The Islamic Perspective of Ethical and Legal Rights of Psychiatric Patients

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Introduction

Islam dates back for more than 1,441 years and Muslims constitute approximately 23% of the world’s population and serve as a majority in approximately 50 countries around the globe [1]. Therefore, Muslims form the second largest religious group in the world. Islam is the dominant faith in many countries of the Middle East, Africa and Asia, and there are minority Muslim communities throughout the rest of the world. Islam is a universal religion comprising all nationalities of the world, and makes no distinction based on gender, colour, race or ethnicity. One must not confuse ethnic traditions and customs with Islam. The main objectives of this chapter are as the following:

- Identify what is ethics in Islam.
- Recognize Sources of Muslim Legal and ethical Code.
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- Explore how Muslims contribute to the field of Psychology.
- List mental health hospitals and services in Islamic societies.
- Define the concept of mental health and mental illness in Islam.
- Describe the aetiology and therapeutic models for mental illness from Islamic prospective.
- Explore Role of Islam in managements of mental disorders.
- Explain the role of the Islamic rules in managing specific clinical issues such as: involuntary hospitalization, malpractices, suicide and confidentiality.
- Inform and developing awareness of psychiatrists working in Western countries with Islamic patients, Western psychiatrists travelling to Islamic countries, and Islamic medical students studying in Western countries. Like any important issue.

What is Ethics?

The word “ethics” originates from the Greek word “ethos”, which means “character, spirit and attitude of a group of people or culture” [2]. According to the Oxford Dictionary, ethics is defined as: (1) a system of moral principles by which human actions may be judged as good or bad, right or wrong; (2) the rules of conduct recognized in respect of a particular class of human actions. Also, Ethics has been defined as: "The normative science of the conduct of human beings living in societies - a science which judges this conduct to be right or wrong, to be good or bad or in some similar way." [3] From an Islamic point of view, ethics is related to several Arabic terms. These terms are as follows: ma’ruf(approved), khayr (goodness), haqq (truth and right), birr (righteousness), qist (equity), ‘adl (equilibrium and justice), and taqwa (piety). Good actions are described as salihat and bad actions are described as sayyi’at. However, the term that is most closely related to ethics in the Quran is akhlaq [4]. Even though ethics is defined as what is right and wrong, the most pressing issue is how one to know the right from the wrong is. [5]

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As, it was reported 'Ethics' deals systematically with the standards by which we judge the right or wrong in human action. Thus, setting any standards of 'right' or 'wrong' behavior in a society is related to the field of 'ethics'. To find out whether an action or behavior is ethically carried out, ethical theories are what organizations have at their disposal. As it was concluded by Al-Aidros, Shamsudin & Idris[6] in their study titled ‘Ethics and Ethical Theories from Islamic Perspective’. Theories such as relativism, utilitarianism, egoism, deontology, and the virtue ethics, are all products of Western understanding every theory has a single viewpoint with regard to ethical issues, such as action, character, religion, or culture. However, despite their utility, this study argues that the Western concepts and understanding of ethics are limited and incomprehensive in explaining what is right and what is wrong. In contrast, as shown in (Table 1). Islam conceptualizes ethics based on the Islamic sources. Islam goes even further than these theories by maintaining that all systems, including the ethical system, are in the hands Allah s.w.t. While Islam agrees with divine command theory, which was rejected in the Western ethical literature, it has different considerations as mentioned earlier.

**Table 1: Ethical Theories and Islamic Perspective**

| Theory                  | Main Idea                                                                 | Islamic Perspective                                                                 |
|-------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Relativism theory       | Ethics are relative to a particular environment. Different societies may have different ethical codes. There is no universal truth in ethical principles that can be held by all peoples at all times. | Rejected because may be a particular society culture is against Islamic principles. |
| Divine Command theory   | “Ethically right” means “commanded by God”, and “ethically wrong or unethically” means “forbidden by God”. Religion is the only standard to identify ethics. | Accepted, but this theory was rejected in the Western literature.                   |
| Utilitarian theory      | “Ethically right” means the action results in a greater number of utilities than could be achieved by any other actions. | Rejected because the only basis for this theory is the greatest consequences for greatest number. |
| Egoism theory           | A person must always perform in his/her own interest. An action is considered to be ethically right only when it promotes a person’s self-interests. | Rejected because it is against the Islamic principles of justice, helping others, and altruism. |
| Deontology theory       | It underlines the duty as a basis of moral category which can be seen as a right or wrong judgment. It does not look at the consequences of action. And, there are universal ethical actions that everyone must accept. | Rejected because the theory is not clear about the source of these “universal ethics” since in Islam the only source for ethical system is the Islamic principles. |
| Virtue ethics theory    | This theory focuses on what makes a good individual or person rather than what makes a good action. There are specific virtue traits that every person must have such as civility, cooperativeness, courage, fairness, friendliness, generosity, honesty, justice, loyalty, self-confidence, self-control, modesty, fairness, and tolerance. | Rejected because the only basis for this theory is virtue ethics.                   |

Adopted from Al-Hasan Al-Aidros, FaridahwatiMohd. Shamsudin & Kamil Md. Idris[6]
Sources of Muslim Legal and Ethical Code

In Islam, ethics can be defined as the good principles and values based on the Islamic sources [7]. 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). These ethics are consistent with the ability of human beings. [8] It also covers all aspects of life. Understanding the Islamic legal code and process of legislation will help the clinician appreciate how Muslims may arrive at different perspectives and practices on a particular issue. In order to act in accordance with Islamic beliefs, Muslims turn to the Qur’an, the Muslim Book of guidance, and the hadith, sayings of the Prophet Mohammad, which provide the basic structure of the laws of human conduct, also known as Shariah or Divine laws. Islamic jurisprudence or Fiqh is based on shariah or Divine laws. These laws cover ways of worship, right and wrong, and dealings in one’s everyday lives, including business transactions, family issues, societal issues, etc. In addition to rules on dealing with one’s everyday life, Islamic jurisprudence also covers mental health. Islamic law governing mental illness and insanity dates back to the seventh and eighth centuries. Islamic laws also address patient confidentiality, insanity defense, involuntary hospitalization and treatment, mental competencies, family laws related to the mentally handicapped, child custody issues, child abuse and child witness, etc.

