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Overview

Who are American Muslims?

Protective Factors

Risk Factors & Barriers

Where do they go for help?

Cultural aspects of Mental Health

Tools for Health Practitioners and Caregivers













Basic Terminology

- Salam a laikum and Wa alaikum salam
- Islam: Means peace and purity, submission
- Islamic: An adjective to describe non-human nouns, not people (e.g. Islamic civilization, Islamic school)
- Muslim: A person who practices Islam
- Arab
 - Only 20% of Muslims are Arab
- Arabic
 - Most Muslims do not speak Arabic (except in prayers)











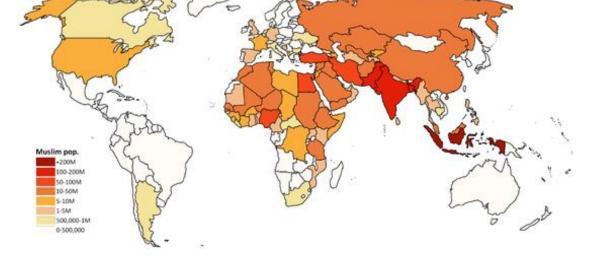
World Demographics

- Muslims
 - 1.9 Billion (25%)

Most populous Muslim country?

Second largest religion after Christianity

- Regions in Asia:
 - Asia: 1.1 B (58%)
 - India & Pakistan: 344 M (18%)
 - MENA region: 317 M (17%)
 - Southeast Asia: 300M (16%)



MENA: 93% Muslim (the highest concentration of Muslims)

[Source: 2015 Pew Research Center]







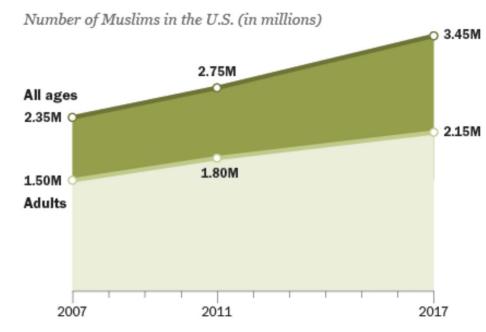




Muslims in the US

- 3.5 M (1.1%)
- Projections:
 - By 2040, the 2nd-largest religious group after Christians
 - currently, Jews are the 2nd largest group
 - By 2050, 8.1 million (2.1%)
 - Almost double of today's %
- [Source: 2018 Pew Research Center]

Number of Muslims in the U.S. continues to grow



Note: U.S. Muslim population estimates reflect a correction made on Nov. 9, 2017. Source: Pew Research Center estimates based on analysis of surveys of Muslim Americans in 2007, 2011 and 2017 combined with U.S. Census data. "U.S. Muslims Concerned About Their Place in Society, but Continue to Believe in the American Dream"

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American Muslims are Diverse

How Racially Diverse Are U.S. Religious Groups?

% of each religious group in each racial/ethnic category, and each group's diversity score on the Herfindahl-Hirschman index

	White	Black	Asian	Mix/ Other	Latino	Index
Seventh-day Adventist	37%	32	8	8	15	9.1
Muslim	38	28	28		3 4	8.7
Jehovah's Witness	36	27	6		32	8.6
Buddhist	44	3	33	8	12	8.4
"Nothing in particular"	64		12	5 5	15	6.9

- The 2nd most diverse religious group (after 7th Day Adventists)
- Three-quarters of U.S. Muslims are immigrants or the children of immigrants
 - [Source: Pew Research (2017)]













American Muslims and Activism





[Photos: American Muslims demonstrate against extremism and Islamophobia]











American Muslims and Religiosity

- Religious importance in life:
 - 65% "very"
 - 22% "somewhat"
 - 8% "not too"
 - 5% "not at all"

Four-in-ten Muslims say they attend mosque weekly

% who say they attend a mosque ...

