

Reframing Healing Environments: Integrating Islamic Values into Hospital Design in Malaysia

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ABSTRACT

The discussion of healing environments has increasingly acknowledged the significance of the cultural and spiritual dimensions of healthcare architecture. Nevertheless, in the Malaysian context, the architectural implementation of Islamic values in hospital design is inadequately theorised and inconsistently executed. Existing Islamic Concept Hospitals (ICH) primarily focus on Shariah-compliant services and management, with minimal systematic integration of Islamic ethical precepts into spatial and environmental design techniques. This study fills this gap by recontextualising healing spaces through the integration of Islamic principles into hospital design. A qualitative multiple-case study methodology was employed to investigate five private and one government Islamic Concept Hospital in Malaysia. Data were collected through site inspections, semi-structured interviews with authorities, and document analysis. Thematic analysis utilising ATLAS.ti facilitated the identification and categorisation of recurring design motifs. The results identify eight interconnected design requirements, categorised as tangible (natural environment, spatial planning and accessibility, aesthetics, and maintenance) and intangible (professionalism, spiritual care, education, and user well-being). These criteria are fundamentally rooted in the Islamic virtues of rahmah (mercy) and ihsan (compassion) and are elucidated by the principles of Maqasid Shariah. This study proposes a value-centric design paradigm that systematically converts Islamic ethical principles into architectural strategies, moving beyond mere symbolic representation to achieve spatial, environmental, and operational harmony. The study helps to conceptualise culturally responsive healing environments in plural societies by bridging the gap between Islamic Built Environment theory and current healthcare design discourse. The proposed paradigm provides insights for architects, healthcare planners, and policymakers seeking to integrate spiritual values, patient-centered care, and sustainability into hospital design.

Keywords: Healthcare architecture; Islamic values; Healing environment

INTRODUCTION

Hospitals are institutional buildings that play a vital role within urban systems, providing inpatient, outpatient, and ambulatory care services. Modern hospital design emphasizes the creation of environments that support patient well-being, enhance staff efficiency, and integrate advanced medical technology. Patient-centered care is central to these designs, prioritizing spaces that are comfortable, accessible, and conducive to healing. Although many hospitals in Malaysia incorporate Islamic values into their design, few explicitly adopt the Islamic Concept Hospital (ICH) as a specialized approach. The design philosophy often integrates architectural, psychological, and healthcare principles to create spaces that actively support recovery and healing. Since Islam is Malaysia's official religion and the nation hosts a diverse population, incorporating Islamic values into hospital design is essential. Such integration can enhance Islamic awareness, foster self-esteem, and accelerate healing.

Islamic values are critical in shaping environments that foster healing, compassion, and holistic well-being. Researchers such as Kasule (2011) and Kamaruzzaman (2013) underscore the necessity of integrating Islamic

principles into healthcare institutions to maintain superior patient care that complies with Shariah regulations. Sharif (2016) emphasises the significance of certifying agencies, such as SIRIM's Quality Management System (MS1900:2014), in guaranteeing Shariah-compliant services despite the absence of criteria for integrating Islamic values into hospital architecture. Nonetheless, Islamic principles in hospital construction are essential for addressing patients' physical and spiritual needs. The Islamic theme of kindness, which encompasses all humanity irrespective of race or religion, renders this design approach particularly appropriate for Malaysia's diverse community. Although modern healthcare institutions accommodate religious traditions, they frequently lack compassion, which is evident in medieval Islamic design. ICHs, which adhere to Islamic or Shariah principles in services and architectural design, are increasingly preferred by those seeking healthcare within an Islamic framework. While these hospitals align well with Malaysia's cultural and religious ethos, modern hospital designs often prioritise clinical efficiency, neglecting the cultural and spiritual dimensions vital for holistic healing. Moreover, the application of Islamic values in hospital architecture remains inconsistent due to the absence of standardised guidelines and limited awareness among practitioners, highlighting the need for a more unified approach. This study aims to address these gaps by proposing essential design criteria for ICH that can assist healthcare authorities in developing future facilities that embody Islamic ideals while accommodating the requirements of a multiracial community. The objective of this research is to identify and analyze the interpretations of authoritative figures in the healthcare industry regarding the implementation of Islamic design criteria in ICH in Malaysia.

This study focuses on two fundamental Islamic values: mercy (*Ar-Rahman*) and compassion (*Ar-Raheem*). These values are deeply rooted in Islamic teachings and essential for fostering holistic healing environments. These values are explored in the context of hospital design, with a focus on their practical implementation through space planning, integration of natural elements, and creation of user-friendly environments. The research examines how these values can guide architectural decisions to enhance patient well-being, promote comfort, and facilitate emotional and spiritual recovery. This scope not only reflects the spiritual and cultural dimensions of healthcare in Malaysia, where Islam is the official religion but also explores how these values can address the diverse needs of a multicultural society. This research bridges the gap between Islamic values and healthcare design. It offers a framework for integrating values of mercy and compassion into hospital design, aligning them with building requirements and clinical needs to enhance patient outcomes.

The study highlights the importance of culturally sensitive, patient-centered care by addressing users' physical, emotional, and spiritual needs, thereby demonstrating how Islamic values can contribute to sustainable and equitable healthcare environments. The findings provide actionable insights for architects, policymakers, and healthcare administrators, enabling them to design hospitals that embody Islamic principles while meeting modern clinical and regulatory requirements. These guidelines promote environments that support holistic healing, enhance user satisfaction, and foster dignity and inclusivity. Beyond practical implications, the study contributes to academic discourse by enriching the understanding of how Islamic teachings can inform architectural innovation, ensuring that healthcare facilities are functional and deeply reflective of cultural and spiritual values.

LITERATURE REVIEW

Healthcare holds profound significance in the Islamic faith. The word 'Shifa,' which translates to healing, is frequently mentioned in the Al-Quran, which serves as a source of healing for both body and soul, reflecting Islam's holistic approach to physical, emotional, and spiritual health. The Al-Quran and Hadith are not just references in this study; they are the cornerstones that shape the research and guide the extraction of Islamic values. The emphasis of these values in hospital design approaches aims to cater to physical, mental, and spiritual needs, thereby enhancing the healing process. Islamic values advocate for environments that reduce stress and promote healing through light, ventilation, and connection to nature (Mahdi, 2020). Thus, this research emphasizes Islamic values in the hospital design approach, including physical environments that promote healing, reduce stress, and enhance the overall well-being of patients, staff, and visitors.

