

ALTERNATIVES FOR PSYCHOLOGICAL ILLNESS TREATMENT AND PREVENTION IN MALAYSIA FROM THE PERSPECTIVE OF SHARIAH

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ABSTRACT

Scientific studies have revealed that a large percentage of Malaysian society suffers from psychological disorders such as depression, anxiety, stress, schizophrenia and others, which is the biggest health problem among Malaysians after heart disease. The aim of this study is to explain the reasons for the prevalence of these psychological illnesses and to analyse the prevention methods, approaches and treatment of psychological illnesses according to Shariah scholars and then to show a therapeutic and preventive approach to psychological illnesses according to Shariah, using the inductive and analytical approach. The study concluded that psychiatrists have not clarified the exact causes of mental illness, but they suggested that they are the result of genetic, biological, environmental and psychological factors. Among the reasons mentioned by Shariah scholars are love of the world, committing sins, distance from Allah S.W.T., ignorance of religion, isolation, family and environment. The therapeutic and preventive model for contemporary psychological illnesses in Malaysia consists of the following methods such as seeking Islamic knowledge, belief in Allah S.W.T and the Last Day, patience and striving for reward, good deeds, good company, reading the Quran, reflecting on it and acting upon it (the Quran), remembrance and gratitude to Allah S.W.T., prayings on the Messenger of Allah S.W.T., supplication, treatment with legal ruqyah and psychological medicine, striving to eliminate the causes that cause sorrow and reaching the causes that cause joy. There are studies and testimonies from psychiatrists that confirm these methods and prove their effectiveness in preventing and treating mental illness. The study also contains important recommendations for the parties concerned in this matter.

Introduction

Psychological illness is prevalent all over the world and the number of patients with psychological illnesses is increasing. Among the most common are anxiety and related disorders, depression, stress (fatigue), schizophrenia and other psychological disorders. The cases of patients with psychological illness have reached more than one million Malaysians above the sixteen years of age, and are increasingly prevalent in productive workplaces (Faizul, 2018), resulting in an annual loss of productivity and thus weakening the economy (Wesley et al., 2013). Furthermore, some of these illnesses such as depression, fatigue and isolation - a feeling of loneliness - are prevalent in Malaysian schools and universities (Jasvinder Kaur, 2014), and one study found that the prevalence of mental and psychological disorders is higher in rural areas than in the capital city of Kuala Lumpur (Shaeraine, 2021). A study also found that a large percentage of Malaysian society suffers from depression and anxiety disorders, which is the biggest health problem among Malaysians after heart disease (Mohd Zulkifli, 2020). It is no secret that these illnesses have a serious impact on individuals and society as the psychological burden on the patient increases as their health deteriorates (Zaenurrosyid et al., 2021). This burden manifests itself in the mastery of negative thoughts that are difficult to control, so they tend to isolate themselves to escape the stigma they face in life and some of them are unable to cope with all this burden, so under all the pressure, they decide to end their lives by committing suicide.

Although there are studies that deal with some mental illnesses, their prevalence in Malaysian society, their factors and dangers, they do not address the methods and techniques for their treatment and prevention. There are other studies that have explored mental disorders and discussed mental health problems and challenges in Malaysia but have neglected psychological health. We will mention the most important of these recent studies after mentioning the seminal works that discussed heart disease, as most of the psychological illnesses today fall under heart disease. Some earlier scholars mentioned in their writings some preventive measures for some mental diseases, but they are scattered and dispersed in the pages of their books, so they need to be collected and studied. For example, Ibn Hazm (d. 456 AH) in his book *Ethics and the Way to Cure Souls*, Ibn al-Jawzi (d. 597 AH) in his two books *Seizing Thoughts and Condemning Desires*, Ibn Taymiyyah (d. 728 AH) in *Fatwas Collection and Diseases of the Hearts*, Ibn al-Qayyim (d. 751 AH) in his books *The Disease and the Cure, the Soul, Zad al-Ma'ad; the Path of the Two Walks and the Gate of the Two Bliss; the Key to the House of Happiness; the Garden of Lovers and the Excursion of Desire*. Among the contemporary scholars who wrote about some aspects of this is Abdul Rahman Ibn Nasser Al-Saadi (d. 1376 AH) in a small section of a book titled *Useful Means for a Happy Life*. There are contemporary researches that deal with the subject, but even they have not dealt with it from all aspects, as can be seen from their titles, for example, *Dhikr, Supplication and Treatment with Ruqyah* from the Qur'an and Sunnah by Sheikh Saeed bin Wahf Al-Qahtani (d. 1440 AH), and he has another book entitled *Treatment with Ruqyah* from the Qur'an and Sunnah, as well as treatment and prevention according to what was authenticated on the authority of the Prophet PBUH, by Khaled Abdul Rahman Al-Jarisi. There is an article by Abdul Rab et al., (2022) in which discusses some preventive measures that are suitable for this issue, but most of these measures are related to COVID-19.

There are studies that dealt with some psychological and mental illnesses in Malaysia, and some of them include psychological illnesses under mental illnesses, but they did not address this topic. These studies include a study on the prevalence of depression among adolescents in Malaysia conducted by the Jasvinder Kaur (2014) and others. The aim of the study was to determine the prevalence of depression and its association among adolescents in Malaysia and to analyse data from a health survey in international schools in Malaysia. The study found that 17.7% of the participants showed symptoms of depression. The analysis also showed that the feeling of loneliness among Indian ethnicity ranges from 1.21-3.47. It was concluded that lack of parental supervision, alcohol abuse and tobacco use were among the causes of these illnesses. This study was limited to the factors and causes for the prevalence of depression among adolescents in Malaysia and did not address ways of prevention. There was a study on the prevalence of depression, its symptoms and suicidal thoughts among medical students: *Prevalence of Depression, Depressive Symptoms, and Suicidal Ideation Among Medical Students*, by researcher (Rotenstein, 2016) and others. The study showed that medical students are at high risk for depression and suicidal ideation. However, prevalence estimates for these disorders vary from study to study, and prevalence estimates for the different assessment methods ranged from 7.4% to 24.2%. The rate of suicidal ideation was 11.1%, and depression and suicide differed by university, gender, and other characteristics. The study

recommended the urgent need to treat these disorders. This study attempts to develop a model to prevent these disorders from a legal perspective.

A study on mental health issues and challenges in Malaysia by Mohd Faizul (2018), Alias et al., (2024) and others. The aim of the study was to investigate how mental health problems can be solved to reduce the number of patients and improve their quality of life. It concluded that the problems faced by these sick people are lack of awareness, ignorance, neglect of traditional values, feeling stigmatised, feeling that illness is a faulty behaviour, work-related stress, negative economic impact and being influenced by the beliefs of other religions and that increased awareness of mental and psychological health and early diagnosis can reduce these problems. This study did not address the prevention of these illnesses from the perspective of Islamic law, and the current study will address this.

There is also a study on psychosocial factors and mental illness among employees in private development companies in Malaysia conducted by Mohd Zulkifli (2020) and others. The aim of the study was to investigate the relationship between psychosocial factors and mental illness among specialised development workers in the Klang Valley. The study concluded that administrative decisions have an impact on employees and cause them anxiety. Giving employees freedom always makes them feel happy and get the most work done, so departments should be a strategic tool to motivate employees to work more seriously. The study did not identify ways to prevent these illnesses, especially the mental ones, so it is worth exploring. Furthermore, a study on mental disorders in Malaysia: an increase in lifetime prevalence, by Shaeraine (2021) and others showed that the prevalence of mental and psychological disorders in Malaysia is increasing, especially in rural areas and not just in the capital city of Kuala Lumpur. She explained that this is due to several reasons, including negative social and economic conditions with an increase in poverty and unemployment, as well as stigmatisation and poor healthcare in this context. She explained that there is a need to increase spending on mental health to address the lack of available services and to increase the proportion of psychiatrists and mental health practitioners in Malaysia. The study did not look at methods to prevent these illnesses and the current study will fill this gap.

A study on mental health and the Corona pandemic: Observable evidence from Malaysia, by Eugenie (2023), Oktalita and Rizki (2021) and others was aimed to determine the impact of COVID-19 pandemic on the mental health of the general population in Malaysia. A cross-sectional study was conducted that included 1,246 participants, and a validated questionnaire was used to detect symptoms of depression, anxiety, and stress. The study concluded that the lockdown had a significant impact on the psychological and mental health of the general population in Malaysia during the Corona epidemic. People became anxious, depressed, and stressed, and the impact factors included financial instability, lack of annual income, and old age. The study did not talk about ways to prevent these diseases, so it will be replaced in the current study. So, studying this topic is very important, and it needs specialized and in-depth study, especially since there are no previous peer-reviewed studies that have addressed it from this angle.

Psychological Illness

Ibn Faris (1979) said the word “disease” indicates the presence of an ailment in a person, and his departure from the limit of health. Literally illness means sickness, and the one afflicted with it is called (Ibn Manzur, 1414H). Ibn Duraid (1987) said the origin of the disease is weakness. As for its technical definition Ibn Al-Jawzi (1984) defined it as a feeling of something that is contrary to health, and it is a deterioration that afflicts the body and take it beyond the limits of moderation and health. Al-Safarini Al-Hanbali (1993) defined it as a truly harmful condition, outside of the usual human nature, and among its symptoms are pain and tumours. Al-Baydawi (1418H) defines disease as the reality of illness is what affects the body, which causes it to come out at the point of moderation. Al-Tujibi (1997) said illness is a weakness and resulting in a defect in actions. It can be concluded from the above scholars’ literal definition of disease is sickness and weakness, and technically it refers to every disease or an illness that affects the body, taking it beyond the limits of normality and moderation, that is, taking it out of its natural state, which is health and innocence.

