
Complementary Therapy and Holistic Nursing Care Plan

Dwi Yunita Haryanti^{1*}, Sabila Aulia Rahman¹

¹Universitas Muhammadiyah Jember; *dwiyunita@unmuhjember.ac.id

*Correspondence: Dwi Yunita Haryanti
Email: dwiyunita@unmuhjember.ac.id

Published: Januari, 2024



Copyright:© 2024 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY) license (<http://creativecommons.org/licenses/by/4.0/>).

Abstract: Complementary therapy regulated fundamental caring principles and integrated as part of nursing care management. Nursing concept model of caring for patients widely opens a chance to encourage individual abilities as a nurse in modifying holistic nursing care plans and also improving nurse-patient relationships. The aim of this study was to determine nursing student's knowledge and the use of complementary therapy in holistic nursing care plans. A descriptive cross sectional survey was performed among nursing students in the Faculty of Health Science who had established nursing care plan and was in final year of education. Participants taken by total sampling (n=115). Questionnaire completed with participants to determine their knowledge, personal methods use and reasons toward complementary therapy. The participants had a good knowledge towards complementary therapy. More than a half of the participants reported that they use of relaxation therapy, herbs, cupping therapy and Qur'an recitation into their nursing care plan so that patients can be treated as a holistic from the side of patients

biology, psychology, sociology and spiritualism needs. Nursing students engaged complementary therapy in their nursing care plan. Good knowledge about complementary therapies in nursing students will increase the use of these therapies in providing nursing care. Nurses with the caring concept model are in a strategic position to be able to provide holistic nursing care, one of which is by implementing complementary therapies in the nursing plan.

Keywords: Complementary Therapy; Holistic; Nursing Care Plan

INTRODUCTION

The concept of professional nursing theory and practice always views the patient as a holistic human being. This overall view includes physiological, psychological, sociocultural and spiritual dimensions which constitute a unified whole aspect. If one aspect of the holistic concept is disturbed, it will affect other dimensions[1]. Therefore, a nurse in providing nursing care must consider various aspects, both physical, emotional, social, cultural and spiritual, in order to fulfill the patient's needs holistically. Nurses must also consider the patient's response to the illness they are suffering from and the patient's ability to fulfill their self-care needs.

Based on the current state of the health paradigm developing in Indonesia, the holistic health concept provided in health services is still rarely implemented directly. Spiritual and psychosocial needs are less of a concern than physical needs, because these needs are often abstract, complex and more difficult to measure. In fact, if health services are only oriented to the physical aspect[2].

Complementary therapy is not limited to medical treatment, but in the practice of complementary therapy, there are policies regarding basic nursing principles that are included as part of care management. Basically, the philosophy of complementary therapy is very consistent with the concept of healing and holistic nursing. This is supported by the history of nursing theory which integrates "caring" with conventional therapy. Florence Nightingale or the woman known as the lady of the lamp introduced the position of "caring" to everyone and increased the individual's involvement in

efforts to achieve healing.[1].

Roy expressed his view of humans as recipients of nursing care in relation to adaptation theory, that humans are bio-psycho-social creatures as a whole (holistic). The application of complementary therapies in nursing needs to refer back to the theories that underlie nursing practice. Complementary therapies also increase the nurse's likelihood of showing concern for clients. Complementary and alternative nursing as a development of traditional therapy is integrated into modern therapy which affects the individual as a whole, namely from biological, psychological, sociological, cultural and spiritual aspects. So that complementary and alternative therapies can be applied in nursing services that view individuals as holistic (bio-psycho-socio-cultural-spiritual)[3].

The government is determined to develop traditional health services as recommended by WHO in traditional / complementary medicine for 2014-2023 to be integrated into health services in a national health system. In connection with efforts to integrate traditional medicine into the national health system, a number of regulatory frameworks have been issued, starting from the law level, up to the Decree of the Minister of Health. In 2007 the government issued Regulation of the Minister of Health of the Republic of Indonesia Number 1109/MENKES/PER/IX/2007 concerning the Implementation of Alternative Complementary Medicine in Health Service Facilities.