	Weekly or more	Monthly/ yearly	Seldom/ never	DK/ref.
U.S. Muslims	%	%	%	%
2017	43	32	26	<1=100
2011	47	34	19	<1
2007	40	26	34	<1
2017 among				
Men	48	30	22	<1
Women	37	34	30	<1
Ages 18-39	43	32	24	<1
40+	42	31	27	<1
Some college or less	46	28	26	<1
College graduate	36	39	25	<1













What Do Muslims Believe?



[Photo: Decorations in Turkish bazaar depicting from L to R: Jesus, Jesus, Virgin Mary, Quranic verse, 'Allah' in Arabic, Saiyidina Ali]

- One God
- Angels
 - Archangel Gabriel, Michael, etc.
- Messengers/Prophets
 - Including Abraham, Jesus, Moses, David, Noah, Muhammad, etc.
- Revelations
 - PsalmsTorah
 - Gospel * Scrolls * Quran
- Day of Judgment
- Divine Decree













What do Muslims Practice?

The Five Pillars of Islam (or Acts of Worship) are:

- Testimony of Faith
- Prayer (salah)
- Charity (zakah)
- Fasting
- Hajj (pilgrimage to Mecca)













Protective Factors

- Many have extended family systems
 - buffers against the stress of acculturation
 - (Khuwaja et. al., 2012)
- Religious practices and participation
 - linked to higher levels of resilience
 - reduce the likelihood of anxiety and depression
 - buffer the risk of illness











Research on Faith as a Coping Mechanism

- Greater overall religiosity relates to greater resilience (Mitha & Adatia, 2016)
- Religious coping is:
 - a distinct sub-component of religious identity
 - is associated with lower levels of distress
 - (Adam & Ward, 2016; Ahmed, Kia-Keating, & Tsai, 2011),
- Faith practices have a direct positive effect on physical and mental health
 - (Hodge, Zidan, & Husain, 2016)







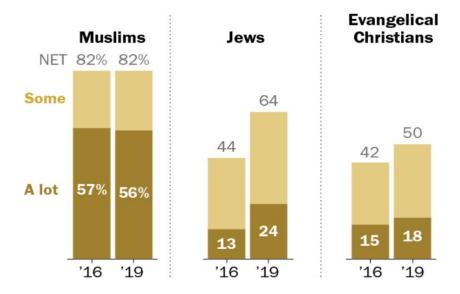




Risk Factors: Discrimination

Most Americans say Muslims subject to discrimination

% who say there is ____ of discrimination against each group in our society



Source: Survey of U.S. adults conducted March 20-25, 2019.

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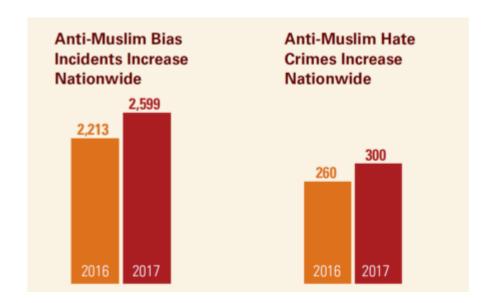


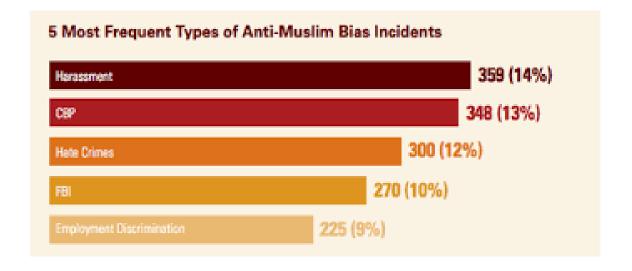






Rise in Bias/Hate Crimes

















Risk Factors: Discrimination

- Islamophobia and racial discrimination are a major concern for Muslims in Western states
 - (Anwar, 2008)
- Types of discrimination reported (to various organizations):
 - denial of religious accommodations
 - job terminations
 - -verbal abuse
 - unequal treatment
 - denial of employment
 - denial of access to public facilities