Muslims Contributions to the Field of Psychology:

Muslim scholars have made major contributions to the arts and sciences, especially in the area of psychology [9; 10]. Muslims were pioneers in specializations such as child development, social psychology, psychotherapy, and cognitive psychology. Among them, Abu zaied Al-Balkhi, a cognitive psychologist, was the first to differentiate between neuroses and psychoses and came up with a treatment approach similar to Joseph Wolpe’s reciprocal inhibition. Abu Bakr Mohammad Ibnzakariya Al-razi (Rhazes), an early psychologist, promoted psychotherapy and was a master of psychological, psychosomatic, and organic disorders [9]. Ibn-Sina, The great Muslim physicians include al-Razi (d. 925) who wrote a 24-volume encyclopedia of medicine and who treated psychiatric patients, and Ibn Sina (Avicenna; d 1037) who wrote the 14-volume The Cannons of Medicine, which was used in the West for 700 years. Ibn Sina rejected the notion that mental illness was caused by evil spirits (jinn’s). Also, known as Aviceenna, wrote about the mind and its relationship to the body by linking physical and psychological illnesses, and used psychological techniques to treat his patients [9]. Islamic psychology differs from contemporary psychology as it incorporates religion and studies the soul of an individual [9]. It is necessary for clinicians to be aware of these historical contributions to psychology as they may utilize specific terms such as Qalb, or heart, to delve into how clients are feeling and why they are feeling this way. Another term that can be used is Irada, or will, to investigate where a client is in the process of change. Incorporating these terms in sessions can also help a clinician solidify the clinician–client relationship and provide important insights into the client’s issues.

Mental health hospitals and services in Islamic societies

The first psychiatric hospitals of the world were probably built in Arab cities: Baghdad in 705CE, and Cairo in 800 C (Ibn Tulun Hospital) as the governor of Cairo 259/872 had been established this hospital on the pattern of the hospital in Baghdad. In addition, various wards were constructed for eye diseases, orthopaedic and surgical cases. Ibn Tulun took a special interest in the welfare of the patients and he used to inspect the progress of the patients personally every Friday. In this Hospital he had also made a separate section for the treatment of the insane. Moreover, a psychiatric hospital was built in Damascus in 1270 CE [14]. In Turkey, special psychiatric wards were built onto a general hospital in 1555 and a specific psychiatric hospital was built in 1583. On one hand, the first modern psychiatric hospital in the Middle East was the Roozbeh Psychiatric Hospital, in Tehran, Iran, which opened in 1937 and which was staffed by two European trained psychiatrists.

On the other hand, the first modern psychiatric hospital in Saudi Arabia was built in 1962 the popular view among public is that mental illness is the punishment of Allah or inflicted by evil spirits. There are some regions providing advanced treatments but other treatments include cauterization, beatings and exorcism. In a study done by Khalil, Elsamkari, and Al Sulami [13] investigating the level of mental health literacy and attitude of Saudi public toward mental disorders they found that 72.2% of studied sample indicted that Evil Spirit causing mental illness, and holding negative attitude responses that were ranging from 47 -57% regarding stigmatization, mental illness after effect and treatment.
Historically, it was reported that before 1950 there were no proper arrangements for mentally ill patients, and they were housed in residential houses. The picture is similar in Pakistan, where the majority believes that mental illness is caused by demonic possession. Patients are still kept in bondage chained, beaten, parts of their bodies burnt.[14] Contrarily, Murad and Gordon[10] reported that ‘Psychiatry in contemporary Arab societies is well established. Malaysia is pushing ahead with major policy reform in mental health, including mental health legislation and attention to the quality of services.[9] While, mental health services in Egypt are receiving active attention[15] and Lebanon prepared a national mental program in 1987, but progress has been slow.[16] Moreover, Kuwait and Bahrain had large custodial hospitals that have, to a large extent, been replaced by more progressive psychiatric services whereas, Qatar (population 500 000) has never had a dedicated psychiatric hospital and services have been provided through psychiatric wards attached to general hospitals.[17] However, Iran (population 60 million) has a range of psychiatric services and a dozen universities graduate 50 psychiatrists each year. Recently an Iranian study reported that the prevalence of mental disorders is compatible with international studies.[18]. A World Health Organization (WHO) studies of depression in different cultures around the world showed the clinical features of patients in Tehran to be similar to that elsewhere.[19] Post-traumatic stress disorders have been reported in survivors of the Iran–Iraq war[20] and in response to the Bam earthquake.[21] In Malaysia, depression and anxiety commonly present as somatic symptoms.

Concept of Mental Health and Mental Illness in Islam:

Mental health in Islam is recognized as an integral component of an individual’s psychosocial functioning, productivity and interactivity during their day to day lives, no less important than physical health. As such, mental stability is essential for ensuring optimal health and well-being, and necessary for a Muslim person to sustain his or her religious and spiritual obligations and exert primary responsibilities as a meaningful member of the wider community. Within the Quran, four components are mentioned that have come to be viewed as a holistic model of the self.[22] This model is based on the interrelation between the ruh (soul), the qalb (connection between the soul and the body), the aql (intelect) and the nafs (drives or desires) merging through the dahmeer (consciousness).[23] In order to be healthy, all 4 aspects of the self-need to be balanced. An imbalance in any aspect results in physical, mental and/or spiritual illness.[22][23][24] On the other hand, the Islamic understandings of mental and physical illness correspond to current diagnostic classifications as described in the DSM-IV-TR,[26] and the ICD-10.[27] Mental distress or illness is generally expressed as moral transgression or the result of Divine will. However, an additional category of illnesses was acknowledged by Islam such as: spiritual illnesses, which are divided into 2 types, sihr (black magic) and nazr/ayn al husood (evil eye).[22] Jinn, spirit possession and bewitchment all fall under the category of sihr. Nazr, on the other hand, is when a person looks at another person with an ‘evil eye’ or with envy. When a person has nazr they suffer from certain symptoms. For example, things do not seem to work out for them in personal or business ventures or they undergo changes in appetite. However, people who suffer from spiritual illnesses caused by sihr present with more severe symptoms, leading to more profound and destructive disturbances in physical, mental and spiritual well-being. Sihr needs to be treated by traditional healers.[28] Therefore, Muslims often prefer religious interventions such as fasting (sawm), repentance (taubah) and regular recitation (dhikr or zikr) of the Qur’an. Muslims believe that regaining connection and intimacy with Allah enables one to gain a cognitive grasp of their situation. This is expected to reduce motivation for sin and relief from distress, which leads to better health. Sufis, the mystics of Islam, employ extra devotional practices and rigorous ethical development exercises to tame or annihilate the ego-self and achieve a “restful heart.” The key mental health values among Muslims include: personal dignity, honour, and reputation. Also, family loyalty or group loyalty above individual needs: one’s behaviour must reflect well on others; and acknowledging that all things depend on God; piety is the most admirable attribute: regular performance of ritual obligations, prayer, and Qur’an reading are therapeutic resources. Accordingly, researchers found that many Muslims are hesitant to seek help from the mental health professionals in Western countries[23][24] 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.