In 2014 the Government issued Republic of Indonesia Government Regulation Number 103 of 2014 concerning Traditional Health Services. The government has also targeted the implementation of integrated traditional health services in the Ministry of Health's Strategic Plan for 2015 – 2019. The traditional health service system is part of the National Health System and the Complementary Traditional Health Service System can synergize and integrate with conventional health services in health service facilities. Service integration is the unification/merging of some or all aspects of alternative complementary medicine in health services at all levels of health service facilities, including aspects of regulation, financing and policies regarding the provision of services and the drugs used. Integration of traditional health services according to Minister of Health Regulation no. 1109/Menkes/IX/2007 in article 10 paragraph (2) is implemented in health service facilities including Teaching Hospitals, Non-Teaching Hospitals, Special Hospitals, Private Hospitals, Individual Practices, Group Practices, and Community Health Centers[4]

There has been a significant increase in countries that have alternative and complementary therapy policies, starting from only 25 countries in 1999, then becoming 45 countries in 2005, then becoming 79 countries in 2012 and in 2018 growing to 109 countries, which means more than 50% of 194 countries have policies related to alternative and complementary therapies[5]. Currently, Complementary and Alternative Medicine (CAM) has become a trend among other therapeutic phenomena, such as conventional therapy with concoctions or herbal therapy, acupuncture or cupping. In several hospitals in Indonesia, complementary therapy has begun to be applied as supporting therapy or as replacement therapy for patients who refuse conventional treatment.[6].

Based on the Ministry of Health's Strategic Plan for 2015 – 2019 regarding Traditional and Complementary Health Development, it is known that the indicator of achieving this target is the percentage of Community Health Centers that provide traditional health at 75% in 2019. Traditional health services (yankestrad) are still in demand by Indonesian people, as evidenced by 2018 Basic Health Research (Riskesdas) data stating that 31.4% of the population uses yankestrad (Indonesian Ministry of Health Health Research and Development Agency, 2018). The use of yankestrad by the community is supported by the Government through services in health facilities as stated in Law no.

36 of 2009 concerning Health, which states that yankestrad is one of 17 types of health efforts that must be carried out in an integrated, comprehensive and sustainable manner in health service facilities.

Complementary and alternative therapies such as massage, touch therapy, relaxation methods and environmental adjustments are part of traditional nursing actions. The integration of complementary therapies into nursing in an effort to provide comprehensive and holistic services is not only carried out unilaterally by nurses, but also involves collaboration between nurses and patients, with the aim of increasing patient satisfaction with the services provided. Therefore, several nursing educational institutions accept and integrate complementary therapies into their curriculum, with the consideration that this therapy is very compatible with nursing activities, especially in carrying out nursing care.[7].

Complementary interventions develop at primary, secondary and tertiary prevention levels and can be carried out at individual and group levels. The application of complementary and alternative therapies in holistic nursing care must be supported by the nurse's knowledge or competence[8]. Several studies have focused on types of complementary measures and their influence on the success of the treatment process. While this research aims to analyze the relationship between knowledge about complementary therapies in nursing students and their use in providing holistic nursing care.

METHOD

This research was conducted using a cross sectional approach. The population in this study were 115 students from the faculty of health sciences who had taken complementary therapy courses and had provided nursing care. Respondents were determined using total sampling, so that the total number of respondents obtained was 115. The instrument used was a questionnaire regarding knowledge related to complementary therapy and the types of complementary therapy that had been written in the nursing plan. This instrument is a modification of previous research which has been tested for validity and reliability. Scoring on the questionnaire uses a Likert scale. Data analysis used a non-parametric correlation statistical test, namely the Spearman rho correlation test with a significance level of 95% ($\alpha < 0.05$). This research began by submitting an ethical clearance to the health research ethics commission at the Faculty of Health Sciences, Muhammadiyah University of Jember. Certificate of passing ethical review with number 0070 /KEPK/FIKES/III/2022.

