into a complete unity, while simultaneously uniting different groups into a mutually supporting structure. (Aliah et al., 2025) Kuntowijoyo views that the essence of integration actually lies in the effort to bring together divine revelation with the results of human thought, a scientific project that he calls integralistic science. This concept requires a middle way: rejecting secularism that sets aside the role of God, while avoiding asceticism that

ignores the contribution of human reason. Thus, the Qur'an and Sunnah serve as the primary epistemological foundations, allowing both the qauliyah and kauniyah verses to coexist in the process of developing knowledge. (Wismanto et al., 2021; Farooq & Munir, 2024; Solihah et al., 2025)

Slightly differently, Akram et al. introduced the term integrity as a central category describing the qualities of a doctor who possesses broad insight and is able to integrate various dimensions of religiosity and spirituality into one inseparable personality. This type of integrity rests on two components: spiritual health literacy, which encompasses an understanding of religion, a holistic perspective, and spiritual competence; and inner religiosity, characterized by the ability to control oneself, possess moral virtues, and possess a wealth of spiritual capital. (Heidari et al., 2025) In her research, Siti defines curriculum as all efforts undertaken by schools to encourage students to actively participate in learning activities, both in the classroom, on the school grounds, and outside the school environment. Within the framework of Islamic education, the curriculum is better known as manhaj or nahwu, namely the path or method a person takes to achieve his true life goals (Kurniasih et al., 2023; Ihsanudin et al., 2026; Nasri & Mulyohadi, 2023; Ihsanudin et al., 2026).

An Islamic education curriculum must fulfill at least three basic characteristics: first, it is designed to shape the Islamic personality of students; second, it must foster perspectives and thought patterns that align with the teachings of the Qur'an and Sunnah; and third, it must encourage the mastery of knowledge, skills, and expertise relevant to current developments. Furthermore, the curriculum has an integrative function, namely, serving as a vehicle for developing a holistic personality that excels intellectually and is spiritually strong. This view aligns with Ningsih et al.'s statement that integrative learning will produce a generation that is intelligent, religious, and of noble character. Elisa and Siti et al. also added that to realize this function, schools must have a curriculum development roadmap that synergistically integrates these two dimensions (Kurniasih et al., 2023; Morales, 2025; Wu & Sarker, 2022).

Abdul Halim Soebakar emphasized that the implementation of an integral curriculum must be based on five basic principles of Islamic education: (1) the value of monotheism as the primary foundation; (2) integration between the afterlife and worldly orientations; (3) balance between social needs and the personal needs of students; (4) equality between human beings; and (5) a spirit of lifelong learning. The integration of the curriculum, especially with religious disciplines, is expected to instill a comprehensive belief that every branch of knowledge ultimately leads to the One, Allah Al-Haqq.

This verse emphasizes the principle of integration: that all one's potential and all the knowledge possessed by humans must be developed in one direction, namely virtue in the context of devotion to the God of the universe. Wismanto in his study added that the unification of religious knowledge and general knowledge in the Islamic context is commonly called the Islamization of science, which literally means bringing science under the auspices of Islam. This process makes humans, not science itself, the subject that experiences value transformation (Wismanto et al., 2021; Omol, 2024).

Riskiayah emphasized that a medical curriculum that contains Islamic elements is not just an added value, but a non-negotiable requirement for Muslim doctors. Islamic values, morals and ethics should be an inseparable part of the learning process from the academic stage, so that a Muslim doctor carries out his profession with pure intentions because of Allah, practices his knowledge and skills according to Islamic guidance, and upholds professional ethics based on Islamic values (Riskiyah & Susanti, 2023; Julyani & Alwi, 2026; Khalid et al., 2025; Abu-Ras et al., 2022).

Nurlaili and Riskiyah explained that science integration is basically a process of perfecting knowledge which has so far been dichotomous, separating religious knowledge from general

science so as to produce scientific concepts that are complete and undivided. Integrating Islam and science means placing the two on a par and reinforcing each other, based on the universality of Islamic teachings which originate from qauliyah verses, namely the Al-Qur'an and Hadith, as well as kauniyah verses, namely natural phenomena that can be observed and studied. (Susanti & Riskiyah, 2022).

