

Healthcare Policy in the Khilafah State

**From the publications of
Hizb ut Tahrir**

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This book is from the publications of Hizb ut Tahrir

First Edition

Dhu al-Hijjah 1443 AH

July 2022 CE

Updated and Reviewed in Safar 1448 AH - July 2026 CE

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

﴿الَّذِي خَلَقَنِي فَهُوَ يَهْدِينِ﴾ ﴿٧٨﴾ وَالَّذِي هُوَ
يُطْعِمُنِي وَيَسْقِينِ ﴿٧٩﴾ وَإِذَا مَرِضْتُ فَهُوَ يَشْفِينِ
﴿٨٠﴾ وَالَّذِي يُمِيتُنِي ثُمَّ يُحْيِينِ ﴿٨١﴾

[سورة الشعراء]

Table of Contents

Preface	12
Introduction	14
The Current Reality of Healthcare and the Foundations and Objectives of Healthcare in the Khilafah State	18
The Reality of Healthcare in the World	18
The Poor Healthcare Stems From the Poor Capitalist Civilization That Dominates the World	19
Manifestations of the Degradation of Health Aspects in the World	21
The Corruption of the Most Important Elements Affecting Healthcare	26
The Repercussions of Coronavirus and the Collapse of Health Systems in the World	33
Islam’s View of Man and Society Regarding Healthcare	36
Health and Healthcare in the View of Islam	42
Health in the View of Islam	42
Healthcare in Islam	44
Foundations of Healthcare in the Khilafah State	48
The Philosophy of Islam Is the Mixing of Matter With Spirit	48
Islam’s View on Solving Problems	49
Unity of View Towards the Individuals Under the Ruler’s Care When Providing Care	49
Ruling Is Centralized and Administration Is Decentralized	50
The Administration of Interests Is Based on Simplicity, Speed, and Competence	50
The State Guarantees the Basic Needs for All Those Under Its Care, and Enables Them to Achieve Their Luxurious Needs	51
The View Towards the Economic Problem	52
Looking After the Affairs in a State of Emergency	53

Funding Healthcare in the Khilafah State.....	54
General Objectives of Healthcare in the Khilafah State	58
Preservation of Physical Health.....	58
Preservation of Mental and Psychological Health	58
Preservation of Public Health	61
Comprehensiveness of Healthcare for All Those Under the Ruler's Care.....	62
Free Healthcare Provided by the State as an Obligation	63
Excellence and Progress in Health Sciences.....	63
Readiness and Preparedness to Deal With Disasters and Exceptional Cases.....	64
Establishing an Administrative System to Implement the Healthcare Policy.....	66
Public Healthcare in the Khilafah State	67
The General Framework of Public Health	67
The Importance of the Decentralized Administrative System in the Field of Public Healthcare	68
Establishing Integrated Policies Upon Which Public Health Is Based	69
Food, Nutrition, and Food Security	70
Providing Food and Securing a Balanced Diet.....	70
Providing Food Security in the Khilafah State	71
Health and Quality of Food in Restaurants, Markets, and Factories	73
Environmental Health	74
Air Purity	76
Water Quality.....	78
Food Safety.....	80

Controlling the Spread of Zoonotic Diseases and Preventing Them	80
Preserving Forests and Woodlands	82
Sanitation	82
Sanitary Engineering for the Residential Environment	83
Standards and Control	83
Health Control and the Hisbah Apparatus in the Khilafah State	84
Managing the Outbreak of Infectious Diseases.....	88
Infectious Diseases as a State of Emergency in the State	88
Monitoring the Health of Arrivals to the State	88
Combating the Outbreak of Infectious Diseases and Pandemics - Quarantine	89
Additional Measures.....	91
Preparedness for Emergency Situations	92
Global Healthcare	93
Individual Healthcare - Preventive	97
Preventive Healthcare for Individuals	97
Data Collection and Monitoring Individual Health by the State	99
School Nursing	102
Educating the Public About Individual Health and Nutrition...	102
Prevention of Infectious Diseases.....	105
Vaccination of the Population.....	106
Screening Examinations for Non-Communicable Diseases - Secondary Prevention	110
Oral and Dental Health	110
Women's and Children's Health	112
The State Guarantees the Provision of Medicine to Everyone Who Needs It, and Seeks to Find New Treatments for Diseases That Lack Effective Medicines	119

Healing Comes from Allah ﷻ, the Majestic	122
It Is Recommended (Mandub) for a Muslim to Seek Medical Treatment, Just as It Is Permissible for Them to Be Patient With the Disease	123
The Request for Medical Treatment Encompasses Everything That Falls Under the Term Medicine or Treatment.....	125
Treatment for Mental Illnesses Is the Same as for Physical Illnesses	127
Methodology of Therapeutic Management Towards Mental Health	128
Mental Health Problems Related to Values and Societal Problems	129
Providing Treatment for Individuals Is an Obligation Upon the State	130
The Model for Organizing Therapeutic Healthcare in the Khilafah State	130
The Public Sector and the Private Sector.....	134
Assistance During the Recovery Period and Rehabilitation of Patients.....	137
Providing Service and Assistance to the Incapacitated, the Elderly, the Injured, and the Mentally Disabled Whose Families Are Unable to Assist Them.....	137
Urging the General Muslims to Aid the Weak	141
Blood Bank and Its Derivatives	141
Technology and the Medical Industry in Therapeutic Management	148
The Administrative Healthcare System	149
The Healthcare Department	151
The Administrative Structure of the Healthcare System in the Islamic State	152

The Information Bank, Diwans, and Electronic Personal Files	155
Ensuring the Quality of Healthcare	156
Committees of Experts to Set Standards and Shariah Rulings Related to All Aspects of Healthcare in the Islamic State	157
Awareness, Education, and Health Guidance in Connection with the Media Department	160
Issues and Controls in Healthcare.....	161
Medical Education, Allied Health Professions, and Scientific Research	161
Medical Education.....	161
Providing Properly Trained Doctors, Nurses, and Other Workforce	161
Nursing and Other Health Professions	162
Establishing Medical Education Curricula and Qualifying Professionals in Healthcare.....	163
Competence in Training.....	165
Scientific Research and Continuous Medical Education	165
Maintaining Standards Through Professional Development and Continuous Education.....	166
Licensing Doctors Graduating From Other Countries.....	167
Monitoring Standards and Medical and Health Liability	167
Medicines and Pharmaceutical Industries in the Islamic State	171
Pharmacy and Medicine	171
Pharmaceutical Industries in the Islamic State	174
Disasters and Exceptional Cases	177
Disaster and Emergency Management	177
The Concept of a Disaster.....	177

The Major Disasters That Must Be Dealt With Are as Follows:	178
Ambulance and Emergency Centers	185
Medical Professional Ethics, Medical Liability, and Malpractice	187
Medical Professional Ethics in Islam	187
Ethics of the Muslim Healthcare Practitioner	190
Duties of the Healthcare Practitioner Towards Patients	191
Medical Liability, Medical Malpractice, and Negligence	192
Liability of the Medical Profession	192
Definition of Medical Malpractice	193
The History of Healthcare in the Islamic State	195

Preface

All praise is due to Allah ﷻ, and peace and blessings be upon the Messenger of Allah ﷺ, his family, his companions, and those who follow him. To proceed:

This book is the fruit of the efforts of selected individuals in gathering its information, organizing it, verifying it, and perfecting its topics... etc. They left nothing for us except reviewing and scrutinizing, then amending and deleting some paragraphs until it became radiant with goodness, as is evident throughout the pages of this book.

We praise Allah that He

﴿عَلَّمَ الْإِنْسَانَ مَا لَمْ يَعْلَمْ﴾

“Taught man that which he knew not” [Al-‘Alaq: 5], and that He made it so that «لِكُلِّ دَاءٍ دَوَاءٌ، فَإِذَا أُصِيبَ دَوَاءُ الدَّاءِ بِرَأٍ بِإِذْنِ اللَّهِ عَزَّ وَجَلَّ» **“For every disease there is a medicine, and if the correct medicine corresponds to the disease, it will be cured by the permission of Allah ﷻ”** [Reported by Muslim]. Then Allah, the Most Benign, the Most Merciful, completed His favor upon us by making it a Shariah obligation upon us to pledge allegiance to a Khaleefah (Caliph), an Imam who rules us by the Shariah of Allah ﷻ, so that we do not die a death of Jahiliyyah. The Prophet ﷺ said, «وَمَنْ مَاتَ» **“Whoever dies without having a pledge of allegiance on his neck dies a death of Jahiliyyah”** [Reported by Muslim]. The Imam looks after our affairs as Allah ﷻ commanded, regarding our health, well-being, honor, and dignity. The Prophet ﷺ said, «الْإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care”** [Reported by Bukhari], so that we may attain success in our worldly life and the Hereafter,

﴿وَذَٰلِكَ هُوَ الْفَوْزُ الْعَظِيمُ﴾

“And that is the great attainment” [Ad-Dhukhan: 57].

In conclusion, I ask Allah ﷻ for the fullest reward for all the brothers who exerted a good effort in this book, and Allah ﷻ has spoken the truth:

﴿وَأَنْ لَّيْسَ لِلْإِنْسَانِ إِلَّا مَا سَعَىٰ ﴿٣٩﴾ وَأَنَّ سَعْيَهُ سَوْفَ يُرَىٰ ﴿٤٠﴾ ثُمَّ يُجْزَاهُ الْجَزَاءَ الْأَوْفَىٰ ﴿٤١﴾﴾

“And that there is not for man except that [good] for which he strives. And that his effort is going to be seen - Then he will be recompensed for it with the fullest recompense” [An-Najm: 39-41].

And as a final conclusion, we ask You, O Allah, to benefit us with what You have taught us, to teach us what benefits us, and to increase us in knowledge. And all praise is due to Allah, Lord of the worlds.

The twenty-seventh of Dhu al-Hijjah 1443 AH, corresponding to 26/07/2022 CE.

Updated Muharram 1448 AH corresponding to July 2026 CE.

Introduction

This book outlines the healthcare policy that will be followed by the Khilafah State, which will be established soon, by the Permission of Allah ﷻ. It is the state that Hizb ut Tahrir has been working with the Ummah since the day of its inception, with diligence, dedication, and sincerity, to establish, so that it may implement Islam in a revolutionary, radical, and comprehensive manner in ruling and administration, making it the controlling authority in the lives of Muslims. This will usher in a new era in which Muslims and the entire world will feel the real change they long for, to be delivered from injustice, misery, and hardship. Humanity has been suffering since Islam was absent from the arena of life and the creeds of Kufr (disbelief) and its corrupt systems took control, plunging man to the lowest depths in his creed, life, and livelihood. This is true whether those creeds are socialism, including communism, or capitalism, including democracy, which has permeated the world, revealing its flaws and evils to mankind: killing, displacement, forced migration, and deprivation of the most basic rights for the individual and the group, such as food, clothing, shelter, education, health, and security.

Among the administrative systems that the Khilafah State will implement, by the permission of Allah, is the healthcare system, which aims to preserve the health and well-being of all those under the ruler's care. This will position the Khilafah at the forefront of the world's nations through excellence and superiority in this field. The world will witness the excellent implementation of Islam and the sincerity in looking after the affairs of the people, serving as an invitation to embrace Islam, turn towards it, and bring the world out from the servitude of men to the servitude of the Lord of men, from the oppression of religions to the justice and mercy of Islam, and from the narrowness of this world to the vastness of this world and the Hereafter.

We will begin in this book by mentioning the reality experienced by the countries of the world in terms of poor healthcare and the deprivation of peoples from its most basic elements. We will explain the causes of the corruption associated with capitalist systems when they made material value the basis for solving problems, foremost among them healthcare. Consequently, healthcare has generally become corrupted despite scientific and technological progress in the fields of medicine and preventive health, because healthcare has often been linked to high costs, the realization of material profits, and treating the rich while neglecting the poor.

We will subsequently clarify the concept of health and healthcare from the perspective of Islam, the responsibility of the Khaleefah and the Islamic State regarding it, the Shariah rulings related to it, and the means and methods used by the Islamic State to implement it. The Khilafah State is committed to providing free healthcare provided by the state as an obligation to all those under the ruler's care; because preserving health is a basic need for all people, regardless of the burden this care places on the State Treasury (Bayt al-Mal). It views the health problem as a human problem, not an economic one; thus, its goal is to provide healthcare in the best and most complete manner.

The book then addresses public healthcare related to the health of the environment in which man lives, including air, water, and food, as well as environmental health in all its elements. This care aims to promote health through state-level policies. Public healthcare generally focuses on the prevention of diseases more than treatment, because prevention is one of the most important divisions of healthcare, the most universally beneficial, and the most productive. It includes protecting those under the ruler's care from risks to public health, such as maintaining health standards, where the Khilafah exerts effort to ensure these standards are among the best global standards so that its subjects may enjoy a decent, healthy life befitting human dignity and well-being.

The book then presents preventive medicine in the Khilafah from the perspective of individual health. It focuses on community health measures that affect individual health conditions, whether primary or secondary prevention, and all

related measures to prevent disease or reduce the likelihood of its occurrence. This is achieved through establishing a database for patients and the necessary population, through screening examinations, and by monitoring and managing those susceptible to diseases. Preventive medicine also covers the necessary health services for specific categories of those under the ruler's care within society, such as school nursing, oral and dental health, maternal and child health centers, occupational health, vaccinations, monitoring the outbreak of epidemics, and preventing them in a timely manner.

The Khilafah State bears the responsibility of looking after the health needs of individuals affected by diseases and establishing effective systems for treating individuals. This includes providing clinics, hospitals, and public facilities used for treatment. Medical treatment is a fundamental part of public interest and public facilities that the state must undertake. This is done through gradual stages in providing treatment via healthcare, starting from primary healthcare centers, then secondary care in local hospitals, and finally central hospitals, according to the health needs of the patients. This is provided with an adequate number of doctors and allied health professions, and with the latest equipment and devices that ensure the provision of therapeutic services with ease, speed, and efficiency, in addition to caring for the patient's recovery period, and serving the disabled and the elderly.

The healthcare system in the Khilafah State consists of a set of Shariah rulings and administrative laws related to this care. As for the administrative laws for healthcare, they are the permissible means and methods that the ruler deems effective in implementing the system and achieving its purpose. The administrative system for healthcare in the Khilafah State is based on simplicity and speed in providing health service and treatment, as well as on competence in those who assume the administration. The Public Health Department, headed by the Director General of the Health Department, manages and implements the healthcare policy in the Khilafah State and preserves public health by providing preventive, curative, and regulatory health services to the society and individuals. It supervises all the circles and administrations affiliated with it. For every circle and every

administration, a director is appointed who is directly responsible for it and for the branches and sections that follow it. The Public Health Department also ensures quality control and draws up strategies to implement healthcare plans. Through its expert committees, it oversees the setting of the necessary standards for medical education, health education, and medical liabilities. It also coordinates with other state apparatuses that share in the implementation of the elements of this care whenever necessary, such as disaster management.

The book then addresses issues and controls that complement the perfection of healthcare in the best manner, including: medical education and its curricula, standards for granting licenses to practice medical professions and specialties, controls related to medical professional ethics, and the liability of medical malpractice.

The book also addresses the subject of medicine and pharmaceutical industries in the Khilafah State, and the issue of disaster management and first aid. Finally, a brief word regarding the form and features of healthcare throughout history since the establishment of the Islamic State at the hands of the Messenger ﷺ, its rapid progress, and its distinction from the rest of the nations and civilizations through the Rightly Guided Khilafah and then the various historical eras of the Khilafah State, where Bimaristans were established, and scientific research, studies, and outstanding scholars emerged, who were spoken of in Islamic and non-Islamic history books.

We are certain of the ability of the Khilafah State, whose glad tidings are looming on the horizon, to undertake advanced and distinguished healthcare befitting human beings, such that it harnesses scientific and medical achievements in providing the best health services, alongside other distinguished programs for looking after the affairs that the Khilafah State implements based on the Islamic Aqeedah and according to its systems emanating from it.

The Current Reality of Healthcare and the Foundations and Objectives of Healthcare in the Khilafah State

The Reality of Healthcare in the World

People in this era have been afflicted by a civilization that has stripped actions of moral, spiritual, and human values, and made the world revolve around achieving utilitarian material values. As a result of the spread of the capitalist ideology, the ideology of separating religion from life, corruption has appeared on land and sea, afflicting people in their physical, mental, and societal health. Diseases and illnesses have emerged, and monopoly and corruption have dominated the medicine, drug, and vaccine industry. People have been deprived of their most basic rights to healthy food and drink, and safe housing that befits them. Factors contributing to the spread of diseases and their complications have proliferated. Preventive interventions have been restricted to wealthy countries and individuals, while the poor have been deprived of them. Healthcare systems—even in countries claiming to provide the best services—have failed to cover all their populations with these services; this is due to limited-benefit health insurance systems that are incapable of providing healthcare except to those who contribute to the imposed fees, where the service is proportional to what is paid, and those who cannot pay are deprived of these health services. Add to this the concentration of the attention of those in charge of providing healthcare from capitalist states and institutions, on healthcare, health services, and the pharmaceutical industry that generate material gain and massive profits from what is not necessarily related to preserving life, but rather to the individual luxury of the rich and wealthy countries. Meanwhile, people in poorer countries of the world, where diseases and epidemics spread, are left without any attention, especially regarding

scientific research related to the pharmaceutical industry to treat these diseases; because no material profit is realized from that to satisfy the greed of the capitalists.

The Poor Healthcare Stems From the Poor Capitalist Civilization That Dominates the World

The capitalist system has a massive negative impact on mental, physical, and societal health due to the corruption of its ideology, which separates religion from life and is based on a compromise solution. Thus, it does not solve the greatest knot of man with a correct solution that convinces the mind and agrees with human nature (Fitrah). It unleashes freedoms, is devoid of spiritual, moral, and human values, and focuses on material value. This inevitably leads to the emergence of spiritual emptiness and psychological turmoil, and the spread of general mental illnesses such as depression, loneliness, panic, introversion, and anxiety. Deep psychological afflictions that lead to dysfunction, psychosis, and suicidal tendencies also spread.

Likewise, the failure of capitalism to solve the economic problem has led to the spread of usury (Riba), monopoly, obscene wealth, extreme poverty, the maldistribution of wealth, the stagnation of funds, the maximization of virtual money, invalid financial companies, and unemployment. This resulted in the disruption of human life and the stripping of people of their most basic rights in living. Fraud, theft, manipulation, and deceit multiplied in the types of industries whose goods relate to human life, such as food, medicine, and water; thus, hunger, malnutrition and its diseases, obesity and its afflictions, and industrial waste and its byproducts spread.

Generally, healthcare in the world, with all its facilities and medical treatment with its branches and dimensions, have fallen below the level of healthcare befitting human beings. Even in the West, where health aspects are not devoid of some elevation and

progress in their civil and technological fields, this is almost entirely confined to material gain, whether in scientific studies and research on which massive funds are spent, or in the fields of health insurance systems and its companies, and companies manufacturing medicines and medical equipment. The issue of healthcare, in the shadow of the obscenity of capitalism, has become one of the greatest sources of profit-making, rivaling oil, weapons, and information technology companies. The corruption of healthcare in the capitalist world is highlighted by what the former Minister of Health in Peru, Patricia Garcia, stated on November 27, 2019, in the famous medical journal *The Lancet*, under the title: “Corruption in global health: the open secret,” where she said: “Corruption is embedded in health systems. Throughout my life—as a researcher, public health worker, and a Minister of Health—I have been able to see entrenched dishonesty and fraud. ... In this Lecture, I outline the magnitude of the problem of corruption, how it started, and what is happening now. I also outline people’s fears around the topic, what is needed to address corruption ... corruption in global health must no longer be an open secret. ... corruption is the biggest threat for the future of health globally.”

The former minister, who was elected as a member of the National Academy of Medicine in the United States of America in 2016, touched upon many aspects of corruption in the healthcare system, of which we mention the following:

- Paying funds to healthcare cadres to attend training courses for those who do not need the training; they are selected solely to receive incentives.
- More than two-thirds of countries are considered endemically corrupt according to Transparency International.
- Corruption affects the poor and the most vulnerable. Corruption in the health sector is more dangerous than in any other sector; because it is lethal in every sense of the word.

- Estimates indicate that corruption, every year, claims the lives of no less than 140,000 children, increases antimicrobial resistance, and undermines all our efforts to control infectious and non-communicable diseases; thus, corruption is an ignored pandemic.
- Estimates indicate that the world spends more than 7 trillion US dollars on health services, and that no less than 10-25% of global spending is lost directly through corruption, which represents hundreds of billions of dollars lost every year.
- Corruption in healthcare appears at various points in the system: in the provision of services by medical staff and other health professions, in the procurement, distribution, and use of medicines and equipment supplies, in the regulation of product and service quality, in the employment of human resources, and in the construction of facilities.

The researcher minister, who received her higher education in the United States of America, says in the context of her discussion about corruption in health systems: it prevails in societies with less adherence to the law, lack of transparency, and fewer accountability mechanisms; but she completely overlooks the real reason that allows this multifaceted corruption, which is the capitalist system and the failure of its states to undertake the responsibility of the state, leaving healthcare in the hands of greedy private institutions.

Manifestations of the Degradation of Health Aspects in the World

The manifestations of capitalist corruption on individual healthcare and its disastrous effects on collective health are almost innumerable; however, they can be summarized to understand the reality of this care and its collapse to the lowest depths:

- There are multiple aspects to the relationship between capitalism and mental and psychological illnesses, which have doubled since the spread of capitalism and liberalism. A 2017

study by the Institute for Health Metrics and Evaluation estimated that 792 million people live with a mental health disorder, which is slightly more than one in ten people globally, 10.7%, mostly anxiety and depressive disorders.

- Individualism is the trait upon which the capitalist society model is based; where the appreciation of individual effort, self-reliance, independence, and the incentive of competition represent the set of distinguishing marks of this system from a societal perspective. This view of the individual leads to dire consequences such as loneliness, which leads to drinking alcohol and drugs. It also weakens social bonds and exacerbates consumerism, through which capitalism manipulates minds to reinforce a constant psychological need for it.

- Capitalism works to manufacture things that generate profit, no matter how trivial, while ignoring the provision of necessary things for individuals living in poverty. This lifestyle destroys mental and psychological health. This is in addition to the absence of the concept of the Hereafter, accountability, punishment, Paradise, Hellfire, and the *Riḍwānu* Allah ﷻ (seeking the pleasure of Allah) as supreme ideals that man strives for, preoccupying himself with achieving them and filling his life with contentment and tranquility.

- The negative consequences of the capitalist lifestyle on human health are disastrous. For example, the freedom to practice fornication, especially among teenagers, and the spread of short and fleeting sexual relationships have led to an increase in the number of so-called single mothers. The percentage of births to unmarried women rose to 41% in 2010 from 5% in 1960. In the United Kingdom, approximately one in four children lives in a single-mother or single-father family, and this usually results in financial difficulties and a deterioration in physical and mental health. A study conducted in 27 European countries found that single parents (who have illegitimate children) suffer from poor health conditions, represented by chronic stress, feelings of

loneliness, and depression. This suffering also afflicts the children of single mothers.

- A 2016 report by the Centers for Disease Control and Prevention monitored the existence of 1.2 million HIV infections and more than 700,000 deaths from AIDS in the United States. The center announced the diagnosis of 34,800 people infected with AIDS in the United States in 2019, of which 66% were the result of sexual relations between men.

- As for the consequences of consuming alcoholic beverages in the capitalist world, they are devastating to health and spending. According to the US National Survey, 85% of those aged eighteen and older consume alcohol, and 88,000 people die annually in the United States in alcohol-related cases. The World Health Organization stated that more than three million people who consume alcohol died in 2012 for reasons ranging from cancer to violence. The harms of alcohol include heart problems and several types of inflammations and cancers. A report (issued by the Centre for Social Justice in London in 2013) described it as having become the capital of alcohol and drug addiction in Europe, pointing out that addiction costs Britain more than 55 billion dollars annually.

- As for suicide, the World Health Organization says in a 2019 report that approximately 800,000 people die each year by suicide, and that there is a suicide every 40 seconds, which will rise in 2020 to a suicide every 20 seconds. Suicide was recorded as the second leading cause of death among those aged 15 to 29 globally in 2016. However, the global organization considers it a public health problem that has not been adequately addressed due to a lack of awareness about suicide. It fails to realize that the root of the problem lies in the creed of separating religion from life and the freedoms whose effects appear in the Western lifestyle; such that people are controlled by their instincts and whims, satisfying them either wrongfully or aberrantly. The focus on individualism and the self is the basis of all psychological

problems because it makes the individual's primary concern attaining the greatest share of worldly pleasures. Thus, a person is shocked when striving and panting after a mirage they cannot achieve; falling into a psychological or emotional conflict that leads them to turmoil and the misery of life, and the desire to put an end to it.

A research paper for the British Journal of Psychiatry states that about 7% of children attempted suicide before reaching the age of 17, and it also reveals that approximately one in four people engaged in self-harm. Changing attitudes towards marriage and family relations have led to the spread of loneliness and the demise of the family. Living alone has many negative effects on human health, as it exposes the individual to the risk of depression by up to 80% compared to people living in families, and social isolation is linked to a high mortality rate among the elderly; thus, the feeling of loneliness is the hidden killer for them.

- As for the devastating effects of capitalism and its corrupt systems on public and collective health, whether in the countries of its world described as developed or in other countries of the world described as developing or poor, they are too many to count, and we will touch upon some of their aspects:

Regarding food and nutrition, current estimates indicate that nearly 690 million people in the world suffer from hunger, which is equivalent to 8.9 percent of the world's population. In 2019, nearly 750 million people were exposed to severe levels of food insecurity, and an estimated two billion people did not have regular access to safe, nutritious, and sufficient food. More than 3 billion people in the world cannot afford healthy diets with adequate nutritional value, and most of them live in Asia and Africa. These numbers have a direct impact on health, especially when growth is taken as a measure of health.

The cause of hunger in the world is not the insufficiency of global food production, but rather the maldistribution of food, and

the maldistribution of the resources necessary to produce food. In the latest report issued by the British charity Oxfam, approximately 11 people die every minute likely due to hunger and malnutrition. Gabriela Bucher - the Executive Director of Oxfam - says that the Coronavirus pandemic has revealed the deep inequality in our world; the wealth of the 10 richest people in the world increased by 413 billion dollars last year (2020), which exceeds by 11 times the stated need of the United Nations to fully fund its global humanitarian assistance.

As for what relates to clean water, it is linked to health because it is used for drinking, food, domestic use, and multiple vital purposes. It is estimated that 801,000 children under the age of five die from diarrhea every year, most of them in developing countries. Unsafe drinking water, lack of sufficient water for hygiene, and lack of access to sanitation together contribute to about 88% of deaths caused by diarrheal diseases.

Worldwide, soil-transmitted intestinal worms infect more than a billion people due to a lack of adequate sanitation. Likewise, Trachoma is the leading cause of blindness in the world and results from poor hygiene and sanitation. Nearly 41 million people suffer from active Trachoma, and about 10 million people suffer from visual impairment or irreversible blindness as a result of Trachoma, even though Trachoma infection can be prevented through increased facial cleanliness with soap and clean water, and improved sanitation.

Globally, at least two billion people used drinking water sources contaminated with feces. Up until 2017, 2 billion people still lacked basic sanitation, 70% of whom live in rural areas, and a third of them live in the least developed countries. 673 million people practiced open defecation, increasingly concentrated in Africa and Asia, and 3 billion people lacked basic facilities for washing hands with soap and water at home. In 2017, in the least developed countries, 22% of healthcare facilities had no water

service, 21% of them had no sanitation service, and 22% of them had no waste management service.

The current global political system is built on the nation-state model, and the global liberal capitalist economy prevails. This structure is unsuitable for solving global problems, including global health problems; because the idea of the capitalist economic system is that every individual, group, or nation participates in fierce, cutthroat competition to achieve their own self-interest.

Today, in the United Kingdom, the richest 1% own 12% of the wealth, and the richest 10% own 44% of the wealth. In the United States, the richest 1% own 34% of the wealth, and the richest 10% own 74% of the wealth, and this disparity in growth continues year after year. It is important to understand that this massive disparity is systematically driven by the capitalist economic framework, and it is maintained and protected by the benefiting elite and the wealthy. As a result, the vast majority of the population in capitalist economies cannot afford good health and well-being, as their financial capabilities place them at a disadvantage regarding all the determinants associated with healthcare, such as food, clean water, education, mental health, and the environment... Furthermore, corporate power has driven a culture of consumption that has produced unhealthy lifestyles and poor choices, along with a lack of exercise and recreational drug use; which has led to public health problems in the developed world.

The Corruption of the Most Important Elements Affecting Healthcare

In the shadow of capitalism, corruption has appeared in almost all aspects of healthcare: in the health insurance system and its companies, in pharmaceutical companies and their research, in intellectual property and patents, and in the

exploitation of this health system to achieve profit and material benefit. Although capitalism has invented patches to cover up its shortcomings, healthcare has reached its current state of poor quality and fraud; such that a pandemic like COVID-19 revealed the extent of the fragility of this care and shook its foundations to the point of collapse, and indeed, healthcare collapsed in several countries in the world. In the following paragraphs, we will address the most important corrupt matters that have afflicted the health system under capitalism:

Health insurance is a means to cover healthcare costs. It is either through governments that provide it to their populations to ensure they benefit from health services through an insurance system at a specific cost that the citizen can pay in exchange for services proportional to what the citizen bears, within a government-funded program based on taxes; or through health insurance companies. Here, the state's abandonment of its responsibility in looking after the health affairs of the people becomes evident, because it delegates it to companies instead of undertaking healthcare itself to provide it to the poor and the rich, the weak and the strong, equally. Insurance companies usually make their contracts complex to evade paying insurance, and set conditions to hunt for loopholes and absolve themselves of obligations. In many cases, health insurance shrinks, and employers ask workers to pay more of the costs themselves.

As for pharmaceutical manufacturing companies, they are the most encroaching and controlling in healthcare. They exploit the desperate need for medicine and its need for development to treat new diseases. Added to this is what is called patents and monopoly. These characteristics give medicine a high value and make it the most profitable commodity among all legal commodities. Pharmaceutical companies give no weight to anything other than profit; they raise the price of medicine exorbitantly, and prevent others from manufacturing it and

competing with them in price under the pretext of “**patents.**” The victims, naturally, are poor individuals, or Third World countries that cannot afford to secure exorbitantly priced medicines for their populations.

A book published in 2014, entitled, “The Truth About the Drug Companies: How they deceive us and what to do about it” by Dr. Marcia Angell, an American physician who was the first woman to hold the position of editor-in-chief of the New England Journal of Medicine - the oldest prestigious medical journal - contained what exposes the tricks of pharmaceutical companies, their pressure lobbies, and their obscene profits, as they are closer to mafias that feed on the misery and diseases of patients.

Drugs are the fastest-growing part of the healthcare bill, and the prices of the most common drugs are raised routinely, sometimes several times a year. Meanwhile, research and development is considered a relatively small part of the budgets of major pharmaceutical companies and pales in comparison to their massive expenditures on marketing and administration. The prices charged by pharmaceutical companies are not due to the costs of manufacturing drugs, and they can be significantly reduced without threatening research and development. Pharmaceutical companies use the pretext that they pay a lot of expenses to develop drugs and conduct research; but the scrutinizer finds that there is absolutely no truth to what the pharmaceutical companies claim. In 2001, the **ten American pharmaceutical companies** included in the list of the wealthiest companies ranked much higher than all other American industries in average net return, and with staggering margins compared to other industries. In 2002, the combined profits of the ten pharmaceutical companies reached 35.9 billion dollars, and the pharmaceutical industry's expenditures on research and development were only 14% of sales revenues.

The pharmaceutical industry lacks prominent innovations. In recent years, it has introduced to the market only a few truly important drugs, and it relied mostly on taxpayer-funded research in academic institutions, small biotechnology companies, or the National Institutes of Health. Most drugs in America, for example, were discovered in government laboratories. In 1995, the Massachusetts Institute of Technology discovered that out of 14 promising drugs in the eyes of pharmaceutical factories in the last quarter of the previous century, there were 11 drugs discovered through government-funded work.

The American pharmaceutical industry has the freedom to determine which drugs must be developed, just as it has the freedom to price them; and it relies entirely on government-granted monopolies - in the form of patents and exclusive marketing rights approved by the US Food and Drug Administration (FDA) - and this industry uses its wealth and power to co-opt every institution that might stand in its way, including the US Congress, the Food and Drug Administration, academic medical centers, and the medical profession itself. Uniqueness and exclusivity are the lifeblood of this industry, as no other company is allowed to sell the same drug for a specific period except after the expiration of the exclusive marketing rights, at which point other versions of the same drug enter the market, and usually the price drops to less than 20 percent of what it was.

Instead of pharmaceutical companies being an engine for innovation, they are a massive marketing machine. They live on government-funded research and monopoly rights. Nevertheless, this industry occupies a fundamental role in the American healthcare system, according to Dr. Marcia Angell, who added that it is clear that the pharmaceutical industry needs radical reform. Furthermore, the reform must extend beyond the industry to include the agencies and institutions it has co-opted, including the Food and Drug Administration, the medical profession, and its educational centers.

As for intellectual property protection laws, they are a tool for monopoly and market control. The major capitalist states have imposed them on the countries and peoples of the world to prevent other nations from truly benefiting from new inventions and medicines, so that they remain consumer markets for their products. After 1980, US Congress enacted a series of laws designed to accelerate the translation of tax-supported basic research into useful new products—the most important of these laws is known as the Bayh-Dole Act, which enables universities and small businesses to obtain patents for discoveries stemming from research sponsored by the National Institutes of Health, and subsequently grant exclusive licenses to pharmaceutical companies. These laws mean that pharmaceutical companies are no longer forced to rely on their own research for new drugs. Then, US Congress issued another series of laws starting in 1984 that served as a massive windfall for the pharmaceutical industry, and these laws expanded the monopoly rights of brand-name drugs. The result is that the effective life of patents for brand-name drugs increased from about eight years in 1980 to about fourteen years in 2000, for a blockbuster product, which is usually defined as a drug with sales of more than one billion dollars annually (such as Lipitor, Celebrex, or Zoloft). These six years of additional exclusivity are considered golden for pharmaceutical companies.

With the rise in their profits during the eighties and nineties, the political power of pharmaceutical companies rose, and they became capable of changing what they did not like regarding the Food and Drug Administration, through direct lobbying or through their friends in US Congress. The total spending of American pharmaceutical companies on lobbying groups between 1997 and 2002 reached 477.6 million dollars, which is a meager amount compared to the profits they achieved, as the top ten pharmaceutical companies recorded nearly 36 billion dollars in profits in 2002 alone.

Patents and the monopoly on the sale of medicines are illegitimate conditions in the view of Islam, and they must not be adhered to. This guarantees opening the market to drug manufacturers to produce all types of medicine; thus, the price of medicine will drop significantly, and it will become affordable for everyone. Furthermore, scientific research will be stimulated, as it will not remain petrified due to the hoarding of ideas and the prevention of their circulation, or due to its focus on profitable areas while neglecting the diseases of the poor. Muslim scholars, in their numerous inventions and scientific research, used to seek the reward from Allah ﷻ and His pleasure by benefiting people. They did not focus on material value, nor on profit alone; rather, they kept before their eyes aiding the weak and treating the patient. However, the capitalist civilization has corrupted the elements of scientific research and the development of sciences, including medical sciences and the pharmaceutical industry, and delayed its pace by restricting the goals of scientific research to profit and utility. Fraud and forgery became legitimate means, and studies were designed to achieve pre-desired results, whether by manipulating the numbers of those suitable for treatment, or the drug dosages, and the type of therapeutic options and recommendations. Here are some examples of the illegitimate relationship that may bind some doctors and researchers with pharmaceutical companies:

- Dr. Sharon Levine, Associate Executive Director of The Permanente Medical Group (TPMG), said: If I were a manufacturer, and I could change one molecule and get another twenty years of patent rights, and convince doctors to prescribe the drugs and convince consumers to demand the next form of daily Prozac treatment, for example, as my patent is about to expire, why would I spend money on a less certain endeavor, which searches for completely new drugs?

- The exposure of a relationship involving the Chief Medical Officer of Memorial Sloan Kettering Cancer Center in the United States—which is considered one of the most important cancer centers globally—with several pharmaceutical companies, through which he received millions of dollars; which affected the integrity of his medical research that he published in several prestigious journals, including the New England Journal of Medicine and The Lancet.

- One study concluded that more than a third of researchers have ties in one way or another to pharmaceutical companies. The Journal of the American Medical Association (JAMA) also stated years ago that about 60% of department heads in teaching hospitals have a relationship—which may entail a conflict of interest—with pharmaceutical companies, and this was supported by another study by the same journal which concluded that about 40% of researchers had received gifts from pharmaceutical companies.

- Clare Short—the British Secretary of State for International Development—criticized pharmaceutical companies because they failed to invest in medicines that treat the diseases of the poor. The minister added that only 10% of the funds allocated for research are spent on research related to diseases that affect ninety percent of the poor in the world.

Thus, medical research was not spared from fraud due to the idea of utilitarianism in the West, which harmed scientific progress and the integrity of research. Meanwhile, Islam prohibited fraud, including the forgery of scientific research. He ﷺ said: «مَنْ غَشَّ فَلَيْسَ مِنِّي» **“Whoever cheats is not of me”** [Muslim, reported by Abu Hurairah]. Muslim also reported from Abu Hurairah from the Messenger of Allah ﷺ that he said: «وَمَنْ غَشَّنَا فَلَيْسَ مِنَّا» **“And whoever cheats us is not of us.”**

The Repercussions of Coronavirus and the Collapse of Health Systems in the World

The repercussions of the coronavirus pandemic are the best example of the sin of capitalist treatment. The capitalists and their likes treated this issue, firstly: by covering up the matter, especially by China, and delaying the warning about it. Secondly: through quarantine and partial isolation, such that millions of people became confined to their homes except for shopping and fulfilling necessary needs, along with the suspension of economic life. Thirdly: through near-total isolation in homes, where hundreds of millions of people in the world were subjected to isolation in their homes in the hope of limiting the spread of the coronavirus. It became evident that these three treatments did not solve the problem and will not solve it; rather, they added another failure to the failure of the economy. Then this disease multiplied and infected millions of humans, and millions of others died from it according to their own statistics. People suffered from boredom and weariness in the capitalist society and other societies that followed its lead in dealing with the epidemic.

The correct dealing with this disease would have been in accordance with what came in the Shariah of Allah the Exalted, which is that the state tracks the disease from its beginning, and works to contain the disease in its place of origin from the start, while healthy people in other areas continue working and producing... Thus, the infectious disease is isolated in its place, and the patients are medically quarantined, and they are followed up with care and treatment provided for free by the state as an obligation. The healthy continue their work, and life continues as it was before the infectious disease, rather than public life stopping and people being isolated in their homes, subsequently paralyzing economic life or nearly so, causing the crisis to exacerbate and other problems to appear...!

The spread of the Corona epidemic in the world revealed the depth of the falsehood upon which healthcare is based and showed the lack of state allocations for health policies. It exposed the extent of the weakness of hospital capabilities and the readiness of the health sector to accommodate the increasing numbers of patients needing intensive care and ventilators, and in providing simple preventive means such as medical protective clothing and cleaning and sterilization materials. It is no wonder that the health systems of these countries collapsed and were unable to confront the spread of this epidemic. Even the United States, which leads the countries of the world in the fields of medical technology and medical scientific research, failed miserably in confronting the Corona disease and was clearly unable to deal with it, such that it appeared as if it were a country from what they call the Third World.

As a result of this epidemiological disaster, the door was thrown wide open for health trade companies, represented by pharmaceutical and scientific research companies, to produce medicines and test them on the infected, compete in vaccine manufacturing, and open new markets for speculation, monopoly, and the exploitation of influence to achieve billions in gains along with monopolizing distribution. The current global vaccination campaign against the Corona epidemic is considered the largest in history. More than 2.5 billion doses have been used in 180 countries around the world - according to data published by Bloomberg, which is enough to fully vaccinate 16.4% of the world's population. However, the distribution was highly uneven; high-income countries were vaccinated more than 30 times faster than the lowest-income countries. Pfizer expected its annual gains to reach 26 billion dollars; as its first-quarter profits in 2021 rose by 44% compared to 2020. Similarly, Moderna expected to achieve 18.4 billion dollars, thereby obtaining billions of dollars in profits for the first time. Moderna's stock price rose by more than 700% since February

2020, while BioNTech rose by 600%; as a result, the COVID-19 pandemic created no less than 9 new billionaires after the rise in the shares of vaccine-producing companies.

The poor quality and corruption of capitalist healthcare have reached a great extent and become visible to all. People have started looking for a healthcare policy that truly achieves well-being, tranquility, mercy, and justice. The correct alternative to this savage capitalism is Islam, for it prohibits the privatization of healthcare and confines looking after the affairs to the hands of the Khaleefah (caliph). Thus, the health sector will not be plundered for the capitalists; rather, the Khilafah State sponsors it with truth and justice and provides free healthcare to those under the ruler's care as an obligation.

