

# Caring as an Act of Spirituality: a Nursing Approach **3**

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## Learning Outcomes:

- Examine the meaning of caring from the perspective of Muslim nurses.
- Have an awareness of the legitimacy of Muslim nursing identity.
- Identify the relation between God and caring from an Islamic perspective.
- Discuss how the nursing identity in religious values is shared between nurses and patients.
- State how the sharing of the Muslim faith with their patients underpins the nurses' caring actions.

## Reflective Activity 3.1

State whether the following statements are true or false. Give reasons for your answers.

	<i>True</i>	<i>False</i>
1 Caring and religion are inseparable for Muslim nurses.		
2 The foundation of the relationship between the nurse and patient is not founded on a shared Muslim worldview.		
3 Rufaidah Al-Asalmiya developed the first code of nursing ethics and was an advocate for health education and preventative care.		

	True	False
4	For Muslim nurses, the relationship between the nurse and God is not a central theme within the nurse-patient therapeutic relationship.	
5	Rufaidah Al-Asalmiya set up the first school of nursing before Florence Nightingale.	
6	Islam does not support nursing as a career choice.	
7	In Islam, the status of women in the nursing role was raised before the transformation of Western nursing.	
8	A fundamental belief in Islam is that you must live your life in preparation for reward in the afterlife.	
9	Nurses' caring actions include use of religious words, reading the Qur'aan, praying with patients, and support for end-of-life rituals.	
10	The use of religious words such as <i>Bismillah</i> is limited to Muslim nurses caring for Muslim patients.	
11	The focus of caring is to assist the patient's belief in and relationship with God.	
12	Sharing the Muslim faith with their patients underpins the nurses' caring actions.	
13	The nurse's professional and personal identity is separable from Islam.	
14	Islamic caring is based on building the patient's trust in God.	

## Introduction

In nursing, care and caring are defined from a variety of perspectives reflective of the Western Judeo-Christian tradition (Holden and Littlewood, 1991; Narayanasamy and Owens, 2001; Rassool, 2000), with an assumption that nursing has a universal belief system. However, there is growing literature from non-Western cultural contexts that presents nursing frameworks grounded within distinct cultural systems, such as examples from Chinese (Chen, 2001; Pang et al., 2004; Wong et al., 2003), Korean (Shin, 2001), and Native America nurses (Hunter et al., 2006; Struthers and Littlejohn, 1999). Generally, nurses provide care to Muslim patients based on the nursing framework from the Judeo-Christian tradition. Mebrouk (2004) described the impact of Islam on

nurses' practice, where 'Islam provides their framework upon which they base their scientific based nursing care and moral considerations involved in their decision making.' Caring and religion are inseparable for Muslim nurses where a shared Muslim worldview is the foundation of the relationship between the nurse and patient. The meaning of caring begins with the nurses' relationship with God. This chapter explores the meaning of caring for Muslim nurses, through presentation of findings from an ethnographic study (Lovering, 1996). The findings of the study indicated that Muslim nurses' caring actions support the spiritual and physical health of the patient, where caring is a spiritual action.

## Nursing comes from the Prophet

In the Middle East, the history of nursing in Islam contributes to the nursing identity and shapes the caring role of Muslim nurses. As explained by one nurse, 'nursing comes from our Prophet Mohammad so we have to be careful when we touch the patient and how we will deal with the patient'. However, during the time of Prophet Muhammad, Rufaidah Al-Asalmiya was requested to place her tent in his mosque, which became the first Islamic health clinic. Thus, nurses caring for patients in the mosque symbolises acceptance of nursing within Islam. An important part of Rufaidah's narrative is the recognition given to the early nurses who participated in the Holy wars. Al-Osimy (1994) states: 'The status of the women participating as nurses in the wars was so highly honoured by the Holy Prophet that he considered their effort as a form of Jihad in the cause of Allah. He used to give them their share of the war loots just [as] he gave men theirs.' The symbolism of sharing equally in the war booty gives the message that nursing is worthy in Islam and raises the status of women in the nursing role.

