



THE INTEGRATION OF SPIRITUAL BASED HOLISTIC EDUCATION AND
HOLISTIC HEALTH TOWARDS HOLISTIC HEALTH EDUCATION (HHE):
ISLAMIC PSYCHOLOGY PERSPECTIVE

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Abstract. *This paper attempts to pioneer efforts to conceptualize Holistic Health Education (HHE), especially from the perspective of Islamic Psychology. The problem raised in this paper is: how is the conceptualization of Holistic Health Education (HHE) from the perspective of Islamic psychology? What is the determination of spiritual role in Holistic Health Education (HHE)? What is the new model of relationship between doctors and patients in Holistic Health Education (HHE)? To answer these problems, the author uses the theory of spiritual roles in the perspective of Islamic psychology, holistic health theory, and system philosophy (intersubjective relations). As a result, there are 3 basic principles in Holistic Health Education (HHE), namely spiritualist-educational laboratories that are parallel with God's natural-community relations. In Holistic Health Education (HHE), spirituality and taste or pleasure or substance have a very determinant role, because it is he who perfects human events in his body, who can feel healthy and sick. With the existence of spirit and feeling in the subject, that's what distinguishes it from the object. It is this interior dimension that determines the new model of ethical relations between doctors and patients in Holistic Health Education (HHE), which is referred to as the intellectually intersubjective relationship.*

Keywords: Holistic education, holistic health, spiritual, psychological, spiritual, human

INTRODUCTION

Humans are very unique creatures because they have two dimensions, namely the dimensions of the interior or the inner-*zahir* dimension (the inner world-outer

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world). Both of these dimensions are also often referred to as the relation between the spirit-body. Both can be distinguished, but not separate. Research and study of these two human dimensions, especially the exterior dimensions of humans, have progressed very rapidly, which then led to various kinds of expertise and specialization. In the health sector for example, abnormalities or diseases can be detected by observing tissue or cell pathological and chemical structures for disturbed physiology, then the next progress has reached something deeper, up to the molecular level¹. Meanwhile, the dimensions of the human interior do not get much research and study, except certain knowledge which because of their scientific character, examines the dimensions of human interior, such as education, psychology, philosophy, and Sufism.

In practice, each scientific discipline still sees humans partially, fragmented, articulated, separated, both in the human (intrapersonal) itself and from other elements outside of human (interpersonal). For example health science (medicine), only takes care of the health of the body (physical) human beings only and the science of psychology only focuses on human (psychic) mental health. This partial and particular view of humans causes failure to comprehend humans as a whole and the inability to solve human problems themselves comprehensively.

The facts show, various advances in science, science and technology, including in the fields of education, health, medicine, psychology and so on, are not always positive compared to solving problems faced by humans. In other words, scientific progress does not solve or reduce human problems. Conversely, human problems actually develop increasingly complex, complicated, multifactor, and multidimensional. Then came later, an awareness to see human problems more fully, intact, holistically and holistically. This awareness became known as the idea of "holism". This idea then turns out the perspective of holistic education (holistic education) and holistic health (holistic healthcare). Both of these perspectives both view the importance of the spiritual dimension as the "center" of the self (spiritual).

The combination of education and health has become a separate science group called medical education. However, efforts to integrate holistic education and holistic

¹ Soesanto, E., Chanif, Supradono, B. 2015. "Improving the Quality of Public Health through Holistic on Delivery Health Services Faculty of Nursing and Health Sciences of the University of Muhammadiyah Semarang." *Journal of Nursing and Health in the Main Scholar Society*, 1 (4): 53- 61

health into holistic medical education, especially studied from the perspective of Islamic psychology, have not been the concern of many researchers. For this reason, this paper seeks to fill the empty space by pioneering the conceptualization of Holistic Health Education (HHE), especially from the perspective of Islamic Psychology. The problems raised in this paper are: (1) how is the conceptualization of Holistic Health Education (HHE) from the perspective of Islamic psychology? (2) What is the determination of spiritual role in Holistic Health Education? And (3) what is the new model of relations between physicians and patients in Holistic Health Education? To answer this problem, the author uses the theory of spiritual roles in the perspective of Islamic psychology, holistic health theory, and system philosophy (intersubjective relations).

