

Health Communication Pattern of Thibbun Nabawi Prophetic Medicine Adjust to Indonesian Culture

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Abstract

Alternative medicine has climbed the ladder of popularity in the practice of treating diseases caused by both medical and non-medical factors. The opportunity for people to access and enjoy alternative medicine services are increasingly wide open with the emergence of commercial advertisements about alternative medicine in print, electronic, and social media. The development of alternative medicine, along with all the pros and cons dynamics in-service practice, has attracted the interest of the author's team to explain the results of field research conducted in mid-2019. The research object was alternative medicine based on the religion known as thibbun nabawi at the Thibun Nabawi Center (TNC), Pesantren Baabussalam, Ciburial, Bandung, West Java. This article health communication pattern of alternative medicine practices in Indonesia. The analysis of this research used a qualitative method with a case study approach. Through this paper, the author hopes to provide an illustration of thibbun nabawi traditional medicine. Furthermore, what makes it grow and develop in society and how alternative medicine practices applied health communication patterns. Whether due to a different approach, thibbun nabawi becomes an alternative or even a complement to medical treatments in Indonesia. The points above discussed step by step in this paper. The conclusions, shows that growth and development of thibbun nabawi are inseparable from the efforts of senior therapist and her therapeutic team, who have successfully implemented various communication approaches such as empathy to religion and moral values, from the concept of health communication to the practice of Islamic communication.

Keywords

Health Communication; Communication Patterns; Alternative Medicine; Thibbun Nabawi; Islamic Medicine.

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Introduction

The variety of treatment in the context of health services in Indonesia experiences a dynamic developmental color. The medical realm is slowly but surely treading the ups and downs in achieving public alignments. Changes that are always occurring at the global level with the latest reference of the Sustainable Development Goals or familiarly abbreviated with SDGs deliver the health world to be more alert in responding to opportunities and challenges of the future. The Sustainable Development Goals, abbreviated as SDGs, have 17 goals, with 169 measurable achievements and achievement targets set by the United Nations as the world development agenda for the benefit of humans and planet earth. This goal was declared jointly by intergovernmental countries in the UN resolution published on October 21, 2015, as a joint development ambition until 2030. This goal is a continuation or successor to the Millennium Development Goals signed by leaders from 189 countries as the Millennium Declaration in the Millennium UN headquarters in 2000 and is not valid since late 2015 (United Nations Resolutions, 2015).

Two points from the 17 goals set by the SDGs are a world without hunger (point two) and a healthy and prosperous world (point three) as a basis for moving towards other goals. The health services preparedness to carry out these responsibilities is not easy. It needs full support from all relevant stakeholders, be it the Government, the private sector, the community itself, to the role of NGOs. However, all parties mentioned above are not sufficient to synergy/work together in the field of medical services. In fact, along with the development of the world of medical health services in various parts of the world, the practice of non-medical treatment, or often referred to as alternative medicine, is also developing. The presence of alternative treatments has received a variety of responses and responses from the public. Pros and cons, of course, are inherent in the course of its history. This condition is undeniable, considering that alternative medicine itself derives from local knowledge of the local community; though some are adopted from the culture of migrants due to the demands of the community's own needs (Bhugra, 2005).

After studying several alternative medicine practices in other countries (Mizrachi et al., 2005), the author interested in discussing one of the alternative medicine practices in Indonesia. As is the case in Indonesia, the hectic medical services with a variety of social issues faced, provide space for the presence of alternative non-medical treatment (traditional). The response of the community to traditional health services is quite promising, seen from the increasingly varied types of alternative medicine that are developing in today's society. From alternative medicine based on tradition to treatment based on religion, all of them get the opportunity to meet the needs of primary health care (Quan et al, 2008).

Alternative medicine in Indonesia with an Islamic religious approach is more trusted to be carried out in Islamic boarding schools. Islamic boarding schools are known as centers for the spread of Islam from generation to generation. It is very easy to accept with common sense when an Islamic alternative medicine center is conducted in a pesantren. Health communication patterns are applied using a distinctive approach. Every time there is physical contact, through touching the practice of medicine, the therapist always mumbles the words *Allahiyah*. The prayer assistance that accompanies the treatment process also adds to the belief that Allah's help will occur.