## The story of Rufaidah Al-Asalmiya: nursing as a means to practise Islam

Rufaidah Al-Asalmiya (also referred to as Rufaidah bint Saad) practised as a nurse during the wars when the Prophet Muhammad established Islam in the seventh century AD. Rufaidah was the daughter of Saad Al-Asalmi, a healer in Yathrib (modern-day Madinah in Saudi Arabia). She assisted her father and developed her nursing skills before she became Muslim (Jan, 1996). At the time of her reversion, there were many wars to protect and defend the Islamic state and religion in the area of Madinah. When there was a call for support in the Holy wars, Rufaidah saw nursing as a means to express her faith and commitment to the Prophet Muhammad and organised a group of women to

assist in the wars in a nursing role. She began to teach her friends about nursing. During the Badr invasion, the first war in Islam in January 624, Rufaidah and her friends provided the Muslim soldiers with water, dressed the wounds of the injured and transported the dead back to Madinah. The first Islamic health clinic was in a tent in the Prophet's mosque where health education to the community was delivered.

Rufaidah set up the first school of nursing, developed the first code of nursing ethics and was an advocate for health education and preventative care (Jan, 1996). In this period of Islam, the female nurse was called Al-Assiyah from the verb *assaa*, which means to cure wounds. The Islamic verb *qaama*, which means to take care of patients, was applied to both male and female nurses (Al-Osimy, 1994). The narrative of Rufaidah (Al-Osimy, 1994; Bryant, 2003; Karaha, 2004; Mebrouk, 2008) shows aspects about caring that continue as a thread in Islamic nursing today. Rufaidah's narrative can be interpreted according to the following themes: nursing as a means to practise Islam, acceptance of nursing in Islam, legitimisation of nursing and foundation of the nurses' professional identity.

### Legitimisation of nursing and nursing identity

There are parallels in the legitimisation of nursing in the Middle East through Islam and the transformation of Western nursing at the time of Florence Nightingale. At the time of Florence Nightingale, nursing gained legitimacy through linking nursing with a religious calling, a high moral ground, a mission to serve humanity and an emphasis on nurses' special womanliness (Brodie, 1994; Nelson, 2001). Nursing became an acceptable career for women rather than a domestic role carried out by women of questionable morality. Jaleesah (2004) notes the similarities in Western and Islamic nursing history: 'Nursing holds at its core a tradition of caring and responsibility at great personal sacrifice. We have in our collective history stories of nuns caring for the poor, infirm and outcast. Our rich history in Islam gives a reason for pride and a radical tradition to which we must set our sights.' The importance of Rufaidah as the first nurse in Islam is the foundation of the nursing identity for Muslim nurses. As Jan (1996, p. 268) explains, 'Because of Rufaidah we realise that nursing is a noble career for Muslim women in accordance to Islamic tradition. Indeed, Rufaidah is a great role model for us today. We, who are Muslims, should not forget our historical tradition and the example of Rufaidah – our first nurse, nurse educator, nurse leader, and founder of our first nursing school and clinics.' Hussain (2004) noted that 'Rufaidah was the mother of human medication [medicine] and nursing in the world 1400 years ago. Centuries later Florence Nightingale followed the steps of Rufaidah.'

### The relationship between the nurse and God

Similar to the example of Rufaidah, Muslim nurses practise through their faith in God. This faith is the basis of their commitment to nursing and shapes the nature of their relationship with their patients with whom they share the same values. Mebrouk (2008) noted that nurses entered a relationship with their patients based on shared humanity including religion. The relationship between the nurse and God is the starting point for the caring experience. The nursing pledge spoken by graduates of the Dar Al Hekma College School of Nursing, Jeddah, Saudi Arabia, illustrates the centrality of faith in the nurses' commitment to the profession. The beginning point of this nursing pledge is the relationship of the nurse with God.