Some contemporary dictionaries define illnesses as a group of symptoms accompanied by abnormal and strange behaviours due to psychological factors (Ahmad Mukhtar, 2008). Some medical websites define it as a psychological disorder that affects a person's life, behaviour and thinking, whether chronic or temporary, with varying degrees of severity. Examples include depression, schizophrenia, anxiety disorders and others (Mayo Clinic Team, 2022). The researcher defines it as a disorder of psychological origin that manifests itself through psychological symptoms that affect a person's mental health. In this study, we will discuss the main common psychological illnesses that are accompanied by similar symptoms, such as tension, sadness, anxiety, restlessness, panic, fear, doubt, delusions and isolation.

In this day and age, many psychological illnesses have emerged, whether they are widespread or few, and whether they are purely psychological, or result from psychological symptoms or affect a person's mental health, and they are as follows:

1. **Anxiety:** Anxiety means discomfort. It is said that he became anxious, and others troubled him (Al-Jawhari, 1987). Feeling anxious from time to time for any reason is normal. When it occurs repeatedly and for no real reason, it is called an anxiety disorder that affects the person's abilities. Those affected often suffer from intense and excessive worry and anxiety, accompanied by behavioural symptoms that can ruin their lives. This disorder is one of the most widespread diseases in the world. In 2019, it affected almost three hundred million people around the world. There are different forms, such as generalised anxiety disorder, social anxiety disorder, panic disorder and phobia-related disorders. Symptoms of this disorder include abdominal pain, tension, palpitations, difficulty concentrating, sweating, trembling, a sense of danger or doom and sleep disturbances. These symptoms often begin in childhood or adolescence and continue into adulthood. Women are more susceptible to this than men (World Health Organisation, 2023). According to the Fourth National Health Morbidity Survey (NHMS-IV, 2011), anxiety disorders are among the most common diseases in Malaysia and their prevalence ranges from 1% to 67.6% (Jamilah Hanum et al., 2019).
2. **Depressive disorder (depression):** Depression is a change of the soul with brokenness, and the person who suffers from it is said to be melancholic and depressed (Ibn Manzur, 1414H). Depression is a common mental disorder that affects about 280 million people in the world. Women are about 50 times more susceptible than men. Symptoms of this disorder include a depressed mood; the depressed person feels sad, is irritable, suffers from poor concentration, despairs about the future, has trouble sleeping, has little appetite for food and thinks about death or suicide. Depression varies between severe, moderate, and mild (World Health Organisation, 2023). After anxiety disorders, depression is one of the most common psychological illnesses in Malaysia. In 2020, the number of people affected was 2.3%, which equates to almost half a million Malaysian adults aged sixteen years and above (NHMS, 2019). Depression, like its predecessors, is a common and serious mental illness that affects the lives of those affected, depriving them of enjoyment in life and leading to many physical and emotional problems.
3. **Obsessive-compulsive disorder:** Compulsive is the involuntary compulsion that cannot be controlled. Obsessive-compulsive disorder (OCD), as a compound term is a type of disorder related to anxiety in which the person afflicted with this disorder suffers from irrational thoughts, fears and fantasies that lead to compulsive behaviour. It leads to behaviours where you do things repeatedly and occurs in childhood or adolescence. Symptoms include fear of catching diseases from shaking hands with others or touching their things, doubts about doing things such as closing doors or turning off the cooker, fantasies about harming children, aggressive or frightening thoughts about losing control and harming yourself or others, and others (Web Teb, 2012). This mental illness is one of the most prevalent disorders in Malaysia and its prevalence rate ranges from 1% to 2% (Eusoff Fitri et al., 2022). Obsessive-compulsive disorder is a common mental illness. The person afflicted with it suffers from recurring unwanted thoughts, fantasies and perceptions, doubts about certainties and involuntary impulses that trigger painful feelings in the afflicted person.

4. Schizophrenia or “schizophrenia”: Schizophrenia is defined as a state of disturbed behaviour, isolation and inability to adapt to reality. This mental disorder is less common than other mental disorders. It affects approximately twenty-four million people, or one in three hundred people (0.32%) worldwide, and often first appears in adolescence. Symptoms include indifference, isolation, introversion, deep-seated delusions and disturbed thoughts (World Health Organisation, 2021). There are many types of this disease, and it is one of the diseases that is less prevalent in Malaysia than others. The percentage of those affected is 0.5-1% and the rate has been reported to be around 0.04%. (Freddy Franklin et al., 2024). Schizophrenia is one of the least common diseases in the world. It is a mental disorder in which the sufferer believes in delusions, loses touch with reality, feels things that are not real, and engages in strange, disturbed behaviours that prevent them from performing their daily tasks properly.
5. Autism spectrum disorders (autism): Autism is derived from *tawahhad* and loneliness: isolation, and it says: I saw him alone: that is, alone (Al-Jawhari, 1987). In the hadith of Ibn al-Hanzaliyya: He was a solitary man: that is, alone, he did not mingle with people, nor did he sit with them (Ibn Manzur, 1414H). Autism spectrum disorders are a group of different disorders characterised by difficulties in communication and social interaction (isolation). They also have other characteristics that show up in patterns of activity and behaviour, such as difficulty switching from one activity to another and inappropriate responses. As the affected person is used to emotions, they often suffer from depression, anxiety, stress and inattention. Autism has different manifestations, some of which are severe and others mild (World Health Organisation, 2023). The symptoms are both psychological and organic. It is clear from the symptoms that it is a psychological and physical illness that occurs simultaneously. It is also one of the psychological and neurological diseases that are prevalent among children in Malaysia (Shiang et al., 2020).
6. Bipolar disorder: This disorder is considered one of the most widespread psychological illnesses in the world. Forty million people were affected by it in 2019. Symptoms include depression, sadness, rapid anger and irritability, lack of sleep and other symptoms (World Health Organisation, 2022). There are different types of this disorder; the first: severe manic episodes - a state of agitation or abnormally high mood - and the second: includes a specific pattern of depressive episodes and mild manic episodes. The patient often suffers from depressive episodes and may suffer from manic and depressive episodes at the same time. In the third form, the symptoms of hypomania and depression occur over a longer period of time (Web Teb, 2021). This disorder is a common mental illness in Malaysia. Bipolar disorder usually occurs in adolescence or early adulthood but can also occur in childhood or adulthood. In Malaysia, the average age of onset is between seventeen and twenty-one years. There are recent Malaysian studies that have studied this type of disorder, indicating that it is prevalent (Jaclyn Tan Ai Chin, 2019).
7. Psychogenic epilepsy: An ancient and modern disease. Ibn al-Qayyim (1996) said: There are two types of epilepsy: epilepsy caused by evil spirits and epilepsy caused by bad temper. We have dealt with the second type that the doctors talked about. Ibn Al-Qayyim (1996) defined it as a condition that prevents the psychic organs from performing actions, erection, and movement in an incomplete manner. Psychogenic epilepsy also causes behavioural seizures such as epileptic fits due to medical conditions, leaving the patient unable to control the movements of their body, and is accompanied by psychological illnesses such as depression, schizophrenia, anxiety, and shortness of breath. Symptoms include loss of consciousness, infrequent behaviours, inability to respond and others (Sallam, 2022). Epilepsy is one of the most prevalent disorders in Malaysia. A recent study has found that the prevalence rate is 7.8 per 1000 people (Si-Lei Fong et al., 2021).

There are many other mental disorders with different symptoms, often characterised by a combination of abnormal perceptions, emotions, thoughts, behaviours and abnormal relationships with others, accompanied by psychological symptoms.

Methodology

In this study, the researcher adopts a qualitative approach in which he collects data on psychological illness from recognised and reliable sources and references such as traditional and modern books, academic dissertations, scientific research and articles, journals, and websites. The data were used to identify traditional methods and techniques for preventing psychological illness, analyse them using the content analysis method, and then derive the best and most appropriate methods for preventing psychological illness, supported by the opinions of contemporary clinicians. The nature of the research required that it be conducted in three sections: Firstly, explaining the reasons that led to the spread of psychological illnesses, secondly, analysing the ways in which our scholars treated the psychological illnesses that occurred during their time, and thirdly, uncovering the most appropriate ways and methods for the treatment and prevention of psychological illness today from the perspective of Islamic law.

Findings and Discussion

Factors that Led to the Spread of Psychological Illnesses

Medical experts have not clarified the specific and exact causes and factors that have led to the spread of psychological illnesses, as they are still unknown to them, but they hypothesise that it could result from a group of genetic, biological, and environmental factors (Sachdev, 2023). On the website WebTeb (2011-2024) - a reliable medical website, the first in the Arab world to publish reliable medical and health news and information on the internet - it was mentioned that among the causes: Pressure and various life events such as divorce, family problems, work pressure and changes in the neural transmission processes and their relation to the changes that occur in the heart, blood vessels, digestive system, skin, as well as pathogens such as viruses, germs and environmental pollutants. On another page, it was explained that the exact cause of mental disorders is not known. Possible causes include nervous stress, guilt and sudden shocks such as disasters and the loss of loved ones, anxiety, sadness, depression, anger and substance abuse.

