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Islamic Educational Theology and Kokoda Tribe Traditional Healing Practices in Southwest Papua, Indonesia

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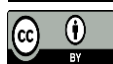
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ABSTRACT

This study investigates Kokoda traditional healing from the perspective of Islamic educational theology by exploring the dialogue amongst tawhid, local culture, and healthcare practices. The research employed a qualitative approach using anthropological and local-studies perspectives. Data were collected through interviews, observations, and documentation involving 20 respondents. They consisted of four Kokoda traditional leaders, four Muslim religious leaders, two government health workers, two doctors, six patients, and two educated community members in Kokoda Regency. The findings reveal that traditional healing functions not only as medical treatment but also as a medium for transmitting moral education, ecological wisdom, and communal solidarity. Most Muslim leaders support healing practices integrated with Qur'anic recitations and Islamic prayers, while some respondents criticize ritual elements considered incompatible with tawhid. Medical workers acknowledge the cultural significance of traditional medicine but emphasize the need for biomedical supervision for severe illnesses. The study concludes that Kokoda healing traditions represent a contextual model of Islamic educational theology that strengthens cultural resilience, religious moderation, and indigenous healthcare awareness in Southwest Papua.

Keywords: *Islamic Educational; Kokoda Tribe; Local Culture; Traditional Healing*



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Introduction

Traditional healing practices remain an important component of healthcare among the Kokoda Tribe in Southwest Papua, where indigenous rituals continue to influence community responses to illness alongside Islamic beliefs. As Islam has become deeply rooted in Kokoda society, local healing traditions increasingly reflect interactions between Islamic theology and ancestral knowledge. Understanding this relationship is essential for explaining how religious values and indigenous cultural practices coexist, adapt, and shape contemporary healing practices. This statement is the consequence of initial observations and communication with the Kokoda community during preliminary research in December 2025, before beginning an in-depth research process from January to March 2026.

Indigenous healing traditions continue to attract global scholarly attention due to their cultural, spiritual, and ecological significance (Zahir, 2025). Across Asia, Africa, and Latin America, traditional medicine systems remain deeply connected to indigenous identity and the transmission of communal knowledge (Fatmawati, 2021). The World Health Organization recognizes that traditional healing practices continue to contribute significantly to healthcare systems, particularly within remote and marginalized communities where modern medical access remains limited (Abu-Ras et al., 2024). In many indigenous societies, healing is not merely associated with physical recovery but also with restoring spiritual harmony, social balance, and environmental relationships (Syamsudin, 2025).

In Indonesia, local healing traditions are closely intertwined with ethnic diversity, religious adaptation, and ecological knowledge (Subair et al., 2024); (Tolapa et al., 2025). Indigenous communities preserve medicinal knowledge inherited from ancestors through oral traditions, ritual practices, and collective experiences. Papua represents one of the most culturally diverse regions in Indonesia, where indigenous healing systems remain influential in daily life. Papuan communities frequently combine herbal medicine, ritual communication, spirituality, and communal participation within healthcare practices (Noor et al., 2009; Khairifa et al., 2025; Laras Aprillia, Hanifa Widiati, 2025).

Among indigenous Papuan communities (Alhamid et al., 2025) The Kokoda Tribe of Southwest Papua possesses distinctive healing traditions rooted in local cosmology and coastal ecological knowledge. Traditional healers use

medicinal plants, symbolic rituals, prayer recitations, and social mediation as part of treatment processes (Wahyuni et al., 2025; and Basri et al., 2025). Illness is often interpreted not only biologically but also socially and spiritually. Healing, therefore, involves restoring relationships among humans, nature, and divine power (Wade, 2022).

The spread of Islam within coastal Papua transformed local cultural practices, including healing traditions. Islamic teachings entered Kokoda society through trade networks, marriage relations, religious education, and interaction with Muslim migrants. Consequently, Islamic values gradually became integrated into indigenous traditions (Alatas, 2021). Healing rituals among the Kokoda people increasingly include Qur'anic recitations, dhikr, supplication, and references to Allah's healing power (Khairifa et al., 2025). Nevertheless, debates continue regarding the compatibility between certain indigenous rituals and Islamic tawhid principles.