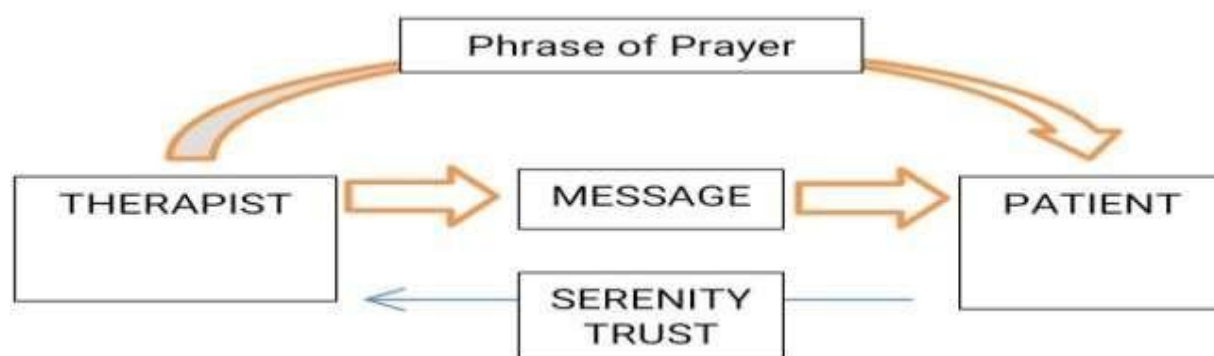


Figure 1. Health Communications Pattern.

Source: Processed by Researchers.

Facing this phenomenon, the Indonesian Government has set several rules or legislation that are still undergoing improvements over time. Traditional medical regulations stated in Law No. 36 of 2009, concerning Health, Article 1 number 16 of the Health Law stipulates that traditional medicine is care or treatment using the therapy that refers to practical experience and skills that can be accounted for and applied to the norms prevailing in the society.

Article 105 of the Health Law stipulates those pharmaceutical preparations in the form of traditional medicines and cosmetics and medical devices must meet the specified standards and requirements. This determined standard refers to the Minister of Health Decree No.659/Menkes/SK/X/1991 concerning Good Traditional Medicine Manufacturing Process (*Cara Pembuatan Obat Tradisional yang Baik/CPOTB*), which is followed by thorough supervision and aims to provide traditional medicines that continuously meet the applicable requirements (Kusnadi et al., 2017)

Several other rules also increasingly complement the protection of consumers using alternative medicine services (John Weir, 2013). The situation does not hinder the development of alternative medicine in Indonesia; on the contrary, non-medical health care practitioners provide a reactive response to the presence of policies related to the rules imposed by the Indonesian Government. In this study, the researcher determined one research object of alternative medicine based on religious traditions, especially Islam, to be studied in-depth, namely the practice of *thibbun nabawi* treatment at the *Thibbun Nabawi* Center (TNC), *Pesantren* Baabussalam, Bandung, West Java. The history and development inherent in the practice of *thibbun nabawi* treatment was the main attraction for the authors to conduct research and observation. Some uniqueness considered attractive included: 1) TNC is under the auspices of a *pesantren* foundation, and 2) efforts are continuously carried out for developing treatment techniques to meet the needs of patients. Finally, the TNC efforts to adopt medical techniques beyond the *thibbun nabawi* method to complete the existing techniques. (Novianti, 2020) In its journey, TNC experienced both progress and challenges or obstacles. 3) There is an increasing need for human resources (therapists) to meet the challenges ahead. From the description above, a unique feature of the observation results was the communication method applied by the therapist in alternative religion-based alternative medicine services at TNC (Rudd, 2015).

To explore the knowledge regarding the three uniqueness of the TNC, the author will summarize the emergence of *thibbun nabawi*'s treatment and the issues discussed. Then make it a topic that specifically addresses the history and the development of *thibbun nabawi*, a case study of health communication approaches or patterns in traditional Islamic medical practices (Triantoro, 2019). The purpose of this study is to determine the communication patterns performed by *thibbun nabawi* therapists so that in practice their presence can be accepted by the people of Bandung and its surroundings.