Islamophobia Causes Trauma

- Negative stigma to cause profound psychological distress
 - (Kunst, Sam, & Ulleberg, 2013)
- Unwarranted surveillance (mosques, homes, college campuses, ...)
- Stop and frisk policies (streets, airports, ...)
- Laws banning all forms of veil/hijab
- Increase in hate crimes (particularly Muslim women)
- Micro-aggressions





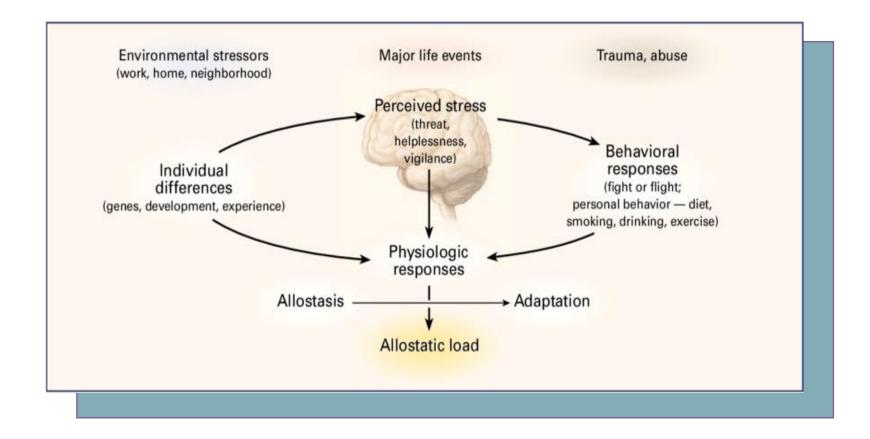








Concerns: Allostatic Load













Spotlight: Immigrants & Refugees



- Mosques and faith communities replace traditional extended family and social supports
- Less likely to have strong social supports
- Acculturation: Source of familial stress
- Trauma: Refugees likely to be survivors













Spotlight: Muslim Youth

 Muslim school-age children are four times as likely to be bullied as the general public

- Immigrant youth:
 - Acculturative stress from parents and dominant culture
 - Second-generation immigrants have a higher rate of stress related to navigating bicultural identities, and poor mental health outcomes
 - (Amanda et. al., 2020).













Spotlight: Muslim Families







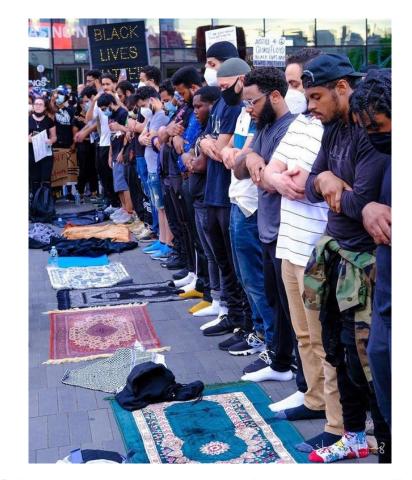






Spotlight: African American Muslims

- Intergenerational trauma
- May experience discrimination within their faith community => Black mosques as safe havens
- Consider intersectionality:
 - Being Black, Muslim, female, low-income
 - What layers of identity are apparent and relevant to your clients?













[Photo: Muslims pray at a Black Lives Matter rally]

Values as a Barrier to Service

- People with strong Islamic values are less likely to obtain mental health services
 - Want concerns addressed from an Islamic perspective
 - (Abdullah, 2007; Podikunju-Hussain, 2006)
- Strong concepts of family honor, shame and guilt results in keeping problems within the family
- Seeking help from religious clergy (imams) is preferred over mental health professionals (Herzig, 2014)
 - Except for people who have experienced trauma within the faith community or at the mosque => dilemma













Health Disparities

- Main reasons why Muslims avoid mental health care:
 - mistrust of service providers
 - language barriers
 - fear of
 - judgement (e.g. belief in the unseen, possession, etc.)
 - racism and discrimination
 - violation of values
 - lack of understanding of culture/religion
- "Double stigma"













Where Do American Muslims Seek Help?









