

Healing through Ruqyah and Academic Achievement of Children in Muslim Community

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Abstract

Background: Ruqyah, an Islamic alternative healing practice, involves treating illnesses using Quranic verses and invocations, focusing on the names and attributes of Allah. The literature on the academic performance of Muslim children in Nepal and the use of Ruqyah is limited and requires further exploration. This study aimed to identify the use and practice of Ruqyah in healing children within the Muslim community and assess their academic achievement.

Methods: This study explored the issue among the seven participants of four families from Muslim community who undergo Ruqyah often via a descriptive phenomenological method that included in-depth interviews. Three themes emerged from the interview data which offered insight into the Muslim community.

Results: Parents found the use of Ruqyah and children's academic achievements reasonable. Muslims respect the Holy Quran as the word of God, using it as guidance for Ruqyah and their children, as they believed it was the right choice. The study found that the family preferences dictated whether to take it immediately or only when needed. Children who followed Ruqyah

and supplemented it with modern medications improved health patterns and their academic success.

Conclusion: Children who undergo Ruqyah are influenced by their parents' religious knowledge, educational level, and socio-economic background, and are academically prepared. Medications are used, with parents believing that aligning with Ruqyah improves their children's academic performance.

Novelty: The study could lead to new therapeutic research directions for the Muslim communities in Nepal, assisting children in coping with illnesses and improving their academic outcomes.

Keywords: Academic achievement, children, healing, Muslim community, Ruqyah

Introduction

Ruqyah is the practice of treating illnesses through Quranic verses, and invocations prescribed by the Messenger of Allah. By reading verses of the Quran, the names and attributes of Allah, or by using the prayers in Arabic or in a language the meaning of which is understood and used as a method of treatment is popular among the Islamic alternative healing practitioners ([Ahmad et al., 2016](#)). It is a means of cure for evil eye, magic, jinn and physical ailments or illness ([Ummah Welfare Trust, 2022](#)). It is a healing method based on the Quran and had it through the recitation of the Quran, seeking of refuge, remembrance and supplication that is used as a means of treating sickness and other problems. This method of Ruqyah is based on the recommendations and practices carried out by the Prophet peace and blessings be upon him (PBUH) for self-treatment or to help his *Sahabah* and others ([Ahmad et al., 2016](#)).

There are several religious traditions in the world with a combination of believers in faith and non-believers in faith that are distinguished by an emphasis on healing. The multifaceted need for healing of body and mind, soul and spirit, of personal and social interactions, of political and ecological dimensions in our damaged world is a major focus of religious expectations in the twenty-first century ([Bandy et al., 2008](#)). As the World Health Organization (WHO) has prescribed profound practices, for example, supplication and religious practice as another mediation to make wellbeing and healthy, it is known that the religion is the focal point of the most profound sense of being and demonstrating that insists faith in *Allah Subhana Wa Ta'ala* (SWT) makes a basic commitment to the physical health ([Akhmad, 2017](#)).

WHO (2014) (as cited in [Al-Karam, 2015](#)) illustrates that maintaining health and treating, diagnosing, and preventing illness require a variety of health practices and approaches, as well as knowledge and beliefs that include medicines derived from plants, animals, and/or minerals, spiritual therapies, manual techniques, and exercises that can be used alone or in combination ([Bandy et al., 2008](#)). Unexpectedly, family caregiving is becoming more and more common in current times. Taking care of a child who has a condition is a family endeavor; as a result, the frequency of hospital stays and the prevalence of chronic illness are rising ([Cardinali et al., 2019](#)).

There has been studies showing how such practices are emerging and studies are being conducted to check on their efficacies. The very fact that the complementary and alternative medicine is not only preferred by Malaysians but has also gained worldwide popularity ([Koo et al., 2020](#)). An exploratory sequential mixed-method study for Muslim students in a Midwestern state of US was conducted to determine how their experiences related to their academic achievement, aspirations for their education, and psychological adjustments as a result of adhering to their Islamic beliefs. The study's findings described the study's sample as effectively coping with the academic achievement context in the school ([Oberoi & Trickett, 2018](#)).

Nepal being a secular country at present, includes a wide variety of religious people. Muslims are also one of the major religions of Nepal. The 2001 Census of Nepal states the national literacy rate of 53.7% where the literacy rate of Muslims was 34.72%, which was far below the national literacy rate ([Parwez et al., 2004](#)). Similarly, the 2021 Census of Nepal shows a rise in the national literacy rate to 76.2% ([National Statistics Office, 2023](#)). There are major ten religions found in the 2021 census of Nepal, Islam is the third largest religion accounting for 5.1% of the total population, which was 4.4% in 2011 census ([National Statistics Office, 2023](#)). The total population of Muslims living in Kathmandu Metropolitan City during 2021 census was 2.2% ([National Statistics Office, 2023](#)).

