INTEGRATION OF NAQLI-AQLI KNOWLEDGE: PERCEPTION OF USIM DENTAL STUDENTS

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Abstract

A dental curriculum that integrates naqli (revealed) and aqli (rational) knowledge was developed by USIM to nature a balanced professional in dentistry for meaningful contribution to society, nation and mankind. Many studies on dental education considered the perspectives of faculty members, alumni and professional organisations. Very few studies employed qualitative methods to explore dental students’ perceptions of their learning experiences and conducted by students. Students’ views of their educational experiences are important in shaping the educational process. The aim of the study was to investigate understanding of the concept of integration of naqli-aqli knowledge in the curriculum and the perception of their educational experiences. This was a qualitative study that adopted the phenomenology approach. Six (6) out of 34 final year students were individually interviewed by a fellow student, as researcher, using semi-structured questions. Each interview lasted for about an hour and was audio-recorded. It was then transcribed verbatim. The transcripts were reviewed and analysed for meanings and categorised into themes. Four major themes were identified, namely, understanding the concept of integrated naqli-aqli knowledge; implementation of integrated naqli-aqli curriculum; extracurricular activities; and interpersonal relations between students and staff. The participants had a clear understanding of the concept of naqli and aqli in relation to the philosophy and vision of USIM. They were also satisfied with the overall implementation of the integrated naqli-aqli curriculum. The strengths, weaknesses, opportunities and threats of the curriculum were identified. The findings of this study could provide insights on enhancing this unique curriculum. The study also indicates that integrating naqli and aqli knowledge is a viable approach in curriculum development.

Keywords: Student, perception, naqli-aqli, dentistry, curriculum.

1. Introduction

There are two modes of knowledge that are recognised in Islamic world, that is naqli and aqli knowledge. Naqli is an Arabic word that is commonly referred to as revealed knowledge. It is knowledge sourced from the Quran and hadith which is a collection of sayings of the Prophet Muhammad (pbuh) that provide the guidance for Muslims. The term aqli in Arabic is literally translated as acquired. It refers to knowledge based on the intelligence and rationale human thoughts. Universiti Sains Islam Malaysia (USIM) aspires to be the global reference centre for the integration of naqli and aqli knowledge by the year 2025. In the quest to achieve this goal, the University has formulated seven enabling strategies. One of the strategies is to develop naqli-aqli curriculum. It adopts a balanced approach in education through uniting the elements that meet the physical and spiritual needs. In developing its curriculum, the Faculty of Dentistry incorporates the principles of integrated naqli and aqli knowledge by adopting the Islamic ideological world view for pursuit of both rational medical/dental studies as well as Islamic medical/dental philosophy. The goal was to nature a balanced professional in dentistry who can provide meaningful contribution to society, nation and mankind. It is important to assess whether this curriculum that integrates naqli and aqli knowledge is capable of developing students the required proficiency in dentistry.
Recognising that a conducive dental curriculum plays a fundamental role in determining dental students’ behaviour, academic progress and sense of confidence, the Faculty of Dentistry, USIM started the process for a major revision of its curriculum. This involved an evaluation of the curriculum to obtain information from stakeholders including students. Dental students as a stakeholder is in an enviable position to provide relevant information concerning the effectiveness of the dental curriculum (Jain, 2010). Evaluation provides insight into course and teaching effectiveness and contributes to both student and programme success. (Henzi, et al., 2006).

Many studies on dental education considered the perspectives of faculty members, alumni and professional organisations (Pyle, et al., 2006). Very few studies considered the views of dental students on their undergraduate education (Henzi, 2005). However, the Faculty of Dentistry USIM had done surveys to get feedback from its undergraduates either from formal discussions or questionnaires. The surveys were conducted by the faculty staff and may lead the students to hold back their comments. The data collection on the implementation of the curriculum by one of their members promotes more open responses.