As with many cultures and ethnic communities from non-English speaking backgrounds, discussion about mental health issues is often associated with stigma, avoidance, reticence, reluctance and even concealment. Thus, Self-referrals by Muslim clients and families to community mental health services are somewhat uncommon and are usually initiated by the client’s emergency situation.

Patient Rights and Code of Nursing Ethics in Islam

According to the statistics from new population projections by the Pew Research Centre’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.\cite{28} Therefore, among Muslims societies there have been a great deal of interest in addressing issues related to medical and nursing ethics. As these issues are addressed internationally, it is important to consider how ethical principles could be interpreted in a national context. It is surprising that the concept of patients’ rights and ethical codes have not been considered until recently. Ali Akbari and Taheri (2008)\cite{29} have explained that the Patients’ Bill of Rights was created in order to defend human rights; preserve patients’ dignity; and ensure that in case of sickness, and especially in emergencies, patients receive competent care without discrimination. Respect for patients’ rights and the development of a framework to reflect these rights have a long record in the history of Islamic healthcare services, and have been developed and published by the Ministries of Health of every Islamic country. Joolaei\cite{30} conducted a phenomenological study designed to examine patients’ rights based on experiences of patients, their relatives, nurses, and doctors. The study showed that human rights are involved in many aspects of patient-oriented care. These rights are advanced through effective communication that includes understanding and sympathy. From patients’ point of view, a willingness to meet their basic needs and to protect them under any circumstances is essential characteristics of healthcare providers. Another important aspect of patients’ rights is safeguarding autonomy and informed consent regarding healthcare interventions as the healthcare paradigm shifts from a paternalistic to a patient-cantered focus of care. On the other hand, liability for malpractice should be avoided this including causing intentional or, unintentional harm, violating professional standards, ignorance, treatment without consent, deception, refusal of treatment, and breaching of confidentiality\cite{31}

**Code of Nursing Ethics**

In the last 2 decades, the codes of ethics have been adopted for many professions especially medical ad allied health profession. In nursing, as one the most-trusted professions, the ethical codes have been also published by nearly every recognized professional group worldwide. Esmailpoor and Salsali\cite{32} have reported that nursing ethics codes developed by the American Nurses Association, Canadian Nurses Association, International Council of Nurses, and other nursing associations have been influential in helping nurses in their ethical decision making related to their educational, managerial, clinical, and research activities. Although these codes vary slightly in content, all of them have underlined important ethical principles, such as doing no harm, beneficence, autonomy, justice, privacy, confidentiality, veracity, fidelity and human dignity. Psychiatric nurses are constantly faced with the challenge of making difficult decisions regarding good and evil or life and death. So, they must know the legal and ethical issues related to psychiatric practices. The American Nurses Association (ANA)\cite{33} has established a code of ethics for nurses to use as a framework within which to make ethical choices and decisions regarding care of the mentally ill.

Moreover, it helps in decreasing the malpractices, negligence, assault, battery and defamation of patient character within the psychiatric hospital. Psychiatric nurses must attempt to provide treatment in a manner that least restricts the freedom of clients. The "restrictiveness" of psychiatric treatment modalities can be described in the context of a continuum, based on severity of illness such as clients may be treated on an outpatient basis, in day hospitals, or in Voluntary or involuntary hospitalization instead of inpatient admission. Therefore, in mental health care setting, it is necessary to balance the dangers from psychiatric patients that can present to themselves and society. It is necessary to provide those patients with least restrictive treatment modalities that maintain their freedom, to ensure that no compulsory treatments are unethical, and to respect human dignity and autonomy.

**Duties and positions on mentally ill patient in Islam**

Islamic Law rules that the insane are excused they will have no reckoning and all their sins will be forgiven. "Allah burdens not an individual more than his capability" (Quran 2.286). Mufti Shafi on the above verse comments that: A person’s actions can be divided into two categories, voluntary and involuntary. They will be reckoned for the voluntary actions but the involuntary ones are excused (Quran [2]286). Islam is very compassionate and understanding towards human nature, hence we have been told from the very outset that: "Mankind has been created weak" Quran 4.28. In other words if you do indulge in outrage, one should not become disorientated, but rise above the situation and turn to his Lord in repentance, for indeed He is Al-Gaffar (Most Forgiving) Al-Rahman (Most Merciful)."The repeater from sins is like one who has no sin at all". Consequently, an adult Muslim diagnosed with cognitive dysfunction (e.g. dementia, delirium, autism, intellectual disability, organic brain disorder etc.) and major mental illness (e.g. Schizophrenia, Schizo-affective Disorder, Bipolar Affective Disorder, Delusional Disorder or unspecified psychosis etc.), which temporarily or permanently compromises decision-making capacity, and significantly impairs insight and judgment, is pardoned from the expected obligatory requirements in Islam.
Mentally impaired persons are excused from the required prayers (Salah) five times daily, fasting during the month of Ramadan, compulsory charity (zakat) or performing the pilgrimage (Hajj) to Mecca.

Aetiology and therapeutic models for mental illness from Islamic perspective:

a. A biological model and family role:

In Islam, religion and spirituality are not mutually exclusive as you cannot have one without the other. From the biological perspective, different studies have found that being religious increases patients' satisfaction and adherence to treatment [34, 35]. 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 Western societies thoughts about mental illness, 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 [36, 37]. According to Al-Razi's views, mental disorders were considered medical conditions, and were treated by using psychotherapy and drug treatments [38].