Methods

This study employed an integrative literature review to examine the incorporation of Islamic values into medical professional education. Relevant literature was identified through online academic databases using combinations of the keywords “integration,” “Islamic values,” “Islamic medical ethics,” “medical education,” “medical curriculum,” and “medical professionalism,” in both English and Indonesian.

The review included full-text national and international journal articles that: (1) discussed Islamic values within medical or health-professional education; (2) explained their application to curricula, clinical practice, ethics, character formation, or professionalism; (3) were published within the preceding five years, extended to ten years when recent evidence was limited; and (4) were written in English or Indonesian. Publications were excluded if they were unavailable in full text, written in other languages, duplicated, or not substantively relevant to the review objectives.

Eligible publications were screened based on their titles, abstracts, and full texts. Data were extracted regarding publication characteristics, study context, methodological approach, Islamic values examined, and principal findings. The evidence was then compared and synthesized thematically. Similar findings were grouped into three domains: (1) Islamic values in clinical practice; (2) Islamic medical ethics and the Maqasid al-Shariah framework; and (3) the character and professionalism of Muslim physicians. The synthesis focused on identifying recurring concepts, differences across studies, and implications for curriculum development in medical professional education.

Result and Discussion

A medical curriculum that actively incorporates Islamic values into its content is one concrete response to the specific needs of Muslim physicians. Islamic, moral, and ethical values need to be present not only on paper, but also integrated into every learning activity, both in the preclinical and clinical phases (Jamilah et al., 2020).

The world of healthcare is currently facing a number of significant global pressures: unequal access to services, the erosion of professional integrity, and the erosion of empathy in daily medical practice. In this context, strengthening professional ethics based on Islamic values has become an increasingly urgent agenda (Jannah et al., 2025).

Islamic Values in Medical Education

Fadhilah et al. in their study explain that several Islamic values can function as a moral compass in clinical decision-making, especially when a physician is faced with situations fraught with ethical dilemmas. These values include amanah, which reflects trust and professional responsibility; sidq, which is manifested in honest communication and medical actions; and 'adl, which demands fair treatment for every patient. Moreover, medical professionalism, from an Islamic perspective, extends beyond clinical excellence to the spiritual dimension, namely assisting patients to maintain patience (sabr), put their trust in Allah, and maintain prayer even in times of illness. Effective communication skills, supported by ethical behavior, are also key to mitigating potential conflict between patients and healthcare professionals (Khalid et al., 2025).

Aghar et al., in their research on the integration of Islamic values in midwifery, successfully identified a series of Islamic values that can be directly applied in healthcare services, including: trustworthiness, friendliness, courtesy, compassion, patience, sincerity, gratitude, responsibility, and attention to aspects of spirituality, halalness, and tayyiban (obligatory). These values are essentially universal and can be translated into various health professions, including medicine (Aliah et al., 2025).

From Nina's perspective, piety is the most fundamental Islamic value, serving as the foundation for other values. Piety to Allah brings ease in all matters, as stated in the Qur'an. At-Talaq [65]: 4: "...and whoever fears Allah, Allah will make things easy for him." In the medical context, this ease is felt when a doctor accompanies a patient with a terminal illness, treats a chronic, long-term pain condition, or guides a patient who has recently experienced the loss of bodily function. Besides piety, sincerity also holds an equally important position, as emphasized in QS. Al-Bayyinah [98]: 5: "...purify obedience to Him in (practicing) the straight religion." These values can be implemented concretely by healthcare professionals in every interaction with patients (Aminah, 2020).

Nashichuddin explains in his research that the study of the Qur'an and Al-Hadith aims to enable medical students to understand both as sources of Islamic law, while also internalizing the universal humanitarian values contained therein. The study of Fiqh provides a foundation for understanding Islamic law in everyday life and its relationship to contemporary medical issues. Meanwhile, the History of Islamic Civilization opens up historical insights into the profound contribution of Islamic civilization to the development of medical science and health globally. These three disciplines synergistically support the achievement of competence in the noble professional areas as stipulated in the national curriculum (Nashichuddin et al., 2022).

Islamic Medical Ethics

The word ethics comes from the Greek word *ethos*, which literally means custom or tradition that guides human behavior. In the realm of philosophy, ethics examines how humans should act based on the moral principles that underlie personal and social life. Over time, ethics has divided into two major streams: normative ethics, which formulates standards for what constitutes right and wrong actions, and applied ethics, which examines how these principles are operationalized in specific fields such as medicine, business, and law (Winayah et al., 2025).

