

Seeking Help from Faith Healers among Iraqi Patients with Obsessive – Compulsive Disorder

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Summary:

Background: Faith healing is common in Arab culture. Obsessive-compulsive disorder is linked to religious beliefs and this can affect its management as patients may seek help from faith healers rather than mental health professionals.

Patients and methods: Patients who received a diagnosis of OCD according to DSM-IV-TR completed a questionnaire containing questions about age, gender, marital state, residence, income, level of education, and occupation. Also, data was collected on help-seeking from a faith healer and on religiosity. The data was analyzed by using the statistical package of the social sciences (SPSS).

Results: 58.5% of OCD patients had sought help from faith healers and this was significantly associated with being religious (p value .003). There was no association with other variables.

Conclusion: Iraqi mental health professionals should be aware of patient's experience of faith healing as this is common among OCD patients. The findings also raise interesting questions regarding the need for a dialogue between health professionals and faith healers in the interest of providing optimal care to OCD patients.

Key words: faith healing, Iraq, Obsessive-compulsive disorder.

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Introduction:

Faith is a multi-layered phenomenon, involving a belief about things of which we are uncertain accompanied by an expectancy and/or conviction [1]. Faith healing is the attempt to use religious or spiritual means such as prayer to prevent illness, cure disease, or simply improve health[2]. The World Health Organization clearly stresses the value of concepts such as faith, hope and compassion in healing process from any illness [3]. Obsessive compulsive disorder(OCD) had been recognized in ancient Iraqi culture. The bible describes King Nabuchadnezzar's compulsion to eat "grass like cattle " as his punishment for transgressions against God[4]. In the Holly Quran there is a description of Satan as a form of obsession [5]. As Islam is the major religion in Iraq , the Holly Quran (the Quran, the holly book of Islam) has a deep effect on Iraqi culture. Hence the recognition of OCD as related to Satan makes people relying on certain prayers and attending religious figures like" Seyed or Sheikh" asking for healing. This may have impact on management of OCD. Reliance on faith healing to the exclusion of other forms of treatment can have a public health impact when it reduces or eliminates access to modern medical treatment [6], or alternatively it may be helpful [7].

Patients and Methods:

The study was carried out during the period from January-December 2006, in the outpatient psychiatric clinic of Al-Hussaini General Hospital in Kerbela (a shrine city in central Iraq). Patients who received a diagnosis of OCD by a specialist psychiatrist were reviewed according to the DSM-IV-TR criteria[8] and those who fulfilled these criteria were included in the study. Patients who consented completed a form that included information regarding age, gender, area of residence, educational level, income, and religiosity (defined as practicing religion, in other words doing the religious duties like praying, fasting ,etc...). They were asked if they had attended a faith healer (usually a religious man called seyed who do some spiritual rituals assumed to heal patients) at some stage during their illness. The number of patients was 136, 50 were males and 86 were females. The age range was 12-80 years. The data was analyzed using the Statistical Package for the Social Sciences (SPSS version 13 for windows). Associations between variables were measured by using Chi-Square Test apart from age where t test was used.

Results:

One hundred and thirty six patients participated in this study, fifty of them (36.8%) males, and eighty six (63.2%) females. Seventy nine patients (58.5%) had sought help from a faith healer at some stage of their illness. Mean age of patients who had sought help from a faith healer was 30 years. A significant relationship was found between religiosity and seeking

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help from a faith healer (p value .003). No significant relationship was found between age, gender, marital status, place of residence, income, occupation, and level of education and seeking help from a faith healer.

Table (1) summary of the results

Variable		Sought help from FH	Didn't seek help from FH	P value
No. of patients		79(58.1%)	57(41.9%)	
Age: mean(SD)		30.2(11.5)	28.1(13.5)	.346
Gender	Male	26 (52%)	24 (48%)	.273
	Female	53 (61.6%)	33 (38.4%)	
Marital state	single	31(48.4%)	33(61.6%)	.135
	married	44(67.7%)	21(32.3%)	
	widowed	3(60%)	2(40%)	
	divorced	0(0%)	1(100%)	
	separated	1(100%)	0(0.0%)	
Area of residence	Urban	66(57.4%)	49(42.6%)	.700
	Rural	13(61.9%)	8(38.1%)	
Income	Poor	27 (62.8%)	16 (37.2%)	.675
	Average	39 (57.4%)	29 (42.6%)	
	Rich	13 (52%)	12 (48%)	
Religiosity	Yes	73(63.5%)	42(36.5%)	.003
	No	6 (28.6%)	15 (71.4%)	
Occupation	Housewife	36(62.1%)	22(37.9%)	.452
	unemployed	3(100%)	0(0.0%)	
	worker	4(66.7%)	2(33.3%)	
	student	8(40%)	12(60%)	
	employee	16(55.2%)	13(44.8%)	
	Street vender	10(62.5%)	6(37.5%)	
	retired	2(50%)	2(50%)	
Education	Illiterate	13(59.1%)	9(40.1%)	.658
	Read & write	266.7%)	1(33.3%)	
	Completed primary	15(51.7%)	14(48.3%)	
	Some secondary	19(70.4%)	8(29.6%)	
	Completed secondary	11(47.8%)	12(52.2%)	
	Institute or college	19(59.4%)	13(40.6%)	

Discussion:

This study shows a high proportion of patients with OCD had sought help from faith healers (58.5% versus 41.5%). This finding is similar to the study of Okasha & Karam who had found that 60-70% of Egyptian psychiatric patients present to traditional healers and GPs [9]. A study in the United Arab Emirates (UAE)[10] had found that 44.8% of psychiatric patients had sought help from faith healers. Another study in South India[11] had found that 45% of psychiatric patients had sought help from faith healers.

