

## Quantifying Islamic Precautions: A Statistical Exploration of Pandemic Strategies

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### ABSTRACT

This study delves into the quantification of Islamic precautions in the face of pandemics, focusing on the year 2021. The research emphasizes the importance of aligning social behavior, attitudes, and thoughts with the teachings of the Holy Quran and Sunnah. It reveals a significant gap in awareness regarding Islamic precautionary measures, leading to a higher societal cost during health crises. The research focuses on district Mianwali's vaccination staff, students, parents, teachers, and AIOU affiliates, totaling 500 respondents selected through simple random sampling. Gender sensitivity is maintained, with a 3-point Likert scale questionnaire featuring 65 questions across three sections. A pilot study ensures the questionnaire's reliability, involving vaccinators, doctors, parents, teachers, and others. Validity is confirmed through pilot testing, and reliability is established post-pilot. Data collection includes personal visits, telephonic contacts, and distribution of both hard and soft copy questionnaires. Findings highlight widespread ignorance among respondents regarding Quranic injunctions, guidance in Sirat-e-Tayyaba, and prophetic hadiths related to pandemic prevention. The study exposes misconceptions about concepts such as lockdown, vaccination, quarantine, and social distancing within Islamic tutelage. The chaotic atmosphere during the pandemic, economic downturns, and fear-driven actions are also explored. The conclusion underscores the need for comprehensive awareness campaigns to bridge the gap between Islamic teachings and public understanding. Recommendations propose continuous policy revision, national-level research, and government-led initiatives for awareness, training, and education. Integration of Islamic teachings into the educational curriculum and collaboration with media for disseminating information are suggested measures. The study advocates for embracing Islamic guidance as a comprehensive approach to pandemic management, emphasizing the need for a collective societal shift toward a more informed and prepared future.

**Key Words:** Islamic precautions, pandemic strategies, awareness gap, social behavior alignment, Quranic guidance, health crisis management

## **1. Introduction:**

The present era is surrounded by maelstrom of epidemics. In particular, year 2021 was so much wrapped up that life became static and even the idea of disappearing from the face of the earth was beginning to prevail here. Here three-class thinking seems to be at work. One of most important but alarming thought seems to be unable to adopt the change with respect to situation. Make clear in their mind the plan of action to prevent them. Because the researcher believe that it is very important to change the social behavior, attitude and thoughts in the light of the holy Quran and Sunnah. So this study is designed to examine what is Islamic tutelage to tackle pandemic, our present approach to tackle these crucial circumstance and need of present era to protect human beings.

Islam is complete of code life also the Man's war against diseases and epidemics has been going on since time immemorial. Islam has given us a complete guide how to tackle these heavenly trails but nowadays due to lack of awareness about the Islamic precautionary measure, people are suffering and bearing more cost of it. So, it is the need of time to point out this gape and try to create awareness regarding Islamic tutelage to tackle these kinds of trails. This study is an attempt in this regard, by this study we can point out this fault in Muslim society.

## **2. Review of Literature**

As Islam is second largest monotheistic religion in the world after Christianity and it is assumed that today this religion is professed by over 1 billion 926 million people worldwide<sup>1</sup>. The charisma of Islam is that it provides complete guidance to tackle the all kind of issues from the little by little and the Bigger than big. Many scholars have been studied the Islamic guidance from Quran, Hadith and Seerah to derived the instruction that can be applicable on present scenarios.

The book, *Islamic Contribution in the Covid-19 Pandemic Viewed from History*, is an insightful and comprehensive look at how Islam has contributed to the fight against this global pandemic. Written by Dr. *Ali Amjad Rizvi* (born 29 May 1975) is a Pakistani-born Canadian atheist ex-Muslim and secular humanist writer and podcaster and a professor of history at the University of Toronto. The author examines how Muslims have responded to this crisis, historically and today. Dr. Rizvi's work provides an important perspective on how Muslim communities around the world are responding to Covid-19 through their religious beliefs and practices. He looks back into history to show that Muslims have long been involved in providing aid during times of crisis—from helping refugees fleeing war zones to providing medical care for those affected by natural disasters like

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<sup>1</sup> Zurlo G, et al. World Christianity and mission 2021: Questions about the future. *International Bulletin of Mission Research*. 2021;45(1):15–26.

earthquakes or floods—and he argues that these same principles should be applied now as we face a global pandemic. The author also explores the various ways in which Islamic countries are tackling Covid-19, including efforts such as testing campaigns and contact tracing initiatives led by governments like Saudi Arabia and Iran; charitable donations made by wealthy individuals; technological innovations developed within Muslim societies; and grassroots efforts undertaken by local mosques or community organizations across many different countries with large Muslim populations. Overall, this book is incredibly informative about how Islam is playing a role in combating Covid-19 worldwide—both through traditional means such as charity work but also through more modern approaches such as technology development or public health measures implemented by governments throughout the Middle East region. It serves as an important reminder that while we may come from different backgrounds or faiths, our common humanity unites us all when it comes time for us to help each other out during difficult times like these.

Hossain & Bekun, F. V. (2021) in their book provides an in-depth look at the hesitancy of Bangladeshi people to take the COVID-19 vaccine. The authors provide a comprehensive overview of the cultural, religious, and socio-economic factors that are influencing this hesitancy. They also explore how these factors have been shaped by Bangladesh's history and its current political climate. Additionally, they discuss potential solutions for overcoming vaccine hesitancy among Bangladeshi people. The authors present their research in an easy to understand manner which makes it accessible to readers from all backgrounds. Their analysis is thorough and well researched, drawing on both qualitative and quantitative data sources such as interviews with healthcare professionals, surveys of Bangladeshi citizens, and media reports. Furthermore, they provide thoughtful insight into how different approaches can be used to address vaccine hesitancy within this population group. Overall, this book offers valuable insights into why so many Bangladeshi people are hesitant about taking the COVID-19 vaccine and what can be done to overcome this issue. It is an essential read for anyone interested in learning more about public health issues related to COVID-19 vaccination in Bangladesh or other countries facing similar challenges around the world.

According to A.R. Alsuwaidi A. R., Hammad, H. A. A. K., Elbarazi, I., & Sheek-Hussein, M. (2023) there is factor of vaccine hesitancy has been founded in different societies of the world. Author's book examines the current state of vaccine hesitancy in the world today. The author uses a combination of research, interviews, and personal experience to provide an insightful look into why people are hesitant or refuse to get vaccinated. He looks at both sides of the issue—those who are hesitant for religious or cultural reasons as well as those who have legitimate safety concerns about vaccines—and provides thoughtful solutions on how to address these issues in order to increase vaccination rates worldwide. This

book is essential reading for anyone interested in understanding this complex topic and finding ways to combat vaccine hesitancy globally.

The book, *Vaccine Hesitancy within the Muslim Community* by AR Alsuwaidi, HAAK Hammad and I Elba is an incredibly important work in understanding how to address vaccine hesitancy within the Muslim community. The authors provide a comprehensive overview of this issue from both a medical and religious perspective. They explore various aspects of vaccine hesitancy such as cultural beliefs, lack of access to healthcare services, and misinformation about vaccines. Additionally, they discuss strategies for addressing these issues including education campaigns and improved access to healthcare services. The authors have done an excellent job at presenting their research in an easy-to-understand manner that allows readers to gain insight into this complex topic without feeling over whelmed or confused. Furthermore, they provide numerous examples throughout the book which help illustrate their points more clearly. Overall, *Vaccine Hesitancy within the Muslim Community* is a must read for anyone looking to better understand this issue and develop effective strategies for addressing it within their own communities. It provides valuable insight into why some Muslims may be hesitant about getting vaccinated and offers practical solutions on how we can move forward together towards greater health equity in our society today.