Method

This study used qualitative methods and a case study approach. It was conducted considering the uniqueness of alternative medicine practices when viewed from the perspective of health communication. The author aimed to describe and explore in-depth the findings in the field to be able to contribute ideas, thoughts, and new ideas that open opportunities for the development of health communication studies in traditional religious-based medical practices. The *Thibbun Nabawi* Center (TNC), which is under the auspices of the Baabussalam Islamic Boarding School, Ciburial, Bandung, as the object of writing. The number of research subjects consisted of five patients and two therapists. Data analysis techniques in the context of this study were carried out by data reduction. By carrying out the label of the *Thibun Nabawi* Center or TNC, the writing team hoped to be able to dig broad and in-depth information on the topic of this article.

Results And Discussion

This research uses a qualitative approach with a case study method. The case study approach was chosen to be able to explore data about health communication patterns that typically occur in alternative medicine practices of *thibbun nabawi*. The case study approach is very suitable for

examining the problems of health communication patterns in Indonesia. It has been very clear for a long time, but the development of these problems has not been resolved until now.

Creswell (2012) states that case uniqueness is the main criterion in a study. which uses the case study method. Researchers discuss this research topic and find the uniqueness of cases that are relevant to the topic of discussion in this study. The data collection techniques that have been used during the research process are carried out as follows (Sugiyono, 2012), field observations, in-depth interviews, with five informants consisting of three therapists and two patients who have undergone nabawi thibbun treatment therapy. Documentation studies are carried out by referring to previous studies with similar topics in the field of health communication. Below is described a table of informant criteria in research conducted by researchers.

Table 1.

Data set of informant criteria

Table. Data Set of Informan Criteria				
Informan		Collecting data		
UA Female Age 50	Senior Therapist	General information about specific approach in communication with patient		
R Female Age 30	Assistance Therapist	To find out do they practice the same rules or procedure under directions of senior therapist		
T Male Age 46	Home Visit Therapist			
SR Female Age 45	Patient	complaints of physical disorders	Health service duration 2 hours	Trust Serenity Comfort
RH Male Age 47	Patient	complaints of physical & non-physical disorders	Health service duration 2 hours	Trust Comfort
EN Female Age 48	Patient	complaints of physical disorders	Health service duration 1 hours	Trust Serenity
JD Male Age 25	Patient	complaints of physical disorders	Health service duration 1 hours	Trust
EL Female Age 43	Patient	complaints of physical disorders	Health service duration 2 hours	Trust Serenity

Source: Research data

The explanation of *thibbun nabawi* refers to the action and advice given by the Prophet Muhammad SAW with regards to sickness, treatment, and hygiene, as found in the *hadith* and writings, especially from non-medical scholars who collected and explained these traditions. The term *thibbun nabawi* was raised by Muslim physicians around the 13th century AD to show medical science within the frame of faith in Allah SWT, to guard against or avoid the superstitious content of *shirik*, *takhayul*, and *khurafat* (Iqbal, 2007).

There are several definitions of *thibbun nabawi* which have been defined by the scholars, including the following (Elgood, 1962: 146-153), *First, thibbun nabawi* is everything that is mentioned authentically by the Koran and *Sunnah*, relating to medicine in the form of (disease)

prevention or treatment. *Second thibbun nabawi* is a collection of authentic information from the instructions of the Prophet Muhammad SAW in the field of medicine that is used in medical treatment or to treat others in His time. *Third*, by definition, *thibbun nabawi* is the (method of) treatment of the Messenger of *Allah*, which He utters, He determines (admits), He practices and is a particular treatment (not a presumption), which can treat illnesses, soul, and senses. The *thibbun nabawi* health concept is a sure way of prevention and treatment in the same way as the Prophet's (not a presumption), which can treat the body, soul, and sensory diseases. One of the articles that discusses the *thibbun nabawi* health concept is entitled 'Religiosity in the Communication of *Thibbun Nabawi* Islamic Medical Therapy' (Usman, TRS; Mulyana, D; Hadisiwi, P & Perbawasari, 2018). The article states that "*Thibbun nabawi* is a medical treatment rooted in the Islamic tradition as mentioned in the *hadith* of the Prophet Muhammad." This article is one of the inspirational sources in the study of *thibbun nabawi* from the perspective of health communication.