LITERATURE REVIEW

Holistic Education and Holistic Health

Starting in the 1960s, when a cultural paradigm shift occurred in American social and intellectual history, the seeds of the holistic paradigm began to emerge as a way of looking at phenomena. In the 1970s, the holism movement began to penetrate into various branches of scientific knowledge. However, the term "holistic" itself was first used in 1926 by Jan Smuts in his book *Holism and Evolution*. The term "holistic" comes from the Greek word "holism" which refers to the idea that all the system properties given in any field of study cannot be determined or explained by the sum of its component parts. Instead, the system as a whole determines how the parts behave. All things need to be seen in their integrity, not in a fragmented and separate way. Every object, idea or living thing is the whole in itself and a part of a longer whole that gives meaning to it. Basically, this paradigm tries to describe the nature of the world and interconnected human experience².

The science of education and health is no exception affected by the emergence of this holistic paradigm which has led to the idea of holistic education and holistic health. Holistic education is an eclectic and inclusive movement that emerged in the mid 1980s, in response to the very dominant worldview of mainstream education. The world view of mainstream education is often referred to as the "Cartesian-Newtonian"

² Saw, Ganesh Prasad, 2013. "A Frame Work of Holistic Education," *International Journal of Innovative Research & Development*, Vol. 2, Issue 8, August

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paradigm that is very mechanistic, positivistic, and atomistic³. While holistic education is a paradigm that integrates idealistic ideas of humanistic education with spiritual philosophical ideas. More fully, holistic education combines the principles: freedom, autonomy, democracy, together with the principles: spirituality, wholeness, relevance⁴.

The study of holistic education includes Rudge (2008) who analyzed 8 principles of holistic education in schools, namely: spirituality, reverence for life / nature, interconnectedness, human wholeness, individual uniqueness, caring relations, freedom / autonomy, and democracy; Widyastono (2012) reviews the content of holistic education in the basic and secondary education curriculum; Setyaningsih (2015) reviews holistic education in Jiddu Krishnamurti's thinking (1895-1986). Siswoyo et al (2016) examine the potential of families in character-based holistic education in early childhood; Gardner (1993) analyzes the implications of holistic education on multiple intelligences; Rukiyati (2013) examines the urgency of comprehensive holistic character education in Indonesia; Latifah and Hernawati (2009) examine the impact of holistic education on character formation and multiple intelligences of preschool children; Primarni (2014) reviews holistic education with an Islamic perspective; and Zainuddin (2011) examines the holistic paradigm of Islamic education.

In health science, the term "Holistic Health" is used with a variety of different connotations. There are those who use the term holistic health as a multidimensional health paradigm. But there are also those who use the term holistic health in the context of holistic health care (holistic health care; holistic nursing). This paper is more likely to use the first term. Some studies on holistic health are carried out among others by Soesanto, Chanif, and Supradono (2015) who research Holistic Health Services (HHS) at Muhammadiyah University Semarang; Patwardhan and Tillu (2015) examine the application of holistic health using the Ayurveda model in the Indian Hindu tradition; Strout and Howard (2012) apply the theory of six dimensions of holistic health to measure the cognitive health of the elderly; Coin et al. (2010) found a relationship between the level of religiosity and holistic health; and Proeschold-Bell et al., (2017) reviewed the holistic health model applied by United States Methodist Church (UMC)

³ Nakagawa, Y. 2000. *Education for Awakening: An Eastern Approach to Holistic Education*. Brandon, VT: Foundation for Educational Renewal.