This study employs Islamic educational theology as its theoretical framework. Islamic educational theology emphasizes the integration of faith, morality, knowledge, and social responsibility within human life. According to Islamic theology, all educational and cultural practices should strengthen tawhid, ethical awareness, and social harmony (Alatas, 2021; and Khairifa et al., 2025). In this perspective, local traditions are not automatically rejected but critically interpreted based on Islamic ethical and theological principles. Islamic educational theology also highlights contextual da'wah approaches that accommodate cultural diversity without compromising core religious values (Zainuddin & Tahir, 2025; Islami et al., 2025; and Musaddad & Sewang, 2025).

The theology of Islamic education is founded on the belief that all educational processes originate from *tawhīd* (the absolute oneness of Allah), which serves as the primary epistemological and ethical framework for developing human character, knowledge, and civilization. Within this perspective, education is not merely the transmission of knowledge but a process of nurturing individuals to recognize their role as *'abd Allāh* (servants of God) and *khalīfat Allāh fī al-ard* (God's vicegerents on earth), whose responsibilities include upholding justice, compassion, wisdom, and social harmony in every aspect of life (Wahyuni et al., 2025). Consequently, Islamic educational theology emphasizes the integration of *'aqidah* (faith), *sharī'ah* (religious practice), and *akhlāq* (moral conduct) as inseparable dimensions of holistic human development.

This theological foundation also recognizes that culture constitutes part of human social reality (*sunnat Allāh*) and may serve as a medium for conveying Islamic values, provided that cultural expressions do not contradict the fundamental principles of the Qur'an and Sunnah. Therefore, local traditions are not automatically rejected; instead, they are critically examined through the principles of *maqāṣid al-sharī'ah*, *maṣlaḥah* (public welfare), and Islamic ethics to distinguish practices that preserve human dignity and social benefit from those that conflict with Islamic monotheism. In this context, Islamic educational theology encourages contextual and culturally responsive *da'wah*, enabling educators and religious leaders to appreciate cultural diversity while maintaining the integrity of core Islamic beliefs and values (Zainuddin & Tahir, 2025; Musaddad & Sewang, 2025; Satir & Akidah, Sri, 2025; and Ali, 2026).

A socio-cultural perspective further explains that indigenous healing practices function as systems of symbolic communication and cultural identity preservation (Anakotta et al., 2019; and Yuliawati et al., 2025). Clifford Geertz argues that religion and culture interact dynamically in shaping social meaning and collective behaviour. Meanwhile, local wisdom theory emphasizes the importance of preserving ecological and cultural knowledge inherited through generations (Tang et al., 2018; Wahyuni et al., 2025). These perspectives help explain how Kokoda healing traditions simultaneously function as medical practices, spiritual expressions, and educational mechanisms. Traditional healing practices among indigenous Papuan societies remain important in preserving local identity, spirituality, and healthcare traditions. Among the Kokoda Tribe of Southwest Papua, healing rituals integrate herbal medicine, ancestral knowledge, communal ethics, and Islamic spirituality (Nur, 2022; Azra, 2004; and Zahir, 2025).

Previous studies have discussed Papuan indigenous medicine, Islamic acculturation in Eastern Indonesia, and local wisdom preservation (Anakotta et al., 2019; and Alatas, 2021); . However, limited research specifically examines the Kokoda healing tradition through the perspective of Islamic educational theology. Most studies focus separately on anthropology, religion, or public health without integrating theological educational analysis with indigenous healing systems.

This study, therefore, aims to examine the traditional healing practices of the Kokoda Tribe by analysing the dialogue between tawhid, local culture, and healthcare traditions. The study specifically explores how different social

groups within Kokoda society perceive traditional healing and how these practices contribute to religious moderation, cultural resilience, and indigenous healthcare awareness in Southwest Papua.

Research of Method

This study employed a qualitative research approach using anthropological and local-studies perspectives (Miles; 2014). The qualitative method was chosen because the study aimed to understand meanings, experiences, beliefs, and social interactions surrounding traditional healing practices among the Kokoda people (Creswell, 2018).

The research was conducted in Kokoda Regency, Southwest Papua. The respondents were selected purposively based on their roles, experiences, and knowledge related to traditional healing and Islamic practices (Ishtiaq, 2019). The respondents consisted of: four Kokoda traditional leaders, four Muslim religious leaders, two government health workers, two doctors serving in Kokoda, six patients consisting of children and adults, and two educated community members.