Nepal lacks a comparable study, prompting a global study to address the limited academic achievement of Muslim children. These same gaps are what have drawn us to this strange, fascinating, and timely issue at a time when many healing modalities associated with religion, such as yoga, meditation, acupuncture, cupping, and so on, are enhancing contemporary medicine. Therefore, this paper attempted to study how Ruqyah was used by the participants in improving the academic achievement of their children.

Research Objective

The purpose of this study was to identify the use and practice of Ruqyah in healing children among the Muslim community, and to find out the academic achievement of children of the Muslim community those who undergo Ruqyah.

Methods

Research Design

We used a descriptive phenomenological method to investigate the academic achievement among the children of Muslim community who undergo healing practice through Ruqyah. Phenomenological research is a type of qualitative study that seeks to comprehend people's beliefs, actions, attitudes, and experiences by delving deeper into their lived experiences ([Proofed, 2022](#)). The use of Ruqyah has been a phenomenon that the Muslim families resort to at most times of illnesses and evil eye. The first author went through in-depth interviews of participants and got to explore their narratives in the language they were comfortable.

Sampling

The primary purpose of sampling in this study was the selection of suitable populations (or 'elements') ([Jahja et al., 2021](#)) so that the focus of the study can be appropriately researched.

Therefore, the sampling in this study was done as purposive ([Business Research Methodology, 2023](#); [Parker et al., 2019](#)) with a relatively small sample size of seven participants from four Muslim families in Kathmandu Metropolitan City. Although modern practices have overturned the century old norms in the Muslim families, we found some of them. The first author approached to four families and met two mothers, one grandmother and one father as the participants of this study. In order to get the validity for triangulation, we additionally interviewed two children and one Islamic religious scholar. The reason for the smaller sample size was that qualitative research methods, which are frequently focused on meaning (and heterogeneities in meaning) and obtaining a thorough understanding of a phenomenon, are frequently concerned with the how and why of a given issue, process, situation, subculture, scene, or set of social interactions ([Dworkin, 2012](#)).

Data Collection Tools and Procedures

Interviews were used to explore the views, experiences, beliefs and motivations of individual participants ([Gill et al., 2008](#)). We used in depth-interview schedule. This tool was semi-structured and was used a guide to explore the phenomenon. However, the number and the type of questions varied as per the need during the information collection. The first author used the tool for the demographic information collection as it would help to build a rapport and settling time for the main interview. It included the face-to-face interviews with the families.

Analysis Procedures

The information collected was transcribed manually ([Bailey, 2008](#)) after a rigorous discussion with the supervisor. The process of analyzing information through coding involved three steps ([Stuckey, 2015](#)): reading through data, creating a storyline, categorizing data into codes, and using memos for clarification and interpretation. The transcribed information was coded using the MS Word and Themes generated manually. After then, the data was thematically examined ([Ryan & Bernard, 2003](#)) to determine the key issues that were crucial to the investigation.

Validity and Credibility

Validity was maintained using expert suggestions, members check (content validity), and triangulation (Children, Mothers, Religious Scholar). Research validity, respondent validity, use of constant comparison ([Anderson, 2010](#)) were applied. Trustworthiness was achieved by credibility, authenticity, transferability, dependability, and conformability in qualitative research ([University of Miami School of Education and Human Development, 2020](#); [Whittemore et al., 2001](#)). The credibility was accomplished by establishing the following techniques:

Member checks: This involved having the participants review and confirm the accuracy or inaccuracy of the interview transcript. Participants were emailed or handed over their interview transcript and asked them if they wanted to make any changes in it.

Peer debriefing: This involved giving our work for review to our supervisor. It included the reviewing and evaluating the accuracy of the findings, interpretations and conclusions.

Triangulation of the data: The study involved interviewing an Islamic Religious scholar to confirm Ruqyah methods in families and their academic performance of children visiting mosques, as well as examining their understanding of the process and their academic results.

Ethical Considerations

We were responsible for protecting human subjects' life, health, dignity, integrity, self-determination, privacy, and confidentiality of their personal information, adhering to three ethical principles ([Adhikari et al., 2023](#); [Yip et al., 2016](#)): respect for persons, beneficence, and justice on an individual and societal level. In this study, the informed verbal consent was taken formally from the participants and the information sort was kept into confidentiality, if sought by the participants, and relevant recordings with prior information and consent were taken. The consent form was handed over to the participants before the interview. The interview was conducted in the language participants felt comfortable with. The entire research process ensured a no harm policy to the participants.