Family is an important socio-cultural component as it is the unit of the society, which has a huge impact on personality development and a potential factor in different psychiatric disorders. Bowlby revealed that the permanent loss of a parent during childhood may increase the vulnerability to certain forms of psychopathology, for example, depression. [39] Therefore, Islam enforces the family role in Muslim's life and emphasizes the religious, moral, and ethical values. On one hand, it may be helpful as the family may help in supporting the patients regarding his medications and psychotherapy, which help to improve the outcome. On the other hand, the family unit is sacred among Muslim people and it is very common to find different families with over involvement and enmeshment patterns, who are considered a continuous source of support to the individual. In some cases, the family will interfere on behalf of the identified patient, although they too lack in trust, whereas they expect much. For example, they might try to control the interview by answering the questions directed at the client while they withhold information that may be perceived as embarrassing, they may interfere with his medications and choice of treatments. [40]

Recently, Western societies tried to substitute the role of family in the life of the mentally ill patients through the help of social workers and care coordinators as a step forward in their care plan, but it is not as beneficial as family role is. There is nothing like a family especially if this is a supportive family, which can have a great impact on the illness outcome and the patient's quality of life. Therefore, psychiatrist and social workers need to consider the impact of family's involvement on individual mental health, and educate them nature of mental illnesses, values and nature of family patterns, so that they can in turn sensitively support their patients in managing his illness through an effective family serving relationship.

b. Psychosocial Model:

Regarding the psychosocial model, there is Islamic counselling, which is similar to Western counselling in the way the clients seek assistance from a suitably qualified person to deal with their psychological problems, the same may be effectively obtained from a religious leader or Imam. [41, 42] The main role of the Imam in for this purpose is to provide advice which would be in accordance with the Quranic principles and teachings of the Prophet Muhammad. Muslims approach Imams for counselling on social and mental health issues and particularly marital and family problems. [43] This form of counselling proved to be effective in improving marital adjustment levels of incompatible couples. [44]

Treatment and Therapeutic Models of Mental Illness in Islam

I. Medications or Pharmacological Treatment Model

There are many Hadiths (traditions of Prophet Muhammad peace be upon him (pbuh)) which encourage the Muslims to seek medical treatment. Some of them are mentioned below: Abu Hurayrah narrates that The Prophet PBUH said: “There is no disease that Allah has created, except that He also has created its remedy.” Bukhari 7.582 In addition Usamahibn Shuraik narrated: "... 'O Allah's Messenger! Should we seek medical treatment for our illnesses?' He replied: 'Yes, you should seek medical treatment, because Allah, the Exalted, has let no disease exist without providing for its cure, except for one ailment, namely, old age.'" Tirmidhi Taking proper care of one's health is considered by the Prophet Muhammad pbuh to be the right of the body. Bukhari as-Sawm 55, an-Nikah 89,
Muslims fast from just before sunrise to sunset each day in which Muslims fast from just before sunrise to sunset each day in which Muslims fast from just before sunrise to sunset each day. Islam recognizes that mental illnesses, as with physical/medical illnesses are entirely according to Allah’s will, whereby affected individuals are not to be stigmatized or discriminated against, and deserving of compassion and care. There are generally no stipulated barriers or prohibitions from an Islamic perspective in seeking modern psychiatric interventions, although some Muslim patients may require assurance and information that any prescribed psychiatric medications (particularly anti-psychotic depot injections) do not contain non-halal preservatives or ingredients. 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 psychotropic 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).

II. Electroconvulsive Therapy (ECT)

Islam has no restrictions for Muslim patients affected by severe mental illness to be treated by modern Electroconvulsive Therapy (ECT) i.e. under general anaesthesia, and using muscle relaxant that help in preventing fractures and dislocation. In addition, substantial psycho-education, explanation and reassurance is generally required around the specifics of the actual procedure, to allay concerns around stigma and confidentiality.

III. Model of Traditional Healing in Islam:

Another model of Islamic counselling is the traditional healing, here a traditional healer who may be a sheikh, derwish, or pir depending on their geographical location, practice various rituals to heal a client. This model explains the illness or personal problems as a possession by spirit (jinn). The solution for a healer is to exorcise the spirit, through reading Quran, prayers, playing music, dancing, and beating spirits, out of the “client’s” body, which then frees the person from misery. [45]On one hand, Muslims believe for thousands of years, and recognized the tremendous healing properties of a legendary herb – Nigella Sativa, or Black Seed. “Black Seed heals every disease except for death.” The Prophet Mohammed proclaimed over fourteen hundred years ago. It’s quite a statement; but, the protective and healing powers of Black Seed, the seeds from the plant Nigella Sativa, are so astoundingly comprehensive and varied that for thousands of years humans have regarded it as a “Miracle Cure”. Despite the support of some studies to the value of traditional healing, many Muslims do not believe in this form of healing nor consider it Islamic, which in these instances would make its use inappropriate and even banned in certain Muslim countries. Further, evidence suggests that Islamic traditional healing works mainly for treating neurotic symptoms, as opposed to severe mental or physical illness where it will fail.

IV. Counselling Model in Islam

Sufism is a model of counselling in Islam and it has beneficial therapeutic outcomes. Even those scholars who do not agree with the traditional counselling for Muslim clients frequently consider Sufism as the basis of an original counselling model in Islam. Nowadays, there are growing interests in Islamic psychotherapy from Western countries perspectives, which means incorporation of Islamic views of human nature while using different psychotherapeutic strategies and evidence-based treatments to help treating Muslim patients. This therapy includes using of Quranic metaphors, the Sirah of the Prophet and his traditions, as well as the biographies of the Prophet's companions, with Muslim patients, which will provide detailed instructions for implementing successful therapy facilitated through the use of Islamic concepts, as patients’ desire to address a given problem may be aided through the knowledge that this intervention enhances their relationship with God.

V. Psychoanalytic and Group Therapy Model

It was reported that psychoanalytic and group therapy are not widely accepted in Islam, despite the emphasis of Islam on the value of the community that is in contrast to the concept of individualism used by Western counselling. Islam highlights the importance of community rather than looking inward to establish their identity. Muslims tend to look outward, identify their identity in religious teachings, culture, and family.
For instance, some Muslims may feel uncomfortable sharing personal details in group settings, particularly if members of the opposite gender are present. However, the functions of such groups may be enhanced if they are composed of members of the same gender and involve values taken from the Islamic faith. [53]

VI. Spiritually Modified Cognitive Model

In Islam, using spiritually is equal to application of cognitive therapy, as it is done by replacing certain concepts used in Western cognitive therapy with concepts drawn from Islamic teaching [52, 54] and they called as spiritually modified cognitive therapy. In spiritually modified cognitive therapy, practitioners follow the cognitive restructuring model, where the therapist identifies the patient automatic thoughts and core beliefs. The process would then involve an evaluation and modification of automatic thoughts, followed by modification of core beliefs and assumptions. Modification occurs mainly through examining the evidence and looking for alternative explanation. [50] Therapist can use cognitions from the Islamic faith and offer it as alternative explanations to dysfunctional thoughts associated with a variety of conditions or disorders. [55] There are several significant cognitive themes from the Islamic faith that can help to adapt the patients’ cognitive errors. Studies on Muslims that used this spirituality modified technique for anxiety and depression showed faster results as compared with the traditional cognitive therapy. Similarly, a study conducted on Muslims with bereavement showed significantly better results with cognitive-behavioural therapy that had been modified to incorporate Islamic beliefs and practices [48]. Another striking study was conducted on Muslim patients with schizophrenia in Saudi Arabia, which revealed spiritually modified cognitive therapy was either similar, or superior, to the results achieved with traditional cognitive therapy [51]. Although these researches successful reporting about the effectiveness of the spirituality modified cognitive interventions for Muslim clients was, there are concerns regarding various methodological issues used in these studies, particularly small sample sizes. This reflects the utmost need for more research in this area to make definitive statements about the empirical soundness of such approaches. [56–58]

