A Study on Applying the Qur'anic Persuasive and Intimidation Approach during Patient Consultation Sessions Conducted by Medical Experts and Lecturers at the Faculty of Medicine, Sultan Zainal Abidin University

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Abstract: *Persuasion and intimidation is a set of communication method used by a communicator to gain people's trust and influence so that their behavior and actions conform to the communicator's desired outcomes. However, in delivering their message, some communicators do not apply this method effectively. The objective of this research is to analyse the extent in which the aforementioned method is applied by medical specialists and lecturers at the Faculty of Medicine, Sultan Zainal Abidin University (UniSZA) during patient consultation sessions. This research has drawn on the persuasive and intimidation method as found in the Qur'an. Fifty medical specialists were involved in the study and a Likert-scale questionnaire, consisting of 20 items, was used as research instrument. Data was analysed using SPSS software. The overall findings show a moderate use of the persuasive and intimidation method. It is hoped that this study has contributed significantly towards encouraging the use of effective communication method among consultants.*

Keywords: *persuasive, intimidation, communication, language, medicine.*

1. Introduction

Patient education is an important responsibility of health professionals. It must be based on theories, research findings, and on skills that are learned and practised (Barbara, 2007). Persuasion and intimidation are two elements in *al-Balaghah* (the science of eloquence and rhetoric) that function as techniques of communication. Persuasion can be used to console and pacify (Maydani, 1980). According to Nahlawi, 2005 revealed that persuasion is the act of causing people to do or believe something, and should be done with love, warmth, and politeness. It stimulates one to react positively, and prevents one from doing anything harmful. The use of persuasion techniques in the Quran inhibits readers from committing wrongdoings. It is a doctor's job to deliver bad news or give warnings to their patients (Nelson, 2000). Giving warnings or intimidating means frightening or threatening people, to stop them from harming themselves further (Nahlawi, 2005). Intimidation is used to make individuals more alert so that they do not do anything that is harmful.

Following the above explanation and discussion, this study expects that spiritual elements are rarely used by medical practitioners in modern medicine, even though they are described in the Quran. Issues pertaining to spirituality and modern medicine are often discussed, but the combination of the two has yet to be effectively utilised. Ironically, the Quran is a comprehensive source of reference for the treatment of diseases in humans. The concepts of *Targhib wa Tarhib* (persuasion and intimidation) are rarely used in medical consultations due to the fact that medical practitioners are not exposed to them and are not encouraged to use them, even though treating patients includes giving them spiritual guidance. Thus, this study conducted to identify and develop a new instrument by using the elements of *Targhib wa Tarhib* that focuses on the use of reward and punishment to instil positive characteristics in individuals.

2. Methods

The research design of this study is quantitative analysis. The primary data would be collected by distributing questionnaire to 50 respondents that is medical experts. Descriptive and inferential statistics would be used to analyse the data. It is performed by using a statistical software namely Statistical Package for Social Science –

SPSS 23. Factor analysis – Exploratory factor would be used to identify the factor structure from items that have been developed.

3. Discussion and Findings

3.1. Descriptive Statistics

TABLE 1: Demography Profile

Demography	Category	Frequency	Percent
Gender	Male	28	56.0
	Female	22	44.0
Age	30 - 39 Years	15	30.0
	40 - 49 Years	21	42.0
	50 Years and above	14	28.0
Post	Local Specialist	35	70.0
	Expatriate Specialist	15	30.0
Expertise	Internal Medicine	7	14.0
	Emergency Medicine	4	8.0
	Psychiatry Medicine	4	8.0
	Anesthesiology	2	4.0
	Ophthalmology	2	4.0
	Radiology	3	6.0
	Pediatric	4	8.0
	ENT	4	8.0
	Orthopedics	4	8.0
	Surgery	4	8.0
	Family Medicine	3	6.0
	Public Health	5	10.0
	Work Health	2	4.0
	Obstetrics and Gynecology	1	2.0
	Forensic Medicine	1	2.0
How long have you been working in this medical field	1 - 4 Years	3	6.0
	5 - 9 Years	13	26.0
	10 - 19 Years	20	40.0
	20 Years and above	14	28.0