⁴ Rudge, L.T. 2008. "Holistic Education: An Analysis of Its Pedagogical Application," *Dissertation*, Graduate School of The Ohio State University

churches. From this literature survey, there is indeed no conceptualization about Holistic Health Education (HHE).

The World Health Organization (WHO) as a world health organization has shifted the concept of health, from healthy bio-psycho-social to healthy bio-psycho-socio-spiritual. The influence of the holistic paradigm into health sciences is with the emergence of the idea of Holistic Health (KH). In the World Health Organization (WHO) constitution in 1947 – renewed in 2009 – paragraph 2 stated: "Health is the stage of complete physical, mental and social wellbeing and not only the absence of disease or infirmity" (a condition that not only has no disease but is accompanied by physical wellbeing, mental, and social). The World Health Organization (WHO) standard was then supplemented by psychologists (especially transpersonal flow) in 1987 (40 years later: 1947-1987) which added spiritual dimensions as an important part of human health. Thus, humans are considered healthy holistically, if the tetra-dimensional is fulfilled, namely: healthy physical, psychological, social, and spiritual or bio-psycho-social-spiritual⁵.

Therefore, what is referred to as Spiritual Health. The term "spiritual health" is truly new in health nomenclature in Indonesia. Although it has been referred to in the Republic of Indonesia with Health Act Number 36/2009 regarding spiritual health, doctors and health workers are still very unfamiliar with this term. It is difficult to combine these two terms, health on the one hand and spirituality on the other. Understanding like this should not happen, because the compilers of the Health Law are certainly not people who do not understand at all about health and spirituality⁶.

Holistic Health, in psychology discourse, is known as the concept of wellness. It is not easy to find the equivalent or meaning of the word wellness in Indonesian. Often the meaning of the terms wellness and health is confusing because of the closeness of its definition (Travis & Ryan, 1988: 23-24). In this concept, the term "health" is interpreted as a neutral state, which does not exist illness or pain in a person. If sickness is positioned at the end of a continuum line and wellness at the opposite end, then health is at the middle point or neutral point of the line. Whereas in the perspective of medicine, holistic

⁵ Thohir, Muhammad, 2006. *Becomes the Man of Choice with a Big Soul: 10 Practical Steps to Nourish the Soul*, Jakarta: Lentera Hati. P. 29

⁶ Pasiak, Taufik, 2002. *Revolution IQ/EQ/SQ: Revealing the Secrets of Based Intelligence Al-Qur'an and Advanced Neuroscience*, Bandung: Mizan. P. 84

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health can be found in the explanation of spiritual health. However, the term "spirit" in the concept of spiritual health, sometimes does not involve God (Taggart, 200: 17-22.). This is different from "spirit", which is actually obliged to include God, because the soul comes from God (*Surah al-Isra* '[17]: 85), and should return to God (*Surah al-Fajr* [89]: 27-30). Although a little, it turns out there is still 'space' to study the spirit, "*wa ma utitum minal ' ilmi illa qalila* " (and I do not give knowledge about spirit, except a little).

Is "spirit" different from "*ruh*"? Apparently, spirituality is still using a material base in the form of brain nerves / neuroscience (Pasiak, 2012) and heart codes / heart's code (Pearsall, 1998), can be with / without God; whereas spirit, whose basis is non-material (feeling), is actually obligatory with God. Thus, health education will be considered holistic, if it also accommodates religious views and beliefs in God. So, accommodating religious views, means accommodating Islamic views; and accommodating belief in God, means accommodating the role of spirit that comes from God. Holistic Health Education (HHE), which ignores the role of spirit, is not yet holistic, or even pseudo holistic. So, how do you actually put the role of scientists (doctors) and religionists? There is an interesting explanation below:

"Science (including the science of health education) will never be human, humans will never become souls, spirits will never be God. Science will be beautiful results, will be dignified, useful, meaningful, with high efficiency, if you know the benefits and disadvantages; the condition: spirit is taken care of by God, humans are taken care of by spirit, science is taken care of by humans. " (*Yusuf, 2016: 30*)