Islam's View of Man and Society Regarding Healthcare

Islam came with a comprehensive and complete system, organizing all human actions necessary to satisfy his instincts and organic needs, a correct satisfaction that agrees with human nature (Fitrah), and aligns with what the Islamic society must be. It warned against violating this system because that leads to corruption. It was narrated from Ibn Umar (ra) from the Messenger of Allah ﷺ that he said, «يَا مَعْشَرَ الْمُهَاجِرِينَ، خَمْسَ إِذَا ابْتَلَيْتُمْ، بِهِنَّ وَأَعُوذُ بِاللَّهِ أَنْ تُدْرِكُوهُنَّ؛ لَمْ تَظْهَرِ الْفَاحِشَةُ فِي قَوْمٍ قَطُّ حَتَّى يُعْلِنُوا بِهَا إِلَّا فُشَا فِيهِمُ الطَّاعُونَ وَالْأَوْجَاعُ الَّتِي لَمْ تَكُنْ مَضَتْ فِي أَسْلَافِهِمُ الَّذِينَ مَضَوْا، وَلَمْ يَنْقُصُوا الْمِكْيَالَ وَالْمِيزَانَ إِلَّا أَخَذُوا بِالسِّنِينَ وَشِدَّةِ الْمُؤُونَةِ وَجَوْرِ السُّلْطَانِ عَلَيْهِمْ، وَلَمْ يَمْنَعُوا زَكَاةَ أَمْوَالِهِمْ إِلَّا مَنَعُوا الْقَطْرَ مِنَ السَّمَاءِ، وَلَوْلَا الْبَهَائِمُ لَمْ يُمْطَرُوا، وَلَمْ يَنْقُصُوا عَهْدَ اللَّهِ وَعَهْدَ رَسُولِهِ إِلَّا سَلَّطَ اللَّهُ عَلَيْهِمْ عَدُوًّا مِنْ غَيْرِهِمْ فَأَخَذُوا بِغَضِّ مَا فِي أَيْدِيهِمْ، وَمَا لَمْ تَحْكُمُ O Muhajirun، أَيْمَنْتُمْ بِكِتَابِ اللَّهِ وَيَتَخَيَّرُوا مِمَّا أَنْزَلَ اللَّهُ إِلَّا جَعَلَ اللَّهُ بِأَسْهُمِهِمْ بَيْنَهُمْ»

there are five things with which you will be tested, and I seek refuge with Allah lest you live to see them: Immorality never appears among a people to such an extent that they commit it openly, but plagues and diseases that were never known among the predecessors will spread among them. They do not cheat in weights and measures but they will be stricken with famine, severe calamity, and the oppression of their rulers. They do not withhold the Zakah of their wealth, but rain will be withheld from the sky, and were it not for the animals, no rain would fall on them. They do not break their covenant with Allah and His Messenger, but Allah will enable their enemies to overpower them and take some of what is in their hands. Unless their leaders rule according to the Book of Allah and seek all good from that which Allah has revealed, Allah will cause them to fight one another.” [Reported by Ibn Majah in his Sunan and Al-Hakim in his Mustadrak, who said: “Sahih Isnad”]. Among the fields that Islam organized and cared for are healthcare and medical treatment, as they are among the public interests and facilities that people cannot do

without. He ﷺ said, «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرِّهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوتٌ يَوْمَهُ فَكَأَنَّمَا جِزَتْ لَهُ الدُّنْيَا» **“Whoever among you wakes up secure in his dwelling, healthy in his body, and he has his food for the day, it is as if he were given the entire world.”** [Reported by At-Tirmidhi who said: “This is a Hasan Gharib Hadith”]. Islam made the preservation of human life, the mind, the human species, human dignity, and security among the fixed supreme objectives for maintaining society:

To achieve the **preservation of life**, Islam prohibited killing and attacking life without right, and enacted Qisas (retribution). Allah ﷻ said,

﴿وَلَكُمْ فِي الْقِصَاصِ حَيَوةٌ﴾

“And there is for you in legal retribution saving of life” [Al-Baqarah: 179]. And he ﷺ said, «إِنَّ اللَّهَ يُعَذِّبُ الَّذِينَ يُعَذِّبُونَ النَّاسَ فِي الدُّنْيَا» **“Indeed, Allah will torment those who torment people in this world.”** [Reported by Muslim]. It also permitted for man some of what was forbidden to him to save his life from perishing. Allah ﷻ said,

﴿فَمَنْ أَضْطُرَّ غَيْرَ بَاغٍ وَلَا عَادٍ فَلَا إِثْمَ عَلَيْهِ﴾

“But whoever is forced by necessity, neither desiring it nor transgressing its limit, there is no sin upon him” [Al-Baqarah: 173]. Allah ﷻ also gave man the right to fight to defend his life. He ﷺ said, «وَمَنْ قُتِلَ دُونَ دَمِهِ فَهُوَ شَهِيدٌ» **“And whoever is killed protecting his blood life, he is a martyr.”** [Reported by At-Tirmidhi who said, “A Hasan Sahih Hadith”].

To **preserve the mind**, Islam elevated the mind to its prestigious status that befits it, making it the basis of legal accountability (Takleef). It urged its use, demanding contemplation and reflection to reach the correct Aqeedah (creed) that one is convinced of, and demanded from it Ijtihad to reach the Shariah ruling. Islam elevated the status of ulema (scholars); Allah ﷻ said,

﴿قُلْ هَلْ يَسْتَوِي الَّذِينَ يَعْلَمُونَ وَالَّذِينَ لَا يَعْلَمُونَ﴾

“Say, ‘Are those who know equal to those who do not know?’” [Az-Zumar: 9]. It prohibited everything that would affect the functioning of the mind, such as drinking alcohol, taking intoxicants, and practicing beguiling illusion, and legislated punishments for those who consume such materials, in order to preserve minds.

To preserve the **human species**, Islam recommended (Mandub) the multiplication of offspring, thus it urged marrying the affectionate and prolific woman, and prohibited castration. It preserved lineage, thus it prohibited Zina (fornication and adultery) and established a deterrent punishment for it. It made financial support (Nafaqah) an obligation upon the father for his child, and urged the righteous upbringing of children, especially daughters, as they are a fundamental pillar in building the family and raising children. It was narrated from Abu Hurairah (ra) that the Messenger ﷺ said, «مَنْ كُنَّ لَهُ ثَلَاثُ بَنَاتٍ فَصَبَرَ عَلَى لَأْوَانِهِنَّ وَضَرَّائِهِنَّ أَدْخَلَهُ اللَّهُ الْجَنَّةَ بِرَحْمَتِهِ إِيَّاهُنَّ» “Whoever has three daughters and is patient with their hardships and difficulties, Allah will admit him to Paradise by His mercy towards them.” He said: A man asked, “And two daughters, O Messenger of Allah?” He said, «وَأِنْ ابْنَتَانِ» “And even two daughters.” A man asked, “O Messenger of Allah, and one?” He said, «وَوَاحِدَةٌ» “And one” [Reported by Al-Hakim in his Mustadrak, who said, “A Hadith with a Sahih Isnad”].

Islam preserved **human dignity**, for Allah ﷻ honored man since his creation when He ﷻ asked the angels to prostrate to Adam (as). Allah ﷻ said,

﴿وَلَقَدْ كَرَّمْنَا بَنِي آدَمَ وَحَمَلْنَاهُمْ فِي الْوُجُوهِ وَرَزَقْنَاهُمْ مِنْ طَيِّبَاتِ الْفُلُوحِ وَفَضَّلْنَاهُمْ عَلَى كَثِيرٍ

مِمَّنْ خَلَقْنَا تَفْضِيلًا﴾

“And We have certainly honored the children of Adam and carried them on the land and sea and provided for them of the good things and preferred them over much of what We have created,

with definite preference” [Al-Isra: 70]. And Allah ﷻ made subject to man much of what He created. Allah ﷻ said,

﴿الَمْ تَرَوْا أَنَّ اللَّهَ سَخَّرَ لَكُمْ مَّا فِي السَّمٰوٰتِ وَمَا فِي الْأَرْضِ﴾

“Do you not see that Allah has made subject to you whatever is in the heavens and whatever is in the earth” [Luqman: 20]. Then Islam affirmed this when it prohibited striking a person without right, and warned of a curse upon whoever strikes a person unjustly. It prohibited moral harm to a person, thus it prohibited mocking him, backbiting him, and prohibited defamation, fault-finding, and calling each other by offensive nicknames. It legislated the Hadd (prescribed punishment) of eighty lashes for those who falsely accuse chaste women of Zina, and legislated Ta’zir (discretionary) punishments for those who attack people’s dignity or bear false witness against them. Islam did not stop at protecting human dignity during his life, but guaranteed him respect after his death. Thus, it legislated washing him, shrouding him, and burying him, and forbade violating his corpse. From Aisha, from the Prophet ﷺ, he said, «كَسْرُ عَظْمِ الْمَيِّتِ كَكْسَرِهِ حَيًّا» “Breaking a dead man’s bone is like breaking it when he is alive,” [Reported by Ibn Hibban in his Sahih].

The preservation of security in Islam is among the general basic rights. Islam legislated the Hadd of Hirabah (highway robbery and banditry) for those who breach security, block roads, attack wealth or lives, and terrify people. Allah ﷻ said,

﴿إِنَّمَا جَزَاؤُا الَّذِيْنَ يُحَارِبُونَ اللَّهَ وَرَسُوْلَهُ وَيَسْعَوْنَ فِي الْأَرْضِ فَسَادًا أَنْ يُقَتَّلُوْا أَوْ يُصَلَّبُوْا أَوْ

تُقَطَّعَ أَيْدِيْهِمْ وَأَرْجُلُهُمْ مِّنْ خِلَافٍ أَوْ يُنْفَوْا مِّنَ الْأَرْضِ﴾

“Indeed, the penalty for those who wage war against Allah and His Messenger and strive upon earth [to cause] corruption is none but that they be killed or crucified or that their hands and feet be cut off from opposite sides or that they be exiled from the land...” [Al-Ma’idah: 33]. It legislated deterrent Ta’zir punishments for those who breach security through seditions

(Fitan) or terrifying rumors. Providing security and safety for those under the ruler's care is one of the primary duties of the state. Indeed, it is stipulated for the Abode of Islam (Dar al-Islam) that it must be capable of maintaining its security with its own forces; for this reason, when the Messenger of Allah ﷺ informed the Muslims about the abode of their Hijrah (migration), he mentioned security first and foremost. He ﷺ said to his companions in Makkah, as reported by Ibn Ishaq in his Seerah, «إِنَّ اللَّهَ عَزَّ وَجَلَّ جَعَلَ لَكُمْ إِخْوَانًا وَدَارًا تَأْمُنُونَ بِهَا» **“Indeed, Allah ﷻ and Majestic has made for you brothers and an abode in which you will be secure.”** And when the Ansar received the Messenger of Allah ﷺ and his companion Abu Bakr (ra), they said to them, as reported by Ahmad with a Sahih Isnad from Anas, «فَاسْتَقْبَلَهُمَا رُهَاءُ خُمْسِمَائَةٍ مِنَ الْأَنْصَارِ حَتَّى انْتَهَوْا إِلَيْهِمَا. فَقَالَتِ الْأَنْصَارُ انْطَلِقَا آمِنَيْنِ مُطَاعَيْنِ» **“About five hundred of the Ansar received them until they reached them. The Ansar said, ‘Proceed, secure and obeyed.’”**

By implementing Islam, the atmosphere that led to the emergence of the blights of the corrupt capitalist ideology, its turmoil, and its repercussions—such as the loss of health, physical, and mental well-being—will disappear. This is because Islam contains no suppression of the religious instinct; rather, it entails reliance and dependence on Allah ﷻ in all actions. Nor does it give free rein to instincts, organic needs, and freedoms; rather, it provides an organized satisfaction restricted by Shariah rulings, with deterrent and expiatory punishments for whoever violates these rulings. It is a precise organization from the Creator, the Disposer of human life and their interactions as individuals, groups, and a state; thus, the hardships of living, such as destitution, poverty, depression, suicide, Zina, and broken families, will vanish from the manifestations of life... The values brought by Islam—which are spiritual, moral, and human values—are elevated alongside material values; selfish individualism disappears from society, and man lives reassured by the Riḍwānu Allāh (pleasure of Allah), knowing that he is

observed and will be held accountable on the Day of Resurrection. Thus, Taqwa (piety) and the fear of Allah ﷻ become the deterrent against vice, obscenity, and evil. The Muslim knows that whatever disease afflicts him after that, Allah has made a medicine for it, so he is keen on treating the illness and searching for the appropriate medicine. The state works to look after the health of the people, advancing with the best of what science has reached and rising above all other nations. It is enough to know that hospitals under the Islamic State did not ask the patient for any money in exchange for medical services, and no hospital was ever devoid of medicines or medical supplies. Moreover, the hospital had a university attached to it to train doctors and provide for their needs regarding housing, clothing, food, and travel. Western countries used to send their sons to learn medicine at the hands of expert doctors in the Islamic State, and the state used to honor doctors and teachers for the important role they played in looking after the health affairs of the people. All of this was because Islam made health and medical treatment among the basic needs that the Islamic State must provide to its subjects as free healthcare provided by the state as an obligation, acting upon the saying of the Messenger ﷺ, «الإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ», **“The Imam is a guardian and he is responsible for those under his care,”** [Reported by Bukhari from Abdullah ibn Umar].

Health and Healthcare in the View of Islam

Health in the View of Islam

Health (As-Sihhah) linguistically is the opposite of sickness (As-Suqm); it is the departure of disease, and it is also the freedom from every defect and doubt. Health in the body is a natural state with which its functions run their natural course. In modern terminology, the concept of health has expanded. After health was viewed as a state of natural functions that could be disrupted from time to time due to disease, health has recently come to be defined as a state of physical, mental, and social well-being, and not merely the absence of disease or infirmity. Accordingly, good or bad health is a continuously active state, and the absence of disease or infirmity is neither sufficient nor necessary to describe a health condition as good.

Islam has viewed health with utmost importance and considered health a great blessing regarding which many people are deceived (lose out). Bukhari reported in his Sahih from Ibn Abbas that the Messenger of Allah ﷺ said, «نِعْمَتَانِ مَغْبُونٌ فِيهِمَا كَثِيرٌ مِنَ النَّاسِ؛ الصِّحَّةُ وَالْفَرَاغُ» **“There are two blessings which many people lose: health and free time,”** meaning the health and strength of the body and mind, and free time; meaning a person’s freedom from the preoccupations of living and the worries of life. In the Hadith is an encouragement to utilize blessings such as health, free time, and others. He ﷺ also urged the believers to seize health before it departs, saying, «اغْتَنِمْ خَمْسًا قَبْلَ خَمْسٍ: شَبَابَكَ قَبْلَ هَرَمِكَ، وَصِحَّتَكَ قَبْلَ سَقَمِكَ، وَغِنَاءَكَ قَبْلَ فَقْرِكَ، وَفَرَاغَكَ قَبْلَ شُغْلِكَ، وَحَيَاتَكَ قَبْلَ مَوْتِكَ» **“Seize five before five: your youth before your old age, your health before your sickness, your wealth before your poverty, your free time before your preoccupation, and your life before your death.”** [Reported by Al-Hakim in Al-Mustadrak, who said, “This is a Sahih Hadith according to the conditions of the two Sheikhs (Bukhari and Muslim)”]. The Messenger ﷺ also urged the believers to ask Allah

ﷺ for well-being (Al-Mu'afah), and made it the best of things after certainty (Al-Yaqeen) in belief. The Messenger of Allah ﷺ said in what Ibn Hibban reported in his Sahih, «سَلُّوا اللَّهَ الْمُعَافَاةَ، فَإِنَّهُ لَمْ يُعْطَ أَحَدٌ» **“Ask Allah for well-being, for no one has been given anything better after certainty than well-being.”** Well-being includes the safety of the Deen from trials and the safety of the body from illnesses and hardships. And he ﷺ said, «لَا بَأْسَ بِالْغِنَى لِمَنْ اتَّقَى، وَالصِّحَّةُ لِمَنْ اتَّقَى خَيْرٌ مِنَ الْغِنَى وَطَيِّبُ النَّفْسِ مِنَ النَّعِيمِ» **“There is no harm in wealth for one who has Taqwa (piety), but health for one who has Taqwa is better than wealth, and a cheerful spirit is a blessing.”** [Reported by Al-Hakim in his Mustadrak, who said, “This is a Madani Hadith with a Sahih Isnad”]. The Messenger of Allah ﷺ used to frequently seek refuge from evil diseases. Abu Dawud reported from Anas bin Malik (ra) that the Prophet ﷺ said, «اللَّهُمَّ، إِنِّي أَعُوذُ بِكَ مِنَ الْبَرَصِ، وَالْجُنُونِ، وَالْجُدَامِ، وَسَيِّئِ الْأَسْقَامِ» **“O Allah, I seek refuge in You from vitiligo, madness, leprosy, and evil diseases.”** [Reported by Ibn Hibban in his Sahih]. Furthermore, the blessing of health, like all other blessings, is something a person will be asked about on the Day of Resurrection, and in this is an affirmation of its importance. The Messenger of Allah ﷺ said, «إِنَّ أَوَّلَ مَا يُحَاسَبُ بِهِ الْعَبْدُ يَوْمَ الْقِيَامَةِ أَنْ يُقَالَ لَهُ: أَلَمْ أَصِحِّ لَكَ جِسْمَكَ وَأَرَوْكَ مِنَ الْمَاءِ الْبَارِدِ» **“The first thing a servant will be held accountable for on the Day of Resurrection is that it will be said to him: ‘Did We not make your body healthy and quench your thirst with cold water?’”** [Reported by Al-Hakim, who said, “A Hadith with a Sahih Isnad”].

Healthcare in Islam

As for healthcare, it is undertaking the health of those under the ruler's care by monitoring it, preserving it, and managing its affairs in a manner that leads to physical well-being and mental soundness. It includes the prevention of diseases before they occur, and monitoring and treating them if they do occur, whether at the individual or societal level. Healthcare is viewed practically as an effective and continuous care that realizes the vision of what the individual and society must be in Islam, by satisfying the individual's need to enjoy physical and mental health and enabling him to perform his Shariah obligations. It also realizes what the Islamic society and the Islamic state must be in terms of advancement in inventing the latest styles and means, and the best of what science and scientific research have reached in achieving this care, and achieving readiness to carry the message of Islam to humanity through Dawah and Jihad. The Shariah has made healthcare the direct responsibility of the state and the Khaleefah. He ﷺ said, «الْإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care,”** [Reported by Bukhari]. Thus, health is among the basic needs of those under the ruler's care, like food and security; as the Messenger ﷺ said, «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرْبِهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوتٌ يَوْمَهُ فَكَأَنَّمَا جِيزَتْ لَهُ الدُّنْيَا» **“Whoever among you wakes up secure in his dwelling, healthy in his body, and he has his food for the day, it is as if he were given the entire world.”** [Reported by At-Tirmidhi who said, “This is a Hasan Gharib Hadith,” and reported by Ibn Hibban in his Sahih]. General and specific evidences have been reported in the Shariah indicating that healthcare is an obligation upon the state.

As for the general evidences:

Health and medical treatment are among the duties that the state must provide for those under its care, since clinics and hospitals are facilities that Muslims utilize for healing and medical treatment; thus, medicine, in this respect, has become

part of public interests and facilities. The state must undertake public interests and facilities because they are among the matters it is obliged to look after, acting upon the saying of the Messenger ﷺ, «الإِمَامُ رَاعٍ وَمَسْنُونٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care”** [Reported by Bukhari from Abdullah ibn Umar (ra)]. Furthermore, the failure to provide healthcare to those under the ruler’s care leads to harm, and the removal of harm is an obligation upon the state. He ﷺ said, لَا «ضَرَرَ وَلَا ضِرَارَ، مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» **“There should be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him”** [Reported by Al-Hakim in Al-Mustadrak, who said, “A Hadith with a Sahih Isnad according to the conditions of Muslim”]. From this aspect as well, healthcare is an obligation upon the state.

As for the specific evidences for the obligation:

- Muslim reported through Jabir who said, «بَعَثَ رَسُولُ اللَّهِ ﷺ إِلَى أَبِي بِنِ كَعْبٍ طَبِيباً فَقَطَعَ مِنْهُ عِرْقاً ثُمَّ كَوَاهُ عَلَيْهِ» **“The Messenger of Allah ﷺ sent a doctor to Ubayy bin Ka'b, who cut a vein from him and then cauterized it.”** Al-Hakim reported in Al-Mustadrak from Zayd bin Aslam from his father who said: "I fell severely ill during the time of Umar bin Al-Khattab, so Umar called a doctor for me, and he put me on such a strict diet that I used to suck on date pits out of the severity of the diet." Thus, the Messenger ﷺ, in his capacity as a ruler, sent a doctor to Ubayy (ra), and Umar (ra), the second Rightly Guided Khaleefah, called a doctor for Aslam (ra) to treat him. This indicates that health and medical treatment are among the basic needs of those under the ruler's care, which the state must provide as free healthcare provided by the state as an obligation to whoever needs it among those under its care.

- Bukhari reported in Al-Adab Al-Mufrad and At-Tarikh Al-Saghir from Mahmud bin Labid who said: When the medial arm vein (Akhal) of Sa'd was injured on the Day of the Trench and he became heavy (severely ill), they moved him to a woman

called Rufaydah, and she used to treat the wounded. So the Prophet ﷺ, whenever he passed by him, would say, «كَيْفَ أَمْسَيْتَ؟» **“How are you this evening? And when morning came: How are you this morning?”** and he would inform him. His transfer (ra) was by an order from him ﷺ. Ibn Ishaq mentioned in the story of Sa'd bin Mu'adh (ra) when the arrow struck him at the Trench, that the Messenger ﷺ said, «اجْعَلُوهُ فِي خِيْمَةٍ» **“Put him in the tent of Rufaydah so that I may visit him from close by.”** This Rufaydah was a woman from the tribe of Aslam who used to treat the wounded and dedicate herself to serving the lost, that is, the destitute due to poverty, dependents, or a condition that fell short of managing them, and those who had no one among the Muslims, as mentioned by Ibn Ishaq in the Seerah and Al-Waqidi in Al-Maghazi. Imam Muslim reported this incident briefly from Aisha (ra) who said, «أَصِيبَ سَعْدٌ يَوْمَ الْخَنْدَقِ، رَمَاهُ رَجُلٌ مِنْ قُرَيْشٍ يُقَالُ لَهُ ابْنُ الْعُرْقَةِ، رَمَاهُ فِي الْأُكْحَلِ، فَضَرَبَ عَلَيْهِ رَسُولُ اللَّهِ ﷺ خِيْمَةً فِي الْمَسْجِدِ يَعُوْدُهُ مِنْ قَرِيبٍ» **“Sa'd was injured on the Day of the Trench. A man from Quraysh called Ibn Al-Ariqah shot him, striking him in the medial arm vein. So, the Messenger of Allah ﷺ pitched a tent for him in the masjid to visit him from close by.”** This indicates that the tent was built by his ﷺ order, and it was in the masjid, meaning in a public place, so it served as a public hospital. His ﷺ saying, «اجْعَلُوهُ» **“Put him”** in the previous narration of Ibn Ishaq is evidence that he was looking after the affairs in his capacity as the head of state and the actual commander of the army. Although Sa'd (ra) was a member of the army, the hospital was not exclusive to the army. Instead, it was general for anyone in need among the Muslims, as stated in the narration of Ibn Ishaq.

Thus Rufaydah was named Ku'aybah by Ibn Sa'd, as Bukhari stated in Al-Adab Al-Mufrad. The important point is that she was the director of the state hospital, which consisted of a single tent pitched by the order of the head of state in the masjid. The Hadith indicates that the hospital director did not take a wage from the patients; rather, she dedicated herself to those in need among the Muslims, meaning the poor Muslims. This means they

did not pay a fee for medical treatment, but rather their treatment was without charge. This free medical treatment provided by the state as an obligation was not exclusive to the poor only; because Sa'd, who was the chief of Banu 'Abd al-Ashhal, was not destitute, yet he also received medical treatment without charge. Therefore, the state must provide medical treatment for all those under the ruler's care, both the poor and the rich among them.

- In Bukhari and Muslim, from Anas bin Malik, he said: Some people from 'Ukl or 'Uraynah arrived and found the climate of Madinah unsuitable for them, فَأَمَرَهُمُ النَّبِيُّ ﷺ بِلِقَاحٍ، وَأَنْ يَشْرَبُوا مِنْ «أَبْوَالِهَا وَأَلْبَانِهَا» **“So the Prophet ﷺ ordered them to go to the milch camels and to drink their urine and milk.”** The wording here is from Bukhari, and in Muslim, he ﷺ said to them, «إِنْ شِئْتُمْ أَنْ تَخْرُجُوا إِلَى إِبِلِ الصَّدَقَةِ فَتَشْرَبُوا مِنْ أَلْبَانِهَا وَأَبْوَالِهَا فَفَعَلُوا فَصَحُّوا» **“If you wish, you may go out to the camels of Sadaqah (Zakah) and drink their milk and urine. So they did that and became healthy.”** (Fajtawaw al-Madinah - found the climate unsuitable) means they disliked staying there due to distress and a kind of sickness. Abu Ubayd, Al-Jawhari, and others said, “I found the land unsuitable (Ijtawaytu al-Balad)” if you disliked staying in it even if you were in comfort. Al-Khattabi said, “Its origin is from “Al-Jawa,” which is a disease that afflicts the abdomen,” meaning the atmosphere of Madinah did not suit them and they disliked it due to an illness that afflicted them. So the Messenger ﷺ took care to prepare a place for them to be treated in. In another narration of the Hadith in Bukhari, the Messenger ﷺ «فَأَنْزَلَهُمُ الْخَرَّةَ» **“lodged them in Al-Harrah,”** which is a land covered with black stones outside Madinah, and perhaps it was more suitable for their nature than the land of Madinah. The Messenger of Allah ﷺ permitted them to drink the milk of the camels of Sadaqah, which are from the funds of Bayt al-Mal (State Treasury). In this is an evidencing that medical treatment is among the public interests of the Muslims that are funded from Bayt al-Mal.

Foundations of Healthcare in the Khilafah State

When comparing the capitalist health corruption in the era of modern civil progress and the development of health sciences, with Islamic healthcare in the centuries that preceded the Industrial Revolution, we find that Islam, with its rational Aqeedah and its Shariah, achieved happiness and mental health in the souls of its adherents. Allah ﷻ said,

﴿يَتَأْتِيهَا النَّاسُ قَدْ جَاءَتْكُمْ مَوْعِظَةٌ مِّن رَّبِّكُمْ وَشِفَاءٌ لِّمَا فِي الصُّدُورِ وَهُدًى وَرَحْمَةٌ

لِّلْمُؤْمِنِينَ﴾

“O mankind, there has to come to you instruction from your Lord and healing for what is in the breasts and guidance and mercy for the believers” [Yunus: 57].

And Allah ﷻ said,

﴿فَمَن أَتْبَعَ هُذًى فَلَا يَضِلُّ وَلَا يَشْقَى ۚ وَمَن أَعْرَضَ عَن ذِكْرِي فَإِنَّ لَهُ مَعِيشَةً ضَنْكًا

“And whoever follows My guidance will neither go astray in the world nor suffer. And whoever turns away from My remembrance - indeed, he will have a depressed life” [Taha: 123-124].

Here we will address the most important foundations upon which healthcare in the Khilafah State is based.

The Philosophy of Islam Is the Mixing of Matter With Spirit

Islam organizes human actions through Shariah rulings in his capacity as a creature of Allah the Glorified. That is, it mixes human actions, which are matter, with his realization of his connection to Allah the Glorified, which is the spirit. In other words, when a person performs an action, he realizes his connection to his Creator, and this is what is expressed as (mixing matter with spirit). Healthcare falls under this. Looking after the health affairs by the Imam is a Shariah ruling he undertakes while embodying his connection to Allah ﷻ, and his goal in it is the

Riḍwānu Allah ﷺ. Thus, the Khaleefah and the workers in this field exert the utmost capabilities in it, harness the utmost efforts for it, and provide whatever capabilities are necessary for it.

Islam's View on Solving Problems

Islam views the problem it solves as the problem of a human being who has organic needs and instincts that require satisfaction, whether the problem is economic, health, political, educational, or otherwise. It only takes into consideration that it is a human problem requiring a solution. For example, the patient's need for healthcare is viewed by Islam as a human problem in a society proceeding upon a specific style of living. It does not restrict its view to the health aspect nor to the economic aspect. Therefore, it calls for providing the necessary capabilities and efforts for treatment and rehabilitation, and it obligates spending on looking after the affairs of the patients and the affairs of the society so that the disease does not spread. It demands harnessing sufficient medical capabilities to overcome tribulations such as disasters, whatever the cost may be. Thus, it does not restrict its view to the health or economic aspect.

Unity of View Towards the Individuals Under the Ruler's Care When Providing Care

Islam has obligated that the view towards the individuals under the ruler's care be one. Thus, the Khilafah State does not differentiate in looking after the affairs between one person and another among those who hold citizenship. There is no consideration in care for religion, gender, race, age, or place of residence, based on the evidence of the previous Hadith of the Messenger of Allah ﷺ, «الإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ», “The Imam is a guardian and he is responsible for those under his care.” The phrase «رَعِيَّتِهِ» “those under his care” came in it evidencing generality, and no specifier has specified it, so it remains upon its generality. This is how the Islamic State was since the Messenger

of Allah ﷺ established it in Madinah until the day of its destruction at the beginning of the last century, looking after the affairs of all those under the ruler's care without consideration for anything other than them being its subjects. And this is what the upcoming Khilafah State will do soon, by the permission of Allah.

Ruling Is Centralized and Administration Is Decentralized

Ruling is the implementation of Shariah rulings, and the authority in it belongs to the one to whom the Ummah has given its authority, and he is the Khaleefah. As for administration, it is the means and methods used in implementation. It is undertaken by the Khaleefah, those he deputizes, and those he appoints from among the directors of departments and employees. Based on the division of the state into administrations, each administration undertakes the management of healthcare affairs automatically and directly without the need for routine procedures of referring back to the center. Instead, each administration assesses the needs of the people and meets them as quickly as possible, such as if an epidemic outbreak occurs in that region.

The Administration of Interests Is Based on Simplicity, Speed, and Competence

The policy of administering interests, departments, and administrations in the Khilafah State is based on simplicity in the system, speed in accomplishing tasks, and competence in those who assume the administration. The texts of the Shariah have come commanding Ihsan (excellence) in everything, and they have come commanding facilitation, forbidding making things difficult, and forbidding Al-Iqrad, which is delaying the fulfillment of people's needs, such that they neither fulfill them nor do they let them return to their homes and work. The Messenger of Allah ﷺ said, «مَنْ وَلِيَ مِنْ أَمْرِ الْمُسْلِمِينَ شَيْئاً فَأَحْتَجَبَ دُونَهُ خَلَّتْهُمْ وَحَاجَتُهُمْ وَفَقَرَهُمْ وَفَاقَتَهُمُ احْتَجَبَ اللَّهُ عَنْهُ وَجَلَّ يَوْمَ الْقِيَامَةِ دُونَهُ خَلَّتْهُ وَحَاجَتُهُ وَفَاقَتَهُ وَفَقَرَهُ» «Whoever is appointed over any affair of the Muslims and

then secludes himself away from their needs, wants, poverty, and destitution, Allah ﷻ and Majestic will seclude Himself away from his needs, destitution, wants, and poverty on the Day of Resurrection” [Reported by Al-Hakim in his Mustadrak from Abu Maryam, and he said: “A Hadith with a Sahih Isnad”]. Thus, Islam has obligated upon whoever assumes the affairs of the people to live with them and among them, to be aware of their needs, and to fulfill them with ease, facility, simplicity, and speed, and to appoint the competent among those capable of the tasks.

The State Guarantees the Basic Needs for All Those Under Its Care, and Enables Them to Achieve Their Luxurious Needs

Islam has guaranteed for every individual among those under the ruler’s care his individual basic needs, which are: food, shelter, and clothing; and his collective basic needs: security, education, and medical treatment. The individual basic needs are achieved by capable individuals through work. As for those who are unable, either in reality or by ruling, and there is no one obligated by Shariah to support them, it becomes obligatory upon the state to provide them with their basic needs, due to his ﷺ saying, «مَنْ تَرَكَ مَالاً فَلِوَرَثَتِهِ وَمَنْ تَرَكَ عَاقِبَةً فَلِإِنْتَانَا» **“Whoever leaves behind wealth, it is for his heirs, and whoever leaves behind dependents, they are our responsibility”** [Reported by Bukhari in his Sahih]. And his ﷺ saying, «مَنْ تَرَكَ مَالاً فَلِأَهْلِهِ وَمَنْ تَرَكَ دَيْنًا أَوْ ضَيَاعًا فَلَيَّيَّ وَعَلَيَّ» **“Whoever leaves behind wealth, it is for his family, and whoever leaves behind a debt or dependents, it is to me and upon me”** [Reported by Muslim in his Sahih]. The one unable in reality is the one who cannot work, and the one unable by ruling is the one who is capable of working but cannot find it. Thus, the state must secure work for him, and until he finds it, he is treated as the one unable in reality, so it secures his basic needs for him.

As for the general basic needs, the state secures them for those under its care without differentiating between them. He ﷺ said, «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرْبِهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوتٌ يَوْمِهِ فَكَأَنَّمَا حِيزَتْ لَهُ الدُّنْيَا» **“Whoever among you wakes up secure in his dwelling, healthy**

in his body, and he has his food for the day, it is as if he were given the entire world” [Reported by At-Tirmidhi who said: “This is a Hasan Gharib Hadith,” and Ibn Hibban reported it in his Sahih]. Thus, security and health well-being are two needs for all people that the state must provide, in addition to education. As for the pandemics that sweep through the people, the state must look after the health affairs of the people in a manner commensurate with the scale of these pandemics.

The View Towards the Economic Problem

Islam views the economic problem as the distribution of resources among people, and it establishes that the resources of the earth are sufficient for its inhabitants who live upon it. Allah ﷻ says about the earth:

﴿وَقَدَّرَ فِيهَا أَقْوَامًا﴾

“And determined therein its creatures’ sustenance” [Fussilat: 10], meaning the sustenance of its inhabitants. Therefore, Islam’s economic treatments focused on the distribution of wealth, not on its production. For the distribution of wealth, Islam legislated a specific system: it obligated work upon the capable, obligated the financial support (Nafaqah) of the wife and children upon the husband, and of the relative upon his inheriting relative. It established a right for the poor and needy in Zakah, established a right for those under the ruler's care in public property, and obligated the state to look after the incapable who has no one to spend on him... Thus, it guaranteed the provision of basic needs for all individuals under the ruler’s care. By doing so, Islam created the correct foundation for attaining physical and mental health well-being, contrary to what we see as a result of the implementation of capitalism, such as poverty, destitution, unemployment, hoarding of wealth, and interest (Riba); and depression, anxiety, isolation, loneliness, and family breakdown; and the motives for theft and the inability to pay debts, in addition

to malnutrition and its consequences, and the lack of decent housing that befits human health and protects him from diseases. All of these lead to poor health.

Looking After the Affairs in a State of Emergency

In states of emergency, such as floods, earthquakes, epidemics, wars, and others, the Khilafah takes special measures to continue looking after the affairs in the optimal manner. It tasks experts and competent people in every specialty to supervise this, setting mechanisms and plans so that life in society does not stop, and implementing emergency measures in the places where they occurred. Funding must be provided for emergency situations. If there are funds in the Bayt al-Mal of the Muslims, it is spent from it to cover the needs during the emergency. If there are no funds, a tax is imposed on the wealthy among the people to spend on it. If harm is feared due to the delay in waiting to collect taxes, the state borrows and spends, then repays the loan from the taxes it collects later for this purpose. The Messenger of Allah ﷺ said, «وَأَيُّمَا أَهْلٍ عَزُصَةٍ أَصْبَحَ فِيهِمْ أَمْرٌ جَائِعٌ فَقَدْ بَرَأَتْ مِنْهُمْ ذِمَّةُ اللَّهِ تَعَالَى» **“Any people of a locality among whom a person wakes up hungry, the protection of Allah the Exalted is lifted from them”** [Reported by Ahmad from Ibn Umar, and authenticated by Ahmad Shakir]. And he ﷺ said in what he narrates from his Lord, «مَا آمَنَ بِي مَنْ بَاتَ شَبَعَانُ وَجَارُهُ جَائِعٌ وَهُوَ يَعْلَمُ» **“He does not believe in Me who sleeps satiated while his neighbor is hungry and he knows it”** [Reported by Al-Bazzar from Anas with an Isnad graded Hasan by Al-Haythami and Al-Mundhiri].

The state works to prevent the occurrence of an emergency before it happens, and allocates the necessary apparatuses and specialists for this purpose; using the best of what science has reached in terms of means and methods of detection and early warning for disasters, floods, earthquakes, and epidemiological and non-epidemiological pandemics, whether for isolated incidents or general calamities. This is so that these apparatuses remain fully vigilant regarding any emergencies that can be

expected to occur, in order to avoid their occurrence, and to deal with them excellently if their occurrence cannot be prevented. This is done by providing equipment, preparations, housing, shelters, and existing and field hospitals, allocating suitable locations in advance, monitoring their readiness periodically, and developing them with the latest and most advanced means to execute the purpose for which they were established, with speed, ease, and competence; to preserve lives and properties, and to sustain the provision of basic rights for the individuals and the collective of those under the ruler's care. If the rulers implement Islam excellently, and the Ummah excellently accounts and corrects them, their affairs will stabilize, and they will overcome the most severe problems by the permission of Allah ﷻ Who says,

﴿وَلَوْ أَنَّ أَهْلَ الْقُرَىٰ ءَامَنُوا وَأَتَّقَوْا لَفَتَحْنَا عَلَيْهِم بَرَكَاتٍ مِّنَ السَّمَاءِ وَالْأَرْضِ﴾

“And if only the people of the cities had believed and feared Allah, We would have opened upon them blessings from the heaven and the earth” [Al-A'raf: 96].

Funding Healthcare in the Khilafah State

The Shariah evidences have obligated the state to fulfill the basic needs of the Ummah by providing security, medicine, and education to those under its care. The Shariah has placed the expenditure required for healthcare upon Bayt al-Mal (State Treasury). It was narrated from Abu Hurairah that he said: The Messenger of Allah ﷺ said, «مَنْ تَرَكَ مَالًا فَلِوَرَثَتِهِ وَمَنْ تَرَكَ كَلًّا فَلَيْنَا»، “Whoever leaves behind wealth, it is for his heirs, and whoever leaves behind dependents, they are our responsibility” [Reported by Bukhari in his Sahih]. And Muslim reported through Jabir who said: «بَعَثَ رَسُولُ اللَّهِ ﷺ إِلَى أَبِي بِنِ كَعْبٍ طَبِيبًا فَقَطَعَ مِنْهُ عِرْقًا ثُمَّ كَوَاهُ عَلَيْهِ» “The Messenger of Allah ﷺ sent a doctor to Ubayy bin Ka'b, who cut a vein from him and then cauterized it.” Al-Hakim reported in Al-Mustadrak from Zayd bin Aslam from his father who said, (مَرَضْتُ فِي زَمَانِ عُمَرَ بْنِ الْخَطَّابِ مَرَضًا شَدِيدًا فَدَعَا لِي عُمَرُ طَبِيبًا فَحَمَانِي حَتَّى كُنْتُ أَمُصُّ النَّوَاةَ مِنْ شِدَّةِ الْجُمُيَةِ) “I fell severely ill during the time of

Umar bin Al-Khattab, so Umar called a doctor for me, and he put me on such a strict diet that I used to suck on date pits out of the severity of the diet.” Thus, the Messenger ﷺ, in his capacity as a ruler, sent a doctor to Ubayy, and Umar (ra), the second Rightly Guided Khaleefah, called a doctor for Aslam to treat him. Both indicate that health and medical treatment are among the basic needs of those under the ruler’s care, which the state must provide as free healthcare provided by the state as an obligation to whoever needs it among those under its care.

Healthcare is funded from Bayt al-Mal. If what is in Bayt al-Mal is insufficient and there are necessary matters related to healthcare, such as building a hospital when there is no other hospital in the area to take its place, in this case, the state imposes a tax on the wealthy to spend on what is necessary for healthcare. This is because the Khaleefah must look after the interests of the Muslims by spending on what is of interest to them and providing facilities (Irfaq) for them. Facilities are what people utilize to fulfill their interests, and their absence creates harm. Removing harm is obligatory upon the Khaleefah and likewise obligatory upon the Muslims. He ﷺ said, «لَا ضَرَرَ وَلَا ضِرَارَ، مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» **“There must be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad according to the conditions of Muslim”]. Considering the harm to the Muslims that results from not providing the necessary interests and facilities without compensation to those under the ruler's care, it is obligatory upon the Khaleefah and the Muslims to provide them, since providing them is what removes the harm; thus, it becomes a Fard (obligation) upon them. What makes it a Fard upon the Khaleefah is evident in looking after the affairs. What makes it a Fard upon the Muslims and the Khaleefah is the generality of the evidences. His saying: «لَا ضَرَرَ وَلَا ضِرَارَ» **“There must be neither harming nor reciprocating harm”** is general, and likewise «مَنْ شَاقَّ» **“whoever causes hardship”** is general, so it

includes the Khaleefah and includes all Muslims. Since healthcare is among the interests and facilities that people cannot do without, it is among the necessities. The Messenger ﷺ commanded medical treatment. Abu Dawud reported in his Sunan from Usamah bin Sharik, who said: I came to the Prophet ﷺ and his Companions (ra) were as if birds were on their heads. I greeted them and sat down. Then Bedouins came from here and there and said: “O Messenger of Allah, should we seek medical treatment?” He said, «تَدَاوُوا فَإِنَّ اللَّهَ عَزَّ وَجَلَّ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ دَوَاءً، غَيْرَ دَاءٍ وَاحِدٍ الْهَرَمُ» **“Seek medical treatment, for Allah ﷻ and Majestic did not create a disease without creating a medicine for it, except for one disease: old age.”** And in At-Tirmidhi from Usamah bin Sharik, with the wording: The Bedouins said, “O Messenger of Allah, should we not seek medical treatment?” He ﷺ said, «نَعَمْ، يَا عِبَادَ اللَّهِ تَدَاوُوا، فَإِنَّ اللَّهَ عَزَّ وَجَلَّ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ شِفَاءً، أَوْ قَالَ دَوَاءً إِلَّا دَاءً وَاحِدًا» **“Yes, O servants of Allah, seek medical treatment, for Allah did not create a disease without creating a cure for it - or he said a medicine - except for one disease.”** They said, “O Messenger of Allah, what is it?” He said, «الْهَرَمُ» **“Old age.”** [At-Tirmidhi said this is a Hasan Sahih Hadith]. Al-Haram (old age), with a fatha on the Ha and Ra, is the weakness of old age, that is followed by death and perishing, meaning that death has no medicine. Medical treatment brings benefit and repels harm, so it is an interest (Maslahah), in addition to the fact that clinics and hospitals are facilities that Muslims utilize for healing and medical treatment. Thus, medicine, in this respect, has become part of public interests and facilities. The state must undertake public interests and facilities because they are among the matters it is obligated to look after, acting upon the saying of the Messenger ﷺ who said, «الْإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care.”** [Reported by Bukhari from Abdullah ibn Umar].

