

Perception and Response of Religious Leaders in Precaution Transmission of COVID-19 Through Handling and Burial of Dead Bodies in Indonesia

Nurhayati (✉ nurhayati@uinsu.ac.id)

Faculty of Public Health, Universitas Islam Negeri Sumatera Utara, Medan, Indonesia

Tri Bayu Purnama

Faculty of Public Health, Universitas Islam Negeri Sumatera Utara, Medan, Indonesia

Research Article

Keywords: Handling and Burial of Dead Bodies, COVID-19, Islamic Ulama, Perception

DOI: <https://doi.org/10.21203/rs.3.rs-71146/v1>

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Abstract

One of the roles of religious leaders/ulama that can prevent the transmission of COVID-19 is education and socialization in the process of handling and burial of corpses. The varying practice on handling and burial of corpse in the community, as well as different perceptions of each cleric, are factors that hinder the implementation of the corpse handling and burial protocol with the COVID-19 procedure. This study aims to understand the differences in perceptions and responses of ulama in the process of handling and burial of dead bodies in Indonesia. This study interviewed 6 prominent ulama figures in each of the significant Islamic religious organizations in Indonesia as representatives of each practice of handling and burial of corpse. The case study research design with a structured interview guide was carried out by telephone in the COVID-19 pandemic. Data analysis was carried out with content analysis to classify variations in perception and response to the corpse handling and burial process with the COVID-19 procedure. All scholars interviewed in this study were men over 40 years of age and understand that the COVID-19 procedure in handling and burial of dead bodies can reduce the potential for disease transmission even though some clerical figures argue that there is a difference in opinion between ulama and the COVID-19 procedure. All scholars / religious leaders say that the handling and burial of the dead body using the COVID-19 protocol must be carried out by considering the possibility of disease transmission. However, some have adjusted the procedure to the religious values held by the organization. Comprehensive socialization and coordination can reduce misperceptions and misinformation in the process of handling and burial for corpses with the COVID-19 procedure so that the carrying out of handling and burial of dead bodies can prevent new COVID-19 clusters in the community.

Introduction

The COVID-19 pandemic is still a global health problem and requires comprehensive control in breaking the chain of transmission (WHO, 2020; Xinguang & Yu, 2020). The development of disease originating from animal to animal (zoonosis) and the latter has developed into the human-to-human transmission with a speedy (exponential) spread of cases (Gao et al., 2020; Weiss & Murdoch, 2020). As of April 30, 2020, the number of confirmed COVID-19 cases in Indonesia was 10,118 in 34 provinces throughout Indonesia, with 792 cases that died with a diagnosis of COVID-19 (Indonesian COVID-19 Task Force, 2020). The number of cases is enormous in dynamic geographic and social conditions so that formulating the control of COVID-19 is very comprehensive, including the approach of religious leaders/scholars.

Indonesian government carries out a religious approach through religious leaders/ulama as one of the COVID-19 control programs (Indonesian COVID-19 Task Force, 2020). This program is due to the influence of religious spiritual activity in the pattern of disease transmission and plays an essential role in public education in certain religious groups (Charzyńska, 2015; Hall, Meador, & Koenig, 2008). Several research results show that the opinions of ulama are taken into consideration in making decisions in the health sector such as Hajj and Umrah in Islamic religious groups with the spread of disease so that Hajj and Umrah pilgrims in Saudi Arabia are required to have certain vaccines to be allowed to carry out

religious activities in that country (Ahmed, Arabi, & Memish, 2006; Memish, Stephens, Steffen, & Ahmed, 2012; Memish et al., 2014; Pane et al., 2019). In addition, a religious approach is also carried out for persuasive methods of behavior change in health problems such as HIV-AIDS (Cotton et al., 2006; Gray, 2004; Noden, Gomes, & Ferreira, 2010; Zou et al., 2009), mental health (Koenig, 2009; Moreira-Almeida, Neto, & Koenig, 2006), and nutrition (Persynaki, Karras, & Pichard, 2017; Trepanowski & Bloomer, 2010). The religious approach method is considered effective in increasing public knowledge through religious leaders with a central role for religious leaders (Rivera-Hernandez, 2014; Cyphers, Clements, & Lindseth, 2017).