Relatively few studies have employed qualitative methods to explore the perceptions of dental students with regard to their learning experiences (Boyd, 2002). A qualitative approach offers several advantages, including the opportunity to collect data with greater depth not usually available from survey data and to more fully understand the thoughts, feelings, and experiences of participants. It also provides the ability to consider the responses in context (Meadows, Verdi & Crabtree, 2003). Thus, there is a need for data collection regarding student perception on the curriculum using the qualitative approach to obtain more extensive and intensive data.

The purpose of the study was to investigate the perception and understanding of the concept of naqli and aqli integrated curriculum among final year dental students at the Faculty of Dentistry, USIM. It includes identifying the strengths, weaknesses, threats and opportunities so that appropriate measures can be taken to ensure the programme is effective, efficient and adequately covered.

The Faculty of Dentistry USIM is still relatively new and there may be gaps present in the curriculum. This study is timely as the Faculty has recently completed the accreditation exercise and as part of the requirements of accrediting body, it has to conduct an evaluation of the programme. The findings of the study will provide the avenue to further improve the curriculum in line with the philosophy, vision and mission USIM.

2. Methodology

This is a qualitative study that adopted the phenomenology approach. This approach describes the meaning of participant’s experiences of a phenomenon according to what they perceive and understand. It is a subjective interpretation of a phenomenon. Purposive sampling was adopted. It was a non-probability sampling that focused on particular characteristics of a population of interest and objectives of the study.

This study involved Year-five (final year) students of the Faculty of Dentistry, USIM who have not failed in any of the professional examinations. This is to ensure that the participants were in the same cohort and have similar experiences in all stages of the curriculum. Year One to Year Four students, as well as those who repeated in any one of the years were excluded.

The first participant was selected based on his status in the leadership group of students. His exposure with the faculty and close relationship with fellow students provide a rich understanding of the curriculum and its implementation. Subsequently, snowballing technique was used to select the other
participants. In this technique, after the completion of interview, each participant was requested to recommend the next person who might have the knowledge and understanding of the curriculum and its implementation.

Data was collected until theoretical saturation was achieved, that is, no new themes emerge or new answer is gained. Semi-structured, face-to-face, in-depth interviews were conducted between October to November, 2016 at locations convenient to the participants. An undergraduate student who was trained in qualitative research and interviewing techniques, was responsible for conducting the interviews. To avoid potential bias caused by issues of trust, no one from the academia was involved in the interview process. Interviews were audio-recorded and transcribed verbatim. Each interview lasted for a period of 60–90 minutes.

Participants were asked on four fundamental questions on the curriculum, that is, understanding of the naqli and aqli integrated curriculum; strengths and weaknesses of the curriculum as well as opportunities for improvement. Additional questions were asked to gain better understanding of their responses. Raw data were coded manually.

Analysis of the data was conducted based on thematic approach. The approach involved three levels comprising of coding for meaning, coding for categories and classifying into themes. Initial analysis involved familiarisation with the issue; listening to the audio tapes together with reading the transcripts, making notes and highlighting issues of interest. Data were then indexed and charted with the thematic framework. Finally, data and themes were reviewed until association and explanations could be drawn from the definitive concept. Inductive method was used to analyse the data.

3. Result

The study involved six (6) participants out of 34 final year students (17%) of the Faculty of Dentistry, USIM enrolled in the 2016/2017 academic session. Four (4) themes emerged from the interview of the participants as listed below:

Theme 1: Understanding of the integrated naqli and aqli curriculum
Theme 2: Implementation of integrated naqli and aqli curriculum
Theme 3: Extracurricular activities
Theme 4: Interpersonal relations between students and staff

All the responses presented below were in accordance to the themes. The strengths and weaknesses of the curriculum will also be noted in the relevant themes. The quotes extracted from the interviews were indicated in the text in quotation marks.

3.1 Understanding of the integrated naqli and aqli curriculum

Responses by the participants on integration of naqli and aqli curriculum revolved around the concept of integration, differences between the term “naqli” and “aqli” and sources of naqli knowledge.