Ashraf, H., Faraz, A., Raihan, M., & Kalra, S. (2020) in their “*Fighting pandemics: inspiration from Islam*” briefly discuss that how to fight against pandemics. This book is a comprehensive look at how Islamic teachings can be used to fight pandemics such as the current Covid-19 crisis. The authors provide an in-depth analysis of the Qur'an and Hadith, as well as other Islamic sources, to show how these teachings can be applied to modern day issues like pandemics. The authors have done an excellent job of presenting their research in a clear and concise manner that makes it easy for readers to understand the material. They also provide practical advice on how individuals and communities can use Islamic teachings to protect themselves during this time of uncertainty. Additionally, they discuss various strategies that governments should consider when responding to pandemic outbreaks. Overall, this book is incredibly informative and thought-provoking. It provides valuable insight into how we can utilize our religious beliefs in order to better prepare ourselves for future challenges posed by infectious diseases like Covid-19. Highly recommended!

In 2020 Muhammad Efendi, Selamat Riadi, both students of Geography Study Program, FISIP, Lambung Mangkurat University and Masriyah a Student of PAI, FTK, UIN Antasari Banjarmasin have done research work on the topic” *Islamic Contribution In The Covid-19 Pandemic Viewed From History*” which was published on 31-12-2020 by “Abjadia” an international journal of education. They conducted a research work to derive the guidance to tackle pandemic. Islam has healthy contribution to tackle all kinds of epidemics including Covid-19

which is happening in this era. For this purpose the authors have used the method of library research as a tool to explore information regarding Islam to tackle infectious diseases. First they discussed a disease which is called Leprosy caused by an infection which first attacks the peripheral nerves then attack on approximately every system of human body. For this they coded a Hadith: “Narrated from Anas ra. That the Holy Prophet prayed Allah’s, protection from crazy, stripes, leprosy, and atrocious diseases”

اللَّهُمَّ إِنِّي أَعُوذُ بِكَ مِنَ الْبَرَصِ، وَالْجُنُونِ، وَالْجَذَامِ، وَمِنْ سَيِّئِ الْأَسْقَامِ<sup>2</sup>

Then authors explained the Tha’un outbreak and took the example of book “al-Isha’ah Li Ashrot al-Sa’ah”<sup>3</sup>. They mentioned that there are five of the most dangerous tha’un in Islam, namely:

- ❖ Firstly at the time of Holy Prophet “Tha’un syirawaih”
- ❖ Second one at the time of Umar bin Khattab “Tha’un Amwas”
- ❖ Third one at the time Ibn Zubair “Tha’un Al-Jarif”
- ❖ Fourth in 87 H “Tha’un Fatayat”
- ❖ Fifth “Tha’un al-Ashraf”

Then discussed Cholera Outbreak as coded that according to Johnson (2004). Then they gave the example from Quran. Then authors noted other Islamic precautionary rule called “social distancing” for this purpose the coded the example from Hadith. Then goes to 3<sup>rd</sup> Islamic precautionary rule called Lockdown for this purpose they coded the example of Hadith. Lastly they noted 4<sup>th</sup> Islamic precautionary rule called Cleanliness and hygiene. For this purpose they coded another hadith.

Islam has always emphasized the importance of being clean. This means washing our hands, keeping our homes tidy, and following health rules. In fact, being clean is seen as a way to show our faith in Islam. They concluded that the teachings of Islam were already contributing that can be seen from the Quran, hadith and seerah which when examined in harmony with current health protocol in to tackle epidemics, such as:

- i. social distancing
- ii. lockdown
- iii. Maintaining health hygiene and cleanliness

Islam has always emphasized the importance of being clean. This means washing our hands, keeping our homes tidy, and following health rules. In fact, being clean is seen as a way to show our faith in Islam.

A History of the World's Pandemics is an incredibly comprehensive and informative book that provides readers with a detailed look at pandemics

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<sup>2</sup> Abu Dawud Hadith no. 1554

<sup>3</sup> Al-allamah al muhqaqqiq Muhammad bin Rasul al-Husaini (1040 H-1103 H)

throughout history. Written by Dr. John Barry (2009), it covers everything from the Plague of Justinian to the Spanish Flu to HIV/AIDS, examining each pandemic in detail and exploring its causes, effects, and long-term implications. The book also looks at how different societies have responded to these outbreaks over time and how they've adapted their public health policies accordingly. It's an essential read for anyone interested in epidemiology or global health issues. The writing style is clear and accessible, making this book suitable for both experts and novices alike. Dr. Barry does an excellent job of presenting complex information in a way that is easy to understand without sacrificing accuracy or depth of knowledge. He also includes helpful illustrations throughout which help bring his points home even further. Overall, *A History of the World's Pandemics* is an invaluable resource for those looking to gain a better understanding of some of humanity's greatest challenges over time—and what we can do going forward to prevent future outbreaks from occurring on such a large scale again.

A book *Pandemics: avoiding the mistakes of 1918* by Dr. Robert A. Bonomo and Published on 20 May 2009 is an essential read for anyone interested in understanding the history and science behind pandemics, as well as how to prevent them from happening again in the future. The book covers a wide range of topics, including the historical context of past pandemics, current scientific research on viruses and infectious diseases, and strategies for preventing or mitigating future outbreaks. Dr. Bonomo's writing style is clear and concise; he explains complex concepts in an easily understandable way without sacrificing accuracy or detail. He also provides numerous examples throughout to help illustrate his points, making it easier to understand why certain decisions were made during previous pandemics that led to their outcomes today. Additionally, he offers practical advice on how we can avoid repeating those mistakes in our own time by taking proactive steps such as investing more resources into public health infrastructure and increasing global cooperation when responding to disease outbreaks across borders. Overall, *Pandemics: Avoiding the Mistakes of 1918* is an informative and thought-provoking book that should be required reading for anyone looking to gain a better understanding of this important topic—and hopefully make sure we don't repeat history's mistakes again.

Hilmy, M., & Niam, K. (2020) describe in his research work the Muslim disputed during pandemics in Indonesia. This is an insightful and thought-provoking work that delves into the complexities of Islamic law and its application to contemporary issues. The authors provide a comprehensive overview of how different interpretations of Islamic law have been used in various contexts throughout history, from medieval times to modern day. They also discuss the challenges faced by Muslims when attempting to reconcile their faith with secular legal systems. Through detailed case studies and interviews with leading scholars, they demonstrate how these disputes can be resolved through dialogue and compromise between opposing sides. This work is essential reading for anyone

interested in understanding the complex relationship between Islam and modern society. It provides valuable insight into how religious authorities interact with each other as well as offering practical advice on resolving conflicts within Muslim communities today.

Long ago, there were people who studied and wrote about diseases. One historian said that two diseases called wabā' and tā'ūn were the same thing. But another historian said that some of the earlier writers were wrong because they included things like floods and droughts in their lists of diseases. They said that wabā' and tā'ūn meant "epidemic" or "pestilence." They also said that every tā'ūn was a wabā', but not every wabā' was a tā'ūn. They described wabā' as a bad thing that happens in the environment. Another person talked about how the air can become polluted and cause diseases to spread. A writer said that when the wind blows from the south for a long time, people in Egypt start to worry that a deadly disease will come. Another said that people in the past would get scared of diseases when they saw smoke in the air for no reason. One gave advice to people to stay away from sick people and take care of their health.

Michael W. Dols (1974) was a historian who studied the plague in Islamic history. He found that the primary sources for this study were books written by people like Qutaybah, Ibn Abi al-Dunya, al-Tabari, Ibn al-Wardi, Ibn Abi Hajalah, al-Maqrizi, Ibn Hajar al-Asqalani, and al-Suyuti. These books talked about the plague and its effects. Dols also found that the earliest mention of the plague was in the Hadith literature. Ibn Hajar al-Asqalani wrote a book about plagues and collected many other books on the topic from different periods in Islamic history. Dols believed that some of the works of al-Madaini were included in the books by Ibn Abi al-Dunya. The books by al-Tabari, Ibn Abi Dunya, and Ibn Qutaybah were also important sources. Dols also found that many Muslim writers after the Black Death wrote about plagues in Islamic history. Ibn al-Khatib wrote a long article about plagues in response to people's questions during his time. All of this shows that Muslim empires and dynasties suffered a lot from pandemics throughout history.