Based on the quotation above, we can connect four relations as a holistic frame of mind, namely relations: science, human, spirit, and God. The spirit comes from God; with spirit, man is perfected; and humans who created science. The fourth relationship, if we can imagine in a concept, such as a quadrant (four interconnected boxes): left quadrant over the position of science / knowledge, lower left human position, right lower position spirit, and right in God's position. We call it the **S-MA-R-T Model**: - cronym of (S) *ains*, (MA) *nusia/human*, (R) *uh*, (T) *uhan/God*. The upper left quadrant is the area of science (physical), while the remaining three quadrants are religious (non-physical) regions.

Perhaps the framework of thinking as above can position religion and science, to cooperate with one another, not to negate one another.

Holistic Health Education (HHE) Conceptualization : Science, Human, Spirit, and God Relations

So far, the concept of health education still uses two models, namely the model of laboratory education (such as medical genetics, genetics, biology, molecular, and immunology) and population (such as the public health model). In health education (medicine) in the future, laboratory medicine is very important and at the same time populational medicine. Ignoring laboratory medicine means we will retreat in bio and genotechnology in medicine, genetics, biology, molecular, immunology, and so on. Ignoring populational medicine, it means that we waste the masses of the population as patients in the struggle for their life through an ever-changing environment. In this case, these two need to be developed family medicine to international health, through community medicine and social medicine (Jacob, 2006: 326).

Holistic Health Education (HHE) adds one more principle, namely spiritualist education. Thus, Holistic Health Education (HHE) incorporates the Spiritualist-Populationist Educational-Education model. In the perspective of Islamic psychology, the three relations in Holistic Health Education (HHE) correlate with three human dimensions, namely: the dimensions of physical-physical, *human-nafsani*, and spiritual; or between *the born-zahir-inner* dimension. Therefore, in implementing Holistic Health Education (HHE), it requires cooperation between health workers (doctors), social scientists and humanities, and religionists. Or an introduction to the basic principles in Natural Sciences (NS), Social Sciences (SS), and Religious Sciences.

Holistic Health Education (HHE) is a form of integration between Holistic Education (PH) on the one hand, and Holistic Health (HH) on the other. PH and KH both emphasized the importance of the 'spirit' dimension. Why does it have to be holistic? Because, for centuries, health science was still based on "the understanding of the human body as a machine," and disease as a consequence of engine failure, and the duty of doctors to repair the machine. By concentrating on smaller parts of the body, modern medical scientists often lose sight of patients as whole people, and reduce health to mechanical functioning only, and health science is no longer able to deal with holistic healing phenomena. This may be the most serious weakness of the mechanistic-biomedical approach Descartes model (Notoatmodjo, 2003: 6-7; Capra, 2002: 131-132).

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The mechanistic-biomedical view is slowly being diminished by the Aristotelian-style view of the cyber-cybernetics in health, namely a holistic and ecological world conception that sees the universe not as a machine, but rather as a living system, a view that emphasizes the importance of mutual relations and interdependence all phenomena and try to understand nature not only in terms of basic structures, but in terms of underlying dynamic processes. It appears that the system's view of living organisms can provide an ideal basis for new approaches to health and holistic health care. This system view of health is truly ecological. The view of the system is based on scientific insights and expressed in terms of concepts and symbols that are part of our everyday language. At the same time, the new framework certainly takes into account the spiritual dimensions of health, and is therefore in harmony with the views of many spiritual traditions, especially Islam (Islamic Psychology).

So, the spiritual dimension is one that cannot be separated in the talk of holistic health. For this reason, as World Health Organization (WHO) has revised the healthy definition that it sparked, from bio-psycho-social (1947) to bio-psycho-social spiritual (1987), as well as the RI Health Law, it has revised it, from the Republic of Indonesia with Law Number. 23 of 1992 concerning health, which states in article 1 paragraph 1, that, "Health is a state of well-being of the body, soul, and social which allows every person to live productively socially and economics ", became the Law of the Republic of Indonesia Number. 36 of 2009 concerning health, which states that "Health is a healthy state, both physically, mentally, spiritually, and socially, which enables everyone to live productively socially and economically" bio-psycho-socio-spiritual.