This research thoroughly examines Islamic values as articulated in the Al-Quran and develops design approaches to improve the hospital environment. The Al-Quran served as the primary reference for identifying these values (Figure 1), and a comprehensive literature review further supports the credibility of the research. These values are most suitable for ICH design as an approach that addresses the sensitive needs of the users to get closer to

Allah in any condition, and designers should pay attention to enhance healing by design. Based on word cloud analysis, these values have been categorized by their respective characteristics, as shown in Table 1. All the values are then grouped into seven core values from Al-Quran: (i) Mercy, (ii) Compassion, (iii) Guidance, (iv) Equality, (v) Justice, (vi) Trustworthy, and (vii) Purity. However, this study focuses on 2 main values: mercy and compassion. Mercy values include mercy, love, blessings, tolerance, peace, and sympathy. Compassion values include empathy, goodness, graciousness, understanding, caring, and humanity.



Figure 1: Islamic values extract from Tafseer Al-Quran

Core Values	Islamic Values
Mercy	Merciful, Love, Blessings, Tolerance, Peace, Sympathy
Compassion	Empathy, Goodness, Gracious, Understanding, Caring, Humanity
Guidance	Guide, Knowledge, Support, Lessons, Humble, Appreciative, Read
Equality	Equal, Hope, Righteousness, Faithful, Charity
Justice	Truth, Honesty, Fair
Trustworthy	Truth, Trust, Secure, Patience, Dignity, Practice, Consider
Purity	Cleanliness, Comfort, Pure, Hygiene

Table 1: Islamic values groups according to Wordcloud Tafseer Al-Quran

Each value highlighted in the Al-Quran occurs multiple times, with Mercy among the most frequently mentioned. Mercy is significant and can be explored through Islamic sciences, such as tafseer, hadith, theology, philosophy, and jurisprudence (Ansari, 2019). Allah's mercy encompasses gentleness, care, consideration, love, and forgiveness. When these qualities are observed in the world, they reflect Allah's boundless mercy towards His creation. Compassion, closely linked to mercy, is another value frequently mentioned in the Al-Quran. Many verses recount stories filled with guidance and concluded with phrases such as *“and Allah loves those who do good”* (Al-Quran, 5:94). Demonstrating compassion and kindness to all of humanity reflects true Islamic values and reinforces the essence of Islam as a religion of peace (*rahmatan lil ‘alamin*).

Healing is Allah's mercy bestowed upon those who are unwell. Demonstrating mercy and compassion toward the sick involves supporting them in transforming reactive emotions into caring and empathetic responses. As a symbol of Allah's mercy, the natural environment plays a vital role in healing. Interaction with nature accelerates recovery and fosters a deeper awareness of the Creator. The value of mercy in healing reflects genuine sympathy and love for others, while compassion embodies the true essence of Islam. According to Alharbi (2018), a compassionate Muslim nurse exemplifies selflessness by giving without expectation, caring unconditionally, and

striving to bring happiness to others. This reflects the integration of Islamic values into healthcare. Furthermore, the professionalism of healthcare providers is a critical aspect of compassion in healing, as it uplifts patients' morale and fosters a supportive and nurturing environment for recovery.

The planning doctrine of Islamic principles encompasses the relationships between man and the Creator (Allah), man and fellow humans, and man and the environment (Rahman et al., 2017; Abdul Rahim, 2020). Applying these principles in hospital design enhances the healing process and fosters an awareness of seeking Allah's pleasure. Such designs are inclusive, catering to the needs of all users, particularly staff and patients, while being environmentally friendly. According to Rahman et al. (2017), hospital designs should address the needs of patients and visitors and consider the behavioural dynamics of the society served. Key design criteria for ICHs include strategic location and circulation planning, incorporating natural elements like lighting, ventilation, landscaping, and proper orientation respecting the Qibla direction. Easy access to prayer facilities, gender-separated wards, a clean water supply, high technology with uninterrupted power, and comprehensive emergency planning are also essential. Additional considerations include effective waste management, provisions for waiting areas, halal food services, and cleanliness, which are aligned with the Islamic concept of *nazafah* (cleanliness and purity), which is central to faith. A well-designed hospital should alleviate anxiety, expedite healing, and provide staff with an optimal environment to deliver quality care.

Implementing Islamic values in the built environment emphasises harmony between individuals, their Creator, society, and the environment. According to sources such as the Quran and Sunnah, these principles guide the development of planning and design standards, particularly for ICH. An ICH serves the public within the urban system, integrating Islamic values into its design and operations to educate and benefit the community holistically (Rahman et al., 2017; Azhani et al., 2021). However, research indicates that implementing these principles often remains superficial, focusing on decorative elements rather than fully embodying Islamic doctrine and values (Omer, 2011). To address this, ICH design must prioritize key elements, including strategic hospital location, incorporation of natural elements (light, ventilation, and greenery), proper qibla orientation, gender-separated wards, accessibility to prayer facilities, clean water supply, advanced technology, waste management systems, and halal food services (Ahmad et al., 2014). These designs enhance the healing process and align with Islamic teachings on cleanliness and the community's welfare.

Islamic values in architectural elements also extend to privacy, aesthetics, and environmental sustainability. Privacy is emphasized in Islamic teachings through both visual and auditory measures, promoting gender separation and maintaining a hierarchy of spaces. Design strategies such as thick walls, insulation, and strategic window placement ensure visual and auditory privacy while respecting cultural sensitivities (Meshkini et al., 2014). Main entrances, windows, and walls must be carefully planned to reflect Islamic guidelines, ensuring functionality, respect for privacy, and environmental harmony (Ahmad et al., 2014). Additionally, spaces like toilets, wardrooms, and kitchens should incorporate cleanliness and accessibility features aligned with Islamic values of hygiene and dignity. Sustainable design, as guided by Maqasid Shariah, incorporates principles like efficient resource use, energy conservation, and green building practices (Aburounia & Sexton, 2006). Collectively, these elements reflect the integration of Islamic social values into the built environment, promoting peace, kindness, and justice while fostering a deep connection between humanity and the Creator (Zeynalzadeh, 2014).