According to Ibn 'Asākir (d. 571/1176) there were some really bad diseases called plagues that made a lot of people sick and many of them died. One of the plagues happened during the time of a king named Yezdigird, and another one happened when a leader named Caliph Umar was in Syria. Many soldiers and important people died from these plagues. The diseases spread to other countries too, like Iraq and Egypt. Before the plagues, there was also a big shortage of food in that area, which may have made people more likely to get sick. The plagues lasted for a long time and were talked about by many people. There was another bad plague that happened later in a place called Basrah, and it was called the "Violent Plague" because it affected a lot of people there. Some important people also lost many family members because of the plagues.

According to Michael Dols (1974) Syria-Palestine experienced plague. During a certain time in history, there were a lot of sicknesses called plagues in an area called Syria-Palestine. These plagues happened about every ten years for a while. The cities called Kufah and Basrah had even more plagues. But when a new group of leaders called the Abbasids took over, the plagues stopped for a while. Some people believed that the plagues went away because of the new leaders. Other people blamed the previous leaders, called the Umayyads, for the plagues. There were records of many plagues during the time of the Umayyads, but after a certain year, there were no more mentions of plagues until a later time when a new plague happened in a city called Bahgdad. In the early days of Islam, there were also a few famous plagues that people talked about. This study found that religions, like Islam, have rules and guidelines about how to stay healthy. They learned these rules from past experiences, like when there was a big sickness called the plague. People learned that they shouldn't go to places where the sickness was spreading and that they should stay clean to prevent getting sick. These rules are still important today when there are contagious diseases. So, the things we do now to stop the spread of sickness are similar to what people did a long time ago in Islamic cultures. This article looked at these rules and how they can still help us today.

### **3. MATERIAL AND METHODS**

**3.1 Research Design:** Quantitative research method has been adopted in this study. Through questionnaire primary data was collected and secondary data was obtained through books, research paper, internet and review of literature.

**3.2 Population:** Population is all the vaccination staff working with SED, students, parents, and teachers, related persons in district Mianwali and students and tutors of AIOU.

**3.3 Sample Size & Sampling Technique:** The simple random sampling technique will be adopted in this study. The present study is based on primary and secondary data. Primary data is collected all of the vaccination staff working with SED, students, parents, teaching, and related staff in district Mianwali and students and tutors of AIOU through a questionnaire and secondary data is collected from reviewed work done by scholars.

**Table 3.1 Sampling detail of the study:**

Areas	Medical Staff	Students	Parents	Teachers	Others	Total
Piplan	25	25	25	25	25	125
Mianwali	25	25	25	25	25	125
Esa khel	25	25	25	25	25	125
Others	25	25	25	25	25	125
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>500</b>



### **3.4 Respondent's Distribution by Gender**

The researcher sought information concerning the gender distribution of the respondents to ascertain whether the study was gender sensitive. The results were presented in table 3.2.

**Table 3.2: The Respondents' distribution by gender; (Approximately)**

<b>Respondents</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
<b>Medical Staff</b>	50%	50%	100 %
<b>Doctors</b>	50%	50%	100 %
<b>Parents</b>	50%	50%	100 %
<b>Teachers</b>	50%	50%	100%
<b>Others</b>	50 %	50 %	100 %

### **3.5 Tool of the study or Instrument**

Due to the large sample size and enormous information required closed-end questionnaire-based and Likert 3- point scale is used as an instrument for the collection of data. The data obtained were tabulated in requisites of frequency. The frequencies were transformed into scores by handing over the following scale values of each of the f three responses YES (Y), NO (N), and "Don't Know (DK)" and YES (Y), NO (N), and Little bit (LB). The questionnaire was divided into three sections based on the variables of the study. Section A has 25 questions, Section B has also 25 questions and section C has 15 questions in it. Each section has items related to the concerned variable or category.

### **3.6 Pilot Study**

The Reliability test of the questionnaire a pilot study was conducted by selecting 5 Vaccinators, five Doctors five Parents five teachers, and five other persons. They were given the questionnaire and got the result. After getting the results they were tabulated and then analyzed the result this test has determined the reliability of test items within acceptable to good ranges.

### **3.7 Validity of the instrument**

Validity of the instrument was ensured by pilot testing.

### **3.8 Reliability of the instrument**

Reliability of the instrument was calculated after pilot testing- after receiving responses from the selected short sample, reliability was calculated for all the items of the instrument and it was ensured that the instrument is reliable. In order to get reliable information, the researcher visited each of the sample schools and centers personally, or contact telephonically briefed the respondents about filling

up the questionnaires and also handed over stamped return envelopes for replies, who couldn't respond on the spot.

### **3.9 Procedure of Data Collection**

In the first step, the researcher made a valid questionnaire with the help of a respected supervisor, other senior professors, and senior students. Then planning to meet the responded was made by researcher with the help of a respected supervisor, other senior professors, and senior students. It was decided that the respondent will be touched by visiting the schools, and hospitals, also by calling the relevant persons and using valuable application survey heart. The researcher has sent questionnaires to respondents to fill, in hard and soft form. Once the questionnaires were filled, they were collected for analysis

### **3.10 Data Analysis**

The researcher read the collected data then tabulated it with respect to the questionnaire, interpreted the responses under each table of questions and then the responses were noted down. After collection of the raw data, it was ready for analysis. Data were tabulated and analyzed through the percentage method.

### **3.11 Ethical Consideration**

The researcher was legally approach to avoid harms of the ethical body of his work. The researcher were not involve himself in any illegality. Keeping the research work confidential will not violate rules on plagiarism.

## **4. ANALYSIS OF DATA AND INTERPRETATION**

### **4.1 Data Analysis and Interpretation**

Analysis and interpretation of data are the most important steps in research. Devoid of these steps generalization and prediction cannot be achieved. This Chapter presents data examination and explanation. The aim was to examine the awareness of Islamic tutelage to tackle pandemics, socio-cultural changes that occurred due pandemic in a society observed, and changes in thought and beliefs, also find out the effect of vaccination.

A three-point Likert Scale Questionnaire was used to obtain the required data. The data obtained was tabulated in requisites of frequency. The frequencies were transformed into scores by handing over the following scale values of each of the three Responses (using Likert Scale)

<b>Yes</b>	<b>Don't Know</b>	<b>No</b>
<b>Y</b>	<b>DK</b>	<b>N</b>

Data was tabulated and analyzed by frequencies in percentages.

Part II Section-A

Table 4.1: There are some Quranic injunctions to prevent epidemics.

Sr. #	Questions	Yes (Y)	NO (N)	Don't Know (DK)
		Frequency and %age		
1	There are some Quranic injunctions to prevent epidemics	224	11	265
		44.8%	2.2%	53%

Results of Table 4.1 depict that 44.8% of the respondents responded “YES” regarding the statement “*There are some Quranic injunctions to prevent epidemics.*” And 53% of the respondents responded “Don’t know” and 2.2% of respondents responded with “No”. Table 4.1 reveals that the majority of respondents responded with “Don’t Know” to the statement “*There are some Quranic injunctions to prevent epidemics.*”