In the perspective of psychology, the relationship between body (bio), psychology (psycho), and environment (socio), as a determinant of personality style that is as widely adopted in contemporary psychology and psychiatry, is complemented by Islam with other elements, namely: spirit. Holistic health is thus a link between physical, psychological, environmental, and spiritual dimensions, so that humans are a bio-psycho-social-spiritual unity. Humanistic psychology, especially Logotherapy, has indeed shown such similarities, but spirit, which is termed noetic (Frankl, 1970: 18; Bastaman, 2007: 12-20; Bastaman, 2012: 85-105) or spirit, not in the sense of religion . The spirit given by God to humans is not just any spirit, but the Holy Spirit *or Ruhul Quddus* (*Surat al-Baqarah* [2]: 87; *QS al-Baqarah* [2]: 253; *QS al-Ma'idah* [5]: 110; *Surat an-Nahl* [16]:

102.). The essence of spirit is truth, which arises from pleasure (Q.S. *ar-Rahman* [55]: 13). Western psychology assumes that human nature is bad (psychoanalysis), neutral (behavioral psychology), good (humanistic psychology), and potential (Transpersonal psychology). Whereas in Islamic Psychology, can be distinguished between the dimensions of the human body (the body of human), human (human), and who perfect human events (perfecting human): physical bodies; *human-nafsani*; and conscience.

So, Holistic Health Education (HHE) has three holistic perspectives: First, the dimension of 'human body', which can be treated by doctors (*dawa* '). Second, the dimension of 'human' to be cured or *syifa* '(Q.S. *Ash-Syu'ara*' [26]: 80). Third, the dimension that perfects human events (spirit), to be saved or *syafa* '(Q.S. *al-Baqarah* [2]: 255). The trilogy emerges: '*dawa - syifa* '- *syafa*'. The last two ways of view (*syifa* 'and *syafa*') are the realm of God, not the realm of humans (doctors). Like a pyramid, the bottom level is a cure, the level above is healing, and the top level is turning on and off. The two levels above are the realm of God. Therefore, Holistic Health Education (HHE) has the principle: "Doctors treat, God heals." The implication is that doctors must always rely on God when treating patients. Because, as a subject, there is an element of divinity in the patient, namely spirit. With this perspective, there is a definition of doctors in Holistic Health Education (HHE). In addition to understanding medical science, doctors should also recognize the basic principles of human beings in the perspective of social sciences, moreover religious perspectives. Doctors like this are able to make the patient's soul calm. With peace of mind, his body will be back in balance. The balance in the body caused by the tranquility of the soul, can move a mechanism of internal immunity in the body, to cure its diseases.

Based on the explanation above, we have found two notions of health: first, which are based on biomedical-reductionist views. Second, which is based on cybernetics-systemic views. The former considers health as the functioning of the body's machine, while the second assesses health as a welfare experience that occurs because of a dynamic balance that involves the physical and psychological aspects of an organism and its interactions with the natural and social environment. In contrast to biomedical-reductionist and cybernetics-systemic views, about the notion of health, we propose a new definition of "health" in the view of Holistic Health Education (HHE) spiritual perspective, namely: "Health is a welfare experience arising from a sense that is always connected with the Source of Life , namely God (transpersonal relations), which is

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manifested by the existence of a harmonious and dynamic balance between one's spiritual / conscience / *nafsani-physical* / physical dimension in interacting with himself (intrapersonal relations), social (interpersonal relations), and natural environment (ecological relations) ".