Some psychology professors have mentioned that hereditary and genetic factors are also among the causes. They play a role in some mental disorders such as depression and anxiety. Environmental factors: such as stress, emotional and psychological disorders, and social pressure. Psychological traumas: such as accidents, experiences of violence, wars, and natural disasters. Psychological factors: such as the personality and emotional character of the individual. Hormonal changes: These are related to life stages such as pregnancy, childbirth, menopause, and ageing hormones. Diseases and physical injuries that can lead to mental disorders (Al-Qasha'ilah, 2023). The website Medicine published medical information about these diseases - which are being researched - and listed some possible causes for each disease, as follows:

1. Anxiety disorder: It has been mentioned that among the possible causes that influence the occurrence of these disorders are neurotransmitters in the brain. The genes a person carries from his parents and the environment surrounding him. He may be exposed to changes in his growth and upbringing that make him susceptible to this disorder. They may also be exposed to psychological shock and develop serious illnesses such as heart disease and diabetes (Hana, 2021).
2. Depressive disorder: The medical IDS confirmed that the exact cause of the development of this disorder is not known. It may be due to biochemical factors - physical changes in the brain of those affected and an imbalance in hormone levels - genetic factors - hereditary factors of patients with the same disorder - and environmental factors. Life situations and circumstances are also among the causes. Other mental illnesses as well as some diseases such as cancer, heart disease, diabetes, or some other psychological illnesses such as anxiety and the constant use of certain medications are other psychological illnesses (Al-Taihi, 2021).
3. Compulsive disorder: There is no clear and known cause for this disorder. Possible causes include biological factors - a chemical change that occurs in the person's body or in the functioning of their brain - genetic factors - certain hereditary factors that have not yet been identified and diagnosed. Environmental factors - habits and behaviours adopted

from the environment, exposure to torture or psychological trauma, or changing life circumstances (Karajah, 2021).

4. Schizophrenia: The exact cause of schizophrenia is still unknown. Researchers have found that there are factors that could play a role in this illness, including: the occurrence of chemical processes in the brain such as the biological factors already mentioned, as well as heredity and environment. The World Health Organisation confirmed that medical research has not found a single cause for the disorder. It is assumed that the disorder is the result of an interaction between genes and environmental factors. Psychological and social factors also have an influence on the development of the disorder (World Health Organisation, 2022).
5. Autism spectrum disorder: Among the causes that can lead to autism are genetic disorders. Researchers have discovered the existence of genes that play a role in the development of autism. Environmental factors are a large part of health problems that are the result of societal environmental factors. This disorder is one of their results, and environmental pollution is a motivating factor in the development and occurrence of this disease. A brain and nervous system disorder can also be one of the factors that favour the occurrence of this disease, as well as the use of drugs or chemicals by a pregnant woman that makes her child more susceptible to this disorder, premature birth, low weight of the child and some vaccines given to children that can increase the possibility of contracting this disease. This claim about vaccines is not true. The original study on the causation of autism by vaccines has been retracted and no study to date has been able to prove the causation of autism by vaccines (Muna, 2021). The World Health Organisation (World Health Organisation, 2023) stated that scientific studies indicate that there are several factors that increase the likelihood of a child developing this disorder, including environmental and genetic factors.
6. Bipolar disorder: There is no specific main cause of this disorder, but the following factors are likely to be among the causes of its occurrence, namely: the genetic factor. This disorder is more common in people who have a family history of it, especially if they are first-degree relatives. The biological factor: imbalances in the neurotransmitters or hormones that affect the brain increase the risk of developing this disorder. The environmental factor: Psychological stress or traumatic experiences can lead to this. Drug abuse, alcohol consumption, physical illnesses and others can also be the cause (Hana, 2022).
7. Psychological epilepsy: There is no organic cause for this psychological illness, but it is often the result of a mental disorder such as generalised anxiety disorder, panic attacks, obsessive-compulsive disorder or a behavioural disorder such as attention deficit hyperactivity disorder, autism spectrum disorder, depressive disorder or a behavioural disorder that makes the person affected more aggressive. It can occur because of intense psychological pressure and constant outbursts of anger (Laima, 2021).

Researchers in psychiatry field believe that the causes of anxiety disorder, especially generalised anxiety, include environmental factors or the interaction of genetic and environmental factors, or that the sufferer has been exposed to psychological stress, psychological trauma or a painful event in the past, which has led to anxiety and fear. Some studies suggest that it is caused by genetic factors. In depression and schizophrenia, the causes are genetic factors that affect brain function and the chemical balance in the body, as well as environmental, social and psychological factors such as stress and psychological pressure, severe life events experienced by those affected and severe psychological trauma. The behaviour of a person with schizophrenia is determined by a series of thoughts and delusions. For example, they believe that someone is conspiring against them or spying on them, treating them badly, or they are dominated by delusions of grandeur and luxury that make them believe they are a famous or powerful person (Qasim, 2015; Al-Qasha'ilah, 2023).

As for bipolar disorder, environmental factors are among the causes. For example, stress and psychological trauma. The patient may suffer when he is in a critical situation and cannot bear the life circumstances he is going through, or when there are sudden changes in the person's environment, as in the case of someone who is forced to leave their job and becomes depressed. The genetic factor or component also plays a role in this disorder, and some even say that it is the basis for the development of this disorder. Other neurological researchers believe that the main problem lies in the central nervous system, where it is overwhelmed by unstable arousal. Some of them say that depression results from a deficiency or dysfunction in the hypothalamus, the part of the brain responsible for regulating mood (Al-Qasha'ilah, 2023; Qasim, 2015). The first discoverer of autism, Kanner, attributed the cause of autism to a group of psychological factors, particularly within the family, meaning that the family of an autistic child is characterised by dysfunctional familial relationships and a lack of emotional connections (Frame & Maston, 1987). However, this reason given by the discoverer of this disorder has not been confirmed by a scientific field study, so there is no consensus among psychologists that other factors such as genetic factors, brain cells, neurological and organic factors, accidents or illnesses of the mother during pregnancy and others could also be responsible (Qasim, 2015).

Shariah scholars have given reasons for the spread of these diseases in their works evident by al-Quran and hadith:

1. Love of the world, distance from Allah S.W.T., and committing sins: They are among the most important causes of psychological illnesses, especially anxiety and depression. Love of the world distances the servant's heart from his Almighty Creator, causing him to fall into depression, anxiety, fear and distress. There is no life that is pure, no heart that rejoices, no work that is pure, no hope that arises, and no lasting comfort (Ibn Al-Qayyim, 2019; Al-Tirmidhi, 1975, Hadith 2465). And whoever turns his heart far away from Allah S.W.T., indulges in sins and falls short in obeying and worshiping his Lord, then Allah S.W.T. abandons his protection and care (Surah Al-Hashr, 19: 59). Whoever forgets Allah S.W.T., his success will be diminished, his mind will be corrupted, his heart will be hardened, and Satan and his helpers will dominate him and tempt him to sin and disobedience, so that he will lead a miserable, desperate life, a narrow life of worry and distress, fear and depression, confusion and turmoil.
2. Weak belief in the hereafter and in Allah S.W.T.'s judgement and destiny: Mischief and psychological illnesses, especially obsessiveness, anxiety, depression and panic, are only intensified by a weak belief in the hereafter and in Allah S.W.T.'s judgement and destiny. He has a weak belief in it, becomes angry and anxious at the slightest thing that happens to him (Ibn Al-Qayyim, 2019), and Satan takes control of him, whispers to him and covers him with illusions, psychological fears and depression, so that he falls into worry, sorrow and sadness as if he were ascending to heaven (Surah Al-An'am, 125: 6). Thus, boredom triumphs over patience, and the mind loses its moderation and balance.
3. Ignorance of religion and its provisions: It is also one of the principal causes that lead to psychological illness, for it is a great disease and a dangerous scourge. It causes a person to be unable to distinguish between truth and falsehood, what is permissible and what is forbidden, so that he moves away from the laws of guidance and is unable to recognise the truth, so that his heart becomes hardened, his soul darkened and his faith weakened, so that he leads a turbulent psychological life plagued by doubts, delusions, worry, depression and sorrow. Ibn Al-Qayyim (2019) said: The disease of ignorance makes its owner sick and hurts his heart, and there are people who cure him with useless sciences, believing that they are useful because of his ignorance, but in reality they make him even sicker, but the heart is distracted by them from realising the pain inherent in him because of his ignorance of useful sciences. Ignorance of religion and its provisions also leads those who possess it to indulge in sins and transgressions. Ignorance is the characteristic feature of those who dare to disobey Allah S.W.T. Ibn Taymiyyah (2004) said: Inclination alone cannot commit evil deeds except in conjunction with ignorance. The root of what makes people commit evil deeds is ignorance. Misdeeds and sins rob the heart of peace and cause darkness, despair, sorrow, and depression.