Table 4.1: There are some Quranic injunctions to prevent epidemics

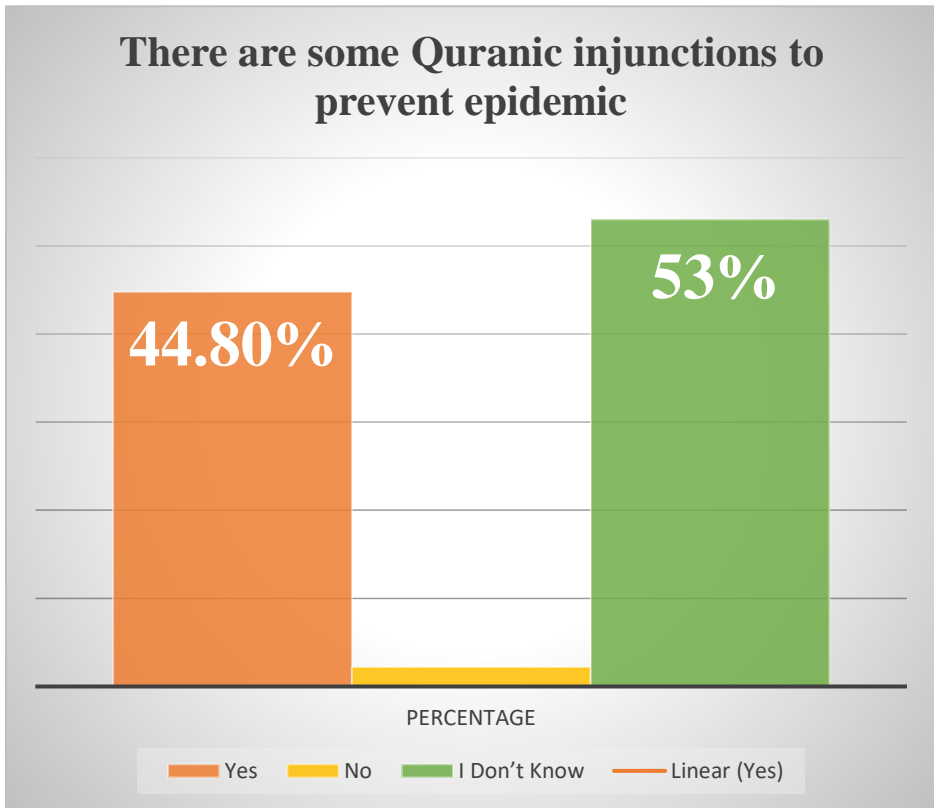
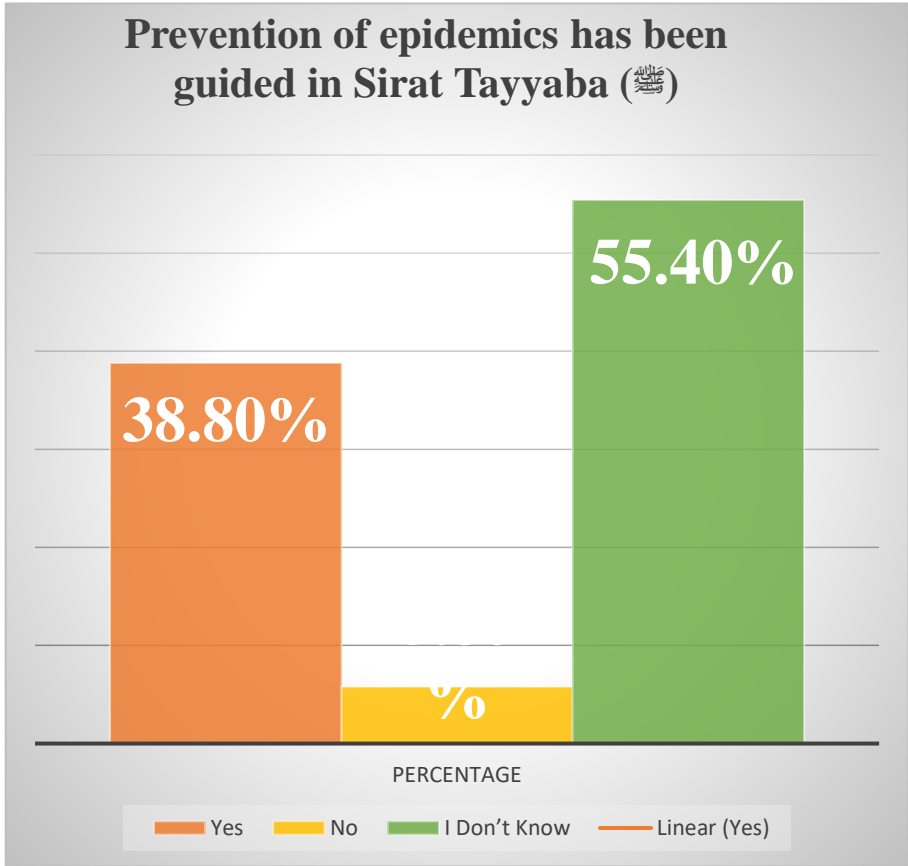


Table 4.2 Prevention of epidemics has been guided in Sirat Tayyaba (ﷺ).

Sr. #	Questions	Yes (Y)	NO (N)	Don't Know (DK)
		Frequency and %age		
2	Prevention of epidemics has been guided in Sirat Tayyaba (ﷺ).	194	29	277
		38.8 %	5.8%	55.40%

Results of Table 4.2 depict that 38.8% of the respondents responded “YES” regarding the statement “*Prevention of epidemics has been guided in Sirat Tayyaba (ﷺ).*” 55.4% of the respondents responded “Don’t Know” and 5.8% of respondents responded with “No”. Now 4.2 reveals that the majority of respondents responded “NO “to the statement “*Prevention of epidemics has been guided in Sirat Tayyaba (ﷺ).*”

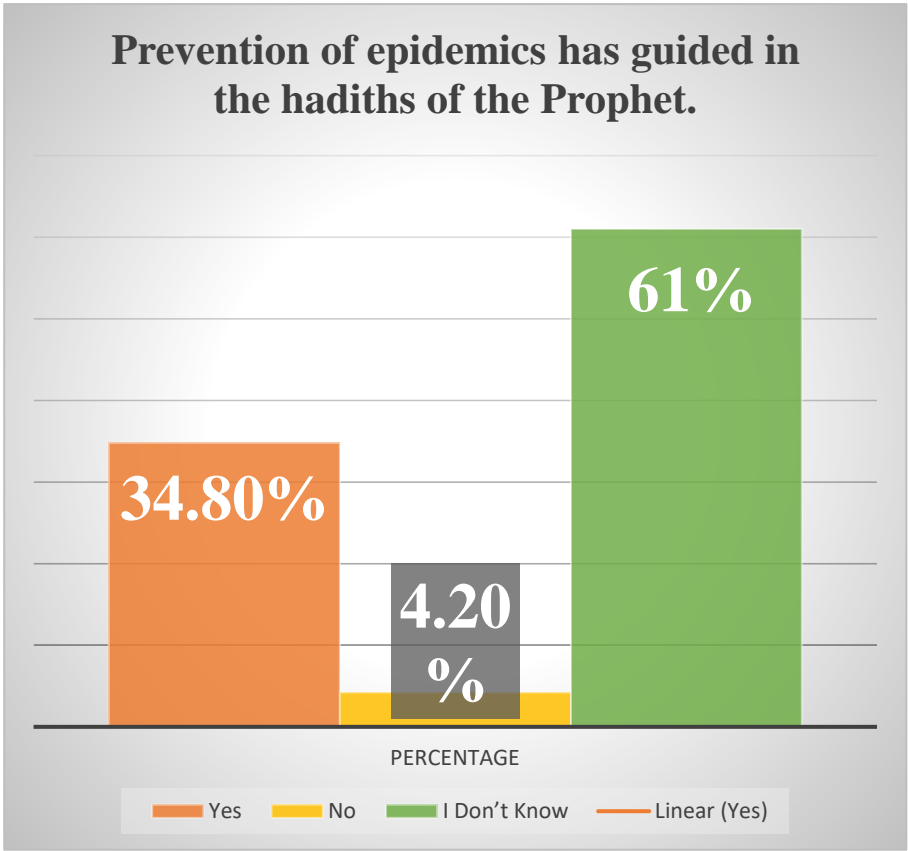


**Table 4.2: Prevention of epidemics has been guided in Sirat Tayyaba (ﷺ)**

**Table 4.3** Prevention of epidemics has been guided in the hadiths of the Prophet.

Sr. #	Questions	Yes (Y)	NO (N)	Don't Know (DK)
		Frequency and %age		
3	Prevention of epidemics has been guided in the hadiths of the Prophet	174	21	305
		34.8 %	4.2%	61%

Results of Table 4.3 depict that 34.8% of respondents responded “YES” regarding the statement “*Prevention of epidemics has guided in the hadiths of*