As of 30 April 2020, the Government of Indonesia reported that there were 792 deaths due to COVID-19 in 34 Provinces (Indonesian COVID-19 Task Force, 2020). The Indonesian government, through the Ministry of Religion and the Ministry of Health, has stipulated regulations for treating bodies with the COVID-19 procedure. Based on this, the number of reports of public rejection of bodies buried with the COVID-19 procedure had increased as a result of this procedure being different from burials of bodies in cases of death before the pandemic occurred. The COVID-19 procedure, which was not following religious and cultural values carried out in the conditions before the pandemic was the reason for rejection that happened in the community ((Richards et al., 2015). This rejection was exacerbated by the practice of handling and burial of corpses in Indonesia, which were carried out independently in communities that had diverse and influenced by perceptions and inaccurate sources of information (Purnama, Khadijah, & Sadri, 2020). The concept of religion in placing the body as the last respect makes the handling and burial of dead bodies using the COVID-19 procedure to be a controversy. A lot of misinformation has spread in the community regarding the implementation of burial services with the COVID-19 procedure in the community and religious leaders; therefore, it has an impact on the rate of spread of COVID-19, which clashes with the COVID-19 control strategy. This study aims to investigate understanding the differences in the responses of scholars to the handling and burial of dead bodies of COVID-19.

LITERATURE REVIEW

Religious Figures in Islamic Perspective

Religious figures or so-called scholars come from the Arabic word 'alima, which means having had known (Ma'luf, 1977). Ulama is anyone who knows and in any discipline that knowledge (Shihab, 2009). The use of the word 'ulama ' is not only attached to someone who understands morals, hadith, tawhid, jurisprudence, or religious sciences but also connected to various people who understand the natural and social sciences such as people who study economics, medicine, science, and technology. This definition is supported by the word of Allah in Surah Fathir (35): 28: *"And likewise (also) among human beings, animate moving creatures and livestock are of various colors (and types). Among Allah's servants who fear Him, only the scholars. Indeed, Allah is Mighty, All-Forgiving"*. The definition of ulama in verse is ulama in the field of natural sciences because they know the real power of Allah in nature (Sya'rawi, 2011).

A scholar must be a role model and leader in his community, as achieved by the Prophet Muhammad SAW in leading Muslims. In Islamic teachings, there is no need for separation between scholars and the government (*umara*). The two of them must be able to work together in building and realizing the benefit and welfare of the people, especially in the condition of COVID-19. Their roles are needed to provide understanding and education to the people about the dangers of spreading COVID-19.

Handling and Burial of Dead Bodies in Islam

Muslims have an understanding that Islam has its concept and value in handling and dispose the corpse. Muslims understand that properly handling and burial and in accordance with Islamic law is part of the process of respecting and honoring humans so that it makes the treating of bodies very crucial (Al-Shahri, Fadul, & Elsayem, 2007). The community understands that starting treating the body from the stage of washing the body to being buried has been regulated in Islamic teachings reflecting respect for the corpse and getting rewarded for helping the body's treating (Richards et al., 2015).

The stages of treating the body are starting from bathing the body are *fardhu kifayah* (compulsory for a group of Muslims to carry it out). Bathing the body is done by the closest family who understands the process of washing the body. After the body is washed, the next process is to wrap the body with a long white cloth according to the rules taught by the Prophet Muhammad in his hadith: "*If one of you covers (kafani) his brother, let him shroud it properly*" (Narrated by Ahmad, Muslim, and Abu Daud of Jabir). To pray for the corpse is the next stage. It is to pray for the body and get a reward for those who pray and for the body that is prayed. Burying the corpse is the last procession of the corpse review. The hadith, which is the legal basis for this is "*Whoever witnesses a corpse so that it is prayed for, and then he gets the reward of one qirath. And whoever witnesses it until it is buried, then he will be rewarded with two qiraths. He was asked: "What are the two qiraths?" The Prophet replied: "Like two big hills"*" (Narrated by al-Bukhari and Muslim, from Abu Hurairah) (al-Zubaydi, n.d).

Each series of handling and burial of corpse has a profound message and value for Muslims; therefore, the process of treating the body is carried out as well as possible. Besides, social responsibility for living Muslims is a consideration in the analysis that is carried out. Then, handling and burial of the corpse become a spiritual activity that has become a culture in Indonesian Muslim society.

The Opinion of Ulama Regarding the Handling and Burial of Dead Body in an Emergency Condition

In the process of handling and burial of the body in normal conditions, the processing of the corpse is carried out following the teachings exemplified by the Prophet Muhammad. In cases of emergency conditions such as victims of death due to natural disasters, disease outbreaks, and other emergency conditions. The process of handling and burial of the corpse is carried out by considering the aspect of minimizing the dangerous impact on humans and being equalized with martyrdom (Ahmed Al-Dawoody & Oran Finegan, 2020). There are several exceptions in the process of handling and burial of the body in an emergency, including the COVID-19 condition, which allows the transmission of the case. The determination of exceptions in the process of handling and burial of the corpse takes into account the

opinions of the scholars. Bathing the body can be done in tayammum by considering aspects of the sharia, and the main thing that has to be done is to clean the unclean things (najis) that are attached to the body. If it is based on medical considerations that the body can not be washed, and it is possible to endanger the person washing it, then the body does not need to be washed or tayammum. It is based on the provisions of the syar'iyah dharurat (Sukaina Hirji, 2020; al-Zuhaili, 1984; The Republic of Indonesia Ministry of Religious Affairs, 2020b)