Although the state must provide medical treatment and healing (medicine) to those under its care as free healthcare provided by the state as an obligation, because it is among the obligatory expenditures upon Bayt al-Mal by way of interest and

providing facilities without compensation, it is nevertheless permissible (Mubah) to hire a doctor and pay him a wage because medical treatment is permissible. He ﷺ said in the previous Hadith, «يَا عِبَادَ اللَّهِ تَدَاوُوا» **“O servants of Allah, seek medical treatment.”** And because it—meaning medical treatment—is a benefit that the hirer can fulfill, so the definition of Ijarah (hiring) applies to it, and no prohibition has been reported regarding it. Moreover, «اِخْتَجَمَ رَسُولُ اللَّهِ ﷺ حَجْمَةَ أَبِي طَيِّبَةَ، وَأَعْطَاهُ صَاعَيْنِ مِنْ طَعَامٍ وَكَلَّمَ مَوَالِيَهُ فَخَفَّفُوا عَنْهُ» **“The Messenger of Allah ﷺ was medically cupped. Abu Taybah cupped him, and he gave him two Sa' (measures) of food and spoke to his masters so they reduced his tax.”** [Reported by Bukhari through Anas (ra)]. And from Ibn Abbas (ra) who said, «اِخْتَجَمَ النَّبِيُّ ﷺ وَأَعْطَى الْحَجَّامَ أَجْرَهُ وَلَوْ عَلِمَ كَرَاهِيَةً لَمْ يُعْطِهِ» **“The Prophet ﷺ was cupped and gave the medical cupper his wage. Had he known it to be Makruh (disliked), he would not have given it to him”** [Reported by Bukhari]. Cupping at that time was among the medication used for medical treatment, so taking a wage for it indicates the permissibility of hiring a doctor. Similar to the doctor’s wage is the selling of medicines, because it is a permissible (Mubah) thing encompassed by the generality of His saying:

﴿وَأَحَلَّ اللَّهُ الْبَيْعَ﴾

“But Allah has permitted trade” [Al-Baqarah: 275], and no text has been reported prohibiting it.

General Objectives of Healthcare in the Khilafah State

Preservation of Physical Health

Physical health relates to the soundness of the body's organs and the regularity of their functions, such that its actions run their natural course with them. Physical healthcare for those under the ruler's care is through the prevention of diseases before they occur or spread, treating them if they occur, and monitoring them if they are prolonged or chronic. Therefore, healthcare is for the healthy and the sick, by preserving health in the healthy and repelling the effect of diseases as much as possible in the sick. The health of the body, as we have clarified, is among the greatest blessings, and preserving and caring for it is among the basic needs that the Khaleefah must provide for those under his care. He ﷺ said, «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرْبِهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوتٌ يَوْمَهُ» **“Whoever among you wakes up secure in his dwelling, healthy in his body, and he has his food for the day, it is as if he were given the entire world”** [Reported by At-Tirmidhi who said: “This is a Hasan Gharib Hadith”]. And he ﷺ said, «الْإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his guardianship”** [Reported by Bukhari]. Negligence in looking after physical health leads to the occurrence of harm to those under the ruler's care, thus the ruler (Wali al-Amr) sins, due to his ﷺ saying, «لَا ضَرَرَ وَلَا ضِرَارَ، مَنْ» **“There must be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him.”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad according to the conditions of Muslim”].

Preservation of Mental and Psychological Health

Mental health is achieved by the individual's feeling of constant tranquility. The feeling of tranquility results from

satisfying human organic needs and instincts in a correct manner, according to the Shariah rulings emanating from the Islamic Aqeedah, whose correctness has been conclusively proven. This is because the Islamic Aqeedah alone answers man's questions about the essence of life, its source, and his destiny after it, with an answer that convinces the mind and agrees with human nature (Fitrah). And because Islam alone guarantees the satisfaction of all human needs and instincts in an organized and coordinated manner that balances between the instincts. Allah ﷻ says:

﴿مَنْ عَمِلَ صَالِحًا مِّن ذَكَرٍ أَوْ أَنَّىٰ وَهُوَ مُؤْمِنٌ فَلَنُحْيِيَنَّهٗ حَيٰوةً طَيِّبَةً وَلَنَجْزِيَنَّهُمْ أَجْرَهُم بِأَحْسَنِ مَا كَانُوا يَعْمَلُونَ﴾

“Whoever does righteousness, whether male or female, while he is a believer - We will surely cause him to live a good life, and We will surely give them their reward in the Hereafter according to the best of what they used to do” [An-Nahl: 97]. And Allah ﷻ says,

﴿إِنَّ الَّذِينَ قَالُوا رَبُّنَا اللَّهُ ثُمَّ اسْتَقَمُوا فَلَا خَوْفٌ عَلَيْهِمْ وَلَا هُمْ يَحْزَنُونَ ﴿١٣﴾ أُولَٰئِكَ أَصْحَابُ الْجَنَّةِ خَالِدِينَ فِيهَا جَزَاءً بِمَا كَانُوا يَعْمَلُونَ ﴿١٤﴾﴾

“Indeed, those who have said, ‘Our Lord is Allah,’ and then remained on a right course - there will be no fear concerning them, nor will they grieve. * Those are the companions of Paradise, abiding eternally therein as reward for what they used to do” [Al-Ahqaf: 13-14]. And Allah ﷻ says,

﴿فَمَنِ اتَّبَعَ هُدَايَ فَلَا يَضِلُّ وَلَا يَشْقَىٰ ﴿١٢٣﴾ وَمَنْ أَعْرَضَ عَن ذِكْرِي فَإِنَّ لَهُ مَعِيشَةً ضَنْكًا ﴿١٢٤﴾﴾

“And whoever follows My guidance will neither go astray nor suffer. * And whoever turns away from My remembrance - indeed, he will have a depressed life” [Taha: 123-124].

When a person views the worldly life from the perspective of Islam, he sees that whatever affliction befalls him in it is merely a test from Allah the Glorified, and his reward, if he is patient and seeks the reward, is Paradise, where there is no toil or fatigue.

Thus, he does not worry about harm that afflicts him, nor does he panic over evil that befalls him. In Sahih Muslim, from the Messenger ﷺ, he said, «عَجَبًا لِأَمْرِ الْمُؤْمِنِ، إِنَّ أَمْرَهُ كُلَّهُ خَيْرٌ، وَلَيْسَ ذَاكَ لِأَحَدٍ إِلَّا لِلْمُؤْمِنِ، إِنْ أَصَابَتْهُ سَرَّاءٌ شَكَرَ فَكَانَ خَيْرًا لَهُ، وَإِنْ أَصَابَتْهُ ضَرَّاءٌ صَبَرَ فَكَانَ خَيْرًا لَهُ» **“How wonderful is the case of a believer; there is good for him in everything, and this applies only to a believer. If prosperity attends him, he expresses gratitude to Allah, and that is good for him; and if adversity befalls him, he endures it patiently, and that is good for him.”** Mental health is achieved automatically in Islamic life by the concentration of Islamic concepts and emotions in society, through the education apparatus and its curricula in the state, through the Islamic political parties operating in the Islamic society, and the media policy based on disseminating the concepts of Islam purely and applying them to reality. Likewise, creating an atmosphere of Iman (belief) in society and stirring Taqwa (piety) in the souls of those under the ruler's care contributes to preserving mental health and achieving tranquility. This is done by implementing Shariah rulings, manifesting righteousness, enjoining the good, obliterating corruption, forbidding the evil, broadcasting Shariah concepts, and preserving Islamic values.

Furthermore, mental health is linked to the availability of basic needs for individuals, which are food, clothing, and shelter. Leaving these needs unsatisfied leads to perishing, and satisfying them partially leads to psychological anxiety or sometimes depression. Therefore, implementing the Islamic economic system, which guarantees the satisfaction of basic needs and allows the individual to satisfy his luxurious needs to the greatest extent possible, is necessary to preserve mental health in society.

The same applies to security; it is one of the needs of those under the ruler's care, the non-satisfaction of which leads to anxiety and the disorder of mental health. The army and the Internal Security Department in the Islamic State undertake the protection of those under the ruler's care from enemies externally and internally, to achieve security in society.

Mental health is inseparable from physical health; indeed, diseases of the souls weaken the body or destroy it even if it is physically sound. The key to the soundness of mental health is the correct concepts emanating from the Islamic Aqeedah. Allah ﷻ said,

﴿يَتَأْتِيهَا النَّاسُ قَدْ جَاءَتْكُمْ مَوْعِظَةٌ مِّن رَّبِّكُمْ وَشِفَاءٌ لِّمَا فِي الصُّدُورِ وَهُدًى وَرَحْمَةٌ لِّلْمُؤْمِنِينَ﴾

“O mankind, there has to come to you instruction from your Lord and healing for what is in the breasts and guidance and mercy for the believers” [Yunus: 57]. And Allah ﷻ said,

﴿وَنُنَزِّلُ مِنَ الْقُرْآنِ مَا هُوَ شِفَاءٌ وَرَحْمَةٌ لِّلْمُؤْمِنِينَ وَلَا يَزِيدُ الظَّالِمِينَ إِلَّا خَسَارًا﴾

“And We send down of the Quran that which is healing and mercy for the believers, but it does not increase the wrongdoers except in loss” [Al-Isra: 82]. And the Messenger ﷺ said, «أَلَا وَإِنَّ فِي الْجَسَدِ مُضْغَةً إِذَا صَلَحَتْ صَلَحَ الْجَسَدُ كُلُّهُ وَإِذَا فَسَدَتْ فَسَدَ الْجَسَدُ كُلُّهُ أَلَا وَهِيَ الْقَلْبُ» “Truly in the body there is a morsel of flesh, which, if it be whole, all the body is whole, and which, if it is diseased, all of [the body] is diseased. Truly, it is the heart.” [Agreed upon]. Therefore, preserving mental health is among the most important objectives of healthcare in the Islamic State.

Preservation of Public Health

Public healthcare relates to the factors that affect the health of the community as a whole, such as the safety of drinking water and food, the purity of the air, the cleanliness of the environment, vaccination, and other fields. Public healthcare aims to promote health through policies at the level of the entire state, including measures and projects undertaken by the state, such as extending sewage networks and establishing nature reserves. It also includes laws adopted by the Khaleefah and made binding upon those under his care, such as traffic laws and the prevention of noise or environmental pollution. Public healthcare generally focuses on

the prevention of diseases more than treatment; for prevention is one of the most important divisions of healthcare, the most universally beneficial, and the most productive. Public healthcare also works to promote health and well-being through health education, clarifying sound healthy living patterns, and preparing the conditions for those under the ruler's care to enjoy good health as a continuous positive process. Among the fields of public healthcare in the Islamic State are advancing environmental health and dealing with environmental risk factors, the safety and availability of drinking water, preserving the purity of the air, preventing the causes of its pollution, and dealing with the negative effects of this pollution, as well as monitoring food and processed foods and their direct and indirect impact on the health of individuals. Its fields also include dealing with natural disasters and global epidemics, limiting them, ensuring readiness and preparedness to deal with them, and dealing with their damages in their preventive and curative dimensions and quarantine. Included in its fields is what is called global health regarding epidemics or disasters of global spread.

Comprehensiveness of Healthcare for All Those Under the Ruler's Care

The Shariah evidences that preserving health is a basic need are general evidences that include all those under the ruler's care, whether they are Muslims or Ahl al-Dhimmah (non-Muslim citizens). For the Imam is responsible for those under his care, the strong and the weak among them, the rich and the poor among them, the believer and the disbeliever among them. The healthcare that the state is obligated to provide directly includes every health service whose absence could lead to harm, and excluded from this are luxurious health services whose absence does not lead to harm, such as teeth whitening or cosmetic therapeutic interventions for a legitimate (Sharia) reason, and the like. However, the state strives as much as possible and according

to the availability of resources to enable those under its care to obtain these luxurious health services.

Free Healthcare Provided by the State as an Obligation

The state provides free healthcare as an obligation to the individuals under its care, regardless of whether they are rich and possess the expenses for medical treatment or poor and do not possess them; because preserving health is a basic need for all people, the rich and the poor among them. And the burden of this on the state treasury is not considered. Thus, it is not permissible to restrict care with restrictions not mentioned in the Shariah, such as covering a specific limit of health expenses and having the patient complete what exceeds it, or including some necessary free medicines and services in the care while excluding others. However, this does not mean preventing the subjects from providing care for themselves in exchange for a wage they pay to whoever treats them; due to what Bukhari reported from Anas (ra) who said, «دعا النَّبِيُّ ﷺ غُلَامًا حَجَّامًا فَحَجَّمَهُ، وَأَمَرَ لَهُ بِصَاعٍ أَوْ صَاعَيْنِ، أَوْ مِذَّ أَوْ مِذَّيْنِ» "The Prophet ﷺ called a boy who was a cupper, and he cupped him. He ordered that he be given one or two Sa's, or one or two Mudds (of food), and he spoke on his behalf so his tax was reduced." Cupping at that time was among the methods used for medical treatment, which indicates the permissibility of an individual providing healthcare and medical treatment for himself.

Excellence and Progress in Health Sciences

Healthcare is a necessary need whose provision is considered one of the vital interests of the Ummah, and its loss threatens the life of the Ummah; therefore, the Islamic State must be at the forefront of nations in terms of healthcare, and it is imperative to create a host of doctors, scientists, and specialists who are scientifically and practically qualified to invent the necessary styles and means for healthcare, and it is imperative to provide

them with the maximum capabilities for scientific research and innovation. The goal is for the Islamic State to possess the reins of affairs in the field of healthcare and achieve self-sufficiency, so that it does not fall under the influence of disbelieving states hoping for a health interest. Allah ﷻ said,

﴿وَلَنْ يَجْعَلَ اللَّهُ لِلْكَافِرِينَ عَلَى الْمُؤْمِنِينَ سَبِيلًا﴾

“And never will Allah give the disbelievers over the believers a way of authority over them” [An-Nisa: 141]. This verse is an informative statement carrying the meaning of a demand. It contains a negation using the particle ﴿لَنْ﴾ “never (lan)”, which denotes perpetuity (تأبید ta’beed), and this is a contextualization (قرينة qarinah) that the forbidding of the disbeliever having a way over the believers is a decisive forbidding (نهى جازم nahee jaazim). Thus, it denotes Tahreem (prohibition). This text is general because ﴿سَبِيلًا﴾ “a way (sabeel)” came as an indefinite noun (نكرة nakirah) in the context of negation, so the text encompasses in its generality (عموم umoom) military, cultural, health authority, and others.

Readiness and Preparedness to Deal With Disasters and Exceptional Cases

Natural disasters such as volcanoes, earthquakes, hurricanes, and floods, and war disasters from attacks with weapons of mass destruction, including biological, chemical, and nuclear weapons, are considered exceptional cases that require preparation and prior readiness to attempt to prevent them, reduce their impact, or deal with their effects quickly and effectively.

From the premise of looking after the affairs, which is obligatory upon the Khaleefah towards those under his care, the Islamic State is responsible for preventive preparation against these disasters, for prior readiness to confront these disasters when they occur, and for rebuilding and supporting the stricken areas after the disasters. However, the fact that the Islamic State

is the primary entity responsible for treating the effects of such disasters does not mean that Muslims as individuals are exempt from assisting and contributing to the efforts to confront disasters; because the evidences for removing harm and the evidences for the obligation of aiding the distressed and the injured are general evidences that include the state and individuals. For the saying of the Prophet ﷺ who said, «مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» **“Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad according to the conditions of Muslim”]. And his ﷺ saying, «الْمُسْلِمُ أَخُو الْمُسْلِمِ لَا يَظْلِمُهُ وَلَا يُسْلَمُهُ وَمَنْ كَانَ فِي حَاجَةِ أَخِيهِ كَانَ اللَّهُ فِي حَاجَتِهِ وَمَنْ فَرَّجَ عَنْ مُسْلِمٍ كُرْبَةً فَرَّجَ اللَّهُ عَنْهُ كُرْبَةً مِنْ كُرْبَاتٍ يَوْمَ الْقِيَامَةِ وَمَنْ سَتَرَ مُسْلِمًا سَتَرَهُ اللَّهُ يَوْمَ الْقِيَامَةِ» **“A Muslim is a brother of a Muslim, he neither wrongs him nor does he hand him over to one who does him wrong. If anyone fulfills his brother's need, Allah will fulfill his need; if one relieves a Muslim of his troubles, Allah will relieve his troubles on the Day of Resurrection; and if anyone covers up a Muslim (his sins), Allah will cover him up on the Day of Resurrection”** [Reported by Bukhari in his Sahih]. And his ﷺ saying, «الْمُؤْمِنُ لِلْمُؤْمِنِ كَالْبُنْيَانِ يَشُدُّ» **“A believer to another believer is like a building whose different parts enforce each other. The Prophet then clasped his hands with the fingers interlaced”** [Reported by Bukhari in his Sahih]. All these evidences are general, obligating the relief of the distressed upon individual Muslims just as they obligate it upon the state; therefore, the state mobilizes and seeks the assistance of whoever is necessary from the Muslim subjects in the relief effort when it occurs, and it takes care to organize them to make the utmost use of their effort and protect them during their relief work, and coordinates between them and the competent official cadres. The state also has the right to impose a tax on the wealthy to spend on the relief effort if the funds in Bayt al-Mal are insufficient for that.

Establishing an Administrative System to Implement the Healthcare Policy

In order to implement the healthcare policy and achieve its objectives mentioned above, there must be an administrative mechanism, meaning the existence of an administrative system for healthcare in the Khilafah State, at a high level of efficiency that ensures this care reaches all those under the ruler's care in a timely manner, and works to preserve public health in all its elements. The administrative system for healthcare in the Islamic State is based on simplicity and speed in providing health service and treatment, as well as on competence in those who assume the administration. This is taken from the reality of accomplishing interests in general, for the owner of any interest only desires the speed of its accomplishment and its accomplishment in the most perfect manner. And the Messenger ﷺ says in what Imam Muslim reported in his Sahih, «إِنَّ اللَّهَ كَتَبَ الْإِحْسَانَ عَلَى كُلِّ شَيْءٍ، فَإِذَا قَتَلْتُمْ فَأَحْسِنُوا، وَإِذَا ذَبَحْتُمْ فَأَحْسِنُوا الذَّبْحَ، وَلْيُجِدْ أَعْدَاكُمْ شَفْرَةً فَلْيِرْحْ ذَبِيحَتَهُ» **“Verily Allah has prescribed Ihsan (excellence) in all things. So, if you kill then kill well; and if you slaughter, then slaughter well. Let each one of you sharpen his blade and let him spare suffering to the animal he slaughters.”** Thus, Ihsan (excellence) in fulfilling tasks is commanded by Shariah. To reach this Ihsan in fulfilling interests, three qualities must be present in the administration; the first is simplicity in the system because it leads to ease and facility, while complexity creates difficulty. The second is speed in accomplishing transactions because it leads to facilitation for the owner of the interest. The third is ability and competence in the one to whom the work is assigned, and this is necessitated by the excellence of the work just as it is required by the performance of the work itself.

Public Healthcare in the Khilafah State

The General Framework of Public Health

Public health relates to factors affecting the health of the community as a whole, such as the purity of drinking water, food, and air, the cleanliness of the environment, vaccination, and other fields. Healthcare aims to promote health through policies at the level of the entire state, and it includes actions and projects undertaken by the state, such as establishing sewage networks and establishing nature reserves. It also includes laws adopted by the Khaleefah which he makes binding upon those under his care, such as traffic laws and the prevention of noise or environmental pollution. Public healthcare generally focuses on the prevention of diseases more than treatment; therefore, prevention is one of the most important divisions of healthcare, the most universally beneficial, and the most productive. For example, adding inexpensive iodine to table salt in many countries of the world has significantly reduced the incidence of thyroid diseases and mental delays resulting from iodine deficiency in those countries, and adding folic acid has reduced the incidence of neural tube defects.

Public healthcare includes the following fields:

1. Protecting those under the ruler's care from risks to public health by maintaining health standards for drinking water, food, air purity, and environmental cleanliness from industrial pollution and sewage.
2. Improving the health of those under the ruler's care by monitoring disease patterns, identifying health risk factors for those under the ruler's care, and finding solutions to these problems. This could be, for example, by identifying trends affected by smoking or obesity, or by identifying shortcomings in protecting those under the ruler's care from these factors affecting public health. Wherever significant negative health risk factors

are found, programs or policies are put in place to deal with them, such as abstaining from smoking in public places and [promoting] a healthy dietary pattern.

3. Preparation and response to public health emergencies, and this includes the outbreak of infectious diseases.

4. Preventive health programs such as vaccination and screening examination programs. The planning and organization for them are at the public health level, but it is better that their execution be at the local level or at the level of primary healthcare for individuals; therefore, we will discuss this issue in the section related to individual preventive healthcare.

The Importance of the Decentralized Administrative System in the Field of Public Healthcare

The goal of public care is to promote health through policies set at the general level for the entire state; however, their execution is at a local or regional level, meaning at the level of the Wilayat (provinces) and 'Amalat (districts). Therefore, standards are set by the Public Healthcare Department for the general scope of the state, and consequently, the 'Amalat possess a more effective capability in monitoring health in addition to the ability to respond to execute specific practical needs according to the established policies. This may include sewage networks, dealing with environmental pollution, and developing building standards to the level determined centrally. This aligns with the Khilafah's methodology of transferring administration to the regions while keeping ruling centralized. While centralized coordination and decision-making are considered more effective when a general disaster occurs, such as a pandemic, for example, dealing with the COVID-19 pandemic has shown that local monitoring of diseases and the application of regional public health programs are necessary to understand disease patterns and organize screening and vaccination programs.

Establishing Integrated Policies Upon Which Public Health Is Based

There are many factors that affect the health of society, such as the environment, housing, hygiene, food production, poverty, and others, and they are not directly related to the health system; however, they have a massive impact on the health and safety of society. This requires setting integrated political decisions in many aspects of public health. Since ruling in Islam is centralized, this ensures the realization of establishing appropriate public policies, and provides a suitable opportunity for communication between different sectors that affect health.

We will discuss research in the following most important fields of public health:

1. Providing food, nutrition, and food security.
2. Environmental health: This includes monitoring water quality, air purity, and preventing environmental pollution.
3. Public health control.
4. Controlling the spread of zoonotic diseases and preventing them.
5. Prevention of the outbreak of infectious diseases and quarantine measures during epidemics.

As for other factors for preventive health programs in the context of dealing with individuals (such as vaccination and screening examinations), we will address them in a later section related to individual preventive healthcare.

Food, Nutrition, and Food Security

Providing Food and Securing a Balanced Diet

Hunger and malnutrition are among the most important risks to public health globally, and their impact is greater than the diseases of AIDS, malaria, and tuberculosis combined. Current estimates indicate that about 690 million people suffer from hunger, and this is equivalent to 8.9% of the world's population. Most of these, 381 million, are in Asia, and there are 250 million others in Africa. Regarding food insecurity, in 2019, there were approximately 750 million people exposed to severe levels of food insecurity, and about two billion people lacked access to obtain safe, nutritious, and sufficient food.

Among what must be taken into consideration is the quality of the diet, because a balanced diet is necessary for good health. Food insecurity caused by high costs and the inability to obtain healthy foods leads to a diet centered around grains with little or no protein, oils, dairy, fruits, and vegetables. Healthy foods are out of reach for more than 3 billion people in the world, and there are more than 1.5 billion people who cannot obtain food containing the minimum nutrients. Most of those who cannot afford the cost of a healthy diet live in Asia, 1.9 billion, and in Africa, 965 million. Many others live in Latin America and the Caribbean, 104.2 million. And the fewest of them are in North America and Europe, 18 million.

These numbers indicate a direct negative impact on health, especially when growth is a criterion for health. According to estimates, in 2019, 21.3% of children under the age of five, 144 million, suffered from stunted growth, 6.9%, 47 million, suffered from wasting, and 5.6%, 38 million, suffered from obesity. The cause of this hunger is not the insufficient production of food; but rather the maldistribution of food and the resources necessary to produce food and to obtain food, as well as a lack of the knowledge and will required to use food properly.

Providing Food Security in the Khilafah State

Food security is the state's ability to provide the basic needs of food and water to those under its care in normal and exceptional circumstances, such as wars, sieges, droughts, and disasters. Food sources exist, and they require production and fair distribution. The claim that the increase in population and the scarcity of water and agricultural land are the cause of people dying of hunger is baseless. Scientists believe that if the agricultural lands in the world were well utilized, they would feed ten times the current population of the world, and at a high level of consumption.

The Khaleefah must provide sustenance for the people to fulfill their needs and to keep the markets full of foodstuff. As part of perfecting the looking after of affairs, the Imam must account for times of wars, general famines, and massive disasters, where agriculture decreases and the ability to transport materials weakens. The Khaleefah bears the responsibility of ensuring that every individual among the people obtains food, clothing, and shelter with goodness (bil-ma'ruf). This should be funded from Bayt al-Mal if the individual is unable to meet these needs himself or through those who are obligated to support him. It was narrated from Uthman bin Affan that the Prophet ﷺ said, «لَيْسَ لِابْنِ آدَمَ حَقٌّ فِي سِوَى هَذِهِ الْخِصَالِ: بَيْتٌ يَسْكُنُهُ، وَثَوْبٌ يُوَارِي عَوْرَتَهُ، وَجُلْفٌ الْخُبْزِ وَالْمَاءِ» **“There is no right for the son of Adam in other than these things: a house which he lives in, a garment which covers his nakedness, and a piece of bread and water”** [Reported by At-Tirmidhi who said: “A Hasan Sahih Hadith”].

As for achieving food security, it requires providing basic foods through production, import, and the utilization of agricultural lands using modern scientific styles and means. Islam addressed the issue of cultivating the land through the saying of the Messenger ﷺ who said, «مَنْ أَحْيَا أَرْضًا مَيْتَةً فَهِيَ لَهُ وَلَيْسَ لِعِرْقٍ ظَالِمٍ حَقٌّ» **“Whoever revives dead land, it belongs to him, and there is no right for an unjust root”** [Reported by At-Tirmidhi who said: “A Hasan

Gharib Hadith”]. And his ﷺ saying, «مَنْ كَانَتْ لَهُ أَرْضٌ فَلْيَزْرَعْهَا أَوْ لِيَمْنَحْهَا أَخَاهُ» **“Whoever has land, let him cultivate it or grant it to his brother”** [Reported by Bukhari in his Sahih]. Providing food is also achieved by prioritizing the cultivation of crops important for human food over less important crops, and by combating desertification, establishing research centers to improve seeds and agricultural pest control medicines, securing agricultural marketing internally and externally, paying attention to agricultural and animal processing, especially that which involves preserving foods for a long period, paying attention to animal breeding according to the latest scientific methods, the state supporting farmers and livestock breeders, and securing what is necessary to increase production, such as fodder and fertilizers. Likewise, providing food through importing is permissible according to Shariah, provided that it does not give the disbelievers a way over the believers. It is also obligatory to focus on basic materials in agricultural production, such as wheat and vegetable oils, and in animal production, such as meat, milk and its derivatives, fish, and eggs.

The capability to store these foods for long periods extending to years should be provided, such as storing wheat in its ears or as grain, dried dates, figs, grapes, oils, dried and canned meat, and dried milk... It came in Sahih Muslim from Aisha (ra) who said: He ﷺ said, «لَا يَجُوعُ أَهْلُ بَيْتٍ عِنْدَهُمُ التَّمْرُ» **“A household that has dates will not go hungry.”** And he ﷺ said, «يَا عَائِشَةُ بَيْتٌ لَا تَمْرٌ فِيهِ جِيَاعٌ أَهْلُهُ، أَوْ جَاعَ أَهْلُهُ» **“O Aisha, a house without dates, its people are hungry - or will go hungry”** [Reported by Muslim in his Sahih]. The Khilafah State undertakes the storage of foodstuff by building wheat silos, storage centers, and large refrigerators; they should be multiple, spaced apart, protected from enemies, and close to population centers, making it easy to transport foodstuff to and from them. The state undertakes monitoring the availability of healthy storage conditions and the safety of the stored foodstuff. The Islamic State carries out the fair distribution of food, in

quantity and quality, through the rulings that prevented wealth from circulating only among the rich, and the obligation of feeding upon the Muslims, due to his ﷺ saying, «مَا آمَنَ بِي مَنْ بَاتَ شَبْعَانٌ وَجَارُهُ جَائِعٌ وَهُوَ يَعْلَمُ» **“He does not believe in me who sleeps satiated while his neighbor is hungry and he knows it”** [Reported by Al-Bazzar from Anas with an Isnad graded Hasan by Al-Haythami and Al-Mundhiri]. And his ﷺ saying, «وَأَيُّمَا أَهْلٍ عَرَضَتْ فِيهِمْ أَمْرٌ جَائِعٌ فَقَدْ بَرِئَتْ مِنْهُمْ ذِمَّةُ اللَّهِ تَعَالَى» **“Any people of a locality among whom a person wakes up hungry, the protection of Allah the Exalted is lifted from them”** [Reported by Ahmad from Ibn Umar, and authenticated by Ahmad Shakir].

Health and Quality of Food in Restaurants, Markets, and Factories

If food is spoiled or hygiene is not observed during its preparation, it produces various diseases and transmits infection. Therefore, it is obligatory upon whoever prepares food and serves it in public establishments to adhere to complete hygiene and the quality of the food served. The Muhtasib must close restaurants or food shops that are found to be serving spoiled or adulterated food, and punish their owners if they are negligent or intentionally selling spoiled food. They are not reopened until the quality of the food they serve to the people is re-inspected. Muslim reported in his Sahih that the Messenger of Allah ﷺ passed by a heap of food (grain). He thrust his hand into it, and his fingers felt wetness. He said, «مَا هَذَا يَا صَاحِبَ الطَّعَامِ؟» **“What is this, O owner of the food?”** He said: **“The sky - meaning rain - afflicted it, O Messenger of Allah.”** He said, «أَفَلَا جَعَلْتَهُ فَوْقَ الطَّعَامِ كَيْ يَرَاهُ النَّاسُ! مَنْ عَشَنَّا فَلَيْسَ مِنِّي» **“Why did you not put it on top of the food so that people could see it! Whoever cheats is not of me.”** Muslim also reported from Abu Hurairah from the Messenger of Allah ﷺ that he said, «وَمَنْ عَشَنَّا فَلَيْسَ مِنَّا» **“And whoever cheats us is not of us.”**

Environmental Health

Human health is related to the environment; the air around us, the water we drink, and the food we eat greatly affect our health, and the safety of all these is linked to how we deal with them immediately and locally, as well as globally and over the course of years and decades as well. **Environmental health** has come to be defined as the branch of public health that focuses on the relationships between people and their environment, working to promote human health and well-being, and fostering healthy and safe communities. Thus, environmental health is a key part of any comprehensive public health system. In this field, work should be done to establish policies and programs to reduce chemical pollutants and other environmental hazards in the air, water, and food in order to protect people and provide communities with healthier environments. Capitalism introduced industrialization without concern for the environment, and with it, dirt, diseases, and death entered cities suffering from land, air, and water pollution. Agricultural lands, rivers, and seas became polluted with pesticides and industrial waste, and biodiversity diminished as a result of capitalist greed. Consequently, capitalist states resorted to patchwork solutions to cover up this shortcoming, including the establishment of agencies and organizations to monitor and control pollution, and what is known as carbon taxes, among others.

As for Islam, the importance of cleanliness and environmental management in order to preserve health was reflected in the designs of many great Muslim cities. This is due to Islam linking the reward and recompense in the Hereafter to man's relationship with his environment. Islam focused man's mind on the importance of a clean environment, for its own sake as well as for human health, by reducing pollution and by urging psychological tranquility, satisfaction, and contentment with existing possessions. Allah ﷻ created man from the earth, settled

him in it, and subjected to him everything in the universe to benefit from it. Allah ﷻ said,

﴿هُوَ أَنشَأَكُم مِّنَ الْأَرْضِ وَاسْتَعْمَرَ فِيهَا فَاسْتَغْفِرُوا لَهُ ثُمَّ تَوْبُوا إِلَيْهِ﴾

“He has produced you from the earth and settled you in it, so ask forgiveness of Him and then repent to Him” [Hud: 61].

And Allah ﷻ said,

﴿وَسَخَّرَ لَكُم مَّا فِي السَّمٰوٰتِ وَمَا فِي الْأَرْضِ جَمِيعًا مِّنْهُ إِنَّ فِي ذَٰلِكَ لَآيٰتٍ لِّقَوْمٍ

يَتَفَكَّرُونَ﴾

“And He has subjected to you whatever is in the heavens and whatever is on the earth - all from Him. Indeed, in that are signs for a people who give thought” [Al-Jathiyah: 13]. Killing animals for food or for another need is permissible (Mubah) in Islam, but there is accountability for whoever kills wastefully or without reason. It was narrated from Abdullah bin 'Amr that the Messenger of Allah ﷺ said, «مَا مِنْ إِنْسَانٍ يَفْتُلُ غُصْفُورًا فَمَا فَوْقَهَا بِغَيْرِ حَقِّهَا» “There is no human who kills a sparrow or anything larger without its right except that Allah ﷻ will ask him about it on the Day of Resurrection.” It was said, “O Messenger of Allah, and what is its right?” He said, «حَقُّهَا أَنْ يَذْبَحَهَا» “Its right is that he slaughters it and eats it, and does not cut off its head and throw it away” [Reported by Al-Hakim in his Mustadrak, who said: “A Hadith with a Sahih Isnad”]. And from Abu Hurairah from the Prophet ﷺ who said, «وَتَمْطِطُ الْأَذَى عَنِ الطَّرِيقِ صَدَقَةٌ» “And removing harm from the road is a charity” [Reported by Muslim in his Sahih]. Furthermore, Islam praised the establishment of something beneficial in the environment. The Prophet ﷺ said, «مَا مِنْ مُسْلِمٍ يَغْرِسُ غَرْسًا أَوْ يَزْرَعُ زَرْعًا» “There is no Muslim who plants a tree or sows a seed, and then a bird, or a person or an animal eats from it, except that it is regarded as a charity for him” [Reported by Bukhari in his Sahih]. Islam has prohibited harming the environment, because it sustains man, and Allah ﷻ has

threatened the corrupter of nature and the environment with punishment. Allah ﷻ said,

﴿وَإِذَا تَوَلَّى سَعَىٰ فِي الْأَرْضِ لِيُفْسِدَ فِيهَا وَيُهْلِكَ الْحَرْثَ وَالنَّسْلَ ۗ وَاللَّهُ لَا يُحِبُّ الْفُسَادَ﴾

“And when he goes away, he strives throughout the land to cause corruption therein and destroy crops and animals. And Allah does not like corruption” [Al-Baqarah: 205]. The Messenger ﷺ emphasized the environmental aspect of cleanliness in his saying, «اتَّقُوا الْمَلَاعِينَ الثَّلَاثَ: الْبَرَّازَ فِي الْمَوَارِدِ، وَقَارِعَةَ الطَّرِيقِ، وَالظِّلَّ» “Beware of the three acts that cause cursing: defecating in water sources, on the middle of the road, and in the shade” [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad”]. To preserve the environment, the Khilafah State must establish departments to set standards for monitoring air purity, water quality, and food safety. Their role will be to monitor the environment, prevent chemical or radioactive pollution, and control infectious diseases arising from human use of and interaction with domestic and wild animals.

The following are the important elements in environmental health:

Air Purity

The World Health Organization estimates that 7 million people die annually in cases of air pollution, and that nine-tenths of people globally breathe air containing high levels of pollutants. It has been estimated that a quarter of adult deaths from heart disease and strokes were in cases of air pollution, and that 29% of lung cancer deaths and 43% of chronic obstructive pulmonary disease deaths can be attributed to air pollution. Radioactive dust has a visible impact on environmental pollution, and its global dimensions were manifested in their worst forms in the Chernobyl and Fukushima disasters. The Chernobyl incident in 1986 resulted in the contamination of 20,000 square kilometers of Ukraine, and radioactive dust was discovered across Western

Europe. The Fukushima nuclear power plant in Japan began releasing radioactivity into the atmosphere on March 12, 2011, which reached the United States across the Pacific Ocean after 5-6 days. Ten years after the disaster, scientists are still discovering new types of fallout dust from the Fukushima plant.

The treatment of the problem of various emissions into the air in the Islamic State is by allocating industrial zones far from residential areas for polluting industries, monitoring industrial and agricultural facilities and any other sources of pollution, and obligating those facilities and sources - whether they fall under private or public property - to follow clean production methods and systems, such as industrial waste treatment units, and by not allowing the leakage of pollutants into the surrounding environment beyond the permissible limits. These limits are determined by specialists among the scientists, such that only the minimum level of emissions and waste that does not affect the environmental balance is permitted. The state also takes care to establish factories to re-manufacture permissible industrial waste and utilize it again, which is called recycling. Whatever remains after that of these wastes that are unexploitable or non-recyclable is disposed of by burial in remote areas. A team of scientists is established to invent new ways to dispose of these wastes and remove their danger and harm from those under the ruler's care.

Since environmental pollution is among the violations that harm the community, the Qadi of Hisbah (Judge of Hisbah) in the Islamic State is the one responsible for monitoring factories and facilities to limit emissions harmful to the environment. He can seek the assistance of people of knowledge and environmental specialists to do so. Deterrent Ta'zir (discretionary) punishments are set against factory owners in the event they exceed the permissible limit of industrial emissions, and the factory is closed if the punishments do not deter it and it continues to pollute the environment.

The natural environment is not bounded by the borders of the state, especially if pollutants are transmitted through the air or watercourses. Therefore, the Islamic State must prevent neighboring countries from polluting the environment and prevent them from dumping their industrial waste in the lands of the Islamic State. Any violation of these conditions by neighboring countries is considered an aggression against the Islamic State and its subjects, necessitating the declaration of Jihad and war according to what the Khaleefah determines.

Water Quality

Water covers about 70% of the Earth's surface and is essential for life. The Almighty Allah ﷻ said,

﴿أَوَلَمْ يَرِ الَّذِينَ كَفَرُوا أَنَّ السَّمَوَاتِ وَالْأَرْضَ كَانَتَا رَتْقًا فَفَتَقْنَاهُمَا ۖ وَجَعَلْنَا مِنَ الْمَاءِ كُلَّ

شَيْءٍ حَيٍّ ۖ أَفَلَا يُؤْمِنُونَ ۝﴾

“Have those who disbelieved not considered that the heavens and the earth were a joined entity, and We separated them and made from water every living thing? Then will they not believe?” [Al-Anbiya: 30]. Despite this, man pollutes rivers, seas, and groundwater at unprecedented rates. Heavy metals, harmful chemicals, microplastics, and bacteria from human and animal discharge, and even radioactive isotopes, all pollute our water. Drinking water is exposed to the continuous risk of contamination by life-threatening bacteria such as Cholera, Typhoid, Shigella, and E. coli O157. Viruses such as Hepatitis A virus also threaten drinking water, and Norovirus infection of bathing water leads to frequent outbreaks of intestinal diseases. As for protozoan parasites like Cryptosporidium and Giardia, they can survive chlorine disinfection treatment. Parasitic worms cause Schistosomiasis. Drinking water is also exposed to the risk of chemical pollutants from factories, agricultural fertilizer runoff, and sewage, and even water wells can be contaminated with toxic elements like arsenic. A 2019 World Health Organization report

estimated that at least two billion people use a drinking water source contaminated with feces, and that there are 485,000 diarrheal deaths each year from contaminated drinking water.

Islam has commanded the preservation of water quality and cleanliness, and has issued the sternest warning against polluting water sources. It was narrated from Mu'adh bin Jabal (ra) from the Messenger of Allah ﷺ that he said, «اتَّقُوا الْمَلَاعِينَ الثَّلَاثَ: الْبَرَازَ فِي الْمَوَارِدِ، وَقَارِعَةَ الطَّرِيقِ، وَالظِّلَّ» **“Beware of the three acts that cause cursing: defecating in water sources, on the middle of the road, and in the shade.”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad”]. And he ﷺ said, «لَا يَبُولَنَّ أَحَدُكُمْ فِي الْمَاءِ الدَّائِمِ ثُمَّ يَغْتَسِلُ مِنْهُ» **“None of you should urinate in stagnant water and then bathe in it.”** [Reported by Muslim in his Sahih]. Ibn Majah reported from Jabir bin Abdullah (ra) that he said, «أَمَرَنَا النَّبِيُّ ﷺ أَنْ نُوَكِّيَ أَسْقِيَّتَنَا وَنُعْطِيَ آبِيَّتَنَا» **“The Prophet ﷺ commanded us to tie our waterskins and cover our vessels”**; and this is to preserve the water contained in these vessels. Therefore, it is obligatory upon the Islamic State to take care of the cleanliness of water sources and monitor the quality of drinking water and its freedom from pollutants, by establishing special laboratories for this purpose, and building plants to treat water and purify it from pollutants. This is because the guardian - who is the Imam - is responsible for those under his care, and proceeding from the broad Shariah principle dictating that there should be neither harming nor reciprocating harm, and in application of the aforementioned Ahadith that prohibit polluting public waters which are the property of all Muslims. The Hisbah apparatus in the Islamic State undertakes the monitoring of water and its quality, and determines the punishment for individuals, companies, or factories that pollute water sources, such that the punishment is deterrent and removes the resulting pollution.

Food Safety

The food we eat is subject to chemical and biological risks. If food spoils or hygiene is not observed during its preparation, various diseases can result from that. Fresh animal and plant products may carry bacteria such as Salmonella, Listeria, and pathogenic E. coli, as well as heat-resistant bacterial proteins from Bacillus cereus, enteric E. coli, and Clostridium botulinum, which remain toxic even after the bacteria that secreted them are killed. Food can be contaminated during preparation, processing, packing, packaging, or storage; where fungal growth can secrete toxins into grains and other plant products. Animal products may be contaminated at their source. What is known as Malta fever (Brucellosis) is a common disease in the Mediterranean basin countries caused by an intracellular bacterial parasite in milk-producing livestock, and it infects people through unpasteurized milk, soft cheeses made from it, and even from its undercooked meat. Practices contrary to the Shariah, such as feeding animals processed animal remains, have led to the spread of Mad Cow Disease among livestock, which, if it infects humans, leads to a variant of the neurological Creutzfeldt-Jakob disease.