Aesthetics in Islamic architecture reflect deeper spiritual meanings, utilizing elements like light, geometry, and reflection to promote balance, harmony, and connection to the divine. Light, seen as a metaphor for truth, plays a central role in Islamic aesthetics, while water is used for reflection and tranquility, symbolizing peace and spiritual purity (Bolkhari, 2009; Ahmad et al., 2014). Geometric designs, derived from Islamic concepts of symmetry, proportion, and hierarchy, are central to Islamic architecture's structural and spiritual essence (Burckhardt, 2009; Kanani & Kanani, 2014). Furthermore, green building practices informed by Shariah principles align with sustainability goals, addressing resource efficiency, energy conservation, and environmental stewardship (Aburounia & Sexton, 2006). Together, these elements create environments embody Islamic values, ensuring that buildings serve functional needs and spiritual, social, and environmental objectives, as emphasized in Maqasid Shariah principles.

Islamic design interprets Islam as a way of life—the design of any facility to accommodate and facilitate that very way of life. It is possible that the resulting architecture, which reflects the diverse cultural backgrounds of

Muslims, reveals these hidden values. Even though they were constructed with similar concepts and values, the architecture may be portrayed differently in physical form due to cultural exposure (Mohd Nawawi, 2016). Despite being a Muslim-majority nation, none of the ICHs in Malaysia fully adopt the comprehensive principles of Islamic design. Most ICHs are repurposed shop lots with limited facilities, resulting in superficial design features such as calligraphy and prayer rooms, which do not fully embody Islamic principles. Each hospital operates according to its unique vision and purpose, with little emphasis on holistically integrating Islamic values into its design and operations. The objective of ICH design should align with the Islamic goal of seeking Allah's pleasure by incorporating principles that raise awareness of Islam, enhance self-esteem, and reflect spiritual values. This encompasses every stage, from site selection to operational details, including architectural elements, facilities, and services. However, implementing these principles is particularly challenging in Malaysia's multiracial context, where accommodating diverse needs while adhering to Islamic values requires nuanced planning (Mohd Isa, 2015).

The concept of an Islamic Built Environment (IBE) offers a potential framework for integrating Islamic ideology into the physical elements of hospital design, ensuring that spaces serve both spiritual and practical human needs. IBE harmonizes Islam's spiritual and physical dimensions, ensuring suitability for both Muslim and non-Muslim users (Mohd Isa, 2015). However, challenges persist, including limited awareness among designers of Islamic requirements and an overreliance on project briefs that emphasize prayer spaces while neglecting other, less visible Islamic values (Mohd Nawawi, 2002). Cost implications further complicate the implementation of better healthcare environments that adhere to Islamic values. While Malaysia has made progress in incorporating some Islamic elements into healthcare architecture, significant efforts remain needed to fully align with the comprehensive standards of Islamic principles in hospital design and operations.

The study from Zakaria (2023) reveals that concepts such as Shariah-compliant hospitals (SCH) or Islamicfriendly hospitals (IFH), along with similar terms, were introduced predominantly by individuals without architectural backgrounds. Consequently, the implementation of Islamic values and principles in existing ICHs has largely been limited to management and services, with minimal attention to architectural elements. This study emphasizes the incorporation of the values of mercy (*rahmah*) and compassion (*ihsan*) into hospital design. It outlines specific characteristics (as detailed in Table 2) to guide the development of future design criteria for ICHs in Malaysia.

Elements	Potential Design Criteria
Location	<ul style="list-style-type: none"> - The best environmental factors include natural ventilation, pleasing surroundings, and away from damage or pollution. - Closer to the community and not isolated, such as in the city centre. - The building is purposely designed for a hospital. Not renovating other buildings (different purposes) to convert into hospitals.
Building Orientation	<ul style="list-style-type: none"> - The climatic-responsive design considers the sun's direction, site ecosystems, local climate, wind and rainfall conditions, and topography. - Being responsive to site topography (contour, ecology, etc.) is crucial for building orientation to ensure the site is fully utilized and prevent severe damage to the environment. - If possible, the building is laid in the direction of the qibla to ensure that space is used for prayer in whichever room is possible. - If not, getting the bed orientation facing the qibla is recommended to facilitate the disabled patients to perform solat.
Elements	Potential Design Criteria
Space Layout	<ul style="list-style-type: none"> - Space zoning is divided into different levels of privacy. - Extra consideration on protecting the patient's aurat at the transition area between spaces such as operation theatre and wardroom. - Provide worship facilities and aurat-friendly rooms near critical areas such as ICU or OT. - Easy access to the worship facilities for the users, especially the patients, to perform ibadah.

	<ul style="list-style-type: none"> - Separating the ward rooms and facilities based on gender and treatment (surgical, medical, or infectious diseases).
Hospital circulation	<ul style="list-style-type: none"> - Facilities and services were planned and designed for less movement of patients. - The corridors, ramps, elevators, and staircases must be wide enough to accommodate patients in beds, stretchers, or wheelchairs. - Planning hospital circulation also must consider the safety and security of the users and facilities.
The main entrance and Reception	<ul style="list-style-type: none"> - A welcoming atmosphere in the hospital reduces anxiety or confusion. - A noticeable main entrance design and clear direction. - The hospital must have at least two main entrances. - The entrance shall be at ground level, sheltered from inclement weather, and accessible to disabled patients. - The main entrance size depends on the hospital's size, service complexity, and volume of users. - The interior design for the reception area must be of a high standard because it influences the users' expectations. - Consideration of acoustic privacy to reduce sound reverberation at the reception area. - Promote a pleasant environment for the users.
Façade Design	<ul style="list-style-type: none"> - The facade is not just a skin or decoration for the hospital but a system that interacts with the whole building, influencing the energy demands. - Complying with Green Building Index (GBI) criteria for façade design interrelated with the Maqasid Shariah Principles. - Adopt sustainable strategies in facade design, such as planning on materials and resources and energy efficiency.
Therapeutic Element	<ul style="list-style-type: none"> - Integrates all the senses (sight, smell, hearing, taste, and touch) in designs to support spatial elements that interact with people physiologically and psychologically. - Different architectural approaches include open spaces, light, colours, shadows, acoustics, materials, and fenestrations. - The natural environment and outdoor exposure enhance the healing process.
Elements	Potential Design Criteria
Aesthetics	<ul style="list-style-type: none"> - Aesthetic elements include specific factors like balance, texture, pattern scales, colours, movement, shape, and visual weight. - Religious identity, such as calligraphy, minaret, and geometrical element, is part of the design's aesthetic values.