Al-Syinqity (n.d) in the book *Syarah Umdah al-Fiqh*, states that someone who dies due to illness and disease can spread to other objects by proving the testimony of experts who are has experienced in their field. If the deceased is bathed it will directly give harm to others, and then the dead is done tayammum. Tayammum with dust, by stomping the palms of the hands that wash the corpse on the ground, then wiping it over the face and hands of the deceased. Imam Nawawi (n.d) raised the same opinion in the book *Syarh al-Muhadzab* and al-Dimyathi (1997) in *I'alah al-Thalibin*, who argued that when you get old or have difficulty in bathing the deceased because of running out of water or other reasons, it is obligatory to tayammum it.

Muhammadiyah Ulama, through Muhammadiyah Central Executive Circular Number 02 / EDR / I.0 / E / 2020 Regarding Guidelines for Worship in Emergency Conditions of COVID-19, stated that: "Treatment of the bodies of Covid-19 patients from death to burial is carried out according to standards health protocols issued by the authorities. If it is emergency and urgent, the body can be buried without being bathed and shrouded to prevent the person who handles the dead bodies from being exposed to Covid-19 with the consideration of the principles of sharia law that Allah does not burden His servants except as far as he can do what the Prophet ordered carried out according to ability. There is no fading, fading must be eliminated, difficulties in providing convenience, urgency is equated with emergencies, and mortality is limited according to its level, and preventing harm takes precedence over bringing about maslahat. The obligation to bathe and wash the body is a law in normal conditions, while in an abnormal condition, an emergency law can be applied. An occult prayer in each house could replace the implementation of the burial prayers. The takziah activities are carried out on a limited basis by paying attention to matters related to the prevention of Covid-19 or carried out online".

Ulama Nahdlatul Ulama, through the Bahtsul Masail Institution of the Nahdlatul Executive Board (LBM PBNU) released the fiqh of handling and burial of dead bodies of COVID-19 patients: first, people who die because of the coronavirus are martyred. Second, the position and treatment of the corpses of victims of the coronavirus are the same as those of Muslims in general, namely that they must be bathed, shrouded, and buried. Third, how to wash the bodies of COVID-19 patients by using equipment that can prevent transmission of the disease, fourth, for protocol or extra technical, extra confinement of the bodies of COVID-19 patients, and their burial must follow directions from medical experts (kalam.sindonews.com).

In general, the procedure for shrouding of a corpse exposed to COVID-19 can be carried out as follows: After the body is bathed or tayammum, or because the dharurah syar'iyah is not bathed or tayammum, the body exposed to COVID-19 can be shrouded with a cloth covering the entire body. The body is placed

in a safe and impermeable body bag to maintain the safety of officers and prevent the spread of the virus (The Republic of Indonesia Ministry of Religious Affairs, 2020b). After the process of shrouding of the body is complete, the body is then placed in a coffin that is not transparent to water and air by tilting it to the right. The body exposed to COVID-19 must face the Qibla when buried. If, after the process of shrouding the body is still found unclean, then the officer can ignore the unclean thing.

Praying the body is *fardhu kifayah*. The procedure for carrying out the burial prayers for the corpse exposed to COVID-19 is to hasten to pray after the body is shrouded because this is sunnah. Prayer for the body exposed to COVID-19 should be done in a place that is safe from transmission of COVID-19 and carried out by at least one person. If conditions do not allow, the body exposed to COVID-19 may be prayed for in the grave before or after burial. If this is not possible, then the body may be prayed from afar or what is called “unseen prayer”. However, it is no less important to pay attention to people or parties who pray for the body exposed to COVID-19, must be vigilant and guard against transmission of COVID-19 by paying attention to the health protocols established by the government.