The study adhered to ethical considerations, including maintaining participant identity and avoiding self-identifying statements ([Fleming & Zegwaard, 2018](#)). It also followed [Mohd Arifin's \(2018\)](#) guidelines for ethical considerations, including privacy-preserving data transcribing, informed consent, accommodating cultural norms, and allowing participants to seek permission from their guardians before interviews ([Fleming & Zegwaard, 2018](#); [Mohd Arifin, 2018](#)). Participants chose their preferred language, such as mother-tongue or another comfortable second language, and ensured adequate time for consent before the interviews. This approach ensured a respectful environment for the participants.

We also valued that the qualitative researchers should be aware of potential harm that can be imposed to the participants especially when dealing with vulnerable group of people. Therefore, the participant's rights to confidentiality was thoroughly respected and protected their privacy by ensuring anonymity, preventing linking participant's responses to their identity, avoiding collecting or disseminating data without the participant's knowledge nor using it for any other purpose than the intent, and ensuring that the disclosed information would not harm the dignity, privacy, or safety of the participants. Additionally, we reported honestly, used appropriate language throughout the research, and neither did we hurt any religious sentiments.

Results

In this study, demographic information collected from the participants were the age of the participant's, marital status, educational level, and employment status. Three themes emerged during in-depth sessions of interview and thorough analyzing of the information: physical wellbeing of children, remedies for treating illnesses, and academic achievements. The seven subthemes that emerged were: good health of children, illnesses in children, Ruqyah that parents read for their children, preferred home remedies, side-by-side use of pharmacological remedy, performance of children in exams and classes, and regularity or punctuality of children.

Physical Wellbeing of Children

Part of this study included about the physical wellbeing of the children, where parents were asked several questions related to their children falling sick and what kind of sickness/ illnesses did they suffer from.

Good Health of Children

Most of the participants were glad that their children did not fall sick frequently or did not suffer from serious illnesses that required hospitalization but only occasionally out-patient-department (OPD) visits to the doctor were to be made.

“My children don’t fall sick, Alhumdolillah!” (Participant 1).

“Alhumdolillah all three kids are good and healthy.” (Participant 3).

“My children are completely fine.” (Participant 4).

All the parents were well aware that their children were at good health most of the times except for few bouts of sick feel. Parents felt that their children were mostly fine throughout the year due to the grace of Allah.

Illnesses in Children

All the parents usually did not count to illnesses like flu, cough, and fever as illness unless it was reiterated to them about it during the interview. While the interview, all of the parents did acknowledge that their children do catch up with fever, cough, cold, flu, vomiting, stomach aches and pain in the eyes at seasonal variations.

“My children often felt sick. One of my children suffered from bronchitis at birth and was admitted in the Nursery for a week, later the child even caught up with pneumonia. My other child too had typhoid and later diagnosed with Kawasaki Disease. My children were both very sick until the age of five years.” (Participant 2).

“My child had few anxiety attacks later when she reached Class 10.” (Participant 2).

“My second child suffered from typhoid, we had to hospitalize her for that and I was really in a panic state then.” (Participant 3).

Parents did acknowledge illnesses as a major issue if their children required a hospital stay. Illnesses like common cold, flu, fever, cough, vomiting were generally treated at home and these events did not bother the parents about the wellbeing of their children. Illnesses that erupted during the interview like bronchitis, pneumonia, and typhoid and Kawasaki disease did spark attention of both the parents and the researchers while the first author talked to them.

Remedies for Treating Illnesses

The study's first author, a Muslim woman who primarily interviewed mothers and one father, provided valuable insights into parental perspectives and the differences between mothers and fathers in their parenting approaches, though not to a great extent. After getting to know of the illnesses which caught parents' attention and which did not much bother them, the first author went on to talk about how did they deal in each situation. This did lead us to further three sub-themes namely: Ruqyah that parents read for their children, preferred home remedies, and side-by-side use of pharmacological remedy.

Ruqyah that Parents Read for their Children

As the children encountered any sort of sicknesses, the parents often prayed for their children. All of our participants did recite verses of the Quran on their children while they were ill, be it minor or major illnesses requiring hospitalization. Most of them in their interview revealed that they firstly did Ruqyah and the second step was to look around for other treatments.

“When my children fall sick, usually my mummy reads duas and blows on them. My children do get better after the Ruqyah.” (Participant 1).

“I usually give them the Zamzam water and say Bismillah and have faith in it. I even give Sadaqa for my children.” (Participant 2).

“Firstly when my children fall sick, I read Surah Fatiha, the two Quls and the last two verse of Surah Baqarah, and it really helps a lot and you need to have complete reliance only then it works. It helps a lot.” (Participant 3).