VII. Music Therapy Model

Reported researches evidence shows the magical effect of music to heal the body and strengthen the mindand unlock the creative spirit. [60] Music has been used as a treatment or cure from migraines to substance abuse. In addition, researchers found that music has a great effect on treatment of depression, insomnia, stress, schizophrenia, dementia, and childhood-related disorders like autism. [61–63] Regarding the concept whether music is allowed or forbidden in Islam (Halal or Haram), we can find different views from Islamic scholars, however, generally music is not considered forbidden in Islam as long as it is a therapeutic need. [64] A thousand years ago, Muslim physicians were at the leading frontiers of medicine and used innovations and different therapeutic techniques that are now considered modern. They treated mental illnesses by confining patients in asylums with twenty-first-century techniques of music therapy. [65] Al-Mansuri hospital in Cairo, which was established by Malik al-Mansur Sayf al-Din Qalawun in 1284, just like today’s advanced hospitals; provided patients with entertainment by light music. The Sufis mention that mental and nervous disorders are cured by music. The great Turkish Islamic scientists and doctors Al-Razi (854–932), Farabi (870–950), and IbnSina (980–1037) established scientific principles concerning musical treatment, especially of psychological disorders. [66] According to Farabi, the effects of the makams of Turkish music on the soul vary according to the type of makam i.e., Rastmakam: brings a person happiness and comfort. He also outlined the effects of the makams of Turkish music differs according to the times they were effective (i.e., Isfahan makam: effective at dusk). Then the great Islamic thinker and philosopher IbnSina (980–1037) applied Farabi music work in his practice with mentally ill patients. [67] The work of these two scientists became the base for the developing Turkish music therapy.

VIII. Meditation Therapy Model

Meditation is a mental process that traditionally has been used to achieve an altered state of awareness in both religious and non-religious practitioners. Recently, however, the interest in using different meditation techniques to alleviate symptoms such as anxiety, depression, and pain has increased in Western countries. Meditation is based on concentrating on any one idea or object to the exclusion of all other ideas or objects. MPM seems to be similar to the TM, it is refer to the Muslims rituals in praying. For Muslims, obligatory Salah is prescribed at five periods of the day. These are measured according to the movement of the sun. These are: near dawn (fair), after midday has passed and the sun starts to tilt downwards / Noon (dhuhur or zuhr), in the afternoon (asr), just after sunset (maghrib) and around nightfall (‘isha) [68]. “O ye who believe! seek help with patient perseverance and prayer: for Allah is with those who patiently persevere. (Quran, 2: 153). Prophet has said: “your prayers are like a flowing river at your doorstep you wash yourself in it five times a day.” Meditation works by eliciting the relaxation response.
The relaxation response is characterized by decreased heart rate, respiratory rate, oxygen consumption, and muscle tension [63]. Studies revealed that meditation helps in the reduction of total and low-density lipoprotein (LDL) cholesterol, decreased angina symptoms, and regression of coronary artery disease [69].

In Islam, Meditation is done by focusing on God's creatures (plants, animals, space, human body, etc.) which considered one of the most efficient and powerful forms of Islamic worship. In fact, the Quran describes Muslims involved in such a process of meditation as: men who celebrate the praises of Allah standing sitting and lying down on their sides and contemplate the (wonders of) creation in the heavens and the earth (with the thought): “Our Lord! Not for naught hast thou created (all) this! Glory to thee! Give us salvation from the penalty of the fire: (Quran, 3: 191). Other forms of meditation may be enhanced by the recitation of one word or a few words that give the person a sense of internal peace and calm, which is known as remembrance (zikr) in Islam; for example, by repeating the words Subhan Allah (glory be to Allah) or Al-hamdulillah (all praise be to Allah). It also adds an additional factor that helps in stress elimination and that is giving the individual the feeling that he or she is in extreme proximity with Allah, the Controller of the whole world. Recent studies showed that praying reduces postoperative complications following open-heart surgery. Praying also lowers the incidence of depressions in patients following hospitalization. Recently, it is recommended that praying can be used as an alternative therapy as successfully as meditation, exercise, or herbal treatments.

IX. Aromatherapy model:

Generally, aromatherapy is considered one of the relaxation techniques both physically and mentally and it can help in different psychiatric disorders like anxiety, depression, and dementia. Reviewing Islamic history, one will find many references to musk, rose, sandalwood, oud, bahkhoor, frankincense, myrrh, jasmine, lilies, citrus oils, and other fragrances. Avicenna (IbnSina, the Islamic philosopher) writings record over 800 medicinal plants and essential oils including chamomile, lavender, and countless others. He was the first to perfect the distilling of oils from plants, which is used today to make concentrated forms of aromatherapy oils. In the thirteenth century, the Arab physician Al-Samarqandi wrote on the aroma therapeutic use of herbs and flowers. [70]

Role of Islam in the Treatment of Mental Disorders.

Although mental health care has improved significantly over the last decades, many people still choose not to seek treatment or quit prematurely. A number of possible factors contribute to these disparities with stigma being perhaps the most significant. Stigma hurts individuals with mental illness and their communities, creating injustices and sometimes devastating consequences.