4. Loneliness and isolation: Man is social by nature, created to live in the shadow of a group and under the protection of a nation. Allah S.W.T. created people as one nation, linked to each other in livelihood, helping each other, supporting each other, and advocating for each other. They are indispensable to each other. It is not possible to imagine a normal, stable and upright life, dominated by love, brotherhood, cooperation and synergy, except within this framework. If the individual lives alone, isolated from those around him, not mixing with members of his gender or members of his community, his life will be characterized by an emptiness that permeates his life, and he will be vulnerable to diseases and psychological disorders, which are represented by anxiety, fear, tension, depression, autism, and epilepsy. He will also have delusions and negative thoughts. Therefore, the holy law warned against loneliness and forbade it (Ahmad, 2001). Because it is Satan's trap for man, unless he takes advantage of isolation in obedience to Allah S.W.T and prefers it over solitude to avoid falling into the sins that he is exposed to, then, there is nothing wrong with that.
5. The family and the environment: When religious morality became weak in the souls of many Muslim families, quarrels and problems, conflicts and disagreements, hatred and resentment arose between them. The fathers were busy with the mothers and the mothers with the fathers, and both were busy bringing up the children and protecting them from bad companions. Thus, many sons and daughters became spoilt and lived a disjointed, torn and broken-down life characterised by misery, worry, sorrow, distress, anger, fear, tension, loneliness and depression. The environment, such as neighbours, school, university, markets, and workplaces, has a significant impact on the righteousness or corruption of an individual and on instilling positive or negative values. Abdul Rahman Al-Saadi (1423H) said: As for associating with evil people, it is harmful and bad in every way for those who mix with them and live with them. How many people have perished because of them, and how many have led their companions to destruction, whether because they were aware of it or because they did not realise it. Our law has shown us the danger of the environment to man through evidence, including: the story of the man who killed a hundred souls (Al-Bukhari, 1422H; Muslem, 1374H), and the evil one compared the one who blows the bellows - the bellows of the blacksmith, which is a thick skin in which the fire blows (Al -Bukhari, 1422H: 96, Hadith 5534).

Preventive and Therapeutic Alternatives for Psychological Illness According to The Shariah Scholars

Ibn Al-Qayyim (1996) said, "Among the greatest reasons for the expansion of chests are guidance and monotheism". They are the opposite of misguidance and polytheism, which are considered among the greatest reasons for their affliction and embarrassment as in Surah Al-Zumar, verse 39. Al-Tabari (1999) said, is he whose heart has been opened by Allah S.W.T., the Exalted, to recognise Him, to acknowledge His Oneness, to submit to His Lordship, and to submit to His obedience, obeying the command of Allah S.W.T.'s, and shunning what He has forbidden, then he has knowledge and insight about what he is, and is secure with the enlightenment of truth in his heart, like one whose heart Allah S.W.T. has hardened, emptied the remembrance of Him and prevented it from hearing the truth and following guidance?. They are not the same. Ibn al-Qayyim (1996) explained that the light that Allah S.W.T. sheds in the heart of the servant is the light of faith. With it, the chest expands, expands, and makes the heart happy. If this light is lost from the heart, it becomes depressed and ashamed and becomes the most difficult prison in the narrowest. The servant has a share in the expansion of the chest according to his share of this light. This includes knowledge, which is one of the reasons for the expansion of chests and the enlightenment of hearts. The more a servant's knowledge expands, the more his chest expands and the more his heart expands. This does not apply to all knowledge, but to the legitimate knowledge, inherited from the Prophet PBUH, and it is a useful knowledge for people to know more. People have the widest hearts, the best morals, and the best lives.

The believer finds bliss and joy in his heart through Islamic knowledge, for it enables its possessor to memorise the Qur'an, reflect on it and act upon it. It heals the heart from sickness and cheers it up. Loving Allah S.W.T., obeying Him and remembering Him constantly are also among the best reasons for enlightening hearts and removing sorrow and worry. Ibn al-Qayyim (1996) said elsewhere: "Just as

supplication is one of the most beneficial therapies for the hearts and their diseases, and it is the enemy of sorrow. It wards them off, treats them, prevents their occurrence, removes them or alleviates them. It is the weapon of the believer, and the believer must be persistent in supplication.

Ibn Hazm Al-Zahiri (1987) said in a chapter on the healing of souls: The expulsion of fear cannot be cured unless one turns to Allah S.W.T. - glorifies Him - and works for the Hereafter. The rational person sees no prize for himself except Paradise, and happy is the one who satisfies his soul with virtues and obedience and is repelled from vices and sins. Ibn Taymiyyah (2004) said that the healing of hearts is only through the Qur'an in Surah Al-Isra verse 17.

And He put the medicine of the Qur'an on the disease of the heart. Diseases of the heart are caused by love and hatred that are not present in moderation. These are the humours of the body. This medicine - i.e. the Qur'an - was mentioned by Ibn Al-Jawzi (1418H) in his book "*Dhamm Al-Hawa*" in the chapter: Mentioning that which removes rust from the hearts. The Qur'an can be cured of diseases of the heart as well as diseases of the body. How many times have we seen and heard of people who have been cured of their physical and moral illnesses by reading the Qur'an. Ibn Taymiyyah (2004) said in another passage: Just as *ruqyah syar'yyah* is one of the greatest remedies, it is a cure. This is also observed and witnessed as it is one of the greatest causes of curing psychological illness. For example, tightness in the chest, anxiety, fear, and depression. The same applies to physical illnesses, and the story of the leader of the people who was bitten, after which one of the companions of the Messenger of Allah S.W.T., peace be upon him, recited the Fatihah to him, is the best proof of this (Al-Bukhari, 1422H).

Abdul Rahman Al-Saadi (1409H) said: One of the greatest reasons for the happiness of hearts is faith and good deeds as in Surah Al-Nahl, verse 16. Thus Allah S.W.T. has promised those who combine faith and good deeds a good life in this world and a good reward in this life and in the abode of tranquillity. The causes of fear, sorrow, anxiety, depression and sadness will be removed from them. He said, may Allah S.W.T., have mercy on him: One of the reasons for dispelling the anxiety that results from the tension of the nerves and the preoccupation of the heart with some intoxicating substances is preoccupation with good deeds or learning useful knowledge. It distracts the heart from occupying itself with the thing that has troubled it and makes it forget the reasons that have caused it anxiety and sorrow, so that its soul rejoices, its heart is calmed and its activity increases. One of the most important reasons for the heart to rejoice and calm down is the frequent remembrance of Allah S.W.T. This has a marvellous effect because it makes the heart happy and calms it and takes away its fear and sorrow as Allah S.W.T. said in Surah Al-Ra'd, verse 13.

The remembrance of Allah S.W.T., has a great influence on the attainment of what one desires because of His attributes and because of the reward that the servant hopes for. Similarly, talking about Allah S.W.T.'s apparent and hidden blessings, knowing about them and talking about them, removes God's fear and sorrow. If a servant of God allows blessings, which are innumerable, to affect him and shows him the misfortune that has befallen him, the misfortune is unrelated to the blessings (Al-Sa'di, 1409H). Among the causes that lead to happiness and the removal of worries and anxieties is endeavouring to remove the causes that bring worry and sorrow and to reach the causes that bring happiness by forgetting the hardships that the servant has experienced in the past and not dwelling on them. Dwelling on them is a waste of time, pointless and impossible, so his heart endeavours to stop thinking and worrying about what he receives, for the future is unknown, and whatever good and evil, hope and pain is in the hands of the powerful, and the servant has nothing to do with them except to endeavour to attain their good and avert their harm (Al-Sa'di, 1409H). Similarly, the strength of the heart and the absence of disturbances and irritations due to delusions and imaginations caused by bad thoughts is one of the greatest cures for mental and nervous heart diseases and for physical diseases. For if a person indulges in these delusions and fantasies resulting from bad thoughts, such as the expectation of misfortune, the disappearance of love, the fear of illness and emotional agitation over painful causes, this will lead to nervous breakdowns and psychological illnesses such as worry, anxiety and depression. He may even expect physical illness (Al-Sa'di, 1409H). The strength of the heart, which manifests itself in faith in Allah S.W.T., and trust in Him, will not be affected by these illusions, and worry, anxiety and depression will not find a way into his heart.