The total number of respondents interviewed was 20. Data collection was conducted through three stages. *First*, in-depth semi-structured interviews were carried out to explore perceptions regarding healing rituals, Islamic theology, healthcare experiences, and cultural preservation (Creswell, 2018). *Second*, participatory observation was conducted during healing sessions and communal gatherings to understand ritual processes, prayer practices, and social interactions. *Third*, documentation analysis was employed by examining ethnographic literature, anthropological studies on Papua, Islamic theological writings, and healthcare reports related to indigenous communities (Syahrul et al., 2025).

The interview process focused on several themes, including healing methods, herbal medicine usage, spiritual rituals, Islamic interpretations, healthcare accessibility, and intergenerational transmission of local wisdom. Interviews were conducted in the Indonesian language with cultural adaptation to local communication styles. Data analysis used thematic analysis techniques involving data reduction, coding, categorization, interpretation, and triangulation. Respondents' opinions were grouped based on social categories to identify similarities, contradictions, and dominant themes. The findings were then interpreted using Islamic educational theology, anthropological theory,

and local wisdom perspectives. To ensure validity, the study employed source triangulation, prolonged engagement with respondents, and comparative interpretation between traditional leaders, religious leaders, healthcare practitioners, and patients.

Findings

The qualitative analysis of interviews, supported by participatory observations and document analysis, generated four interconnected themes that explain the relationship between Islamic theology and the traditional healing practices of the Kokoda Tribe in Southwest Papua. The themes emerged through open coding, category development, and thematic synthesis of interview transcripts from 20 participants, including traditional healers, Islamic religious leaders, community elders, healthcare workers, and community members.

Theme 1. Integration of Islamic Theology into Traditional Healing

Most participants explained that traditional healing is no longer practiced solely as an ancestral ritual but has increasingly incorporated Islamic theological principles. Healing sessions commonly begin with recitation of *basmalah*, verses from the Qur'an, *dhikr*, and supplication (*du'a*), reflecting the community's belief that Allah is the ultimate source of healing while traditional healers merely facilitate the healing process. One traditional healer stated:

"We always begin by mentioning the name of Allah and reciting verses from the Qur'an because healing ultimately comes from Allah, not from the healer." (Participant TH-03). Similarly, an Islamic religious leader emphasized:

"Our role is to ensure that cultural practices remain within Islamic teachings. As long as there is no element of shirk, local traditions can become part of Islamic life." (Participant IR-02). Observational data confirmed that Qur'anic recitations and collective prayers were consistently integrated into healing ceremonies, demonstrating a contextual adaptation of Islamic beliefs within indigenous cultural practices.

Theme 2. Preservation of Indigenous Healing Knowledge

Participants consistently described traditional healing as an important cultural inheritance transmitted across generations. Elderly participants explained that medicinal plants, massage techniques, and ritual procedures represent valuable indigenous knowledge developed through long-term interaction with the natural environment. A community elder explained:

"Our ancestors taught us which plants heal fever, wounds, and stomach illness. We continue teaching our children because this knowledge is part of our identity." (Participant CE-05). Field observations also documented the continued use of locally available medicinal plants combined with spiritual prayers during treatment, indicating that ecological knowledge remains central to Kokoda healing practices.

Theme 3. Negotiation between Religious Beliefs and Cultural Traditions

Interview findings revealed continuous negotiation between Islamic teachings and inherited customary practices. Participants generally distinguished between cultural rituals regarded as compatible with Islamic monotheism and practices considered inconsistent with Islamic theology. One participant explained: *"Some rituals from the past have been abandoned because they conflict with Islamic teachings, but praying, using medicinal plants, and helping sick people remain acceptable."* (Participant CM-11). Religious leaders similarly emphasized cultural traditions should be evaluated according to Qur'anic teachings and authentic Islamic principles while respecting local identity. This reflects an adaptive process in which indigenous customs are reinterpreted rather than entirely abandoned.

