ORIGINAL ARTICLE

Model of Recovery Approaches For Obsessive-Compulsive Disorder From The Quranic Verses

Rahim Kamarul Zaman¹, Alia Abdul Rashid², Nur Ilyani Mohamed Nawi³ and Mujiburrahman Muhammad Saleh⁴

³ Department of Mental Health & Psychiatry, Hospital Raja Perempuan Zainab II, 15200 Kota Bharu, Kelantan, Malaysia

⁴ Department of Islamic Revealed Knowledge, International Islamic University Malaysia, 53100, Selangor, Malaysia

ABSTRACT

Introduction: The implications of repetition of unwanted thoughts and activities are symptoms of mental health problems that can affect the activities of daily living for most individuals. Obsessive-Compulsive Disorder (OCD) is one of the five major types of anxiety disorders. Highlights on the OCD recovery mechanisms were found to be suitable to be integrated with the Quran-based rehabilitation methods. **Methods:** This study aims to analyse OCD recovery methods based on the interpretation of the Quranic verses. Based on qualitative methods, this study proposes a Model of recovery approaches for Obsessive-compulsive disorder from the Quranic verses. Thematic content analysis was conducted on the compilation of Quranic verses related to the term waswas based on the authoritative works of tafasir (Interpretation books of The Quran) and shuruh al-Ahadith (Books of hadiths explanations). **Results:** The findings showed that the discourse of five verses regarding the term waswas (doubts) in the Quran contains complementary solutions to the problem of OCD. The complementary solutions were also found in line with the guidelines of Act 775 - Traditional and Complementary Medicine Act 2016. **Conclusion:** The OCD recovery process based on the Quran deserves to be dignified as a model of complementary treatment of OCD problems. Malaysian Journal of Medicine and Health Sciences (2022) 18(19) 99-104. doi:10.47836/mjmhs.18.s19.16

Keywords: Model, Recovery, Obsessive-Compulsive Disorder, Quranic Verses

Corresponding Author:

Rahim Kamarul Zaman, M.A Email: abdulrahimkz51@gmail.com Tel:+6011-26017148

INTRODUCTION

Each type of mental health problem has a variety of different impacts. The implications of repetition of unwanted thoughts and activities are symptoms of mental health problems that can affect the activities of daily living. (1,2). This scenario is known as Obsessive-Compulsive Disorder (OCD). From a layman's context and understanding, this situation is known as anxiety disorder where individuals affected will experience the problem of doubt that causes them to repeat the same thoughts and behaviour repetitively (2).

Based on statistics, OCD affects about 1.2 percent of the world's population including children and adults, regardless of gender, social or cultural background (3). In Malaysia, OCD affects about 1 to 2 percent of the nation's population. The disease affects men as young as 6 to 15 years old. Meanwhile, women face the disorder in the age range of 20 to 29 years (4).

In general, OCD is divided into two main components, namely Obsessive (thought) and Compulsive (action) (5). Among the symptoms of the obsessive disorder include a lack of rationality when thinking, and repetition of ideas or images to invite anxiety. The individual who faces the situation realises the cause comes from his mind, yet he is unable to control it. Following the failure to control his mind, the individual will act (compulsively) to prevent or divert attention from the mind. Thus, compulsive order can be defined as an effort to alleviate obsessive thinking disorders (5,6). Overall, the negative effects caused by OCD have risks such as anxiety disorder and depressive disorder in the neurosis category.

The causes of OCD can be neurological, genetic, biological, cognitive, behavioural, and environmental

¹ Department of Usuluddin, Faculty of Contemporary Islamic Studies, Sultan Ismail Petra International Islamic University College, 15730 Kota Bharu, Kelantan, Malaysia.

² Department of Paediatrics, Hospital Raja Perempuan Zainab II, 15200 Kota Bharu, Kelantan, Malaysia

problems (6). In addition, among the main factors that cause OCD is a disorder of interaction in brain components associated with the formation of neurotransmitters, known as signal transmitters, from one neuron (brain cell) to another (3,5,6).