Appropriate Alternatives for Psychological Illness Treatment and Prevention from the Perspective of Islamic Law

This present study has identified the reasons that have led to the spread of psychological illness in Malaysia and other countries in the world and analysed the preventive and therapeutic means and methods that our venerable scholars have mentioned in their books and then identified the most appropriate of these preventive methods:

1. Shariah knowledge: Shariah knowledge, which is derived from the Quran and Sunnah, is very valuable. It is the origin of everything and the basis of all worship. There is no prayer, no zakat, no fasting, no *Hajj* and no *jihad* without knowledge, and man will only reach his goal of happiness and perfection in the shadow of knowledge of Allah S.W.T., obedience to Him and love for Him. There is no path other than Islamic knowledge, and therefore it is obligatory to strive for knowledge (Ibn Majah, 1430H: 151, Hadith 224). Through it the servant knows his Lord with his names and attributes and worships Him with insight, and through it he knows the path of guidance and success, victory and salvation; he knows the path of misguidance and misery, loss and destruction. Therefore, it is a protection for its owner from carelessness and whims and a way to escape illness and discomfort. The more the servant gains in knowledge and experience, the more open his heart becomes, the more reassured his heart becomes, and the more he protects himself from falling into the trap of psychological illness and suspicion.
2. Faith in Allah S.W.T.: It is the greatest help in overcoming the obstacles of anxiety and depression, worry and sadness, obsession and delusion, stress and autism, bipolar disorder and psychological epilepsy and other psychological and even organic diseases. The believer's faith in Allah S.W.T is true faith, knowledge of Him true knowledge, worship of Him true worship, recognition of His Oneness, submission to His Lordship, love of Him and devotion to Him, leads to happiness and peace of mind as in Surah Al-Hadeed, verse 57. And to yourselves, i.e. sickness, pain and other things (Al-Tabari, 1999), for they are among what Allah S.W.T has ordained for man before He healed souls and created them, so that the faith of those with sick hearts and souls in Allah S.W.T. is true. Faith gives them comfort and certainty in their present and future and frees them from the burden of what they hate. For they believe that everything is predestined and that what has happened to them would not have escaped them and what has escaped them would not have happened to them. If this belief is firmly anchored in their soul, then fear, depression, obsession and delusions have no place in their soul and heart. For the heart is the stronghold of beliefs. Religion with its solid beliefs is a cure for all diseases, whether physical, spiritual or psychological, so that they can live a life free from disease.
3. Belief in the Last Day: The believer's belief in the Last Day gives him complete security and mental health with regard to the certainty of a good eternal life in a paradise as great as heaven and earth, with Allah S.W.T's grace, mercy and benevolence, after passing through the mortal world, which is full of difficulties and turmoil. When sick souls believe in the Last Day and are sure of the circumstances of this great news, they become great in everything that happens after death, from the loneliness of the graves, resurrection, reward and reckoning, paradise and hell, the Hereafter, and its effects. Their desire to obey increased in anticipation of the benefits and rewards. In the meantime, the world and its misfortunes were easy for them, they were patient with suffering and misfortune, their chests were exhilarated, and their hearts were enlightened.
4. Patience: Patience is a characteristic that was characterized by the Prophets PBUH. and it is the adornment of the pure and the key to good deeds. The Qur'an encourages it in more than one place as an example in Surah Al-Baqarah, verse 2 and Surah Al-Zumar, verse 39. This is the secret of human happiness, the source of well-being in times of misfortune and a decisive treatment for diseases of the body and heart.

5. Good deeds: Good deeds are a way to cure psychological illness of all kinds. This is because it nourishes a person's personality, purifies him and gives him many good qualities and characteristics. One of the fruits of prayer is that it prevents indecency and evil as in Surah Al-'Ankabut, 45, verse 29. That is piety, righteousness, comfort, happiness, and reassurance are achieved. The soul is not reassured except through connection with Allah S.W.T. (Abu Dawud, 1430H: 339, Hadith 4986; Muslem, 1374H: 454, Hadith 261). Ibn al-Qayyim (2019) said: There is no doubt that prayer is the apple of the eye of the lovers, the delight of the souls of the monotheists, the touchstone for the conditions of the truthful, and the balance for the conditions of the righteous. One of the fruits of zakat is that it purifies the spirit and heals the diseases of the souls as can be understood from hadith 6593 in Sunan al-Baihaqi (1424H: 536).

Among the fruits of fasting is refining souls and purifying them from impurities and diseases as in verse 2 Surah Al-Baqarah. Al-Saadi (1420H) said that fasting is one of the greatest reasons for piety. For it means obeying Allah S.W.T.'s commandments and avoiding His prohibitions, and it trains the fasting person to respect Allah S.W.T. and narrows the ways of Satan. It is a remedy for the soul, the heart, and the body, and it has a marvellous effect in maintaining health, and it is part of spiritual and natural medicine. It is the bridle of the righteous, the paradise of the warriors and the sport of the righteous and the close ones (Ibn Al-Qayyim, 2019). With it, pain and illness disappear; illusions and worries vanish. It is also evident from some scientific studies such as a study done at Moscow Psychological Institute, which has treated more than seven thousand psychiatric patients using fasting. These patients responded to the fasting medication, while other treatment methods failed, and most of the results were impressive and successful! The doctor considered fasting to be the effective medicine for many chronic psychological illnesses such as schizophrenia, depression, anxiety, and others (Ayyub, 2015).

Among the benefits of Hajj include submission to the command of Allah S.W.T., satisfaction with the trial of illness, pain, etc., the glorification of the sanctities of Allah S.W.T. and the training of the pilgrim in the fight against his soul and Satan, for Hajj is a jihad (Ibn Majah, 1430H: 146, Hadith 2901). Furthermore, good deeds such as honesty, modesty, sincerity, courage, loyalty, generosity, love, philanthropy, co-operation, justice, tolerance and other good deeds protect their performers from mental illness, as they make the hearts happy. These and other good deeds cleanse the souls of their impurities, free them from their impurities and cure them of their diseases. They bring a good life, lasting happiness, peace of mind and a calm heart as said by Allah S.W.T. in verse 16 Surah Al-Nahl. Researchers at Harvard University concluded that people with good morals were less likely to suffer from psychological illnesses, such as depression, stress, and anxiety. When they conducted a study in 2019, they found that people who tested high on their moral compass were up to 50% less likely to suffer from depression. This was confirmed by Dorota Wiziak Bialolska, a research scientist at Harvard University, in a statement; She said: The results proved that people who live their lives according to high moral standards have less chances of developing depression ('Ashoor, 2022).

6. Good companionship: If good companionship is associated with love of Allah S.W.T., then it is a path to happiness, and attaining it is worship of Allah S.W.T., but rather of the perfection of faith, and through it a person tastes the sweetness of faith (Abu Dawud, 1430H: 69, Hadith 4681; Ahmad, 2001: 347, Hadith 7967). Just as a good society brings with it the love of Allah S.W.T. and leads to heartfelt happiness, there is no fear, no depression, no delusions, no schizophrenia, no epilepsy and no feeling of loneliness and isolation, but rather peace, love, co-operation, solidarity, mercy, and altruism. For it is in the nature of man to benefit from the environment in which he lives, and by sitting with righteous people, the fragrance of faith emanates and the effect of obedience and benevolence is sent to the heart, which cheers the chest, calms the hearts, and displaces worries and fears.

7. Read the Qur'an, think about it and act upon it: The Holy Quran is the best treatment for the hearts and the best medicine for the souls. With it all good comes in, and with it all evil is warded off as in Surah Yunus, verse 10. Al-Tabari (1999) said Allah S.W.T. has made it a remedy for the believers so that they may be cured by His preaching of the ailments that afflict their chests. It is sufficient for them from the whisperings and temptations of Satan and spares them from everything else. Al-Shawkani (1414H) said among the opinions of the scholars regarding his saying "cure" is that it is a cure for apparent ailments through incantation, taking refuge and the like. Ibn Taymiyyah (2004) said the Qur'an is a cure for the chest, it removes the diseases of desire and mistrust that corrupt knowledge and perception. It nourishes the heart and purifies it with its proofs, stories, wisdom and sermons. Ibn al-Qayyim (2019) said the Qur'an is the greatest remedy for eliminating diseases, and Allah S.W.T. has never sent down a remedy that is more general, more useful or more effective than it. It is the complete remedy for all diseases of the heart and body and for the diseases of this world and the Hereafter. Al-Saadi (1420H) said the Qur'an contains healing, and it is universal. Healing the hearts and bodies from their pain and diseases. There are texts that show the value of the verses and surahs of the Qur'an in this regard. For example, his saying PBUH. to the one who recited Surah Al-Fatihah about the leader of the people who was stabbed, and he stood up as if he had been freed from a headband in hadith 2276 of sahih Al-Bukhari (1422H: 92). This is also as evident from (Muslim, 1374H: 553, Hadith 252; Al-Bukhari, 1422H: 84, Hadith 4008)

Al-Nawawi (1392H) said: It was said that its meaning is that it frees him from praying the night prayers, and it was said that it frees him from Satan, and it was said: It saves him from mischief, and it is possible that he saves him from all that, and the story of Abu Hurairah r.a. with *Satan*: "...he said to me, when you go to bed, recite *Ayat al-Kursi* from the beginning to the end: "There is no god but He, the Ever-Living, the Everlasting." He said to me, "Allah will never stop protecting you, and Satan will not approach you until morning...Then the Prophet PBUH. said:

Translation: He told you the truth, but it was a lie.

(Al-Bukhari, 1422H: 101, Hadith 2311)

The Holy Qur'an is a complete cure for all spiritual, psychological and heart diseases, a cure for polytheism, disbelief and hypocrisy, a cure for envy, arrogance and avarice, a cure for anxiety and depression, a cure for worries, fear and sorrow, a cure for schizophrenia and autism, for those who turn to it with their tongues and heart, because it is the Word of the Lord of the Worlds, and He is the Cause of Causes, praise be to Him. There is a study conducted by the Dutch researcher Vander Hoven on the effect of the Qur'an on psychological illnesses. He concluded that Muslims who regularly read the Qur'an in the Arabic language are able to protect themselves to a greater extent from psychological illnesses, compared to others. A second study was also conducted at Salvaudre University in Britain. Thirty Muslim students underwent some remedial programs at the university, and they regularly read the Qur'an, specifically *Surats Al-Rahman* and *Al-Sharh*. The study concluded that the Qur'an has an effect on maintaining a regular blood pressure and stress level. There are studies conducted in Italian hospitals on the effect of both the Qur'an and music on foreign patients who do not speak Arabic. They found that the recovery rate for patients who listened to the Holy Qur'an reached 95%, unlike patients who listened to music, they did not find it to have a tangible effect (Hassunah, n. d.).