*the Prophet.*” And 61% of respondents responded with “**Don’t know**” and, 4.2% responded with the “**NO**” option. Now 4.3 reveals that the majority has responded with “**NO**” to the statement “*Prevention of epidemics has guided in the hadiths of the Prophet.*”

**Table 4.3** Prevention of epidemics has been guided in the hadiths of the Prophet.

**Table 4.4** There is a concept of Lock Down in Islamic tutelage.

Sr. #	Questions	Yes (Y)	NO (N)	Don’t Know (DK)
		Frequency and %age		
4	There is a concept of Lock Down in Islamic tutelage	152	56	292
		30.4 %	11.2 %	58.40%

Results of Table 4.4 depict that 30.4% of the respondents responded “**YES**” regarding the statement “*There is a concept of Lock Down in Islamic tutelage*” And 58.4% of the respondents responded “**Don’t Know**” and 11.2% of respondents responded with “**NO**”. Now 4.4 reveals that the majority of respondents responded with “**NO**” to the statement “*There is a concept of Lock Down in Islamic tutelage.*”

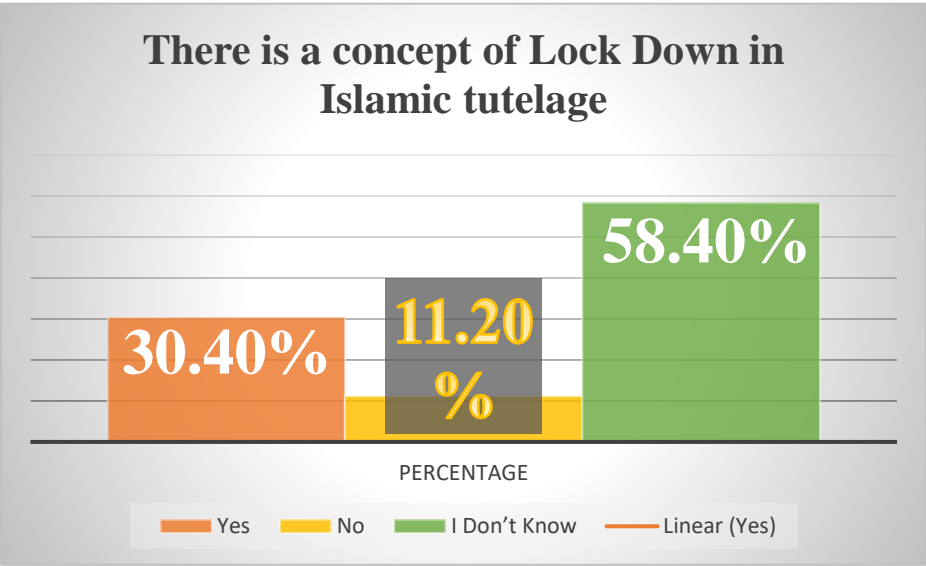
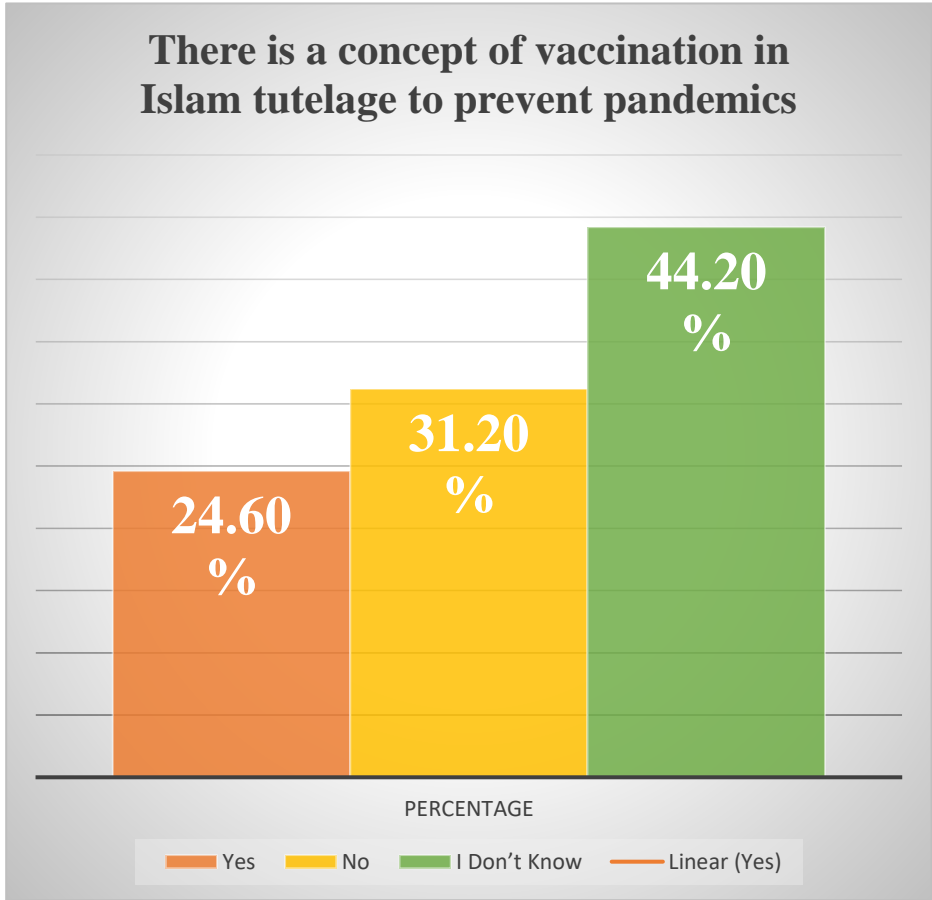


Table 4.4 There is a concept of Lock Down in Islamic tutelage.

Table 4.5: There is a concept of vaccination in Islam tutelage to prevent pandemics.

Sr. #	Questions	Yes (Y)	NO (N)	I Don't Know (DN)
		Frequency and %age		
5	There are some Quranic injunctions to prevent epidemics	123	156	221
		24.6 %	31.2 %	44.2%

Results of Table 4.5 depict that 24.6% of the respondents responded “YES” regarding the statement “*There is a concept of vaccination in Islam tutelage to prevent pandemics.*” And 44.2% of the respondents responded “Don’t know” and 31.2% of respondents responded with “NO”. Now 4.5 reveals that



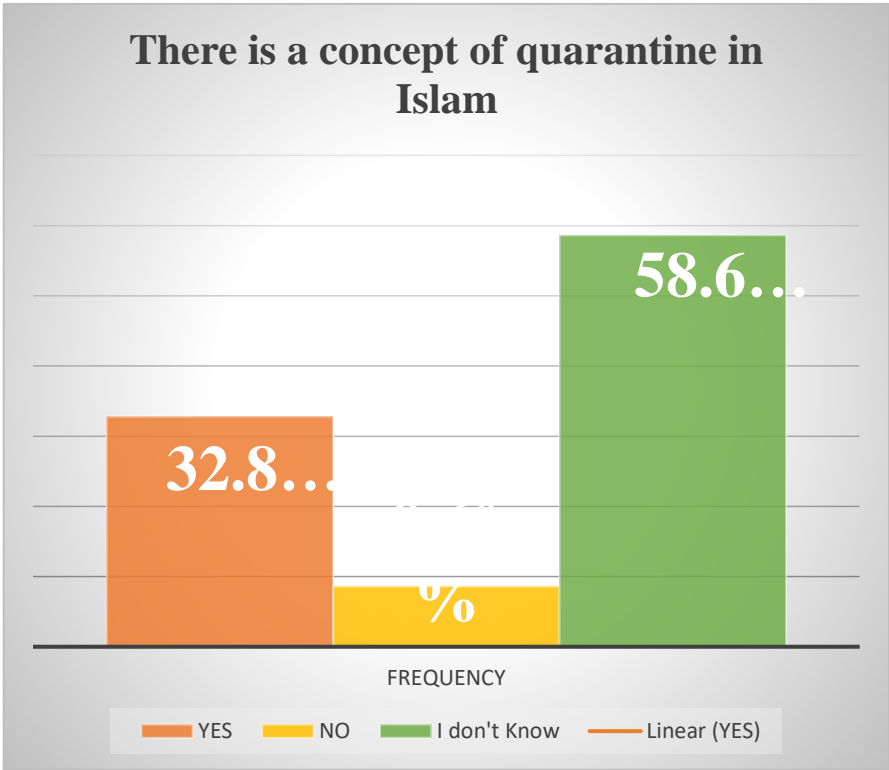
the majority of respondents responded with “Don’t know “to the statement “*There is a concept of vaccination in Islam tutelage to prevent pandemics*”