Table 1 shows the distribution of respondent or demography profile. It is compiled with Gender, Age, Post, Expertise, and Experience. Based on the above table, it can be seen that the majority of the respondents that participated in this research are male with 28 respondents or 56.0 percent. Further, it is followed by female with 22 respondents or 44.0 percent. Then, by age group of respondents, this study found that the majority of the respondents are ranged 40 - 49 years with 21 respondents or 42.0 percent. Next, it is followed by the respondents 30 - 39 years with 15 respondents or 30.0 percent. Lastly, for the respondents 50 years and above are at 28.0 percent or 14 respondents. Further, the majority of respondents are Local Specialist with 35 respondents or 70.0 percent and followed by Expatriate Specialist with 15 respondents or 30.0 percent. For the expertise participation, data was collected from 15-expertise fields. The majority of the respondents are from Internal Medicine with 7 respondents or 14.0 percent and Public Health with 5 respondents or 10.0 percent. Finally, for working experience in the medical field, we found that the majority of the respondents numbered at 20 or 40.0

percent have experience between 10 - 19 years. Next, it is followed by the respondents that have experience between 5 - 9 years and 20 years and above which numbers 14 or 28.0 respectively.

3.2. Factor Analysis

Factor analysis is a technique used to identify factors that could explain the correlation between the observed elements. It is divided into two, namely exploratory and confirmatory factor analysis. In this study exploratory factor analysis was used to identify the factor structure.

3.2.1. Factor analysis EFA for Persuasive

Before embarking on factor structure, the measure-sampling adequacy should be tested. It is intended to test the appropriateness of data.

TABLE 2: Measure Sampling Adequacy

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		0.642
Bartlett's Test of Sphericity	Approx. Chi-Square	147.741
	df	45
	Sig.	0.000

Following Table 2 above, this study found that the Kaiser-Meyer-Olkin Measure of Sampling Adequacy is 0.642. It indicates that the data are adequate or appropriate. Further, as mentioned above, in Table 3 below, the factor structure is presented.

TABLE 3: Rotated Component Matrix for Persuasive Method

Indicator/ Item	Component		Extraction Method: Principal Component Analysis. Rotation Method: Varimax with Kaiser Normalization. Rotation converged in 3 iterations.
	Intrapersonal	Interpersonal	
PSF1	0.829		
PSF3	0.793		
PSF5	0.771		
PSF7	0.738		
PSF4	0.604		
PSF9		0.766	
PSF10		0.638	
PSF8		0.603	
PSF2		0.584	
PSF6			

The result of the component matrix in the table above is obtained by using the loading factor value cut off which is 0.50. We found that there are two components or dimensions under persuasive method. It would be named after discussion. We found the item code PSF6 does not have a loading factor. It shows that the characteristic of this item does not represent this variable. Having that, based on the explanation and result of factor analysis testing above, further, we conducted the reliability scale test to ensure the scale or measurement used in this study is reliable.

3.2.2. Reliability Test for Persuasive Method

Reliability is important to determine whether or not the scale of item is reliable. This study uses traditional method to test reliability scale of item, namely Cronbach Alpha.

TABLE 4: Reliability Test for Persuasive Method

Reliability Statistics	
Cronbach's Alpha	N of Items
0.715	10

Based on the result of analysis, this study found the value of Cronbach Alpha is 0.715 based on 10 items. However, item PSF6 should be removed from the persuasive variable. Thus, we are presenting a total statistics test to validate that item PSF6 is not valid.

TABLE 5: Item-Total Statistics for Persuasive Method

Code	Indicator/ Item	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
PSF1	I convince the patient about having a life of peace and serenity if the patient's condition improves.	0.525	0.669
PSF2	I inspire the patient about having physical beauty if the patient's condition improves.	0.495	0.677
PSF3	I restore the patient's confidence by letting the patient feel adored if the patient's condition improves.	0.513	0.670
PSF4	I inspire the patient about receiving family and friends' love and care if the patient's condition improves.	0.516	0.678
PSF5	I inspire the patient about the joy of living if the patient's condition improves.	0.408	0.687
PSF6	I inspire the patient by talking about material possessions such as having a big car, a big house, fine clothes, wealth, and fine food if the patient's condition improves.	0.040	0.753
PSF7	I restore the patient's confidence by talking about beauty and refinement if the patient's condition improves.	0.644	0.637
PSF8	I inspire the patient by talking about having a successful and intimate husband-wife relationship if the patient's condition improves.	0.387	0.691
PSF9	I restore the patient's confidence by talking about having everlasting health if the patient's condition improves.	0.118	0.743
PSF10	I restore the patient's confidence by talking about everlasting happiness if the patient's condition improves.	0.302	0.704