In the name of Allah, the Almighty, Who granted me wisdom as a means in life; Whose name is high and holy, who endowed on Himself the name and description of mercy; I pledge to be faithful to my religion, king, and nation; To offer myself to this profession through my faith in God. (Dar Al Hekma College School of Nursing graduation ceremony, 2006)

The relationship between the nurse and God is a central theme within the nurse–patient therapeutic relationship. Al-Osimy (2005) described the duties of the Muslim nurse as: duty to God, duty of the Muslim to himself, duty of Muslim nurses to increase knowledge of science and nursing and the need to connect to the past and present. She encouraged Muslim nurses to be faithful, 'pray as it leads to self-instruction and inner peace, work hard, and seek God's forgiveness and satisfaction as 'God looks into your heart.'" Nurses should be afraid of God and be faithful to God. Al-Osimy (2005) linked worship of God to the nursing role and the society's benefit.

### Caring is an act of spirituality

In the study of Muslim nurses' experiences of 'the meaning of caring' (Lovering, 2008, p. 12), spirituality became a significant concept and this translates into the nurses' caring experiences. Caring is a spiritual action, and in turn, the nurse receives reward from God. The picture of caring as spiritual action emerges through exploring the relationship between the nurses and God, and the nurses' responsibility to assist the patient's belief in God as caring action. Nurses' caring actions include use of religious words, reading the Qur'aan, praying with the patients, and support for end-of-life rituals. In essence, nurses are guardians of the patient's spiritual, physical and psychosocial health through caring as an act of spirituality.

Sharing the Muslim faith with their patients underpins the nurses' caring actions. The focus of caring is to assist the patient's belief in and relationship with God. One nurse summarised the focus of her caring as 'building a relationship between the human [patient] and God'' which is about the nurse being an agent or facilitator of the faith. The role of the nurse as a facilitator of the faith in caring for Muslim patients has been endorsed. Al-Osimy (2005) encouraged nurses to mention God and remind others to mention God at all times. She linked the giving of advice for health to the act of prayer, 'religion is advice, giving advice is like a prayer, and advice is the core of the religion'. She advised Muslim nurses to remember and give thanks to God and to remind patients of the greatness of God. According to Al-Osimy (2005), the role of the nurse is to console the patient and 'to remind the patient that the Prophet said everything is good for Muslims, including fever'. If having trouble with a patient, 'it is the duty of the nurse to forgive and forget the bad words from the patient. Take God's word and find a suitable solution.' Similar beliefs guide the education of nurses. Al-Osimy (2005) noted that nursing 'education is a part of prayer. It is important that faculty are believers [of Islam] and experienced in education. Teachers are like prophets on earth.' There is a narration from by Abu al-Darda' (Allah be pleased with him) recounting that the Messenger of Allah said, 'Scholars are the inheritors of the prophets' (Tirmidhi). The training of nurses must be within an Islamic environment, depending on Islamic principles and ethics. An example of the caring action as the facilitation of the faith is threaded through the narratives in Lovering's study (2008). One nurse explained the way she responds to a patient who asks her to do something that is against the religion and her role as a nurse.

Sometimes the patient will ask you something that is not acceptable. You can't do it as a nurse, but if you say no to him directly, there will be trouble for you and the patient. ... Give him the view from the religion and he will accept it very easily.

Building the patient's trust in God is another aspect of caring action. A paediatrician explained the importance of building the patient's trust through a story of breaking the news to parents following the birth of a disabled child (Soby, 2004). He talked about a mother going through pregnancy with dreams of a child and their future. When a baby is born with a disability, that dream is shattered, and there is a need to break the news about the baby in a certain way. He started his advice on breaking the news by talking about the importance of belief in God, which is 'the most important thing'. You must present the baby as a gift from God. Secondly, the mother's belief in God may be harmed. The mother often thinks that she did something bad, not just in

pregnancy, but in her life, and that this disabled baby is a punishment from God. 'Why did God do this, God is punishing me?' and this in turn affects her belief in God. Therefore, you must focus on the belief in God, and on fixing the notion that the parents are being punished. 'It is very important, as belief in God is the most important thing to the human being' (Lovering, 2008, p. 109).