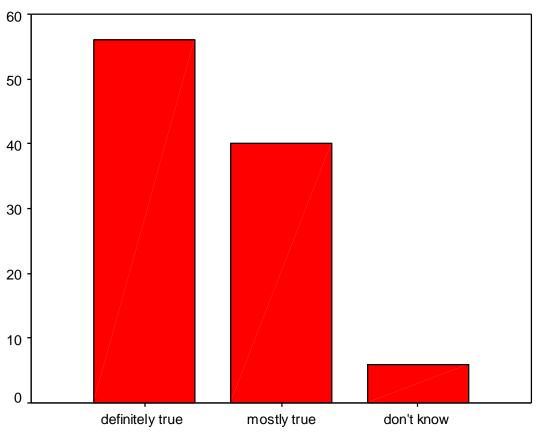






Imams as Counselors

Counselor/advisor















Imams: Frontliners for Mental Health

- After 9/11, an increase in seeking Imams to address mental health related issues in the Muslim community.
 - (Ali, Milstein and Marzuk, 2005)
- What's the problem?
- Few religious scholars have any formal training in mental health
 - This is changing!













Beliefs Related to Mental Health

- Spirit possession is more socially acceptable than mental illness
 - · As the cause is external, and not a weakness of your own mental state
- Consider spirits (or jinns) as a source of symptoms:
 - Intrusive thoughts (OCD, anxiety, ...)
 - Religious delusions (hearing voices, schizophrenia, psychosis)
- Ruqyah (faith healing) is used to 'exorcize' spirits or jinns













Somatization: Expressions of Mood Disorders

- In many Muslim cultures, physical illness is more socially acceptable than mental illness
- Mental health problems are often expressed as physical symptoms
 - Cultural idioms revolve around the physical body
 - "Depression" is absent in some languages
 - No self-recognition of psychological distress or sadness
 - Physicians may have to tease out the underlying cause (brief mental status exam)











Schizophrenia

- The rate of schizophrenia in Muslims is similar to that in non-Muslims
 - (Al-Abdul-Jabbar & Al-Issa, 2000).

- Religious, negative delusional themes and delusions of existential guilt are common in Jews and Christians but infrequent in Muslim populations
 - (Stompe et al., 1999; Stompe et al., 2006).
- Religious grandiosity is also not frequently reported by Muslims.









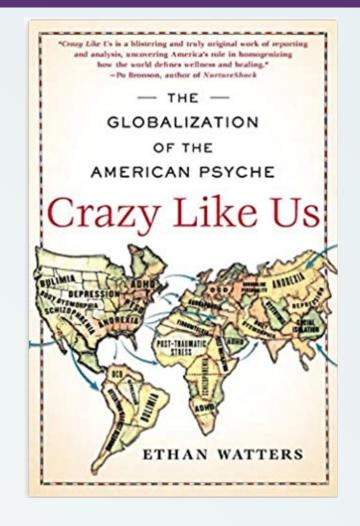




Mental Health and Globalization

Crazy Like Us by Ethan Watters

- Explores what mental health and mental illness means in different cultures
- Chapter 3 depicts illustrates how protective factors in Muslim societies result in better long-term outcomes among people with schizophrenia compared to developed nations















Alcohol & Substance Use

- Prohibitions with substance use
 - A mercy and protection for our communities
 - Also a challenge due to stigma causing persons with addiction to suffer privately
- Rates of alcohol and substance use are lower than general population among devout Muslims
 - However...







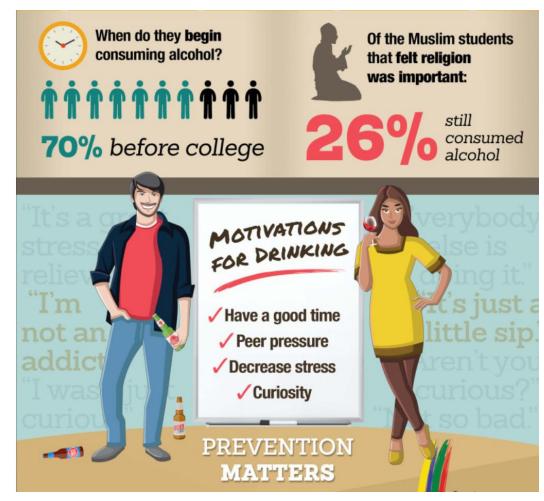




Alcohol Use: College Students



[Source: The Family & Youth Institute, 2015]