The participants perceived the concept of integration of naqli and aqli curriculum by describing it as “mixing”, “unity” and “outcome of a programme”.

“Integration is mixing, combining between two things to give a synergic effect”.

“Integration is unity of the Quran and scientific basis, for example relate whether the use of dental crown is lawful in Islam”.

“It is about implementing Islam in our career. The values the dentist need to have as a Muslim practitioner”
Naqli knowledge was thought to be related to religious and spiritual affairs. On the other hand, aqli knowledge were considered to be derived from human thoughts and worldly knowledge.

“Aqli knowledge talk about world. Naqli knowledge is related to the religion”.

The participants identified the sources of naqli knowledge in hierarchical order from the Quran, authentic hadiths (narrative of words, actions, or habits of the prophet Muhammad pbuh), ijmak and qias. One of the participants qualified that ijmak (concensus of theological opinion) and qias (deductive analogy) was a component of aqli knowledge based on personal or group interpretation of quran and hadiths.

“Naqli come from upper one which is Allah. In Islam there are four main sources which are quran, hadith, ijmak and qias. Ijmak and qias is from aqli part.”

One of the participants succinctly described integration of naqli and aqli curriculum by putting together the elements of integration, differences between naqli and aqli and sources of naqli.

“Naqli is anything Allah say in the quran and based and hadith of prophet pbuh. For the aqli, it is scientifically proven research or opinion. In Islam we integrate these two components, all must have integration based on quran and logic and quran must be accepted by human since it is Allah’s rule. Basically in Islam we refer to Quran, then hadith, then the ijmak ulama and lastly qias”

3.2 Implementation of integrated naqli and aqli curriculum

Implementation of the curriculum can be organised into four sub-themes: the curriculum content that includes dental core courses and Islamic-based courses; curriculum process; the environment of the dental faculty and the clinical experiences.

a) Curriculum Content

It was highlighted that one of the approaches in integrating naqli and aqli knowledge for the curriculum in the Faculty of Dentistry USIM was to design dentistry courses running in parallel with Islamic-based courses. The participants identified several dentistry courses and some of the Islamic-based courses as the content of the curriculum.

“Apart from learning dentistry courses such as Conservative Dentistry, Prosthodontic, Oral Surgery, Behavioural Science and lots more, we also learn Islamic courses such as Fikh Medicine, Hadith, Akhlak, Fundamental Islamic Knowledge, Memorisation of Quran and others”. “It really helps me to become Muslim dentist”.

Both groups of courses attempted to relate to the other group of courses in the effort to integrate the naqli and aqli knowledge. The benefits of these courses and the weaknesses in implementing them were also highlighted by the participants.

i) Islamic-based courses

“The Fundamental Islamic Knowledge courses have the best integration of naqli-aqli knowledge. It trained us how to balance between our professional job and the religion.”

“We learned whether the material that we used is halal or haram.”
“We were taught on maqasid syariah and we can relate this to the treatment we are providing.”

“Memorisation of Quran is good since it makes students nearer to Allah. We can reflect on ourselves. The surah that we memorise is sometimes related to our lives as dentists and also to become good Muslim”.

“We learned Quran and its meaning per verse, the story regarding the verse”.

“We learned the History of Medicine in Islam and controversial issues regarding medical treatment”.

“In Fikh medicine we did the discussion regarding controversial issues in medical and some dental part. For example, is it permissible in Islam to do dental makeover, because it is changing Allah’s creation? We learned how to make decision for that treatment”.

ii) Dentistry courses

“Dentistry courses “teach us how to integrate naqli and aqli knowledge, such as in case of making treatment plan. Some patient come to clinic with solely for aesthetic purpose. We need to refer to religion whether to do treatment based on patient demand or based on maslahah. With naqli and aqli knowledge it is good to explain the important thing to the patient.”

“In Prosthodontics we discussed on Islamic perspective of treatment whether it is permissible or not.”