Table 2: Potential Islamic Design Characteristics (source: Zakaria, 2023)

METHODOLOGY

A qualitative approach was selected for this study due to its exploratory nature, which seeks to understand the intersection of Islamic principles, architectural design, and healthcare requirements. This method enabled an indepth examination of complex phenomena and the perspectives of various stakeholders. Multiple case study approaches served as the primary method, supported by Media Content Analysis, to strengthen the research findings. Data were analyzed using Thematic Analysis facilitated by ATLAS.ti 24 tools, which helped generate initial codes for implementing Islamic values in hospital design. These codes were categorized into tangible and intangible parameters.

The research utilized two primary data sources:

1. **Primary Data:** Collected through observations of six Islamic Concept Hospitals (ICHs) as case studies.

2. **Secondary Data:** Derived from the Quran and Hadith to identify Islamic values, with Tafseer Al-Quran and Hadith analyzed using Word Cloud and thematic analysis via ATLAS.ti9 tools. Additional secondary sources included journals, books, guidelines, building acts, and related online content.

The study analyzed five private and one government ICH in Malaysia to capture diverse applications of Islamic values. A comparative analysis was conducted to identify distinctions and commonalities among the hospitals, considering key factors:

1. Ownership Diversity:

- Private ICHs: These institutions demonstrate flexibility in adopting innovative practices, providing a market-driven perspective on integrating Islamic values.
- Government ICH: Represents the public healthcare system, showcasing how state policies and standardized regulations shape the incorporation of Islamic principles.

2. Compliance Categories:

- Shariah-Compliant Hospitals (SCH): These adhere strictly to Shariah principles across healthcare delivery and administration, with accreditation under SIRIM's MS1900:2014 certification ensuring consistent compliance.
- Islamic-Friendly Hospitals (IFH): These hospitals adopt a more flexible approach, focusing on essential facilities and services, such as prayer rooms and Halal food, allowing for a comparative view of varying degrees of religious adherence.

3. Cultural Relevance:

- Hospitals were selected to reflect Malaysia's multicultural society, illustrating how Islamic values coexist with diverse cultural practices and beliefs. This ensures that findings address the challenges of inclusivity and cultural sensitivity in a pluralistic healthcare system.

The study examined how Islamic principles inform architectural design to enhance patient well-being, comfort, and emotional recovery. It examined public, semi-public, and semi-private spaces (e.g., lobbies, prayer rooms, outpatient clinics) while excluding private clinical areas due to operational constraints. Thematic analysis revealed how values such as mercy (Rahmah) and compassion (Ihsan) are applied in real-world settings, emphasizing:

1. Tangible Criteria: Elements such as natural environments, space planning, aesthetics, and maintenance.
2. Intangible Criteria: Professionalism, spiritual care, user well-being, and educational initiatives.

By examining both Shariah-compliant and Islamic-friendly approaches, the study provides a nuanced understanding of how Islamic values impact patient care, architecture, and administration. These hospitals serve as microcosms of Malaysia's multicultural landscape, offering insights into the harmonisation of religious principles with societal expectations. This research contributes to the creation of healthcare environments that are supportive, inclusive, and aligned with Islamic values, thereby promoting holistic patient satisfaction and well-being.

RESULTS

Multiple case studies were conducted by interviewing six authoritative persons from six selected ICHs to gain comprehensive insights into the opinions and suggestions for ICH in Malaysia. The transcripts from these interviews were analysed using Thematic Analysis facilitated by Atlas.ti tools. Through this process, 61 significant initial codes were identified and subsequently categorized into 15 clusters: Islamic concept, ICH, ICH issues, accreditation, design approach, space planning and design, sustainability, natural environment, privacy protection, users' well-being, cleanliness and hygiene, moral and spiritual support, professionalism and ethics,

and social connection. Figure 2 illustrates the code-document Sankey Diagram, which visualizes the thematic relationships from the authoritative persons' transcript analysis.