Neurodevelopmental Disabilities

• ADHD:

- Stigma: Parents do not know that their best friends' children are struggling
- Medication considered a last resort for mental health disorders
 - Reality: longitudinal research shows that 50% of those with ADHD receive medication

Autism:

- Perception is that this prevalent in the developed world
- Limited research shows the prevalence rate is comparable in the developing world













Neurodevelopmental Disabilities

- IDDs:
 - Delay in seeking help because:
 - Bilingual or tri-lingual parents may think their child's delay in speech is because kids are multi-lingual
 - Amplified for families with severe behavioral issues, sensory difficulties, emotion regulation problems, anger outbursts, etc.
 - => Families struggle with acceptance and inclusion











MUHSEN





- National non-profit organizations like MUHSEN offer services to establish an inclusive and accessible environment for individuals with intellectual, mental or physical disabilities, and their families.
- Offers certification to mosques that meet certain criteria for services











MUHSEN



SILVER

All points must be met

Wheelchair accessibility through ramps and elevator

Needs Assessment Survey of community

Advertising disability services on masjid website

Khutbas on disability at least 4x/year

Disability awareness event at masjid at least 2x/year

Restroom and wudu accessibility

Special needs/disability facilitator for masjid

Information about programs accessible on website



GOLD

All SILVER points plus:

Sign language interpreter for select lectures and khutbahs

Parent/caregiver support group

Siblings support group

Regularly scheduled programs or events for families with disabilities

Braille Quran must be available

Eid prayer accessibility and/or designated room for families with disabilities

Youth training event about Disabilities Interaction

Specialized child care at select masjid events



PLATINUM

All GOLD points plus:

Playground with accessible equipment

Closed Captioning on message boards and digital display screens

Participation in community service or service events for the disabled

Disability/Special Needs Islamic class for children with disabilities with trained instructor and aides

Changing bench in restroom(s)

Automatic door system















Principles for Serving Muslim Clients

- Primary process of their healing must be the patient's
 - Identity
 - Agency
 - Cultural beliefs & traditions
 - Personal strengths
- Secondary process:
 - Pathological identity & diagnosis
 - Used only if it is a positive influence in their healing process.













Recommendations for Caregivers

Having a culturally sensitive approach generally means

- > Let curiosity guide you
- Know some Islam 101 & use as TENTATIVE hypothesis.
- Recognize differences and diversity
- > Religion is only one factor in the lives of Muslims
- > Play a supportive role
 - > Help them integrate religion into their own healing and treatment.
- Ask: "How important is faith to you?"
 - > "How important is your faith community to you as a means of support?"













Additional Recommendations

- □Identify allies/collaborative peers in your hospital or agency:
 - Muslim doctors in the hospital
 - 1 in 10 doctors are Muslim
 - Pastoral care or Chaplain Services
 - Community directory
 - Imams from local mosques
 - Muslim volunteers







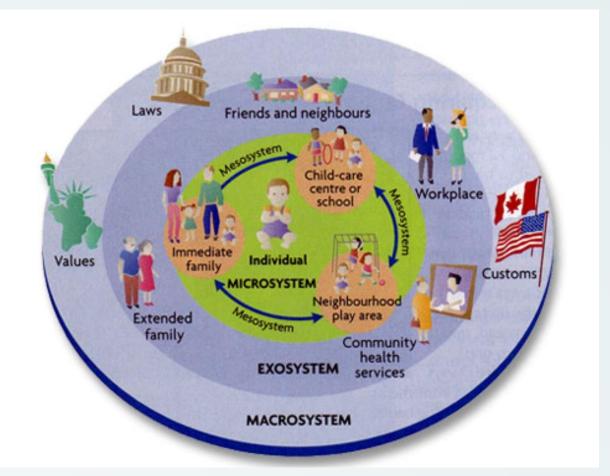






Additional Recommendations

- Bronfenbrenner's ecological systems theory – how development of a child is impacted
- Encourage connections to both faith and secular support networks