Table 5 above shows the validity and reliability test in statistics. Following the result of analysis, this study found PSF6 "*I inspire the patient by talking about material possessions such as having a big car, a big house, fine clothes, wealth, and fine food if the patient's condition improves*" which has a corrected total correlation less than 0.30 should be deleted (Hair et al., 2010). Further, the value of Cronbach's Alpha if the item is deleted is greater at 0.753. When compared to actual Cronbach's Alpha, the value of Cronbach's Alpha is higher if the item is deleted. This indicates the item does not need to be retained in this variable. In the next section, we decided to remove the PSF6 then the factor structure changes as in Table 6 below.

3.2.3. Factor Analysis Checking for Persuasive Method

TABLE 6: Measure Sampling adequacy

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		0.646
Bartlett's Test of Sphericity	Approx. Chi-Square	146.216
	df	36
	Sig.	0.000

After removing item PSF6, this study found the value of Kaiser-Meyer-Olkin Measure of Sampling Adequacy increases from 0.642 to 0.646. Then, the factor structure is as follows:

TABLE 7: Rotated Component Matrix for Persuasive Method

Indicator/ Item	Component		Extraction Method: Principal Component Analysis. Rotation Method: Varimax with Kaiser Normalization. Rotation converged in 3 iterations.
	Intrapersonal	Interpersonal	
PSF1	0.830		
PSF3	0.792		
PSF5	0.768		
PSF7	0.736		
PSF4	0.602		
PSF9		0.769	
PSF10		0.654	
PSF8		0.602	
PSF2		0.584	

From Table 7 above, it can be seen that the factor structure of this component is very clear. There are two components. Firstly, component 1 consists of items PSF1, PSF3, PSF4, PSF5, PSF7 and secondly, component 2 consists of PSF2, PSF8, PSF9, and PSF10. Further, the repeated test is conducted to determine the value of scale reliability.

3.2.4. Reliability Checking for Persuasive Method

TABLE 8: Reliability Test for Persuasive Method

Reliability Statistics	
Cronbach's Alpha	N of Items
0.753	9

After removing item PSF6, this study found that the reliability of scale (measurement) is increased from 0.715 to 0.753. Then, the number of item is equal to nine (9).

TABLE 9: Item-Total Statistics

Code	Indicator/ Item	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
PSF1	I convince the patient about having a life of peace and serenity if the patient's condition improves.	0.530	0.714
PSF2	I inspire the patient about having physical beauty if the patient's condition improves.	0.501	0.721
PSF3	I restore the patient's confidence by letting the patient feel adored if the patient's condition improves.	0.539	0.712
PSF4	I inspire the patient about receiving family and friends' love and care if the patient's condition improves.	0.514	0.723
PSF5	I inspire the patient about the joy of living if the patient's condition improves.	0.454	0.726
PSF7	I restore the patient's confidence by talking about beauty and refinement if the patient's condition improves.	0.648	0.687
PSF8	I inspire the patient by talking about having a successful and intimate husband-wife relationship if the patient's condition improves.	0.383	0.738
PSF9	I restore the patient's confidence by talking about having everlasting health if the patient's condition improves.	0.121	0.789
PSF10	I restore the patient's confidence by talking about everlasting happiness if the patient's condition improves.	0.319	0.746

Further, in Table 9 above, it can be seen that, one item has the value of corrected item-total correlation of less than 0.30. However, the items in this study are newly developed from the verse of Holy Qur'an Approach. Thus, we retained this item to perform future analysis in measuring the persuasive method. Further, in the next section, we are presenting a second variable, namely the intimidation method.

3.2.5. Factor Analysis EFA for Intimidation

TABLE 10: Measure Sampling Adequacy

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		0.739
Bartlett's Test of Sphericity	Approx. Chi-Square	246.188
	df	45
	Sig.	0.000

Similar to persuasive method, this method should be tested for appropriateness of data. Following Table 10 above, this study found the value of Kaiser-Meyer-Olkin Measure of Sampling Adequacy to be 0.739. It indicates the data in this study is appropriate or adequate to conduct factor analysis. Having that, in Table 11 below, the Rotated Component Matrix for Intimidation Method is presented.