8. Eighth: Remembering Allah S.W.T., thanking Him and praying for the Messenger of Allah S.W.T.: Constant remembrance of Allah S.W.T. is one of the greatest causes of peace of heart, bliss of hearts and removal of worries and fears as Allah said in Surah Al-Ra'd, verse 13. Al-Sa'di (1420H) said: "There is nothing more delicious for the heart, nothing more exquisite and nothing sweeter than to love one's Creator, to become familiar

with Him and to know Him”. The constant remembrance of Allah S.W.T. is a strong fortress, a strong rope of truth and a shield for the believer from psychological illness, because it includes the monotheism of Allah S.W.T., trust in Him and adherence to Him. Authentic supplications have been handed down to protect a person from obvious and hidden evils and illnesses (Al-Bukhari, 1422H: 126, Hadith 3293; Al-Nasa’i, 1421H: 55, Hadith 9878; Al-Tirmithi, 1395H: 465, Hadith 3388 and 490, hadith 3426)

Likewise, thanking Allah S.W.T. after every blessing, praising Him absolutely, and speak of Allah S.W.T.’s blessings, the apparent and the hidden, the religious and the worldly, which expands the chest, protects hearts from their fears and saves souls from their diseases. Frequent blessings for our Prophet PBUH. remove worries and fears (Al-Tirmithi, 1395H: 636, Hadith 2457). The Prophet PBUH. used to supplicate during times of distress: “There is no god but Allah, the Great, the Forgiving, there is no god but Allah S.W.T, the Lord of Peace, the Lord of the Glorious Throne” (Al-Bukhari, 1422H, Muslim, 1374H). Those who are sick in heart and soul should constantly remember Allah S.W.T. while standing, sitting and lying on their sides, and seek the specific and absolute remembrances that our Prophet Allah S.W.T. asked us to do, which are limited to entering and leaving the toilet and the home, going to sleep and waking up, eating and drinking, going up and down, wind, rain and lightning, hearing the voices of donkeys and roosters, entering markets and seeing the sick. When a man prays to his family, which is restricted to the morning and evening and other times and is absolute at all times and in pure places, including: *tahlil*, glorification, praise, *takbeer*, *hawqala* and asking for forgiveness. It is a cure for all diseases and ailments, Allah S.W.T. willing.

9. Supplication: Supplication is one of the best and most honourable acts of worship. It is the secret of the relationship between the servant and his Lord, and it is an invocation to Allah S.W.T. through supplication and a desire for the good in Him and a supplication to Him for the fulfilment of what is desired and wished for, and salvation from evil and from everything terrible. It is a remedy for the ailments of the souls and the chest from sorrow, grief and anxiety and a reason to ward off calamities and epidemics (Ibn Majah, 1430H: 68, Hadith 90; Al-Bukhari, 1422H: 35, Hadith 2893, 529; Hadith 3505, 75, Hadith 63; Ahmad, 2001: 341, Hadith 4318; Al-Tirmithi, 1975: 529, Hadith 3505; (Abu Dawud, 1430H: 409, Hadith 5074). Supplication is a protection for the believer from all evil and harm, and a protection for him from diseases and evils, if he says it with a sincere tongue and a confident heart and investigates the traditions and its etiquette.
10. Tenth: Treatment through legitimate *ruqyah* and psychospiritual medicine: The basic principle regarding the ruling on treatment is that it is lawful, whether it is through legitimate *ruqyah*, or through prophetic medicine as will be mentioned in the hadiths, or by consulting psychiatrists and others, or through alternative medicine through natural herbs as evident in Surah al-Insan verse 76, Surah al-Mu’minun verse 23, and hadith 1851 and others, from those with experience and righteousness, unless it is forbidden for the evidence contained therein. This is evident through hadith 5678 and 5684 of Al-Bukhari (1422H: 122), hadith 3855 of Abu Dawud (1430H: 5).

Because treatment involves preserving the soul and brings her safety and health, and wards off diseases and ailments, which is one of the major purposes of Islamic law. Medication brings safety and benefits, and wards off sicknesses and evils. Al-Izz Ibn Abd al-Salam (1991) said: “Medicine is like Sharia; it was established to bring the interests of safety and well-being, and to ward off the evils of ills and diseases”. It is permissible for the mentally ill to be treated with legitimate medicines that bring healing, Allah S.W.T. willing, such as taking honey and cupping, for which there has been evidence as previously mentioned; Ginger, olive oil, and cow's milk medicine has proven their great benefits, and ginger was mentioned in the Qur’an, and Allah S.W.T. said in Surah al-Insan verse 76, olive oil in verse 23 Surah al-Mu’minun and hadith 1851 of sunan Al-Tirmithi (1975: 285). While other nutritious food such as milk has been mentioned in

verse 16 Surah al-Nahl and hadith 8224 of al-Hakem, (1411H: 446) and Ajwa dates in (Al-Bukhari, 1422H: 138, Hadith 8769; 5687)

Likewise, consulting good people, including psychiatrists; Because of their experience and means of diagnosis, which alleviates these diseases, especially if the diseases are organic, neurological, or mental resulting from psychological symptoms, or have an impact on a person's psychological health. All of these have reasons; Because the healer is Allah S.W.T. and it does not contradict trust, but rather it is its completion because Allah S.W.T. ordered it to be taken.

It is forbidden to go to these people and ask them about the type of illness, or to believe what they claim, because of the great promise it entails that there was a threat of atonement, and sometimes of not accepting the prayer. This also entails aiding people in disobedience to Allah S.W.T., and paying money to them, which is cooperation in sin and aggression. There has also been evidence of the permissibility of treatment through legitimate *ruqyah*, as they are of great benefit, and can be cured of all illnesses, whether physical or mental as evident from hadith 39 and 64 of sahih Muslim (1374H: 1718, 1727), hadith 5745 of sahih Al-Bukhari (1422H: 133), hadith 3156 of Sunan Abu Dawud (1430H: 22).

The *ruqyah* can be done either with Surah Al-Fatihah or with Surah Al-Baqarah, Ayat Al-Kursi, the end of Surat Al-Baqarah, *al-mu'awwidhatain*, or with all of the above, or with a group of other surah(s), or with a group of verses in which healing and preservation are mentioned, or a collection of surahs and verses. The entire Qur'an is healing, and there is nothing wrong with the *ruqyah* being applied to pure water, to be placed on the site of the illness, and to drink what remains of it, or to wash with it, or to apply oil to the body, or to eat honey. In *ruqyah*, it is recommended to combine the Qur'an, supplications, and prophetic incantations as mentioned in the hadith 5675 and 3371 of sahih Al-Bukhari (1422H: 121, 147), also in sahih Muslim (1374H: 2081, 1728) from hadith 55 and 67.

Because frequently seeking refuge in Allah S.W.T. from the accursed Satan repels whisperers, delusions, devils, and witches. The person performing *ruqyah* should investigate the rules of *ruqyah* mentioned by the scholars. Ibn Hajar (1379H) said: "The scholars have unanimously agreed that *ruqyah* is permissible when three conditions are met: that it be with the words of Allah S.W.T. or His names and attributes, in the Arabic language or with what its meaning is known from elsewhere, and that it is believed that the *ruqyah* does not have an effect by itself, but rather by the essence of Allah S.W.T.. The person performing the *ruqyah* must ponder its meaning in order to be useful in treating diseases.

11. Eleventh: Strive to remove the causes that bring sorrow and grief and to maintain the causes that bring joy. This is what our scholars mentioned in the previous section. It is to close your eyes to past events and calamities, and not dwell on them. Dwelling on them leads to anxiety, depression as is the case with obsession as suggested in a hadith of Al-Bukhari (1422H: 123, Hadith 3276).

Al-Nawawi (1392H) said: "It means turning away from this false thought and turning to Allah S.W.T to remove it". Al-Mazeri said: The apparent meaning of the hadith is that he PBUH. commanded them to ward off the thoughts, by turning away from them and rejecting them, without reasoning, and without looking into invalidating them. Likewise, a person must turn away from everything that brings worries and sorrows, such as delusions, fantasies, beliefs, and bad thoughts, whether that was in the past, present, or future, and strengthen his heart with faith in Allah S.W.T and trust in Him. Do not surrender yourself to bad thoughts, because that distracts the mind, weakens the heart, and makes it a breeding ground for psychological illnesses.

This study recommends that the Ministry of Health, Information, Religious Affairs, and educational institutions in Malaysia prioritize educating society on mental health, focusing on prevention and treatment mechanisms through specialists. Collaborative efforts between government and private health institutions should be strengthened to enhance mental health services, develop health facilities, and provide counselling programmes to curb the spread of psychological illness. Additionally, partnerships between religious scholars and psychiatrists are essential for researching psychological illnesses and exploring prevention strategies through conferences and seminars. Psychological and preventive health should be promoted in schools and institutes through mental health-focused curricula and training programmes, as well as in universities through academic research in this field. Furthermore, the training of mental health professionals should be intensified by leveraging local and international expertise and integrating modern services and technologies to improve the treatment of mental health patients and support their effective reintegration into society.