Health Communication Concepts

Communication and health itself. The word 'communication' derives from the Latin 'communicatus,' which means 'to share' or 'become shared property' asserting that the purpose of doing is to share in togetherness. Communication is the process of delivering or sharing messages from one party to another to get a shared understanding of a matter in the message. While the notion of 'health' comes from the word 'healthy' and can be interpreted broadly, both physically and mentally fit. Gochman and De Clercq (1993) explained that health could be comprehensive and quite challenging to interpret, as it can also be interpreted as something that contains biomedical, personal, and sociocultural components. It can also mean that health is a condition or situation where a person is free from all physical illnesses and also seen in terms of mental or feelings that are more difficult to understand and observe in plain sight. In line with Gochman and De Clercq (1993), Tobias reynolds –Tylus, 2019 also interest in discussed about psychological reactance and persuasive health communication (Willy De Clercq, 1993).

Based on these concepts, it can be understood that health communication is the process of delivering messages that contain matters relating to health by the message provider to the recipient through various media considered appropriate. The delivery of this message has a primary purpose of guiding overall health, both physical and spiritual, to support the achievement of human behavior for social welfare. The messages contained in health communication are certainly more focused and specific than communication in general, which usually covers health issues currently in circulation and how health care is appropriate for the community.

The concept of health communication implements various communication strategies to be able to convey information and health education to multiple groups so that they can play an active role in the health movement (Asmawati et al., 2018). This health movement discusses various things, from the issue of self-care from disease, the disease process, to how to deal with people around who are promoting poor health both physically and spiritually (Asmawati et al., 2018).

By doing so, the community is expected to have basic knowledge and qualified information about health in order to have the attitude and behavior of people who prioritize healthy lifestyles (Pakar Komunikasi, 2019), accessed Sunday, September 22, 2019, at 10:30 WIB). Therefore, it concludes that health communication has two essential elements that form the basis of the concept of the study, namely, *first*, the community consists of individuals conducting a communication process to overcome various health problems by using multiple elements and strategies that exist in the communication study. *Second*, the utilization of the latest media and technology as a means or channel to carry out the process of delivering health messages more broadly, to foster the knowledge and awareness of individuals and communities towards the importance of health.

The Concept of Islamic Communication

Before entering into what is meant by Islamic communication, we will try to understand the communication terminology, which in Arabic is *tawashul*. *Tawashul* comes from the word *washala*, which means 'to.' Thus, *tawashul* is the process of exchanging information carried out by two parties so that the message conveyed can be understood by both parties communicating.

Another Arabic term referring to the term communication is *ittishal*, which emphasizes the

meaning of the continuity of the message. In *ittishal*, if the message sent by the communicator arrives and connects to the communicant/communicator, then that is communication, and there is no need for feedback. Of the many meanings or definitions of Islam, the understanding or definition put forward by Harjani Hefni is the most comprehensive. According to him, Islam means submitting or surrendering to Allah SWT, peace, and salvation. From this understanding, the goal of Islam is peace and safety. Meanwhile, what becomes a means is surrender to Allah SWT and submit to all the commands of Allah SWT revealed to the Prophet Muhammad, which covered the Five Pillars of Islam. Understanding of Islamic Communication, from both definitions and notions of communication and Islam, it can be concluded that what is meant by Islamic communication is communication built on Islamic principles that have a soul of peace, friendliness, and safety (Hefni, 2015).

As a science, the primary reference for Islamic communication is the way of life for Muslims, namely the Qur'an and the Hadith of the Prophet Muhammad. These two primary sources provide the characteristic of Islamic communication. In addition to the *Qur'an* and the *hadith*, the books delivered by Muslim scholars and other disciplines contribute to the development of communication science in general and Islamic communication in particular.