“Yeah, I do recite duas and my wife does it. I usually go for the treatment first-hand.” (Participant 4).

The holy Quran states where Allah SWT tells, “We send down the Quran as a healing and mercy for the believers, but it only increases the wrongdoers in loss ([Surah Al-Isra - 82, 2023](#)), and in another verse, “And he ‘alone’ heals me when I am sick” ([Surah Ash-Shu'ara - 80-90, 2023](#)), which are the basis for the Muslim community to take resort to Ruqyah for healing illnesses.

Preferred Home Remedies

Home treatment or remedy is a practice that enables the patient to be treated outside hospital and remain in their usual place of residence ([Burns et al., 2001](#)). In the study various home remedies for illnesses did come forth where parents resorted to home remedies for curing the illnesses of their children, for e.g., giving warm water, *jeera* (cumin seed) water, glucose water, and lemon water.

Side-by-Side Use of Pharmacological Remedy

The parents usually talked about giving their children some home remedies as well as the counter medications like DeCold, Flexon, etc. Some of them also usually provide antibiotics to their children when they fell sick of tonsillitis, or cough, and fever (for e.g., participant 4). Similarly, the participants also did not hesitate to immunize their children against government acclaimed vaccinations.

“We have immunized our children with all the recommended vaccinations.” (Participant 4).

They usually went to the local pharmacy to get the medications for their children for the illnesses. When asked whether they visited the doctors, they affirmed it if the problem prolonged and was serious. One of the participants had to take their children to the hospital for regular checkups due to the Kawasaki disease. Both their children used to fall sick until the age of five and they had to hospitalize both of them (for e.g., participant 2).

Academic Achievements

The other part of our study was about the children’s academics, which we could get to know through in-depth interviews. All the parents were educated at different levels and they were well aware of their children’s academic progress and performances. They even gave an impression of being concerned of their children’s exam results. The discussion of the children’s academics lead to two sub themes: performance of children in exams and classes, and regularity or punctuality of children.

Performance of Children in Exams and Classes

The study examined the academic achievements of children who underwent Ruqyah, revealing a range from good to moderate. Parents were aware of their children's progress and attributed their struggles to factors such as irregular study timings and extra focus on subjects like Math and Nepali. Most children were regular to school, except for severe illness or hospitalization. Parents believed in the impact of health state on academic achievement of their children. Therefore, they promptly used Ruqyah at home when their children are ill. The parents were found quite concerned of their children's performances. They even recalled the last scored percentage of their children. In addition to this, some parents talked about how their children could do better in their examinations further on.

"She usually does well but this time she didn't do well in Math and Nepali." (Participant 1).

"Both my children always were good at studies, my daughter always got praises from her teachers in all three schools that she studied in. She never let me down. Just in her second last term due to her anxiety she did not do well." (Participant 2).

"I don't remember the percentage that they scored in the last exam but I know they all passed in their exams." (Participant 3).

"They have done quite well. My elder one got around 90 percent in the last exam and the younger one scored an 87 percent." (Participant 4).

All the participants illustrated that their children were good in studies and results as well. The parents in their in-depth interview were well aware of their children's last scored percentage if not approximation to the achieved score. They were also conscious about their children needing attention in particular subjects. They were even admitting to giving less time to their children and the children only focused in doing home works.

Regularity or Punctuality of Children

All the children of the participants were regular to the schools. The participants did acknowledge that their children missed their classes while they fell sick or otherwise any function at home kept them absent from school.

"My children are regular to school and they miss school sometimes due to illness or functions." (Participant 1).

"They missed school while they were hospitalized else, they were both very regular to school." (Participant 2).

"If they are very seriously ill, they miss the school otherwise they go regularly." (Participant 3).

This shows that the regularity in school when the children were at good health was a key factor for their good academic achievements.

Discussion

Children's physical health and wellbeing development is shaped by both hereditary and environmental factors. A strong sense of physical and psychological wellbeing enables children to confidently and optimistically engage and respond to others and the environment around

them. Healthy lifestyles that balance sound nutrition, physical activity, personal safety and rest also underpin the development of children's physical wellbeing ([Early Learning Pathways, Early Childhood Education, 2015](#)). During interviews, all parents ensured their children stay fit by incorporating school activities and playing games. This physical wellbeing helps prevent illnesses, as most children did not require hospitalization, suggesting that children's overall health is crucial for their overall well-being. Overall during the interview few children were present in the setting and they were confident and engaging which too mirrored a good sense of physical wellbeing.