Typically, OCD is treated with medications such as Selective Serotonin Reuptake Inhibitors (SSRIs) and Clomipramine, a drug in the tricyclic antidepressants (TCA) category. Between the two, SSRIs have much less effect on the cardiovascular system (7,8). In certain cases, additional treatment with antipsychotics is also used as specified in OCD treatment guidelines (24). Despite showing effectiveness, the use of the treatment method also has various side effects. Among the side effects of TCA are dry mouth, trembling, palpitations, constipation, drowsiness, and weight gain. Meanwhile, SSRI methods that are better than TCAs also have side effects such as weight loss, nausea, vomiting, dyspepsia, diarrhoea, and loss of appetite. Accordingly, side effects of antipsychotic use such as extrapyramidal, increased appetite, weight gain, increased risk of diabetes, loss of white blood cells, drowsiness and low blood pressure (7, 8, 9, 24).

Among other things, OCD is also treated using psychotherapy or a combination of both. For that reason, this study is presented as an effort to strengthen the rehabilitation treatment of OCD problems per the guidelines of Act 775 - Traditional and Complementary Medicine Act 2016 (10,19). The Act states that the treatment approach using Islamic medicine methods, either based on the Quran or hadith, has been recognised as a suitable complementary treatment. This is because the discourse on OCD is contained in several verses of the Quran that describe the problem of anxiety. Thoroughly, highlights in the compilation of the verses display the revelation of Allah SWT contains OCD recovery mechanisms that are suitable to be applied by Muslim patients.

Essentially, any approach aimed at preventing, treating, or managing the disease or preserving the physical and mental well-being of an individual is permissible as a complementary mechanism to conventional rehabilitative treatment (10). The category of complementary treatments includes spiritual therapies that have originated in various cultural forms since ancient times (National Policy on Traditional and Complementary Medicine, 2001)

Finally, based on a nationwide survey conducted in 2004 on the use of Traditional and Complementary Medicine (TCM) by Malaysians, the prevalence of the population who had used TCM treatment in their lifetime was 69.4%. Meanwhile, 55.6% of the above population reported that they had used TCM treatment in the last 12 months before the survey. On top of that, more than 40% of the population in many countries use

TCM treatment for their healthcare needs globally.

MATERIALS AND METHODS

The design of this study is focused on a model of recovery approaches for OCD from the Quranic Verses. Specifically, only five verses regarding the term waswas (doubts) became the focus of this study. This study collected data entirely through a literature review based on qualitative methods. Data related to the recovery of OCD in the Quran were obtained through the interpretation of Quranic verses on OCD that has been discussed in the authoritative book of tafāsīr and shuruh al-Ahādīth. While the data related to OCD according to the perspective of conventional medicine is sourced from relevant scientific works. Subsequently, the collected data will be analyzed thematically, inductively, and deductively. For the purpose, in total seven interpretation books of the Quran and three Books of hadiths explanations were analysed through the Maktaba al-Shamela software. Meanwhile, only a few selected articles on OCD and complementary medicine have been comprehensively reviewed.

On the whole, this study presents a complementary method of OCD recovery based on the Quranic perspective. In practice, this study also lists some of the OCD rehabilitation guidelines that have been found in the compilation of Quranic verses that have been analyzed. Concisely, the study found that the integration of the OCD recovery process is significant with the maqāṣid al-Sharīʿah and can provide the benefits of OCD recovery holistically. In this context, protection of life and protection of health are two principles of the five objectives of Islam (25). Based on those two principles, Muslims are required to prevent any harm that affects mental health (25,26).

RESULT

OCD DISCOURSE IN THE QURAN

Accordingly, this study analyses the Quran-based complementary mechanisms for preventing and recovering OCD problems. In the Quran, the discourse related to OCD is based on the word *waswas* (doubts) that can be resulting in OCD, which is stated five times in four different chapters.

Conceptually, OCD can be defined as a disease of anxiety and doubt leading to compulsive acts (11). Obsessive disturbances in the mind are also described as the vibration of the sound of dry grain blown by the wind. In other words, when obsession occurs, the mind of the individual seems to vibrate without certainty (12). In the Islamic perspective, the ambiguity of the mind that occurs during obsession is often caused by the satanic incitement (13). Such ambiguity will result in individuals repeating their thoughts or actions. The fact that the word waswas in the Quran is the name of the devil that brings doubt to human beings (12,13).