The Khilafah State must set food health standards across all points of the food industry, from the farm to the point of sale to the consumer, and it must monitor compliance with these standards.

Controlling the Spread of Zoonotic Diseases and Preventing Them

Many diseases of farm animals are transmitted to humans through eating animal products or through direct agricultural contact. Wild animals are also an important source of zoonotic diseases, and these diseases are called zoonotic diseases. Diseases such as avian flu, swine flu, and the three recent waves of severe pneumonia from coronaviruses all originated from animals; the latest being SARS-CoV-2, which caused the COVID-19 pandemic. Likewise, other recent epidemics from Zika and Ebola

viruses, Q fever, tuberculosis, and rabies, are all of zoonotic origin. This is in addition to the AIDS disease (HIV) resulting from illicit sexual relations. All these diseases are a source of constant nuisance and threat, especially after the expansion of humans in colonizing new areas and with the increase in global travel. The methods of transmitting the infection to humans vary depending on these diseases.

Controlling the spread of diseases in animals and preventing their transmission to humans is one of the most important challenges facing the Khilafah State. Therefore, it must take care to establish a special apparatus of veterinarians that is affiliated with the Department of Agriculture considering its primary function, and linked to the Health Department regarding the following aspects:

a- Monitoring animal health; where the veterinary apparatus in the Islamic State is obligated to monitor all animal farms belonging to the state or to individuals.

b- Combating disease-carrying pests.

c- Preserving wild animals: Preserving wild animal wealth is necessary to maintain the life cycle and the balance of nature. Also, monitoring the health of wild animals is important to prevent the transmission of diseases to pets or humans, such as rabies, avian flu, and other infectious diseases.

Human health is linked to animal health, and this fact calls for paying attention to animals, in addition to the fact that caring for animals in the Shariah is considered an act for which Allah rewards its doer. It was narrated from Abu Hurairah that the Messenger of Allah ﷺ said, «بَيْنَمَا رَجُلٌ يَمْشِي بِطَرِيقٍ اشْتَدَّ عَلَيْهِ الْعَطَشُ فَوَجَدَ بِئْرًا فَنَزَلَ فِيهَا فَشَرِبَ ثُمَّ خَرَجَ فَإِذَا كَلْبٌ يَلْهَثُ يَأْكُلُ الثَّرَى مِنَ الْعَطَشِ فَقَالَ الرَّجُلُ لَقَدْ بَلَغَ هَذَا الْكَلْبُ مِنَ الْعَطَشِ مِثْلَ الَّذِي كَانَ بَلَغَ بِي فَنَزَلَ الْبِئْرَ فَمَلَأَ خُفَّهُ ثُمَّ أَمْسَكَهُ بِفِيهِ فَسَقَى الْكَلْبَ فَشَكَرَ اللَّهُ لَهُ فَعَفَّرَ لَهُ قَالُوا يَا رَسُولَ اللَّهِ وَإِنَّا لَنَا فِي الْبَهَائِمِ أَجْرٌ فَقَالَ نَعَمْ فِي كُلِّ ذَاتِ كَبِدٍ رَطْبَةٍ أَجْرٌ» **“While a man was walking on a road, he became very thirsty. He found a well, went down into it, drank, and then came**

out. Suddenly, he saw a dog panting and eating mud out of severe thirst. The man said, 'This dog has reached the same state of thirst that I had reached.' So, he went down into the well, filled his shoe with water, held it in his mouth, and gave the dog water to drink. Allah thanked him for that and forgave him." They said, "O Messenger of Allah, is there a reward for us in serving the animals?" He said, "Yes, there is a reward for serving any living being." [Reported by Bukhari in his Sahih].

Preserving Forests and Woodlands

Natural forests and woodlands constitute a natural lung that complements the cycle of life on Earth; they are necessary for the survival of life and the equilibrium of the natural system as decreed by Allah the Glorified. Man and animal need oxygen and nutritional materials, and some animals need these forests as environmental habitats to live in. Therefore, preserving forests and woodlands is necessary to maintain the life cycle, and the Islamic State must take care to protect them from cutting or removal, and protect the living creatures within them from hunting or displacement, as long as this is necessary for the natural life cycle to remain complete and sound.

Sanitation

Sanitation is the environmentally and healthily sound management of waste. It includes the drainage of sewage and rainwater, and the treatment of industrial and agricultural waste in a manner that protects the environment and the health of those under the ruler's care from the effects of these wastes. Therefore, it is obligatory upon the state to prepare sanitation networks in residential areas to drain sewage and waste, and to also establish centers to treat these wastes by burying them, burning them, or recycling the non-impure (Ghayr Najis) wastes among them and utilizing them again. This is from the perspective of looking after the affairs and preventing harm. From this perspective as well,

garbage dumps and waste treatment centers should be far from residential areas and water resources.

Sanitary Engineering for the Residential Environment

The engineering of cities and residential areas in the Islamic State must consider the health and comfort of those under the ruler's care. This is done by limiting pollution, noise, and clamor by keeping houses far from factories and various workshops, and by isolating highways, trains, and airports from houses and residents with sound barriers. The state takes care to design the engineering of cities and residential areas in a manner that allows for proper ventilation, prevents population overcrowding, and facilitates the sanitation process, street cleaning, and waste removal. The state must consider the paralyzed, the blind, and people with various disabilities by facilitating transportation and roads and adapting them to their needs, especially in public institutions such as schools and state buildings. This is part of looking after the affairs which is obligatory upon the Imam. Likewise, the state must take care to establish safe parks and playgrounds for children and the rest of the population so that children are not exposed to the risks of playing in unsafe places.

Standards and Control

In order to protect people from contaminated food, contaminated water, and polluted air, the Islamic State must undertake the following public actions: risk assessment, setting safety standards, and conducting tests for air, water, and food. Furthermore, the state must consider animal health as a factor of human health; therefore, veterinary inspection is also among the responsibilities of the state. It must provide laboratories for these tests and support them with laboratory research to develop diagnostic tools that enable rapid diagnosis at the site of danger to avoid any risks resulting from delay. Well-equipped regional laboratories must conduct routine diagnostic

analyses, and these should be designed with a readiness that enables them to deal with the possibility of a comprehensive epidemic and a massive escalation of analytical procedures to support the needs of the population.

The Khaleefah adopts the standards for air, water, food safety, and veterinary safety based on the recommendations of technical expert committees. The inspectors who deputize for the Muhtasib enforce them and have the authority to take measures against the violator, such as closing restaurants or food stores that are discovered to have served spoiled or adulterated food, and they can punish their owners if they were negligent or intentionally spoiled the food. Wherever the assessment is more complex, such as in industrial production for example, the inspectors must submit reports on the failures, and then the matter is followed up with the factory owner. Inspectors with relevant higher education qualifications are trained in monitoring and collecting samples according to specific standardized operating procedures. The state must continuously keep pace with research aimed at understanding and assessing these risks, and central laboratories should be tasked with basic research in these fields while regional laboratories are tasked with routine monitoring and surveillance.

Health Control and the Hisbah Apparatus in the Khilafah State

The Islamic State, through the Hisbah (Inspections) apparatus, monitors matter that affect the health of the community in general; such that the Muhtasib prevents any health harm that befalls the community and punishes the one who causes it with a punishment that deters him from returning to it. The Muhtasib is the judge who looks into cases that are public rights, in which there is no plaintiff, provided they do not fall under the Hudud (prescribed punishments) and Jinayat (felonies). The Muhtasib possesses the authority to pass judgment on the

violation immediately upon knowing of it in any place without the need for a judicial court session. He has a number of police under his command to execute his orders, and his judgment is executed immediately. He judges the violation as soon as its occurrence is verified, and he has the right to judge in any place or time: in the market, in the house, on the back of an animal, in the car, day or night... For when the Messenger ﷺ looked into the matter of the heap of food, he looked into it while walking in the market, and it was displayed for sale. He did not summon the owner of the heap to him; rather, as soon as he saw the violation, he looked into it in its place. This indicates that a judicial court session is not stipulated in Hisbah cases. The Muhtasib has the right to choose deputies for himself who meet the conditions of the Muhtasib, distributing them in different directions. These deputies have the authority to perform the function of Hisbah in the region or locality assigned to them in the cases delegated to them. Among the matters that the Muhtasib must monitor in the Islamic State are:

a. Food quality in restaurants, markets, and factories: If food is spoiled or hygiene is not observed during its preparation, it produces various diseases and transmits infection. Therefore, it is obligatory upon whoever prepares food and serves it in public establishments to adhere to complete hygiene and the quality of the food served. The Muhtasib must close restaurants or food shops that are found to be serving spoiled or adulterated food, and punish their owners if they are negligent or intentionally selling spoiled food. They are not reopened until the quality of the food they serve to the people is re-inspected. Muslim reported in his Sahih that the Messenger of Allah ﷺ passed by a heap of food (grain). He thrust his hand into it, and his fingers felt wetness. He said, «مَا هَذَا يَا صَاحِبَ الطَّعَامِ؟» “What is this, O owner of the food?” He said, “The sky - meaning rain - afflicted it, O Messenger of Allah.” He said, «أَفَلَا جَعَلْتَهُ فَوْقَ الطَّعَامِ كَيْ يَرَاهُ النَّاسُ! مَنْ غَشَّ فَلَيْسَ مِنِّي» “Why did you not put it on top of the food so that people could see

it! **Whoever cheats is not of me.**” Muslim also reported from Abu Hurairah from the Messenger of Allah ﷺ that he said, «وَمَنْ غَشَّنَا فَلَيْسَ مِنَّا» **“And whoever cheats us is not of us.”**

b. Specifications and standards for products and goods: Some goods and products, such as foodstuffs, building materials, chemicals like insecticides, cleaning materials, and precious metal jewelry, can cause harm to their user if they are not manufactured according to specifications and standards that ensure safety upon use, or if they are of a quality lower than conforming to the specifications and standards. Therefore, it is necessary to establish a special apparatus in the state comprising scientists in various relevant fields to set these standards and specifications and compel factories and producers to adhere to them. The Muhtasib undertakes the monitoring of the application of these standards and specifications, punishing the violator, and preventing the circulation of the violating commodity.

c. Inspecting imported materials: The Islamic State must inspect materials imported from other countries, whether they are agricultural or industrial materials; to prevent the entry of what may harm those under the ruler's care in the Islamic State or transmit diseases and pests from other countries, such as importing animals infected with a contagious disease or spoiled merchandise. The state establishes inspection and checkpoint stations at the frontiers of the state for this purpose. Bukhari reported in his Sahih that the Messenger of Allah ﷺ said, «لَا يُوردَنَّ» **“Do not let those with sick camels water them with those of healthy camels.”** The narration in Muslim from him ﷺ states that he said, «لَا يُوردُ مُمْرِضٌ عَلَى مُصِحٍّ» **“The owner of sick (Mumridh) camels must not water them with the healthy (Musih) camels.”** This narration in Muslim came in the form of a declarative statement and the wording of negation; however, it carries the meaning of prohibition, evidenced by Bukhari's narration in the form of prohibition. The Mumridh (sick) is the one who has sick camels, and the Musih is the one who has

healthy camels. Thus, the Messenger ﷺ forbade the owner of sick camels from bringing them to the healthy camels.

d. Monitoring the health of arrivals to the state: The Islamic State must inspect the Musta'mineen (those granted safe conduct), the Mu'ahideen (those with treaties), and the envoys arriving to the state from countries where infectious diseases such as the plague, SARS, or tuberculosis are spreading. If it is found that one of them carries the disease and has the potential to transmit the infection, he is prevented from entering the state. From Usamah (ra) from the Messenger of Allah ﷺ, he said, «الطَّاعُونَ رَجَسٌ أُرْسِلَ عَلَى طَائِفَةٍ مِنْ بَنِي إِسْرَائِيلَ - أَوْ عَلَى مَنْ كَانَ قَبْلَكُمْ - فَإِذَا سَمِعْتُمْ بِهِ بَأْرَضٍ فَلَا تَقْدَمُوا عَلَيْهِ، وَإِذَا وَقَعَ بِأَرْضٍ وَأَنْتُمْ بِهَا فَلَا تَخْرُجُوا فِرَاراً مِنْهُ» "The plague is a punishment sent upon a group of Banu Israeel - or upon those who were before you. So, if you hear of it in a land, do not approach it; and if it occurs in a land while you are in it, do not leave it fleeing from it." [Reported by Bukhari]. Muslim reported in his Sahih that there was a leprous man in the delegation of Thaqif, so the Prophet ﷺ sent a message to him, «إِنَّا قَدْ بَايَعْنَاكَ فَارْجِعْ» "We have accepted your pledge of allegiance, so return."

e. Safety laws at work: The employer must provide a safe healthy environment for the workers and not expose them to danger. The Muhtasib must supervise factories and workshops and verify that they are free of any danger to the workers.

Managing the Outbreak of Infectious Diseases

Infectious Diseases as a State of Emergency in the State

The outbreak of infectious diseases can represent a potential threat to life and work and cause massive devastation. The Spanish flu pandemic of 1918-1919, caused by the H1N1 virus, infected about 500 million people, and the number of deaths reached about 50 million people worldwide, with the ensuing health, political, and economic tragedies and consequences. Fearing a recurrence of this epidemic, several countries adopted an annual vaccination program against the influenza virus. In 2003, a new coronavirus called SARS emerged. The virus infected at least twelve countries before the epidemic was controlled. The COVID-19 (SARS-CoV-2) pandemic was declared a public health emergency of international concern on 30 January 2020. It was officially declared a pandemic on 11 March 2020, and after a year, the number of infection cases, according to the statistics of global organizations, reached about 118 million, and the number of deaths was estimated at more than 2.6 million cases. The cost of the epidemic in terms of economic losses and health impacts was massive. Therefore, there must be an appropriate degree of preparedness in any state regarding these matters.

Monitoring the Health of Arrivals to the State

The Islamic State, as we mentioned previously, must inspect those arriving to it from countries where infectious diseases are spreading, such as COVID-19, SARS, Middle East Respiratory Syndrome (MERS), tuberculosis, plague (*Yersinia*), influenza, Ebola, and the like, to prevent the infected from entering the state. It must also monitor global health trends, and thereby the Khilafah can take its precautions by applying the necessary Shariah rulings and standards to prevent people from traveling to and from areas of disease outbreaks.

Combating the Outbreak of Infectious Diseases and Pandemics - Quarantine

Some diseases are contagious and highly dangerous. To prevent the spread of such diseases, it is sometimes necessary to completely isolate the infected patient, or take preventive measures such as wearing masks when interacting with him, so that healthy people are not exposed to the infectious microorganisms carried by the patient. If doctors decide that a specific patient poses a danger and a source for transmitting the infection, the state must isolate that patient from people in his home or in the hospital if he needs treatment and monitoring, or compel him to take the necessary preventive measures if the matter does not require isolating him completely from people. Quarantine means restricting the movement and mixing of people to reduce the transmission of infection. The Shariah has determined the method by which this must be done:

- By confining the disease to the place where it started and preventing it from spreading.
- By isolating the sick from the healthy.

a) Controlling the Outbreak and Confining the Disease

As soon as the place where the disease originated is identified, Islam imposes a strict quarantine policy in the places where the disease exists. Bukhari reported from Usamah bin Zayd that the Prophet ﷺ said, «إِذَا سَمِعْتُمْ بِالطَّاعُونِ بِأَرْضٍ فَلَا تَدْخُلُوهَا، وَإِذَا وَقَعَ بِأَرْضٍ وَأَنْتُمْ بِهَا فَلَا تَخْرُجُوا مِنْهَا» “If you hear of the plague in a land, do not enter it; and if it occurs in a land while you are in it, do not leave it.” In another Hadith in Bukhari and Muslim, in the narration of Muslim from Usamah bin Zayd, the Prophet ﷺ said, «الطَّاعُونُ رَجَزٌ أَوْ عَذَابٌ أُرْسِلَ عَلَى بَنِي إِسْرَائِيلَ أَوْ عَلَى مَنْ كَانَ قَبْلَكُمْ. فَإِذَا سَمِعْتُمْ بِهِ بِأَرْضٍ فَلَا تَقْدَمُوا عَلَيْهِ وَإِذَا وَقَعَ بِأَرْضٍ وَأَنْتُمْ بِهَا فَلَا تَخْرُجُوا فِرَاراً مِنْهُ» “The plague is a punishment or a torment sent upon Banu Israeel or upon those who were before you. So if you hear of it in a land, do not approach it; and if it occurs in a land while you are in it, do not leave it fleeing

from it.” In another narration by Bukhari from the wife of the Prophet ﷺ, Aisha (ra), she said: I asked the Messenger of Allah ﷺ about the plague, and he informed me, «أَنَّهُ عَذَابٌ يَبْعَثُهُ اللَّهُ عَلَى مَنْ يَشَاءُ، وَأَنَّ اللَّهَ جَعَلَهُ رَحْمَةً لِلْمُؤْمِنِينَ. لَيْسَ مِنْ أَحَدٍ يَقَعُ الطَّاعُونَ فَيَمُوتُ فِي بَلَدِهِ صَابِرًا مُحْتَسِبًا» “That it is a punishment which Allah sends upon whom He wills, and that Allah has made it a mercy for the believers. There is no one who is afflicted with the plague and stays in his town, patient and seeking reward, knowing that nothing will strike him except what Allah has decreed for him, except that he will have the like of the reward of a martyr.” Ibn Hajar mentioned in Fath al-Bari that the second Khaleefah, Umar (ra) went out to Ash-Sham and was informed that the epidemic was present in Ash-Sham. So, Abd al-Rahman bin Awf informed him that the Messenger of Allah ﷺ said, «إِذَا سَمِعْتُمْ بِهِ بِأَرْضٍ فَلَا تَقْدُمُوا عَلَيْهِ، وَإِذَا وَقَعَ بِأَرْضٍ وَأَنْتُمْ بِهَا فَلَا تَخْرُجُوا فِرَارًا مِنْهُ» “If you hear of it in a land, do not approach it; and if it occurs in a land while you are in it, do not leave it fleeing from it.” So, Umar bin Al-Khattab returned.

b) Isolating the infected from the healthy

Regarding those infected with symptoms, they must be effectively separated from the healthy, and extreme care must be taken to ensure the infection does not spread from the infected to the healthy. Bukhari reported from Usamah bin Zayd that the Prophet ﷺ said, «إِذَا سَمِعْتُمْ بِالطَّاعُونَ بِأَرْضٍ فَلَا تَدْخُلُوهَا، وَإِذَا وَقَعَ بِأَرْضٍ وَأَنْتُمْ بِهَا فَلَا تَخْرُجُوا مِنْهَا» “If you hear of the plague in a land, do not enter it; and if it occurs in a land while you are in it, do not leave it.” People should be encouraged to cooperate with this approach because the Messenger of Allah ﷺ said, «لَا ضَرَرَ وَلَا ضِرَارَ، مَنْ ضَارَ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» “There should be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him.” If the patient does not comply with the isolation decision in this case, the state compels him and isolates him by force; because his going out and mixing with people causes harm to them. However, the

Imam must undertake the financial support of the quarantined patient if he does not possess sufficient funds to sustain himself while being confined from work and going out. In conclusion, the correct procedure for dealing with the outbreak of infectious diseases is isolating the infectious disease in the place where it broke out, and quarantining the area while providing care and free medical treatment provided by the state as an obligation to the patients, while the healthy continue their social and economic lives, and acts of worship such as Salah continue as they were before the presence of the infectious disease. This does not prevent taking appropriate health precautions if recommended by experts; and the state continues to provide the basic needs for those under its care, including education.

Additional Measures

If it is necessary to prevent the spread of the disease due to its specific characteristics, additional measures may be required in order to look after the affairs of the people, in accordance with the Hadith of the Messenger ﷺ: «الإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care.”** These measures can include mandatory testing in public places and other matters in accordance with Shariah rulings.

The state in Islam should not halt the public life of the people, thereby exceeding its mandate in looking after the affairs. Isolating people in their homes leads to paralyzing life, which leads to increasing and exacerbating the crisis, and causing other problems. Therefore, the Khilafah State cannot rush to take these measures as a primary step; rather, they must be taken as a last resort. Thus, the Khaleefah does not prohibit the lawful activities of the people, such as trade, conducting business, seeking their provision, and their obligatory acts of worship. These restrictions cannot be implemented except within what the Shariah rulings permit. Normal daily life is a right for those under the ruler's care, and it is not permissible to

restrict it except by Shariah and individual necessity, and even in this case, consideration should be given to the possibility of limiting these restrictions by time or place.

Preparedness for Emergency Situations

The Islamic State was a first-class welfare state that maintained its readiness and preparedness for the outbreak of epidemics and confronting pandemics in the past with the best means. It is imperative for it in the present to have emergency plans to deal with such possibilities.

The main aspects of preparedness and readiness for such possibilities include the following:

- A good public health system that closely monitors pandemics and sends information to the central health department, which notifies the highest authority of what is necessary.
- This system must be used to organize testing and vaccination in local areas to help facilitate quarantine if necessary. (In Islamic countries, there are masajid in every area, which may make them, when necessary, a place in the community to be used as part of the necessary infrastructure).
- Advance planning for the resources needed to conduct tests, protect staff, link them to laboratories in the state, and transport equipment from other regions of the state.
- The existence of a degree of additional buffer (precaution/capacity) in the system during normal times in order to be able to prepare, be ready, and deal with emergency times. Therefore, it is not permissible to operate the systems with the minimum resources during normal times; rather, the correct method is to operate services in normal times with a percentage of additional capacity so that it can be increased to meet emergency requirements. This can include diverting industrial

oxygen supplies for medical use, or asking private industry to produce certain medical equipment such as ventilators or protective clothing.

Global Healthcare

Global health is the health of people in the global context. Progress in the field of global health faces challenges represented by global health issues such as rampant epidemics like COVID-19, environmental factors, economic disparities, political factors—including migration and refugees—non-communicable diseases such as heart disease, cancer, and diabetes, animal health, food sources, and supplies.

The recent case of the COVID-19 pandemic showed that global leadership in coordinating responses to global health challenges failed and fell short, whether in terms of epidemiological investigation, developing treatments and vaccines, or ensuring their adequate distribution to all countries. In the case of the Coronavirus pandemic, we did not see any global leadership or coordination, nor any fair or effective solution to deal with this epidemic, neither from the rich colonial capitalist states, nor from what is called the World Health Organization. Initially, some of them downplayed the size of the problem, then they were selfish in providing vaccine sources (what became known as "vaccine nationalism").

International health agencies, which are supposed to be independent organizations serving the purposes of global disease monitoring, coordinating health responses, and providing healthcare, face two types of general criticisms:

First: Their actions cannot be considered independent of the major powers in the world, because their funding depends on those states, and therefore they are threatened by them. There is no greater proof of this than the exchange of international accusations of control, hegemony, and politicization practiced by

these states themselves. US President Donald Trump attacked the World Health Organization, accusing it of being a "politicized" organization that does not consider the interests of the United States in exchange for maximizing the interests of China. As a result of this bias, Trump decided on April 14, 2020, to completely cut off funding from the organization, even though it is the largest source of funding in its declared budget.

Second: Their integrity has been compromised due to a variety of issues. One of the most prominent was the United States' use of the internationally funded polio vaccination program to gather intelligence on the whereabouts of Osama bin Laden, as reported on the BBC Arabic website on 10/10/2019. Consequently, health aid workers are viewed with suspicion in Pakistan. In 2000, two French authors, journalist Bertrand Defau and economics professor Bertrand Lemennicier, published a book titled "The World Health Organization: The Sinking Ship of Public Health; Deviations and Failures of the United Nations." In their book, they presented numerous corruption cases proving the WHO's involvement in bias towards economic and political interests that conflict with the interest of global health. Defau added a number of corruption cases in which the WHO was implicated due to its loss of independence, including the issue of the health-damaging baby formula products manufactured by Nestlé specifically for the markets of poor countries.

International organizations in general are based on foundations other than Islam or implement rulings other than the rulings of Islam, such as the United Nations, the International Court of Justice, the International Monetary Fund, the World Bank, and the World Health Organization. Therefore, it is not permissible for the Islamic State to participate in them or be a member of these organizations, as concluding agreements and treaties with these organizations contributes to strengthening them morally. This is because the foundation upon which such international and local organizations are established is prohibited

by the Sharia. The United Nations is based on the capitalist system, which is a system of Kufr (disbelief), in addition to being a tool in the hands of the major powers, especially America, which harnesses it to impose its hegemony over smaller states, including the existing states in the Islamic world. Therefore, we see that the major powers only sign agreements that guarantee their interests at the expense of other states. As for the teams of international organizations and the rescue and relief teams belonging to the disbelieving states, they are prevented from entering the country under the pretext of assisting in the relief effort. This is because such organizations, hiding behind the slogans of humanity and aiding the afflicted, usually exploit disasters to enter the country for missionary work, such as the Christianization attempts that occurred after the tsunami that struck Indonesia, or to kidnap children, as happened with the French organization that attempted to kidnap Chadian children, or for political or intelligence work and supporting rebel groups and stirring up seditions (Fitna), as happened in Darfur in Sudan. The harm of these organizations definitively outweighs their benefit; indeed, their entry into Dar al-Islam, even under the pretext of relief, paves the way for sowing seditions and establishing an authority for the states of Kufr over the Islamic State. Allah ﷻ says,

﴿وَلَنْ يَجْعَلَ اللَّهُ لِلْكَافِرِينَ عَلَى الْمُؤْمِنِينَ سَبِيلًا﴾

“And never will Allah give the disbelievers over the believers a way of authority” [An-Nisa: 141]. Foreign aid from the funds and private resources of colonial and greedy states is also prevented from entering the state because it is usually a means to smuggle weapons or pave the way towards establishing interests for the states of Kufr inside the country. Conversely, if the disaster is in one of the states of Kufr, the Islamic State may assist in relief efforts by sending specialized teams or aid, according to what the Khaleefah sees as an interest for the state and for the Dawah to

Islam, provided that this aid does not lead to strengthening the stricken state militarily.

Work must be done to destroy these current international organizations instead of strengthening them by participating in them and concluding treaties and agreements with them. They must be replaced with new global organizations over which the great powers have no hegemony or authority, and which do not act as a global state. Rather, these new organizations should be based on respecting universally recognized rules among all human groups, which are approved by Islam, such as rendering justice to the oppressed, preventing injustice, and what is known as ambassadorial immunity... and so on. Consequently, spreading justice among all of humanity, with the moral power they enjoy, and the power of global public opinion that supports them, grants them its backing, and gives them its respect and trust; because they are organizations that do not work on behalf of any single state, but rather work for the interest of all humanity. They would be like the Hilf al-Fudul (Alliance of Virtue) which was established before the Prophetic mission, where they pledged to remove injustice and render justice to the oppressed. The Messenger of Allah ﷺ attended it and said about it after the mission, «لَقَدْ شَهِدْتُ فِي دَارِ عَبْدِ اللَّهِ بْنِ جُدْعَانَ حِلْفًا مَا أَحَبُّ أَنْ لِي بِهِ حُمْرَ النَّعَمِ، وَلَوْ» **“I witnessed a pact in the house of 'Abdullah bin Jud'an which I would not exchange for red camels, and if I were invited to it in Islam, I would respond.”** [Reported by Ibn Hisham in his Seerah].

Individual Healthcare - Preventive

Preventive Healthcare for Individuals

This chapter addresses preventive medicine in the Khilafah from the perspective of individual health and focuses on community health measures that affect individual health conditions. As stated in the introduction of this book, the Shariah has obligated the Khaleefah to preserve the health of the population from an individual perspective; therefore, taking proactive steps to prevent the deterioration of individuals' health conditions becomes a necessary matter. Preventive healthcare can be classified as follows:

a) **Primary prevention:** These are the actions that prevent the onset of infection with the disease. Most public health measures are primary prevention measures. We have addressed this issue in detail previously.

b) **Secondary prevention:** These are the actions that aim to diagnose the disease early, to increase the chances of treatment in preventing the exacerbation of the disease and the appearance of its symptoms.

c) **Tertiary prevention:** These are the actions that reduce the negative effects of the occurring disease through rehabilitation and adaptation to the medical condition, and reducing the complications of the disease.

The Messenger of Allah ﷺ clarified Islam's stance towards epidemics, diseases, and preventive healthcare. From Abu Khuzamah, from his father, he said: I asked the Messenger of Allah ﷺ, saying, "O Messenger of Allah, do you see the Ruqyah (incantations) we use for healing, the medicine we use for medical treatment, and the preventive measures we take, do they repel anything from the Qadar (decree) of Allah?" He said, «هِيَ مِنْ قَدَرٍ» **«They are from the Qadar of Allah.»** [Reported by At-Tirmidhi]

who said: “A Hasan Sahih Hadith”]. That is, the Messenger of Allah ﷺ approved taking measures to preserve health. In addition to that, there are verses from the Quran that grant concessions to those afflicted with disease or disability, such as the saying of Allah ﷻ Who said,

﴿لَيْسَ عَلَى الْأَعْمَى حَرَجٌ وَلَا عَلَى الْأَعْرَجِ حَرَجٌ وَلَا عَلَى الْمَرِيضِ حَرَجٌ وَمَنْ يُطِيعِ اللَّهَ وَرَسُولَهُ يُدْخِلْهُ جَنَّاتٍ تَجْرَى مِنْ تَحْتِهَا الْأَنْهَارُ وَمَنْ يَتَوَلَّ يُعَذِّبْهُ عَذَابًا أَلِيمًا ۖ﴾

“There is not upon the blind any guilt or upon the lame any guilt or upon the ill any guilt [for remaining behind]. And whoever obeys Allah and His Messenger - He will admit him to gardens beneath which rivers flow; but whoever turns away - He will punish him with a painful punishment” [Al-Fath: 17].

Islam has recommended the prevention of diseases in general and directed some of its aspects in a specific manner. Thereafter, the ruler (Hakim) performs Ijtihad and uses all means and methods to preserve the health of the subjects and protect them from diseases and epidemics because he is commanded to look after their affairs and remove harm from them, and disease is a type of harm. Many directives have been reported from the Messenger ﷺ regarding the preservation of individual health through instructions on personal hygiene, healthy food, and a healthy lifestyle, in addition to population directives. It was narrated from Abdullah bin ‘Amr bin Al-‘Aas (ra) who said: The Messenger of Allah ﷺ said to me, «يَا عَبْدَ اللَّهِ أَلَمْ أُخْبِرْ أَنَّكَ تَصُومُ النَّهَارَ وَتَقُومُ اللَّيْلَ؟ فَقُلْتُ: بَلَى يَا رَسُولَ اللَّهِ. قَالَ: فَلَا تَفْعَلْ صُمْ وَأَفْطِرْ وَقُمْ وَإِنْ لَجَسَدِكَ عَلَيْكَ حَقٌّ وَإِنْ لِعَيْنِكَ عَلَيْكَ حَقٌّ وَإِنْ لِرَوْحِكَ عَلَيْكَ حَقٌّ وَإِنْ لِرَوْحِكَ عَلَيْكَ حَقٌّ» “O Abdullah, have I not been informed that you fast the day and pray the night? I said: Yes, O Messenger of Allah. He said: Do not do that. Fast and break your fast, pray and sleep, for your body has a right over you, your eye has a right over you, your wife has a right over you, and your visitor has a right over you.”

The history of Islam during the time of the Rightly Guided caliphs (Khulafaa ar-Rashideen) and the Khulafaa’ in

subsequent periods shows a refined and scientific approach to preventive healthcare. It also indicates that Islam did not only provide free healthcare provided by the state as an obligation to the subjects of the Khilafah, but preventive healthcare also formed the cornerstone of its healthcare policy. From studying the approach of the Messenger ﷺ and the policies of the Khilafah State, it is necessary to give priority to preventive healthcare policies for the upcoming Khilafah, Allah willing, which today require reaffirmation, unlike other contemporary global healthcare systems, where pharmaceutical intervention driven by the profit-motivated pharmaceutical industry has become the prevailing approach.

Data Collection and Monitoring Individual Health by the State

In high-income countries, systems are in place to collect information on the circumstances of death. However, many low- and middle-income countries do not have such systems, and the number of resulting deaths for specific cases is estimated from incomplete data. Improvements in producing high-quality data on mortality cases are necessary to improve the level of healthcare and prevention in these poor countries. It is extremely important not to limit monitoring to the manner of death only, but diseases that require medical treatment and hospital admission should also be monitored. Thus, the state collects data on the degree of the disease burden within society in order to formulate population health policies and priorities. Health policy in general must be guided by the health status of the individuals under the ruler's care. In the Khilafah State, the duty of providing healthcare falls entirely on the shoulders of the state, and it is the responsibility of the Khaleefah, who works to provide it. It is documented that many hospitals in both the Umayyad and Abbasid eras were funded from the state treasury, i.e., Bayt al-Mal. During the Khilafah of Umar bin Al-Khattab (ra), the population census

included records of subjects receiving aid from the state, and it included subsidies for newborns. Nevertheless, Muslims are permitted to make charitable donations (Waqf) that the state can provide to facilities in the healthcare system, such as hospitals and research centers.

Local health departments in the Khilafah State must collect data on the health status of the individuals under the ruler's care in the 'Amalat (districts) and Wilayat (provinces), and the incidence and spread of diseases in each of its regions; so that the data directs the state's focus on providing healthcare to meet local needs.

The necessary health data for individual prevention is as follows:

a- Incidence rate of infectious and non-infectious diseases: All major infectious diseases can be monitored through a central disease control authority, while non-infectious diseases can be monitored through health departments in the regions.

b- Congenital (birth) diseases and disabilities: The Khilafah must establish a database for the population with disabilities, whether congenital or accidental, and provide all necessary care measures according to the need, in accordance with the rights of those under the ruler's care. Certain categories are granted special subsidies from the state, such as those suffering from congenital disabilities, or those who suffered disabilities in their workplaces, or soldiers who were injured during Jihad.

c- The patient's health record and medical history: Healthcare in the Khilafah State establishes patient records from birth until death. These records are kept under strict confidentiality measures with restricted access; where the patient's doctor or the responsible doctor in the case of a new examination regulates access to the patient's records. Sultan Nur al-Din Zengi built Al-Nuri Hospital in Damascus in 1156 CE during the era of the war against the Crusaders, and the hospital was intended to function

not only as an important health institution but also as a medical school with medical records. In 1185 CE, the traveler Ibn Jubayr wrote about the “brilliant method” by which the hospital kept medical records for each patient, including the medicines prescribed to them.

d- The patient's genetic profile and their disease susceptibility tests: The health service of the upcoming Khilafah aims to provide the best possible healthcare to the individuals under its care. A pioneering innovation in medical treatment technology has emerged through the application of genetic technologies. The discovery of the genetic sequence or the entire human genome was a prominent scientific milestone at the beginning of the twenty-first century; and with new DNA sequencing technologies, a complete human genome sequence can be found for any patient in approximately one day at a cost of about \$1000. With the emergence of new scientific medical data and through the application of information system technologies such as machine learning and artificial intelligence, an individual's genome will be interrogated to determine susceptibility to serious diseases, which can guide health trends in the individual's life and the nature of medical intervention to prevent the disease. The NHS website in the United Kingdom states that the systematic application of genomic technologies has the potential to accelerate patient treatment by:

- The ability to diagnose faster for patients suffering from rare diseases, instead of spending years of uncertainty in what is referred to as the “diagnostic odyssey” due to the long period of finding the diagnosis of the disease.
- Matching people with the most effective medicines and therapeutic interventions, which reduces the likelihood of adverse drug reactions.
- Increasing the number of cancer survivors each year due to accurate early diagnosis and more effective use of treatments.

Therefore, the Khilafah State must work to provide a service of establishing a human genome database to meet the needs of patients, with the patient's consent, for the purpose of providing genetic technologies to support the preventive healthcare policy. The privacy of the individual's genetic code must be preserved and monitored strictly and restrictively.

Regarding personalized preventive medicine, screening examinations are often referred to as secondary prevention. A committee of specialized doctors determines the diseases for which the state must provide screening examinations. Certain conditions must be met in the disease for which a screening examination is intended to detect, such as: the disease must pose a serious health problem, there must be a treatment for the disease, the screening test for the disease must have a high diagnostic capability, and there must be a period in the course of the disease during which the disease is latent and hidden.

School Nursing

There must be nurses in all schools who regularly monitor the health status of the students. These nurses follow up on the students' health, provide first aid, and track their receipt of necessary vaccinations. If they find health problems, they can refer them to primary healthcare services. School nurses also monitor and report any health concerns they find through their observation of pupils and students to their teachers and families for health follow-up and to ensure the continuity of the child's health safety. School nurses provide health guidance and counseling to students, their families, and the school's teaching staff through periodic seminars and health alerts.

Educating the Public About Individual Health and Nutrition

The origin of urging medical treatment and health well-being in the first Islamic State is evident in much of the guidance

of the Messenger of Allah ﷺ. There are Ahadith confirming that good health is a blessing from Allah ﷻ for which Muslims should pray. From Aisha (ra) she said: The Messenger of Allah ﷺ used to say, «اللَّهُمَّ عَافِنِي فِي جَسَدِي وَعَافِنِي فِي بَصَرِي وَاجْعَلْهُ الْوَارِثَ مِنِّي لَا إِلَهَ إِلَّا اللَّهُ» «O Allah, grant me well-being in my body, and grant me well-being in my sight, and make it the inheritor from me. There is no deity but Allah, the Forbearing, the Generous. Glory be to Allah, Lord of the Great Throne, and all praise is due to Allah, Lord of the worlds.” [Abu Isa said this is a Hasan Gharib Hadith]. And in Bukhari from Ibn Abbas (ra) that the Messenger of Allah ﷺ said, «نِعْمَتَانِ مَغْبُونٌ فِيهِمَا كَثِيرٌ مِنَ النَّاسِ الصِّحَّةُ وَالْفَرَاغُ» “There are two blessings which many people lose: health and free time.” There are Prophetic Ahadith reminding people of the body's rights to get an adequate amount of sleep, encouraging recreation and exercising, advising eating healthy foods in moderation, the obligation of personal hygiene and purification, and also the importance of the tranquility of hearts through the remembrance of Allah. From Aisha (ra) «أَنَّ النَّبِيَّ ﷺ بَعَثَ إِلَى عُثْمَانَ بْنِ مَظْعُونٍ فُجَاءَهُ، فَقَالَ: يَا عُثْمَانُ، أَرِغِبْتَ عَنْ سُنَّتِي. قَالَ: لَا وَاللَّهِ يَا رَسُولَ اللَّهِ، وَلَكِنْ سُنَّتَكَ أَطْلُبُ. قَالَ فَإِنِّي أَنَامُ وَأَصَلِّي وَأَصُومُ وَأُفْطِرُ وَأُنْكِحُ النِّسَاءَ، فَاتَّقِ اللَّهَ يَا عُثْمَانُ. فَإِنَّ لَأَهْلِكَ عَلَيْكَ حَقًّا، «The Prophet ﷺ sent for Uthman bin Maz'un, and he came to him. He said: ‘O Uthman, have you turned away from my Sunnah?’ He said: ‘No, by Allah, O Messenger of Allah, but it is your Sunnah that I seek.’ He said: ‘Indeed, I sleep and I pray, I fast and I break my fast, and I marry women. So fear Allah, O Uthman. For your family has a right over you, your guest has a right over you, and your own self has a right over you. So fast and break your fast, and pray and sleep.’” [Reported by Abu Dawud in his Sunan].

On the subject of nutrition and healthy eating, many texts indicate the importance of healthy eating. For example, Allah ﷻ said,

﴿يَا أَيُّهَا النَّاسُ كُلُوا مِن مَّا فِي الْأَرْضِ حَلَالًا طَيِّبًا وَلَا تَتَّبِعُوا خُطُوَاتِ الشَّيْطَانِ إِنَّهُ لَكُمْ عَدُوٌّ

مُبِينٌ ﴿٢٨﴾

“O mankind, eat from whatever is on earth [that is] lawful and good and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy” [Al-Baqarah: 168]. And He ﷻ also says:

﴿ثُمَّ كُلِي مِنْ كُلِّ الثَّمَرَاتِ فَاسْلُكِي سُبُلَ رَبِّكِ ذُلًّا يَخْرُجُ مِنْ بُطُونِهَا شَرَابٌ مُخْتَلِفٌ أَلْوَانُهُ فِيهِ شِفَاءٌ لِلنَّاسِ إِنَّ فِي ذَٰلِكَ لَآيَةً لِّقَوْمٍ يَتَفَكَّرُونَ﴾

“Then eat from all the fruits and follow the ways of your Lord laid down for you. There emerges from their bellies a drink, varying in colors, in which there is healing for people. Indeed, in that is a sign for a people who give thought” [An-Nahl: 69]. The Messenger of Allah ﷺ also emphasized the importance of nutrition and healthy foods. From Abdullah bin Mas’ud (ra), he said: The Messenger of Allah ﷺ said, «مَا أَنْزَلَ اللَّهُ دَاءً إِلَّا أَنْزَلَ لَهُ دَوَاءً، فَعَلَيْكُمْ بِأَلْبَانِ الْبَقَرِ، فَإِنَّهَا تَرُمُ مِنْ كُلِّ الشَّجَرِ» “Allah has not sent down a disease except that He sent down a medicine for it. So you should drink cow’s milk, for they graze from every tree.” [Reported by Ibn Hibban in his Sahih]. In addition to eating healthy foods, the Prophet ﷺ also warned against overeating. He ﷺ said, «مَا مَلَأَ أَدَمِيَّ وَغَاءَ شَرًّا مِنْ بَطْنٍ بِحَسْبِ ابْنِ آدَمَ أَكَلَاتِ يَقْمَنَ صَلْبُهُ فَإِنْ كَانَ لَا مَحَالَةَ فَثُلُثَ لَطْعَامِهِ وَثُلُثَ «A human being fills no worse vessel than his stomach. It is sufficient for a human being to eat a few mouthfuls to keep his spine straight. But if he must fill it, then one third for his food, one third for his drink, and one third for his breath.” [Reported by At-Tirmidhi who said: “A Hasan Sahih Hadith”].

These texts demonstrate the importance that Islam placed on nutrition and healthy eating since the early days of the Islamic State. Indeed, the period of the Rightly Guided Khulafaa’ was distinguished by health safety policies that focused specifically on providing food for the poor, the elderly, and mothers with newborn children, thereby ensuring food sufficiency.