The children under the age of 5 are extremely vulnerable to infectious diseases like malaria, pneumonia, HIV and tuberculosis and as of the older children the non-communicable diseases, injuries and conflict posed threats were significant ([UNICEF, 2023](#)). Relating from the interviews to the children retrospectively had similar diseases like typhoid, pneumonia and bronchitis and for when they grew up the children did not much catch up except for common cold and so forth. Therefore, drawing back from the in-depths interviews of all the parents, we got the insight that children after the age of 5 had better immunity and fell less sick and the sickness that occurred were more inclined to the seasonal variation apart from few exceptions of having one of the rarest disease, Kawasaki disease, and few anxiety issues at a later age ([UNICEF, 2023](#)).

Ruqyah is one of the mind-body interventions among complementary and alternative medicine therapies, a healing method based on the Quran and hadith through the recitation of the Quran, seeking of refuge, remembrance, and *dua* (supplication) that is used as a means of treating sickness and other problems, by reading *ayats* of the Quran, the names and attributes of Allah, or by using the *duas* in Arabic or in an understandable language ([Caksen, 2023](#)). It is a popular method of Islamic medicine among Muslims who seek alternative or complementary medicine for their illness or disorder ([Septadina & Parisa, 2021](#)). It is used, as a Traditional and Complementary Medicine, a role in relieving the pressure on the mainstream health system especially it did in the time of pandemic which was seen in the case study of a UK residing, Malay, for the serious eczema ([Rahman & Hussin, 2021](#)). In the case study of [Septadina and Parisa \(2021\)](#), a patient with the worsening cluster headache who was on morphine was doing better after he took the complementary therapy of Ruqyah, illustrating the fact that supplementing medicine with Ruqyah can bring many benefits in the Muslim Community.

According to [Caksen \(2023\)](#), patients with cancer in combination with medical treatment benefit from Ruqyah practices. There is improvement in the emotional and physical well-being, relax, cope with the disease, accelerate the healing process, increase the duration of life, improve sleep quality, decrease pain and stress, reduce side effects associated with treatment, and to be self-sufficient. As it is a complementary method for modern cancer treatment and isn't a replacement to the mainstream treatment of cancer. Patients can perform Ruqyah by themselves without applying to the Muslim Faith Healers or spiritual healing centers. It can be used by everyone regardless of their religion and belief. The participants in this study resembled a strong sense of belief in Ruqyah, and did apply this to their children. However, they also used home remedies and medical aids when needed.

Home Remedies have been underrated due to its lack of scientific studies performed on them. In a research based on benefits of Omega 3 fatty acid from fish and fish oil to protect against coronary heart disease, there was evidence to support the use of the oil supplements and unravelling the mechanism how it does would identify the novel therapeutic targets and guide future treatments for heart disease ([Din et al., 2004](#)).

In a cross-sectional survey study conducted by [Parisius et al. \(2014\)](#), a nearly 80% of patients visiting the general practitioners in various parts of Germany used home remedies, on average of 22 different home remedies were used per person, like steam-inhalation, hot lemon drink, honey, chamomile tea, and chicken soup. While all of them tried the home remedies before opting for the pharmaceutical options ([Parisius et al., 2014](#)). Similarly, [Oshikoya et al. \(2007\)](#) in their study of family self-medication for children in Nigeria found that 60% of the mothers sought hospital care and 43% went on for self-medication for their children and used medications namely Cough admixtures, ascorbic acid, paracetamol, vitamin B complex, antibiotics, gripe water, ORS, ibuprofen, etc. In this study too, the parents felt that their children felt better after the Ruqyah while adopting to the medicines side-by-side. All of them did their recitations of Ruqyah by themselves from the Quranic verses. In light to that, even in this study home remedies have been a mainstay of treatment unless things further worsen leading to a doctor's visit. Definitely human body is made of largely of water and has infinite minerals which are present in different forms in the nature. These can be found in various foods and can help in the homeostasis of the body. The use of medications must be kept at watch as they can be exaggeration of these medicines without the doctor's prescription ([Oshikoya et al., 2007](#)).

Religious beliefs and practices do have an impact on children's academic performance. The study reveals that children from Muslim families who practice Ruqyah excel in studies and attend schools, but the rest of Nepal, where Muslims are the third largest religion, still struggles to provide a quality education for their children. In a study conducted in three highly Muslim-populated districts: Banke, Mahottari and Rautahat of Nepal on the school aged children (6-10 years), only 41.22 were studying in Madrassa and 18.06% of it were studying in main stream (government and private schools), and 40.18% of them were out of schools ([Parwez et al., 2004](#)). Academic achievement of children has parental involvement as to be a key factor ([Lara & Saracostti, 2019](#)). Children's school achievement is influenced by their IQ, years of schooling, type of school and parents' education ([Hossain et al., 2021](#)). The academic performance of the children in their schools are associated with low family income, higher rates of school absence and tardiness affected to be poor ([Morrissey et al., 2014](#)). The socioeconomic status is a significant predictor of academic achievement among the various predictors. In a study, the effect of socioeconomic status on Muslim and Non-Muslim adolescents' academic achievement in the Aligarh district of Uttar Pradesh, India found that the socioeconomic status had a significant effect on both Muslim and Non-Muslim adolescents' academic achievement ([Azeem & Sarwer, 2021](#)).