Based on observations and narratives of one of the managers of the Thibbun Nabawi Center (TNC) also called the "Healthy House", namely Ummi Anna as one of the mainstay informants, before explaining, cited one of the verses of the Koran: "People Who believe, enter into Islam Kaafah" (Al Baqarah: 208). Islam is a save and saving religion. Firm believers are loved more by God than weak people. In history, during the time of the Prophet Muhammad, Medina had experienced a period when it was difficult to find people who are sick.

Continuing her explanation, Ummi Anna said that illness consists of physical and spiritual illness. According to her, spiritual illness is more dangerous than physical illness. The Prophet taught humans how to treat oneself to overcome spiritual and physical illness. Prophet Muhammad did not speak because he followed his feelings but based on revelations sent by Allah. The source of the Thibbun Nabawi is both the Divine and Natural, "Use Two Healers: Honey and the Koran" (HR. Ibn Majah and Al-Hakim).

In the view of Ummi Anna, an informant from the TNC management and TNC mainstay therapist, the failure of modern medicine was due to several factors, including : healed but far away from God's Grace; The patient is not cured; Leaving the Prayer (*sholat*); Prejudiced toward God; Using illicit (*haram*) material; Unwilling (not *Ridho*); Does not become a redeemer; *Syirik* is the deification or worship of anyone or anything besides God, i.e., Allah SWT (meaning, "The most glorified, the highest"); Died in *khusnul khotimah*, means to leave this mortal world with the condition of *khusnul khotimah*, which is everyone's dream who believes as it will bring good for the people who died. According to The Oxford handbook of health communication, behavior change, and treatment adherence (Martin & DiMateo, 2013):

"Better Health all around-this is what clinicians and maintaining good health can be difficult task, as this requires the adoption of behavior, habits, and lifestyles that are challenging for a variety of reasons".

Meanwhile, Ummi Anna also explained by outlining the factors that became advantages of the treatment at the time of the Prophet Muhammad Rasulullah saw (meaning, may God's prayers and mercy be upon him), namely, cleansing of sins, recovery, willingness (*Keridho'an*), resignation (*Tawakal*), good thinking with Allah SWT, increased Confidence in Allah SWT, and died in *Khusnul khotimah*

Ummi Anna, accompanied by two of her trained therapists, added information about medicine during the time the Prophet developed based on the following principles, cleanse medicine from *Syirik*, magic, and *Tasyabbuh*; Lay the basis for prevention rather than cure; Practice preventive measures rather than treating them. A discussion of this is also discussed in an article entitled Alternative Medicine in an Islamic Legal Perspective (Ali et al., 2015)

The author summarizes Ummi Anna's narrative that God sent the Prophet Muhammad is a blessing for all of Nature. The Prophet Muhammad was sent not to be a physician but to be an Apostle of Allah, but the Islamic *Shari'ah* He carried contained noble and pure medical values. Being in good health, an individual is in balance, both physically and spiritually, and free from *aqidah* and chemical pollution (Fuadi Husin, 2014). The term 'Thibbun Nabawi' never existed at the time of the Prophet Muhammad; the Prophet never classified the Thibbun Nabawi. However, in the 13th

century AD, the term Thibbun Nabawi was used to denote medical sciences within the frame of faith in God with references to *Ad Daa Wa Ad Dawaa* literature from the work of Ibn Qoyyim al Jauziyyah. "Thibbun Nabawi is a fact that hails from the prophetic light, which is the revelation given to the Prophet who does not speak based on lust," said Ummi Anna to the author when conducting observations. Ibn Qoyyim was a famous scientist in the 8th century Hijriyah, who grouped the hadith and prophetic behavior related to health. Ibn Khaldun pronounced that thibbun nabawi emerged as a result of the integration of Greek, Persian, Indian, Chinese, and Egyptian medical sciences, combined with the Prophet's revelations.