“Islamic opinion was discussed in the treatment of malocclusion and in cosmetic surgery”

“In behavioural science, it taught us good ethics and behaviour so that we become good Muslim dentist.”

“I think all courses have integration.”

“All lecturers talk about Islamic perspectives”

b) Curriculum Process

The process of integration were implemented through the use of a variety of teaching-learning methods such as lectures, seminars and assignments.

“In lecture we are not really exposed to this Islamic part. However, there is addition of the assignment.”

“We also have seminar, for example Community Dentistry. It is one of the courses that have good integration. I think the course really stressed on Islamic integration.”

“Most of the dental subjects have an assignment which the students need to give the opinion from the Islamic perspective about the cases or the problems. So in this way, the student can relate this with Islamic and science.”
Nevertheless, there was the downside of implementation of the assignment. A participant raised his concern on this matter.

“The lecturers give assignments regarding the Islamic opinion in dentistry, but we did not really understand whether we are doing right or wrong since there is no feedback from the lecturers after that”

There were concerns raised by the participants with regard to the ability in understanding certain subjects because of the language barrier, lack of explanation from lecturers and teaching methods. The participants also offer suggestions for improvement.

i) Tafseer

“In tafseer class, we were able to understand the meaning. But for presentation of tafseer for surah I don’t think it is effective. Yes, we can find the meaning in books but sometimes we did not understand the true meaning, I think it needs to be explained more so that we understand more”.

“Presentation is regarding the tafseer of the surah that we memorised, we as students did not really understand the real meaning regarding the surah so I think it would be better for ustaz/ustazah explain about the tafseer”.

ii) Halaqah

“During our first year we had Halaqah subject which we learned that subject in Arabic and we do not really understand”. “I think it would be better for those to be taught with English so that it would be more understandable than Arabic”.

iii) Fikh Medicine

“Fikh course teaches us a lot of history of medicine including the establishment of the hospital in Islam. I think this subject stressed on the history of medicine. There is too little relation to our field, dentistry. The discussion and presentation in the Fikh medicine is too broad and not detail on dental part.”

“This subject need to do improvement, the systematic syllabus might be constructed so that we learn more about dentistry”.

c) The Environment

The participants described that they experienced being in an Islamic surrounding when they were at the Dental faculty, USIM. The environment at the Faculty was largely the result of the practice of the core values that included trustworthiness, responsibility, cleanliness and timeliness as principal values as well as decent dress code. These values were supported with conducive environment in terms of adequate and modern equipment and facilities.

“The environment in this faculty is Islamic. Whereby we can leave our valuable things in the class and it is safe.”

“From my experience, I can see that sometimes we implement the integration [naqli-aqli] in the clinic like timeliness and cleanliness. We as Muslim, we need to be punctual as time is very important”.
“The dress code was good whereby student is covering aurat. “

“Our facilities are good. We are able to provide good treatment to the patients. We have x-ray machines, good dental chairs.”

“It is nice because we have enough equipment and we have a lot of advanced apparatus here. The lecturers were good with the students”

d) The Clinical Experiences

The participants also described their clinical experiences whereby the values of trustworthiness, responsibility, timeliness and cleanliness were emphasised.

“Previously we are given permission to take the materials and the apparatus that we need and we are given trust to take care of these things. It trains us the value of responsibility. In Islam we are taught to be trustful. Trustworthiness is stressed in the clinic. Now the system is changed to request system whereby student need to write application form and the staff will pick up the instrument and after the clinic has finished we need to check the instrument with the staff.”

“I don’t have issue with the clinic. The lecturers come early to supervise us. The material is adequate. We have to order the instruments first and it is different from before whereby we can take the apparatus by ourselves. It is good to monitor the instruments to avoid loss of instrument”.

“In clinical session, we have to do good dental practice. For every treatment we have done, we need to take the signature in less than two weeks.”

In addition to other values, the participants also highlighted the aspect of muhasabah that was also incorporated in their clinical assessment.