Appropriately mentioned in the study of [Sanguiliano et al. \(2019\)](#), the academic achievements among the children is linked to the strong families, strong neighborhoods and economically strong parents, tend to show up success at school than the families having spent less time with

their children at home, engaging less often at school work of their kids and unsound family capital ([Sanguiliano et al., 2019](#)). The results of the correlation analysis in a study among university students demonstrated the strong link between behavioral control and religion ([Sultan et al., 2020](#)). A study conducted in Dhankuta district of Nepal with a purpose to analyze the academic performance of grade 10 students in terms of their overall performance and its relationship with socio-demographic factors concluded that the ethnicity of students can make significant difference in student achievement whereas the gender may not ([Chapagain, 2021](#)). Therefore the religion and religious practices do affect the academic achievement of children, so did the Ruqyah in this study.

Conclusion

The research aims to fill a gap in international literature, as there are few results in Nepal in this area. The field is particularly fascinating in relation to the Muslim community. All parents from Muslim community use Ruqyah, or recite Quranic verses, to heal their children. Initially unaware, they are panic when their children are hospitalized, but later switch to supplication, which help them recover faster. This practice is evident in all Muslim parents' beliefs about the effectiveness of Ruqyah in child healing. The interviews did find out about various illnesses that children went through and how parents used *zamzam* water and even charity/*sadaqah* to get benefits. Despite the recitations of the Ruqyah, children are equally treated with medications. The parents think that the medications would work better when aligned with the Ruqyah. This is so deeply rooted that the parents believe that their children become less ill and secure good results in education due to the practice of Ruqyah. The study provides an understanding of how children who undergo Ruqyah from their parents are academically prepared. Parents' use of Ruqyah was influenced by their religious knowledge, educational level, and socio-economic background.

Author Contribution

SB carried field work, conceptualized and drafted the report. BA supervised the study, supported in literature review, conceptualized the article and corresponded for the publication procedures. AA supported technically in framing the article and editing. All authors provided final approval of the version to be published.

Conflicts of Interest

None.

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References

- Adhikari, A., Aryal, B., Devkota, S., Acharya, H., & K.C, A. (2023). The Role of NHRC in Regulating Health Research Ethics in Nepal: A Narrative Review. *Journal of Health Promotion, 11*(1), 75-85. <https://doi.org/10.3126/jhp.v11i1.61205>
- Ahmad, K., Ramli, M. A., & Rahman, N. A. A. (2016). Understanding the Use of Ruqyah (Healing Method Based on The Quran and Hadith) in the Treatment of Disease: Analysis based on Fiqh al-Hadith Al-Imam Al-Bukhari (Pemahaman Terhadap Aspek Penggunaan Ruqyah Dalam Rawatan Penyakit: Analisis Berasaskan Fiqh al-Hadith Imam Al-Bukhari). *Al-Bayan: Journal of Qur'an and Hadith Studies, 14*(2), 168-205. <https://doi.org/10.1163/22321969-12340038>
- Akhmad, S. A. (2017). The roles of prayers in Islam for treatment (healing); potencies and problems. *JKKI: Jurnal Kedokteran dan Kesehatan Indonesia, 8*(2), 78-79. <https://doi.org/10.20885/JKKI.Vol8.Iss2.art1>
- Al-Karam, C. Y. (2015). Complementary and Alternative Medicine in Psychology: An Islamic Therapy for Non-Muslims. In C. Y. Al-Karam & A. Haque (Eds.), *Mental Health and Psychological Practice in the United Arab Emirates* (pp. 169-178). Palgrave Macmillan US. https://doi.org/10.1057/9781137558237_15
- Anderson, C. (2010). Presenting and Evaluating Qualitative Research. *American Journal of Pharmaceutical Education, 74*(8), 141. <https://doi.org/10.5688/aj7408141>
- Azeem, M., & Sarwer, G. (2021). Effect of Socio-Economic status on academic achievement of muslim ad non-muslim adolescents of Aligarh District *An international Bilingual Peer Reviewed Refereed Research Journal, 8*(29), 73-79. <https://doi.org/10.13140/RG.2.2.12658.48327>
- Bailey, J. (2008). First steps in qualitative data analysis: transcribing. *Family Practice, 25*(2), 127-131. <https://doi.org/10.1093/fampra/cmn003>
- Bandy, G., Crouch, A., Haenni, C., Holley, P., Larsen, C. J., Penlington, S., Price, N., & Wilkins, C. (2008). *Building from common foundations: the World Health Organization and faith-based organizations in primary healthcare*. World Health Organization. https://iris.who.int/bitstream/handle/10665/43884/9789241596626_eng.pdf?sequence=1&isAllowed=y
- Burns, T., Knapp, M., Catty, J., Healey, A., Henderson, J., Watt, H., & Wright, C. (2001). Home treatment for mental health problems: a systematic review. *Health Technology Assessment (Winchester, England), 5*(15), 1-139. <https://doi.org/10.3310/hta5150>
- Business Research Methodology. (2023). *Purposive sampling*. *Research-methodology.net*. Retrieved July 15, 2023 from <https://research-methodology.net/sampling-in-primary-data-collection/purposive-sampling/>
- Çaksen, H. (2023). Retracted Article: Ruqyah and Its Use among Patients with Cancer. *Journal of Child Science, 13*(01), e20-e27. <https://doi.org/10.1055/s-0043-1764498>
- Cardinali, P., Migliorini, L., & Rania, N. (2019). The Caregiving Experiences of Fathers and Mothers of Children With Rare Diseases in Italy: Challenges and Social Support