RESULTS AND DISCUSSION

Table 1. Student Knowledge about Types of Complementary Therapy

Method	Don't know		Never Heard		Know	
	n	%	n	%	n	%
Cupping	0	0	0	0	115	100
Relaxation Therapy	1	0.9	2	1.74	112	97
Aroma therapy	1	0.9	3	2.61	111	97
Sport	0	0	4	3.4	111	97
Acupuncture	0	0	5	4.35	110	96
Distraction Therapy	1	0.9	5	4.3	109	95
Reflexology	4	3.5	3	2.6	108	94
Music Therapy	2	1.7	5	4.35	108	94
Murottal Therapy	4	3.5	3	2.61	108	94

Ruqyah	2	1.7	5	4.35	108	94
Sun Bath		1.7	5	4.3	108	94
	2					
Pray	1	0.9	6	5.22	108	94
Needle prick	5	4.3	56	48.7	54	47
Bee sting	7	6.1	54	47	54	47
Yoga	7	6.1	54	47	54	47
Herbal products	2	1.7	59	51.3	54	47
Food combining	7	6.1	54	47	54	47
Meditation	7	6.1	54	47	1	0.9

Source: Primary Data, 2021

Based on table 1, all respondents who knew well the complementary therapy methods in the form of cupping (100%), relaxation therapy, aroma therapy and exercise were 112 (97%) respondents, acupuncture was 110 respondents (96%), distraction therapy was 112 (97%). 109 (95%) respondents, reflexology massage, music therapy, murottal, ruqyah, sunbath and dhikr were 108 (94%) respondents, needling, bee stings, yoga, use of herbs and food combining were 54 (47%) respondents. For the rest, respondents were limited to having heard and not knowing.

Table 2. Knowledge about Complementary Therapies in Nursing Care Plans

Knowledge level	Frequency (person)	Percentage (%)
Good	79	69
Enough	31	27
Not enough	5	4
Amount	115	100

Source: Primary Data, 2021

Based on table 2, the majority of nursing students' knowledge level is at a good level, namely 79 people or 69%.

Table 3. Use of Complementary Therapies in Administration Holistic Nursing Care

Use	Frequency (person)	Percentage (%)
Always used	61	53
Sometimes	46	40
Not used	8	7
Amount	115	100

Source: Primary Data, 2021

Based on table 3, complementary therapies are not always used in providing holistic nursing care, this is proven by only 53% of these therapies being included as one of the nursing interventions.

Table 4. Methods of Complementary Therapies used in Administration Holistic Nursing Care

Complementary Therapy Methods	n	%
Relaxation	102	88.6
Herbal	88	76.5
Cupping	86	74.7
Murottal Therapy	83	72
Aroma therapy	76	66
Sport	69	60
Pray	58	50.4
Distraction	55	47.8
Music Therapy	53	46
Food Combining	32	27.8
Sun bath	28	24.3
Reflexology	26	22.6
Meditation	24	20.8
Acupuncture	21	18.2
Ruqyah	17	14.7
Yoga	12	10.4
Needle prick	7	6
Bee sting	4	3,4

Source: Primary Data, 2021

Based on table 4, the majority of complementary therapy used in nursing care is relaxation therapy by 102 (88.6%) respondents.

Table 5. Reasons for Using Complementary Therapies in Administration Holistic Nursing Care

Reasons for Using Complementary Therapies	n	%
Reduces stress/pain/discomfort levels	114	99
Touching the patient's psychological and spiritual side	113	98
Easy to get	112	97
Improves the immune system	109	94.7
Low risk	107	93
Can be done independently	104	90
Economical, affordable for all people	98	85
Able to solve nursing problems	97	84
As additional therapy besides medical therapy	78	67.8
Does not cause addiction	65	56.5
Evidence based	56	48.6

Source: Primary Data, 2021

Based on table 5, the most frequent reasons for using complementary therapy were to reduce stress/pain/discomfort 114 (99%).