“We have clinical logbook for each subject, and we need to evaluate and give mark to ourselves before the supervisor give mark to us. We also have the reflection part at the end of the semester. We need to reflect ourselves whether we are doing good or bad”.

There were some weaknesses experienced by some of the participants during their clinical practice, such as transient shortage of materials, relationship with support staff and procedures in allocation of specific cases.

“The facility is good but sometimes we have shortage in the material. Sometimes we lack alginate or zinc oxide eugenol impression material, so we cannot do the impression that day.”

“For dental materials, we were always scolded for using a lot of materials for treatment. If the cavity is big, of course we need to use a lot of materials, but the staff scolded us for taking a lot of materials. He thinks that we wasted the material.”

“Extraction patient is really in shortage now, we need to compete with our friends in the Year 3 and 4.”
“I also think that the ordering folder system two days early is good but sometimes we need to need to take another folder because the patient supposed to come to the clinic is not coming. We were scolded for taking the folder late. Some of the lecturer were very strict we cannot do the treatment without the folder of patient.”

3.3 The extracurricular activities

Respondents agreed that extracurricular activities either planned by faculty or students’ club could help nurture and promote quality values, including leadership among them. They felt the Faculty provided them the opportunities to be creative as long as the activities were within the confines of Islamic requirements. The respondents believed that extracurricular activities strengthen the bond among students and staff. At the same time, they can give contribution to community by participating project community.

“We have a lot of activities in this faculty, such as dental sports tournament, sharing moments and national dental student scientific conference. When we do these activities we are taught on responsibility. Apart from that, we know how to become a leader to other people”

“There were a lot of activities. The Dental Students’ Club (DSC) had done a lot of activities, such as sports, Islamic appreciation night and also cultural activities. So, we do not feel stressed or bored being here. This year DSC organised dental sports tournament and this involved the staff and also the students. More or less it helps to nurture good relationship between us and staff. It is also important so that we have good health. Every two years we have seminar and practical on Islamic slaughtering and management of deceased person. It is really good since we as Muslim need to know how to do these thing. We also have hiking programme and recently we conquered Gunung Ledang”

3.4 Interpersonal Relations between Students and Staff

The staff referred to by the respondents in this study were the support staff. They include Dental Surgery Assistants, Dental Technologist and Dental Attendants. There were some good and bad experiences described by the respondents in their relationship with the staff. They found that some staff were supportive and whilst some other staff were thought to require a change in their attitude with regard to their relationship with students. The respondents appreciated the assistance of the staff if the problems that they faced in the clinics could be fixed as fast as possible so that it would not interrupt their clinical sessions. The respondents also indicated that the students appreciated the assistance provided by the Dental Technologist. Nevertheless, the respondents were concerned with the lack of communication skill from the front desk personnel. The following direct quotes from dental students illustrated the positive and negative experiences in their relationship with the support staff.

“The lecturers and the staff were good. They really helped us when we have problems. When my dental chair is broken the staff will try to repair it for us and I appreciated their help so much.”

“Alhamdulillah all the lecturers were good, they helped us a lot. The Dental Technologists also helped us a lot in doing dentures”.

“Some of the staff need to improve their behaviour.”
“The front desk personnel, sometimes were good, most of time she was not” “They were not talking to the students in a nice way”.

4. Discussion

This qualitative study used the phenomenology approach as a research methodology to explore students’ experiences in an undergraduate programme. This programme used the integration of naqli and aqli knowledge in the design and implementation of the curriculum. The development of a holistic curriculum that attempted to integrate naqli and aqli knowledge was a great challenge to Faculty of Dentistry USIM since there were no other similar curriculum models in dentistry or other programmes that could be adopted or adapted. The focus of the curriculum was on ‘Balanced Professional in Dentistry’, derived from the principle of wasatiyyah that refers to being justly balanced in the practice of all aspects of human activities. The approach taken by the Faculty was to ensure equilibrium in the physical, intellectual and spiritual aspects, not only in the pursuing the academic programme, but also in extracurricular activities.