Today, however, the world under the control of capitalism is characterized by extremism at both ends of global nutrition, between obesity and wasting. The 2020 Global Nutrition Report

states that among children under five, 149 million are stunted, 49.5 million are wasted, and 40.1 million are overweight. There are 677.6 million adults who are obese. Globally, 1 in 9 people suffer from hunger, while 1 in 3 suffer from being overweight or obese. The “double burden of malnutrition” is increasing; where undernutrition coexists with overweight and increasing rates of overweight and obesity in almost every country in the world.

Under these circumstances, the Khilafah State must restore the Islamic lifestyle for nutrition and healthy eating rooted in the Quran and Sunnah. Bukhari reported from Abu Hurairah: A man used to eat a lot, then he embraced Islam and started eating a little. That was mentioned to the Prophet ﷺ and he said, «إِنَّ الْمُؤْمِنَ يَأْكُلُ فِي مَعَى وَاحِدٍ وَالْكَافِرَ يَأْكُلُ فِي سَبْعَةِ أَمْعَاءٍ» **“A believer eats in one intestine, and a disbeliever eats in seven intestines.”** Thus, the believer eats with the etiquette of the Shariah, while the disbeliever eats according to desire, greed, and gluttony.

The Khilafah State educates those under its care in their daily lives about the importance of maintaining a balanced diet based on eating in moderation, without extravagance, and with healthy food quality, alongside its veterinary and agricultural policies that ensure the safety and quality of food production using the latest methods compatible with healthcare objectives.

Prevention of Infectious Diseases

The Islamic State’s attention to preventing infection indicates highly advanced healthcare in a state that was ahead of all other states, whether through disease containment measures or through quarantine, individual behavior, and social practices. Muslim reported in his Sahih from Jabir bin Abdullah who said: The Messenger of Allah ﷺ said, «غَطُّوا الْإِنَاءَ وَأَوْكُوا السِّقَاءَ، فَإِنَّ فِي السَّنَةِ لَيْلَةً يَنْزِلُ فِيهَا وَبَاءٌ لَا يَمُرُّ بِإِنَاءٍ لَيْسَ عَلَيْهِ غُطَاءٌ أَوْ سِقَاءٍ لَيْسَ عَلَيْهِ وَكَاءٌ إِلَّا نَزَلَ فِيهِ مِنْ ذَلِكَ الْوَبَاءُ» **“Cover the vessels and tie the waterskins, for there is a night in the year when a pestilence descends, and it does not pass by a vessel that**

has no cover or a waterskin that is not tied except that some of that pestilence descends into it.” Other Ahadith have been reported forbidding breathing or blowing into vessels containing drink or food. From Ibn Abbas (ra), «أَنَّ النَّبِيَّ ﷺ نَهَى أَنْ يُتَنَفَّسَ فِي الْإِنَاءِ أَوْ يُنْفَخَ فِيهِ» **“The Prophet ﷺ forbade breathing into the vessel or blowing into it”** [Abu Isa said: “This is a Hasan Sahih Hadith”]. And from Abu Sa’id Al-Khudri, «أَنَّ النَّبِيَّ ﷺ نَهَى عَنِ النَّفْخِ فِي الشُّرْبِ» **“The Prophet ﷺ forbade blowing into the drink”** [Reported by At-Tirmidhi who said: “This is a Hasan Sahih Hadith”]. It is established in modern epidemiology that the transmission of bacterial and viral pathogens occurs through the contamination of surfaces by droplets, as transmission via inanimate objects. In fact, in the current COVID-19 pandemic, the main focus of public health prevention was on maintaining physical distancing and handwashing because the SARS-CoV-2 virus is transmitted through vapor droplets originating from the upper respiratory tract of infected people when they breathe or speak closely or contaminate surfaces accordingly. It is clear that the aforementioned Ahadith provide important guidance on personal behavior that would reduce droplet transmission. There is an urgent need to implement the rulings of Islam related to this prevention.

Vaccination of the Population

Vaccination is a means to develop immunity against pathogens such as viruses and germs, by introducing harmless parts of these pathogens into the body or parts of synthetic genetic material to stimulate the natural immune system to produce antibodies against the more dangerous pathogens. Vaccines can eliminate the transmission of pathogens in society if a sufficient level of immunity is achieved within the society. If 90% of people receive a vaccination against a specific pathogen, the rest of the people who did not receive the vaccination directly will be relatively safe from the disease because the pathogen becomes rare in such a group, reducing the likelihood of exposure to it.

This is what is called herd immunity. Despite the significant public doubts regarding the safety of vaccines and the motives behind vaccination programs in Western countries due to the rise of popular anti-vaccine movements, there is ample evidence supporting population vaccination programs as a pivotal measure for preventive healthcare. Vaccination is part of primary health prevention if the relevant Shariah rulings are observed, along with honesty and integrity among those in charge of this matter, so that the actual intent of vaccination is disease prevention and not profit-making aspects and the like.

a) The Historical Use of Vaccines and Their Effectiveness

The Western education system attributes the credit for “discovering” the mechanism of vaccination to the research of the British physician Edward Jenner in 1796 for his use of the cowpox vaccine to develop immunity against smallpox. However, it is known through multiple sources that population-level vaccination against smallpox was a common practice in the early Eighteenth Century CE in the Ottoman Khilafah. The difference between the method used during the Ottoman era and Edward Jenner’s method lies in the fact that Ottoman doctors used to remove fluids from the pustules of an infected person to perform the inoculation, whereas Edward Jenner removed the fluid from the pustules of infected cows; hence Edward Jenner’s method was called vaccination, derived from the Latin word “vacca” which means “cow.” By using vaccination, some deadly infectious diseases in history have been eradicated worldwide, including smallpox in 1980 and polio recently. UNICEF estimates a 73% reduction in deaths caused by the deadly measles disease in children following international vaccination programs worldwide between 2000 and 2018. Recently, all countries except 12 have eliminated maternal and neonatal tetanus, a disease that has a mortality rate ranging between 70% and 100% among newborns.

b) Islam's View Towards Vaccines and Their Use in the Khilafah State

Vaccination is a type of medical treatment, and it should be a key element in the preventive healthcare program in the Rightly Guided Khilafah. Driven by the obligation to care for the health of its subjects and seeking the Riḍwānu Allāh, the Khilafah will work to develop new vaccines for many infectious diseases with high prevalence in poor countries, such as malaria, dengue fever, tuberculosis, African trypanosomiasis, leishmaniasis, and Chagas disease. All of these are diseases that the capitalist pharmaceutical industry has historically neglected because they lack potentially profitable markets.

Due to the importance of vaccination and its effectiveness in preventing diseases, the Islamic State provides this healthcare to its population for free, according to a specific program divided by age groups, determined by specialists by balancing the extent of the spread of the pathogens of the disease to be vaccinated against and the severity of the resulting disease, with the side effects of the vaccination itself. Newborns are vaccinated in hospitals and maternity wards, children in maternal and child health centers, school students in their schools, and older individuals in the army or in primary healthcare centers. Priority should be given to vulnerable groups such as the elderly for influenza vaccination, and pregnant women and newborns for tetanus vaccination. Vaccination is either mandatory or optional, depending on its relation to removing harm from the community. If the disease to be vaccinated against is dangerous and contagious, the individual is compelled to receive the vaccination, so as not to expose other members of society to the risk of contracting the disease, and so that what is called herd immunity is formed. Exempted from those compelled to receive the vaccination is anyone who has an allergy to the vaccination, or is afflicted with a weakness in the immune system such that the vaccination itself would be a danger to him; the protection of these individuals from the disease is through

general immunity. As for diseases that do not cause harm to the community, such as the disease being non-contagious or not dangerous to the community, the individual is given the choice to receive the vaccination against it. The Khilafah State guarantees the rigorous testing of any new medicine or vaccine to verify its safety before offering it to its citizens or compelling them to take it. He ﷺ said, «لَا ضَرَرَ وَلَا ضِرَارَ، مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» **“There should be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad according to the conditions of Muslim”]. Nevertheless, in cases where the disease burden is severe or reaches an epidemic state, the Khaleefah may decide to mandate vaccination in order to prioritize public health. Experts from the Hisbah apparatus in the Islamic State undertake the monitoring of any violation of the public rights of the citizens regarding the taking of these vaccines and the applicability of the standards set by the state in terms of compulsion or choice.

There may be global vaccination programs carried out by international organizations such as the World Health Organization or other countries to eradicate a specific disease from the world, as in the case of smallpox, and the Islamic State is requested to participate in them. In such a case, the Islamic State must stipulate that it reviews all information related to the vaccination, its side effects, and its program, and that the vaccine intended to be provided to the subjects of the Islamic State is manufactured in the state's factories and under the supervision of its departments and specialists, and is administered to those under the ruler's care by the health apparatuses of the Islamic State and under its supervision. It is not accepted for delegates from the World Health Organization or from other countries to undertake these tasks.

Screening Examinations for Non-Communicable Diseases - Secondary Prevention

A screening examination is an examination conducted for a group of those under the ruler's care to detect disease in individuals who do not show symptoms or signs of the disease. Unlike standard medical examinations, a screening examination is conducted for individuals who do not show any sign of disease, but this is in the case where the competent health department believes that this examination helps in discovering hidden diseases.

As for the goal of screening examinations, it is to detect the disease in a society early; so that the healer can intervene and treat early to reduce suffering from the disease and raise the success rate of the treatment. For example, newborns are routinely tested to detect phenylketonuria (PKU), a condition that can lead to mental impairment without dietary interventions, which results in saving the lives of a large number of newborns.

The Khaleefah decides, in consultation with the experts of the Public Healthcare Department, whether screening examination programs are mandatory or voluntary. The individuals under the ruler's care are not compelled to undergo screening examinations unless their refusal results in harm afflicting the rest of those under the ruler's care, due to the prohibition of harm by the Shariah principle and the Hadith: «لَا ضَرَرَ وَلَا ضِرَارَ» “There should be neither harming nor reciprocating harm.”

Oral and Dental Health

Global oral health programs emphasize that oral health is an integral part of public health, and that oral health is a determining factor for the quality of life. Oral, gum, and dental diseases constitute a widespread health problem. Tooth decay alone affects between 60-90% of school students and the vast majority of

adults in most industrialized countries, and the same applies to gum diseases. Dental diseases cause suffering and pain, and they also affect the soundness of pronunciation and speech, and alter the odor of the mouth and the beauty of the person, not to mention chewing and eating problems. Islam has paid attention to oral health and its purity and urged caring for it, and linked it to attaining the Riqdānu Allāh. The Messenger ﷺ said in what was reported by Ahmad, An-Nasa'i, Ibn Hibban, and Ibn Khuzaymah, and authenticated by An-Nawawi, «السِّوَاكُ مَطْهَرَةٌ لِلْفَمِ مَرْضَاةٌ لِلرَّبِّ» **“The Miswak is a purification for the mouth and pleasing to the Lord.”** And he ﷺ said, «لَوْلَا أَنِ أَشُقُّ عَلَى أُمَّتِي لِأَمْرَتِهِمْ بِالسِّوَاكِ عِنْدَ كُلِّ صَلَاةٍ» **“Were it not that it would be too difficult for my Ummah, I would have commanded them to use the Miswak at every Salah (prayer)”** [Reported by Bukhari, Muslim, and others]. And he ﷺ said, «لَوْلَا أَنِ أَشُقُّ عَلَى أُمَّتِي لِأَمْرَتِهِمْ بِالسِّوَاكِ عِنْدَ كُلِّ وُضُوءٍ» **“Were it not that it would be too difficult for my Ummah, I would have commanded them to use the Miswak with every Wudu (ablution)”** [Reported by Bukhari]. The use of the Miswak by Muslims during Wudu continues to be practiced on a wide scale today. The Ahadith indicate the importance that Islam placed on the element of personal hygiene since its inception and the role of the Miswak as a means to achieve oral cleanliness. It has been reported that the Messenger ﷺ asked his wife to clean his teeth with the Miswak while he was on his deathbed, and this was among his last worldly actions. How then could dental health and oral healthcare not inevitably be a fundamental part of the preventive healthcare policy of the Khilafah State?

Islam has forbidden eating garlic and onions if a Muslim goes to congregational prayer so that his brother does not smell an unpleasant odor from him and be harmed by it. He ﷺ said in what was reported by Bukhari, «مَنْ أَكَلَ ثُومًا أَوْ بَصَلًا فَلْيَعْتَزِلْنَا، أَوْ لِيَعْتَزِلْ مَسْجِدَنَا» **“Whoever has eaten garlic or onion, let him keep away from us, or let him keep away from our masjid.”** Neglecting oral and dental care leads to their foul odor and harms Muslims from this smell.

The Khilafah State must provide free healthcare provided by the state as an obligation for the dental health of children up to the age of puberty. It must conduct oral health examinations for all subjects periodically, especially children in various stages of school education; to monitor the growth of their teeth, detect diseases and early tooth decay, and treat them. It must also focus on teaching the importance of oral hygiene and dental care through education on the relevant Shariah rulings first; then through public media campaigns aimed at raising people's awareness of the importance and methods of maintaining oral and dental health, or through policies adopted by the state to protect teeth from decay and reduce its incidence rates.

Women's and Children's Health

Under the current global capitalist system, the mortality rate of women and children remains unacceptably high in poor countries due to the lack of adequate healthcare. For example, according to the World Health Organization, 295,000 women died during or following pregnancy and childbirth in 2017. The vast majority of these deaths (94%) occurred in low-resource settings, and Sub-Saharan Africa and Southern Asia accounted for approximately 86% (240,000) of the estimated global maternal deaths in 2017.

As for Islam, it urges marriage, procreation, and multiplication. Based on this, attention is given to healthcare for mothers before pregnancy, during pregnancy, and after it, and there is healthcare for children and monitoring of their healthy growth until the age of puberty. Care for pregnant women, newborns, and prepubescent children requires follow-ups of their health condition at regular intervals. To achieve this, "Maternal and Child Health Centers" are established in every residential area. The center consists of a team including a doctor, a nurse, a dietitian, and a social worker, all of whom have additional

qualifications in maternal and child health and public health. This center is affiliated with the primary or comprehensive health center in every 'Amalah (district). Each center enumerates all women and children in the neighborhood in a database and is responsible for them and for monitoring their health condition.

The objectives of the Maternal and Child Health Centers are:

1. Preventing infectious diseases through vaccination and monitoring the administration of vaccine doses.
2. Early detection of health problems through periodic screening examinations.
3. Monitoring health problems in the community and taking the necessary measures.
4. Providing counseling to improve health, prevent diseases, and encourage procreation.

As for married women who have not yet conceived, healthcare undertakes awareness and education regarding women-related issues and preparation for pregnancy and childbirth through public lectures, booklets, films, and appropriate means distributed by the Maternal and Child Health Centers. A special team from the Health Department, possessing experience and an interest in making the information simple, uncomplicated, and useful at the same time, supervises the issuance of all these materials, taking into consideration any variations in the customs and traditions of each 'Amalah, as well as the suitability of these guidelines and awareness for them.

Maternal and Child Health Centers track diseases that may affect the mother or fetus during pregnancy, and provide treatment or counseling. Healthcare in the Khilafah State gives special attention to women's health, just as the Khilafah State did during the era of the Rightly Guided Khulafaa'. It was

narrated about Umar bin Al-Khattab (ra) that he was keen on looking after the needs of women such as widows, the elderly, and women whose husbands were absent in Jihad. Therefore, the state places screening examinations for women's health at the forefront of its public screening examination policy in the state, during pregnancy, and also outside of pregnancy, such as periodic screening for early detection of breast cancer. Likewise, women should be provided with midwives during and after the childbirth period.

The Khilafah State must work to train a sufficient number of female specialists in women's health. Although it is permissible for men to treat women and for women to treat men within the rulings of Shariah, it is preferable that women supervise the medical treatment and monitoring of women. Therefore, it is necessary to provide a sufficient number of female specialists in gynecology and maternal and child health. Furthermore, the Khilafah State must investigate in detail the cases of maternal mortality in the lands of the Muslims, and strive to rectify and treat these cases, whether they are related to bleeding or infections during or after childbirth. Children must receive monitoring and care while they are fetuses before and after birth by the healthcare administration, and this includes therapeutic interventions even while they are fetuses. It also includes checking growth, nutrition, and children's vaccinations, and their compliance with the best health standards.

Occupational Health and Safety

Occupational health and safety is a field concerned with preserving the health and safety of the worker or employee in the country by providing occupational protection for him through reducing the danger of equipment, machinery, materials used, and the products of these materials, reducing the danger of the workplace towards the workers, attempting to prevent accidents or occupational diseases, and providing a sound occupational

atmosphere that helps workers to work safely. According to a survey study by the World Health Organization in 2009, nearly one million deaths occur annually in work condition cases. These are related to exposure to harmful substances such as asbestos, dangerous chemicals, biological hazards, and particulates that lead to respiratory system diseases.

Preserving the health of the Ummah's workforce is an important element in the preventive healthcare system in the Khilafah. The state must verify that all employers provide safe work practices and safe work environments in order to reduce the risk of physical or psychological injury to their hired workers, or from exposure to substances that may cause disease or health impairment sooner or later. The Hisbah (Inspections) apparatus in the Khilafah State monitors work practices and also monitors work environments and ensures their compliance with the technical standards prepared by the Health Department. This includes verifying the use of personal protective equipment wherever necessary, and it also includes adopting other disciplinary measures to reduce health risks, i.e., such as preventing the risks of fire outbreak, explosion, or exposure to harmful substances. These measures also include, wherever appropriate, monitoring workers working in specific types of professions that are likely linked to specific diseases, such as working in industries that produce particulates leading to lung diseases, like construction work and the manufacturing of paints, detergents, and others.

The Shariah basis for such a policy is built upon the state's responsibility towards those under its care and upon the requirement of not harming people. He ﷺ said, **«لَا ضَرَرَ وَلَا ضِرَارَ، مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ»** **“There should be neither harming nor reciprocating harm. Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause hardship to him.”** The Prophet ﷺ forbade burdening the worker beyond his capacity, so

he is not asked to do what he is incapable of or what exhausts him. Muslim reported in his Sahih that the Prophet ﷺ said, «الْمَمْلُوكُ طَعَامُهُ» **“A slave is entitled to his food and clothing, and he should not be burdened with work except what he can bear.”** Therefore, the Muhtasib in the state prevents employers and hirers from transgressing against workers or hired hands by exhausting them or burdening them with what would harm their health. The Muhtasib also compels the employer or the hirer to adhere to safety standards and reduce danger in the work environment, and this is from the perspective of prevention and preventing the occurrence of harm.

Individual Healthcare – Therapeutic Management for Individuals

The Burden of Therapeutic Management for Individuals Is Lower Under the Khilafah State Than in the Capitalist World Due to the Establishment of Islam's Systems in Society

The general focus in the Khilafah State is on preventive health, early intervention, and better care for physical health and mental safety; however, the responsibility falls upon the Islamic State to look after the health needs of individuals affected by diseases and to establish effective systems for treating individuals. This burden under the Khilafah State will be less than the burden in the capitalist world because capitalist systems have health problems resulting from excessive freedom, such as drinking alcohol and the freedom to practice sex, all of which have a massive negative impact on the health service. They also include problems resulting from the capitalist economic system regarding the concentration of wealth, utilitarian marketing, and the production of unhealthy foods which increase obesity, cardiovascular diseases, and diabetes. Likewise, a large portion of mental illnesses, such as anxiety disorder; frustration, and drug addiction are produced or worsened due to many social factors such as family breakdown, weak societal communication, the loss of spiritual values in society, and the occupational demands that have made people slaves to employers.

For example, in Britain, the cost of harm resulting from alcohol consumption is estimated at 3.5 billion pounds annually. It includes hospital treatment for physical and mental problems. As for under the Khilafah State, the consumption of alcohol (Khamr) and everything that intoxicates the mind is Haram, and this in turn removes the burden of the effects of drinking alcohol and the diseases resulting from it regarding accidents caused by alcohol consumption, trauma, liver diseases, and others. In Britain, 468,342 cases of sexually transmitted diseases were

diagnosed in 2019, costing hundreds of millions of pounds. As for in the Khilafah State, Islam restricts the relationship between men and women to marriage, which leads to the elimination of the burden of these diseases on healthcare resulting from sexual freedom. Regarding diseases related to obesity and overweight, a report issued by Public Health England on 31 March 2017 estimated that the National Health Service spent 6.1 billion pounds on diseases related to overweight and obesity. The report stated that the cost at the societal level is estimated at 27 billion pounds. It is expected that the cost of diseases related to overweight and obesity on the National Health Service in Britain will reach 9.5 billion pounds by 2050, and its cost to society may reach 49.9 billion annually. Many of these diseases arise from the production of unhealthy and modified food, and by the usurious consumer economy that brings massive profitable benefit to the fast-food industry, but at an exorbitant cost to society. In January 2019, the British Diabetic Journal published an article on the cost of treating Type 2 diabetes, which reached 12 billion pounds, estimated at 10% of the health service budget. Public Health England estimates the healthcare cost for cardiovascular disease at 7.4 billion pounds annually and the general non-healthcare cost at 15.8 billion pounds.

As for under the Khilafah State, there are various factors that reduce the size of this problem. Merchants will not be able to market or advertise on a large scale the harmful foods that have led to the obesity epidemic and its effects in the world. In addition to that, the concept of carrying the Dawah through Jihad requires preparing those under the ruler's care in general with an appropriate level of physical fitness. Moreover, adherence to the etiquette of eating in Islam reduces gluttony and obesity.

Regarding mental health, according to a report issued by the “Mind” organization in England, one in four people experience a mental health problem of some kind each year, and one in six people experience common mental health problems like anxiety

and depression weekly. As for under the Khilafah State, strengthening the belief in the Islamic Aqeedah in society, through various means and methods, via education, media, or urging acts of obedience, and applying the social system in Islam, the importance of family care, and what relates to the Shariah rulings that urge maintaining the ties of kinship, all of this contributes to helping reduce the burden resulting from psychological stress.

The State Guarantees the Provision of Medicine to Everyone Who Needs It, and Seeks to Find New Treatments for Diseases That Lack Effective Medicines

The healthcare system in the Khilafah State will not be subject to the control of pharmaceutical manufacturing companies that exert pressure on governments as is the case now, where pharmaceutical companies enjoy a massive influence on healthcare:

a) They determine the priority of medicines that deserve research according to the profitability aspect. If there is an important matter that deserves research but with low profitable returns, they will not fund such research and will not encourage governments to fund it either. When major pharmaceutical companies' direct health solutions towards their products, they maintain their monopoly on the available treatment options. It is claimed that only 10% of global scientific research is dedicated to diseases that constitute 90% of diseases in the world. This is called the 10/90 gap. The majority of prevalent diseases in low-income countries are neglected by the pharmaceutical industry, which has invested little in these diseases.

Clare Short - the former British Secretary of State for International Development - criticized pharmaceutical companies for their failure to invest in treatment medicines for the poor; where she said, "We live in an era of technological innovation that has brought great benefits, but the reality is that the majority of efforts are directed to diseases of importance only in

industrialized countries... Only 10% of global funding for research is allocated to what accounts for 90% of the disease burden that afflicts the poorest.”

In contrast, the Khilafah State gives priority to researching treatments for the most harmful diseases, such as those that afflict and kill massive numbers of people in the world - like malaria, for example.

b) Pharmaceutical companies protect their scientific precedents through intellectual property rights and patents. This means they monopolize information for several years, and this is often extended for decades. This hinders progress in developing products that could be useful if the information were provided on a wide scale. Likewise, this is exploited to keep prices high during the alleged protection period. Furthermore, pharmaceutical companies often produce medicines with marginal benefits, and in some cases without any significant benefit, but they work to pressure governments to adopt these medicines they produce. Consequently, governments make decisions for the benefit of these companies under the pretext that these medicines have a general benefit for the economy, and it is not necessarily the case that these decisions are in the general public interest of individuals.

As for the view of Islam, what is called copyrights and patents followed in capitalist systems are illegitimate conditions that are not adhered to because the contract of sale in Islam gives the buyer the right of ownership and gives him the right of disposal over what he owns according to Sharia. And because the conditions of intellectual property protection make the utilization of the sold item restricted to one use without another use, they are void conditions and contrary to what is in the Book of Allah and the Sunnah of His Messenger. Every condition that contradicts the conditions of the contract of sale in Islam is void, and the buyer is not bound by it.

Here are some examples to illustrate the points mentioned above:

1. During the Coronavirus pandemic, the drug Remdesivir was heavily promoted for its benefits, not least because of the promotion by US President Donald Trump. However, studies indicated that this drug reduces the duration of symptoms from 15 days to 11 days with no significant benefit in improving survival rates or reducing admissions to intensive care.

2. In 2009, during the swine flu pandemic, the British government stockpiled the drug Tamiflu manufactured by La-Roche. It is a drug that did not reduce the spread of influenza, nor did it reduce the severity of its complications. Data indicates that it had marginal benefits in reducing the duration of influenza symptoms from an average of 7 days to 6 days in adults, and to 5.8 days in children. Nevertheless, the British government spent 473 million pounds on this drug.

3. Non-pharmacological treatments are often ignored. For example, measures taken to help people stop smoking have proven to be three and a half times more cost-effective than essential drug treatments for chronic obstructive pulmonary disease caused by smoking, not to mention the suffering of the disease itself. Yet, the focus remains on drug treatments in most countries, rather than preventive measures.

Another example of using drug treatments instead of preventive therapeutic measures by changing lifestyle and living habits is diabetes in adults. A general practitioner in Britain, Dr. David Unwin, was able to reduce the cost of prescribing diabetes drugs by 57,000 pounds in 2017-2018 by offering an alternative option, which is regulating the diet along with providing moral support to the patient. In Britain, approximately 10% of the National Health Service hospital budget is spent on diabetes drugs, even though the disease can be partially treated by weight loss through diet and exercise in many cases.

In contrast, research in the Khilafah State is directed according to health needs, seeking the best treatments even if they are new, provided they are necessary. Also, healthcare will not be according to the agenda of pharmaceutical manufacturing companies. Likewise, the Khilafah State considers the use of traditional or dietary treatments that have been neglected because they do not bring profits to giant pharmaceutical companies; because the goal of the healthcare system in the Khilafah is looking after the affairs of the people, not looking after the interests of capitalist industries.

Healing Comes from Allah ﷻ, the Majestic

Medicine is the treatment of physical and mental diseases, and the doctor is the person who has acquired knowledge, skills, and experience in this field, and can provide care and assistance; but Allah alone is the Healer! Imam Ahmad reported in his Musnad from Abu Rimthah At-Taymi who said, «أُنْطَلَقْتُ مَعَ أَبِي وَأَنَا غُلَامٌ إِلَى النَّبِيِّ ﷺ فَقَالَ لَهُ أَبِي: إِنِّي رَجُلٌ طَبِيبٌ، فَأَرْنِي هَذِهِ السَّلْعَةَ الَّتِي بَطْنُكَ (ويقصدُ خَاتَمَ النَّبُوءَةِ) ، قَالَ ﷺ: وَمَا تَصْنَعُ بِهَا؟، قَالَ: أَقْطَعُهَا. قَالَ ﷺ لَسْتُ بِطَبِيبٍ، وَلَكِنَّكَ رَفِيقٌ، «I went with my father while I was a boy to the Prophet ﷺ and my father said to him: ‘I am a medical man, so show me this lump on your back (referring to the Seal of Prophethood).’ He ﷺ said: ‘And what will you do with it?’ He said: ‘I will cut it off.’ He ﷺ said: ‘You are not a doctor, but you are a gentle companion. Its Doctor is the One who placed it (and another narrator said: the One who created it).’” The meaning of his saying «لَسْتُ بِطَبِيبٍ، وَلَكِنَّكَ رَفِيقٌ» **“You are not a doctor, but you are a gentle companion,”** is that you are gentle with the patient and treat him kindly, and Allah is the One who cures him and heals him. That is, you can act kindly, thereby assisting the patient and advising him, but Allah alone heals. And from Jabir from the Messenger of Allah ﷺ that he said, «لِكُلِّ دَاءٍ دَوَاءٌ، فَإِذَا أُصِيبَ دَوَاءُ الدَّاءِ بَرَأَ بِإِذْنِ اللَّهِ عَزَّ وَجَلَّ» **“For every disease there is a medicine, and if the correct medicine corresponds to the disease, it will be cured by the permission of**

Allah Exalted and Glorious.” [Sahih Muslim]. And from Abu Khuzamah from his father who said: I asked the Messenger of Allah ﷺ, saying, “O Messenger of Allah, do you see the Ruqyah (incantations) we use for healing, the medicine we use for medical treatment, and the preventive measures we take, do they repel anything from the Qadar (decree) of Allah?” He ﷺ said, «هِيَ مِنْ قَدَرِ اللَّهِ» **“They are from the Qadar of Allah”** [Reported by At-Tirmidhi who said: “A Hasan Sahih Hadith”]. Thus, it is important for the individual to realize that disease comes from Allah, and that recovery and healing from disease also come from Allah ﷻ.

It Is Recommended (Mandub) for a Muslim to Seek Medical Treatment, Just as It Is Permissible for Them to Be Patient With the Disease

An individual can seek to obtain treatment - and he is rewarded for this - and it is permissible for them to refuse treatment and be patient with the disease instead of seeking it. Thus, medical treatment is Mandub (recommended) and not a Fard (obligation), and the evidence for that is:

1- Bukhari reported through Abu Hurairah who said: The Messenger of Allah ﷺ said, «مَا أَنْزَلَ اللَّهُ دَاءً إِلَّا أَنْزَلَ لَهُ شِفَاءً» **“Allah has not sent down a disease except that He has sent down a cure for it.”** And Muslim reported from Jabir bin Abdullah from the Prophet ﷺ who said, «لِكُلِّ دَاءٍ دَوَاءٌ، فَإِذَا أُصِيبَ دَوَاءُ الدَّاءِ بَرَأَ بِإِذْنِ اللَّهِ عَزَّ وَجَلَّ» **“For every disease there is a medicine, and if the correct medicine corresponds to the disease, it will be cured by the permission of Allah Exalted and Glorious.”** And Ahmad reported in his Musnad from Abdullah bin Mas’ud (ra), «مَا أَنْزَلَ اللَّهُ دَاءً، إِلَّا أَنْزَلَ لَهُ شِفَاءً، عِلْمُهُ مَنْ عِلْمُهُ، وَجَهْلُهُ مَنْ جَهْلُهُ» **“Allah has not sent down a disease except that He has sent down a cure for it, known to those who know it, and unknown to those who do not know it.”** These Ahadith contain a contextualization (قرينة qareenah) to seek medical treatment which may contain the cure for the disease by the permission of Allah ﷻ.

2- Ahmad reported from Anas who said: The Messenger of Allah ﷺ said, «إِنَّ اللَّهَ خَلَقَ الدَّاءَ، خَلَقَ الدَّوَاءَ، فَتَدَاوُوا» **“Indeed, where Allah created the disease, He created the medicine, so seek medical treatment.”** And Abu Dawud reported from Usamah bin Sharik, who said: I came to the Prophet ﷺ and his companions were as if birds were on their heads. I greeted them and sat down. Then Bedouins came from here and there and said, “O Messenger of Allah, should we seek medical treatment?” He said, «تَدَاوُوا فَإِنَّ اللَّهَ عَزَّ وَجَلَّ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ دَوَاءً، غَيْرَ دَاءٍ وَاحِدٍ الْهَرَمُ» **“Seek medical treatment, for Allah ﷻ did not create a disease without creating a medicine for it, except for one disease: old age.”** In the first Hadith, there is a command (أمر amr) to seek medical treatment, and in this Hadith, there is an answer to the Bedouins to seek medical treatment, and an address to the servants to seek medical treatment, for Allah did not create a disease without creating a cure for it. The address in the two Ahadith came in the imperative form, and the command (أمر amr) denotes a request (طلب talab), and it does not denote obligation unless it is a decisive command (أمر جازم amr jaazim). Decisiveness requires a contextualization (قرينة qareenah) evidencing it, and there is no contextualization in the two Ahadith evidencing obligation. In addition to that, Ahadith have been reported evidencing the permissibility of leaving medical treatment, which negates the implication of obligation from these two Ahadith. Muslim reported from Imran bin Husain that the Prophet ﷺ said, «يَدْخُلُ الْجَنَّةَ مِنْ أُمَّتِي سَبْعُونَ أَلْفًا بِغَيْرِ حِسَابٍ» **“Seventy thousand of my Ummah will enter Paradise without being called to account.”** They said, “And who are they, O Messenger of Allah?” He said, «هُمْ الَّذِينَ لَا يَكْتُمُونَ وَلَا يَسْتَرْقُونَ، وَعَلَى رَبِّهِمْ يَتَوَكَّلُونَ» **“They are those who do not seek cauterization, nor do they seek Ruqyah (incantations), and they put their trust in their Lord.”** Ruqyah and cauterization are forms of medical treatment. Bukhari reported from Ata bin Abi Rabah who said: Ibn Abbas said to me, “Shall I not show you a woman of the people of Paradise?” I said, “Yes.” He said, “This black woman came to the Prophet ﷺ and said, ‘I suffer from epilepsy and my body becomes

uncovered; please invoke Allah for me.’ He said, **«إِنْ شِئْتَ صَبَرْتَ وَلَكَ الْجَنَّةُ، وَإِنْ شِئْتَ دَعَوْتُ اللَّهَ أَنْ يُعَافِيكَ»** “If you wish, be patient and you will have Paradise; and if you wish, I will invoke Allah to cure you. She said, ‘I will remain patient,’ and added, ‘but I become uncovered, so please invoke Allah for me that I may not become uncovered,’ so he invoked Allah for her.” These two Ahadith evidence the permissibility of leaving medical treatment. All of this evidence that the command mentioned **«فَتَدَاوُوا»** “so seek medical treatment,” and **«تَدَاوُوا»** “seek medical treatment” is not a Shariah obligation. Therefore, the command here is either for permissibility (Ibahah) or for recommendation (Nadb), and due to the intense urging of the Messenger ﷺ to seek medical treatment, the command to seek medical treatment mentioned in the Ahadith is for recommendation (Nadb).

The Request for Medical Treatment Encompasses Everything That Falls Under the Term Medicine or Treatment

The request for treatment in the Shariah is not limited to the treatments mentioned in the Noble Quran and Prophetic Sunnah. The Islamic texts mention specific types of treatment, which are undoubtedly beneficial treatments, but this does not mean restricting oneself to them. Instead, they are examples of treatments. Treatment, according to Shariah, applies to all types of treatment, including modern medicines, surgery, radiation therapy, laser therapy, robotic surgery, and so on.

Among the best examples of treatments mentioned in the Shariah texts is honey. Allah ﷻ says,

«ثُمَّ كُلِي مِنْ كُلِّ الثَّمَرَاتِ فَاسْلُكِي سُبُلَ رَبِّكِ ذُلًّا يَخْرُجُ مِنْ بُطُونِهَا شَرَابٌ مُخْتَلِفٌ أَلْوَانُهُ فِيهِ شِفَاءٌ لِلنَّاسِ إِنَّ فِي ذَلِكَ لَآيَةً لِقَوْمٍ يَتَفَكَّرُونَ»

“Then eat from all the fruits and follow the ways of your Lord laid down [for you]. There emerges from their bellies a drink, varying in colors, in which there is healing for people. Indeed, in that is a sign for a people who give thought” [An-Nahl: 69]. Honey

was also mentioned as a treatment in the Sunnah. From Abu Sa'id, he said: A man came to the Prophet ﷺ and said, "My brother has loose bowels." He ﷺ said, «اسْقِهِ عَسَلًا» **"Give him honey to drink."** So, he gave him honey to drink. Then he said: "I gave him honey to drink, but it only increased his looseness." He said, «صَدَقَ اللَّهُ وَكَذَبَ بَطْنُ أَخِيكَ» **"Allah has spoken the truth, and your brother's abdomen has lied."** So, he gave him honey to drink, and he was cured [Reported by Bukhari in his Sahih].

The Messenger of Allah ﷺ also addressed the issue of diet in relation to health, saying, «مَا مَلَأَ آدَمِيَّ وَغَاءَ شَرًّا مِنْ بَطْنٍ بِحَسْبِ ابْنِ آدَمَ أَكَلَاتٍ» **"A human being fills no worse vessel than his stomach. It is sufficient for a human being to eat a few mouthfuls to keep his spine straight. But if he must (fill it), then one third for his food, one third for his drink, and one third for his breath"** [Reported by At-Tirmidhi who said: "A Hasan Sahih Hadith"]. Abu Dawud reported in his Sunan from Umm Al-Mundhir bint Qays Al-Ansariyyah, who said: The Messenger of Allah ﷺ entered upon me, and with him was Ali (ra). Ali was recovering from an illness, and we had bunches of dates hanging. The Messenger of Allah ﷺ stood up and began eating from them, and Ali (ra) stood up to eat. The Messenger of Allah ﷺ kept saying to Ali, (ra) «مَهْ إِنَّكَ نَاقِفٌ» **"Stop, for you are recovering,"** until Ali (ra) stopped. Umm Al-Mundhir said, I prepared some barley and beet, and brought it. The Messenger of Allah ﷺ said, «يَا عَلِيُّ أَصَبَ مِنْ هَذَا فَهُوَ أَنْفَعُ لَكَ» **"O Ali, take some of this, for it is more beneficial for you."**

The Prophet ﷺ also mentioned black seed as a treatment: From Abu Hurairah (ra) that he heard the Messenger of Allah ﷺ saying, «فِي الْحَبَّةِ السَّوْدَاءِ شِفَاءٌ مِنْ كُلِّ دَاءٍ إِلَّا السَّامَ» **"In the black seed is healing for every disease except As-Sam."** As-Sam is death. And the black seed is Ash-Shuniz [Sahih Bukhari]. He also mentioned cupping: From Ibn Abbas from the Prophet ﷺ he said, «الشِّفَاءُ فِي ثَلَاثَةٍ: فِي شَرْطَةِ مَحْجَمٍ، أَوْ شَرْبَةِ عَسَلٍ، أَوْ كَيِّ بَنَارٍ. وَأَنَا أَنْهَى أُمَّتِي عَنِ الْكَيِّ» **"Healing is in three things: in the incision of the cupper, in drinking honey, or in cauterization with fire. And I forbid my Ummah from cauterization"** [Sahih Bukhari].

Thus, Muslims adopt what is mentioned in the texts regarding types of treatment; and the Khilafah State, moreover, adopts and develops modern treatments and technologies permitted by the Shariah with the aim of treating diseases.

Treatment for Mental Illnesses Is the Same as for Physical Illnesses

The Shariah evidences also address the treatment of mental illnesses. The Arabs were aware of mental illnesses before Islam, and there were those who practiced treatment in this field. When Islam came, it permitted some treatments that were not mixed with Shirk (polytheism); indeed, the Shariah permitted taking a wage in exchange for treatment. Abu Dawud reported in his Sunan from Kharijah bin As-Salt At-Taymi, from his uncle, that he came to the Messenger of Allah ﷺ and embraced Islam, then he returned from him. He passed by a people who had a madman bound in iron. His family said: “We have been told that this companion of yours has come with goodness, so do you have anything to treat him with?” So, I recited Ruqyah over him with the Opening of the Book (Al-Fatihah), and he was cured. They gave me one hundred sheep. I came to the Messenger of Allah ﷺ and informed him. He said: «هَلْ إِلَّا هَذَا؟» **“Was there anything other than this?”** And Musaddad said in another place: «هَلْ قُلْتَ غَيْرَ هَذَا؟» **“Did you say anything other than this?”** I said: “No.” He said, «خُذْهَا فَلْعَمْرِي لِمَنْ أَكَلَ بِرُقْيَةٍ بَاطِلٍ لَقَدْ أَكَلَتْ بِرُقْيَةٍ حَقٍّ» **“Take them, for by my life, whoever eats by a false Ruqyah, you have eaten by a true Ruqyah”** [At-Tirmidhi reported it in his Sunan and said: “A Hasan Sahih Hadith”]. And from ‘Umayr, the freed slave of Abi Al-Laham, who said: I witnessed Khaybar with my masters, and they spoke to the Messenger of Allah ﷺ about me, and they told him that I was a slave. He said, “So, he commanded regarding me, and I was girded with a sword, and I was dragging it. He ordered for me some of the inferior goods, and I presented to him a Ruqyah with which I used to treat the madmen. He ordered me to discard some of it and keep some of it. That is, the Messenger ordered

him to leave some words of the Ruqyah that contradicted the Noble Quran and Prophetic Sunnah, and to keep some of them.

Medicines can be used if specialists in mental illnesses deem them appropriate. Early Muslims paid attention to mental illnesses, and an example of how thinking on this matter developed after the first generation is the work of Abu Zayd Ahmad bin Sahl Al-Balkhi (born 235 AH - 849 CE) titled “Sustenance of the Body and Soul (Masalih Al-Abdan wal-Anfus),” which addressed health issues related to the body and soul, and addressed matters such as confusion and sadness in this work.

Methodology of Therapeutic Management Towards Mental Health

Mental illness is that which is a functional defect in the brain as an organ. There are some mental illnesses caused by a disease in the normal brain processes, which likely depend on a chemical neurotransmitter, and understanding of them is still weak, such as schizophrenia, bipolar disorder, or some types of depression. These problems should be dealt with like any other problem in physical health through appropriate medicines and treatments. These diseases cause a functional defect in the brain as an organ and sometimes worsen due to the spread of drugs and alcohol in societies around the world today. These diseases require management through the understanding of the psychiatry specialty, although they can be dealt with by doctors who have undergone general training or specialized training depending on the degree of the disease.

The majority of mental health disorders should be treated within the community. However, unstable patients who are at risk of harming themselves or harming others may require management in the hospital until sufficient control over their condition is achieved, so that the patient no longer poses a danger to himself or others. Psychiatric services benefit from a multi-skilled team working together, just as all specialties benefit from

these teams. The team may include psychiatrists, nurses, and occupational therapists. After patients spend time in the hospital receiving treatment, they are discharged so that they can lead a full life in society; therefore, the participation of occupational therapists or community nurses will be essential in providing comprehensive healthcare for this group of patients to assist in their rehabilitation to return to society.