Because "sick" is the opposite of "healthy", then the definition of "sickness" in Holistic Health Education (HHE), is the opposite of the definition of "healthy", by adding the word "no". Namely: "Pain is an experience of unhealthiness that does not arise from a sense that is not always connected with the Source of Life, namely God (transpersonal relations), which is not manifested by a harmonious and dynamic balance between spiritual / conscience / *nafsani-jasadi* / a person's body in interacting with himself (intrapersonal relations), social (interpersonal relations), and the natural environment (ecological relations) ". So, holistic health, the key is in "harmonious and dynamic balance", between the spirit-body.

METHODOLOGY

This is qualitative research which the data are taken from the experimental study of the references in the library and tested in the real practice in Islamic psychology. The author uses the theory of spiritual roles in the perspective of Islamic psychology, holistic health theory, and system philosophy (intersubjective relations)

FINDINGS AND DISCUSSION

Determining the Ruhan's Role in Holistic Health Education (HHE): From Psychology to Spiritualism

Spirit (especially taste) is not the same as soul, especially spirit and noetic. Because, if the soul and spirit are still using the basis of material, namely biology and psychology, the spirit uses a non-material basis, namely *ruhiology/ Spiritualogy*. The soul that perfects human events can act as a Book, because he notes; as Faith, because he trusts God; and as *Nur (light)*, because he is light (*Q.S. asy-Shura* [42]: 52). When God perfects human events, the spirit is blown, together with pleasure; then pleasure or substance or taste, that's the inner dimension, that's morality, that's what emits the process of reason, thought, imagination, understanding, science, through spirit, that's *zahir*, that's mind, that's the five senses (hearing, sight, smell, pronunciation, and

feeling); the soul is *nur* or light; so that all organs in the body function; including the brain and heart, including ears, eyes, nose, mouth, and tongue, and all members of the body, that's the dimension of birth, that's culture. So, with the spirit blown, we are given hearing (not ears), vision (not eyes), and heart (not liver). So, the center of intelligence (*IQ-EQ-SQ*) in holistic education is not in the heart-brain, but in that spirit. In the HHE perspective, which applies the healthy principle of bio-psycho-socio-spiritual, spirit can be called inner-spirit, whereas taste is the real inner-spirit. So, spirit (the conscious realm) is the center of self, while the feeling (conscious source of nature) is the central core of self. In Western psychology, self or personality does not have a center. Zohar (2001: 136), who has introduced Spiritual Quotient (SQ), uses the term "crown chakra" as "center of self". The crown chakra is described as a lotus with a thousand flower petals that emit moonlight, and it embodies the pure union of the human soul with whatever we call 'God'. Whereas Iqbal (1976: 135-136) uses the term *khudi*, namely free personal causality, and he takes part in the life and freedom of the Absolute Ego. The Absolute Ego allows the emergence of a relative ego that is capable of initiating itself and limits this freedom at its own free will. In the language of Sufism referred to as *lata'if* which is divided into seven levels (Zahri, 1998: 77-79; Rahman, 2010: 81-82). In fact, the spirit is the "center of self", while the taste or pleasure or substance is "the core / source of the center of self".

We cannot equate the term "spirit" (which is the basis of holistic health: bio-psycho-socio-spiritual, and the basis of holistic education, *IQ-EQ-SQ*) with "spirit". Because, in the view of Islam, the word "spirit" which in Arabic is "spirit" and spiritual (spirit) has never and cannot be released from the aspect of divinity. Because, spirit is God's business (*Q. Al-Isra* [17]: 85.). This is very different from the term 'spiritual' in holistic education (*IQ-EQ-SQ*) and holistic health (bio-psycho-socio-spiritual), which is not closely related to divinity. So, a humanist or atheist can have high spirituality. A person with high SQ can have spiritual qualities without religion at all. So, the spirit goes beyond spirituality (Spiritual Intelligence).