1. Grief:

It is a normal reaction toward any life losses. Muslims believe that all suffering, life, death, joy, and happiness are derived from God and that God is the one who gives us strength to survive. They believe that any loss or deprivation experience is a form of a test from God to his slave of how he will stand this suffering with patience and full trust in God's mercy. These beliefs usually help to comfort and aid the healing process. For example, in accepting grief and loss, the relatives of the deceased person are urged to be patient (Sabr) and accept God's test. ‘Be sure we shall test you with something of hunger and fear, some loss in goods, lives and the fruits of your toil, but give glad tidings to those who patiently persevere. Who say, when afflicted with calamity: To Allah we belong, and to him is our return’ (Quran: 62). People who have patience in accepting God's decree will be given a reward from Him. The Prophet Muhammad said: “No person suffers any anxiety or grief, and says this supplication but Allah will take away his sorrow and grief, and give him in their stead joy. However, Muslims are not immune against the feeling of grief. It is permissible to cry and express grief over the death of a loved one. For instance, when the Prophet's son, Ibrahim, died, the prophet said: ‘We are very sad for your death, O Ibrahim’, Islam encourages Muslims to talk about and remember their loved one and recall the good deeds of their life. Prophet Muhammad himself never forgot his love for his beloved wife, Khadijah, even years after her death [67]. During grief reaction a person may have negative thoughts such as ‘Why is this happening to me?’ ‘Why not someone else?’ ‘Why did Allah choose me for this unbearable trial?’ or ‘Allah is punishing me for my disobedience’. This is accompanied with anxiety and fear of Allah's punishment, both in this present world and the hereafter. Most of these patients come from families raised with a strong faith in Allah, but with an exaggerated sense of His punishment; God's love and mercy are diminished in their relationship with Him. In the therapy these patients may improve with interventions, such as modification of cognitive errors that focus on these thoughts and beliefs.
[68] Prophet Muhammad said, “No Muslim is struck with an affliction and then says Istirja’ (‘truly, to Allah we belong and truly, to Him we shall return’) when the affliction strikes, and then says, ‘O Allah! Reward me for my loss and give me what is better than it,’ but Allah will do just that”

2. Depression:

Stressful negative life events are one of major risk factors for depression and anxiety disorders. A Muslim experiencing symptoms of anxiety or depression or associated concerns may not necessarily express the complaints from a psychological context, but prefer to somatise and camouflage them as physical ailments. For example, a female Muslim patient affected by a major depressive disorder may highlight non-organic symptoms of headache or physical discomfort as opposed to describing low mood, reduced motivation, diminished self-worth, poor self-esteem etc. Biological symptoms such as sleep disturbances, weight loss or inability to function in day to day activities can then be explored, which obliquely suggest the presence of underlying mental health issues for further diagnostic clarification. Islam plays an important role in helping Muslims to cope with negative life events, which helps them in both prevention and treatment of depression. Muslims are not superhuman, however, if one experiences negative feelings, he is encouraged to resist them with positive thoughts and actions if possible, or to seek professional help if the case is clinical, exactly like any other form of illness.

“So, verily, with every difficulty, there is relief: Verily, with every difficulty there is relief.” (Quran, 94: 5-6) Islam encourages people to stay hopeful, even if someone has committed the worst sin or faced with most troublesome life event as there is always God's mercy.“And never give up hope of Allah's soothing Mercy: truly no one despairs of Allah's soothing Mercy, except those who have no faith.” (Quran, 12:87) To counter maladaptive thoughts related to hopelessness and feeling overwhelmed with life, as there is no place for despair because Muslims believe that it is God Himself who is in charge of everything, the all Seeing, All Knowing, and All Fair and Wise God.

As God says: “And for those who fear Allah, He always prepares a way out, and He provides for him from sources he never could imagine. And if anyone puts his trust in Allah, sufficient is Allah for him. For Allah will surely accomplish His purpose: verily, for all things has Allah appointed a due proportion.”(Quran, 65: 2-3)

3. Suicide:

It is one of direct self-destructive behaviour as the person put the end of his life by his hand therefore, it is prohibited in Islam. Islam helps to prevent suicide by two ways, directly by prohibiting it and indirectly, by lowering the causes of suicide such as substance abuse and maintaining mental/emotional well-being. In Islam, suicide is considered to be strictly prohibited. The Quran mentions “… [do not] kill (or destroy) yourselves, for surely God has been Most Merciful to you” (Quran, 4:29). And like Prophet Muhammad said “He who commits suicide by throttling shall keep on throttling himself in the Hell Fire (forever) and he who commits suicide by stabbing himself shall keep on stabbing himself in the Hell Fire.” (Sahih al-Bukhari, 2:23:446). On the contrary Muslims should remember God in times of suffering and pain and have faith and hope in God's mercy and compassion to ease the suffering. Despite suicide being prohibited and considered as a great sin, it should not be viewed as “black and white”, as it is widely acknowledged that a person with a mental illness who is not fully capable of making decisions is not held accountable for his/her actions. Most Muslim scholars agree that it is God alone who will judge the actions of each individual. This may help to reduce the guilt feeling that may affect the mentally ill patients after attempting suicide. Although it is reported that the Prophet did not pray at the funeral of a man who killed himself, he did not forbid his companions from praying at the man's funeral; this indicates a possibility for forgiveness.

4. Obsessive–Compulsive Disorders:

The essential topographies of OCD (Obsessive Compulsive Disorder) are the repeated incidence of obsessions and/or compulsions of sufficient severity that they are time-consuming (> 1 hour per day) or cause marked distress or impairment. [70] The most common obsessions found in Muslims are: Which Rak’ahofSalah is this? Doubt whether I performed Salah correctly or not Fear of impurities when doing Wudu (Wudu’ is the Arabic term for ablution) and while performing Salah Doubts of passing wind, and nullification of Wudu’ Doubts regarding Wudu’ whether it was performed correctly or not Blasphemous thoughts, and Constant feeling that my clothes are unclean. Unfortunately, These obsessions lead to certain compulsions such as: Doing Sajda e Sahw in every Salah, Re-performing Salah, Performing Wudu’ several times, Taking a lot of time in doing Wudu’, and Spending too much time in all purification/washing activities e.g. washing hands after meal From an Islamic perspective, these was a wis are
meant to weaken the will and beliefs of a person. Let us look at some of the verses from the holy Qur'an in this respect. Let us also look at a couple of hadith. Uthmanibn Abu Al- Aas reported that he went to Allah's Messenger (peace and blessings be upon him) and said, “Allah's Messenger, A shaytan intervenes between me and my prayer and my reciting of the Qur'an and he confounds me.” Thereof, Allah's Messenger said, “That is (the doing of shaytan) who is known as Khinzab, and when you perceive its effect, seek refuge with Allah from it and pit three times to your left.” “I did that, and Allah dispelled him from me.”

All human beings suffer from the wasawis (obsessions), regardless of age, sex, faith, or creed. However, the nature, content, severity, and influence of these wasawis vary from one person to the other. For some, they only cause mild anxiety and worry, while others are more severely affected to the point of becoming spiritually, mentally, emotionally, psychologically, and socially paralysed. In my experience, age, faith, family, sexual and religious history all play a significant role in determining the nature and content of these wasawis; while the severity and impact are determined by the pre-morbid spiritual, emotional, and psychological maturity of a person.