In Indonesia, standards of professional conduct for doctors are regulated through the Indonesian Code of Medical Ethics (KODEKI), which serves as the primary reference in carrying out professional duties. KODEKI emphasizes that being a doctor requires not only mastery of medical science but also a commitment to ethical values and moral responsibility to patients, society, and Almighty God (Winayah et al., 2025).

Foundations of Islamic Medical Ethics

Medical ethics in Islam is based on four complementary sources of reference: the Qur'an, the Sunnah of the Prophet, consensus of scholars (*ijma'*), and analogical reasoning (*qiyas*). From these four sources, ethical principles were formulated which aim to maintain balance and ensure sustainable human welfare, in line with the noble goals of Islamic law, known as *maqāsid al-syarī'ah*. Traditionally, *Maqasid al-Syariah* targets the protection of five vital aspects: religion (*ḥifẓ al-dīn*), soul (*ḥifẓ al-naḥs*), reason (*ḥifẓ al-'aql*), lineage (*ḥifẓ al-nasl*), and property (*ḥifẓ al-māl*). Every medical action in Islam, therefore, must be accountable within the framework of protecting these five aspects as a form of obedience to Allah SWT (Winayah et al., 2025).

Principles of Medical Ethics According to Beauchamp and Childress

Beauchamp and Childress formulated four ethical principles which have become the standard reference for moral decision-making in the world of medicine. The first principle, autonomy, places the patient's right to make their own medical decisions as something that must be respected. The second principle, beneficence, requires doctors to always act for the good and benefit of the patient in every intervention they perform. The third principle, non-maleficence, requires doctors to avoid any actions that could potentially harm or injure the patient. The fourth principle, justice, demands equal and non-discriminatory treatment for all patients, regardless of their background (Winayah et al., 2025; Adeyani et al., 2019).

Character Development and Professionalism of Muslim Doctors

A Muslim doctor is required to carry out his profession in full adherence to Islamic principles: internalizing the values of piety, developing professional ethics (adab) and noble morals, and recognizing the enormity of the trust he holds. In practice, Muslim doctors often encounter sensitive issues that require a solid Islamic foundation, such as debates surrounding organ transplantation, genital reconstruction procedures, birth control, and abortion (Aliah et al., 2025; Susanti & Riskiyah, 2022). Jamilah et al. emphasizes that good Muslim doctors are those who not only possess adequate medical qualifications but also consistently apply their knowledge and skills in accordance with Islamic teachings, while still fulfilling all their religious obligations (Jamilah et al., 2020).

Azmi et al. in their research found that the professional values of Muslim doctors, developed through an Islamic-based curriculum, correlated strongly with the six dimensions of medical professionalism established by the American Board of Internal Medicine (ABIM): altruism, accountability, excellence, dedication to duty, honor and integrity, and respect for others accompanied by honesty. This finding demonstrates that Islamic values are not in conflict with international medical professional standards; rather, they support and reinforce each other (Najib Azmi & Ismail, 2020).

Romadhon explained that in the Indonesian context, the integration of Islam into the medical education curriculum has its own urgency: it equips prospective doctors to be able to address ethical issues that intersect with Islamic teachings in their professional careers. Furthermore, this integration aims to broaden doctors' horizons in providing services to Muslim patients, including the ability to understand and interpret the experience of illness from an Islamic spiritual perspective, as one of Islam's distinctive characteristics is its ability to provide meaning to every life event (Romadhon, 2023).

Allah is the One Who Heals, and no one else. This belief distinguishes Muslim doctors from mere medical technicians; they serve as servants of Allah, devoting their expertise to the benefit of others, fully aware that every healing process is ultimately in His hands.

One of the deepest goals of integrating Islam into medical education is to produce doctors who function simultaneously as scientists and professional practitioners, yet are never detached from spiritual awareness and connection with Allah SWT. From this integrative perspective, religion and science are not two opposing entities; they complement, harmonize, and strengthen each other. Education that integrates Islamic values from the cognitive, affective, and psychomotor dimensions will produce medical services that are not only medically superior but also deeply engage the humanity of patients (Romadhon, 2023).