**Table 4.5: There is a concept of vaccination in Islam tutelage to prevent pandemics.**

**Table 4.6 There is a concept of quarantine in Islam.**

Sr. #	Questions	Yes (Y)	NO (N)	I Don’t Know (DN)
		Frequency and %age		
6	There is a concept of quarantine in Islam	164	43	293
		32.8%	8.60%	58.60%

Results of Table 4.6 depict that 32.8% of the respondents responded “YES” regarding the statement “*There is a concept of quarantine in Islam*” And 58.6% of the respondents responded “Don’t know” and 8.6 % of respondents responded with “NO”. Now 4.6 reveals that the majority of respondents responded “Don’t know “to the statement “*There is a concept of quarantine in Islam*”.



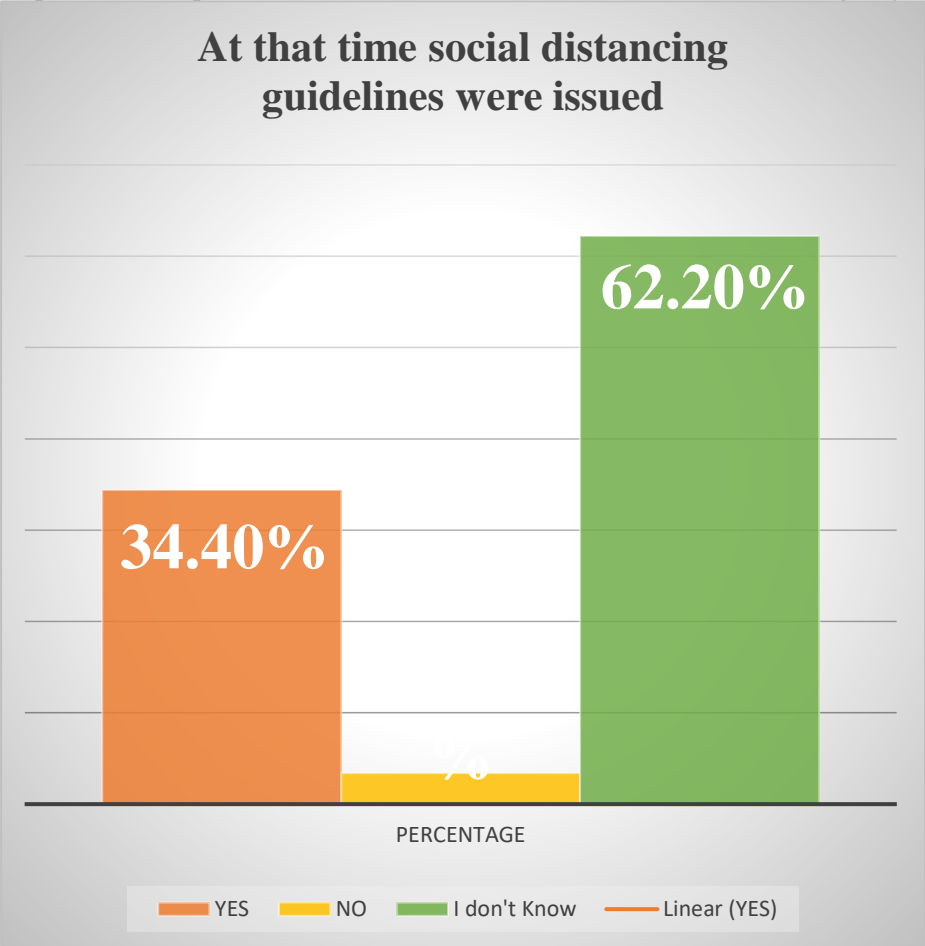


**Table 4.6** There is a concept of quarantine in Islam.

**Table 4.7** At that time social distancing guidelines were issued.

Sr. #	Questions	Yes (Y)	NO (N)	I Don't Know (DN)
		Frequency and %age		
7	At that time social distancing guidelines were issued	172	17	311
		34.4 %	3.40 %	62.20%

Results of Table 4.7 depict that 34.4% of the respondents responded “YES” regarding the statement “*At that time social distancing guidelines were issued*”. And 62.2% of the respondents responded “Don’t know” and 3.4 % of respondents responded with “NO”. Now 4.7 reveals that the majority of



respondents responded “Don’t know “to the statement “*At that time social distancing guidelines were issued*”.

**Table 4.7 At that time social distancing guidelines were issued**

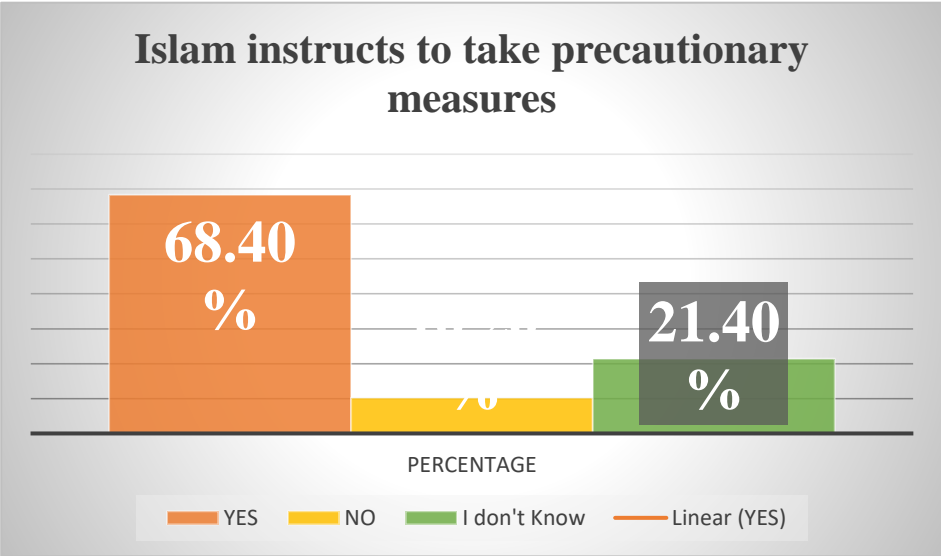
**Table 4.8 Islam instructs to take precautionary measures.**

Sr. #	Questions	Yes (Y)	NO (N)	Don’t Know (DN)
		Frequency and %age		
8	Islam instructs to take precautionary measures	342	51	107
		68.4 %	10.2 %	21.40%

Results of Table 4.8 depict that 68.4% of the respondents responded “YES” regarding the statement “*Islam instructs to take precautionary measures.*” And 21.4% of the respondents responded “Don’t know” and 10.2 % of respondents responded with “NO”. Now 4.8 reveals that the majority of respondents responded “Yes “to the statement “*Islam instructs to take precautionary measures*”.