The focus of the study was the perception of final-year students on the implementation of the dental degree programme. Students’ views of their educational experience can be an important source of information for curriculum evaluation. Research suggests that students’ perception should be considered in any discussion of their education. This led to increasing awareness that students’ views of their educational experiences are important in transformation of the educational process. (Victoroff & Hogan, 2006). Nevertheless, relatively few studies have employed qualitative methods to explore dental students’ perception of their learning experiences.

The interview by respondents were conducted by a fellow student who were trained in the interview technique. This approach eliminates the barrier in providing the information as compared to the interviewer being the teaching staff. It appeared that the students, as participants of the interview, were more comfortable and speak more candidly when interviewed by a fellow student researcher. Diverse aspects of the curriculum that were identified by the student researcher from their follow colleagues. The information obtained can provide additional input to previous findings of curriculum evaluations conducted by the teaching staff of Dental Faculty.

The participants were final-year students and have experienced various activities of the programme. Therefore, it is explicable that their responses to the interview indicated a clear understanding of the concept of integration of naqli and aqli knowledge that formed the basis of the curriculum design of the Bachelor of Dental Surgery, USIM. They also regarded the curriculum were good in terms of providing suitable facilities, modern equipment and adequate clinical experiences. This finding is consistent with the conclusion of a study by Coelho & Moles (2015) that senior students appreciate and better understand the curriculum.

Understanding the concept of integration of naqli and aqli knowledge is also essential in shaping their thoughts on the strengths and areas of concern inherent in this unique curriculum. The responses obtained were analysed qualitatively and the results obtained were mainly positive in nature. A number of strengths were recognised, a few weaknesses were noted, several opportunities for improvement were suggested and a threat to the implementation of this curriculum was identified. This is contrary to the wide known belief that, in general, dental students are not satisfied with their experiences in their undergraduate studies because of the stressful learning environment (Henzi, et al. 2005).

4.1 Strength

A major strength of the curriculum that was identified was the integration of sciences: basic science, clinical science and human science. The elements of human science are behavioural science and
Islamic-based courses as enumerated by the respondents in the section on result. The integrative conduit to this integration is the use of four elements in the curriculum process namely “Ayatisation” (Al-Nusus); Comparison (Al-Muqaranah); Adaptation (Al-Taqyim) and Integration (Al-Tafaqquh). These elements facilitate the fulfillment of the goal of education, that is to develop students to be a good person and in the context of dentistry, a safe practitioner who is able to practice independently for the ummah (Wan, 2015).

The course on memorization of quranic verses was considered as a distinctive feature of the programme. It was felt that this course should be maintained as it provides guidance to attainment of values and actions. Hamjah (2012) expressed that the spiritual aspect related to emotion such as *tawakkal*, performing prayers, reading Quran and *muhasabah* (self-reflection) are important in influencing motivation in learning through development of their capability to deal with and control their emotions and thoughts. He further reiterated that spiritual practice can encourage and motivate a person to abandon negative qualities such as despair, anxiety and sadness while persistently working hard in their quest to succeed.

Dental schools face the challenge of teaching students not only the essential clinical knowledge and skills but also competencies related to patient- and community-centered care. In this integrated *naqli* and *aqli* curriculum, the students identified the use of a number of teaching methods that include didactic as well as student-centred teaching learning approaches as a strength. The curriculum adopts the principles of outcome-based education (OBE) that emphasised on student-centred learning. These student-centred learning approaches were highlighted by the participants of the interview. Another approach that forms an integral part of learning process is the implementation of blended learning that combined the use of classroom teaching-learning method with online digital media.

The environment at the faculty was described as conducive for learning and consistent with the values of trustworthiness, responsibility, cleanliness and timeliness as core values of the Faculty. Students have full excess to clinical materials for patient care and are responsible for all the instruments used for the patients. These values are emphasized in their patient-care activities in the dental clinic.