Maqasid Al-Shariah as a Guide to Medical Practice

Islam places great emphasis on the sustainability and well-being of the people through the Maqasid al-Shariah framework. Within this framework, the lofty goals of Sharia are embedded in all its laws and regulations. Romadhon explained that the Maqasid al-Shariah in the context of medical practice encompasses eight objectives of preservation, namely (Romadhon, 2023):

These objectives are summarized in eight objectives, namely:

Preservation of offspring (hifdh al-nasl):

Medical practice should provide services that ensure the quality of offspring, such as comprehensive antenatal care (ANC) services, to prepare a healthy and resilient generation to face life's challenges.

Preservation of the mind (hifdh al-'aql)

Doctors are expected to play an active role in mental health campaigns and the prevention of substance abuse, in order to maintain the mental functioning of patients and the wider community.

Preservation of dignity (hifdh al-karamah):

Every medical procedure must uphold the honor, privacy, and dignity of the patient as a human being honored by Allah SWT.

Preservation of the soul (hifdh al-nafs):

Medical services are fundamentally tasked with saving and maintaining the quality of life. From an Islamic perspective, maintaining health means increasing a person's opportunity to worship optimally.

Preservation of wealth (hifdh al-maal): Muslim physicians are obligated to consider the cost-effectiveness of medical treatment, ensuring that not a single rupiah of a patient's wealth is wasted due to unmeasured or unplanned medical procedures.

Preservation of religion (hifdh al-din):

Medical practice must provide space and guarantees for patients to continue fulfilling their religious obligations according to their abilities, including ensuring the halal status of all medications and medical materials used.

Preservation of safety (hifdh al-amn):

Quality medical practice can only be carried out effectively in safe and secure conditions. Every procedure, drug choice, and clinical intervention must be based on scientific evidence that prioritizes the best possible benefit with the least possible risk.

Challenges of Integration Implementation

Efforts to realize the integration of Islam and science in medical education have not yet reached an ideal level. Thooyar noted in his paper that the numerous models of scientific integration circulating, none of which are sufficiently established for consistent implementation, have actually created confusion in their understanding and implementation. The root of the problem lies in the lack of significant progress in realizing the integration of Islamic values and science, which is partly due to the inadequate preparedness of lecturers to achieve this integration (Kusumanto et al., 2019).

Ismu Kusumanto et al. caution that lecturers with general education backgrounds who lack in-depth Islamic knowledge will face serious obstacles in integrating the two. To be able to act as agents of integration, a lecturer must at least master the foundations of Islamic knowledge, such as the Qur'an, Hadith, Fiqh Muamalah, Morals, and Worship, and possess adequate Arabic language skills. Husaini added that another obstacle frequently encountered is the lack of shared understanding among stakeholders, including some students' parents, regarding the vision, mission, and goals of integration established by the institution (Husaini & Anisaturrahmi, 2020).

Rosyad and Yefi et al. identified several inhibiting factors that deserve attention: not all lecturers have a uniform understanding of how to integrate Islamic values into course material; differences in interpretation of Islamic values create inconsistencies in implementation; the lack of standardized evaluation mechanisms makes it difficult to measure the success of integration; and resistance from some lecturers and students who fear that Islamic integration will disrupt the effectiveness of learning (Ardyanti et al., 2025).

Suryadi added another dimension to this challenge: the lack of clear technical guidelines for implementing integration within the curriculum structure; the lack of lecturer competence in operationalizing the concept of integration in the classroom; socialization that has not yet reached all stakeholders; the lack of standard nomenclature surrounding the concept of integration; and the limited time allocated within the curriculum structure for Islamic studies (Muhlis et al., 2024; Hikmah et al., 2023).

Integrated Curriculum Development Strategy

To truly implement Islamic integration in medical faculties, comprehensive and sustainable resource support is needed, ranging from the availability of competent lecturers, conducive facilities, to various activities that can create an Islamic academic atmosphere. Ministerial Regulation Number 44 of 2015 concerning National Standards for Higher Education emphasizes the position of lecturers as professionals and scientists, whose performance quality is measured by their success in optimally implementing the Tri Dharma of Higher Education. This performance impacts not only the academic career development of individual lecturers but also the quality of the university as a whole (Muhlis et al., 2024).