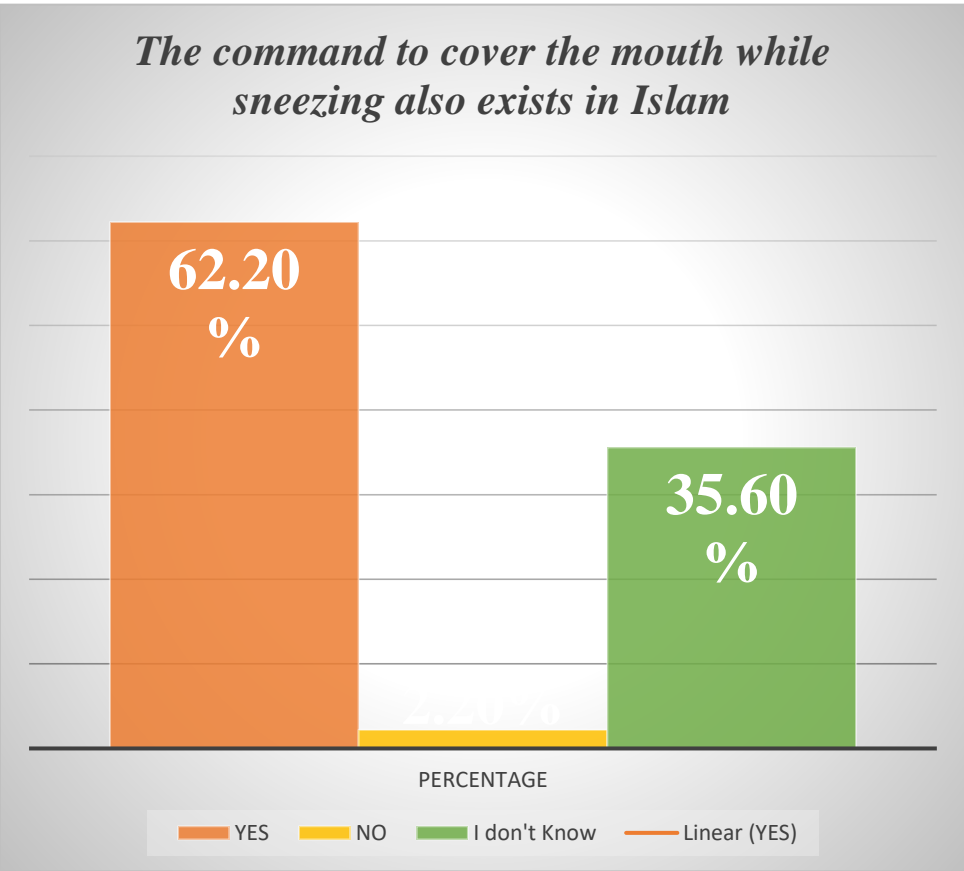
**Table 4.8 Islam instructs to take precautionary measures**

**Table 4.9: The command to cover the mouth while sneezing also exists in Islam.**



Sr. #	Questions	Yes (Y)	NO (N)	I Don't Know (DN)
		Frequency and %age		
9	The command to cover the mouth while sneezing also exists in Islam	311	11	178
		62.2 %	2.20 %	35.60%

Results of Table 4.9 depict that 62.2% of the respondents responded “YES” regarding the statement “*The command to cover the mouth while sneezing also exists in Islam*” And 35.6% of the respondents responded “Don’t know” and 2.2 % of respondents responded with “NO”. Now 4.9 reveals that the majority of respondents responded “Yes “to the statement “*The command to cover the mouth while sneezing also exists in Islam*.”



**Table 4.9: The command to cover the mouth while sneezing also exists in Islam.**

**Table 4.10 Precautionary measures do not conflict with trust in Allah.**

Sr. #	Questions	Yes (Y)	NO (N)	I Don't Know (DN)
		Frequency and %age		
10	Precautionary measures do not conflict with trust in Allah	188	128	184
		37.6 %	25.6 %	36.80%

Results of Table 4.10 depict that 37.6% of the respondents responded “YES” regarding the statement “*Precautionary measures do not conflict with trust in Allah*” And 36.8% of the respondents responded “NO”. Also, 25.6 % of respondents responded with “NO”. Now 4.10 reveals that the majority of respondents responded ignorance to the statement “*Precautionary measures do not conflict with trust in Allah*”.

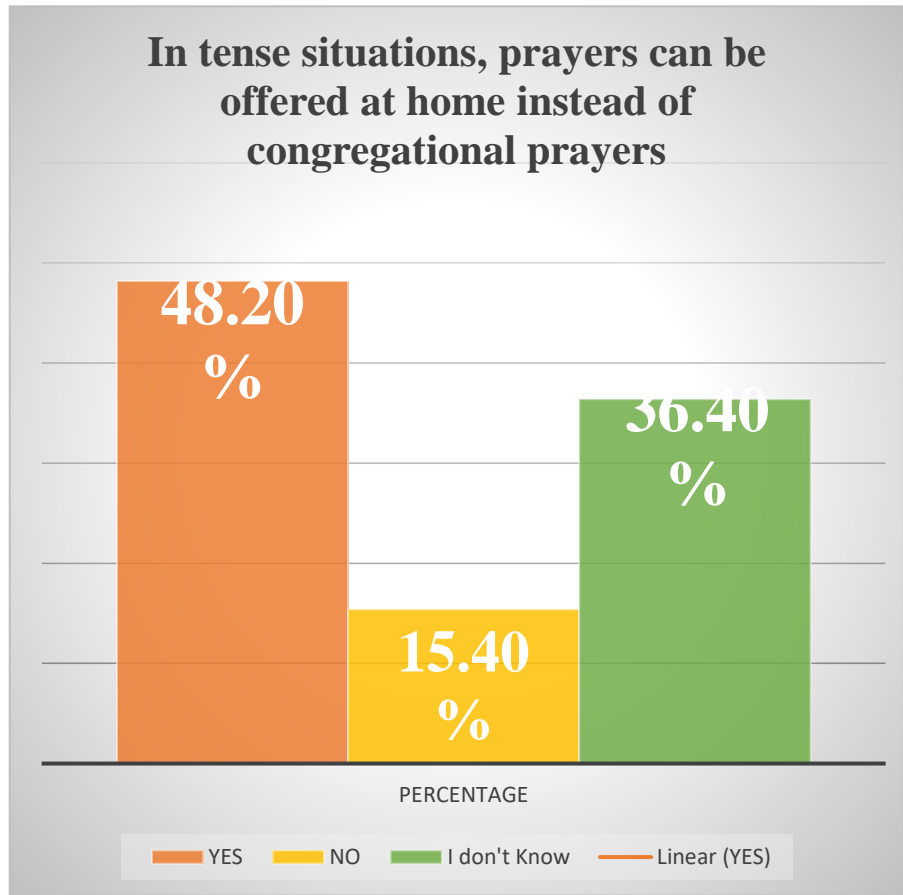


**Table 4.10 Precautionary measures do not conflict with trust in Allah**

**Table 4.11 In tense situations, prayers can be offered at home instead of congregational prayers.**

Sr. #	Questions	Yes (Y)	NO (N)	Don't Know (DN)
		Frequency and %age		
11	In tense situations, prayers can be offered at home instead of congregational prayers	241	77	182
		48.2 %	15.4 %	36.40%

Results of Table 4.11 depict that 48.2% of the respondents responded “YES” regarding the statement “*In tense situations, prayers can be offered at home instead of congregational prayers*” And 36.4% of the respondents responded “NO”. Also, 15.4 % of respondents responded with “NO”. Now 4.11