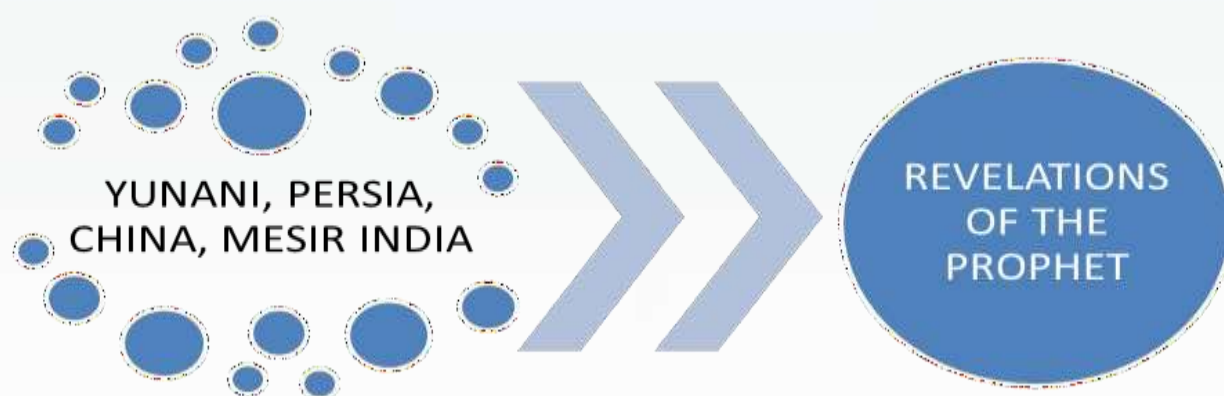


Figure 2. Integration of Greek, Persian, Indian, Chinese, and Egyptian Medical Sciences, combined with the Prophet's revelations.

Source: Research data

Muslims developed this knowledge throughout the world; at that time, there was no separation of traditional and modern Medical Sciences. Some of the principles of *thibbun nabawi*, including: *Halal* and *toyyib*, muslims are commanded to eat food that is not just *halal* but also *Tayyib*, meaning pure and wholesome. *Halal* defines food that is allowed according to Islamic law. Next principles are natural; prevention rather than treatment; do not damage the body, disfigure the body; surgery is the last resort. Does not reek of superstitions (*Takhayul*), *Bid' ah* and *Khurafat*; Looking for something better (*ikhtiar*) and the last principles is pray, and *tawakal* to Allah (trust in Allah's plan).

(Ariadi, 2017) present paper entitled *Naskah Pengobatan dan Pertumbuhan Islam di Indonesia Tengah*. In the context of thibbun nabawi, according to Ummi Anna, the sick was not only dependent on drugs but were obliged to depend on another force that was more powerful above us, namely Allah SWT. The immediate treatment is not a solution for patients, they had to find other alternatives, and that was the *thibbun nabawi* treatment. Ummi Anna delivered a *hadith*, "Really, Allah has descended diseases and medicines, and made it for you that every disease has a cure. Therefore, seek treatment; however, do not seek treatment with the forbidden" (H.R. Abu Daud).

In the thibbun nabawi medicine practice itself, the findings revealed that TNC implemented a distinctive communication pattern that unavailable in other medical treatment practices. Ummi Anna applied differently from the principles of communication, which we could understand as Islamic communication. According to (Hefni, 2015), the principles of Islamic communication are : Sincere (*ikhlas*) in giving and receiving messages; Rewards (*Pahala*) and sins: everything conveyed has an effect of rewards or sins. Rewards if the message is delivered in good ways and sins if the delivery of the message is in a rude or wrong way; Honesty: the message is delivered honestly and as is by the facts.; Cleanliness: means being clean in conveying messages that make the recipient of the message feel psychologically comfortable; Speak positively: positive things

delivered to the recipient of the message can bring happiness and provide positive motivation.; The heart, utterances, and actions are one entity: Words and good deeds reflect the heart. All three must be appropriate; Two ears one mouth: we are required to be able to listen more than talk.; Supervision (Allah SWT is All-Hearing, All-Seeing, and All-Knowing about everything we do. By realizing the power of Allah, we tend to speak and act with care as all beings are not free from the supervision of the Creator); Selectivity and validity; Mutual influence: communication is a process of exchanging information that aims to influence opinions, attitudes, and behavior; Balance: every information received from various parties should balance in order to produce a fair decision; Privacy: honor and respect the personal territory of each person to avoid violating individual rights.