5. Anxiety Disorders:
   Anxiety is defined as feeling of uncertainty, uneasiness and discomfort. Anxious patients may have maladaptive thoughts such as “I feel that I am no longer able to cope,” “Life is too difficult for me,” or “No one is there for me.” It can be helpful for those who are suffering to recall that Allah is always there and can assist those who place their trust in Him. One of the foundations of Islamic belief is the understanding that Allah is able to do all things and He runs all affairs. This is an aspect of tawheed (belief in the oneness of Allah) that specifies oneness in Allah's Lordship.”And when you have decided, then rely upon Allah. Indeed, Allah loves those who rely [upon Him]” (Quran, 3:159).

   It is reported in a Hadith on the authority of Abdullah bin Abbas, who said: “One day I was behind the prophet and he said to me: “Young man, I shall teach you some words [of advice]: Be mindful of Allah, and Allah will protect you. Be mindful of Allah, and you will find Him in front of you. If you ask, ask of Allah; if you seek help, seek help of Allah. Know that if the Nation were to gather together to benefit you with anything, it would benefit you only with something that Allah had already prescribed for you, and that if they gather together to harm you with anything, they would harm you only with something Allah had already prescribed for you. The pens have been lifted and the pages have dried” (Zarabozo, 1999, Hadith 19, pp. 729-730). Other cognitive adapting techniques that can be used to relieve stress and help in anxiety as well as depression, is to count how much God has blessed us and trying to focus on what we have and not on what we are deficient in. Prophet Muhammad said, “Look at those who are less fortunate than yourselves, not at those who are better off than yourselves, so that you will not be little the blessings that Allah has bestowed upon you” (Quran 3:159).

6. Smoking:
   Muslims are forbidden to harm themselves or others. According to DSM5 Smoking cigarettes are considered one type of addiction. We all know that cigarette smoking causes a number of health problems that may lead to heart disease, emphysema, oral cancer, stroke, etc., and finally death as well as the risk to others, which is known as passive smoking. The Quran, does not specifically prohibit smoking, but gives behavioural guidance. Allah says, “…make not your own hands contribute to your destruction…” (Quran 2:195); “…nor kill yourselves…” (Quran 4:29). Prophet Muhammad said that “Whomsoever drinks poison, thereby killing himself, will sip this poison forever and ever in the fire of Hell.” In many parts of the Muslim world, the legal status of smoking has further changed during recent years, and numerous religious edicts or fatwas, including those from notable authorities such as Al-Azhar University in Egypt, now declare smoking to be prohibited.

7. Alcohol and Substances Abuse:
Alcohol is not a huge mental health problem among Muslims in comparison with Western society as Islam prohibits alcohol and substance use among Muslims. There are two main features of Islamic preventions:
a) Islam stops the wrong doing from its roots and not at the end. There is no specific age for drinking, or safe drugs to get high. As in Western countries most of the teenage alcoholics do not buy the alcohol from the store but get it at home. Islam prohibits drinking completely (total abstinence) for all Muslim of any age and sex. It is the reason why the West finds it a difficult issue to manage the problems of drugs and alcohol, because it has made double standards.  
b) Islam prevents Muslims from following the path, which may lead to drug and alcohol intake. Therefore not only promiscuous sex is prohibited, but casual mixing of sexes freely is also prohibited, obscenity and pornography is also prohibited. The drinking of alcohol, or to come in contact with alcohol or any other spirits such as making, selling, keeping them, or even growing grapes for the sole purpose of selling it to winery for making wine is prohibited. As mentioned in Quran.

“They ask you concerning wine and gambling.” Say: “In them there is great sin, and some profit, for men, but sin is greater than the profit” (Quran 4:43)“O you who believe! Approach not prayers, with a mind befogged, until you can understand all that you say”(Quran 2:219).“O you who believe! Intoxicants and gambling, (dedication of) stones, and (divinations by) arrows, are an abomination of Satan's handiwork: Avoid such (abomination) that you may prosper” (Quran 5:93).“Satan's plan is to sow enmity and hatred among you with intoxicants and gambling, and to hinder you from the remembrance of Allah and from prayer. Will you not then give up” (Quran 5:93). Prophet Mohammed said: “Of that which intoxicates in a large amount, a small amount is haram” (Ahmad, Abu-Daud and Al-Tirnizi). “Khamar (intoxicants) is the mother of all evils” Reported in Bukhari.

8. Homosexuality:
As regard to the Qur'an and homosexuality, there are five references in the Qur’an which have been cited as referring to gay and lesbian behaviour. Some obviously deal with effeminate men and "masculine women." The two main references to homosexual behaviour are: "We also sent Lut: He said to his people: "Do ye commit lewdness such as no people in creation (ever) committed before you? For ye practice your lusts on men in preference to women: ye are indeed a people transgressing beyond bounds." Qur’an 7:80-81"What! Of all creatures do ye come unto the males, and leave the wives your Lord created for you? Nay, but ye are forward folk. (Qur’an 26:165). Both references relate to gay sexual activities; lesbian practices are not mentioned in the Holy Qur’an.

As regard to the Hadith and homosexuality: The Hadith is collections of sayings attributed to Muhammad . Many Hadiths (Ahadith) discuss liwat (sexual intercourse between males). Two examples are:"When a man mounts another man, the throne of God shakes."

"Kill the one that is doing it and also kill the one that it is being done to." (In reference to the active and passive partners in gay sexual intercourse)There is at least one mention of lesbian behaviour mentioned in the Hadith: "Sihaq (lesbian sexual activity) of women is zina (illegitimate sexual intercourse) among them." In Islam homosexuality is considered 'sinful' and Haram because humans are not homosexuals by nature. People usually become homosexuals because of their surroundings. Of utmost importance is the environment during puberty. All creatures are created in pairs each with certain physical and psychological characteristics to complement and complete one another and to serve certain function. The main function of the human being is to build up the society. The physical–psychological–spiritual development through marriage and mating, followed by procreation that may continue for more than one generation should help humans to understand the wisdom of God and his favours in creating life to build up a balanced society.

As a matter of fact, homosexuality is harmful for the health of the individuals and for the society. It is a leading cause of sexually transmitted diseases. Men having sex with other men leads to greater health risks than men having sex with women not only because of promiscuity but also because of the nature of sex among men. Male homosexual behavior is not simply either ‘active’ or ‘passive,’ since penile–anal, mouth–penile, and hand–anal sexual contact is usual for both partners, and mouth–anal contact is not infrequent. Mouth–anal contact is the reason for the relatively high incidence of diseases caused by bowel pathogens in male homosexuals. Trauma may encourage the entry of micro-organisms, which lead to various infective diseases. In addition to sodomy, trauma may be caused by foreign bodies, including stimulators of various kinds, penile adornments, and prostheses [9].