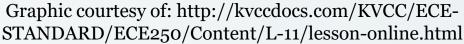












Trends: Muslim Chaplains

- Muslim Chaplains
 - More seminaries and Divinity Schools are offering MDiv for Muslims.
 - Women chaplains (alternatives to imams)!
 - Representation
 - Hospitals
 - Military
 - College campuses
 - Prisons
 - Selective mosques/communities





[Photo of a gathering of Muslimah chaplains in 2016 discussing unique experiences of female chaplains]













Trends

- CE for Clergy (Imams and Muslim Chaplains)
 - Being educated in mental health red flags
 - Seminaries training student chaplains
 - Non-profits offer Mental Health First Aid and CE training for community leaders and clergy
 - Examples:
 - Association of Muslim Health Professionals
 - Institute for Muslim Mental Health





Collaborating with mental health providers as religious consultants













Trends in Community Initiatives

- Muslim Third Spaces
 - Safe, non-judgmental spaces as alternatives to mosques and community centers
 - "Come as you are" philosophy
 - Muslim Space in Austin, TX and CenterDC in Washington, DC.
 - Provides community support to all ages, denominations, ethnicities, nationalities
- Crisis Call and Text Lines
 - Non-judgmental ear
 - Confidentiality
 - Emotional Support
 - Popular with youth to cope with taboo subjects and acculturative stress













Local Faith-based Mental Health Team

- In 2016, IAR created a Behavioral & Mental Health Working Group based on the demand for mental health services in our community.
- Some barriers to service observed among the community included:
- Stigma around mental health issues
- Fear of judgement
- Cultural beliefs
- Cultural diversity
- Economic cost, fear of legal liability
- Overwhelming demand vs limited resources



Islamic Association of Raleigh















Collaborate with us!



Our Mission

Empowering our community and providing a holistic approach to mental health needs.

Our Vision

To work towards serving the needs of the community through the development of guidelines for mental and behavioral health referral needs as well as the development of a staged implementation of counseling and support programs resulting in workable solutions for current issues in the community.

Top issues:

- Marital discord
- Youth counseling; behavioral modification
- Mental health disorders (mood and anxiety disorders primarily)
- Domestic abuse
- Other: Scrupolosity, substance use.













Credits and References

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- Andy AlWazni, MSW, PhD Candidate, UNC Chapel Hill SSW
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- · Others can be provided as needed



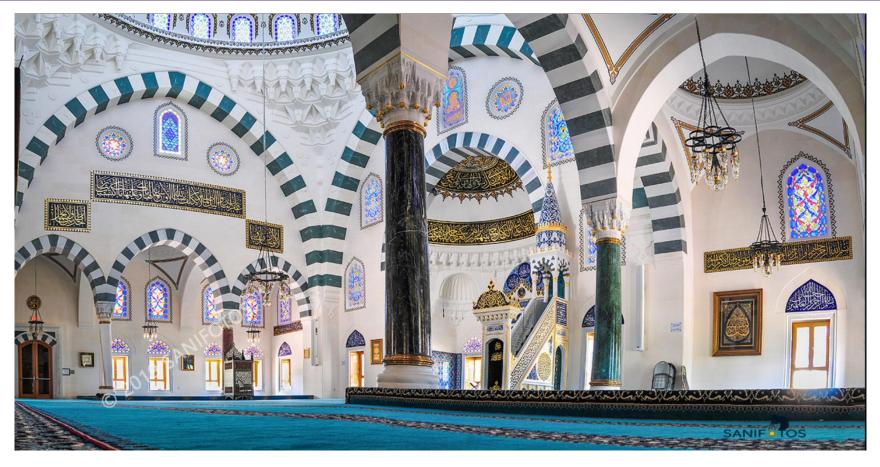








Questions?



[Photo of the interior of the Diyanet Center, Maryland.]