Table 6. Knowledge about Complementary Therapies by Administration Holistic Nursing Care

Knowledge	Use of Complementary Therapies			Total	P Value	r
	Always Used	Sometimes	Not used			
Good	53	22	4	79	0,000	0.760
Enough	7	21	3	31		
Not enough	1	3	1	5		
Total	61	46	8			

Source: Primary Data, 2021

Table 6 illustrates the correlation between knowledge about complementary therapies and their use in providing Holistic Nursing Care. The level of strength of relationship is 0.760 or very strong with a significant correlation (0.000). The direction of the correlation coefficient is positive so that the more knowledge increases, the more frequently the use of this complementary therapy will be carried out.

Complementary therapy is a form of non-conventional therapy as a form of treatment that comes from various systems, modalities and health service practices based on theory and belief. It is hoped that complementary therapy can be an effort to optimize health services in hospitals[9].

In this study, 115 respondents indicated that knowledge regarding complementary therapies was good, especially cupping therapy (100%), relaxation therapy, aromatherapy and exercise (97%), then acupuncture (96%), while other therapies were included in the list. In the questionnaire, some answered that they had heard of it and some of them answered that they didn't know. This good knowledge regarding complementary therapies is proof that the integration of complementary therapies into the learning curriculum is very effective. This knowledge will help nursing staff to plan interventions and implement them by adapting to the patient's culture, because this is closely related to culture and beliefs[2].

This finding is different from research conducted in Australia, where the same respondents in this study had low knowledge about complementary therapies. This is caused by a modern mindset and the assumption that medical therapy has gone through a lot of research and clinical trials, so that its effectiveness has truly been tested, while complementary therapies tend to be conventional.[3]. This is most likely caused by culture and beliefs, because Indonesia is so culturally diverse that it is not difficult to know and accept this complementary therapy as therapy in health services.[9].

The most frequently used complementary therapies in nursing care are relaxation therapy 88.6%, herbal 76.5%, cupping therapy 74.7% and murottal therapy 72%. The relaxation therapy chosen is using deep breathing techniques, while the herbal therapy chosen is honey, virgin coconut oil (VCO), propolis and various types of rhizomes and spices. These findings are in line with research in Turkey which also makes the use of herbal therapy the most widely used complementary therapy[10].

Today's society has a tendency to return to nature with traditional Indonesian healing culture which is very popular, namely massage and the tradition of drinking herbal medicine.[11] Herbal medicine treatment, in accordance with traditional medicine policy, namely Minister of Health Decree No.381/MENKES/ SK/III/2007, aims to encourage the use of natural resources and ingredients, making traditional medicine a superior commodity by increasing community capacity in independent health care as a relief effort. first to yourself and your family.

Herbal therapy is very supportive in the pandemic era, this therapy can be easily obtained, processed and consumed, especially by sufferers who are self-isolating at home. Family nursing care

can easily integrate this complementary therapy into its action plan, so it is very clear here that nurses are required to have good knowledge regarding complementary therapies[12].

Cupping is one of the therapies that many patients are interested in, apart from wanting to carry out the sunnah of the Prophet Muhammad, many studies have proven that this therapy has many benefits for the health of the human body. Cupping therapy can increase HDL cholesterol levels and reduce LDL cholesterol levels in the body[13]. Wet cupping plays a role in controlling vasodilation so that it can reduce blood pressure[14]. Cupping can reduce things that cause ischemia and gangrene in diabetes mellitus sufferers[15].