Theme 4. Traditional Healing as a Complementary Healthcare System

Many respondents explained that traditional healing continues to complement modern healthcare, particularly in remote settlements where medical facilities remain limited. Community members commonly seek traditional treatment for minor illnesses before visiting health centers, while severe conditions are referred to hospitals. A healthcare worker stated: *"People usually come to us after receiving traditional treatment, or sometimes they combine both approaches. The two systems often complement each other."* (Participant HW-02)

Participants further noted that economic limitations, geographical distance, cultural familiarity, and trust in traditional healers contribute to the continued utilization of indigenous healing practices. Overall, the qualitative findings demonstrate that the Kokoda Tribe has developed a dynamic model of traditional healing in which Islamic theology, indigenous ecological knowledge, and community health practices interact harmoniously. Rather than replacing local traditions, Islamic beliefs have reshaped healing rituals by emphasizing monotheism, Qur'anic prayer, and ethical values while preserving culturally meaningful practices and indigenous medicinal knowledge. This process illustrates the contextualization of Islamic theology within local cultural

traditions and highlights the resilience of indigenous healthcare systems in multicultural Southwest Papua.

Discussion

The findings demonstrate that traditional healing practices among the Kokoda Tribe remain socially influential despite the expansion of modern healthcare services. Each respondent group expressed different perspectives concerning the relationship between traditional healing, Islamic theology, and public health.

Traditional leaders consistently emphasized that healing traditions represent ancestral heritage and communal identity. They explained that medicinal plants, ritual prayers, and symbolic practices were inherited from previous generations and functioned to maintain harmony between humans and nature. One traditional leader argued that abandoning traditional healing would weaken Kokoda's cultural identity and disconnect younger generations from ancestral wisdom.

Muslim religious leaders generally supported traditional healing practices integrated with Islamic prayers and Qur'anic recitations. Three religious leaders stated that healing practices were acceptable as long as they strengthened tawhid and did not involve worship directed toward spirits or supernatural beings. They emphasized that Allah remains the ultimate source of healing while herbal medicine and prayer function only as intermediary efforts.

However, *one Muslim leader* expressed criticism toward several ritual elements involving symbolic objects and ancestral references. According to him, some traditional practices risk contradicting Islamic monotheism because certain community members still believe in supernatural mediation beyond Islamic teachings. This contradiction reflects internal theological debates regarding cultural accommodation and religious purification.

Government health workers acknowledged the cultural importance of traditional medicine in Kokoda society. They explained that many residents initially seek treatment from traditional healers before visiting healthcare facilities. Health workers also admitted that geographical limitations and transportation difficulties contribute to dependence on local healing systems. Nevertheless, they emphasized the need for medical supervision to prevent delayed treatment for serious illnesses.

Doctors in Kokoda expressed mixed opinions. One doctor argued that several herbal treatments appear effective for mild illnesses and psychological comfort because patients strongly trust traditional healers. Another doctor, however, warned that excessive dependence on traditional medicine may endanger patients suffering from infections, chronic diseases, or emergency conditions requiring biomedical intervention.

Patients interviewed during the study generally expressed positive experiences with traditional healing. Adult respondents stated that healing rituals provided emotional calmness, spiritual confidence, and communal support. Parents of child patients explained that traditional healing was economically affordable and culturally familiar. Several patients reported combining hospital treatment with traditional healing practices simultaneously.

Educated community members viewed traditional healing as an important element of indigenous knowledge preservation. They argued that modernization, migration, and digital globalization increasingly threaten local traditions among younger generations. Both respondents supported integrating local wisdom into educational institutions and cultural documentation programs.

The findings also reveal similarities across respondent groups regarding the importance of preserving Kokoda cultural identity. Traditional leaders, patients, and educated respondents strongly supported maintaining indigenous healing knowledge. Religious leaders and healthcare workers similarly recognized the social influence of traditional healing, although they differed concerning theological legitimacy and medical limitations. Overall, the findings indicate that Kokoda traditional healing functions not only as a healthcare practice but also as a mechanism for transmitting religious values, ecological knowledge, social solidarity, and indigenous identity across generations. The findings demonstrate that traditional healing among the Kokoda Tribe represents a multidimensional phenomenon involving theology, culture, healthcare, and education. From the perspective of Islamic educational theology, healing traditions become part of contextual religious education through which tawhid values are socially transmitted within indigenous cultural settings (Satir & Akidah, Sri, 2025).