- Perceptions [Original Research]. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01780>
- Chapagain, Y. (2021). School Student Academic Performance in Nepal: An Analysis Using the School Education Exam (SEE) Results. *International Journal on Studies in Education (IJonSE)*, 3(1). <https://doi.org/10.46328/ijonse.34>
- Din, J. N., Newby, D. E., & Flapan, A. D. (2004). Omega 3 fatty acids and cardiovascular disease—fishing for a natural treatment. *BMJ*, 328(7430), 30. <https://doi.org/10.1136/bmj.328.7430.30>
- Dworkin, S. L. (2012). Sample Size Policy for Qualitative Studies Using In-Depth Interviews. *Archives of Sexual Behavior*, 41(6), 1319-1320. <https://doi.org/10.1007/s10508-012-0016-6>
- Early Learning Pathways, Early Childhood Education. (2015). *Guide to physical health and wellbeing - AEDC resources for Queensland early childhood education and care services. Early childhood education and care*. Queensland Government and Early Childhood Australia. <https://earlychildhood.qld.gov.au/aboutUs/Documents/aedc-health.pdf>
- Fleming, J., & Zegwaard, K. E. (2018). Methodologies, methods and ethical considerations for conducting research in work-integrated learning. *International Journal of Work-Integrated Learning*, 19(3), 205-213. <https://files.eric.ed.gov/fulltext/EJ1196755.pdf>
- Gill, P., Stewart, K., Treasure, E., & Chadwick, B. (2008). Methods of data collection in qualitative research: interviews and focus groups. *British Dental Journal*, 204(6), 291-295. <https://doi.org/10.1038/bdj.2008.192>
- Hossain, S. J., Tofail, F., Sujana, H. M., Arifeen, S. E., & Hamadani, J. (2021). Factors associated with school achievement of children aged 8–10 years in rural Bangladesh: Findings from a post hoc analysis of a community-based study. *PLOS ONE*, 16(7), e0254693. <https://doi.org/10.1371/journal.pone.0254693>
- Jahja, A. S., Sri Ramalu, S., & Razimi, M. S. A. (2021). Generic Qualitative Research In Management Studies. *JRAK (Jurnal Riset Akuntansi dan Bisnis)*, 7(1). <https://doi.org/10.38204/jrak.v7i1.523>
- Koo, K., Nagayah, R., Begum, S., Tuan Mahmood, T. M., & Mohamed Shah, N. (2020). The use of complementary and alternative medicine in children with atopic eczema at a tertiary care centre in Malaysia. *Complementary Therapies in Medicine*, 49, 102355. <https://doi.org/10.1016/j.ctim.2020.102355>
- Lara, L., & Saracostti, M. (2019). Effect of Parental Involvement on Children's Academic Achievement in Chile [Brief Research Report]. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01464>
- Mohd Arifin, S. R. (2018). Ethical Considerations in Qualitative Study. *INTERNATIONAL JOURNAL OF CARE SCHOLARS*, 1(2), 30-33. <https://doi.org/10.31436/ijcs.v1i2.82>
- Morrissey, T. W., Hutchison, L., & Winsler, A. (2014). Family income, school attendance, and academic achievement in elementary school. *Developmental Psychology*, 50(3), 741-753. <https://doi.org/10.1037/a0033848>