Mental Health Problems Related to Values and Societal Problems

There are other mental illnesses that have behavioral problems or emotional disorders, mostly—a defect in concepts—and are greatly affected by the corrupt values of the individual and society. This type of mental illness will generally decrease through the implementation of the entire Islamic system in society and addressing the conceptual problem. Allah ﷻ said,

﴿وَلَنَبْلُوَنَّكُمْ بِشَيْءٍ مِّنَ الْخَوْفِ وَالْجُوعِ وَنَقْصٍ مِّنَ الْأَمْوَالِ وَالْأَنْفُسِ وَالثَّمَرَاتِ ۗ وَبَشِّرِ الصَّابِرِينَ ﴿١٥٥﴾ الَّذِينَ إِذَا أَصَابَتْهُمُ مُصِيبَةٌ قَالُوا إِنَّا لِلَّهِ وَإِنَّا إِلَيْهِ رَاجِعُونَ ﴿١٥٦﴾ أُولَٰئِكَ عَلَيْهِمْ صَلَواتٌ مِّن رَّبِّهِمْ وَرَحْمَةٌ ۖ وَأُولَٰئِكَ هُمُ الْمُهْتَدُونَ ﴿١٥٧﴾﴾

“And We will surely test you with something of fear and hunger and a loss of wealth and lives and fruits, but give good tidings to the patient, Who, when disaster strikes them, say, ‘Indeed we belong to Allah, and indeed to Him we will return.’ Those are the ones upon whom are blessings from their Lord and mercy. And it is those who are the [rightly] guided” [Al-Baqarah: 155-157]. These verses clarify that man will always face pressures and tribulations, and these events will act as a tool to measure the level of the individual’s Iman (faith). Therefore, man needs to deal with any pressures, tests, and tribulations with patience and perseverance; for it is supposed to be natural for a Muslim person to experience trials. This understanding is among the factors that help a person accept tribulations and assist in the concept

controlling the determination of his behavior, in order to achieve sound mental health. Thus, the establishment of Islam in society helps to alleviate the burdens of mental and psychological health.

Providing Treatment for Individuals Is an Obligation Upon the State

Health and medical care are among the duties of the state; therefore, they must be available easily and conveniently to those under its care. This includes providing clinics, hospitals, and public facilities used for treatment. Medical treatment is a fundamental part of the public interest and public facilities that the state must undertake; and it falls upon the shoulders of the state according to the Hadith of the Messenger ﷺ who said, «الإمام راع ومسئول عن رعيته» **“The Imam is a guardian and he is responsible for those under his care.”** The Messenger of Allah ﷺ clarified the importance of the basic needs for the individual and the Ummah, saying «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرْبِهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوتٌ يَوْمَهُ فَكَأَنَّمَا ﷺ» **“Whoever among you wakes up secure in his dwelling, healthy in his body, and he has his food for the day, it is as if he were given the entire world.”** This evidences that health and medical care are among the basic needs of those under the ruler's care, which the state must ensure are easily available to whoever needs them. Just as the state provides food, clothing, and shelter for individuals, it must facilitate the provision of basic services on a wide scale for the Ummah, such as security, health, and education.

The Model for Organizing Therapeutic Healthcare in the Khilafah State

The issue of organizing health falls within the jurisdiction of the Public Healthcare Department, and this is not specific to a certain principle, but rather it is an issue determined according to the most effective methods for providing healthcare.

Article 97 of the draft constitution of the Khilafah State clarifies, with evidence, that “The policy of the administration of

services is based on simplicity of the system, speed in processing tasks and competence of the administrators.” The Messenger of Allah ﷺ said, «إِنَّ اللَّهَ كَتَبَ الْإِحْسَانَ عَلَى كُلِّ شَيْءٍ فَإِذَا قَتَلْتُمْ فَأَحْسِنُوا الْقِتْلَةَ وَإِذَا ذَبَحْتُمْ فَأَحْسِنُوا الذَّبْحَ وَلْيُجِدْ أَعْيُنُكُمْ شَفَرَتَهُ فَلْيُرِحْ ذَبِيحَتَهُ» “Verily Allah has prescribed Ihsan (excellence) in all things. So, if you kill then kill well; and if you slaughter, then slaughter well. Let each one of you sharpen his blade and let him spare suffering to the animal he slaughters” [Reported by Muslim]. Therefore, the Shariah commands striving for Ihsan in the execution of actions. Accordingly, healthcare must fulfill three conditions: **First:** Simplicity of the system, which leads to the ease of carrying out its responsibilities. Conversely, a complex system may lead to unnecessary suffering for patients and employees. **Second:** Speed and effectiveness in accomplishment, which avoids unnecessary delay. **Third:** The ability and competence of those in charge of healthcare, in order to achieve Ihsan (excellence) in the tasks.

As for administrative methods, they can be taken from any source unless there is a specific text prohibiting a certain administrative method, because the administrative method has a general ruling, which is permissibility (Ibahah), and there is no departure from this general ruling except with evidence prohibiting it.

Furthermore, the work of healthcare teams requires mixing skills among doctors, nurses, midwives, physical therapists, pharmacists, and others according to the need during work. The best model is for men to treat men and women to treat women, and not to resort to otherwise except in cases of dire need... And the treatment is restricted to the necessary part of the body without exceeding it to other parts. To achieve the best model in treatment, the Khilafah State must train a sufficient number of male and female doctors to meet the need. However, given that women in the Islamic society have a fundamental role as wives, mothers, and homemakers, there may be a need to train a larger number of women as doctors and nurses in order to allow them to

work part-time. The state must also provide primary, secondary, and tertiary healthcare:

a- Primary healthcare is basic healthcare that undertakes the following:

- It is local in the regions.
- It is managed by general practitioners, pharmacists, nurses, midwives, emergency and first aid staff, and others.
- It deals with general and direct medical problems that can be treated at the primary level.
- It conducts the necessary medical examinations where the diagnosis is unclear and requires basic tests and examinations.
- It identifies patients who may need more specialized treatment in secondary healthcare.
- It addresses prevention and treatment for health problems.

Primary care can be provided in primary or comprehensive health centers, which should provide comprehensive medical services, or through mobile clinics in remote rural areas, and their distribution is determined according to local needs and priorities.

b- As for secondary healthcare, it means medical care in the hospital, when people's diseases require their admission to a hospital that provides basic specialties such as internal medicine, surgery, pediatrics, gynecology, and so on. It also contains a department for ambulance and emergency, and also provides clinics for specialists and consultants. It has facilities for diseases that require advanced examinations, treatments, or specialized procedures that must be performed in the hospital. It has the following specifications:

- It is a regional center covering wider areas, with at least one hospital in each 'Amalah (district) commensurate with the population.
- A department for receiving and treating emergency medical cases, a number of beds for inpatients receiving

treatment, surgical facilities, intensive care facilities, and an outpatient department; and departments for various day-care therapeutic procedures, and facilities for multiple examinations such as laboratories, X-rays, and imaging.

- The goal of secondary healthcare is to provide distinguished, highly efficient healthcare according to the latest proven treatments and guiding standards for diagnosis and treatment set by the expert committee in the higher health department, and across the entire 'Amalah, to meet the needs of the entire population.

- The state must undertake by itself the building and funding of these facilities and the rehabilitation of the existing ones. If the absorptive capacity of these facilities is insufficient to fulfill this care with its aforementioned specifications, especially in the transitional period, the state provides these facilities and manages them through methods it deems appropriate, by utilizing existing private hospitals through permissible methods, building field hospitals, or transferring patients to less crowded areas, until sufficient facilities are provided within the state's regions.

The first examples of hospitals among Muslims were “field hospitals” that were used during military campaigns - such as the one in which Rufaydah Al-Aslamiyyah (ra) and others treated patients during campaigns - then fixed hospitals began to appear in subsequent eras, and by the second Hijri century, there was a hospital in Baghdad during the era of the Khaleefah Harun Al-Rashid. In the upcoming Khilafah, Allah the Exalted willing, the number of hospitals and the level of their services for each Wilayah (province) and ‘Amalah (district) will be determined according to population needs and local priorities.

c - Tertiary Healthcare

There may also be a need for more specialized hospitals within the state that deal with highly specialized health problems; such that there are specialized centers for cases that

cannot be dealt with in the hospitals of the Wilayah or ‘Amalah. These could be hospitals established specifically for certain specialties, for example: a specialized children’s hospital for a number of governorates. Or centers for treating heart diseases or cancerous tumors, or hospitals in different regions can be developed to become centers of excellence for various or rare medical specialties; such that this approach allows medical groups to become more specialized and experienced in meeting complex health needs.

There are models around the world that can be referred to in order to know styles and means that can serve the objectives of healthcare in a better and highly efficient manner. When there are cases requiring the securing of rapid treatment in tertiary hospitals, means of communication must be established to avoid harm, such as using ambulance aircraft dedicated for treatment, or benefiting from the development of communication means, as well as the development of medical treatment means to conduct one’s treatment remotely or treat the patient in a way that removes posed danger until one is transported to the specialized hospital.

The Public Sector and the Private Sector

Healthcare in the Islamic State is comprehensive and free healthcare provided by the state is an obligation, and the state must provide all necessary equipment and health services for patients, the lack of which would constitute harm to them. However, individuals or companies in the Islamic State are not prevented from providing private health services, or opening private clinics and hospitals, nor is anyone among those under the ruler’s care prevented from seeking medical treatment in the private sector. The evidence for this is what Bukhari reported from Anas (ra) who said, «دَعَا النَّبِيُّ ﷺ غُلَامًا حَجَّامًا فَحَجَّمَهُ، وَأَمَرَ لَهُ بِصَاعٍ أَوْ وَصَاعَيْنِ، أَوْ مُدٍّ أَوْ مُدَّيْنِ، وَكَلَّمَ فِيهِ فَخَفَّفَ مِنْ ضَرِيْبَتِهِ» “The Prophet ﷺ called a boy who was a cupper, and he cupped him. He ordered that he be given one or two Sa’s, or one or two Mudds (of food), and he spoke

on his behalf so his tax was reduced.” The boy here performed cupping and received his wage from the Messenger ﷺ.

It is stipulated for whoever provides healthcare from the private sector, whether an individual or a company, to adhere to the state's laws and its monitoring. It is also stipulated that whoever provides health services must be qualified for that, whether he works in the private or public sector. Whoever provides any health service without being qualified to provide it, the state prevents him and he is punished. As for if he leads to harm through this work of his, he is liable for the harm he caused by undertaking what is not his specialty.

The evidence for this is general and specific. As for the general evidence, it is the Shariah principle (لَا ضَرَرَ وَلَا ضِرَارَ) **“There should be neither harming nor reciprocating harm,”** since the practice of treatment or healthcare by someone who has no knowledge of it may lead to harm to the patient. Al-Mawardi says in Al-Ahkam Al-Sultaniyyah when speaking about those among the people of crafts whom the Walis of Hisbah (Muhtasibs) are required to monitor, (أَمَّا مَنْ يُزَاعِي فِي عَمَلِهِ فِي الْوُفُورِ وَالنَّقْصِيرِ: فَكَالطَّبِيبِ وَالْمُعَلِّمِينَ؛ لِأَنَّ لِلطَّبِيبِ إِقْدَامًا عَلَى النَّفْسِ يُفْضِي التَّقْصِيرُ فِيهِ إِلَى تَلَفٍ أَوْ سَقَمٍ، وَلِلْمُعَلِّمِينَ مِنَ الطَّرَائِقِ الَّتِي يَنْشَأُ الصِّغَارُ عَلَيْهَا مَا يَكُونُ نَقْلُهُمْ عَنْهَا بَعْدَ الْكِبَرِ عَسِيرًا. فَيَقْرَأُ مِنْهُمْ (أَيِ الْأَطِبَّاءِ وَالْمُعَلِّمِينَ) مَنْ تَوَفَّرَ عَمَلُهُ وَحَسُنَتْ طَرِيقَتُهُ، وَيُمنَعُ مَنْ قَصَرَ (As for the one who is monitored in his work regarding abundance and shortcoming: it is like the doctor and the teachers; because the doctor undertakes actions upon souls where shortcoming leads to perishing or sickness, and for teachers, regarding the methods upon which children are raised, shifting them away from them after growing up is difficult. Thus, those among them (i.e., doctors and teachers) whose work is abundant and whose method is good are approved, and whoever falls short and does poorly is prevented from undertaking that by which he corrupts souls and makes morals malicious.” Al-Qarafi transmits in Al-Dhakhirah from Imam Malik his saying, (يَنْهَى الْإِمَامُ الْأَطِبَّاءَ عَنِ الدَّوَاءِ

“The Imam forbids doctors from administering medicine except a known doctor, and nothing is drunk from their medicines except what is known.” As for the specific evidence, Abu Dawud, An-Nasa’i, Ibn Majah, and others reported from him ﷺ his saying, «مَنْ تَطَبَّبَ وَلَمْ يَعْلَمْ مِنْهُ طَبِّ قَبْلَ ذَلِكَ فَهُوَ ضَامِنٌ» **“Whoever practices medicine without prior knowledge of it, he is liable.”** [Al-Hakim said: It has a Sahih Isnad, and Al-Dhahabi agreed with him]. Al-Khattabi said, (لا أعلم خلافاً في أن المعالج إذا تعدى قتل المريض كان ضامناً، والمتعاطي علماً أو عملاً لا يعرفه منعاً، فإذا تولد من فعله التلف ضمن الدية وسقط القود عنه لأنه لا يستبد بذلك دون إذن المريض) **“I know of no disagreement that the healer, if he transgresses and the patient perishes, is liable. And the one who undertakes a science or an action he does not know is a transgressor. So, if perishing is generated from his action, he guarantees the Diah (blood money), and Qawad (retaliation) is dropped from him because he does not act independently in that without the permission of the patient.”**

He ﷺ also used to supervise the production of medicines. Al-Hakim reported in Al-Mustadrak, saying it has a Sahih Isnad though they (Bukhari and Muslim) did not report it, from Abd al-Rahman bin Uthman At-Taymi, who said, «ذَكَرَ طَبِيبُ الدَّوَاءِ عِنْدَ رَسُولِ اللَّهِ ﷺ فَذَكَرَ الصَّفْدَعُ يَكُونُ فِي الدَّوَاءِ، فَنَهَى النَّبِيُّ ﷺ عَنْ قَتْلِهِ» **“A doctor mentioned medicine in the presence of the Messenger of Allah ﷺ, and he mentioned that a frog is used in the medicine, so the Prophet ﷺ forbade killing it.”** The aspect of deduction from this Hadith is that it indicates by way of allusion (Dalalat al-Isharah) that the state supervises the production of medicines; since the Hadith was cited to clarify the prohibition of killing frogs, but it also indicates by way of allusion that the state has the right to prevent the manufacturing of a certain type of medicine. These evidences clarify that the state has the right to supervise the private health sector; indeed, that is an obligation upon it.

Assistance During the Recovery Period and Rehabilitation of Patients

After suffering from some diseases such as acute infections, heart attacks, strokes, and surgery, for example, patients need time to regain their full strength and their physical and mental well-being. They may not be able to work during this time; therefore, the state provides the basic needs for them during this period. The state may have to provide what they need of money from Bayt al-Mal for this recovery period so that the pursuit of livelihood does not harm the recovery.

Providing Service and Assistance to the Incapacitated, the Elderly, the Injured, and the Mentally Disabled Whose Families Are Unable to Assist Them

The elderly, the incapacitated, and the physically or mentally disabled need aid and assistance, especially in food, clothing, and shelter according to their need. The responsibility falls primarily on their obligated providers; however, the state assumes the responsibility to ensure the collection of this support from the obligated relatives if they are capable of that. As for those who do not have capable obligated relatives, the state assumes the responsibility for their care. He ﷺ said, «مَنْ تَرَكَ مَالًا فَلِوَرَثَتِهِ وَمَنْ تَرَكَ» "Whoever leaves behind wealth, it is for his heirs, and whoever leaves behind dependents, they are our responsibility." [Reported by Bukhari in his Sahih]. Muslim reported from Abu Hurairah, from the Prophet ﷺ that he said, «وَالَّذِي نَفْسُ مُحَمَّدٍ بِيَدِهِ إِنْ عَلَى الْأَرْضِ مِنْ مُؤْمِنٍ إِلَّا أَنَا أَوْلَى النَّاسِ بِهِ فَأَيُّكُمْ مَا تَرَكَ دَيْنًا أَوْ ضَيَاعًا فَأَنَا مَوْلَاهُ وَأَيُّكُمْ» "By Him in Whose Hand is the soul of Muhammad, there is no believer on the earth except that I am the closest of people to him. So whichever of you leaves a debt or dependents, I am his guardian, and whichever of you leaves wealth, it is for his agnate relatives whoever they may be." Al-Khattabi said about Al-Daya' (ضَيَاعٌ destitute dependents) in the explanation of this Hadith, (وهو وَصَفْتُ لِمَنْ خَلْفَهُ الْمَيْتُ بِلَفْظِ الْمَصْدَرِ، أَي تَرَكَ ذَوِي ضَيَاعٍ، "It is a description of those left behind by the

deceased using the verbal noun (Masdar), meaning he left behind people of Daya', i.e., they have nothing." This is evidence that the financial support for these people is obligatory upon the state.

As for the equipment, devices, or services required by the incapacitated - such as wheelchairs, crutches, and medical hearing aids - the state must provide them for them, as they are classified as necessities, such that if a shortage occurs in them, this will cause harm to those who need them. He ﷺ said, «لَا ضَرَرَ وَلَا ضِرَارَ» **“There should be neither harming nor reciprocating harm.”** [Reported by Al-Hakim in Al-Mustadrak, who said: “A Hadith with a Sahih Isnad according to the conditions of Muslim”]. Therefore, such equipment and services are included within “medical treatment” because their goal is to treat the disability resulting from the loss or dysfunction of an organ in the body. Thus, these aspects, as we mentioned previously, are part of the state's responsibility in healthcare.

The Islamic State also establishes the necessary care homes for the mentally or physically disabled whose relatives cannot care for them due to the severity of their disability and their need for special care, or those who may cause harm to their relatives or the community if they are not isolated and monitored. The state must ensure that these care homes are equipped with what these disabled people need and that their treatment and care in them is good care, at a level befitting them in terms of their human needs. The Shariah has lightened the burden on those with impairments and disabilities, and the Legislator does not burden a soul beyond its capacity. Thus, people with special needs are exempted from many obligations and mandatory rulings. Allah ﷻ said,

﴿لَا يُكَلِّفُ اللَّهُ نَفْسًا إِلَّا وُسْعَهَا﴾

“Allah does not charge a soul except with that within its capacity” [Al-Baqarah: 286]. Out of the mercy of Allah ﷻ towards people with special needs, the Shariah considers them in many of the rulings of accountability (Takleef), facilitating things for them

and removing hardship from them. Bukhari reported from Zayd bin Thabit (ra) that the Messenger of Allah ﷺ dictated to him, «لَا يَسْتَوِي الْقَاعِدُونَ مِنَ الْمُؤْمِنِينَ وَالْمُجَاهِدُونَ فِي سَبِيلِ اللَّهِ» “Not equal are those of the believers who sit at home and those who strive and fight in the cause of Allah.” Then Ibn Umm Maktum came to him while he was dictating it to me, and he said, “O Messenger of Allah, by Allah, if I could strive in Jihad, I would have striven” - and he was blind. So, Allah ﷻ revealed to His Messenger ﷺ while his thigh was on my thigh, and it became so heavy upon me that I feared my thigh would be crushed, then it was lifted from him, and Allah ﷻ revealed,

﴿غَيْرُ أُولَى الضَّرَرِ﴾

“Other than those who have a disabling injury” [An-Nisa: 95].

And Allah ﷻ said, lightening the burden on people with special needs,

﴿لَيْسَ عَلَى الْأَعْمَى حَرَجٌ وَلَا عَلَى الْأَعْرَجِ حَرَجٌ وَلَا عَلَى الْمَرِيضِ حَرَجٌ وَمَنْ يُطِيعِ اللَّهَ وَرَسُولَهُ يُدْخِلْهُ جَنَّاتٍ تَجْرَى مِنْ تَحْتِهَا الْأَنْهَارُ وَمَنْ يَتَوَلَّ يُعَذِّبْهُ عَذَابًا أَلِيمًا﴾

“There is not upon the blind any guilt or upon the lame any guilt or upon the ill any guilt for remaining behind. And whoever obeys Allah and His Messenger - He will admit him to gardens beneath which rivers flow; but whoever turns away - He will punish him with a painful punishment” [Al-Fath: 17]. Muslim reported in his Sahih from a woman from Khath'am who said, “O Messenger of Allah, my father is an old man upon whom the obligation of Allah in Hajj has fallen, and he cannot sit firmly on the back of his camel.” The Prophet ﷺ said to her, «فُحْجِي عَنْهُ» “Perform Hajj on his behalf.” Islam also exempted those with mental disabilities from Shariah obligations, and made the mind the basis of accountability (Takleef), due to the Marfu' (elevated) Hadith of Aisha (ra), «رُفِعَ الْقَلَمُ عَنْ ثَلَاثَةٍ عَنِ النَّائِمِ حَتَّى يَسْتَيْقِظَ وَعَنِ الصَّبِيِّ حَتَّى يَخْتَلِمَ وَعَنِ الْمَجْنُونِ حَتَّى يَعْقِلَ» “The pen has been lifted from three: from the sleeper until he wakes up, from the child until he reaches puberty,

and from the madman until he regains his sanity.” [Reported by Abu Dawud and Al-Hakim, who said: “A Sahih Hadith according to the conditions of Muslim”].

The Messenger of Allah ﷺ and his Khulafaa’ (successors) after him undertook the care of the disabled, the incapacitated, and the injured, to the extent that he ﷺ would stand with them and those like them until he fulfilled their needs and was merciful to them. Muslim reported from Anas (ra) reported that a woman with some sort of mental disorder said: "O Messenger of Allah, I need your help in a certain matter." He ﷺ said, «يَا أُمُّ فَلَانٍ، انْظُرِي أَيَّ السَّبِيلِ» He ﷺ said: "O Mother of so-and-so, choose which road you would like (to meet me on) so that I may give you the help you need." He then stood aside with her on some road until she finished telling him what she needed. Ibn Al-Jawzi mentioned in his book “Sirat Umar bin Abd al-Aziz” that (مَنْ خَبَرَ) الْحَكَمَ بْنَ عُمَرَ الرَّعَيْنِيِّ أَنَّ عُمَرَ بْنَ عَبْدِ الْعَزِيزِ رَضِيَ اللَّهُ عَنْهُ كَتَبَ إِلَى أُمَّصَارِ الشَّامِ أَنْ أَرْفَعُوا إِلَيَّ كُلَّ أَعْمَى فِي الدِّيْوَانِ أَوْ مُقْعِدٍ أَوْ مَنْ بِهِ فَالْجُ أَوْ مَنْ بِهِ زَمَانَةٌ تَحُولُ بَيْنَهُ وَبَيْنَ الْقِيَامِ إِلَى الصَّلَاةِ، فَرَفَعُوا إِلَيْهِ، فَأَمَرَ لِكُلِّ أَعْمَى بِقَائِدٍ، وَأَمَرَ لِكُلِّ اثْنَيْنِ مِنَ الرَّمْثَى بِخَادِمٍ. وَكَذَلِكَ الْخَلِيفَةُ الْأُمَوِيُّ الْوَلِيدُ بْنُ عَبْدِ الْمَلِكِ، فَقَدْ ذَكَرَ ابْنُ كَثِيرٍ فِي الْبَدَايَةِ وَالنِّهَايَةِ عَنْ ابْنِ جَرِيرٍ: "حَدَّثَنِي عُمَرُ ثَنَا عَلِيٌّ - يَعْنِي ابْنَ مُحَمَّدٍ الْمَدَائِنِيِّ - قَالَ: كَانَ الْوَلِيدُ بْنُ عَبْدِ الْمَلِكِ عِنْدَ أَهْلِ الشَّامِ أَفْضَلَ خَلَائِفَهُمْ، بَنَى الْمَسَاجِدَ بِدِمَشْقَ، وَوَضَعَ الْمَنَائِرَ، وَأَعْطَى النَّاسَ، وَأَعْطَى الْمَجْذُومِينَ، وَقَالَ لَهُمْ: لَا تَسْأَلُوا النَّاسَ، وَأَعْطَى كُلَّ مُقْعِدٍ (from the report of Al-Hakam bin Umar Al-Ru'ayni that Umar bin Abd al-Aziz (ra) wrote to the regions of Ash-Sham, “Raise to me the names of every blind person in the Diwan (registry), or bedridden, or one who has paralysis, or one who has a chronic illness that prevents him from standing for Salah.” So, they raised the names to him, and he ordered a guide for every blind person, and he ordered a servant for every two of the chronically ill. Likewise, the Umayyad Khaleefah Al-Walid bin Abd al-Malik; Ibn Kathir mentioned in Al-Bidayah wa Al-Nihayah from Ibn Jarir: “Umar narrated to me, Ali - meaning Ibn Muhammad Al-Mada'ini - narrated to us, he said: Al-Walid bin Abd al-Malik was the best of their Khulafaa’ according to the

Urging the General Muslims to Aid the Weak

Blood Bank and Its Derivatives

141

derivatives, tests it, and undertakes its preservation and handling according to the best medical standards regarding its collection and use, and ensures its immediate safe delivery to those who need it. This department requires specialized doctors and trained professionals in this field who provide counseling and care to blood donors. It also requires special laboratories to test the blood to verify it is free from diseases and contamination, determine the blood type and register it. Furthermore, it requires a highly accurate management and basic information structure that allows matching blood to those who need it, and facilities to store and transport it safely.

The original ruling regarding blood is that it is Haram (prohibited) and Najis (impure). The evidence for the impurity of human blood is the Hadith of Bukhari and Muslim from Asma' (ra) who said, «جَاءَتْ امْرَأَةً إِلَى النَّبِيِّ ﷺ فَقَالَتْ إِحْدَانَا يُصِيبُ نَوْبَهَا مِنْ دَمِ الْخَيْضَةِ، كَيْفَ تَصْنَعُ بِهِ قَالَ «تَحْتُهُ ثُمَّ تَقْرُصُهُ بِالْمَاءِ ثُمَّ تَتَضَخُّهُ ثُمَّ تُصَلِّي فِيهِ»» “A woman came to the Prophet ﷺ and said, ‘If the blood of menses falls on the garment of one of us, what should she do with it?’ He ﷺ said: ‘She should scrape it, then rub it with water, then wash it, and then she may pray in it.’” The fact that she was commanded to wash the blood before praying is evidence of its impurity. As for the evidence for the prohibition of blood, eating and drinking it, it is His ﷺ saying,

﴿حُرِّمَتْ عَلَيْكُمُ الْمَيْتَةُ وَالْدَّمُ وَلَحْمُ الْخِنْزِيرِ وَمَا أُهِلَّ لِغَيْرِ اللَّهِ بِهِ﴾

“Prohibited to you are dead animals, blood, the flesh of swine, and that which has been dedicated to other than Allah” [Al-Ma'idah: 3].

And His saying,

﴿قُلْ لَا أَجِدُ فِي مَا أُوحِيَ إِلَيَّ مُحَرَّمًا عَلَى طَاعِمٍ يَطْعَمُهُ إِلَّا أَنْ يَكُونَ مَيْتَةً أَوْ دَمًا مَسْفُوحًا أَوْ لَحْمَ خِنْزِيرٍ فَإِنَّهُ رِجْسٌ أَوْ فُسْقًا أَهْلًا لِغَيْرِ اللَّهِ بِهِ ۖ فَمَنْ اضْطُرَّ غَيْرَ بَاغٍ وَلَا عَادٍ فَإِنَّ رَبَّكَ غَفُورٌ رَحِيمٌ﴾

“Say, ‘I do not find within that which was revealed to me anything forbidden to one who would eat it unless it be a dead animal or blood spilled out or the flesh of swine - for indeed, it is impure - or it be that slaughtered in disobedience, dedicated to other than Allah. But whoever is forced by necessity, neither desiring it nor transgressing its limit, then indeed, your Lord is Forgiving and Merciful’” [Al-An’am: 145].

Benefiting from the impure and the prohibited is Haram, and among the evidences for that are:

- Bukhari reported from Jabir bin Abdullah (ra) that he heard the Messenger of Allah ﷺ saying in the Year of the Conquest while he was in Makkah, **«إِنَّ اللَّهَ وَرَسُولَهُ حَرَّمَ بَيْعَ الْخَمْرِ وَالْمَيْتَةِ وَالْخَنْزِيرِ وَالْأَصْنَامِ فَقِيلَ يَا رَسُولَ اللَّهِ أَرَأَيْتَ شُحُومَ الْمَيْتَةِ فَإِنَّهَا يُطْلَى بِهَا السُّفُنُ وَيُذْهَنُ بِهَا الْجُلُودُ وَيَسْتَصْبَحُ بِهَا النَّاسُ فَقَالَ لَا هُوَ حَرَامٌ ثُمَّ قَالَ رَسُولُ اللَّهِ ﷺ عِنْدَ ذَلِكَ «إِنَّ اللَّهَ قَاتَلَ اللَّهَ الْيَهُودَ إِنَّ اللَّهَ لَمَّا حَرَّمَ شُحُومَهَا جَمَلُوهَا ثُمَّ بَاعُوهَا فَأَكَلُوهَا ثُمَّ»** Indeed, Allah and His Messenger have forbidden the sale of alcohol, dead animals, swine, and idols.” It was said, ‘O Messenger of Allah, what about the fat of dead animals, for it is used to coat ships, grease skins, and people use it for lighting?’ He said, “No, it is Haram.” Then the Messenger of Allah ﷺ said at that time, “May Allah curse the Jews; when Allah forbade its fat, they melted it, then sold it, and consumed its price.””

- And in Tahdhib al-Athar by Al-Tabari from Jabir, he said: The Messenger of Allah ﷺ said, **«لَا تَنْتَفِعُوا مِنَ الْمَيْتَةِ بِشَيْءٍ»** “Do not benefit from the dead animal in anything.”

- The skin of the dead animal was exempted as came in the Hadith of Abu Dawud from Ibn Abbas. Musaddad and Wahb said from Maymunah, she said, **«أُهْدِيَ لِمَوْلَاةٍ لَنَا شَاةٌ مِنَ الصَّدَقَةِ فَمَاتَتْ فَمَرَّ بِهَا النَّبِيُّ ﷺ فَقَالَ: أَلَا دَبِغْتُمْ إهابها واستنفعتم به قالوا يا رسول الله إنها ميتة قال إنما حرم أكلها»** “A sheep from Sadaqah was given as a gift to a freed slave-girl of ours, and it died. The Prophet ﷺ passed by it and said: ‘Why did you not tan its skin and benefit from it?’ They said, ‘O Messenger of Allah, it is a dead animal.’ He said, ‘Only eating it is forbidden.’”

- Bukhari reported from Jabir bin Abdullah (ra) that he heard the Messenger of Allah ﷺ saying in the Year of the Conquest while he was in Makkah, «إِنَّ اللَّهَ وَرَسُولَهُ حَرَّمَ بَيْعَ الْخَمْرِ» **“Indeed, Allah and His Messenger have forbidden the sale of alcohol.”**

- Bukhari also reported from Anas (ra) «كُنْتُ سَاقِي الْقَوْمِ فِي مَنْزِلِ أَبِي طَلْحَةَ وَكَانَ خَمْرُهُمْ يَوْمَئِذٍ الْفَصِيخَ، فَأَمَرَ رَسُولُ اللَّهِ ﷺ مُنَادِيًا يَنَادِي «أَلَا إِنَّ الْخَمْرَ قَدْ حُرِّمَتْ» قَالَ: فَقَالَ لِي أَبُو طَلْحَةَ: أَخْرُجْ فَأَهْرِقْهَا، فَخَرَجْتُ فَهَرَفْتُهَا فَجَرَتْ فِي سِكَكِ الْمَدِينَةِ» **“I was serving drink to the people in the house of Abu Talhah, and their alcohol that day was Al-Fadikh (made from dates). Then the Messenger of Allah ﷺ ordered a caller to announce: ‘Behold, alcohol has been forbidden.’ He said: So Abu Talhah said to me: ‘Go out and pour it away.’ So, I went out and poured it away, and it flowed in the streets of Madinah.”**

- Abu Dawud reported from Abu Hurairah that the Messenger of Allah ﷺ said: «إِنَّ اللَّهَ حَرَّمَ الْخَمْرَ وَثَمَنَهَا وَحَرَّمَ الْمَيْتَةَ وَثَمَنَهَا وَحَرَّمَ الْخَنَزِيرَ وَثَمَنَهُ» **“Indeed, Allah has forbidden alcohol and its price, and has forbidden the dead animal and its price, and has forbidden swine and its price.”**

However, medical treatment is exempted from the prohibition, so medical treatment with the prohibited and the impure is not Haram:

- As for medical treatment with the prohibited not being Haram, it is due to the Hadith of Muslim from Anas, «رَخَّصَ رَسُولُ اللَّهِ ﷺ أَوْ رَخَّصَ لِلزُّبَيْرِ بْنِ الْعَوَّامِ وَعَبْدِ الرَّحْمَنِ بْنِ عَوْفٍ فِي لُبْسِ الْحَرِيرِ لِجَعَةٍ كَانَتْ بِهِمَا» **“The Messenger of Allah ﷺ granted a concession, or a concession was granted, to Az-Zubayr bin Al-Awwam and Abd al-Rahman bin Awf to wear silk because of an itch they had.”** Wearing silk for men is Haram, but it was permitted in medical treatment. Likewise, due to the Hadith of An-Nasa’i, Abu Dawud, and At-Tirmidhi, and the wording is for An-Nasa’i: Abd al-Rahman bin Tarafah narrated to us from his grandfather ‘Arfajah bin As’ad that his nose was cut off on the Day of Al-Kulab during the Jahiliyyah (pre-Islamic period of ignorance),

so he received a nose made of silver, but it caused a foul smell, and it is narrated, «فَأَمَرَهُ النَّبِيُّ ﷺ أَنْ يَتَّخِذَ أَنْفًا مِنْ ذَهَبٍ» **“So the Prophet ﷺ ordered him to get a nose made of gold.”** Gold for men is Haram, but it was permitted in medical treatment.

- As for medical treatment with the impure not being Haram, it is due to the Hadith of Bukhari from Anas (ra), «أَنَّ نَاسًا اجْتَوَوْا فِي الْمَدِينَةِ فَأَمَرَهُمُ النَّبِيُّ ﷺ أَنْ يَلْحَقُوا بِرَاعِيهِ يَغْنِي الْإِبِلَ فَيَشْرَبُوا مِنْ أَلْبَانِهَا وَأَبْوَالِهَا» **“Some people found the climate of Madinah unsuitable, so the Prophet ﷺ ordered them to go to his herdsman, meaning the camels, and to drink their milk and urine. So, they went to his herdsman and drank their milk and urine...”** The meaning of “found the climate unsuitable” is that its food did not agree with them, so they became sick. The Messenger ﷺ permitted them to use “urine” in medical treatment, and it is impure. Bukhari reported from Abu Hurairah that he said, «قَامَ أَعْرَابِيٌّ فَبَالَ فِي الْمَسْجِدِ فَتَنَاولَهُ النَّاسُ فَقَالَ لَهُمُ النَّبِيُّ ﷺ دَعُوهُ وَهَرِيقُوا عَلَى بَوْلِهِ سَجَلًا مِنْ مَاءٍ أَوْ ذَنْوِبًا مِنْ مَاءٍ فَإِنَّمَا بُعِثْتُمْ مُيسِّرِينَ وَلَمْ تُبْعَثُوا مُعَسِّرِينَ» **“A Bedouin stood up and urinated in the masjid, so the people caught him. The Prophet ﷺ said to them, ‘Leave him, and pour a bucket of water or a large vessel of water over his urine, for you have been sent to make things easy and you have not been sent to make things difficult.’”** His saying “a bucket” and “a large vessel”: meaning the full bucket.

So medical treatment with the prohibited and the impure is not Haram, but it is Makruh (disliked). This is because the prohibition against using alcohol in medical treatment was reported. Ibn Majah reported through Tariq bin Suwayd Al-Hadhrami who said, «قُلْتُ يَا رَسُولَ اللَّهِ إِنَّ بَارِضَنَا أَغْنَابًا نَعْتَصِرُهَا فَتَشْرَبُ مِنْهَا» **“I said, ‘O Messenger of Allah ﷺ, in our land there are grapes which we squeeze and drink from.’ He ﷺ said, ‘No.’”** I reviewed the matter with him, saying, ‘We use it to seek healing for the sick.’ He said, **“That is not a cure, but it is a disease.”** This is a prohibition against using the impure or the prohibited “alcohol” as a

medicine. However, because the Messenger of Allah ﷺ permitted medical treatment with the impure “camel urine,” and likewise the Messenger ﷺ permitted medical treatment with the prohibited “wearing silk,” as explained previously, these permitting Ahadith are a contextualization (قرينة qareenah) that the prohibition in the Hadith of Ibn Majah is not decisive (جازم jazim). That is, medical treatment with the impure and the prohibited is Makruh. Therefore, the use of a medicine in whose manufacture alcohol is included solely for the purpose of medical treatment is permissible with dislike (Karahah). It is better not to use alcohol, the prohibited, and the impure, in the manufacture of medicine, but if they are used in the manufacture of medicine, its ruling is Makruh. Thus, if a patient takes a medicine containing alcohol or prohibited or impure substances, it is Makruh. Likewise, blood; its use for medical treatment takes the ruling of Karahah (dislike), not Hurmah (prohibition).

Often, blood must be used for treatment in emergency and urgent cases, and it cannot be collected and used in a short time. Therefore, there must be existing practical procedures that make blood or its derivatives fully ready and prepare sufficient and safe quantities for treatment when needed:

- The Islamic State works to establish branch blood bank centers for blood donation, and these centers can be fixed or mobile to facilitate collection according to population and medical needs. This is a constant and field-based matter in the army to ensure blood is collected regularly, so that sufficient supplies are maintained.
- It also works to establish laboratories to determine blood type and kind and test it, and to test for diseases that can be transmitted through blood.
- There should be a database and electronic records to register the blood type, its storage location, and its expiration date.

- When recruiting individuals for the army, their important medical data, such as blood type, must be obtained and recorded so that it can be easily matched if they are injured during Jihad and need blood.
- All types of donated blood must be tested to avoid diseases before using them for medical treatment.
- There must be facilities for storing blood equipped with the latest equipment, including electricity, appropriate temperature, and ideal storage conditions for blood and its derivatives, with ease and speed of supply when needed. There must also be sufficient storage locations near places of potential need from time to time, and for transporting blood to remote areas safely, for example, to battlefields or combat zones.
- Since Jihad in the Islamic State is a fundamental matter for spreading Islam and defending Muslims, the blood bank must always be ready to supply the front lines of the army with the necessary blood and its components to treat the wounded. For this purpose, special branches of the blood bank are established at the battle frontiers to collect blood from fighters in the rear lines and contact areas, to provide it to the wounded on the front lines. The blood bank system must balance inventory and demand so that the volume of demand does not exceed the volume of inventory, causing a shortage and thus a delay or disruption in treatment. Likewise, the inventory should not exceed the demand, causing the blood to be destroyed after its expiration date.
- The state conducts periodic media campaigns to urge people to donate blood due to its necessity in treating patients and Mujahideen. The blood type of everyone who donates is verified, and this information is kept within the blood bank's data, so if they ever need blood one day, their blood type is known to them.

Technology and the Medical Industry in Therapeutic Management

Every permissible (Mubah) technology that helps fulfill people's needs must be used and developed regardless of its source. The Khilafah State must work to develop and use modern medical technology, such as using robotics in surgery, artificial intelligence in reviewing X-rays and scanning, video communication technology in remote consultations, and barcode technology to improve the security, safety, and quality of healthcare by verifying the patient's identity and therapeutic information; and using electronic medical records and electronic prescription systems, and many others. Thus, the occurrence of potential errors in identifying the patient is reduced.

The Administrative Healthcare System

The healthcare system in the Khilafah state consists of a set of Shariah rulings and administrative laws related to this care. As for the Shariah rulings, they are those correctly deduced from the Shariah evidences. As for the administrative laws for healthcare, they are the permissible (Mubah) means and methods that the ruler (Wali al-Amr) deems effective in implementing the system and achieving its purpose. These are worldly matters subject to development and change in a manner commensurate with the implementation of the relevant Shariah rulings. They can also be taken from the permissible experiences, expertise, and research that other nations have reached. There is an institution for the interests of the people headed by the Khaleefah, or he appoints a competent director to head it, to lighten the burden on the Khaleefah, especially since interests have branched out and multiplied. This institution adopts styles and means that facilitate living for those under the ruler's care, and provides them with the necessary services without complexity, but rather with ease and facility. This institution consists of departments (Masalih), directorates (Dawa'ir), and administrations (Idarat). The Maslahah (department) is the supreme administration for any of the state's interests, such as the Healthcare Department.

The administrative institution is a style among the styles of performing an action, and a means among its means, so it does not require a specific evidence for it; the general Shariah evidence evidencing its origin is sufficient. Likewise, administrative methods can be taken from any system unless there is a specific Shariah text prohibiting a certain administrative style. Other than that, it is permissible to adopt administrative styles if they are suitable for facilitating the work of administrative institutions and fulfilling the interests of the people.

The administrative system for healthcare in the Islamic State is based on simplicity and speed in providing health service and treatment, as well as on competence in those who assume the administration. This is taken from the reality of accomplishing interests in general, for the owner of any interest only desires the speed of its accomplishment, and its accomplishment in the most perfect manner. The Messenger ﷺ says in what Imam Muslim reported in his Sahih, «إِنَّ اللَّهَ كَتَبَ الْإِحْسَانَ عَلَى كُلِّ شَيْءٍ» **“Verily Allah has prescribed Ihsan (excellence) in all matters.”** Thus, Ihsan in fulfilling tasks is commanded by Shariah. To reach this Ihsan in fulfilling interests, three qualities must be present in the administration; the first is simplicity in the system because it leads to ease and facility, while complexity creates difficulty. The second is speed in accomplishing transactions because it leads to facilitation for the owner of the interest. The third is ability and competence in the one to whom the work is assigned, and this is necessitated by the excellence of the work just as it is required by the performance of the work itself.