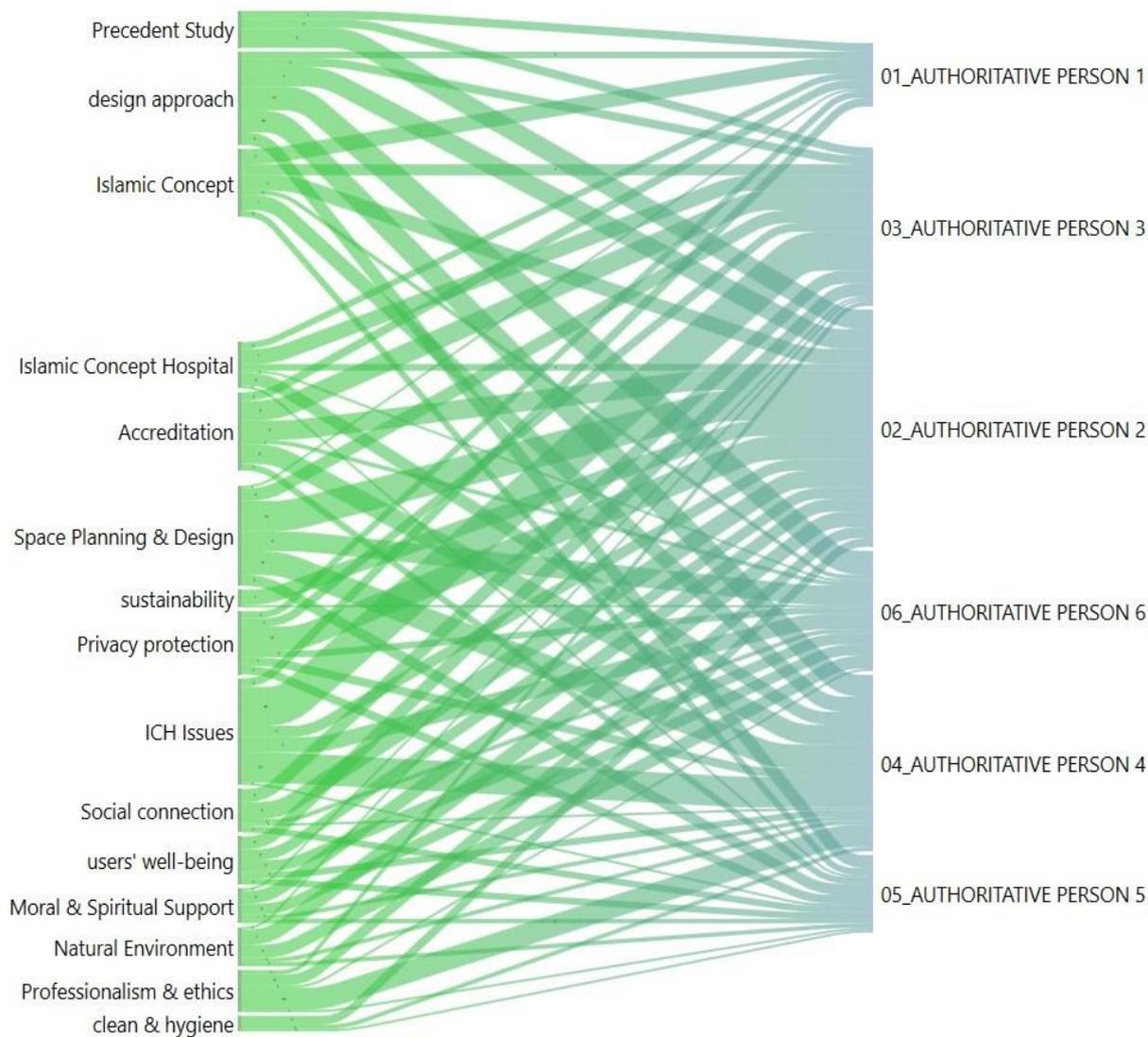


Figure 2: Code-Document Sankey Diagram of the Authoritative Persons’ Transcript Analysis

The findings emphasise two core values- i) mercy and ii) compassion, in hospital design. These values are further analysed through design approaches derived from multiple case studies, identifying eight elements of design approaches that have been grouped into tangible and intangible criteria.

The tangible criteria include i) natural elements, ii) planning and accessibility, iii) aesthetics, and iv) maintenance, while the intangible criteria encompass i) professionalism, ii) spiritual care, iii) education, and iv) users’ well-being.

The values of mercy embody the abstract criteria, whereas the values of compassion reflect the concrete ones. As emphasised, mercy and compassion are akin to a "twin brother" element. “The Compassionate” is a name of divine significance that stands unparalleled, as it embodies the Loving-Mercy through which God manifests existence. "The Merciful" refers to the divine act of providing sustenance, through which God sustains and supports each individual.

The tangible and intangible criteria have been thoroughly examined and validated by experts, culminating in the results for Islamic design standards. The specific criteria shown in Figure 2 and Table 3, which are based on the values of Mercy, represent the understanding of the concept. Meanwhile, the general criteria influenced by Compassion values, as depicted in Figure 3 and Table 4, explain the concept and philosophy of *Rahmatanlil'alam*.