The participants indicated that the teaching staff (lecturers) was good. They appreciated the effort of the lecturers involved in dental courses to implement the concept of integrating *naqli* and *aqli* knowledge in their lectures, seminars, assignments and take home messages. They attempted to link Islamic principles in the practice of dentistry. The participants particularly appreciated the lecturers who were willing to share their knowledge, skills and insights while involving them in the clinical experience. This experience set the scene for a warm, supportive and positive learning environment. They described how staff-student relationships had an impact on their sense of confidence, the quality of their clinical experience and their learning process. This support is important because according to Alzahem et al. (2011), the main stressor for the clinical students is the clinical training, particularly factors relating to meeting clinical requirements.

The concept of *muhasabah* is used in self-assessment by students both in clinical as well as non-clinical setting. The clinical logbook applies the concept of integration of *naqli* and *aqli* by incorporating the aspect of (*muhasabah*) in performing clinical procedures and after completing the clinical session. It is a process of evaluating and appraising oneself to ensure that they continue to be better through their ability to identify their weaknesses and overcome them. It can become a routine activity of a student and part of *ibadah* while learning. They can be nurtured to become a better person. It also provides avenue to develop their ability to assess their clinical work independently and in congruent with the goal to produce safe practitioners who are able to practice independently and infused with Islamic values (Wan, et al. 2013).
Dental schools are expected to maximise students’ potential by offering high quality extracurricular experiences. One of the roles of a dentist in society is to provide leadership in the field of dentistry. As students and graduates from the Islamic based educational institution they are also expected by society to assume the leadership role in Islamic religious activities. They are expected to have the ability and confidence to lead the congregations in prayers, leading the citation of supplications and other related activities. By organizing extracurricular activities, it can enhance their soft skills with emphasis on Islamic worldview (Wan, et al. 2013).

4.2 Weaknesses

One of the weaknesses in the implementation of the curriculum identified was that the Islamic-based courses were focused on merely dissemination of theoretical content. These courses were seen to have the limitation in their linkage with dentistry.

Positive staff-student relationships are crucial for students to feel accepted, included and valued which is an important influence on students’ experiences of belongingness and their clinical learning (Levett-Jones, et al., 2009). Conflict and misunderstanding between supporting staff and students should be avoided to provide a positive clinical environment in the faculty by improving their communication skill.

4.3 Opportunities for Improvement

The participants considered that the teaching method employed by certain Islamic-based courses need to be improved. The course need to be organized to be more interesting so that they can see the relevance of these courses to the overall curriculum, practice of dentistry and professionalism.

One of the teaching-learning activity in integrating naqli and aqli knowledge is to give assignments to students on specific topics that link Islamic principles with dentistry and dental practice. The participants recognised the importance of assignments as part of the student-centred activity. However, it was felt that assignments given by lecturers in relation to linkage between dentistry and Islam need to be followed-up with plenary discussion in order to have better understanding of the subject matter.

4.4 Threat

A threat to this curriculum is the view that the course “Halaqah” be conducted in English rather than in Arabic. The students have the necessary prerequisites in Arabic language to be able to read, write and speak in Arabic. They should be able to continue with the use of Arabic language in order to improve their proficiency. Changing the medium of instruction for this course, is contrary to the overall aspiration of the USIM for their students to be proficient in Arabic and English.

5. Conclusion

Students are stakeholders of the curriculum but studies on perception of students tend to be conducted by teaching staff as researchers. This study on perception of final year dental students on integrated naqli and aqli curriculum was conducted by a trained student researcher. It eliminates the element of reservation among the participants. The study revealed a wide-ranging candid perception on the strengths, weaknesses, opportunities and threat of the curriculum. It appears that the students were satisfied with aspects of their overall experience in going through this five-year programme. Although the sample size appeared to be relatively small, these findings could provide insights on enhancing this unique curriculum. This study indicates that integrating naqli and aqli knowledge is a viable approach in curriculum development for professional courses.
References