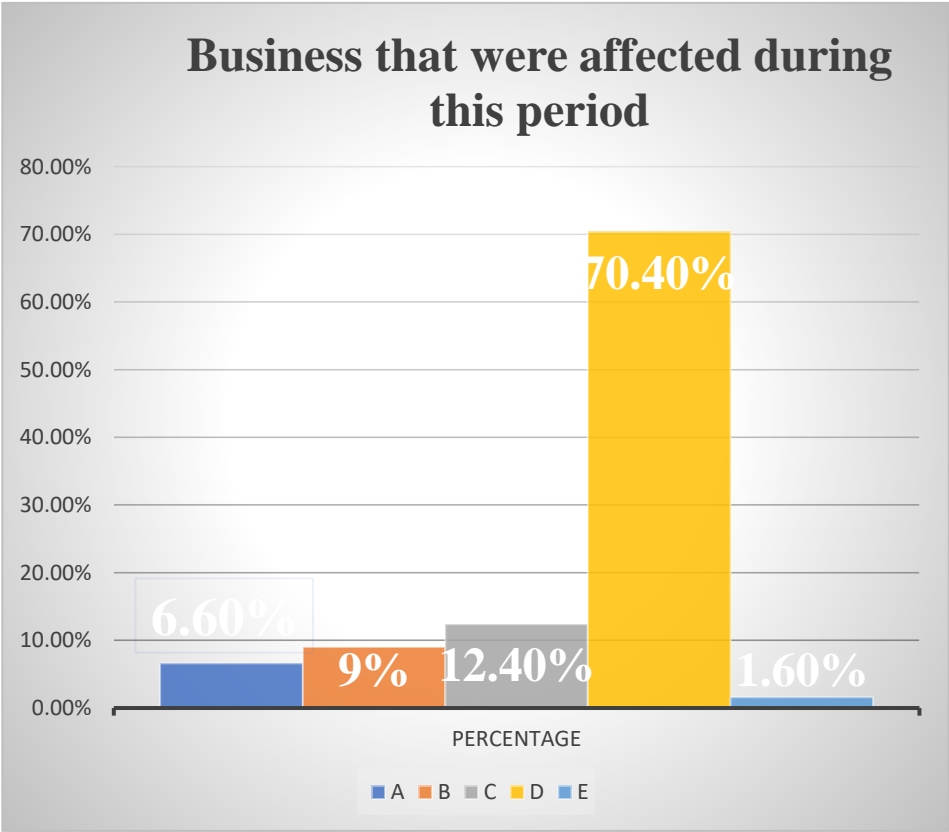
reveals that the majority of respondents agree with the statement “*In tense situations, prayers can be offered at home instead of congregational prayers.*”

*In tense situations, prayers can be offered at home instead of congregational prayers*

Table 4.50 Business that were affected during this period.

Sr. #	Questions	Frequency and %age				
		A	B	C	D	E
25	Business that were affected during this period	64	82	57	101	196
		12.8 %	16.4 %	11.4 %	20.2 %	39.2 %

Results of Table 4.50 depict that 12.8% of the respondents responded in the favor of the statement “**Cloth houses**”, 16.4% of the respondents responded in the favor of the statement “**Hoteling and meat shops**”, 11.4 % of respondents in the favor of the statement “**Fruit and Juice Shops**”, 20.2% of the respondents



responded in the favor of the statement “**Private Education Sector**” and 39.2% of the respondents responded in the favor of the statement “**All except pharmaceutical and prevention Item**” Now 4.50 reveals that majority of those respondents *have voted in the favor of the statement “All except pharmaceutical and prevention Item”*.

**Table 4.50 Business that were affected during this period**

**Summary of Response statements of Section-B (II)**

Sr. No	Statements	A	B	C	D	E	F
22	Reasons for adopting social distancing	11.20%	15.60%	24.80%	29.00%	19.40%	11.20%
23	Reasons for not practicing social distancing	4.40%	11.40%	2.20%	1.40%	80.60%	4.40%
24	The reaction of the people in the pandemic situation	6.6%	9%	12.4%	70.4%	1.6%	6.6%
25	Types of businesses were affected during this period	12.8%	16.4%	11.4%	20.2%	39.2%	12.8%

It is clear from the result of the above that the purpose of adopting social distancing is neither as an Islamic precautionary measure nor as a precautionary measure, but the main purpose of adopting it was to prevent entry restriction into institutions. Those who not followed the social distance rule, their main purpose was the fear of the people so that people would not get angry. During the days of the epidemic, there was panic everywhere. It seemed as if life had stopped. People were waiting for the end of life. During this period, all kinds of businesses were affected, except the businesses that were related to medicine, some businessmen came close to bankruptcy.

### **5.1 Findings**

The purpose of this study was to investigate the effect Islamic teaching to tackle pandemics. As a result of this study and on the basis of interpretation of data; following findings are observed by the researcher:

- Majority of the respondents responded with ignorance to this statement “Do you know the Quranic Injections regarding the prevention of infectious diseases.”

- Majority of the respondents responded with ignorance to this statement “Prevention of epidemics has been guided in Sirat Tayyaba (سیرت طیبہ)”.
- Majority of the respondents responded with ignorance to this statement “Prevention of epidemics has been guided in the hadiths of the Prophet”
- Majority of the respondents responded with ignorance to this statement”. There is a concept of Lock Down in Islam tutelage
- Majority of the respondents responded with ignorance to this statement “There is a concept of vaccination in Islam tutelage to prevent pandemics?”
- Majority of the respondents responded with ignorance to this statement “There is a concept of quarantine in Islam”
- Majority of the respondents responded with ignorance to this statement “At that time social distancing guidelines were issued”
- Majority of the respondents responded with ignorance to this statement “Islam instructs to take precautionary measures
- Majority of the respondents responded with ignorance to this statement “The command to cover the mouth while sneezing also exists in Islam”
- Majority of the respondents responded with ignorance to this statement “Precautionary measures do not conflict with trust in Allah”
- Majority of the respondents responded with ignorance to this statement “In tense situations, prayers can be offered at home instead of congregational prayers”
- Majority of the respondents responded with ignorance to this statement “Performing ablution before prayer is an Islamic precautionary measure”
- Majority of the respondents responded with ignorance to this statement “Absence from prayer is also a cause of diseases”
- Majority of the respondents responded with ignorance to this statement “Nowadays, the people are paying Zakat regularly”
- Majority of the respondents responded with ignorance to this statement “Distance from zakat also the cause of epidemics”
- Majority of the respondents responded with ignorance to this statement “Timely payment of Zakat can lead to relief from sudden calamities”
- Majority of the respondents responded with ignorance to this statement “Timely and humbly saying our prayers can lead to relief from unwanted deceases”
- Majority of the respondents responded with ignorance to this statement “Stopping Tawaf in the Kaaba does not indicate severe displeasure of Allah”



- Majority of the respondents responded with ignorance to this statement “People tend to turn towards the Lord in times of calamity, sickness, and suddenness”
- Majority of the respondents responded with ignorance to this statement ““CLEANLINESS IS HALF FAITH” This is an Islamic precaution”

## **5.2 Conclusion**

After the study, it is concluded that in there is a huge gape of awareness of Islamic tutelage to tackle infectious deceases, in this so-called Islamic society of materialistic era. Although the Islam is a complete code of life but it has been observed that majority of the have no basic Islamic information to tackle an unwanted situation. Quran leads us, he seerat of Holy prophet gave us complete practical guidance and has provided us a systematic instruction how to deal with these kinds of pandemics If and Only if we follow the Islamic guideline to tackle this kind unwanted condition, we never have to follow instruction of WHO or other world organizations of health.

In order to enhance the Islamic tutelage of we have to utilized all plate forms to enhance the awareness to tackle pandemics Thus, the technology has a positive and healthy effect on student’s learning particularly at elementary level. So, it may be concluded that a strong campaign of awareness is the need of this materialist era.

## **5.3 Recommendations**

- The important suggestions and recommendations are given below which must be implemented, if they want to tackle these kind of un-wanted deceased and situation in our community. On the basis of findings and conclusion of this study following recommendations are made.
  1. In order to meet today’s challenges policy makers might revise policies continuously for developing knowledge, understandings, values, attitudes and skills with respect to Islamic prospective.
  2. The research might be conducted to taking these variables on national level.
  3. The detail research studies might be conducted on the effect of pandemic on socio-cultural behavior and our present approach to tackle it.
  4. The Govt. might introduce the awareness campaign for all citizen at all level and platform to tackle these kind of unwanted things in the light Islamic teachings.

5. Different kind of precautionary trainings, programs and seminars might be introduce to reduce the gap between Islamic tutelage and public thoughts and actions.
6. Govt. might be introduce different lessons and lecture at school, college and university level.
7. Special seminars and workshops might be arranged by the government with the collaboration of private or public sectors and through (both electronic and print media), to enhance the awareness about the Islamic tutelage and its implementation.
8. Program might be started in every department of Country. Government might have to be arranged in service training courses to equip with new generation with Islamic teaching.
9. High ups might appreciate those activities at private and public that promote Islamic touch to tackle and resolve every situation in life.

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