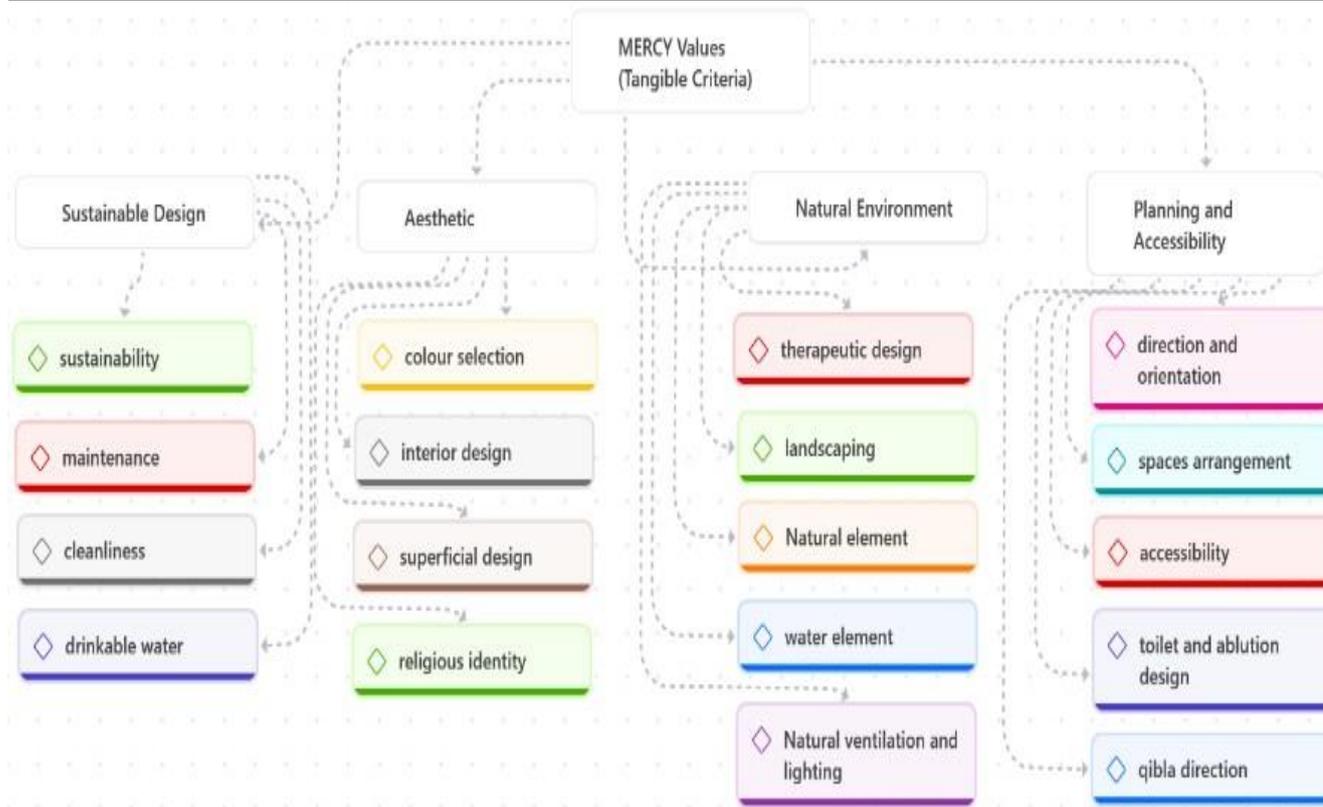


Figure 3: Tangible Criteria – Mercy Values

Element	Criteria	Maqasid Shariah	Design guidelines
Natural Environment	<ol style="list-style-type: none"> 1. Implementing natural elements such as therapeutic gardens or water elements. 2. Natural elements for healing. 	Hifzh Ad-Din Hifzh An-Nafs Hifzh Al-Aql	<ul style="list-style-type: none"> • Implementing natural elements, including landscaping, water elements, natural lighting, and ventilation as essential part in ICH.
Planning and Accessibility	<ol style="list-style-type: none"> 1. Direction and orientation of main spaces should face qibla but still fulfil clinical requirements. 2. Easy access to the facilities to perform ibadah. 3. Strategic location (city centre) 4. Building circulation must be clear and not confusing. 5. Space zoning based on different colours. 	Hifzh Ad-Din Hifzh An-Nafs Hifzh Al-Aql Hifzh An-Nasl Hifzh Al-Mal	<ul style="list-style-type: none"> • The space orientation, especially for patients’ beds, ideally faces the qibla. • The ibadah facilities (prayer rooms) at the centre or main level of the ICH are readily accessible. • The location of ICH is strategic. • The building circulation, arrival areas, and user flows are clear, user-friendly, and informative. • Different colours are encouraged to show space zoning in the hospital. • Consideration should be given to a toilet or bathroom design that does not face Qibla. The door opening also needs to be considered.
Element	Criteria	Maqasid Shariah	Design guidelines

	6. Toilet orientation does not face qibla and the door opens to let the left feet enter first.		
Aesthetic	1. selection of colours and materials in the building suitable for the space and function	Hifzh Al-Aql Hifzh Al-Mal	<ul style="list-style-type: none"> Using light colour for the main spaces gives a positive mood and reduces stress (therapeutic). It is also easy to clean when dirty. Selection of suitable materials and finishes at the spaces, such as toilets, to prevent user accidents or injury.
Maintenance	<ol style="list-style-type: none"> sustainable and wellmaintained facilities. Consideration of hygiene and cleanliness 	Hifzh An-Nafs Hifzh Al-Mal	<ul style="list-style-type: none"> The facilities must be wellmaintained and sustainable to ensure they are safe for users. Consider the cleanliness and hygiene of the space.

Table 3: Tangible Criteria – Mercy Values

Mercy in hospital design is shown through patient-centered environments, diversity, accessibility, and spiritual support, emphasising care, comfort, and healing. Patient-centric environments seek to reduce stress and promote serenity through soothing colours, natural illumination, and sound management. Applying features pastel hues and expansive windows, fostering a calming environment that alleviates anxiety. Quiet zones are specifically developed to offer patients tranquil places for relaxation, embodying the compassionate care inherent to *rahmah*. Inclusivity guarantees that healthcare services are available to all individuals, irrespective of capacity or socioeconomic background. Accessibility is enhanced by ramps, lifts, and spacious hallways, and employs bilingual signage to cater to a broad consumers. Mercy encompasses affordability, as several hospitals provide subsidised services for low-income families, reflecting the Quranic principle of respecting all individuals (Al-Quran, 17:70). Spiritual assistance is fundamental to mercy, featuring designated prayer rooms and ablution facilities intended for all users. Some ICHs demonstrates this by offering accessible prayer areas adjacent to wards, enabling patients with mobility impairments to observe their religious practices.