By applying the principles of Islamic communication, Ummi Anna and the TNC therapist team managed to create an atmosphere of closeness between patients and practitioners of treatment. Thus, effective communication between the two parties intertwined with harmony. Effective health communication (Schiavo, 2013), both verbal and nonverbal from an Islamic perspective, is needed to keep the environment and society in peace, without violence, and in harmony. (Muhammad, Naz & Omer, 2016), revealed the principles of effective communication in an Islamic perspective are divided into verbal and nonverbal communication. Some principles of effective verbal communication from the Islamic perspective applied at TNC are as follows:

A soft intonation. Islam underscores the importance of courtesy and ethics in communication, one of which is to use a gentle tone. Conversely, using loud intonation can make the recipient of the message uncomfortable. Using the right words. To achieve effective communication is by the selection and use of appropriate words, phrases, and sentences, which are essential so that the message can be conveyed adequately.

Using a gentle voice. Loud sounds can cause hearing loss and damage. Loud noises are pollution, which can damage health. Allah SWT has naturally bestowed humanity with a very dynamic voice to be used in the right circumstances. Therefore, the use of the correct volume needs adjusting to the recipient of the message. Understanding the recipient of the message mentality. A therapist in the process of Islamic communication should know that everyone has a different mental characteristic and level. So that each person also has a distinct ability to receive and absorb messages sent by the therapist (communicator/messenger). Understand the situation and conditions. One of the basic principles of effective communication is to understand the situations and conditions in which communication occurs. It means that the communicator adapts the message to the location and circumstances where the communication takes place.

Avoid conversation dominance. In several discussions, the therapist, as the sender of the message, listens more than talks. Wise people always listen to what others say and talk a little. Avoiding reproach in a discussion. Unlike the medical personnel who often speak firmly or are slightly less friendly, TNC therapists seek to understand the feelings of the patient through a personalized approach. Meanwhile, the principles of effective non-verbal communication from an Islamic perspective are also familiarly implemented in TNC services as follows: The therapist team cheerfully and happily welcomes the patients. This relates to facial expressions when meeting other people. In Islam, giving a smile and showing a cheerful face when meeting other people means giving alms. Messages can be conveyed better through cheerful and friendly facial expressions; thus, the recipient will feel comfortable so that communication goals can be achieved. Using the eyes during therapy will strengthen the impression of the seriousness of the treatment process. The eyes are the window to the heart. The eyes can express things that words cannot convey. Eyes can express feelings of love, anger, jealousy, and others. For this reason, when communicating or having a conversation with another person, it is necessary to be careful when using eyes or eye contact. Therapists use hands in carrying out various therapeutic techniques. Hand movements, when communicating with others, can increase the effectiveness of communication. However, the therapist (communicator) needs to be careful in using their hands when delivering a message because it may be that people will give different meanings according to their background. Especially, if by chance, the therapist is from the opposite sex as happened at TNC, which can lead to multiple perceptions. Those are the principles of effective communication in Islam based on the Holy Qur'an and the Hadith of the Prophet Muhammad. However, keep in mind also, that the fluency of communicating both verbally and nonverbally is not uncommon to encounter communication barriers such as language barriers and cultural barriers. Various studies show that the use of incorrect language may hamper communication.

Besides, differences in cultural backgrounds also contribute to obstructing smooth communication.

Regarding communication in general, Islamic communication also has several functions, namely: Information (everything that hits and sends it back to others through the five senses is information). Providing confidence: the message sent by the communicator can give confidence to the recipient of the message. Reminding, in the sense of telling the recipient of the message, especially regarding religious issues through *da'wah*. Providing motivations; human life is very dynamic, pushing humans to become unstable. Motivations conveyed through appropriate communication by the communicator can give new enthusiasm to the recipient of the message. Societal; communication contributes significantly to one's social life since, through communication, humans can interact with other humans. Providing guidance; in the sense of guiding people in terms of goodness, improving the condition of people who are damaged, helping humans find and develop their potentials. Providing guidance; in the sense of guiding people in terms of goodness, improving the condition of people who are damaged, helping humans find and develop their potential. Entertaining; in the sense of always appreciating gratitude for the favors obtained.