Ideally, teaching Islamic integration in the medical curriculum can be achieved through three complementary channels: first, encouraging medical lecturers to master Islamic studies simultaneously, so they can teach both in an integrated manner; second, developing teaching materials that already incorporate Islamic content, so that Islamic perspectives can be discussed alongside medical material; and third, designing an assessment system that measures Islamic competency in an integrated manner with medical competency assessment. To realize these three paths, medical lecturers are required to be role models as Islamic professional doctors (Muhlis et al., 2024; Ahmady et al., 2022; Islam et al., 2022; Khalid et al., 2025; Succarie, 2026).

Siti et al. emphasize that optimizing the integration process is not simply contained in lesson plans; it must be truly realized in classroom learning. The material presented needs to be holistic and comprehensive, for example, by incorporating an Islamic perspective into the discussion of specific diseases, linking relevant verses from the Quran and Hadith to the lecture material, and allocating dedicated time for in-depth discussions on the religious dimensions of medical practice (Kurniasih et al., 2023; Mohidem & Hashim, 2023; Basir et al., 2022).

Riskiyah and Yefi emphasize the need for a comprehensive, holistic strategy to address the various integration challenges. This strategy includes: developing a curriculum that weaves Islamic values into all aspects of learning, from lectures and practicums to student activities; providing ongoing training for lecturers to improve their competence in delivering material based on Islamic values; designing learning materials that are relevant, easy to understand, and equipped with real-life case examples; systematically fostering student awareness of the urgency of applying Islamic values in professional life; and developing interdisciplinary learning modules and using Islamic value-based case studies as a concrete and applicable pedagogical approach (Ardyanti et al., 2025; Islamiarso et al., 2026; Muvid, 2026; Susilo et al., 2026).

Conclusion

Based on the literature review, it can be confirmed that the integration of Islamic values into the medical professional education curriculum is a necessity, not merely a negligible moral trapping, but rather an epistemological foundation that fully determines the quality of Muslim physicians. A medical curriculum that actively incorporates Islamic values is one of the best ways to meet the specific needs of Muslim physicians. Therefore, Islamic, moral, and ethical values must be present and influence all teaching and learning activities, especially during the preclinical and clinical training phases.

First, Islamic values such as amanah (trustworthiness), sidq (honesty), 'adl (justice), sabr (patience), tawakkal (submission to God), ikhlas (sincerity), and rahmah (compassion) have proven relevant and directly operationalizable in the clinical practice of Muslim physicians. These values are not merely abstract theological concepts but have measurable competency equivalents in international medical professional standards, as demonstrated by their alignment with the six dimensions of professionalism of the American Board of Internal Medicine (ABIM).

Second, Islamic medical ethics, derived from the Qur'an, Sunnah, consensus (ijma'), and qiyas (evidence), provides a comprehensive and contextual bioethical framework for Muslim physicians. The Maqasid al-Shari'ah framework, encompassing the preservation of religion (hifzh al-din), life (hifzh al-nafs), intellect (hifzh al-'aql), lineage (hifzh al-nasl), wealth (hifzh al-maal), honor (hifzh al-karamah), and security (hifzh al-amn), provides holistic ethical guidance in addressing clinical moral dilemmas that cannot be adequately resolved by the Western bioethics paradigm alone.

Third, the character and professionalism of Muslim physicians (akhlak) occupy a central place in the curriculum integration. The ideal Muslim physician is not only technically qualified but also practices their profession as an act of worship and a manifestation of piety, upholding both professional and Islamic ethics simultaneously, and capable of providing care that addresses the patient's spiritual dimension as an integral part of holistic medical care. Fourth, the integration of Islamic values into the medical professional education curriculum still faces a number of significant structural challenges, including: the lack of a uniform integration model that can be implemented consistently; competency gaps among lecturers, not all of whom possess a deep understanding of Islam; differences in interpretation of Islamic values among stakeholders; and resistance from some members of the academic community.

From these overall conclusions, it is hoped that a generation of medical professionals will emerge who are not only scientifically and ethically competent but also capable of providing holistic and humane healthcare. Medical education must foster intellectual competence and moral integrity through a blend of science and religion. Learning that integrates Islamic values into the health professional curriculum will help shape a generation of healthcare workers who are not only intellectually intelligent but also spiritually and socially superior.

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