

Psychiatry Mental Health 2017 : If you continue to raise your voice, we will have to ask you to leave! Whatever happened to compassion in mental health care? - Michael Sheehan - Cornell University

Michael Sheehan

Cornell University, USA

Despite the belief that compassion is at the essence of caring and the heart of practitioner-client relationships, it is no longer a common feature of mental health care discourse. Moreover, there continues to be a gaping imbalance of power in mental health services evidenced by a lack of tolerance for difference and the imperative to deal decisively with problematic clients. This is a result of societal concerns and priorities around the need to control risk and uncertainty and an emphasis on rationalization of services and evidence-based practice. In this paper, I will discuss about how globalization and our current political climate have led to a lack of compassion that has developed in mental health practice. I argue for the need to reintroduce and support compassionate care where it can thrive and is expected. Only through the eyes of compassion can we truly understand a person who is grappling with despair, persecuted by voices or a prisoner of their fears and assist them on their journey to recovery. Islam is a monotheistic religion based on revelations to the Prophet Muhammad 1400 years ago, which were recorded in the sacred Quran (Koran). The word Islam in Arabic means “submission,” reflecting the central core of Islam, which is the submission to the will of God. According to the statistics from new population projections by the *Pew Research Center's Forum on Religion and Public Life*, there are 1.65 billion Muslims worldwide and it is expected to increase by about 35% in the next 20 years, to reach 2.2 billion by 2030; making Islam the second largest religion in the world after Christianity. Islam provides Muslims with a code of behavior, ethics, and social values, which helps them in tolerating and developing adaptive coping strategies to deal with stressful life events. Islam teaches how to live in harmony with others “Seek the life to come by means of what God granted you, but do not neglect your rightful share in this world. Do good to others as God has done good to you. Do not seek to spread corruption in the land, for God does not love those who do this” (Quran, 28:77). In Islam Sharia means ‘the path’ and it refers to the path that Muslims should follow in their life. It provides the guidelines and requirements for two types of interactions: Those between humans and God (worship); and those between

humans to humans (social transactions). The main sources of Sharia are the *Holy Quran* and *Sunna*. The Quran describes the way in which Allah should be worshipped. The Sunna includes all the known sayings, advices, and actions of Prophet Mohammed, his decisions, and his responses to life situations and to philosophical and legal questions, which usually derived from what's called Hadith. According to attachment theory by John Bowlby, we know that having a secure attachment has been linked to the overall wellbeing, coping, better mental health outcomes, enhanced self-esteem, and stronger relationship functioning. Thus, having a “healthy attachment” to God would also be linked to better psychological functioning: “... And whosoever puts his trust in Allah, then He will suffice him...” [Quran, 65:3]. Despite the growing size of the Islamic community in the western countries, most western practitioners appear not to have been very well exposed to Islamic values and teachings during their educational careers. Researchers found that many Muslims are hesitant to seek help from the mental health professionals in Western countries due to the differences in their beliefs and lack of understating of the helping professionals about Islamic values in their treatment modalities. Consequently, Muslims might feel uncomfortable in seeking psychiatric help to avoid being in conflict with their religious beliefs. The aim of this review article is to highlight the role of Islam in the management of different psychiatric disorders; and provide psychiatrists especially those working in Western countries with Muslim patients or Western psychiatrists travelling to Islamic countries or to those who are not familiar with Islamic values with therapeutic modalities that are congruent with Islamic values. We think it is highly beneficial to integrate certain Islamic views in Westernized therapeutic techniques to make them more acceptable by Muslim societies. Treatment in psychiatry follows the biopsychosocial model, and religion is considered to be one of the most important psycho-social factors in human life, especially in Muslims’ population. Hence it is imperative to recognize how Islam can modify the treatment and prevention of different mental disorders. Islam from a bio-psychosocial model perspective In

Islam, religion and spirituality are not mutually exclusive as you cannot have one without the other. Other religious and spiritual traditions may see them as separate where you can have one over the other. From the biological perspective, different studies have found that being religious increases patients' satisfaction and adherence to treatment. This can be applied to Islam in the way it helps with drug adherence through encouraging Muslims to look after their health by seeking advice and receiving treatment as health is considered a gift from God, which should be cherished. The Prophet Muhammad has reported "*down a cure even as He has sent down the disease.*" On the contrary to what is commonly thought among Western societies that Muslims believe that mental illnesses are due to demons or bad spirit-related, it was in fact the Europeans in the Medieval Period who viewed mental illness as demon-related, Muslim scholars of that time, including Ibn Sina (known in the West as Avicenna – the founder of Modern Medicine), rejected such concept and viewed mental disorders as conditions that were physiologically based. *This led to the establishment of the first psychiatric ward in Baghdad, Iraq in 705CE by al Razi (one of the greatest Islamic physician).* This was the first psychiatric hospital in the world. According to al Razi's views, mental disorders were considered medical conditions, and were treated by using psychotherapy and drug treatments. Another fact which clinicians need to be more aware of is that adherence to psychiatric medications may be affected during Muslim fasting periods as in Ramadan (*in which Muslims fast from just before sunrise to sunset each day*), so clinicians should adjust the dosing interval according to timing of iftar and suhoor (i.e., the Muslim

fasting and eating times). This can also be achieved by using alternative dosage forms for medication during Ramadan. However, if the patient's mental condition necessitates frequent dosing, or his physical wellbeing will be adversely affected by the combined effect of fasting and psychotropics intake, which may lead to dehydration, the clinician can then advise the patients not to fast as Islam exempts them from fasting in such conditions. "And whosoever of you is sick or on a journey, let him fast the same number of other days. Allah desired for you ease; He desired not hardship for you". (Quran 2:185). Another detrimental factor in pharmacotherapy adherence is the presence of inert ingredients in psychotropic medications, which might be derived from pork products that may pass unnoticed by the clinicians. As ingestion of pork or any of its products is totally forbidden in Islam and it may be considered as committing a sinful act. So if this issue is not identified and addressed, then patients may not only stop taking their medications, and hence leading to relapse of symptoms, increasing hospitalization rates, and increasing healthcare costs but also lead to a poor doctor-patient relationship.

Biography:

Michael Sheehan is currently an Executive Director at Relationships Australia, Australia and oversees its family mental health, domestic violence and child contact services. He has over 25 years of experience and held senior management positions within the community services sector, involving setting up and managing mental health, substance use and government and community services.

michael.sheehan@relationshipsaustralia.org.au