Both UAE and Indian studies had found that significantly higher rate of consulting faith healers was recorded among psychotic patients. We couldn't find any study about faith healing among OCD patients alone. The higher rate of seeking help from faith healers among our sample of OCD patients may be related to the cultural beliefs regarding OCD as a disorder that is linked culturally with Satan and lack of faith in God (specially the sample was drawn from a city with religious culture as it contains an important Islamic holy shrines), but it may also reflect poor mental health education among Iraqi population. The effect of religiosity was clear in seeking help from faith healers which indicates that cultural attitudes are directly influenced by religious beliefs. It has been suggested that religion plays an important role in symptom formation, attributions and management[12]. Also, there is evidence that religion can play an important role in facilitating coping with life stressors [7]. Mental health professionals need to be knowledgeable about the circumstances in which involvement of faith healers is appropriate. They should also be aware that for religious believers, prayers and other religious rituals may play a central role in the healing process. This view is supported by the WHO[3]. Although involvement in such activities may influence pathways to care there is some evidence that religious and biomedical forms of healing can work well together [13]. Failure to find associations between age, gender, residence, marital status, occupation and educational level and faith healing, may indicate that cultural beliefs are only modestly affected by these variables.

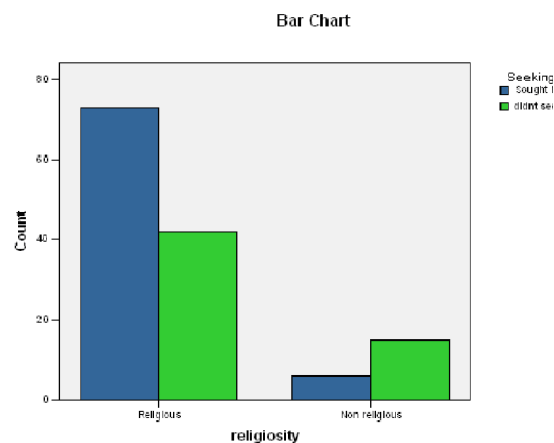


Figure1: relationship between religiosity and seeking help from faith healers

Conclusion:

A significant number of OCD patients in this study sought help from faith healers, and this was associated with religiosity. This finding should be noted by mental health professionals. Some have suggested that a constant suspicion exists between psychiatry and religion [14] and this may also be an issue for Iraqi mental health professionals. However, as suggested by Dein [15] it is not only faith healers who need to be educated about mental illness, but it is also vital that psychiatrists understand faith healing experiences. Further studies that include higher number of patients and that are more representative of the Iraqi population are suggested.

References:

1. Clarke, C. (2003) *Faith and hope: religion and spirituality*. *Australasian Psychiatry*, vol. 11, pp.164-168.
2. *Faith healing: The Catholic Encyclopedia, Volume XII*. Published 1911. New York: Robert Appleton Company.
3. World Health Organization (1998) *WHOQOL and Spirituality, Religiousness and Personal Beliefs*. WHO.
4. Rasmussen SA, Eisen JL, Pato MT (1993): *Current issues in pharmacological management of OCD*. *J Clin Psychol*. Vol.54(supp.6):4.
5. *The Holy Quran: Vol.30, Verse Alnas*.
6. Flamm, Bruce L. (Fall/Winter 2004-2005). *"Inherent Dangers of Faith Healing Studies"*. *Scientific Review of Alternative Medicine* 8 (2).
7. Pargament, K. (1997) *The Psychology of Religion and Coping: Theory, Research, Practice*. Guilford Press.
8. American Psychiatric Association (2000). *Diagnostic and statistical manual-fourth edition-text revised*. Washington, DC.
9. Okasha A and Karam E (1998): *Mental health services & research in the Arab World*. *Acta Psychiatrica Scandinavica* 1998; vol.98; pp.406-413.
10. Salim M.O., Salih B., Yousif S., Sabri S. (2009) *Help seeking behavior of patients attending the psychiatric service in a sample of United Arab Emirates population*. *International J. of Social Psychiatry*. Vol.55(2): 141-148.
11. Campion, J. & Bhugra, D. (1997) *Experiences of religious healing in psychiatric patients in south India*. *Social Psychiatry and Psychiatric Epidemiology*, vol. 32(4), pp.215-221.
12. Ahmed Okasha (2008). *The impact of Arab culture on psychiatric ethics*. *Arab J Psychiatry*. Vol 19, No.2, Page 81-99.
13. Littlewood R. & Dein S. (1995) *The effectiveness of words: religion and healing among the Lubavitch of Stamford Hill*. *Culture, Medicine and Psychiatry*, vol.1, pp.339-383

14. Bhugra, D. (1997) *Psychiatry and Religion: Context, Consensus and Controversies*. Routledge.
15. Dein S. (2007) *Psychiatry and faith-based organizations*. *B J Psychol*, vol.191, pp. 564.