- National Statistics Office. (2023). *National Population and Housing Census 2021 (National Report)*. National Statistics Office. https://censusnepal.cbs.gov.np/results/files/result-folder/National%20Report_English.pdf
- Oberoi, A. K., & Trickett, E. J. (2018). Religion in the Hallways: Academic Performance and Psychological Distress among Immigrant origin Muslim Adolescents in High Schools. *American Journal of Community Psychology*, 61(3-4), 344-357. <https://doi.org/10.1002/ajcp.12238>
- Oshikoya, K., Njokanma, O., Bello, J., & Ayorinde, E. (2007). Family self-medication for children in an urban area of Nigeria. *Paediatric and Perinatal Drug Therapy*, 8(3), 124. <https://doi.org/10.1185/146300907X199966>
- Parisius, L. M., Stock-Schröer, B., Berger, S., Hermann, K., & Joos, S. (2014). Use of home remedies: a cross-sectional survey of patients in Germany. *BMC Family Practice*, 15(1), 116. <https://doi.org/10.1186/1471-2296-15-116>
- Parker, C., Scott, S., & Geddes, A. (2019). *Snowball Sampling* <https://doi.org/10.4135/9781526421036831710>
- Parwez, H. M. Z., Rana, S., Sherpa, P., & Pande, A. (2004). Access of Muslim children to education: Phase II. *Research Center for Educational Innovation and Development*. <https://www.cerid.org/?s=formative&a=download&id=b6e0c4807599fd6f80f0729ae5288dd8>
- Proofed. (2022). *What Is Phenomenological Research?* Proofed's Writing Tips. Australia's Best Proofreading and Editing Services Retrieved July 26, 2023 from <https://getproofed.com.au/writing-tips/what-is-phenomenological-research/>
- Rahman, H. A., & Hussin, S. (2021). Case Study of Ruqyah Therapy On Muslim Patient with Eczema. *European Journal of Medical and Health Sciences*, 3(1), 41-43. <https://doi.org/10.24018/ejmed.2021.3.1.696>
- Ryan, G. W., & Bernard, H. R. (2003). Techniques to Identify Themes. *Field Methods*, 15(1), 85-109. <https://doi.org/10.1177/1525822x02239569>
- Sanguiliano, J., Anderson, K., Welcome, S., Hissom, P., Hannah, B., & Lovero, N. (2019). Strong Families and Successful Students: A Qualitative Study of Families Involved in a Strength-Based Community Program. *Journal of At-Risk Issues*, 22(1), 19-27. <https://files.eric.ed.gov/fulltext/EJ1218303.pdf>
- Septadina, I. S., & Parisa, N. (2021). Ruqyah Complementary Therapy in Cluster Headache Patient in Indonesia. *Arkus*, 7(1), 130-133. <https://doi.org/10.37275/arkus.v7i1.89>
- Stuckey, H. L. (2015). The second step in data analysis: Coding qualitative research data. *Journal of Social Health and Diabetes*, 03(01), 007-010. <https://doi.org/10.4103/2321-0656.140875>
- Sultan, S., Kanwal, F., & Hussain, I. (2020). Moderating Effects of Personality Traits in Relationship Between Religious Practices and Mental Health of University Students. *Journal of Religion and Health*, 59(5), 2458-2468. <https://doi.org/https://doi.org/10.1007/s10943-019-00875-x>

- Surah Al-Isra - 82. (2023). *Quran.com*. Retrieved July 27, 2023 from <https://quran.com/en/al-isra/82>
- Surah Ash-Shu'ara - 80-90. (2023). *Quran.com*. Retrieved July 27, 2023 from <https://quran.com/en/ash-shuara/80-90>
- Ummah Welfare Trust. (2022). *Ruqyah. Life with Allah*. <https://lifewithallah.com/wp-content/uploads/2022/07/Ruqyah-by-Life-With-Allah.pdf>
- UNICEF. (2023). *Childhood diseases*. Retrieved 27 July 2023 from <https://www.unicef.org/health/childhood-diseases>
- University of Miami, School of Education and Human Development. (2020). *How is reliability and validity realized in qualitative research?* University of Miami School of Education and Human Development,. Retrieved July 15, 2023 from <https://sites.education.miami.edu/statsu/2020/09/22/how-is-reliability-and-validity-realized-in-qualitative-research/>
- Whittemore, R., Chase, S. K., & Mandle, C. L. (2001). Validity in Qualitative Research. *Qualitative Health Research*, 11(4), 522-537. <https://doi.org/10.1177/104973201129119299>
- Yip, C., Han, N. R., & Sng, B. L. (2016). Legal and ethical issues in research. *Indian J Anaesth*, 60(9), 684-688. <https://doi.org/10.4103/0019-5049.190627>