Conclusion

Psychological illness is a psychological disorder manifested through symptoms affecting an individual's mental health, involving feelings, thoughts, and behaviours that can vary in severity. Major prevalent psychological illnesses globally and specifically in Malaysia include anxiety disorders, depressive disorders, obsessive-compulsive disorder, schizophrenia, autism, bipolar disorder, and psychogenic epilepsy, often presenting symptoms like tension, sadness, panic, and isolation. While medical professionals have yet to pinpoint specific causes, they suspect a blend of genetic, biological, environmental, and psychological factors. Scholars of Islamic law attribute the spread of these conditions to factors like materialistic pursuits, a distance from Allah S.W.T., sinful behaviour, and weak faith in the Hereafter. To prevent and treat these heart and soul diseases, various methods are recommended, including faith, knowledge, remembrance of Allah S.W.T., kindness to others, and various spiritual practices such as Qur'anic recitation and supplication. In Malaysia, contemporary therapeutic approaches incorporate Shariah knowledge, strong faith, good deeds, and psychological treatments while avoiding forbidden means, including methods employed by magicians and diviners. Numerous studies support the effectiveness and credibility of these preventative and therapeutic methods for mental illnesses. This study will be a reference for researchers in the field of psychiatry as well as researchers in the field of Shariah and others. It will serve as a guide for them to expand research into other psychological illnesses, explain their causes, and discover appropriate treatments for them. It is also a scientific guide for health institutions and relevant parties.

References

- Abdul Rab, M. A., Hasan, B. M. M., Gunardi, S., & Hoque, M. (2022). Shariah and medical measures to prevent the emerging Covid-19: An analytical study. *Malaysian Journal of Syariah and Law*, 10(1), 41–53. <https://doi.org/10.33102/mjssl.vol10no1.361>
- Abdul, 'A. 'O. (2016, November 24). "Consulting". Islam Web. <http://surl.li/sbijw>
- Abdullah, M. Z., Othman, A., Solat, N., Saidon, S., & Anuar, A. (2020). Psychosocial factors and mental illness among employees in private development companies in Malaysia. *Journal of Contemporary Social Science Research*, 4(2), 29–39. <https://ir.uitm.edu.my/id/eprint/40033>
- Abu Dawud, S. A. A. (1430H). *Sunan Abi Dawud*. Beirut: Dar Al-Risalah Al-'Alamiyah.
- Abu Ya'la, A. A. A. (1434H). *Musnad Abi Ya'la*. Al-Qahirah: Dar Al-Hadeeth.
- Ahmad, M. H. (2001). *Al-Musnad*. Beirut: Muassasat Al-Risalah.
- Al-'Afani, S. H. A. (1431H). *Nida al-ryan fee fiqh al-sawm wa fadhl Ramadhan*. Juddah: Dar Majid 'Aseeri.
- Al-Baidhawi, A. O. (1418H). *Anwa'r al-tanzeel wa asrar al-taweel*. Beirut: Dar Ihya Al-Turath Al-'Arabi.
- Al-Baihaqi, A. A. E. (1421H). *Shu'ab Al-Eeman*. Beirut: Dar Al-Kutub Al-'Imiyyah.
- Al-Baihaqi, A. A. E. (1424H). *Al-Sunan Al-Kubra*. Beirut: Dar Al-Kutub Al-'Imiyyah.
- Al-Bukhari, M. I. I. (1422H). *Saheeh Al-Bukhari*. Beirut: Dar Tawq Annajat.
- Al-Hakem, M. A. (1411H). *Al-Mustadrak 'ala Al-Sahehain*. Beirut: Dar Al-Kutub Al-'Imiyyah.
- Alias, M. A. A., Mohd Jailani, M. R., Wan Ismail, W. A. F., & Baharuddin, A. S. (2024). The integration of five main goals of shariah in the production of science and technology for human well-being.

- AL-MAQASID: The International Journal of Maqasid Studies and Advanced Islamic Research*, 5(1), 1–16. <https://doi.org/10.55265/al-maqasid.v5i1.79>
- Al-Jawhari, I. H. (1987). *Al-Sihah taj al-lughah wa sihah Al-‘Arabiyah*. Beirut: Dar Al-‘Ilm Lilmalaeen.
- Al-Munawi, A. T. A. (1356H). *Faidh al-qadeer sharh al-jame’ al-sagheer*. Mesr: Al-Maktaba Al-Tejariyyah Al-Kubra.
- Al-Nasa’i, A. S. (1421H). *Al-Sunan Al-Kubra*. Beirut: Muassasat Al-Risalah.
- Al-Nawawi, Y. S. (1392H). *Al-Menhaj sharh saheeh Muslem ibn Al-Hajjaj*. Beirut: Dar Ihya Al-Turath Al-‘Arabi.
- Al-Qasha’ilah, B. (2023). *Abbreviation in psychological disorders*. Palestine: Dar Al-Sikologi.
- Al-Qutaibi, S. (2020, November 14). “*Treating autism with the Holy Quran, herbs, and alternative medicine*”. Al-Ruqyah Al-Shariah. <https://sq-om.com/treating-autism-with-the-holy-quran-herbs-and-alternative-medicine>
- Al-Sa’di, ‘A. N. A. (1409H). *Al-Wasayel al-mufeedah li al-hayat al-sa’eedah*. Al-Su’udiyah: Al-Madinah Al-Munawwarah.
- Al-Sa’di, ‘A. N. A. (1420H). *Taiseer Al-Kareem Al-Rahman fi Tafseer Kalam Al-Mannan*. Beirut: Muassasat Al-Risalah.
- Al-Sa’di, ‘A. N. A. (1423H). *Bahjat qloob Al-Abrar*. Al-Su’udiyah: Wizarat Al-Shuoon Al-Islamiyah wa Al-Awqaf wa Al-Da’wah wa Al-Irshad.
- Al-Safarini, M. A. (1993). *Ghidha al-albab fi sharh mandhumat al-a’dab*. Mesr: Muassasat Qurtubah.
- Al-Shawkani, M. ‘A. M. (1414H). *Fath Al-Qadeer*. Beirut: Dar Al-Kalem Al-Tayeb.
- Al-Tabari, M. J. (1999). *Jame’ Al-Bayan ‘an Taweel Aai Al-Quran*. Beirut: Dar Al-Kutub Al-‘Imiyyah.
- Al-Taihi, R. (2021, June 21). “*Constant depressive disorder*”. WebTeb. <http://surl.li/aagiyt>
- Al-Tirmidhi, M. ‘I. S. (1395H). *Sunan Al-Tirmidhi*. Mesr: Syarikat Maktabat wa Matba’at Mustafa Al-Babi Al-Halabi.
- Al-Tujibi, A. A. (1997). *Turath Abi Al-Hasan al-haralli al-marakishi*. Al-Ribat: Manshurat Al-Markaz Al-Jami’i Lilbath Al-‘Ilmi.
- ‘Ashoor, A. (2022, August 22). “*Good morals protect against depression and heart disease*”. Al-Yaum. <http://surl.li/fyrexo>
- Ayyub, A. S. (2015). *Mawsu’at mahasen Al-Islam wa raddi shubuhah al-leyam*. Al-Kuwait: Dar Iylaf Al-Duwaliyyah.
- Basalum, M. M. A. (2017). *Nafahat al-manbar Al-Makki*. Beirut: Dar Al-Kutub Al-‘Imiyyah.
- Eusoff, F. S., Shalisah, S., Idayu, B. I., Syahna, M. H., & Et al. (2022). Psychometric properties of Malay obsessive-compulsive inventory-child version (OCI-CV) in Malaysian perspectives. *Scandinavian Journal of Child and Adolescent Psychiatry and Psychology*, 10(1), 114–122. <https://sciendo.com/article/10.2478/sjcapp-2022-0012>
- Faizul, H., Naffisah, M. H., Suzila, K., & Iskandar, H. (2018). Issues and challenges of mental health in Malaysia. *International Journal of Academic Research in Business and Social Sciences*, 8(12), 1685–1696. <http://dx.doi.org/10.6007/IJARBS/v8-i12/5288>
- Frame, C. L., & Maston, J. L. (1987). *Handbook of assessment in childhood of psychoathology*. New York: Plenum Press.
- Freddy, F., Arutchelvan, R., Wei, K. P., Chandramathi, S. R., & Et al. (2024). Establishing associated risk factors, including fungal and parasitic infections among Malaysians living with schizophrenia. *Scientific Reports*, 14, 385. <https://www.nature.com/articles/s41598-023-50299-7>
- Hana, J. (2021, June 10). *Anxiety disorder*. WebTeb. <http://surl.li/komvrq>
- Hana, J. (2022, June 8). *Bipolar disorder*. WebTeb. <http://surl.li/nzjrue>
- Hassunah, M. (n.d.). “*How to read the Qur’an and listen to it on the body and the soul*”. Tes’ah. <https://www.ts3a.com/%D9%82%D8%B1%D8%A7%D8%A1%D8%A9-%D8%A7%D9%84%D9%82%D8%B1%D8%A2%D9%86>
- Ibn al-Jawzi, A. A. (1984). *Nuzhat al-a’un al-nawadhir fi ‘ilm al-wojoh wa al-nadhair*. Beirut: Muassasat al-Risalah.
- Ibn Al-Jawzi, J. A. A. (1418H). *Thammu al-hawa*. Lubnan: Dar Al-Kitab Al-‘Arabi.
- Ibn Al-Qayyim, M. A. (1996). *Zad al-ma’ad*. Beirut: Muassasat Al-Risalah.
- Ibn Al-Qayyim, M. A. (2019). *Al-Dda wa al-ddawa*. Beirut: Dar Ibn Hazm.
- Ibn Al-Qayyim, M. A. (2019). *Al-Fawaed*. Beirut: Dar Ibn Hazm.
- Ibn Al-Qayyim, M. A. (2019). *Al-Kalam ‘ala Masalat Al-Sama’*. Beirut: Dar Ibn Hazm.
- Ibn Al-Qayyim, M. A. (2019). *Ighathat al-lahthan fi masayed al-shaitan*. Beirut: Dar Ibn Hazm.