Murottal therapy is very synonymous with a religious touch, where this nursing action aims to teach patients about self-healing, complete trust in Allah and accepting their pain as proof of Allah's love. This is in accordance with several studies that used murottal therapy to overcome nursing problems in the form of anxiety, pain and stress. The level of anxiety in patients who were about to undergo angiography decreased from moderate anxiety to mild anxiety after being given murottal therapy[16]. Murottal therapy can be used to reduce pain in cancer patients[17]. Elderly patients are very at risk of psychological disorders, with murottal therapy the level of stress in the elderly can be reduced until it is eliminated[18].

Several other complementary therapy methods such as aromatherapy, exercise, dhikr, distraction, music therapy, food combining, sunbath, reflexology, meditation, acupuncture, ruqyah, yoga, needling and bee stings are also the therapy of choice for several nursing problems that arise, but they are not used as much as therapy. relaxation, herbal, cupping and murottal. This is due to the patient's culture and beliefs[9] as well as nurses' knowledge and skills in implementing complementary therapies[19].

The three most common reasons for using this complementary therapy are reducing levels of stress/pain/discomfort (99%). This is in accordance with the use of complementary therapies in nursing care, the most widely used of which is relaxation therapy. This relaxation therapy is not only easy to apply, but also easy to accept by the majority of patients, where every patient feels pain and discomfort. Stress will also be experienced by every patient during hospitalization. If this continues and is not handled, it will have a serious impact on the patient's health status[20].

The second reason is to touch the patient's psychological and spiritual side (98%). This is the importance of nurses providing holistic nursing care, not only focusing on physical complaints, but more on the patient's psychological condition. Sick conditions will bring a person closer to God, this happens because no servant is struck by a disaster except what Allah has written to him. So really a servant really needs in conditions like this to always renew his faith, renew his belief in the destiny of Allah Subhanahu wa Ta'ala. And that everything that is written must happen. And what happens to a servant will not miss him and what happens to a servant will not happen to him and what Allah Subhanahu wa Ta'ala wants will definitely happen and what Allah does not want will not happen[21]

The third reason is that it is easy to obtain (97%), this is in accordance with the large number of respondents who use herbal therapy as an alternative. As we know, Indonesia is very rich in spices and rhizomes, so complementary therapies with these herbs are very accessible to the whole community. The results of the research show that people use part of their yard to plant toga for preventive, promotive and curative purposes, to treat minor illnesses such as coughs, flu, diarrhea and headaches for the reason that it is cheap, easy to obtain and natural.[8]

There is a significant correlation between nursing students who have good knowledge of complementary therapies and their use in providing holistic nursing care ($p < 0.000$) (table 6). This is most likely due to the level of understanding and confidence in carrying out these interventions as well as the belief that the use of complementary therapies will have a positive impact on the development of the patient's condition. Several reasons for choosing this type of complementary therapy are also the cause of this significant correlation [10].

As nurses, we are required to provide nursing care that is holistic in nature, caring for all dimensions of life, including biological, psychological, social and spiritual. It is important for nurses to know and improve skills and competencies in complementary fields and apply them in nursing care[22]. The majority of patients get information about complementary therapy from the internet. If this role can be carried out by nurses, the results will be extraordinary, patients and the public will receive accurate and reliable information, they will also be able to maximize preventive rather than curative measures, so that a healthy and independent society will be created.

Recently, many nurses' roles have been in the medical area, or can be called modern medical procedures which fully involve medicine and chemistry, thus increasingly creating distance from the holistic paradigm in the nursing profession itself [7]. Recent research states that patients often ask nurses about complementary therapies, and only 5% of nurses are able to respond to these questions well[23]

CONCLUSION

Good knowledge about complementary therapies in nursing students will increase the use of these therapies in providing nursing care. Nurses with the caring concept model are in a strategic position to be able to provide holistic nursing care, one of which is by implementing complementary therapies in the nursing plan. Apart from that, nurses are also required to increase their knowledge and skills and apply what they have to improve the level of public health.