The procedure for burying a corpse exposed to COVID-19 has been regulated in the Fatwa of the Indonesian Ulema Council (MUI) Number 18 of 2020 concerning Guidelines for the Management of the Body (*Tajhiz al-Jana'iz*) of Muslims Infected with COVID-19 and Circular of the Minister of Religion of the Republic of Indonesia Number P- 002 / DJ.III / Hk.00.7 / 03/2020 the Year 2020 concerning Appeals and Implementation of the Protocol for Handling COVID-19 in Public Areas in the Directorate General of Islamic Community Guidance in the fourth point explained about the Appeal to Implement the Protocol for the handling and burial of bodies exposed to Covid-19. The burial protocol is a little different from the ordinary burial. Based on the MUI Fatwa, the burial of bodies exposed to COVID-19 must be carried out following the provisions of Sharia and medical protocol. The bodies that have been processed before are handled according to medical regulations. After that, the bodies were immediately put together with the coffin into the grave without having to open the coffin, plastics, and shrouds of the COVID-19 body. Burial of several corpses in one cemetery is allowed because it is part of *al-dharurah al-syar'iyyah* or an emergency condition as regulated in the provisions of MUI Fatwa Number 34 of 2004 concerning the Management of Bodies (*Tajhiz al-Janaiz*) in Emergency Conditions.

Burial sites for people exposed to COVID-19 must be at least 50 meters from sources of groundwater used for drinking. The cemetery location must also be at least 500 meters from the nearest settlement. The body of Covid-19 must be buried at a depth of 1.5 meters and then covered with soil as high as one meter. If all procedures are carried out properly, the family can participate in burying the body and must wear personal protective equipment (MUI Fatwa No.18 of 2020). Handling of Covid-19 in public areas, the critical point is still carried out according to sharia provisions and medical procedures, the body is inserted into the burial ground without having to open the chest, plastic, or shroud, or burial can be done in a public place. In this case, the cremation of the body is not necessary, because burying the body according to the established procedure does not endanger the surrounding residents (SE Minister of Religion of the Republic of Indonesia Number P-002 / DJ.III / Hk.00.7 / 03/2020 the Year 2020).

Methods

Study Setting

The case study research design was used in this research to determine the perceptions and responses of religious leaders on the issue of handling and burial of the dead body exposed to COVID-19. This study explores information from the perspective of religious leaders/scholars in various community organizations. The views of religious leaders explain their understanding related to the concept of handling and burial for corpses following the opinions of their organization and how to respond to community rejection in handling and burial the corpses in the community. Then, deepening the issue was carried out with the potential for public education in stopping the spread of COVID-19 in the community.

Participants

The research participants were charismatic religious figures in religious community organizations. Religious leaders are scholars who play a role in the leadership of religious organizations and mobilize regional ulama figures who are in community organizations to preach/educate the grassroots of the organization. The span of control of religious organizations from the central management to the grassroots in society is the reason religious leaders play a very crucial role in the process of monitoring bodies in the community both in the conditions before and during the COVID-19 pandemic.

There are six religious leaders/ulama in which one person represents a religious organization. The age range of participants involved in this study was 40-70 years. All participants were men with the latest education of all participants were masters and doctors in law and Islamic studies. Although the number of research participants is limited to the leadership of religious leaders/ulama and it has the potential to bias the results of research, however, this research can be an adjustment to the perceptions and responses of scholars in the process of organizing bodies in the COVID-19 pandemic. It also has implications for necessary information in the development and empowerment of community education in understanding the psychological condition of the community in the process of handling and burial of bodies during the COVID-19 pandemic.

Collecting data with interview techniques provides the opportunity to get more valid data than the data collected by questionnaire through closed questions and answer choices have been determined. Besides, deepening answers using this approach is more effective and efficient than using a questionnaire. However, research using this interview technique has limitations in generalizing the findings to a larger group with a small number of participants.

Data Collection

Researchers apply for research permits at religious organization institutions. Religious organizations approved to participate in research by assigning religious leaders in each organization according to predetermined criteria. Data collection was carried out by in-depth interviews via telephone to all participants. The telephone media was used for this research by considering the conditions of the COVID-

19 pandemic in the research area. All information provided by the participants is recorded directly by the interviewer in the researcher's notes and completed with a verbatim that comes from the recorded interviews conducted.

Research Instruments

The structured interview guide in the study was arranged on three themes. The first theme relates to the identity of religious figures from each community organization, such as age, gender, the latest education, Islamic organizations. The second theme explains the perceptions of religious leaders in handling and burial of corpses in emergencies and the sources of information they get from the public in carrying out the handling and burial of bodies. The perceptions of religious leaders studied in this study are the views and fatwas of scholars from organizations in handling and burial of bodies during the COVID-19 pandemic and the coordination line. The third theme contains responses and solutions that can be carried out to reduce differences in understanding and reactions to scholars regarding handling and burial corpses with COVID-19. Scholars and communities can adapt the COVID-19 procedure to local religious, social, and cultural values. All participants received an explanation of their consent letter as a participant of the research and volunteered to participate in this study.