Spirit has a very significant / determinant role – not to say the most important thing – because spirit is a "bridge" between humans and their Lord. Our relationship with God, because of that spirit or faith. Humans are called humans, also because of the spirit. Because, without spirit, humans become a pile of carcasses without meaning. In the perspective of Spiritual Philosophy, there are three types of spirit, namely: (1) Subjective

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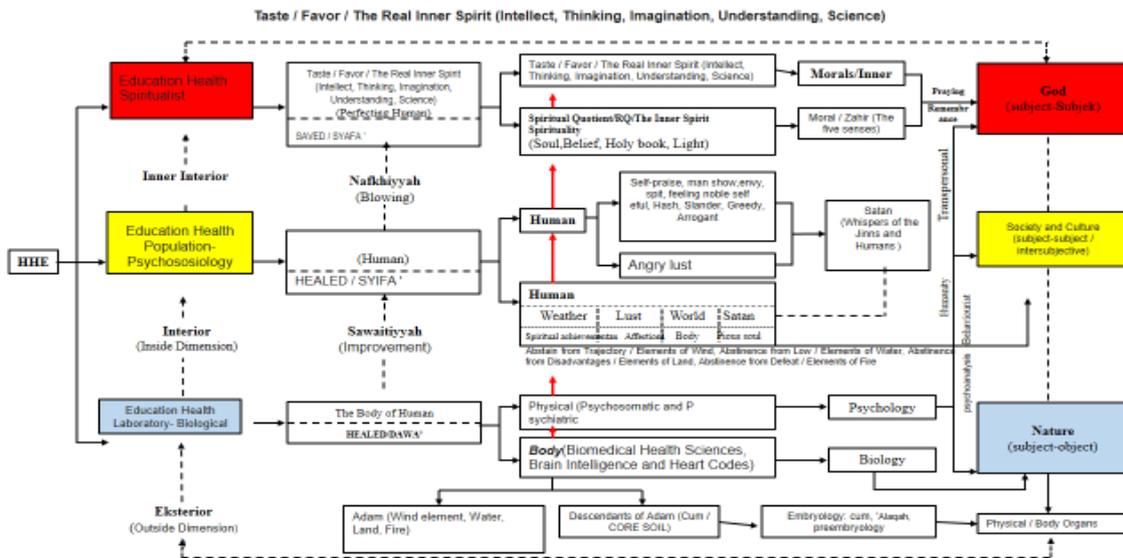
Spirit (Spirit of God, called *Ruhani*); (2) Subjective spirit / soul (soul that is in human: *ruh raihan, rahmani, jasmani, and idafi*); (3) *Ruh Objektif* (spirit in plants, called *ruh nabati*; and spirit in animals, called *ruh hewani*). If the subjective spirit is conscious, then the Subjective Spirit is in the upper realm conscious. Whereas the objective spirit in animals has no awareness, but is limited to knowledge (reason, imagination, science). The Subjective Spirit itself is called by various terms, such as: *Authentic Spirit, Pure Spirit, Ruhul A'za m, Great Spirit, Suksma, A'yan Sa bitah, Ruhhiyyun, Ruh Natiqah, Ruh Insan, Ruh Qudsiyyah, Ruh Idafi, Ruh Halus, Pramana, and Purusa*.

New Model of Doctor-Patient Relations in Holistic Health Education (HHE)

Doctor-patient relations are the oldest theme in biomedical ethics. In ethics biomedicine (or bioethics) as a whole, this section is often named "clinical ethics". There are three general characteristics of the doctor-patient relationship, namely: (1) the patient as a person; (2) trust relations; and (3) empathy. Especially about the third principle, empathy, is an attitude that seems to succeed in "getting into the skin" of others by being able to feel what others feel. However, in this case empathy has not arrived at sympathy. Sympathy goes further. People who put sympathy on someone, also feel in their hearts what is felt or experienced by others. Empathy and sympathy are important in relationships between humans. Even in the medical profession, empathy is needed to create a good and effective doctor-patient relationship. In the language of the Qur'an, we are told to read the book ourselves first (*Surah al-Isra* [17]: 14), before telling others (*Surah al-Baqarah* [2]: 44), to create *ta'aruf* or know each other (*QS al-Hujurat* [49]: 13). In the perspective of philosophy of science, the relationship of empathy-sympathy between doctors-patients, also called symmetrical relations or relations "*We*", not "*I-You*", is an inter-subjective relationship.