The incorporation of Qur'anic recitations, supplications, and remembrance of Allah into healing rituals indicates that Islamic teachings have become deeply embedded within Kokoda cultural practices. This supports the theory of

cultural accommodation in Islamic education, where religious values interact dynamically with local traditions. Rather than eliminating indigenous culture, Islamic theology in Kokoda society functions adaptively by reinterpreting local traditions within monotheistic frameworks.

This process produces several social benefits. *First*, integrating Islamic spirituality into traditional healing strengthens religious moderation, as communities learn to harmonize faith and culture without fostering radical cultural rejection. *Second*, healing rituals reinforce communal solidarity because patients receive emotional support through collective participation and social care. *Third*, indigenous medicinal knowledge contributes to ecological awareness since healing practices depend on preserving forests, mangroves, and biodiversity.

The study also demonstrates that traditional healing functions as an informal educational institution. Through healing rituals, younger generations learn ethical values such as respect for elders, environmental responsibility, social cooperation, and spiritual dependence on Allah. This finding supports Islamic educational theology, emphasizing that education occurs not only formally within schools but also socially within cultural traditions and communal practices.

Nevertheless, contradictions among respondents reveal continuing tensions between cultural preservation and religious purification. Some Muslim leaders criticize ritual elements associated with ancestral symbolism or supernatural mediation. This reflects broader debates within contemporary Islamic societies concerning the boundaries of acceptable local traditions. Similar tensions are found across many Muslim indigenous communities where local rituals undergo reinterpretation under Islamic theological frameworks.

From a healthcare perspective, the findings highlight both benefits and limitations of traditional healing systems. Traditional medicine provides accessible and culturally trusted healthcare solutions within geographically isolated regions. Emotional comfort, psychological reassurance, and communal participation positively influence patient well-being. However, overreliance on traditional medicine without biomedical supervision may delay treatment for severe illnesses.

Therefore, collaboration between healthcare institutions and indigenous communities becomes essential. Culturally sensitive healthcare approaches may improve trust between medical practitioners and local populations. Integrating

local wisdom into public health programs may also strengthen healthcare accessibility in remote Papuan regions.

The study further contributes to anthropological understanding of indigenous Muslim communities in Eastern Indonesia (Alkadry et al., 2025). The Kokoda case demonstrates that Islamization processes in Papua do not necessarily erase indigenous identity. Instead, local communities negotiate religious teachings through cultural adaptation and selective reinterpretation. Such interaction creates hybrid forms of indigenous Islamic identity characterized by coexistence between theology and local wisdom.

The impact of preserving Kokoda healing traditions extends beyond healthcare. Cultural preservation strengthens indigenous dignity and protects communal memory from the pressures of globalization (Shidiq et al., 2025). Educational institutions may play strategic roles by documenting medicinal knowledge, promoting intercultural dialogue, and developing contextual Islamic curricula that respect indigenous heritage.

This study, therefore, contributes theoretically by integrating Islamic educational theology with anthropological analysis of indigenous healing systems. In practice, the findings support policies that promote culturally responsive healthcare, indigenous education, and religious moderation in multicultural societies.

Conclusion

Traditional healing practices among the Kokoda Tribe of Southwest Papua represent an important intersection between Islamic theology, indigenous culture, and healthcare traditions. The findings demonstrate that healing rituals function not only as medical treatment but also as mechanisms for transmitting moral values, ecological wisdom, social solidarity, and communal identity. Islamic educational theology within Kokoda society reflects an accommodative approach in which local healing traditions are interpreted through tawhid-oriented principles while maintaining indigenous cultural expressions.

Contradictions among respondents regarding ritual legitimacy reveal ongoing negotiations between cultural preservation and Islamic purification. Nevertheless, most respondents recognize the importance of preserving indigenous knowledge within contemporary society. The study contributes to interdisciplinary scholarship by integrating Islamic educational theology, anthropology, and indigenous healthcare studies. It also highlights the

importance of culturally sensitive healthcare and contextual Islamic education for strengthening religious moderation, cultural resilience, and indigenous empowerment in Southwest Papua.

Recommendation

Local governments, Islamic educational institutions, and healthcare agencies should collaboratively preserve Kokoda medicinal knowledge through cultural documentation, contextual education, and culturally responsive health programs. Future research should comparatively examine indigenous Muslim healing traditions across Papua to strengthen interdisciplinary understanding of religion, culture, and healthcare sustainability.

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