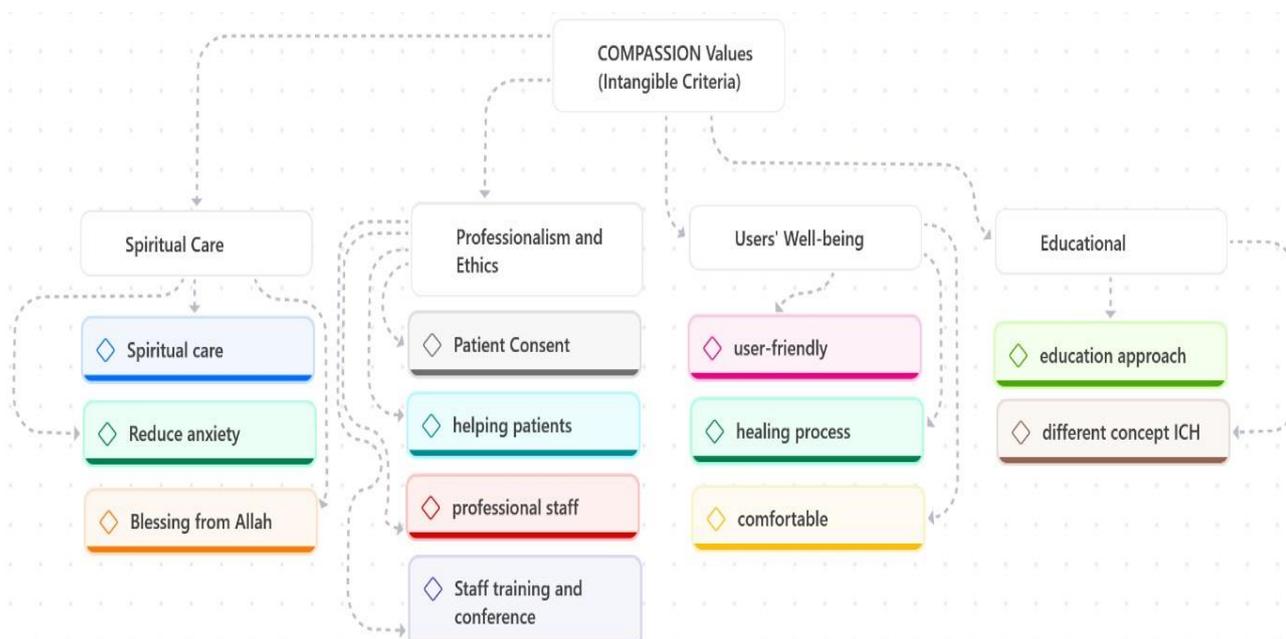


Figure 4: Intangible Criteria – Compassion Values

Element	Criteria	Maqasid Shariah	Design guidelines
Staff Professionalism	<ol style="list-style-type: none"> 1. The professionalism of the staff. 2. Knowledgeable staff. 	Hifzh Ad-Din Hifzh An-Nafs	<ul style="list-style-type: none"> • Providing a proper workplace environment to enhance staff morale. • Provide an education or training centre with up-to-date facilities for staff training
Spiritual Care	<ol style="list-style-type: none"> 1. Consideration of spiritual care. 2. Encourage patients to get closer to the Creator (Allah). 	Hifzh Ad-Din Hifzh Al-Aql	<ul style="list-style-type: none"> • The ICH design incorporates spiritual care for patients to foster awareness and draw closer to Allah. • Provide facilities in the wardroom to enable patients to perform ibadah under any conditions.
Educational	<ol style="list-style-type: none"> 1. The concept of “Hospital as Madrasah” encourages patients to get closer to Allah. 2. Educational on Islamic teaching and healthcare 	Hifzh Ad-Din Hifzh Al-Aql Hifzh An-Nasl	<ul style="list-style-type: none"> • Provide a mini library or a designated reading area with educational and Islamic sources to promote Islamic healthcare among users. • Provide a training centre or seminar room to deliver instruction in Islamic teachings or healthcare as part of social activities for the public.
Users Well-being	<ol style="list-style-type: none"> 1. privacy consideration for patients 2. Tolerance and comfort to the users 3. User-friendly to all 4. Implementation of Islamic concepts focuses more on the patient's well-being. 5. Consider all sensitivity as a multiracial country. 6. A concept like “home” encourages the patients' morale as home is the best place to be. 7. Consideration of staff's needs like childcare. 8. Provide mother-friendly facilities. 	Hifzh Ad-Din Hifzh An-Nafs Hifzh Al-Aql Hifzh An-Nasl Hifzh Al-Mal	<ul style="list-style-type: none"> • Ward segregation is a critical consideration in ICH and providing more individual or double rooms is encouraged. The curtains also must be thick, long, and lockable to protect the patient's privacy. • Thermal comfort and acoustic privacy need to be considered in the design. • The facilities are user-friendly and have a universal design. Providing a ramp, handrail at the wall, different floor tiles to guide the disabled people, built-in ablution in ward toilet, and well-accessible bathrooms with suitable fittings. • Consideration on users' safety in the hospital. The hospital applied security and surveillance for the whole building. • The hospital's interior design must be peaceful and reduce stress or anxiety to encourage patient morale. • Provides childcare or nursery for staff.

			<ul style="list-style-type: none"> • Provide mother-friendly facilities for the users.
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Table 4: Intangible Criteria - Compassion Values

Compassion hospital design prioritises privacy, dignity, family support, connection to nature, and sustainability. Privacy is upheld via gender-segregated waiting areas and soundproof consultation rooms, ensuring respect for cultural sensitivities and personal dignity. All ICHs implement gender-segregated areas to improve patient comfort, and soundproof rooms are utilized to maintain confidentiality during consultations. Family-friendly environments exemplify compassion by providing comfortable lounges and play areas for children, as seen in the hospital design, alleviating family stress. The natural environment is essential for promoting tranquility and recovery. Green spaces, water features, and biophilic designs exemplified by the landscaped gardens enhance emotional well-being and foster spiritual connections, reflecting Quranic references to the healing properties of nature (Al-Quran, 50:9). Sustainability, as a manifestation of compassion, is consistent with the principles of stewardship in Islam. Hospitals that integrate solar panels, energy-efficient systems, and recyclable materials exemplify a commitment to sustainability, aligning with the Quranic directive against wastefulness (Al-Quran, 2:11).

Integrating values of mercy and compassion into hospital design creates holistic healing environments that address physical, emotional, and spiritual needs. For example, tranquil gardens adjacent to prayer rooms provide patients and families with spaces that combine spiritual solace and natural beauty. While mercy ensures that basic needs are met, such as privacy and accessibility, compassion enhances the user experience through features such as ergonomic furniture and welcoming interiors. These values promote inclusivity and community engagement, ensuring healthcare facilities are functional, comforting, and aligned with Islamic ethics. By focusing on these principles, Islamic Concept Hospitals can significantly enhance the healing process, creating environments that resonate deeply with the core tenets of Islamic values.

This study offers practical recommendations for hospital administrators, professionals in the built environment, and hospital consumers by proposing Islamic Concept Hospitals (ICH) design standards in Malaysia that adhere to Islamic Built Environment principles. It integrates Islamic (Shariah) principles with the Ministry of Health’s hospital standards, ensuring operational standards while improving therapeutic outcomes. The study suggests ways to improve hospital conditions based on Islamic principles, which apply to both Muslims and non-Muslims. This also aligns with the United Nations Sustainable Development Goals, namely Goals 3 (health and wellbeing) and 11 (sustainable cities and communities), which emphasise the social, economic, and sustainability dimensions of hospital design. The design guidelines for ICH in Malaysia help healthcare officials improve the environment of their establishments. Notably, the criteria may be used as a valid accreditation standard for any institution seeking to comply with Islamic ideals. Integrating mercy and compassion into design enhances understanding of Islam and facilitates the practice of *mardhatillah* in various situations.

CONCLUSION

This study highlights the profound influence of Islamic values, particularly mercy (Rahmah) and compassion (Ihsan), in shaping hospital environments that holistically address physical, emotional, and spiritual well-being. Through an in-depth analysis of six Islamic Concept Hospitals (ICHs) in Malaysia, the research demonstrates how these principles can be effectively incorporated into hospital design, aligning with Maqasid Shariah principles and the Sustainable Development Goals (SDG 3 and SDG 11). By prioritizing culturally sensitive and inclusive care, the findings reveal the potential of Islamic values to enhance patient outcomes, foster user satisfaction, and create therapeutic environments conducive to holistic healing. The study bridges the gap between Islamic teachings and contemporary healthcare design, providing a practical framework for architects, policymakers, and administrators to create hospitals that resonate with Islamic principles and meet global healthcare standards. Based on the findings, the following guidelines and policy recommendations are proposed to facilitate the integration of Islamic values into hospital design:

1. **Integration of Islamic Values:** Hospitals should incorporate Islamic principles in their architectural design, focusing on elements such as direction towards Mecca, gender-sensitive spaces, and dedicated prayer areas.

The policies should mandate environmental design that includes features conducive to spiritual healing and patient privacy.

2. **Sustainability Practices:** Encourage the use of natural materials and green spaces within hospitals to align with the concepts of healing environments in Islamic traditions. Frameworks should be developed to ensure hospital operations are environmentally sustainable and resourceefficient.
3. **Patient-Centric Design:** Hospital layouts should prioritize the emotional, spiritual, and physical well-being of patients through accessible spaces dedicated to healing. Policies should emphasize the importance of natural light, serene surroundings, and patient mobility within design parameters.
4. **Cultural Sensitivity Training:** Implement training programs for hospital staff to ensure they understand and can cater to the cultural and spiritual needs of Muslim patients. Such training can be codified in accreditation standards and regulations.
5. **Community Involvement and Feedback:** Enforce guidelines that require ongoing community engagement to collect patient feedback and continuously adapt hospital environments to cultural needs. Develop channels for feedback and implement iterative changes based on user experiences and suggestions.