Many nurses shared examples of the integration of their shared faith into the care of patients using religious teaching and religious words. The nurses used the word *Insha'Allah* (it is God's will) and prayer to calm patients' anxieties about having surgery or treatment. The nurses explained that as the outcome for the patient is already predestined, religious words support and reinforce the patient's belief in God, giving comfort and strength to the patient. Nurses also assist patients in reading the Qur'aan to relax the patient. An intensive care nurse used tape recordings of the Qur'aan to calm her patients. She 'went around with earphones to ICU patients and put on tapes with the Qur'aan'. Nurses also linked religious teachings from the Qur'aan to patient teaching. The use of prayers and reading of the Qur'aan were common caring actions in Mebrouk's study on Muslim nurses' caring (Mebrouk, 2008). One nurse encouraged palliative care patients to receive comfort from listening to recitations of the Noble Qur'aan or watching Islamic lessons on television. Another explained that when she 'gives him the anti-emetic and I am here beside him and I am reading the Noble Qur'aan for him, so it will make it much different, because we all believe in the Qur'aan and the role of it, the spiritual feeling' (Mebrouk, 2008, p. 154). Nurses also linked the emphasis given by the Prophet on cleanliness as a reason to clean the patient's skin prior to an injection, and use of Zam Zam water (Holy water from Makkah) instead of regular water to give oral medications (Mebrouk, 2008). A nurse discussed the use of Zam Zam water as part of her spiritual care. She explained,

In the neonatal intensive care unit (NICU), the father will give you Zam Zam water to feed to the NICU baby. You may only give the baby a drop, or wash their face with it, or bathe the baby. This is spiritual care. The non-Muslim nurse does not understand how important this is to do. (Lovering, 2008, p. 111)

Nurses spoke of the importance of prayer and saying the *Ash-Shahadah* when a patient is dying. The *Ash-Shahadah* is the basic creed of Islam or testimony of faith, meaning 'There is no true God but Allah, and Muhammad is His Messenger' (Huseini, 2006, p. 58). One nurse said: 'If dying, say the *Ash-Shahadah* for the patient... give them a smile, tell the patient if the nurse sees good signs. If there are bad signs, don't tell the family. Nurses must mention

God in the last breath, and say the Islamic *Ash-Shahadah*.' Another nurse spoke about taking care of a Muslim patient in an intensive care unit in Ireland. She would say *Ash-Shahadah* in the ear of the patient when the team was trying to save the patient's life. Patients also seek religious advice and support from the nurses. Patients ask for advice on performing ablutions (ritual washing) before prayer, ways to perform prayer when unable to bend or kneel, and the direction to face for prayer.

The nurses' narratives highlighted the use of religious words as a caring action and connecting to the patient relationship. The words *As-salamu Alaykum* (peace be upon you), *Bismillah* (by the name of God), and *Insha'Allah* (God's willing) were used to make a spiritual connection with the patient and to connect nurses' caring actions with the name of God as the basis of the trust between nurse and patient. The use of religious words such as *Bismillah* is not limited to Muslim nurses caring for Muslim patients, but can be used by all nurses prior to any procedure for a Muslim patient. A Muslim nurse explained that non-Muslim nurses should know that to say *Bismillah* is an action to calm the patient to establish trust between the patient and nurse. Muslim nurses consider the use of *Bismillah* as a form of prayer for their patients, regardless of a shared belief system. 'We will say *Bismillah* and will pray for our patients, even if they are not Muslim.' So, their spiritual caring is not specific only to the Muslim, but 'that is how we treat all of our patients'.

### Reward for nursing actions

A fundamental belief in Islam is that you must live your life in preparation for reward in the afterlife. It follows that the belief in reward in the afterlife underpins the nurse's caring role. The nurses linked the importance of their caring actions to a verse in the Qur'aan that gives significance to saving another's life (interpretation of the meaning):

- *If anyone has saved a life, it would be as if he has saved the life of the whole of mankind.* (Al-Mā'idah [The Table Spread] 5:32)

Muneera Al-Osimy (2005), in a keynote address on 'Morals and Practices of the Muslim Nurse', began with the following excerpt from the Qur'aan (interpretation of the meaning):