TABLE 11: Rotated Component Matrix for Intimidation Method

Indicator/ Item	Component		Extraction Method: Principal Component Analysis. Rotation Method: Varimax with Kaiser Normalization. Rotation converged in 3 iterations.
	Intrapersonal	Interpersonal	
INT9	0.864		
INT10	0.822		
INT7	0.791		
INT5	0.676		
INT2	0.646		
INT1	0.342		
INT8		0.887	
INT6		0.856	
INT4		0.738	
INT3		0.678	

From Table 11 above, it can be seen that the factor structure of this component is very clear. There are two components. Firstly, component 1 consists of item INT1, INT2, INT5, INT7, INT9, INT10 and secondly, component 2 comprises items INT3, INT4, INT6, and INT8. From the two components or dimensions found, we would be naming for these dimension later. Further, the repeated test is conducted to determine the value of scale reliability.

3.2.6. Reliability Test for Intimidation Method

TABLE 12: Reliability Test for Intimidation Method

Reliability Statistics	
Cronbach's Alpha	N of Items
0.859	10

Similar to the persuasive method, this variable "intimidation method" would also be subjected to a test of scale reliability. Based on the result of analysis, the value of Cronbach's Alpha obtained in this study is 0.859 based on 10 items. It shows that the scale or measurement is reliable.

TABLE 13: Item-Total Statistics for Intimidation Method

Code	Indicator/ Item	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
INT1	I intimidate the patient by talking about the possibility of hardship if the patient's condition does not improve.	0.345	0.862
INT2	I intimidate the patient by talking about physical unsightliness and unpleasantness if the patient's condition does not improve.	0.605	0.842
INT3	I intimidate the patient by talking about having negative relationship with loved ones if the patient's condition does not improve.	0.692	0.833
INT4	I intimidate the patient by talking about being disrespected if the patient's condition does not improve.	0.565	0.845
INT5	I intimidate the patient by talking about feeling remorseful if the patient's condition worsens.	0.676	0.835
INT6	I intimidate the patient by talking about the possibility of poverty such as not being able to afford a car and not being able to have fine food if the patient's condition worsens.	0.490	0.852
INT7	I intimidate the patient by talking about the possibility of deformity or physical unsightliness if the patient's condition worsens.	0.377	0.859
INT8	I intimidate the patient by talking about the possibility of having a poor husband-wife intimate relationship if the patient's condition deteriorates.	0.584	0.844
INT9	I intimidate the patient about the possibility of everlasting pain for the patient if the patient's condition deteriorates.	0.679	0.836
INT10	I intimidate the patient by talking about the possibility of everlasting hardship of life if the patient's condition deteriorates.	0.622	0.841

Table 13 above shows the validity and reliability test in statistics. Following the result of analysis, this study found INT1 "*I intimidate the patient by talking about the possibility of hardship if the patient's condition does not improve*" which has a corrected total correlation greater than 0.30 should be deleted (Hair et al., 2010). Further, the value of Cronbach's Alpha if the item is deleted is greater at 0.862. When compared to actual Cronbach's Alpha, the value of Cronbach's Alpha if the item is deleted is higher than the actual Cronbach's Alpha. However, the items in this study are newly developed from the verse of Holy Qur'an by using several Approaches.

4. Conclusion

This study has successfully developed a new instrument to measure the persuasion and intimidation technique that can be used by medical experts during patient's consultation. There are 19 instruments which are divided into two variables, namely persuasion and intimidation. This study finds that there is one instrument that should be dropped from the variable persuasion because its validity of instrument is low. It is less than the value suggested by the experts. Hair et al., 2010 stated that the instrument can be categorised as valid when the value of corrected to total correlation is greater than 0.30. However, this study develops a new instrument. Thus, future research can be carried out to further improve our instrument to enable it to conduct factor analysis – Confirmatory Factor Analysis. Besides, there are interesting findings from this

study where the variable persuasion and intimidation have two same constructs respectively, they are intrapersonal and interpersonal.

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6. References

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