Data Analysis

Researchers conducted in-depth interviews by telephone in this study. They equipped themselves with a recording device to make an inventory of all the answers and responses given by the participants. They recorded all answers in verbatim and processed the data with an interview matrix as material for further analysis. Data analysis uses content analysis to understand the perceptions and responses given by participants and deepen existing equipment. Using content analysis is because the variation in answers from each participant / religious organization is quite high so that each answer has a different pattern of answers. For answers that tend to be the same/similar, the researcher provides a unique code for perceptions and responses, which will then calculate the percentage of the answer. This study has received research ethics approval from the Faculty of Medicine, Islamic University of North Sumatra, Indonesia.

Results

Demographic Characteristics and Knowledge of Participants in handling and burial the bodies with Covid-19

All ulama interviewed in this study were men over 40 years old. Ulama plays a role as a leader in each of the religious organizations in society, such as Nahdatul Ulama, Muhammadiyah, Al-Wasliyah, and also the Provincial Council of Indonesian Ulama. Ulama figures understand that the COVID-19 procedure in handling and burial the body can reduce the potential for disease transmission even though some religious figures argue that there is a difference in opinion between scholars and the COVID-19 procedure.

"If we pay attention to developments so far, the COVID-19 protocol for specific funerals does indicate that people who are exposed to Covid-19 can still transmit it when they have died through a touch of a living person who is informed 3-5 hours after death. "(Participant 3, Male 61 Years old).

"I don't understand this; In the initial discourse that was spread there were differences in expert views on whether the dead are still infectious or not "(Participant 6, Male 51 years old)

Perceptions of Participants in handling and burial the Body of COVID-19

All scholars / religious leaders argue that the handling and burial of the body using the COVID-19 protocol must be carried out by considering the possibility of disease transmission. All existing Islamic organizations have their guidelines for handling and funeral the body by modifying the religious values held by specific organizations and the concept of preventing infectious diseases in the procedure of handling and burial the body with COVID-19.

"Yes, in fact, for example, the matter of burial of a corpse already has protocols. From the protocol made by the parties concerned so that the funeral of the corpse no longer allows ee transmission to other living creatures "(Participant 1, Male 43 Years old)

"So actually in Muhammadiyah there is also a health protocol that has also been agreed on nationally and even internationally, so the funeral procession is what yaa we follow" (Participant 2, Male 65 Years old)

Structural Response of Ulama in Handling and Burial the Body of COVID-19

Religious organizations, through a network of hospital organizations, have trained the handling and burial team to follow the procedure for handling dan burial of bodies with COVID-19. However, handling and burial of corpses in the community follow the values and norms that exist in that community.

"The protocol that has been established and has also been justified by the Indonesian Ulama Council regarding the implementation of such a corpse; no longer brought home, no longer treated as normal; bathed, shrouded, etc.; if allowed to be so potentially infectious. Therefore, covid-19 patients are immediately treated in the hospital and taken directly to a special cemetery, this shows an effort to stop the spread "(Participant 3, Male 61 Years old)

"But, eee... sometimes, the socialization of this funeral protocol doesn't reach the public properly and clearly. So that there are reactions, the refusal of people being buried somewhere "(Participant 1, Male 43 Years old)

Alternative Solutions from Ulama in Handling and burial the body with Covid-19

Socialization in the community that was not carried out thoroughly resulted in rejection and forcible taking of the body by the community. Ulama suggested coordination between local government, religious leaders, and the community in disseminating the handling and burial of bodies with the COVID-19

procedure. Religious leaders argue that the uncontrolled psychological condition of the corpse family and the cultural values that have been rooted in the community in handling and burial of the corpse has prompted the public to refuse to use the COVID-19 procedure to handle and burial the body.

"It should also pay attention to psychological factors. So don't be as it develops, yes the information is heard. As soon as someone dies in a short time, continues to be taken, not allowed to be seen by his siblings, his family, his family So that cases emerge where ee people fight over the body And then finally it becomes a legal case problem so be ee a suspect and so on. So eee ... I think the funeral uses the existing protocol from the government. Must (cough) pay more attention to psychological factors so that there is no misinterpretation and then eee people feel their human rights. I say that, try to feel it, we are our closest family, whether it eee be our spouse, or our children, or our parents, try to imagine. If, for example, he just come into the hospital he could not be seen, isolated. Then even after he died we could not see, try to imagine how his family would feel. " (Participant 1, Male 43 Years old)