In Preventive Health Care, for example, the relationship between health workers and the community is more of an intersubjective (doctor-patient) partnership. The preventive approach sees clients as whole beings, with a holistic (comprehensive-systemic) approach. The occurrence of disease is not solely due to disruption of biological systems, individuals, but in a broader context, biological, psychological, social, and spiritual aspects. Thus, the approach is not individual and partial, but must be holistic.

In the perspective of philosophy of science, the reason for health education in Indonesia must be developed towards subjects, not just subject matter. In fact, it must be added to the subject ("s" small) Subject (Large "S"). By presenting the role of "God", now



the relationship, in the language of philosophy of science, is referred to as the subject-subject matter, which can give birth to the implications of three types of learning in Holistic Health Education (HHE), each of which cannot be reduced to the other, namely:

First, cognitive learning (for learning subject-object relations: laboratory health education). Second, recognitive learning (for learning subject-subject / inter-subjective relations: populist health education). Third, trans (cognitive) learning (for learning *subject-Subject* / God relations: spiritual health education).

So, to create a new model of doctor-patient relations and educators-students in Holistic Health Education (HHE), it is necessary to recommend an "inter-subjective, godly awareness model." This model integrates three relations (Muadz, 2014: 317-318), namely doctor-God and / or God-educator (subject-subject); doctor-patient and / or educator-learner-see the interior dimensions - (subjects); doctor-patient and / or educator-student-see the exterior dimensions - (subject-object). This relationship trilogy will give birth to three integrated consciousnesses in Holistic Health Education (HHE), namely cognitive-recognition-trans (re) cognitive awareness. Understanding of the three relations of consciousness, requires a deep understanding of the five zones of human

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consciousness, such as a pyramid, at the top is the unconscious (brain-heart), which is moved by the conscious (soul), driven by the unconscious (*ruh*), which comes from conscious natural resources (taste, pleasure, substance), and the Main Mover is the Preserver of the whole world of human (God).

CONCLUSION

First, the Holistic Health Education (HHE) model is only the initial pilot stage and is certainly still far from perfect. This brief article is only at the stage of providing a new perspective or new mindset in looking at issues around holistic health education, especially for prospective medical personnel and medical personnel and prospective doctors and doctors. Therefore, the next stage, it is necessary to proceed to more applicable, implementative, and concrete research models, for example related to the making of Holistic Health Education (HHE) Learning Modules, especially in the Faculty of Medicine, Faculty of Public Health, Teaching Hospital (TH), and study programs others, both in public and religious-based colleges. In addition, especially in the Faculty of Medicine, Faculty of Public Health, and Teaching Hospital (TH), this research can be developed and become a basic reference to the search and creation of new curriculum formats, especially for Religion, Spiritual Health, and Medical Ethics Courses (Bioetics) with the main topic of discussion about "humans" more fully and comprehensively.

Secondly, a multiperspective research and research model should always be carried out to initiate a new, more holistic perspective on seeing things. For example, this paper combines a holistic education model on the one hand, with a holistic health model on the other, so that the term Holistic Health Education (HHE) emerged. This has undermined the existence of cooperation between various disciplines. For example, a prospective doctor and health worker does not only master the basic principles of Natural Science (NS), which is certainly an obligation and professional competence, but also understands the basic principles of social and Human Sciences (HS). In addition, the science of religion also becomes very important, to provide ethical guidelines (moral treatment) in acting (read: medical action). Apparently, religion has given a very comprehensive view of humans, not only from its material dimension (body), but also its spiritual dimension (spirit).

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