- *Whoever works righteousness, whether male or female, while he (or she) is a true believer (of Islamic Monotheism) verily, to him We will give a good life (in this world with respect, contentment and lawful provision), and We shall*

*pay them certainly a reward in proportion to the best of what they used to do (i.e. Paradise in the Hereafter).* (An-Nahl [The Bee] 16:97)

The use of this verse clearly links nursing care with righteousness, Islam and reward for good work. Further, Al-Osimy (2005) emphasised the importance of reward from God for nursing and advised nurses not to complain or be dissatisfied. She noted that good behaviour and conduct, relieving problems for others, visiting the patient, and showing the patient where to face for prayer, were all actions making the nurse deserving of entering heaven. Receiving recognition and reward from God and appreciation from the patient were frequent themes in the narratives of the nurses. According to the nurses, helping a patient to have a longer life brings greater reward over time to the nurses for their good work. The reward and recognition from God accumulates as you care for more patients. A nurse explained this concept:

I did something good for this patient, for example I saved his life or I did a good dressing. It will increase his life maybe 15 or 20 years. All the good things that he is doing [over his lifetime] mean I will get benefit from it. God will reward me for it. God will not reward me for what I did just once. For example, if the patient is having a cardiac arrest, I help him to get back to life. He comes back to life, he does good things, and then I will get benefit as he is doing good at the same time. God is giving, and God will see how many patients you are dealing with. There are many good things you will receive from God. (Lovering, 2008, p. 117)

Another nurse talked about the patients appreciating and giving thanks to God for the nurses' caring. This makes nursing special as it comes from their shared religious values.

One of the things that really make me like nursing: if the patient is in pain and says to you: 'Thank you, God Bless you.' That's a perfect thing for me. There are a lot of people that when you're doing something for them, they are really praying to God, saying your name all the time. 'God bless you, God help you.' This is something, I could receive all the money, but it's the religion that is important for me. (Lovering, 2008, p. 118)

### Conclusion

The history of nursing in Islam grounds the nursing identity in the religious values shared between nurses and patients. While acknowledgement



of this nursing history is recent in the region, the validation of the nursing role in Islam provides the foundation for caring as an act of spirituality. Rufaidah's narrative symbolises many aspects of caring in Islamic nursing today: the attributes of empathy, kindness, patience and human touch; helping the needy and disadvantaged. The belief that nursing is a means to express and practise the Muslim faith underpins caring as a spiritual action. Islam is the foundation of the shared values of the nurse and patient, and expressed through caring action. Thus, the nurse's professional and personal identity is inseparable from Islam (Mebrouk, 2008). Faith in God is the basis of the nurses' commitment to their profession and their patients. As with all Muslims, the first duty of the individual is to God, then to their own faith and worship of God. The nurse's relationship with God forms the beginning point of caring for the patient and actions to assist the patient's belief in and relationship with God. Caring actions include reading from the Qur'aan and use of religious teaching. The verse in the Qur'aan [An-Nahl 5:23]: 'if anyone has saved a life, it would be as if he has saved the life of the whole of mankind' is significant to the belief that nursing is a spiritual action that will bring rewards in the afterlife. Receiving recognition and reward from God are central goals for all Muslims, and caring is a means of achieving this outcome. Muslim nurses are guardians of a patient's spiritual and physical health. The following Hadith captures the link between a Muslim nurse's own spirituality and the caring role. One companion of the Prophet asked him: 'What actions are excellent?' He replied: 'To feed the hungry, to help the afflicted, to lighten the sorrow of the sorrowful, and to remove the sufferings of the injured' (Bukhari).

### Reflective Activity 3.2

- After reading this chapter, what is the most important thing you take out of this?
- How are your values expressed through your nursing care practice?
- What sorts of things make you feel uncomfortable in relation to meeting the spiritual needs of the Muslim patients? Why?
- How does your understanding of cultural competence impact on the nursing approach to care?
- Why might it be important to establish what beliefs, values and theories you are aligned with?
- How do you reconcile differences in beliefs, values and attitudes?
- Reflect on the role of Muslim nurses and on your own role in caring as an act of spirituality.

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