Discussion

This study underlines that all scholars from all Islamic community organizations agree that the handling and burial of corpses infected with infectious diseases need to be done in a particular and specific way to prevent the spread of the disease. Research on the process of handling and burial of the corpses in Islam also explains the same thing as the opinion of these scholars (Al-Shahri et al., 2007; Nielsen et al., 2015). The special treatment to corpses with infectious diseases is carried out by not washing the corpse affected by the disease, but by pouring water, only the best we could and splashing water did not touch the person who bathed the corpse (Lev, 2011; Petersen, 2013). Decision making in determining a case diagnosed as an infectious disease and requiring specific handling and burial must be accompanied by medical personnel or authorized parties. This study shows that handling and burial the bodies with the assistance of a medical team can prevent disease clusters (Lee-Kwan et al., 2017). The assistance of the medical team in handling and burial of the corpses in the community is a necessary condition to prevent rejection in the community and increase the public's sense of trust in implementing processing and burial of bodies with health protocols.

In addition to handling and burial the corpse with the assistance of the medical team, Islamic community organizations in Indonesia justified the implementation of unseen prayers and limiting the number of people in takziah or carried out online as a substitute for prayer for the body and takziah. This justification is in accordance with the response of the ulama in this study, which explained that the central management of the organization has formulated and established regulations for carrying out handling and burial of bodies with health protocols in hospitals and mosques. The Muhammadiyah Central Board issues a circular to all regional administrators in Indonesia to implement health protocols in the handling of bodies (Muhammadiyah Central Board, 2020). The implementation of unseen prayers is carried out to prevent disease transmission at the place where the burial prayers are held and takziah activities. The importance of carrying out the burial prayers and takziah in a series of handling and burial the corpse (Petersen, 2013) is limited to prevent disease transmission. However, the implementation of

handling the bodies in the community which is different from the appeal caused by the less massive socialization in the community. It is a crucial finding in this study. Education of the public and religious leaders plays an essential role in a comprehensive and cross-sectoral strategy for preventing COVID-19.

The cultural structure of Indonesian society is known as a religious society and has great respect for the ulama. It shows that the existence of ulama is an essential part of the social religious life of the community. People obeyed what Ulama said as long as it was related to the interests of the community. Ulama are the inheritors of the prophets who are heard and respected by the Indonesian Muslim community. Fatwas and the opinions of the ulama become references in the implementation of worship in society. Several studies have shown that Muslim scholars play an important role in public health education (Cotton et al., 2006; Koenig, 2009; Rivera-Hernandez, 2014; Zou et al., 2009). In facing the COVID-19 pandemic, the government has a very strong interest in the presence of ulama. This is evidenced by the involvement of the ulama in the socialization process to raise public awareness of the dangers of COVID-19. They have a central role in providing understanding to the public about preventing the transmission of COVID-19 through the handling and burial of bodies. The involvement of the ulama in socialization and also community assistance can be an indication of how much the ulama are concerned about social problems. These religious figures were deliberately presented on television media or through social media to give taushiyah to pray at home, and care for the COVID-19 body was carried out using medical protocols so as not to infect those who handled the body. Taking care of the soul and respecting the living is more important than respecting the dead who have been infected with COVID-19 since it will endanger the lives of the living.

Religious communities that base their lives on religious teachings will undoubtedly suit the explanation of the scholars who see the Covid-19 pandemic as an epidemic that must be avoided. This theological explanation is more relevant to people's views and understanding of their religious teachings. Through religious teaching-based explanations, it is more pertinent to suppress and even reduce the transmission of Covid-19 during increasingly complicated life. Ulama can play a role in people's lives by using religious languages , and society can accept them with full awareness. Thus, from the start, it was informed that Covid-19 is an epidemic that is very dangerous to health because of its high transmission rate, so since then, the involvement of ulama in Indonesia has been very high. So the scholars have a considerable role in helping the government and the public in educating the public to comply with health protocols and carry out the handling and burial of COVID-19 bodies following health protocols and sharia provisions by using provisions for handling bodies in emergencies.

Closing

Understanding the perceptions and responses of various scholars in preventing COVID-19 through the process of handling and burial of the bodies is essential. The religious character of Indonesian society and the central role of scholars in public education can break the chain of transmission of COVID-19. Comprehensive socialization and coordination can reduce misperceptions and misinformation in the

process of reviewing corpses with the COVID-19 procedure so that the implementation of handling and burial bodies can prevent new COVID-19 clusters in the community.

Declarations

Competing interests:

The authors declare no competing interests.