Islam and Special Issues in Psychiatric Clinical Practices:
Although Islam established psychiatric hospitals as early as 705 CE, and although at least one prominent 11th century physician (Ibn-Sina Avicenna, d. 1037) published important information on the nature of psychiatric
disorders, psychiatric services in Islamic states still are limited. Nevertheless, forensic psychiatry has a place in Islam. Mental patients cannot consent to treatment, research, or sterilization because of their intellectual incompetence. They are admitted, detained, and treated voluntarily or involuntarily for their own benefit, in emergencies, for purposes of assessment, if they are a danger to themselves, or on a court order. Moreover, suicidal patients tend to refuse treatment because they want to die. Here are some clinical issues in psychiatric practices:

I. Issues of Privacy, Confidentiality, and Consent:

Privacy and confidentiality are often confused. Privacy is the right to make decisions about personal or private matters and blocking access to private information. Islam supports confidentiality. The Prophet Mohammed maintained a strict stand against the public exposure of unlawful acts. Islam encourages confidentiality by the principle that "God commands us to keep unpleasant deeds confidential “In routine hospital practice, many persons have access to confidential information but all are enjoined to keep such information confidential. Confidentiality includes medical records of any form. [78]

Information can be released without the consent of the patient for purposes of medical care, for criminal investigations, and in the public interest. On the other hand, the announcement of patient data is not justified without patient consent for the following purposes: education, research, medical audit, employment or insurance. Islamic jurisprudence has not definitively stated a condition in which the breach of an individual confidence can be a matter of public interest. Nevertheless, psychiatrist may breach the confidentiality of a patient when the patient has made his mental condition a basis of his claim. Also, when there is a possible danger or threat to a third party. Islamic law gives the psychiatrist full rights to exercise his judgment in weighing the advantage of protecting a third party versus the disadvantage of the breach of confidentiality. This step is taken under the Fiqh principle of choosing the least restrictive and harmful alternatives.

II. Involuntary Hospitalization and Refusal of Treatment

In Islam, no medical procedures can be carried out without informed consent of the patient except in cases of legally or mentally incompetence. When a person is judged to be incompetent, a guardian is appointed to handle the person’s property and personal affairs. Under Islamic jurisprudence, Hijjers ordered and declared by Judge on individuals who are either incompetent to carry on their financial affairs by reason of insanity or by being recklessly involved in an irresponsible dispersion of their finances. The latter is defined as being Safeeh[79]. Hijjer, therefore, could be carried out under the following conditions mental incompetence, irresponsibility, and people who are not considered insane by legal standards, such as drug addicts, alcoholics, and some psychopaths. As regard to dangerousness’ of the mentally ill patient as a reason for involuntary admission as it occurred in western countries, it has been concluded by some of the prominent contemporary Islamic jurist that involuntary hospitalization is the "right to care" and not the "right to protect." Therefore under Islamic law, dangerousness need not be a major issue in involuntary hospitalization or admission.

III. Medical and Nursing Malpractice

Malpractice is failure to fulfill the duties of the trust put on the physician and other health care providers. The term malpractice includes the legal concept of medical and nursing negligence. Negligence is breach of duty owed by the physician to the patient resulting in damage or injury. Moreover, negligence may also arise as battery which is injury due to intentional tort (a civil wrong in which liability is based on unreasonable conduct). The intentional torts are assault, battery, treatment without informed consent, false imprisonment or confinement, intentional infliction of emotional distress, and defamation (slander if verbal and libel if written). The Prophet Mohammed declared that no one should practice medicine without having knowledge and thorough training.” further, he stated that if a person practices medicine without adequate knowledge, he is completely liable for the injury that he causes. The injury that results from mistreatment will be considered an assault. On the other hand, Muslim scholars throughout the ages have recognized that a physician with adequate training and knowledge, who is equal to his peers at the time and place of his practice, is not required to guarantee the results a patient expects (i.e., a cure). He is only expected to do his best and help his patients. Nevertheless, Islamic law requires a physician to be liable for any medical error that results in damage to the patient. Islamic laws confirms the money compensation in case of death, and loses of organ called Diya that specific amount of money, Diya, rewarded for total body compensation was stated by the Prophet as being worth the cost of one hundred camels. [77]
Iv. Criminal Responsibility of Psychiatric Patients:

Mentally incompetent individuals, termed Majnoun, are protected under Islamic law as being not responsible for their actions. Mental incompetency is a person who is diagnosed as being mentally ill, senile, or suffering from some other debility that prevents them from managing his own affairs may be declared mentally incompetent by a court of law. The Messenger of Allah, peace be upon him said: "The pen is lifted from three: from the insane mind until he recovers, the sleeper wakes up, and the boy until he reaches puberty." Narrated by Imam Ahmad, Abu Dawood and the ruling on the Umar and horses. Although, Islamic jurisprudence does not delineate exactly what is covered by Majnoun, which also means insanity, and what specific kinds of mental incompetence make a person not responsible for his action. It has been concluded that mentally ill who lack in their insights of their mental illness and having psychosis are protected under Islamic law. On the other hand, Islam doesn’t considered mental illness an excuse to commit crimes.

IV. Mental Illness Competence to Stand Trial:

Chaleby 1996 reported that, a mentally incompetent person cannot properly argue his case by himself, cannot use a lawyer, and cannot actually understand the charges against him. Such an individual, under Islamic law, could not be put trial, based on the strong principle of Islamic justice that a defendant should have the same access to the judge as a plaintiff. If this condition cannot be achieved, this may be the case for mentally incompetent individuals. Then a trial cannot be conducted.

Summary

Muslims believe that each illness has a cure but it is unto man to research and find the cure. Let us pray to Allah that He strengthens our faith for the peace and tranquility that are such vital ingredients for us being an ideal society. The advice of the Prophet Muhammad PBUH “ALLAH, the Most Merciful, has mercy on the merciful therefore, be merciful upon the dwellers of the earth. He will have mercy upon you who is in the heavens." In conclusion, Islamic religion has a huge impact on management of psychiatric disorders within psychiatric clinical practice. Extensive bodies of researches have supported the effectiveness of Islamic values and beliefs in treatment of mentally ill Muslims, through incorporation of Islamic beliefs that help in drug adherence and modification of different psychotherapeutic techniques to suit Muslim patients. Besides, many specific clinical issues were resolved by using Islamic values and beliefs that completely withdrawn from Holy Quran and, Prophet PBUH Sunnah and Sharia. Such aspects provide the basis for specific guidelines in working with Muslim mental health clients wherever they live.

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