Regarding health interests specifically, speed, simplicity, and the avoidance of complexity in administrative transactions are paramount and most important; since illness is an urgent need, delaying its treatment may lead to its exacerbation and an increase in the resulting harm. Furthermore, the patient’s soul cannot bear procrastination, waiting, and the complexities of transactions.

The Healthcare Department

The Public Health Department, headed by the Director General of the Health Department, manages and implements the healthcare policy in the Khilafah State, and preserves public health by providing preventive, curative, and regulatory health services to the society and individuals. It supervises all the directorates and administrations affiliated with it. For every directorate and every administration, a director is appointed who is directly responsible for it and for the branches and sections that follow it. The Health Department also supervises all health facilities in the Islamic State and coordinates with other facilities related to healthcare. Within its responsibilities fall the other directorates through which healthcare matters are regulated, such as crisis and disaster management in cooperation with the relevant state facilities, the health information and technology bank, the health awareness and media administration, the expert committees for health and therapeutic standards and guidelines, the methodologies of medical education and health vocational training, the medical licensing directorate, quality control, the health budget, finance, and procurement directorate, the medicine and pharmaceutical industry directorate in coordination with the War Directorate, and public health control in cooperation with the Hisbah apparatus. It also undertakes the supervision of the global health directorate, and follows up on new developments in scientific matters, medical technology, and global health trends.

The Administrative Structure of the Healthcare System in the Islamic State

1- **The Director General of the Health Department**, who is the general official responsible for implementing the healthcare policy. What reduces administrative complexities and transactions in healthcare management is unifying all health services and facilities in the Islamic State into a single apparatus, headed by the Director General of the Health Department.

2- **Directors of Directorates**: following the Director General of the Health Department in the administrative hierarchy are the directors of the directorates divided according to the Wilayat (provinces).

3- **Directors of Administrations** divided according to the ‘Amalat (districts); such that the Health Department undertakes the affairs of the department itself and its subordinate branch directorates and administrations, and the directorate undertakes the affairs of the directorate itself and its subordinate branch administrations in the ‘Amalat of the Wilayah.

Family doctors, school nurses, maternal and child care centers, health centers, hospitals, pharmacies, and all other health facilities and workers shall be accountable to the Director of the Administration in the ‘Amalah to which they belong. These directors are accountable to those who assume the higher administration of their departments, directorates, or administrations, regarding their work, and accountable to the Wali and the ‘Amil regarding adherence to general rulings and systems.

As for enabling all those under the ruler’s guardianship to obtain the necessary health service, it is done as follows:

In every ‘Amalah, there must be a number of **primary health centers** containing family doctors, nurses, a pharmacy, emergency

staff, laboratories for conducting basic tests, and ambulances. In every ‘Amalah, there must be a number of **comprehensive health centers** equipped with the four basic specialties: internal medicine, surgery, pediatrics, and gynecology, along with the other nursing, pharmaceutical, and laboratory equipment they require.

The number of these **primary and comprehensive centers** in each ‘Amalah must be proportionate to the population of the ‘Amalah and the distance of residential areas from each other, such that no family doctor or specialist has a large number of patients that makes him unable to provide health service to them quickly and with Ihsan (excellence), and such that the health center is not too far from the patient. If the residence of one of those under the ruler’s guardianship is isolated and far from the nearest residential gathering, appropriate means of transport must be placed at the disposal of the nearest health center to him, ensuring the transport of the patient to the center at any time to receive any medical service, whether it is an emergency or not, as well as transporting medicine to the patient. Whoever desires any non-emergency health service goes to the family doctor, and the latter provides this service, if it is within his field of specialty and knowledge; otherwise, he refers the patient to another specialist in the comprehensive centers or to the hospital according to the health problem, and the necessity of providing treatment without delay. Whoever has a chronic health condition such as diabetes, blood pressure, heart disease, joint disease, or otherwise, makes periodic visits and follows up on the disease and treatment with a doctor specialized in this chronic disease, and the family doctor must also follow up on the patient by reviewing the periodic reports of the specialist doctor.

Whoever desires an emergency health service calls the ambulance, and the nearest ambulance crew provides primary treatment and transports the patient to the hospital immediately.

The state must establish at least one hospital in every ‘Amalah, containing the basic specialties such as internal medicine, surgery, pediatrics, gynecology, and so on, and also containing an emergency department. The state must ensure that there is at least one hospital in every Wilayah that contains, in addition to the basic specialties, sub-specialties and departments for rare diseases. These departments are determined according to the diseases present in that Wilayah, as there may be diseases in some regions that do not exist in other regions.

The Information Bank, Diwans, and Electronic Personal Files

The Health Department in the Islamic State must establish an electronic information record for every patient at the very least, containing all health details related to him, and containing all the health problems he has suffered from and the services or medicines he has received. This information is gathered from maternal and child care centers, school nurses, hospitals, family doctors, and every other health administrative apparatus in the state; such that it is recorded in a single electronic record. The goal of such recording is to inform anyone who wants to provide a health service to this patient about his health history to make it easier for him to diagnose health problems and prescribe the appropriate treatment.

Since the doctor is an advisor, and the advisor is entrusted as Abu Dawud reported from him ﷺ, this information about the patient must be confidential, not to be viewed by anyone except the patient himself or whoever the patient permits to do so, because illness is usually something concealed and one does not desire people to view it. The Messenger ﷺ says, **«إِذَا حَدَّثَ الرَّجُلُ الْحَدِيثَ، ثُمَّ التَفَتَ فَهِيَ أَمَانَةٌ»** **“If a man tells something and then looks around, it is a trust”** [Reported by At-Tirmidhi who said: “A Hasan Hadith”]. The patient’s speech to the doctor is of this kind, meaning it is a trust. Muslim reported from him ﷺ that he said, **«لَا يَسْتُرُ عَبْدٌ عَبْدًا فِي الدُّنْيَا إِلَّا سَتَرَهُ اللَّهُ يَوْمَ الْقِيَامَةِ»** **“No servant conceals the faults of another servant in this world except that Allah will conceal him on the Day of Resurrection.”** Speaking about the patient’s confidential disclosures contradicts the commanded concealment. Exempted from the obligation of concealment is health information whose concealment may cause harm to the community, such as hiding a contagious disease or not reporting a patient whose work poses a danger to the community, like an airplane pilot or a truck driver afflicted with epilepsy. This falls under the category of preventing and removing harm. The exception here is restricted to notifying the authorities that treat and prevent this potential harm.

Ensuring the Quality of Healthcare

Among the objectives of healthcare in the Islamic State are excellence and progress; therefore, the Islamic State must be at the forefront of states in terms of healthcare. It is imperative to create a host of doctors, scientists, and specialists who are scientifically and practically qualified to invent the necessary styles and means for healthcare, and it is imperative to provide them with the maximum capabilities for scientific research and innovation. The Health Department, with all its apparatuses and branches, undertakes the necessary procedures and studies to ensure the continuity of the quality of this care. Among these evaluative procedures and studies are **Medical Audits** of the level of healthcare through practical studies conducted by healthcare experts to evaluate patient care in a systematic manner, and then improve it, i.e., **Quality Assurance of prevention, diagnosis, and treatment**, by applying **Accreditation Standards** in ensuring the quality of health services, and finally establishing a framework for **Clinical Governance** rules for all health facilities under the umbrella of the Public Health Administration Department. Clinical Governance can be defined as a framework through which healthcare administration is accountable for continuously improving the quality of their services, and safeguarding high standards of care through medical monitoring and accountability, creating an environment in which excellence in clinical and non-clinical care will flourish, reducing risks, and overall, the medical administrative coordination of those responsible in the health facility for patient care.

The Healthcare Administration Department sets the standards for these procedures in light of the relevant Shariah rulings because many of the standards set by international health institutions and Western countries consider in their methodology profitable economic aspects, such as taxes and tax evasion, and the corrupt values upon which capitalism is based, such as freedoms and contradicting human nature (Fitrah). Therefore, the Khilafah must possess the reins of affairs in the field of healthcare and achieve self-sufficiency.

Committees of Experts to Set Standards and Shariah Rulings Related to All Aspects of Healthcare in the Islamic State

The massive scientific developments in the field of biology, human embryology, genetics, cytology, medical biology, genetic engineering, and cloning have exceeded all expectations and astounded minds. What scientists have reached is nothing but a simple discovery of some of those laws, systems, and properties that Allah ﷻ has deposited in His creatures. The more science advances, the more it confirms the greatness of the Creator, His complete power, and His profound wisdom. Allah ﷻ said,

﴿سَنُرِيهِمْ ءَايَاتِنَا فِي الْآفَاقِ وَفِي أَنْفُسِهِمْ حَتَّىٰ يَتَبَيَّنَ لَهُمْ أَنَّهُ الْحَقُّ ۗ أَوَلَمْ يَكْفِ بِرَبِّكَ أَنَّهُ عَلَىٰ كُلِّ

شَيْءٍ شَهِيدٌ ﴿٥٣﴾

“We will show them Our signs in the horizons and within themselves until it becomes clear to them that it is the truth. But is it not sufficient concerning your Lord that He is, over all things, a Witness?” [Fussilat: 53]. These developments and discoveries, although they are the product of scientific experiments, and science is universal and not specific to a certain viewpoint; their applications and adoption are based on the viewpoint in life. On this basis, these scientific achievements, standards, and guiding instructions in prevention, treatment, medical education, and emerging related topics must be dealt with. They must be examined according to the Shariah texts with the exertion of utmost effort, then the relevant Shariah ruling is deduced by *istinbaat*, so that what is permissible (Mubah) to adopt according to Shariah, and what is Haram to adopt according to Shariah, becomes clear. To achieve this, the Health Department in the Khilafah State forms multiple committees of Fuqaha (jurists), expert doctors, pharmacists, public health experts, nursing experts, other allied health professions, and those related to them. These committees will set the foundations, standards,

health and medical guidelines, and Shariah rulings related to the following healthcare:

1. **Public health** such as environmental health, health standards for water, food, and air, occupational health, sanitation and waste treatment, preservation of forests and woodlands, animal health, and combating agricultural pests and diseases.

2. **Setting standards and guidelines related to managing disasters and humanitarian crises** in cooperation with other state apparatuses, and guidelines related to managing infectious diseases and epidemics.

3. **Guidelines related to individual preventive health** such as maternal and child care centers, dental health, school nursing, vaccinations, and screening examinations.

4. **Setting therapeutic standards and guidelines for non-communicable, chronic, and rare diseases** in terms of risk factors, therapeutic patterns, reducing complications, and post-treatment rehabilitation; according to the strength of emerging scientific evidence or medical experience. This is for chronic diseases whose cause is unknown and which deplete physical and mental well-being and health resources, such as cancers, cardiovascular diseases, high blood sugar, strokes, and others.

5. **Setting the foundations for health awareness and the media's role in health education** for all societal groups according to the latest documented medical information, which plays a role in activating the patient's role in participating in prevention, treatment, and health recovery, in addition to general familiarization with the health services available in the Khilafah State.

6. **Setting educational curricula and medical education standards** according to the latest foundations of medical education for doctors and allied health professions, medical examinations to license them, evaluating those who completed their studies outside the Islamic State, as well as setting continuous medical education

programs and developing their knowledge and experience through the latest available means and methods.

7. Setting standards and guidelines for medical scientific excellence and upgrading health services in the Khilafah State through encouraging scientific research and continuous emerging research in finding medicine and diagnostic means for diseases, and setting rewards for those who excel in their research and studies.

8. Setting standards and Shariah rulings related to new developments and medical and health scientific achievements that appear from day to day in the world, until the time comes when the bulk of scientific achievements return to being the making of Muslim scientists in the Khilafah State as they were before.

These standards and guidelines will unify the patterns of healthcare in the Khilafah State in terms of excellence and accuracy in providing health services by doctors and other medical professions, especially when the Islamic State is vast. It will become customary for the healthcare provider to perform them anywhere, and it will also make it easier for patients to receive the same therapeutic and preventive pattern in all of the state's health facilities.

Awareness, Education, and Health Guidance in Connection with the Media Department

The state takes care of teaching basic medical skills such as first aid and Cardiopulmonary Resuscitation (CPR) in special and free courses. These courses are mandatory for police and army personnel, teachers in schools, and their likes, and are optional for the rest of those under the ruler's guardianship. The Health Department also provides the necessary equipment and facilities to perform first aid, CPR, and rescue injuries, including tools, devices, and immediate communication means, in crowded places, remote areas, and on external roads.

A special apparatus for health guidance is established, affiliated with the Health Department and linked to the Media Department. Its function is to provide general health guidance to those under the ruler's guardianship through the media, and to provide specific health guidance for each sector according to its needs, such as specific guidance for miners, the armed forces, drivers, and others. The guidance apparatus also undertakes health awareness related to public healthcare, with sustainable health education for everything new in prevention and treatment in medicine.

Issues and Controls in Healthcare

Medical Education, Allied Health Professions, and Scientific Research

Medical Education

One of the goals of systematic education in the Khilafah State is to prepare the sons of the citizens to be specialized scientists in various fields, including medicine and what is attached to it. Education takes into account preparing the student to deal with the universe that Allah has subjected to man. Allah ﷻ said,

﴿وَسَخَّرَ لَكُم مَّا فِي السَّمٰوٰتِ وَمَا فِي الْاَرْضِ جَمِيعًا مِّنْهُۥٓ اِنَّ فِيْ ذٰلِكَ لَاٰيٰتٍ لِّقَوْمٍ يَّتَفَكَّرُوْنَ﴾

“And He has subjected to you whatever is in the heavens and whatever is on the earth - all from Him. Indeed, in that are signs for a people who give thought” [Al-Jathiyah: 13]. Therefore, the Muslim learns empirical sciences in order to benefit from them and harness them, to serve the interests of the Islamic Ummah, such as the interest of healthcare. Organizing education and training for healthcare is an obligation upon the Khilafah State. It must organize education and training and set professional standards for everyone licensed to practice health professions. This includes: doctors, pharmacists, nurses, radiology technicians, and others whose work relates to healthcare.

Providing Properly Trained Doctors, Nurses, and Other Workforce

The Khilafah State must guarantee a sufficient number of doctors, nurses, and all other healthcare providers. It must also guarantee quality in order to fulfill this duty in terms of skills, competence, and simplicity of service. Doctors are those who have the knowledge and experience in diagnosing and treating

physical and mental health problems. Abu Dawud, An-Nasa'i, Ibn Majah, and others reported from him ﷺ his saying, «مَنْ تَطَبَّبَ وَلَمْ يُعَلِّمْ مِنْهُ طَبِّ قَبْلَ ذَلِكَ فَهُوَ ضَامِنٌ» **“Whoever practices medicine without prior knowledge of it is a guarantor (liable)”** [Al-Hakim said: It has a Sahih Isnad, and Al-Dhahabi agreed with him].

Nursing and Other Health Professions

Nursing means caring for the sick, the disabled, the wounded, or the dying, as well as assisting in promoting health and preventing diseases. During the time of the Messenger of Allah ﷺ, women used to accompany the Mujahideen in the path of Allah. From Anas, he said, “The Messenger of Allah ﷺ used to go out on military expeditions with Umm Sulaym and some women of the Ansar with her; they would provide water and treat the wounded” [Abu Isa said: This is a Hasan Sahih Hadith]. Muslim reported from Umm Atiyyah Al-Ansariyyah, who said, «غَزَوْتُ مَعَ رَسُولِ اللَّهِ ﷺ سَبْعَ غَزَوَاتٍ أَخْلَفْتُهُمْ فِي رِحَالِهِمْ فَأَصْنَعُ لَهُمُ الطَّعَامَ وَأَدَاوِي الْجَرْحَى وَأَقُومُ عَلَى الْمَرْضَى» **“I went on seven military expeditions with the Messenger of Allah ﷺ, staying behind in their camps, preparing food for them, treating the wounded, and caring for the sick.”** And from Mahmud bin Labid who said: “When the medial arm vein (Akhal) of Sa'd was injured on the Day of the Trench and he became severely ill, they moved him to a woman called Rufaydah, and she used to treat the wounded. So, the Prophet ﷺ, whenever he passed by him, would say, «كَيْفَ أَمْسَيْتَ؟ وَإِذَا أَصْبَحَ: كَيْفَ أَصْبَحْتَ؟» **“How are you this evening? And when morning came: How are you this morning?” and he would inform him.”**

With the development of healthcare over the centuries, professionals in health and allied professions emerged, such as specialized pharmacists, health technicians in radiology, nursing, anesthesia, laboratory, pharmacy, optometry, epidemiology, prosthetics, physical therapy, dental care and prosthodontics, tomography and nuclear medicine, laser devices, surgeries, psychological and social specialists, nutrition

and public health specialists, midwifery, ambulance and paramedics, speech and hearing therapy, occupational rehabilitation, occupational therapy, medical physics, and other health professions. The Shariah evidences that obligate the Khilafah State to look after the affairs of the Ummah also obligate it to provide a sufficient number of these and other professionals, according to the need to fully achieve the objectives set for healthcare. Likewise, the Shariah evidences that make it obligatory for a person to have sufficient knowledge and training to be a doctor also obligate this upon any other health professional to practice their specific profession. When Islam prohibited the practice of medical treatment by someone who does not know medicine, it consequently prohibited the practitioners of all other health and medical professions from practicing their work, without knowledge and experience. Therefore, the Islamic State must set standards by which a doctor is distinguished from others, and it must prevent those who do not meet these standards from practicing medicine. If someone undertakes what is not within his field of knowledge or specialty and harms the patient, he is responsible for his felony and is a guarantor (liable) to the extent of the harm he caused, because by this action he is considered a transgressor, and the liability (Daman) is from his wealth. The same applies to doctors' assistants, such as nurses, radiology specialists, pharmacists, and others, regarding the ruling of liability upon whoever among them practices the profession without recognized competence to perform it and harms the patient.

Establishing Medical Education Curricula and Qualifying Professionals in Healthcare

Taking into consideration the impermissibility of practicing medicine by someone who has no knowledge and experience, the state establishes a committee of specialized doctors and educators whose task is to set a program for teaching medicine in

universities, and to set the minimum academic subjects and skills that a doctor is required to be familiar with and master in order to be granted a license to practice medicine. Programs are also set for each medical specialty by specialists in that field to grant a license to practice specific medical specialties to those who master them, such as surgery, internal medicine, pediatrics, and so on. Similar committees are established for the professions of nursing, pharmacy, and all other topics related to medicine.

The task of this committee is as follows:

1- Establishing a program for teaching medicine in universities. It must determine a curriculum that includes the minimum academic knowledge, as well as the necessary technical skills.

2- Setting standards for basic training and basic qualification.

3- Granting a license to practice when those standards are met.

4- Monitoring adherence to quality standards after qualification.

5- Excluding those who fall short of fulfilling the necessary standards.

This committee may not need to set detailed curricula and training methods, but it needs to set final goals that ensure the competence and capability that the various training programs must achieve. It must determine the minimum sciences and knowledge, as well as the necessary technical and practical skills, and it must evaluate these individuals to ensure adherence to those standards. This supervisory committee should also possess the authority to accredit local educational programs if they meet the minimum basic requirements, and then evaluate these programs at appropriate time intervals to verify the maintenance of those standards.

Competence in Training

There are some practical skills that a doctor, nurse, or pharmacist can perform if they receive specific training or specific experience. Local programs may be invented to develop an appropriate mix of skills to meet local needs, especially in a transitional period after the establishment of the state if a sufficient number of professionals in a specific profession is not available when needed at that time. In this case, a distinguished professional can supervise a group of those who have been trained to perform specific tasks, provided they are under continuous supervision.

Likewise, in the Khilafah State, a larger number of female doctors, female healthcare professionals, and midwives must be trained to cover the healthcare needs of women. This must be reconciled with the woman's role as a mother and a homemaker, and that she is an honor ('Ird) that must be protected. For this reason, women may need long professional career breaks, or to work part-time, or to engage in job sharing while maintaining their primary role. This necessitates the entry of a larger number of women into professional training programs to cover the need. When there is a shortage of female specialists, the health needs of men and women are met by qualified health workers while taking appropriate measures in accordance with the rulings of the Shariah.

Scientific Research and Continuous Medical Education

Research education is the education that follows receptive education in universities and colleges. In it, the student learns creativity in scientific research, and specializes in a specific branch of culture and sciences, conducting precise specialized research in it; such that he reaches a new idea or a new invention. The science of medicine is advancing today with wide strides, and the state must urge doctors to continue tracking and studying all new discoveries or inventions; so that they can provide the best,

most advanced, and most developed health services. This is done by supporting and encouraging periodic scientific publications and distributing them to doctors, and through periodic conferences and intensive courses for doctors, each in his field of specialty. It is not sufficient to merely track what is new; rather, the Islamic State must be at the forefront of states in scientific research and innovation, including medical innovation. Although all individuals among those under the ruler's care have the right to establish scientific laboratories related to all affairs of life, including medicine, the Islamic State itself must establish these laboratories. The state prepares libraries and other means of knowledge outside of schools and universities to enable those who wish to continue research in medicine and other sciences and knowledge, and to continue invention, discovery, and other forms of research, until there is a host of Mujtahids, innovators, and inventors in the Ummah, and to encourage scientists and doctors to exert their utmost effort in creativity and innovation to achieve precedence in the scientific field.

However, the Islamic State allocates further support for scientific research in certain diseases and medical fields, such as widespread epidemic diseases or incurable diseases, without regard to the material return from scientific discoveries or innovations in these fields. The Messenger ﷺ urged seeking medical treatment and searching for medicine. He ﷺ said when the Bedouins asked him about medical treatment, «نَعَمْ، يَا عِبَادَ اللَّهِ تَدَاوُوا»، «Yes, O servants of Allah, seek medical treatment, for Allah did not create a disease without creating a cure for it - or he said a medicine - except for one disease.” They said, “O Messenger of Allah, what is it?” He said, «الْهَرَمُ» “Old age” [Reported by At-Tirmidhi who said: “A Hasan Sahih Hadith”].

Maintaining Standards Through Professional Development and Continuous Education

In addition to preparing education for health professionals at the university level, a plan for postgraduate training and

continuous professional development must also be put in place to verify that health professionals practice their work according to the latest scientific evidence and according to the needs of the patient groups to whom they provide care. This is supervised by the supervisory bodies for the various medical specialties.

Licensing Doctors Graduating From Other Countries

Doctors who studied medicine in universities outside the Islamic State will have their cases reviewed. If the doctor has worked in medicine for a sufficient period in that country such that he acquired experience and know-how in his field, he is granted a license to practice medicine. If he has not worked for a sufficient period, he is tested in the academic subjects and skills required of those who studied medicine in the Islamic State. If he passes the test, he is granted a license; otherwise, he studies what he lacks in subjects and skills according to the test result, and then he is granted the license. This applies to all graduates of medical and health professions from other countries.

Monitoring Standards and Medical and Health Liability

a- Adherence to Medical and Health Standards:

Whoever practices medical treatment while it is not within his field of knowledge or specialty and harms the patient is responsible for the harm he causes and is a guarantor (liable), and he must financially compensate the person for any harm he caused. Abu Dawud, An-Nasa'i, Ibn Majah, and others reported from him ﷺ his saying, «مَنْ تَطَبَّبَ وَلَمْ يَعْلَمْ مِنْهُ طِبٌّ قَبْلَ ذَلِكَ فَهُوَ ضَامِنٌ» **“Whoever practices medicine without prior knowledge of it is a guarantor (liable).”** This also applies to allied health professionals such as nurses, radiology technicians, pharmacists, and others who practiced the profession without sufficient qualifications and caused harm to the patient. The service provider must adhere to the rules, standards, and procedures specific to practicing the profession according to the degree of his specialty and field, and

this must be documented in the file of the service recipient. The doctor, in particular, **must adhere to the following:**

- Documenting the health condition of the service recipient and the medical history by the doctor.
- Using the necessary and available diagnostic or treatment means for the medical condition.
- Using the necessary and available medical tools and devices in diagnosing and treating the service recipient according to universally recognized scientific standards.
- Enlightening the patient about the available treatment options, with the exception of emergency medical cases that cannot bear delay.
- Prescribing the treatment and specifying its quantities and method of use in writing.
- Informing the service recipient of the nature of his disease and its degree of severity, unless his interest dictates otherwise.

Conversely, **the service provider is not permitted to do the following:**

- Treating the service recipient without his consent; exempted from this are cases that require emergency medical intervention.
- Refusing to provide the service in emergency cases or interrupting its provision under any circumstances.
- Using unapproved diagnostic or therapeutic means or medicines to treat the service recipient.
- Disclosing the secrets of the service recipient that he becomes privy to during or because of the practice of the profession.
- Performing any therapeutic or diagnostic procedures that contradict Shariah rulings or medical standards, or conducting

any scientific research or experiments without the patient's consent and following the standards in this regard.

- Performing any therapeutic procedures or surgical operations without the informed consent of the patient.

b - The Role of the Judiciary - The Qadi of Hisbah (Inspections) and the Qadi of Khusumat (Judge of Disputes)

The Hisbah (Inspections) apparatus undertakes preventing any person who has not obtained the appropriate license from providing health service. It is not sufficient to merely hold him liable (guarantor) for the harm resulting from his action; rather, he is punished with Ta'zir (discretionary punishment) in proportion to the knowledge he claimed and the profession he practiced without being qualified for it. He is punished and publicly exposed, because claiming qualification and knowledge by an ignorant person is fraud (Ghash) forbidden by the Sharia. He ﷺ said, «مَنْ غَشَّ فَلَيْسَ مِنِّي» **“Whoever cheats is not of me”** [Reported by Muslim from Abu Hurairah]. Muslim also reported from Abu Hurairah from the Messenger of Allah ﷺ that he said, «وَمَنْ غَشَّنَا فَلَيْسَ مِنَّا» **“And whoever cheats us is not of us.”** All of this also applies to allied health professionals such as nurses, radiology technicians, pharmacists, and others who practiced without sufficient qualifications for practice and caused harm to the patient.

There is a difference between the role of Hisbah in monitoring standards, enforcing them, and correcting violations of correct standards, and dealing with individual cases where malpractice occurs. The Muhtasib is the judge who looks into cases that are public rights, in which there is no plaintiff, provided they do not fall under the Hudud (prescribed punishments) and Jinayat (felonies). As for the patient who feels that harm has befallen him from a health professional, he has the right to raise the matter to the Qadi of Khusumat (Judge of Disputes). If the court rules against the doctor, he may have to compensate the

patient for the damages he caused. Moreover, the qualifying authority may suspend his license to practice, if the harm is severe, either permanently or temporarily, until he is rehabilitated.

Medical and health liability is determined based on the extent of the service provider's adherence to the standards set by the Public Health Department for practicing the relevant medical profession, including the license to practice the profession. Its determination also includes the place of providing the service, its specific standards, the factors and circumstances that precede, coincide with, or follow the work of the service provider, and the medical or health procedures provided to the service recipient.

Looking into complaints submitted against a medical or health service provider may require the formation of expert committees to provide opinion and advice by the Public Health Department, before or during the consideration of the case by the Qadi of Khusumat.

Medicines and Pharmaceutical Industries in the Islamic State

Pharmacy and Medicine

The Messenger ﷺ commanded Muslims to seek medical treatment by way of recommendation (Nadb), and informed them that Allah ﷻ did not send down a disease except that He sent down a healing and a treatment for it, whether man has reached this treatment or has not yet reached it. If the medicine matches the disease, the patient will be cured by the permission of Allah ﷻ. In this is an urging for man to seek medical treatment and attain healing by the permission of Allah ﷻ, who created the property of healing in the medicine. He ﷺ said in what Muslim reported in his Sahih, «لِكُلِّ دَاءٍ دَوَاءٌ، فَإِذَا أُصِيبَ دَوَاءُ الدَّاءِ بَرَأَ بِإِذْنِ اللَّهِ عَزَّ وَجَلَّ»، **“For every disease there is a medicine, and if the correct medicine corresponds to the disease, it will be cured by the permission of Allah ﷻ.”** At-Tirmidhi reported from Usamah bin Sharik: The Bedouins said, “O Messenger of Allah, should we not seek medical treatment?” He said, «نَعَمْ، يَا عِبَادَ اللَّهِ تَدَاوُوا، فَإِنَّ اللَّهَ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ شِفَاءً، أَوْ قَالَ دَوَاءً»، **“Yes, O servants of Allah, seek medical treatment, for Allah did not create a disease without creating a cure for it - or he said a medicine - except for one disease.”** They said, “O Messenger of Allah, what is it?” He said, «الْهَرَمُ» **“Old age.”** Thus, there is good in medicine even if the disease is from Allah ﷻ, because the treatment is also from Allah ﷻ.

Imam Malik reported in Al-Muwatta a Mursal Hadith from Zayd bin Aslam, that a man in the time of the Messenger of Allah ﷺ suffered a wound, and the wound became engorged with blood. The man called two men from Banu Anmar who looked at it, and they said that the Messenger of Allah ﷺ said to them, «أَيُّكُمَا أَطَبُّ» **“Which of you is the better doctor?”** They said, “Is there good in medicine, O Messenger of Allah?” Zayd said that the Messenger of Allah ﷺ said, «أَنْزَلَ الدَّوَاءَ الَّذِي أَنْزَلَ الْأَدْوَاءَ»، **“The One Who sent down the diseases sent down the medicine.”**

The Messenger ﷺ received treatment during his illness at the end of his life. Imam Ahmad reported in his Musnad from Aisha (ra) that she said, «إِنَّ رَسُولَ اللَّهِ ﷺ كَانَ يَسْقَمُ عِنْدَ آخِرِ عُمُرِهِ، أَوْ فِي آخِرِ عُمُرِهِ، فَكَانَتْ تَقْدُمُ عَلَيْهِ وَفُودُ الْعَرَبِ مِنْ كُلِّ وَجْهِ فَتَنَعَتْ لَهُ الْأَنْعَاءُ وَكُنْتُ أُعَالِجُهَا لَهُ» **“Indeed, the Messenger of Allah ﷺ used to fall ill towards the end of his life, or at the end of his life, and delegations of Arabs would come to him from every direction and prescribe prescriptions for him, and I used to treat him with them.”** This is regarding seeking medical treatment and requesting treatment. As for providing treatment for those under the ruler's care, it is a Fard (obligation) upon the state due to the saying of the Messenger ﷺ who said, «الْإِمَامُ رَاعٍ وَمَسْنُونٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his guardianship;”** since treatment is an important need for man, it is part of healthcare. Medicine is everything that is used to treat a disease or a symptom of a disease or to prevent infection with a disease. Thus, drugs, serums, blood derivatives, and its components such as antibodies, plasma, or any microorganisms like bacteria fall under medicine; because they are used to treat a disease or a symptom of a disease or to prevent it. Medicine falls under means and methods; therefore, it is not restricted to the treatments used by the Messenger of Allah ﷺ, but instead the human mind innovates in it, considering it among the worldly affairs.

Here, an important matter must be pointed out, which is medical treatment with what is Haram or Najis (impure), such as using medicines in whose manufacture alcohol or pig derivatives are included. It is permissible with Karahah (dislike), that is Makruh, as we explained previously. However, in the Khilafah State, there will be no obstacles, by the Permission of Allah ﷻ, to avoiding these prohibited and impure substances in the pharmaceutical industry, especially with the great scientific progress in the field of the pharmaceutical industry, which allows the use of many non-prohibited alternatives. The Messenger of Allah ﷺ informing that Allah ﷻ has sent down a medicine and a

cure for every disease puts specialists in discovering treatments on the path of innovation, due to their certainty that they are searching for something that exists. Since providing medicine is the responsibility of the state, it must provide it as free healthcare provided by the state as an obligation to all its subjects, either by purchasing it from medicine factories and companies within the state or abroad, or by establishing medicine factories owned by the state that produce the required medicines.

Medicine and its sale are a health service that an individual is permitted to offer to people by opening a pharmacy or establishing a medicine factory with the intent of profit. However, this is done with a license from the competent authorities to prevent harm. Whoever undertakes pharmacy work or dispenses medicine without permission and a license, and harms a patient, is a guarantor (liable) for the extent of his harm and felony, and is punished with Ta'zir (discretionary punishment) for undertaking pharmacy work and dispensing medicine without permission and a license.

The Medicine Directorate in the Khilafah State has a general director who is under the supervision of the **Director General of the Health Department Administration**. It consists of chemical experts, pharmacists, and doctors who have knowledge and experience in everything related to the pharmaceutical industry. Its work is to ensure the safety, quality, and efficacy of medicine and related materials through policies and systems based on standards that suit the healthcare policy in the Islamic State and the foundations upon which it is based. Among its functions is granting licenses for approved medicines, determining which medicines are allowed to be dispensed with a medical prescription, and which are given without a medical prescription. It also has a regulatory role over the medicines circulating in the state and conducting periodic tests on them to verify their compliance with the previously determined specifications. Among its responsibilities is the periodic inspection of medicine

production and distribution sites, whether in factories or pharmacies, to verify the commitment of both the producer and the distributor to the required technical conditions. Among its authorities is also licensing the entry of any medicine from outside the state after passing all tests and standards. It is not permissible to give any medicine to an individual before it fulfills all conditions related to its safety and efficacy, due to his ﷺ saying: «لَا ضَرَرَ وَلَا ضِرَارَ» **“There must be neither harming nor reciprocating harm.”**

Pharmaceutical Industries in the Islamic State

The observer of the health situation in the world today finds that human health suffering is increasing despite massive technological progress. The reason goes back to capitalism dominating the world, whose impact has extended to healthcare and the pharmaceutical industry. Although medicine and its manufacturing are among the sciences that can be taken from any nation, the ideological background of the West has left its major negative impact on the pharmaceutical industry. The scandals of pharmaceutical companies in the West are innumerable, and forgery in the results of clinical trials is not rare; therefore, it is not correct to rely on the medicine produced by the West unless it is reviewed, tested, and its safety for humans is verified. As for production technologies, they can be benefited from, because they are technical matters that can be adopted in the state and developed in a manner commensurate with our needs. The Islamic State must begin from the first day by adopting its own strategy for the pharmaceutical industry and providing it to all subjects of the state, based on the following points:

- Factories in the Islamic State, including medicine factories, are based on the basis of the war industry. Therefore, medicine factories, whether belonging to individuals or to the state, are always prepared and adaptable to the requirements of the war industry, producing all types of emergency medicines and

vaccinations against biological weapons on the widest possible scale and in the fastest time.

- Setting a timeline to reach self-sufficiency in manufacturing medicine; because it is a vital need, and its shortage or loss makes the state in need of importing it from abroad, which exposes it to the blackmail of disbelieving states or their political pressures.

- The state provides all material capabilities to fund scientific research in the field of the pharmaceutical industry and medical discoveries, and it spends generously on all innovators from Bayt al-Mal (State Treasury), especially in developing vaccines and treatments for chronic diseases.

- The state prevents all manifestations of scientific monopoly, such as intellectual property rights and copyright patents, and works to combat them at the international level by exposing their harms to humanity.

- The state must set future plans to deal with epidemics, and also set a mechanism to deal with health disasters.

- There must be cooperation between research centers, universities, hospitals, and pharmaceutical manufacturing companies so that the pharmaceutical industries in the state do not become detached from the real problems that society needs to solve.

- The state must establish survey teams whose role is to search for therapeutic benefits in the natural resources that Allah ﷻ has bestowed upon us, whether they are medicinal plants or marine organisms; since our lands enjoy massive natural wealth that remains virgin to this day.

- Work must be done to provide the raw materials necessary for the pharmaceutical industry.

The pharmaceutical industry in the Islamic State does not only aim to meet the need of those under the ruler's guardianship,

but it works from the first day to provide a strategic stockpile of medicines, first aid materials, and others to deal with disasters and emergencies, such as nuclear reactor disasters, the outbreak of a pandemic, or for the needs of wars. Given the concentration of material and human wealth in the lands of the Muslims, and the presence of many competencies in various fields, no obstacle will stand in the way of innovation in healthcare and the ensuing pharmaceutical industry. The environment will be prepared to eradicate most of the incurable diseases that humans have suffered from under the capitalist system; so that the Islamic State turns into a destination for those seeking medical treatment and healing from illnesses, by the Permission of Allah ﷻ.

Disasters and Exceptional Cases

Disaster and Emergency Management

Disasters require constant preparedness because the times of their occurrence are unknown. Rapid response during and after the occurrence of disasters is extremely important in saving people's lives, and this cannot be achieved except through good and comprehensive planning. Disasters appear in the form of earthquakes in some regions, or mass or snow avalanches, landslides, or floods, and added to them are human-caused disasters such as fires, nuclear explosions, wars, and global warming. The measures that must be taken vary regionally, and they must be updated continuously.

The Concept of a Disaster

Disasters are defined as events of natural, technological, or human origin that affect society by disrupting or halting normal human life and causing material, economic, and social losses; therefore, they require the work of many state apparatuses in a coordinated manner. Among these events, what occurs naturally such as earthquakes, floods, and volcanic eruptions are considered natural hazards, and the losses in lives and properties they cause are what make them take the label of disaster. The scale of a disaster is generally measured by the losses in lives, injuries, structural damages, and the social and economic losses resulting from the incident. However, there is a trend to evaluate the scale of a disaster by the volume of losses in lives and injuries it causes due to the importance of human life.

Disaster areas are the areas that have been seriously affected by the negative consequences of the disaster, and naturally need urgent assistance from the state, and it is not necessary to declare them a disaster area.

Initial aid is the assistance provided to limit diseases and epidemics, and providing material assistance such as temporary shelters, food, clothing, heating, and lighting for the affected families in disaster areas, in addition to rescuing victims, and providing first aid and medical treatment.

The premise is looking after the affairs, which is obligatory upon the Khaleefah towards those under his care, as Bukhari reported from Abdullah bin Umar from the Messenger ﷺ who said, «الْإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and he is responsible for those under his care,”** and to prevent or remove the harm resulting from such natural and war disasters, due to what Al-Hakim reported in Al-Mustadrak from him ﷺ that he said, «لَا ضَرَرَ وَلَا ضِرَارَ» **“There must be neither harming nor reciprocating harm,”** and to provide relief to the stricken and the distressed among those under the ruler’s guardianship who are afflicted by these disasters, as Bukhari reported in his Sahih from the Messenger ﷺ that he said, «الْمُسْلِمُ أَخُو الْمُسْلِمِ لَا يَظْلِمُهُ وَلَا يُسْلَمُهُ وَمَنْ كَانَ فِي حَاجَةِ أَخِيهِ كَانَ اللَّهُ فِي حَاجَتِهِ وَمَنْ فَرَّجَ عَنْ مُسْلِمٍ كُرْبَةً فَرَّجَ اللَّهُ عَنْهُ كُرْبَةً مِنْ كُرْبَاتٍ يَوْمَ الْقِيَامَةِ وَمَنْ سَتَرَ مُسْلِمًا سَتَرَهُ اللَّهُ يَوْمَ الْقِيَامَةِ» **“A Muslim is a brother of a Muslim, he neither wrongs him nor does he hand him over to one who does him wrong. If anyone fulfills his brother's need, Allah will fulfill his need; if one relieves a Muslim of his troubles, Allah will relieve his troubles on the Day of Resurrection; and if anyone covers up the sins of a Muslim, Allah will cover him up on the Day of Resurrection.”** So, the Islamic State is responsible for preventive preparation against these disasters, for prior readiness to confront these disasters when they occur, and for rebuilding and supporting the stricken areas after the disasters.

The Major Disasters That Must Be Dealt With Are as Follows:

Major disasters include earthquakes and tsunamis, floods and hurricanes, avalanches or landslides or rockfalls, large-scale land, sea, and air accidents, other climatic disasters, dangerous and epidemic diseases, large fires, nuclear and chemical accidents, and wars.

Despite the high level of knowledge and technology that modern sciences have reached, they still lack the necessary prior knowledge to influence natural events such as earthquakes, droughts, volcanic eruptions, and storms that can cause natural disasters. What humans can do is extremely limited, especially regarding preventing them.

Since disasters may vary according to the different regions in the Islamic State—some regions being prone to earthquakes while others suffer from floods or hurricanes—the Islamic State appoints a committee of specialists in every Wilayah (province). They are affiliated with a central unit for disaster and emergency management linked directly to the Khaleefah. Its function is to prepare to confront natural and war disasters in the Wilayah, and its work is on the following levels:

First: Pre-Disaster Management:

1- Proactive work to reduce the impact and consequences of disasters: These committees attempt to prevent the exacerbation of risks and their transformation into disasters, or mitigate the impact of disasters when they occur, through infrastructural proactive measures and means such as building dams and drainage networks to prevent floods, building houses elevated on pillars in flood-prone areas, or building underground basements and shelters in areas prone to hurricanes, storms, or bombing. This is also done through non-infrastructural proactive measures such as some laws adopted by the Khaleefah, and made binding upon those under his care, such as placing safety valves for gas and oil pipelines to close them in the event of earthquakes, or protecting some lands to use them as a barrier and separator against floods or volcanic emissions, or programs to guide those under the ruler's guardianship on how to act correctly when disasters occur. These measures, both infrastructural and non-infrastructural, are considered prevention, and they are among the most effective means to prevent disasters or mitigate their severity. It is also necessary to implement cultural training

programs that ensure providing every segment of society, according to the regions and the type of disasters specific to them, with the necessary information to deal with and overcome the effects of accidents with the least amount of damage, and to create a culture of harm reduction in society.

2- Developing action plans for disasters: Disaster response committees develop advance plans to confront disasters. Among these plans are training and preparing various relief crews from special forces, police forces, and the army to confront the effects of disasters. They also include establishing communication means and a common, easy, and simple language for relief crews to prevent confusion. They include developing early warning means, early evacuation plans, and alternative shelters for the hours of disasters. They include plans to secure and deliver provisions, food supplies, and equipment to the stricken. They also include training programs for crews from those under the ruler's guardianship to assist relief forces, which are usually insufficient at the time of the disaster. These plans are prepared to address the effects of a natural or war disaster when it occurs.

Second: Dealing With the Disaster:

To confront the disaster when it occurs, these committees manage the relief effort by directing and transporting initial relief crews and equipment to the stricken areas, and then continuing to support these initial crews and supplying them with secondary crews and volunteers. Police forces and army forces are placed at the disposal of the committees in the event the disaster is natural, or a war disaster but the war has ended or stopped and there is no fear of an attack on the state. However, if the disaster is a war disaster and the war is still ongoing, the priority for the army forces is repelling the enemy and the war effort, not the relief effort, as other apparatuses undertake this aspect.