References

Ahmed Al-Dawoody & Oran Finegan. (2020). COVID-19 and Islamic burial laws: safeguarding dignity of the dead. Retrieved from <https://blogs.icrc.org/law-and-policy/2020/04/30/covid-19-islamic-burial-laws/>

Ahmed, Q. A., Arabi, Y. M., & Memish, Z. A. (2006). Health risks at the Hajj. *Lancet*. [https://doi.org/10.1016/S0140-6736\(06\)68429-8](https://doi.org/10.1016/S0140-6736(06)68429-8).

Al-Dimyathi, Syathi. (1997). *I'annah al-Thalibin*, Beirut: Dar al-Fikr.

Al-Shahri, M. Z., Fadul, N., & Elsayem, A. (2007). Death, dying and burial rites in Islam. *European Journal of Palliative Care*.

Al-Syinqity, Muhammad Mukhtar. (n.d). *Syarah Umdah al-Fiqh* (Manuskrip).

Al-Zubaydi, Abu al-Faydl Muhammad bin Muhammad bin 'Abd al-Wazzâq al-Husayni. (n.d.). *Tâj al-'Arûs min Jawâhir al-Qâmûs. Al-Warrâq*.

Al-Zuhaili, Wahbah. (1984). *al-Fiqh al-Islam wa Adillatuh*, Damsyiq: Dar al-Fikr.

Charzyńska, E. (2015). Multidimensional Approach Toward Spiritual Coping: Construction and Validation of the Spiritual Coping Questionnaire (SCQ). *Journal of Religion and Health*. <https://doi.org/10.1007/s10943-014-9892-5>.

Cotton, S., Puchalski, C. M., Sherman, S. N., Mrus, J. M., Peterman, A. H., Feinberg, J., ... Tsevat, J. (2006). Spirituality and religion in patients with HIV/AIDS. *Journal of General Internal Medicine*. <https://doi.org/10.1111/j.1525-1497.2006.00642.x>.

Cyphers, N. A., Clements, A. D., & Lindseth, G. (2017). The Relationship Between Religiosity and Health-Promoting Behaviors in Pregnant Women. *Western Journal of Nursing Research*. <https://doi.org/10.1177/0193945916679623>.

Gao, Q., Hu, Y., Dai, Z., Xiao, F., Wang, J., & Wu, J. (2020). The Epidemiological Characteristics of 2019 Novel Coronavirus Diseases (COVID-19) in Jingmen, China. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.3548755>.

- Gray, P. B. (2004). HIV and Islam: Is HIV prevalence lower among Muslims? *Social Science and Medicine*. [https://doi.org/10.1016/S0277-9536\(03\)00367-8](https://doi.org/10.1016/S0277-9536(03)00367-8).
- Hall, D. E., Meador, K. G., & Koenig, H. G. (2008). Measuring religiousness in health research: Review and critique. *Journal of Religion and Health*. <https://doi.org/10.1007/s10943-008-9165-2>.
- Indonesian COVID-19 Task Force. (2020). Situation Report of COVID-19 in Indonesia.
- Koenig, H. G. (2009). Research on religion, spirituality, and mental health: A review. *Canadian Journal of Psychiatry*. <https://doi.org/10.1177/070674370905400502>.
- Lee-Kwan, S. H., DeLuca, N., Bunnell, R., Clayton, H. B., Turay, A. S., & Mansaray, Y. (2017). Facilitators and Barriers to Community Acceptance of Safe, Dignified Medical Burials in the Context of an Ebola Epidemic, Sierra Leone, 2014. *Journal of Health Communication*. <https://doi.org/10.1080/10810730.2016.1209601>.
- Lev, E. (2011). Ottoman Medicine, Healing and Medical Institutions 1500–1700. By Miri Shefer-Mossensohn. pp. 277. Albany, State University of New York, 2009. *Journal of th*.
- Majelis Ulama Indonesia. (2020). *FATWA MUI NO 14 TAHUN 2020 TENTANG PENYELENGGARAN IBADAH DALAM SITUASI TERJADI WABAH COVID-19*. Jakarta.
- Ma'luf, L. (1977). *Al-Munjid fi al-Lughah*, Beirut: Dar al-Masyriq.
- Memish, Z. A., Stephens, G. M., Steffen, R., & Ahmed, Q. A. (2012). Emergence of medicine for mass gatherings: Lessons from the Hajj. *The Lancet Infectious Diseases*. [https://doi.org/10.1016/S1473-3099\(11\)70337-1](https://doi.org/10.1016/S1473-3099(11)70337-1).
- Moreira-Almeida, A., Neto, F. L., & Koenig, H. G. (2006). Religiousness and mental health: A review. *Revista Brasileira de Psiquiatria*. <https://doi.org/10.1590/s1516-44462006005000006>.
- Nielsen, C. F., Kidd, S., Sillah, A. R. M., Davis, E., Mermin, J., & Kilmarx, P. H. (2015). Improving burial practices and cemetery management during an Ebola virus disease epidemic – Sierra Leone, 2014. *Morbidity and Mortality Weekly Report*.
- Noden, B. H., Gomes, A., & Ferreira, A. (2010). Influence of religious affiliation and education on HIV knowledge and HIV-related sexual behaviors among unmarried youth in rural central Mozambique. *AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV*. <https://doi.org/10.1080/09540121003692193>.
- Nawawi, Imam. (n.d). *Syarh al-Muhadzab*, Beirut: Dar al-Fikr.
- Pane, M., Kong, F. Y. M., Purnama, T. B., Glass, K., Imari, S., Samaan, G., & Oshitani, H. (2019). Indonesian Hajj cohorts and mortality in Saudi Arabia from 2004 to 2011. *Journal of Epidemiology and Global*