Integrating Islamic values into hospital design represents an innovative and holistic approach to addressing healthcare challenges in multicultural societies like Malaysia. By harmonizing these principles with modern healthcare standards, hospitals can create environments that meet clinical needs while uplifting spiritual and emotional well-being. The implementation of these recommendations will support the growth of Islamic Concept Hospitals, contribute to global sustainability efforts, and ensure healthcare systems are equitable, inclusive, and aligned with Maqasid Shariah principles. This framework offers a pathway for fostering healing environments that not only care for the body but also nurture the soul, exemplifying the universal values of compassion and mercy.

REFERENCES

1. Al-Tabari, Abu Ja'far Muhammad ibn Jarir. (1989). *Al-Quran and Tafseer. Jami' al-bayan 'an ta'wil ay alQur'an* (Vols. 1-30). Cairo, Egypt: Mustafa al-Babi al-Halabi.
2. Aburounia, H., & Sexton, M. (2006). Al-Quran and Hadith: Guiding humanity towards spiritual and physical welfare. *Journal of Islamic Studies*, 14(3), 23-34.
3. Ahmad, Q., Behrang, M., & Farimah, R. (2014). Architectural elements in Islamic design principles. *Journal of Islamic Architecture*, 2(3), 44-50.
4. Al-Daffa, A. (2007). Nature as a sign of Allah in Islamic culture. *Islamic Environmental Studies Quarterly*, 8(2), 19-28.
5. Azhani, A., Rahman, Z., & Abdul Rahim, R. (2021). Islamic principles in urban planning and design. *International Journal of Built Environment*, 5(2), 33-45.
6. Bolkhari, H. (2009). Light and geometry in Islamic architecture. *Islamic Aesthetics Journal*, 3(1), 11-20.
7. Burckhardt, T. (2009). *Art of Islam: Language and Meaning*. World Wisdom.
8. Clarke, V., & Braun, V. (2013). Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning Associate Professor in Sexuality Studies Department of Psychology Faculty of Health and Life Sciences University of the West of England Coldharbour Lane Br. University of the West of England, 26, 120–123.
9. Kamaruzzaman, W.S (2013). Ideal Islamic concept of IIUM Hospital. Paper presented at a Seminar on Islamization of Medical Curriculum and Practice. IIUM Kuantan.
10. Kasule, O.H. (2011). Concept of a Hospital in Islam. Paper presented at 7th International Seminar and Workshop on Understanding and Application of Quranic Principles and Values in Healthcare, Kuala Lumpur. Retrieved from <http://omarkasule-tib.blogspot.com>
11. Mohd, Z. (2019). Introducing ARC (ask, record and confirm) as the new validating technique in real-time. *IOP Conf. Ser.: Earth Environ. Sci.* 385.
12. Mohd Isa, N. (2015). Developing a Definition for Islamic Built Environment in Malaysia by Sieving Through the Interpretation of Public Opinion Shapers. International Islamic University Malaysia.

13. Mohd Nawawi, N. (2002). Islamic Perspective to Healthcare Architecture - an overview of the Medieval Islamic World with Case Study of Contemporary Healthcare Architecture in Malaysia. International Islamic University Malaysia. in Conference: XXII International Public Health Seminar, Berlin, Germany.
14. Omer, S. (2011). Islamic values in architecture and planning. Proceedings of Islamic Built Environment Conference, 23-30.
15. Puchalski, C.M., Blatt, B., Kogan, M., & Buttler, A. (2014). Spirituality and health; the development of a field. *Acad Med.* Jan; 89(1):10-16. Retrieved from: <http://dx.doi.org/10.1097/ACM.0000000000000083>
16. Rahman, H.U., Mishal, A., Haq, N.U., Mas'ud, I., Irfan, M. (2017). Islamic Hospital Guidelines. Federation of Islamic Medical Associations. Peshawar Medical College., Prime Foundation Pakistan., & Pakistan Islamic Medical Association. 2017. ISBN 978-969-7817-00-9
17. Shariff, S.M. & Rahman, A.R.A. (2016). Shariah Compliant Hospital; From Concept to Reality: A Malaysian Experience. *Bangladesh Journal of Medical Science* Vol.15 No 01 January '16
18. Shariff, Shaharom Md, Shahimi Mohtar, and Roslan Jamaludin. "A Practical Journey in Implementing a Shari'ah Compliant Hospital: An-Nur Specialist Hospital's Experience." *International Medical Journal Malaysia* 17, no. Special issue2 (2016): 177-88. <https://doi.org/10.31436/imjm.v17i2.934>.
19. Tavasoli, M. (2005). Hierarchy of spaces in Islamic architecture. *Islamic Architectural Review*, 9(3), 41-56.
20. Yin, R.K. (2009). *Case Study Research: Design and Methods*, 4th Edition, SAGE Publication Inc.
21. Zakaria, A (2023), "Design Criteria for Islamic Concept Hospital in Malaysia" [Doctoral thesis, Universiti Teknologi Malaysia].
22. Zakaria, Adila, Norliza Mohd Isa, Taufik Hairudin, and Hairul Nizam Ismail. (2021) "The satisfaction of the users with the Islamic design quality in instant hospitals for non-critical covid -19 patients in Malaysia." *Journal of Islamic Thought and Civilization*, Vol 11, no. 1. pp 355-373.
23. Zakaria, A., & Isa, N. M. (2022). "Thematic Review on Islamic Design Quality in Hospital Design In Malaysia." *Journal of Tourism Hospitality and Environment Management*, 7 (27), pp 417-429.
24. Zawawi, M., & Othman, K. (n.d) An Overview of Shari'ah Compliant Healthcare Services in Malaysia. *Malaysian Journal of Consumer and Family Economics*
25. Zen, I. (2008). *Vision of An Islamic City, Urban Planning an Islamic Perspective*, Arah Publication 26.
- Zeynalzadeh, S. (2014). Islamic aesthetics in environmental design. *Environmental Design Quarterly*, 8(3), 19-25.