REFERENCES

- [1] S. Ismail, "Keperawatan Holistik Dan Aplikasi Intervensi Komplementer," *Keperawatan Holistik dan Apl. Interv. Komplementer "Harmony*, vol. 1, no. 1, pp. 10–18, 2017, [Online]. Available: <https://ejournal.poltektegal.ac.id/index.php/siklus/article/view/298%0Ahttp://repositorio.unan.edu.ni/2986/1/5624.pdf%0Ahttp://dx.doi.org/10.1016/j.jana.2015.10.005%0Ahttp://www.biomedcentral.com/1471-2458/12/58%0Ahttp://ovidsp.ovid.com/ovidweb.cgi?T=JS&P>
- [2] V. Indra, "Complementary and Alternative Medicine in Nursing Care," *Int. J. Adv. Nurs. Manag.*, vol. 6, no. 3, p. 255, 2018, doi: 10.5958/2454-2652.2018.00057.4.
- [3] B. F. Walker *et al.*, "Knowledge, attitude, influences and use of complementary and alternative medicine (CAM) among chiropractic and nursing students," *Chiropr. Man. Ther.*, vol. 25, no. 1, pp. 1–8, 2017, doi: 10.1186/s12998-017-0160-0.
- [4] A. Rahmawati, S. P. Jati, and A. Sariatmi, "Analisis Implementasi Pengintegrasian Pelayanan Kesehatan Tradisional di Puskesmas Halmahera," *J. Kesehat. Masy.*, vol. 4, no. 1, pp. 12–22, 2016.
- [5] WHO Report, *WHO Global report on traditional and complementary medicine 2019*. 2019.
- [6] S. Suharmiati, L. Handayani, and Z. K. Nantabah, "Pemanfaatan Pelayanan Kesehatan Tradisional Integrasi di Rumah Sakit Pemerintah. Studi di 5 Provinsi Indonesia," *Bul. Penelit. Sist. Kesehat.*, vol. 23, no. 2, pp. 126–134, 2020, doi: 10.22435/hsr.v23i2.2361.