- Ibn Duraid, M. A. A. (1987). *Jamharatu al-lughah*. Beirut: Dar Al-‘Ilm Lilmalayeen.
- Ibn Faris, A. Z. (1979). *Mu’jam maqaees al-lughah*. Beirut: Darul Fikir.
- Ibn Hajar, A. A. H. (1379H). *Fath Al-Bari*. Beirut: Dar Al-Ma’rifah.
- Ibn Hazm, ‘A. A. S. (1987). *Rasayel Ibn Hazm*. Beirut: Al-Muassasah Al-‘Arabiyah li Al-Dderasat wa Al-Nashr.
- Ibn Majah, M.Y. (1430H). *Sunan Ibn Majah*. Beirut: Dar Al-Risalah Al-‘Imiyah.
- Ibn Manzor, J. M. M. (1414H). *Lisan al-‘Arab*. Beirut: Dar Sadir.
- Ibn Taymiyya, A. A. (2004). *Majmu’ al-fatawa*. Al-Madinah Al-Munawwarah: Majma’ Al-Malik Fahd Liteba’at Al-Mushaf Al-Shareef.
- Ilyas, M. (2012, December 24). “Doctors: Patience and endurance strengthen a person and protect him from mental illness”. Al-Yawm Al-Saabi’. <http://surl.li/kkzips>
- Institute for Public Health. (2011). “National health and morbidity survey 2011”. <https://iku.nih.gov.my/images/IKU/Document/REPORT/NHMS2011-VolumeII.pdf>
- Izzuddin ibn Abdissalam, A. A. (1991). *Qawa’ed Al-Ahkam fee Masaleh Al-Anam*. Al-Qahirah: Maktabat Al-Kullyat Al-Azhariyah.
- Jaclyn, T. A. C., Geetha, G., Mohd Hanafi, A. D., Chan, L. F., Loo, J. L., & Goon, J. A. (2019). Oxidative status in bipolar disorder (BD) and its correlation with age, gender and body mass index (BMI). *Sains Malaysiana*, 48(5), 1083–1095. <https://doi.org/10.17576/jsm-2019-4805-17>
- Jamilah, H. A. K., Firdaus, M., & Oei, T. P. (2013). *Treatments for anxiety disorders in Malaysia*. *Malays J Med Sci.*, 26(3), 24–36. <https://doi.org/10.21315/mjms2019.26.3.2>
- Karajah, A. (2021, October 4). “Obsessive disorder”. WebTeb. <http://surl.li/ozkacy>
- Kaur, J., Cheong, S. M., Mahadir, B., Kaur, G., Manickam, M. A., Mat Noor, M., & Rosman, A. (2014). Prevalence and correlates of depression among adolescents in Malaysia. *Asia Pacific Journal of Public Health*, 26(5_suppl), 53S–62S. <https://doi.org/10.1177/1010539514544356>
- Khareebah, Z. (2002, November 11). *Fatwas and consultations of the site of Islam today*. Al-Maktabah Al-Islamiyyah. <http://surl.li/efklcl>
- Laima, ‘A. (2021, September 12). Epilepsy. WebTeb. <http://surl.li/itoucw>
- Mayo Clinic Team. (2022, December 13). “Psychological illness. Mayo Clinic”. <https://www.mayoclinic.org/ar/diseases-conditions/mental-illness/symptoms-causes/syc-20374968>
- Media Center. (2022, January 12). “Schizophrenia. World Health Organization”. <https://www.who.int/ar/news-room/fact-sheets/detail/schizophrenia>
- Media Center. (2022, June 8). “Psychological disorders”. World Health Organization. <https://www.who.int/ar/news-room/fact-sheets/detail/mental-disorders>
- Media Center. (2023, March 29). “Autism”. World Health Organization. <https://www.who.int/ar/news-room/fact-sheets/detail/autism-spectrum-disorders>
- Media Center. (2023, March 31). “Depression disorder”. World Health Organization. <https://www.who.int/ar/news-room/fact-sheets/detail/depression>
- Media Center. (2023, September 27). “Anxiety disorders”. World Health Organization. <https://www.who.int/ar/news-room/fact-sheets/detail/anxiety-disorders>
- Mukhtar, A. A. (2008). *Mu’jam Al-Lughah Al-‘Arabiyah Al-Mu’asirah*. Al-Qahirah: ‘Alam Al-Kutub.
- Muna, K. (2021, February 23). “Common reasons for autism”. WebTeb. <http://surl.li/griixm>
- Muslem, M. A. A. (1374H). *Saheeh Muslem*. Beirut: Dar Ehya At-Turath Al-‘Arabi.
- National Health and Morbidity Survey. (2019). “Non-communicable diseases: Risk factors and other health problems 2019”. https://iku.moh.gov.my/images/IKU/Document/REPORT/NHMS2019/Report_NHMS2019-NCD_v2.pdf
- Oktalita, F., & Rizki, D. (2021). Analysis of MUI Fatwa Number 17 of 2020 regarding kaifiat prayer guidelines for health workers who wear personal protection equipment (PPE) when treating and handling COVID-19 Patients. *Al-Istinbath: Jurnal Hukum Islam*, 6(2), 247–270. <https://doi.org/10.29240/jhi.v6i2.3332>
- Qasem, H. M. (1990). *Manar al-qari sharh mukhtasar saheeh Al-Bukhari*. Demashq: Dar Al-Bayan.
- Qasim, H. S. (2015). *Psychological and mental disorders: Their theories, causes, and treatment methods*. Jordan: Dar Dijlah.

- Rotenstein, L. S., Ramos, M. A., Torre, M., Segal, J. B., Peluso, M. J., Guille, C., & Mata, D. A. (2016). Prevalence of depression, depressive symptoms, and suicidal ideation among medical students. *JAMA*, 316(21), 2214–2236. <https://doi.org/10.1001/jama.2016.17324>
- Sachdev, P. (2023, March 28). “Causes of mental illness”. WebMD. <https://www.webmd.com/mental-health/mental-health-causes-mental-illness>
- Sallam, ‘Q. (2022, March 30). “Psychogenic epilepsy”. WebTeb. <http://surl.li/lxaxbn>
- Shaeraine, R., Sujesha, N., Myelone, T., & John, L. (2021). Mental disorders in Malaysia: An increase in lifetime prevalence. *BJPsych International*, 18(4), 97–99. <https://doi.org/10.1192/bji.2021.4>
- Shiang, Y. E., Wan, Y. G., Poh, Y. L., Hamidin, A., & Zalilah, M. H. (2020). Factors associated with autism severity among Malaysian children with autism spectrum disorder. *Research in Developmental Disabilities*, 100, 103632. <https://doi.org/10.1016/j.ridd.2020.103632>
- Si, L. F., Kheng, S. L., Lee, A. T., Nabilah, H. Z., Jun, H. H., & Et al. (2021). Prevalence study of epilepsy in Malaysia. *Epilepsy Research*, 170, 106551. <https://doi.org/10.1016/j.eplepsyres.2020.106551>
- Tan, E. S. S., Chin, S. A. F. X., Sathapan, M. S. P., Dewi, A. D., & Et al. (2023). Mental health and the COVID-19 pandemic: Observational evidence from Malaysia. *International Journal of Environmental Research and Public Health*, 20(5), 40-46. <https://doi.org/10.3390/ijerph200504046>
- WebTeb team. (2012, April 4). “Obsessive-compulsive disorder”. WebTeb. <http://surl.li/lxaxbn>
- Wesley, P., McTernan, M. F., Dollard, M., & LaMontagne, A. D. (2013). Depression in the workplace: An economic cost analysis of depression-related productivity loss attributable to job strain and bullying. *An International Journal of Work, Health & Organisations*, 27(4), 321–338. <https://doi.org/10.1080/02678373.2013.846948>
- Zaenurrosyid, A., Sholihah, H., & Cholil, A. (2021). Community response to the health protocols in organizing weddings ceremony during the COVID-19 pandemic. *Al’Adalah*, 18(1), 157-174.