If examined further, TNC, in its medical practice, has carried out the functions of Islamic communication. No wonder reaching the attainment of communication goals and the strength of suggestion lead patients to a degree of trust. The arrival of information about pain, the emergence of a belief in fulfilling the treatment of religious paths, coupled with a strong motivation to pick up the healing, provides its spiritual satisfaction for patients who come and undergo health services at TNC. The inner peace obtained in the treatment process is enough to provide entertainment and make the patient's degree of stress much relaxed.

In communication theory, according to experts, the message is one of the elements or components that are very important in the communication process. Also, in Islamic communication, the message plays a vital role. There are two kinds of communication messages, namely verbal messages and non-verbal messages.

Verbal messages. Messages in the form of thoughts, emotions, desires, and expectations conveyed through conversations. In the *Qur'an*, verbal messages referred to *lafadz*, *qaul*, and sentences. In the *thibbun nabawi* practice medicine at TNC, the therapist always tries to understand the conditions/situations faced by patients by conveying the verses of the Holy Qur'an eloquently.

Non-verbal messages. In addition to verbal messages, messages express in body language are also used in the communication process. The therapist's body language also plays a vital role as the therapist's appearance is attached to Islamic symbols (the robe for women and the turban for men). It should be underlined the fact that there are practices of treatment between opposite sexes. The (female) author observed when treatment was conducted by male therapists who were not awkward to touch or carry out other melee actions.

If this is interpreted as body language that needs examination, then there is a contradiction between the practice and the applicable law, and the rules of guarding the boundaries of touch between mahrom and non-mahrom should be the reference. This other side of the *Thibbun nabawi* alternative medicine at TNC will be interesting material for further research. Developments will continue to invite studies to explore more deeply. Hopefully, the discussion in this article may not end the enthusiasm of the writer and readers in discussing this topic in the future.

Conclusion

The author has explained health Communication pattern of *thibbun nabawi* adjust to Indonesian Culture. By using a qualitative method with a case study approach, this paper provides an overview of how traditional *thibbun nabawi* medicine began in Indonesia. The growth and development of *thibbun nabawi* are inseparable from the efforts of Umami Anna and her therapeutic team, who have successfully implemented various communication approaches such as empathy to religion and moral values, from the concept of health communication to the practice of Islamic communication. The TNC's health communication pattern that is applied to the alternative medicine practices of *thibbun nabawi* more or less complements the inadequate approach to effective communication in the medical realm. In conclusion, the application of these Islamic communication principles in the alternative medicine practices of the *thibbun nabawi* has provided significant benefits in the development of the existence of TNC in the future.

Based on field observations, there are findings at TNC in the form of unique communication patterns, which are usually not found in medical treatment practices. The therapists apply the principles of communication understood as Islamic communication, which expresses sincerity, honesty, cleanliness, comfort from the psychological side, positive words, and provide positive motivations. Also, guaranteeing the privacy and respecting the personal territory of each individual to avoid violating privacy rights. The findings of this study are to determine the communication patterns performed by thibbun nabawi therapists so that in practice their presence can be accepted by the people of Bandung and its surroundings. In essence, this acceptance is based on therapeutic empathy for religious and moral values that exist in the culture of Indonesian society.

By applying the principles of Islamic communication, Ummi Anna and the TNC therapist team have managed to create an atmosphere of closeness between patients and practitioners of treatment. Thus, effective communication between the two parties is harmoniously intertwined. The novelty of this research is that there is still a lack of research on medical techniques with a religious approach. The contribution that can be given is in the form of education to people who want to choose one type of alternative medicine, they must come to an expert in that field.

Limitation And Study Forward

This research was conducted in the city of Bandung. Therefore, it cannot be ascertained that other traditional medicines have a similar pattern of health communication. In the future, it is hoped that further studies will appear related to the topic of other traditional medicine health communication patterns.

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