- [7] M. A. Hajbaghery, "Complementary and Alternative Medicine and Holistic Nursing Care: The Necessity for Curriculum Revision," *J. Complement. Med. Altern. Healthc.*, vol. 5, no. 4, pp. 13–14, 2018, doi: 10.19080/jcmah.2018.05.555666.
- [8] A. W. Widayanti, J. A. Green, S. Heydon, and P. Norris, "Health-seeking behavior of people in Indonesia: A narrative review," *J. Epidemiol. Glob. Health*, vol. 10, no. 1, pp. 6–15, 2020, doi: 10.2991/jegh.k.200102.001.
- [9] K. S. Ariyanti, M. D. Sariyani, and C. I. M. Pemayun, "Kepercayaan Masyarakat Terhadap Pengobatan Komplementer Akupuntur Di Praktik Perawat Mandiri Latu Usadha Abiansemal Badung," *J. Ilmu Kesehatan. MAKIA*, vol. 10, no. 2, pp. 107–116, 2020, doi: 10.37413/jmakia.v10i2.102.
- [10] E. Pirincci, F. Kaya, S. Cengizhan, and F. Onal, "Nursing department students' knowledge and use of complementary and alternative medicine methods," *J. Turgut Ozal Med. Cent.*, vol. 25, no. 1, p. 1, 2017, doi: 10.5455/jtomc.2017.07.099.
- [11] A. Tourism, U. Travel, and J. Specht, "GALERI OBAT TRADISIONAL DAN SPA Peningkatan Kepedulian Masyarakat Akan Kesehatan Menurut World Health Organization (WHO) setiap negara perlu mengangkat serta mengembangkan pengobatan tradisionalnya masing-masing . Saat ini , masyarakat dunia rupiah . ' H," vol. 1, no. 1, pp. 48–58, 2019.
- [12] R. Rukmini and O. Oktarina, "Inovasi Program Pelayanan Kesehatan Tradisional pada Lansia di Puskesmas Made Kota Surabaya," *Bul. Penelit. Sist. Kesehat.*, vol. 23, no. 2, pp. 135–144, 2020, doi: 10.22435/hsr.v23i2.3101.
- [13] W. Widada *et al.*, "The effect of the blood cupping therapy on high density lipoprotein (HDL) and low density lipoprotein (LDL) in hypercholesterol patients," *Indian J. Forensic Med. Toxicol.*, vol. 14, no. 4, pp. 3556–3562, 2020, doi: 10.37506/ijfmt.v14i4.12179.
- [14] H. Irawan and S. Ari, "Pengaruh Terapi Bekam Terhadap Penurunan Tekanan Darah Pada Klien Hipertensi," *J. Ilmu Kesehat.*, vol. 1, no. 1, p. 18, 2017, doi: 10.32831/jik.v1i1.12.
- [15] Y. Risniati, A. R. Afrilia, T. W. Lestari, N. Nurhayati, and H. Siswoyo, "Pelayanan Kesehatan Tradisional Bekam: Kajian Mekanisme, Keamanan dan Manfaat," *J. Penelit. dan Pengemb. Pelayanan Kesehat.*, vol. 3, no. 3, pp. 212–225, 2020, doi: 10.22435/jpppk.v3i3.2658.
- [16] L. Wati, Nurhusna, and I. Mawarti, "Pengaruh terapi murottal Al-Quran terhadap tingkat kecemasan pasien pre angiografi koroner," *Fakt. Penyebab Stres Pada Tenaga Kesehat. Dan Masy. Pada Saat Pandemicovid-19*, vol. 1, no. 1, pp. 35–45, 2020.
- [17] A. R. Suwardi and D. A. Rahayu, "Efektifitas Terapi Murottal Terhadap Penurunan Tingkat Nyeri Pada Pasien Kanker," *J. Keperawatan Jiwa*, vol. 7, no. 1, p. 27, 2019, doi: 10.26714/jkj.7.1.2019.27-32.
- [18] I. N. Bahrir and S. Komariah, "Pengaruh Terapi Murottal Al-Qur'an Terhadap Stres Pada Lansia," *J. Keperawatan Prof.*, vol. 8, no. 1, pp. 17–25, 2020, doi: 10.33650/jkp.v8i1.1017.
- [19] M. N. Sibiya, L. Maharaj, and R. Bhagwan, "Perceptions of professional nurses towards complementary and alternative modalities (CAM) in the uMgungundlovu District, KwaZulu-Natal," *Int. J. Africa Nurs. Sci.*, vol. 7, pp. 18–23, 2017, doi: 10.1016/j.ijans.2017.06.001.
- [20] M. Kavurmaci, M. Tan, and Z. Kavurmaci, "Nursing, Midwifery, and Dietetics Students' Attitudes to Complementary and Integrative Medicine and their Applications," *Med. J. Bakirkoy*, vol. 14, no. 3, pp. 300–306, 2018, doi: 10.5350/BTDMJB.20170606124143.
- [21] E. Supriatna, "Wabah Corona Virus Disease (Covid 19) Dalam Pandangan Islam," *SALAM J. Sos. dan Budaya Syar-i*, vol. 7, no. 6, 2020, doi: 10.15408/sjsbs.v7i6.15247.
- [22] M. P. Aust, "Complementary and Alternative Therapies in Nursing, 7th edition," *Critical Care Nurse*,

vol. 34, no. 1, pp. 76–76, 2014, doi: 10.4037/ccn2014754.

- [23] S. Demirag, “Traditional and Complementary Medicine: Where are we?,” *J. Phys. Fitness, Med. Treat. Sport.*, vol. 6, no. 3, pp. 14–15, 2019, doi: 10.19080/jpfmts.2018.05.555690.