Health, 9(1). <https://doi.org/10.2991/jegh.k.181231.001>.

Pengurus Pusat Muhammadiyah. (2020). *Edaran Pimpinan Pusat Muhammadiyah Nomor 02/EDR/I.0/E/2020 Tentang Tuntunan Ibadah Dalam Kondisi Darurat COVID-19*. Jakarta, Indonesia.

Persynaki, A., Karras, S., & Pichard, C. (2017). Unraveling the metabolic health benefits of fasting related to religious beliefs: A narrative review. *Nutrition*. <https://doi.org/10.1016/j.nut.2016.10.005>.

Petersen, A. (2013). The Archaeology of Death and Burial in the Islamic World. *The Oxford Handbook of the Archaeology of Death and Burial*. <https://doi.org/10.1093/oxfordhb/9780199569069.013.0014>.

Purnama, T. B., Khadijah, S., & Sadri, I. (2020). How to handle the deceased body of COVID-19: an insight from Indonesian muslim burial handlers knowledge, perception, and practice. *MedRxiv*, 2020.08.03.20167593. <https://doi.org/10.1101/2020.08.03.20167593>

Richards, P., Amara, J., Ferme, M. C., Kamara, P., Mokuwa, E., Sheriff, A. I., ... Voors, M. (2015). Social Pathways for Ebola Virus Disease in Rural Sierra Leone, and Some Implications for Containment. *PLoS Neglected Tropical Diseases*. <https://doi.org/10.1371/journal.pntd.0003567>.

Rivera-Hernandez, M. (2014). The Role of Religious Leaders in Health Promotion for Older Mexicans with Diabetes. *Journal of Religion and Health*. <https://doi.org/10.1007/s10943-014-9829-z>.

Shihab, M. Quraish. (2009). *Tafsir al-Misbah Pesan, Kesan, dan Keserasian al-Qur'an*, Jakarta: Lentera Hati.

Sukaina Hirji, A. H. and E. L. (2020). The impact of Covid-19 on Islamic burial rites. Retrieved from <https://www.gmjournals.co.uk/the-impact-of-covid-19-on-islamic-burial-rites>.

Sya'rawi, Muhammad Mutawalli. (2011). *Tafsir Sya'rawi Akhbar al-Yaum*, Penerjemah Tim Safir al-Azhar, *Tafsir Sya'rawi*, Jakarta: Ikrar Mandiriabadi.

The Republic of Indonesia Ministry of Religious Affairs. (2020). *Keputusan Menteri Agama No 6 Tahun 2020*.

The Republic of Indonesia Ministry of Religious Affairs. Safe burial for COVID-19 cases (Protokol Pengurusan Jenazah Pasien COVID-19) (2020).

Trepanowski, J. F., & Bloomer, R. J. (2010). The impact of religious fasting on human health. *Nutrition Journal*. <https://doi.org/10.1186/1475-2891-9-57>.

Weiss, P., & Murdoch, D. R. (2020). Clinical course and mortality risk of severe COVID-19. *The Lancet*. [https://doi.org/10.1016/S0140-6736\(20\)30633-4](https://doi.org/10.1016/S0140-6736(20)30633-4).

WHO. (2020). COVID-19 Situation Report.

Xinguang, C., & Yu, B. (2020). First two months of the 2019 Coronavirus Disease (COVID-19) epidemic in China: real-time surveillance and evaluation with a second derivative model. *Global Health Research and Policy*.

Zou, J., Yamanaka, Y., John, M., Watt, M., Ostermann, J., & Thielman, N. (2009). Religion and HIV in Tanzania: Influence of religious beliefs on HIV stigma, disclosure, and treatment attitudes. *BMC Public Health*. <https://doi.org/10.1186/1471-2458-9-75>.