It is important that the committees, during the initial effort of searching for victims and rescuing them, take care to provide the

stricken areas with basic human needs such as food, clothing, shelter, and fuel after a hurricane has passed, for example, or to transport the population to other safe areas after a volcano erupts and remains active. Therefore, the action plan for supply or evacuation is determined, according to the nature of the disaster and the extent of the danger posed by the population remaining in the stricken areas. Immediate relief operations include rehabilitating transportation, communications, and news channels, taking all types of security measures, measures related to environmental health, starting damage assessment studies, and preventing secondary and post disasters such as fires, explosions, infectious diseases, and so on.

Third: Repairing the Consequences of the Disaster:

After disasters, the committees develop plans to deal with the consequences of the disaster following the initial relief efforts, to restore the stricken areas to what they were before the disaster, while benefiting from previous mistakes in infrastructural and non-infrastructural measures and guarding against them. Efforts in this phase include repairing damaged infrastructure and buildings, and rehabilitating and reconstructing the stricken areas. Post-disaster activities include meeting the essential needs of affected communities and supporting the rapid recovery and return to normal living conditions.

The most important element in effective disaster planning is taking measures to save lives before the disaster occurs. Because the effectiveness of saving lives in post-disaster measures is extremely limited compared to before they occur; therefore, the Central Disaster Management Unit must record all disasters that occur within the state, prepare plans according to regions, and establish Wilayah Disaster Management Committees. It manages and coordinates firefighting teams, emergency medical response, police, army, and air forces after their deployment in the regions. However, these units cannot be directed to the disaster area except

by order of the ‘Amil, the Wali, or the Khaleefah. Therefore, while the administration undertakes the process of distributing tasks, coordination and disaster management are carried out by the Central Disaster Management Unit. The establishment of a disaster response committee in every Wilayah does not mean that the rest of the Wilayah do not participate in the relief effort. Instead, all these committees are linked and work together in coordination to confront the disaster wherever it may be, especially in coordination with the Central Disaster and Emergency Management Unit, provided that the management of relief operations is by the committee in the stricken Wilayah, and the resources of the rest of the committees are at its disposal. The Messenger of Allah ﷺ says, «تَرَى الْمُؤْمِنِينَ فِي تَرَاخُمِهِمْ وَتَوَادِهِمْ وَتَعَاطُفِهِمْ» “You see the believers as regards their being merciful among themselves and showing love among themselves and being kind, resembling one body, so that, if any part of the body is not well then the whole body shares the sleeplessness and fever with it.” [Reported by Bukhari]. He ﷺ says, «الْمُؤْمِنُ لِلْمُؤْمِنِ كَالْأَنْبِيَانِ يَشُدُّ بَعْضُهُ بَعْضًا وَشَبَكَ بَيْنَ أَصَابِعِهِ» “A believer to another believer is like a building whose different parts enforce each other. The Prophet then clasped his hands with the fingers interlaced.” [Reported by Bukhari in his Sahih]. Also, Umar bin Al-Khattab (ra) (أَمَدُ الْأَعْرَابِ فِي عَامِ الرَّمَادَةِ بِالْإِبِلِ وَالْقَمْحِ وَالزَّيْتِ) مِنْ كُلِّ أَرْيَافِ الْمُسْلِمِينَ، حَتَّى بَلَحَتْ الْأَرْيَافُ كُلُّهَا (أَيُّ أَجْهَدَتْ وَتَعَبَتْ وَلَمْ تُنْبِتْ شَيْئًا) مِمَّا جَهَدَهَا ذَلِكَ - فَقَامَ عُمَرُ يَدْعُو - فَقَالَ: "اللَّهُمَّ اجْعَلْ رِزْقَهُمْ عَلَى رُؤُوسِ الْجِبَالِ" فَاسْتَجَابَ اللَّهُ لَهُ وَلِلْمُسْلِمِينَ، فَقَالَ حِينَ نَزَلَ بِهِ الْغَيْثُ: "الْحَمْدُ لِلَّهِ، فَوَاللَّهِ لَوْ أَنَّ اللَّهَ لَمْ يُفْرِجْهَا مَا تَرَكْتُ بِأَهْلِ بَيْتٍ مِنَ الْمُسْلِمِينَ لَهُمْ سَعَةٌ إِلَّا أَدْخَلْتُ مَعَهُمْ أَعْدَادَهُمْ مِنَ الْفُقَرَاءِ،" "supplied the Bedouins in the Year of Ashes with camels, wheat, and oil from all the rural areas of the Muslims, until all the rural areas were exhausted from what exhausted them in that - so Umar stood up supplicating - and said, 'O Allah, place their provision on the tops of the mountains.' So, Allah answered him and the Muslims, and he said when the rain fell upon him, 'Praise be to Allah, for by Allah, if Allah had

not relieved it, I would not have left a household of Muslims with abundance except that I would have entered among them their number of the poor, for two will not perish from food that sustains one.” [Bukhari reported this in Al-Adab Al-Mufrad]. The Year of Ashes was a year of drought and hunger, named so because the earth blackened from the lack of rain until its color became like ashes, or because the wind was blowing dust like ashes, to the point that the number of Bedouins who came to Madinah seeking food reached more than fifty thousand.

Ibn Kathir mentioned in Al-Bidayah wa Al-Nihayah, (كَتَبَ) عُمَرُ رَضِيَ اللَّهُ عَنْهُ إِلَى أَبِي مُوسَى رَضِيَ اللَّهُ عَنْهُ بِالْبَصْرَةِ أَنْ يَا غَوْثَاهُ لِأُمَّةٍ مُحَمَّدٍ، وَكَتَبَ إِلَى عَمْرِو بْنِ الْعَاصِ رَضِيَ اللَّهُ عَنْهُ بِمِصْرَ أَنْ يَا غَوْثَاهُ لِأُمَّةٍ مُحَمَّدٍ، فَبَعَثَ إِلَيْهِ كُلَّ وَاحِدٍ مِنْهُمَا بِقَافِلَةٍ عَظِيمَةٍ تَحْمِلُ الْبُرِّ وَسَائِرَ الْأَطْعِمَاتِ، وَوَصَلَتْ مِيرَةُ عَمْرِو رَضِيَ اللَّهُ عَنْهُ إِلَى الْبَحْرِ فِي الْبَحْرِ إِلَى جَدَّةَ وَمِنْ جَدَّةَ إِلَى مَكَّةَ) “Umar (ra) wrote to Abu Musa (ra) in Basra, ‘O help for the Ummah of Muhammad,’ and he wrote to Amr bin Al-Aas (ra) in Egypt, ‘O help for the Ummah of Muhammad.’ So, each of them sent him a massive caravan carrying wheat and other foods, and the provision of Amr (ra) arrived by sea to Jeddah and from Jeddah to Makkah.”

(إِنَّ هَذَا الْأَثَرُ جَيِّدُ الْإِسْنَادِ، وَكَذَلِكَ فَعَلَ عُمَرُ رَضِيَ اللَّهُ عَنْهُ) Ibn Kathir said, “This narration has a good Isnad, and Umar (ra) did the same with Sa’d bin Abi Waqqas (ra) in Iraq and Mu’awiyah in Ash-Sham.” [Ibn Sa’d mentioned this in At-Tabaqat].

The fact that the Islamic State is the primary entity responsible for treating the effects of such disasters does not mean that Muslims as individuals are exempt from assisting and contributing to the efforts to confront disasters; because the evidences for removing harm and the evidences for the obligation of aiding the distressed and the injured are general evidences that include the state and individuals, such as the saying of the Prophet ﷺ who said, «مَنْ ضَارَّ ضَارَّهُ اللَّهُ، وَمَنْ شَاقَّ شَاقَّ اللَّهُ عَلَيْهِ» “Whoever harms, Allah will harm him, and whoever causes hardship, Allah will cause

hardship to him” [Reported by Al-Hakim in Al-Mustadrak], and his ﷺ saying, «الْمُسْلِمُ أَخُو الْمُسْلِمِ لَا يَظْلِمُهُ وَلَا يُسْلَمُهُ وَمَنْ كَانَ فِي حَاجَةِ أَخِيهِ كَانَ اللَّهُ فِي حَاجَتِهِ وَمَنْ فَرَّجَ عَنْ مُسْلِمٍ كُرْبَةً فَرَّجَ اللَّهُ عَنْهُ كُرْبَةً مِنْ كُرْبَاتٍ يَوْمَ الْقِيَامَةِ وَمَنْ سَتَرَ مُسْلِمًا سَتَرَهُ اللَّهُ يَوْمَ الْقِيَامَةِ» “A Muslim is a brother of a Muslim, he neither wrongs him nor does he hand him over to one who does him wrong. If anyone fulfills his brother's need, Allah will fulfill his need; if one relieves a Muslim of his troubles, Allah will relieve his troubles on the Day of Resurrection; and if anyone covers up the sins of a Muslim, Allah will cover him up on the Day of Resurrection,” [Reported by Bukhari], and his ﷺ saying while interlacing his fingers, «الْمُؤْمِنُ لِلْمُؤْمِنِ كَالْبُنْيَانِ يَشُدُّ بَعْضُهُ بَعْضًا» “A believer to another believer is like a building whose different parts enforce each other,” [Reported by Bukhari]. All these evidences are general, obligating the relief of the distressed upon individual Muslims just as they obligate it upon the state. Therefore, the state mobilizes and seeks the assistance of whoever is necessary from the Muslims among those under the ruler’s guardianship in the relief effort when it occurs, and it takes care to organize them to make the utmost use of their effort and protect them during their relief work, and coordinates between them and the competent official cadres. The Islamic State also has the right to impose a tax on the wealthy Muslims from what exceeds their needs with goodness (bil-ma’ruf) to spend on the relief effort if the funds in Bayt al-Mal are insufficient for that.

The Islamic State does not allow what are called international organization teams and rescue and relief teams belonging to other states to enter the country under the pretext of assisting in the relief effort. This is because such organizations, hiding behind the slogans of humanity and aiding the afflicted, usually exploit disasters to enter the country for missionary work, or for political or intelligence work, supporting rebel groups, and stirring up seditions (Fitan). The harm of these organizations definitively outweighs their benefit. Indeed, their entry into Dar al-Islam, even under the pretext of relief, paves the way for sowing seditions and establishing an authority for the states of Kufr over

the Islamic State. Allah ﷻ commands us not to give the disbelievers a way over the believers,

﴿وَلَنْ يَجْعَلَ اللَّهُ لِلْكَافِرِينَ عَلَى الْمُؤْمِنِينَ سَبِيلًا﴾

“Allah never permits the disbelievers a way of authority over the believers” [An-Nisa: 141]. Foreign aid from funds and resources is also prevented from entering the state. This is because it is usually a means to smuggle weapons or pave the way towards establishing interests for the states of disbelief inside the country. This does not prevent benefiting from the disaster management expertise in countries that have made progress in some applications, such as earthquakes regarding Japan, and disaster-specific education regarding Finland, for example, but while taking into consideration the circumstances of the Khilafah State.

Ambulance and Emergency Centers

Medical ambulance services are considered a main component of healthcare due to their importance in preventing most potentially fatal cases resulting from injuries and emergency medical conditions, by dealing correctly and swiftly with these cases. The Khilafah State works to provide ambulance and emergency centers in all comprehensive primary health centers. It also provides centers equipped with the latest devices and services, cardiopulmonary resuscitation (CPR) procedure rooms, and minor surgical operations, in the central hospitals for each ‘Amalah (district) or Wilayah (province), depending on the distance of the regions and the population size.

These centers, which operate around the clock, are managed by a number of doctors, nurses, and technicians in the allied health professions, who are qualified to provide advanced and emergency ambulance care for various medical conditions. These individuals work in shifts with hours fewer than normal working hours; to avoid fatigue, delay, and errors resulting from

a decrease in mental focus in diagnosis and immediate treatment, due to long working hours. Ambulance and emergency centers receive cases arriving to them directly or from primary health centers, and they triage and direct them in terms of specialty, the severity of the condition, and all other necessary procedures required to save the patient.

The Khilafah State works to elevate these ambulance health services from the very first day, and utilizes all available styles and means for excellence in these services. It can initiate the required ambulance services via joint communication and social networking mechanisms with other apparatuses in the state, starting with treating the injured at the site of his injury, or in his home; where time is an important factor in saving the patient's life. It works to provide mobile and specialized immediate treatment units, such as intensive cardiac care units and other specialties. Their work is facilitated by the technology of immediate information transfer, whether images, tests, or others, via the internet to the center; to determine the next step of the ambulance service, whether it is a surgical operation, preparing a blood transfusion, removing cerebral or cardiac clots, or preparing a number of beds for mass ambulance cases from accidents or food poisoning.

Medical Professional Ethics, Medical Liability, and Malpractice

Medical Professional Ethics in Islam

The fundamental matter in ethics (Akhlaq) is that they must be based on the Islamic Aqeedah, and that the believer embodies them as commands and prohibitions from Allah ﷻ, not because they benefit or harm in life. This is what makes embodying good character permanent and constant as long as the Muslim remains steadfast in implementing Islam, and it does not revolve where utility revolves. The Shariah has clarified the traits whose embodiment is considered good character and those whose embodiment is considered bad character; thus, it urged the good among them and forbade the bad: it urged honesty, trustworthiness, a cheerful face, modesty (Haya'), dutifulness to parents, maintaining the ties of kinship, relieving distress, and that a person loves for his brother what he loves for himself. It forbade their opposites, such as lying, betrayal, envy, wickedness, and their likes. All of this applies to the discussion about the ethics of doctors and professionals in the health field, and added to it is what is related to the health aspect based on the foundations upon which it was established, and achieving the desired goals from it with sincerity and trustworthiness. The medical profession is one of the most important professions that man needs, as it is based on alleviating the suffering of patients and the distressed, and works to preserve human health, repel disease from patients, and provide everything that helps patients enjoy health and well-being. The Islamic Shariah has given it attention, making the preservation of life one of the supreme goals for maintaining society. Since Islam obligates adherence to noble morals, perfection, and sincerity in work, they are truly more obligatory and binding upon the doctor. The Messenger of Allah ﷺ says, «إِنَّ اللَّهَ تَبَارَكَ وَتَعَالَى يُحِبُّ إِذَا عَمِلَ أَحَدُكُمْ عَمَلًا أَنْ يُتْقِنَهُ» **“Verily, Allah, the Blessed and Exalted, loves that when one of you does a job, he perfects it.”** [Reported by Al-Bayhaqi in Shu'ab Al-Iman].

There has been much talk about medical professional ethics in recent decades; books have been published, lectures delivered, charters drafted around them, and recommendations made to make the teaching of ethics in medicine a course taught in medical faculties. New issues have emerged due to scientific and technological progress, such as organ transplantation, research conducted on humans, infertility treatment, cardiopulmonary resuscitation devices, cloning, removing treatment devices from the brain-dead, donating the organs of the dead... etc. Confusion has appeared clearly in judging these issues from a utilitarian rational perspective because healthcare models today are based on secular ethical rules built on utilitarian foundations. As for Islam, medical ethics and its controls all refer back to Shariah rulings. Shariah has defined the rulings followed in the doctor's work, or those related to the patient or medical treatment, such as what 'Awrah (nakedness) the doctor is permitted to look at, the absence of Khulwah (seclusion) and so on. Likewise, they determine how to deal with emerging issues within it, where Ijtihad is exercised to find the Shariah ruling for each of them. Detailed examples of this type of Ijtihad are found in the book "The Shariah Rulings for Cloning..." issued by Hizb ut Tahrir.

Therefore, health professionals must be taught the basic Shariah rulings related to healthcare, then they should be trained in understanding Ijtihad regarding how to deduce these rulings. With their advancement, some of them may become qualified to undertake Ijtihad in matters related to health, if they fulfill the conditions of eligibility for Ijtihad. Therefore, the ethical code adopted by medical practitioners and the medical profession in the Khilafah State must emanate solely from Islam and not from Western viewpoints; this is because ethics, whether personal or professional, represent a branch of the Shariah rulings. Furthermore, Muslim medical practitioners must understand the Aqeedah issues related to medical circumstances, including life and death, and that Allah ﷻ is the Physician and the Healer (Al-

Tabib Al-Shafi), not the medical intervention or their experience. In this regard, the prominent medical scholar Al-Razi wrote in his book *Ethics of the Doctor*, (يجب أن يعتمد الأطباء على الله سبحانه وتعالى وأن يتوقعوا العلاج منه. يجب ألا يعتقد أبداً أن مهارته وعمله هما أسباب العلاج؛ وإلا “Doctors must rely on Allah ﷻ and expect the cure from Him. He must never believe that his skill and his work are the causes of the cure; otherwise, Allah ﷻ will prevent him from this healing.”

The healthcare system in the Khilafah State is based on the lifestyle under the Islamic life. When the Khilafah State adopts technology and medical interventions derived from non-Muslims, it is not correct for it to adopt medical practices that contradict the Sharia. Even if the scientific aspect is universal, the results reached by science are to be used according to Shariah rulings; if the Shariah permits them (Mubah), they are adopted, and if it prohibits them (Haram), they are abandoned and adopting them is Haram.

The problem of ethics in the medical profession in capitalist systems does not exist when applying the healthcare policy in the Khilafah State, because the issues related to healthcare are subject to Ijtihad, and their Shariah rulings are deduced so that doctors and health profession practitioners can be guided by them. They also clarify the relationship between doctors, health workers, and patients, its limits, and its specific controls, in addition to the general morals that Muslims must possess. The healthcare policy in the Khilafah State—which relies on mixing matter with spirit, Islam’s view in solving problems, the state’s guarantee of the basic needs for all its subjects, Islam’s view of the economic problem, the comprehensiveness of healthcare for all those under the ruler’s guardianship and its provision as free healthcare provided by the state as an obligation to them, and the pursuit of excellence in the quality of this healthcare, in addition to its administrative system that ensures the achievement of these goals—this policy in healthcare naturally

achieves what researchers in the field of ethics seek as a separate charter from the foundations of practicing medicine and its allied professions under man-made secular systems. The Islamic Aqeedah drives Muslim doctors to perform their duties because they are accountable before Allah on the Day of Resurrection. Thus, they find themselves striving to find treatments for diseases by the Permission of Allah ﷻ, and they search for new medicines and therapeutic procedure technologies. By doing so, Muslims will regain the leading position they held for hundreds of years, and return to the forefront in scientific and medical research and innovation.

Ethics of the Muslim Healthcare Practitioner

The following are examples of the ethical standards that healthcare practitioners must possess, work to cultivate in themselves, and urge others towards, especially when the health practitioner realizes that he is a member of a group whose characteristic is cooperation and coordination among its members to accomplish the required work in the medical field:

1. **Loyalty to Allah and striving for the Ridwānu Allāh:** He must have dedication in making all his actions purely for Allah ﷻ, and realize the spiritual aspect in all his practices, with his realization that he will be asked about his actions, whether minute or major.
2. **Showing the best morals:** Honesty, trustworthiness, integrity, humility, respect for others, patience, tolerance, friendliness, love, moderation and fairness.
3. **Self-accountability:** Health practitioners must judge themselves before others judge them or their mistakes are published on a wide scale. Self-accountability includes everything, even the smallest mistakes and lapses.
4. **Avoiding trivialities and foolishness:** It is not befitting for a healthcare practitioner to indulge in Haram affairs, or those that

are repulsive or socially reprehensible, such as backbiting, gossiping (Namimah), excessive talking, arguing, excessive laughing, or saying unacceptable words - especially while performing his duties - and it is also preferable that he abstains from behavior that does not befit chivalry (Muru'ah), even if it is not Haram according to Shariah.

Duties of the Healthcare Practitioner Towards Patients

The relationship between the healthcare practitioner and his patient is based on trust and honesty. The healthcare practitioner must provide comprehensive medical care to his patients according to their medical needs with accuracy and competence, while respecting the patient's dignity and observing his rights. All of this must be within the ethical framework dictated by the Islamic Shariah and professional duty, including the following:

1. **Good treatment of the patient:** He must treat his patient kindly in all circumstances.
2. **Achieving the patient's interest and preserving his rights,** and fulfilling the patient's interest.
3. **Patient's consent:** Informed consent must be obtained from the conscious, adult patient, or from his guardian (Wali al-Amr) if he is incompetent or a minor, and this is before making any decision for medical or surgical intervention.
4. **Reassuring the patient:** He must use his skills to reassure the patient and alleviate his suffering.
5. **Preserving the patient's secrets:** The Islamic Shariah has emphasized the importance of preserving the patient's secrets and privacy. Knowing the patient's secrets does not entitle the health practitioner to disclose them or speak about them to anyone other than the concerned party, except in certain circumstances that we have explained previously in the chapter "The Information Bank, Diwans, and Electronic Personal Files."

6. Refraining from photographing patients and recording their voices: Patients must not be photographed, wholly or partially, except for a need or necessity required for the purpose of their care, or for the purposes of health or medical education, or for conducting health research. When there is a need, specific regulations must be followed, such as obtaining the patients' prior consent.

7. Dealing with patients who refuse a medical procedure: In the event a patient refuses a medical procedure, the healthcare practitioner must observe the following:

- Verifying the patient's knowledge of the consequences of his decision to refuse the medical procedure.
- Listening to the patient's viewpoint and respecting his wish.
- Explaining the importance of the medical procedure and the consequences of not performing the operation honestly and without exaggeration.
- If the healthcare practitioner is not the treating doctor, he must refer the patient back to his treating doctor. He, in turn, exerts his utmost effort to convince the patient and educate him about the alternatives to make the appropriate decisions.
- Documenting the patient's refusal of treatment in writing, so that the healthcare practitioner does not bear any liability.

Medical Liability, Medical Malpractice, and Negligence

Liability of the Medical Profession

Doctors and practitioners of medical professions bear liability for any error committed while performing their duties, and they must exercise caution so as not to cause harm to patients. A medical error is defined as the doctor's breach of the established, recognized scientific principles that every doctor is obligated to be familiar with. The cause of this breach may be due

to the doctor's haste, his negligence, or his failure to take the necessary care and caution during diagnosis, or his failure to use the means that science places at his disposal.

Definition of Medical Malpractice

Medical malpractice is defined as, "Any unlawful behavior committed by a medical practitioner in his professional capacity that is inconsistent with the applicable professional standards, professional service standards, and standard operating procedures to the extent that it causes harm to the patient." The "unlawful behavior" mentioned in the above definition may be the performance of something that should be avoided or the neglect of something that should be executed, whether intentionally or unintentionally, which is due to indifference or negligence. The "medical practitioner" is anyone who participates in the medical treatment of the patient, including the doctor, the nurse, the hospital administration, and other parties. "Professional standards" mean the professional standards for medical professionals such as doctors, nurses, and allied health professionals. Each of these professions has a set of professional standards that must be adhered to as professional guidelines. "Professional service standard" means the guide followed by the medical practitioner in practicing healthcare services. "Standard operating procedure" means the generally accepted procedure for each profession. The standard operating procedure must be observed as instructions for practicing the relevant profession. As for the "harm inflicted upon the patient," it means any harm, whether material or non-material, suffered by the patient as a result of wrongful behavior, such as inappropriate prolonged treatment, exorbitantly expensive treatment, injury, deterioration of the disease condition, impairment, or even death. Based on the above definition, wrongful medical practices consist of four elements:

1. The existence of a medical error.
2. That the medical error is committed by the responsible medical practitioner, whether it is the doctor, the nurse, the hospital administration, or other entities.
3. The medical error occurs due to the medical practitioner's failure to comply with professional standards and standard operating procedures, whether intentionally or unintentionally.
4. The medical error results in harm to the patient, whether material or non-material. In other words, the harm is the result of wrongful behavior.

Proving the harm and holding the medical practitioner liable for the medical error falls upon the Qadi of Khusumat (Judge of Disputes), and the judge should listen to the explanation of the relevant health expert committee to verify that what happened is a medical error.

The History of Healthcare in the Islamic State

The Khilafah State achieved the best possible advancement in healthcare, which made the holders of its citizenship secure in the availability of this care at a high level of knowledge, progress, and well-being. Here we historically review the most important features of this care in its splendid forms, which were cited as an example by enemies before its own sons among the scholars. What history books highlighted most was the discussion about the scholar-doctors who became globally famous for their studies, experimental sciences, scientific research, and inventions, and the health facilities built by the Islamic State, such as clinics and Bimaristans (hospitals), some of which are still standing today, in a style unprecedented among nations.

However, the most important aspect of the history of healthcare in the Khilafah State is the foundations upon which this care was built and the approach followed by the Muslims in emulation of the Messenger ﷺ. This encompassed the state's responsibility for this care, its provision as free healthcare provided by the state as an obligation to all those under the ruler's guardianship, urging research to find medicine and providing it, individual and collective prevention, treatment of diseases, public health for the community and quarantine, providing health facilities, establishing standards for the practice of medicine, and regulating this professional practice. All of this was through the Shariah rulings indicated by the Ahadith and actions of the Messenger ﷺ, which served as the foundation followed by scholars and Khulafaa' in the excellence of medicine and health in the Khilafah State.

The Shariah made healthcare the direct responsibility of the state and the Khaleefah. He ﷺ said, «الإمام راع ومسئول عن رعيته» **“The Imam is a guardian and he is responsible for those under his care.”** Health is among the basic needs of those under the ruler's care; as the Messenger ﷺ said, «مَنْ أَصْبَحَ مِنْكُمْ آمِنًا فِي سِرِّهِ مُعَافًى فِي جَسَدِهِ عِنْدَهُ قُوَّةٌ

«يَوْمِهِ فَكَأَنَّمَا حِيزَتْ لَهُ الدُّنْيَا» “Whoever among you wakes up secure in his dwelling, healthy in his body, and he has his food for the day, it is as if he were given the entire world.”

For this reason, the Islamic State gave immense attention to healthcare as one of the chapters of looking after the affairs, which Islam made among the responsibilities of the Imam who is over the people. The Messenger of Allah ﷺ ordered the pitching of a tent to treat injured soldiers and provide medical care for them in the Battle of the Trench. Hospitals were built later to serve people and ensure their comfort regardless of race, religion, or gender and so on. For example, Al-Mansouri Hospital, established in Cairo in 1283 CE, accommodated thousands of patients. Every patient had two nurses, a bed, a mattress, and a special food bowl, ensuring complete comfort and free medical treatment provided by the state as an obligation. Dispensaries and mobile clinics that cared for people with special needs and those living in remote areas are all just a few examples of the state's attention to looking after the affairs of the subjects and their medical needs at that time.

Medical knowledge and sciences under the Khilafah State were available to everyone, without restrictions or registrations for patents; which provided the opportunity for doctors to innovate, invent, and develop health. Medical colleges represented a strong sector in universities, in addition to containing facilities for clinical research in the hospital and preparations for patients. Muslim doctors preceded the world in medical research by decades, if not hundreds of years, in various fields such as eye surgery and cardiac care. The world's leading healthcare centers, medical service teams, and pharmaceutical industries were always available, and the rulers of foreign countries used to travel to the Khilafah State to receive treatment there; as it was the pioneer in establishing the concept of medical tourism.

Muslims benefited from the ancient knowledge of previous nations, built upon it, and added centuries of intellectual achievements in the pursuit of continuous development. The Bimaristan, or “House of the Sick,” for example, was not merely a nucleus for the modern hospital; it was also a practical model for multi-service healthcare and modern medical education centers. It was a center for receiving treatment, a sanctuary for the convalescence of those recovering from diseases and accidents, a psychological refuge, and a nursing home for the elderly, providing basic care for the aged and the incapacitated who did not have families to undertake their care. The Bimaristan reflected the immense attention of the Islamic Khilafah State throughout its successive eras in developing the medical disciplines; as large hospitals in the past included medical schools and libraries where senior doctors taught students the methods of applying acquired knowledge directly to patients. The hospital held exams for students and issued certificates to them. The Bimaristan was dedicated as an institution for spreading medicine, treating diseases, and expanding the scope of medical knowledge and disseminating it.

At a time when the philosophical belief prevailed in the Middle Ages in Europe that the origin of disease was supernatural and that it was resistant to human treatment; and hospitals for them were more like care homes for the elderly, where the management of patients was carried out by monks who sought to ensure the salvation of the soul, without exerting much effort to heal the body; at this time, Muslim doctors took a completely different approach, acting upon the Hadith of the Prophet Muhammad ﷺ who said, «يَا عِبَادَ اللَّهِ تَدَاوُوا، فَإِنَّ اللَّهَ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ شِفَاءً، أَوْ قَالَ دَوَاءً إِلَّا دَاءً وَاحِدًا، قَالُوا: يَا رَسُولَ اللَّهِ، وَمَا هُوَ؟ قَالَ: الْهَرَمُ» **“O servants of Allah, seek medical treatment, for Allah did not create a disease without creating a cure for it - or he said a medicine - except for one disease.”** They said, **“O Messenger of Allah, what is it?”** He said, **“Old age.”** [Reported by At-Tirmidhi]. They set before their eyes the goal of treating patients using experimental scientific methods.

Islam gave great attention to healthcare and moved it in a revolutionary qualitative leap from the world of magic, sorcery, and myth to the world of science and experimentation, which contributed to the rapid and astonishing progress of the science of medicine. The ideas and Shariah rulings of Islam had a great impact in establishing the most important sound and correct pillars for healthcare. He ﷺ established through his words and actions the rulings of health and medical care, and there are dozens of sayings and actions of the Messenger ﷺ that urge attention to health and its care. The first center or hospital for treating the sick and injured in the Islamic State was prepared inside the masjid in a tent by Rufaydah Al-Aslamiyyah during the life of the Prophet Muhammad ﷺ. It is known that, during the Battle of the Trench, she treated the wounded inside a tent dedicated for that. Subsequent Khulafaa' and Walis developed these initial models of mobile military surgical field hospital units into mobile pharmacy caravans equipped with medicines, permissible (Mubah) foods and drinks, clothing, doctors, and pharmacists. Their mission was to meet the needs of communities remote from major cities and fixed medical facilities. They also provided mobile care for the Walis and Khulafaa' themselves. During the rule of Sultan Muhammad, the Seljuk at the beginning of the Twelfth Century, the mobile hospital was expanded such that it required forty camels to transport it.

Islam presented humanity with a host of rare medical geniuses who established an authentic experimental methodology whose refined effects were reflected in the aspects of medical practice, both preventive and curative, or facilities and tools, or human and ethical dimensions that govern medical performance. Why not, when the Messenger of Allah ﷺ is the one who said, **«يَا عِبَادَ اللَّهِ تَدَاوُوا، فَإِنَّ اللَّهَ لَمْ يَضَعْ دَاءً إِلَّا وَضَعَ لَهُ شِفَاءً، أَوْ قَالَ دَوَاءً إِلَّا دَاءً وَاحِدًا»، قَالُوا: «الْهَرَمُ»** **“O servants of Allah, seek medical treatment, for Allah did not create a disease without creating a cure for it - or he said a medicine - except for one disease.”** They said, **“O Messenger of Allah, what is it?”** He said, **“Old age?”** Muslim

scholars translated the Hadith of the Messenger of Allah into actions, so they were the first to establish hospitals in the world, preceding others by nine centuries. The first Islamic hospital was established during the era of the Umayyad Khaleefah Al-Walid bin Abd al-Malik, who ruled from the year 86 AH - 705 CE to the year 96 AH - 715 CE, and this hospital was specialized in leprosy. After that, numerous hospitals were established in the Islamic world, and some of them reached a great status; such that these hospitals were considered fortresses of science and medicine, and were considered among the first colleges and universities in the world, while the first European hospital was established in Paris more than nine centuries later. Over the following decades, 34 additional hospitals appeared across the Muslim World, and the number continued to increase year after year. In Kairouan, Tunisia, the first hospital was built in the ninth century CE, and hospitals were established in Makkah Al-Mukarramah and Al-Madinah Al-Munawwarah. There were several hospitals in the lands of Persia, in the city of Rayy, headed by the son of the city who studied in Baghdad, Muhammad bin Zakariya Al-Razi. Hospitals were known as "Bimaristans," meaning houses for the sick, and some of them were fixed and some were mobile. The fixed ones were those established in cities, and rarely would you find an Islamic city without a hospital. As for the mobile hospital, it was the one that roamed remote villages, deserts, and mountains. Mobile hospitals were carried on a large group of camels, and these caravans were equipped with therapeutic instruments and medicines, accompanied by a number of doctors, and they were capable of reaching every patch of land within the Islamic Ummah.

Fixed hospitals in major cities reached a very refined level. Among the most famous were Al-'Adudi Hospital in Baghdad, established in the year 371 AH - 981 CE, Al-Nuri Hospital in Damascus, established in the year 549 AH - 1154 CE, and the Great Mansouri Hospital in Cairo, established in the year 683 AH

- 1284 CE. In Cordoba alone, there were more than fifty hospitals. These giant hospitals were divided into departments according to specialty. There were departments for internal diseases, departments for surgery, departments for skin diseases, departments for eye diseases, departments for mental illnesses, departments for bones and fractures, and others.

These hospitals were not merely houses of treatment, but they were real medical colleges at the highest level. The specialized doctor - the professor - would pass by the cases in the morning, accompanied by doctors who were in their early medical stages, teaching them, recording his notes, and prescribing treatment, while they observed and learned. Then the professor would move to a large hall, and the students would sit around him, where he would read medical books to them, explain and clarify, and answer their questions. Furthermore, he would hold an exam for them at the end of every specific educational program they finished studying, and then grant them an Ijazah (certification) in the branch they specialized in. The first to organize the profession of medical treatment and restrict it with a special system out of concern for the interest of the people was the Abbasid Khaleefah Al-Muqtadir Billah Ja'far bin Al-Mu'tadid, who assumed the Khilafah in the year 295 AH. He imposed on anyone who wanted to practice medical treatment to take an exam to obtain a license granting him this right. Al-Muqtadir appointed for this task Sinan bin Thabit, the chief of doctors in his era and the Khaleefah's doctor, and also made him the supervisor of the Bimaristans in Baghdad. Islamic hospitals contained massive libraries within them, containing a huge number of specialized books in medicine, pharmacy, anatomy, and physiology, alongside the sciences of Fiqh (jurisprudence) related to medicine, and other sciences of interest to the doctor. It is mentioned, for example, that the library of the Ibn Tulun Hospital in Cairo contained within its walls more than one hundred thousand books. Massive farms were planted next to the

hospitals, where medicinal herbs and therapeutic plants grew, in order to supply the hospital with the medicines it needed.

As for the procedures that were taken in hospitals to avoid infection, they were of a unique and special kind. When a patient entered the hospital, he would hand over the clothes he entered with, then he would be given new clothes for free; to prevent the transmission of infection through his clothes that he was wearing when he got sick. Then each patient would enter a ward specific to his disease, and he was not allowed to enter other wards; to prevent the transmission of infection as well. Every patient slept on his own bed, with new sheets and had special tools.

We can review some of the pioneering hospitals in Islamic history. Among the greatest of them: Al-‘Adudi Hospital, established by ‘Adud al-Dawla Ibn Buwayh in the year 371 AH - 981 CE in Baghdad. When it was established, twenty-four doctors provided treatment in it, and they increased significantly after that. It contained an extensive scientific library, a pharmacy, and kitchens, and employed a large number of staff and attendants. Doctors took turns serving patients, such that there were doctors in the hospital twenty-four hours a day.

Also among the greatest hospitals in the Islamic era was the Great Nuri Hospital in Damascus, established by the just Sultan Nur al-Din Mahmud in the year 549 AH - 1154 CE. It was one of the most magnificent and greatest hospitals, and it continued to operate for a very long period of time; as it remained receiving patients until the year 1317 AH - 1899 CE, which is nearly eight hundred years!

And among the greatest hospitals in the history of Islam: The Great Mansouri Hospital, established by Sultan Al-Mansur Sayf al-Din Qalawun in Cairo, in the year 683 AH - 1284 CE. It was a marvel of the world in precision, organization, and cleanliness, and it was so massive that it treated more than four thousand patients in a single day.

We must not forget in this field the Marrakesh Hospital, established by Al-Mansur Abu Yusuf Yaqub, the caliph of the Almohad state in Morocco, who ruled from the year 580 AH - 1184 CE to the year 595 AH - 1199 CE. The building of this hospital was a marvel of perfection and magnificence. All kinds of trees and crops were planted in it, and there were even four small artificial lakes inside it. It was at a very high level in terms of medical capabilities, modern medicines, and skilled doctors. It was - truly - a jewel on the forehead of Islamic civilization.

Not only this, but there were specialized hospitals that only treated a specific type of disease: such as eye hospitals, leprosy hospitals, mental illness hospitals, and others.

Even more amazing than that is that in some major Islamic cities there were complete medical neighborhoods. Ibn Jubayr recounted in his journey that he undertook around the year 580 AH - 1184 CE, that he saw in Baghdad - the capital of the Abbasid Khilafah - a complete neighborhood resembling a small city, centered by a beautiful, luxurious palace, surrounded by gardens and multiple houses. All of this was a Waqf (endowment) for the sick, frequented by doctors from various specialties, as well as pharmacists and medical students. Their expenses were covered by the state and by the endowments established by the rich of the Ummah to treat the poor and others.

Bimaristans opened their doors to everyone 24 hours a day, where male doctors were allocated for male patients, and female doctors were allocated for female patients, while some saw the establishment of separate wards with human resources and facilities for each gender separately. In treating less severe cases, there were outpatient clinics staffed with doctors who prescribed medicines for patients to be taken at home.

Western scholars themselves have testified to this. Monsieur Edme-François Jomard, one of the scholars of Napoleon's expedition, wrote describing one of the Bimaristans (hospitals)

built six centuries before his expedition to Egypt, “All patients, poor and rich, entered it (i.e., the Bimaristan) without discrimination. Doctors were brought to it from various parts of the East and were given generous compensation. It had a dispensary and a pharmacy equipped with medicines and instruments. It is said that every patient's expenses were one Dinar, and he had two people serving him. The insomniac patients were isolated in a separate hall where their ears were delighted by listening to the melodies of music, or they were entertained by listening to stories told to them by a storyteller. Patients who were regaining their health and recovering were isolated from the rest of the patients in a convalescence period. Every patient, upon his discharge from the Bimaristan, was given five pieces of gold, so that he would not be forced to resort to hard labor immediately.”

Prisse d'Avennes, the French orientalist, describing the same Bimaristan, said, “The patients’ wards were heated by burning incense or cooled by large fans extending from one end of the hall to the other, and the floors of the halls were covered with branches of henna trees, pomegranate trees, or saplings of aromatic shrubs.”

Sigrid Hunke said in his book “Allah’s Sun Over the West (Die Sonne Allahs über dem Abendland),” “medicine owes a number of new medicinal forms to Arabic chemistry:... Ar-Rasi had also thought about how he could overcome the reluctance of sensitive patients to take medication. He coated bad-tasting *roob* with a sugar coating or psyllium gruel, similar to today's coated tablets... The custom of gilding or silvering pills, which is still common today, goes back to Ibn Sina, who prescribed gold and silver as stimulants for the heart and circulation and used them to coat pills.”

David W. Tschanz, the American medical historian and epidemiologist, wrote under the title “The Arab Roots of European Medicine,” “These hospitals, or bimaristans, bore little resemblance to their European counterparts. The sick saw the bimaristan as a place where they could be treated and perhaps

cured by physicians, and the physicians saw the bimaristan as an institution devoted to the promotion of health, the cure of disease and the expansion and dissemination of medical knowledge. Medical schools and libraries were attached to the larger hospitals, and senior physicians taught students, who were in turn expected to apply in the men's and women's wards what they had learned in the lecture hall. Hospitals set examinations for their students, and issued diplomas. By the 11th century, there were even traveling clinics, staffed by the hospitals, that brought medical care to those too distant or too sick to come to the hospitals themselves. The bimaristan was, in short, the cradle of Arab medicine and the prototype upon which the modern hospital is based. Like the hospital, the institution of the pharmacy, too, was an Islamic development. Islam teaches that "God has provided a remedy for every illness," and that Muslims should search for those remedies and use them with skill and compassion. One of the first pharmacological treatises was composed by Jabir ibn Hayyan (ca. 776), who is considered the father of Arab alchemy. The Arab pharmacopoeia of the time was extensive, and gave descriptions of the geographical origin, physical properties and methods of application of everything found useful in the cure of disease." End quote.

At the end of his article "The Islamic Roots of the Modern Hospital," David W. Tschanz said, "Cradle of Islamic medicine and prototype for today's hospitals, bimaristans count among numerous scientific and intellectual achievements of the medieval Islamic world. But of them all, when ill health or injury strikes, there is no legacy more meaningful."

Such was healthcare under Islam; it elevated man to a high level of care and attention to physical and mental health, whereas today we see the scale of health tragedies that have befallen man under the capitalist system. The number of people suffering from depression in the world today exceeds 350 million according to the World Health Organization, and one million of them commit

suicide annually, which is equivalent to 3,000 people daily. Not only this, but the numbers of those decimated by diseases, and those who find no healthcare or medicine, are countless. Therefore, humanity is in dire need of the return of Islam to save it from the misery and injustice of capitalism, and to restore to man once again his physical and mental comfort in a system where affairs are looked after with Taqwa (piety) of Allah and out of desire for His pleasure.

It was completed by the grace of Allah on the 27th of Dhu al-Hijjah 1443 AH corresponding to 26 July 2022 CE.

«سُبْحَانَكَ اللَّهُمَّ وَبِحَمْدِكَ أَسْتَغْفِرُكَ وَأَتُوبُ إِلَيْكَ» “Glory be to You, O Allah, and with Your praise, I seek Your forgiveness and repent to You.” [Reported by Ahmad and others].

﴿سُبْحَنَ رَبِّكَ رَبِّ الْعِزَّةِ عَمَّا يَصِفُونَ ﴿١٨٠﴾ وَسَلَامٌ عَلَى الْمُرْسَلِينَ ﴿١٨١﴾ وَالْحَمْدُ لِلَّهِ رَبِّ الْعَالَمِينَ ﴿١٨٢﴾﴾

“Exalted is your Lord, the Lord of might, above what they describe. And peace upon the messengers. And praise to Allah, Lord of the worlds.” [As-Saffat: 180-182]

Updated and reviewed in Safar 1448 AH corresponding to July 2026 CE.