In the Quran, the discourse related to OCD is based on the word waswas that can be resulting in OCD, which is stated five times in four different chapters. The index is shown in Table I.

Table I. Index of The Word Waswas in the Quran

Index of The Word Waswas in the Quran			
No.	Surah: Verse No.	Verse	Theme
1	Qaf: 16	وَلَقَدْ خَلَقْنَا الإِنْسَانَ وَنَعْلَمُ مَا تُوَسْوِسُ بِهِ نَفْسُهُ وَنَحْنُ أَقْرَبُ إِلَيْهِ مِنْ حَبْلِ الْوَرِيدِ Indeed, 'it is' We 'Who' created humankind and 'fully' know what their souls whisper to them, and We are closer to them than 'their' jug- ular vein.	Allah SWT knows the whispers of the hu- man heart better
2	al-'Araf: 20	فَوَسُوَسَ لَهُمَا الشَّيْطَانُ لِيُبْدِيَ لَهُمَا مَا وُورِيَ عَنْهُمَا مِنْ سَوْ آتِهِمَا وَقَالَ مَا نَهَاكُمَا رَبُّكُمَا عَنْ هَذِهِ الشَّجَرَةِ إِلا أَنْ تَكُونَا مَلَكَيْنِ أَوْ تَكُونَا مِنَ الْخَالِدِينَ	
		Then Satan tempted them in order to expose what was hidden of their nakedness. He said, "Your Lord has forbidden this tree to you only to prevent you from becoming angels or immortals."	Satanic incitement / whispers that confuse people
3	Taha: 120	فَوَسُوَسَ إِلَيْهِ الشَّيْطَانُ قَالَ يَا آدَمُ هَلْ ٱدُلُّكَ عَلَى شَجَرَةِ الْخُلْدِ وَمُلْكٍ لا يَبْلَى	
		But Satan whispered to him, saying, "O Adam! Shall I show you the Tree of Immortality and a kingdom that does not fade away?"	
4	al-Nas: 4	مِنْ شَرَرَ الْوَسُوَ اسِ الْخَنَّاسِ from the evil of the lurking whisper- er	Instigator / Cause of suspicion
5	al-Nas: 5	الَّذِي يُوَسْوِسُ فِي صُنُورِ النَّاسِ who whispers into the hearts of hu- mankind	whether jinn or human

Source: Researcher Analysis

Based on Table I, the discourse on the word waswas in the Quran comes with three themes. Firstly, Allah SWT knows better the whispers of the human heart (Qāf: 16). Secondly, satanic incitement or whisperings confuse human thoughts and actions (al-'Arāf: 20 & Țāha: 120). Thirdly, the incitement of waswas can be caused by humans or jinn (al-Nās:4-5). Inclusively, the Quran describes the cause of the problem of *waswas* as the whispers or incitement of the devil that disrupts the stability of human thoughts and actions (14). However, any form of interference can be controlled with the protection of Allah SWT (14).

In explaining the meaning of surah al-Nās verses 4 and 5, Ibn Kathīr states the fact that the instigation of the cause of misgivings among human beings is the devil known as the qarīn (companion) of the children of Adam (14). Its presence brings whispers that adorn acts of immorality and casts doubt on matters of goodness (14,15). The devil will incite Muslims who act in obedience or try to remember Allah SWT. The incitement will destroy the act of *dhikr Allah* so that it causes *waswas* (16). Therefore, surah al-Nās was revealed as a method of seeking protection ordered by Allah SWT to prevent the problem of *waswas* (15).

Meanwhile, nas al-'Arāf: 20 displays the problem of waswas faced by human beings is due to the envy of the devil towards human beings. Thus, feelings of obsession result from the whispers and deception of Satan's plans. The same thing is also explained in nas Ṭāha: 120 (14,15,16).

Referring to surah Qāf: 16, al-Qurțubī states that the meaning of the verse describes the obsessive feeling faced by the Prophet Ādam AS to eat the fruit of khuld which is forbidden by Allah SWT (15). Thus, nas Qāf: 16 describes all forms of whispers in the human heart whether good or bad under the knowledge and power of Allah SWT (lines 14,15,16). This matter was also narrated by al-Bukhārī from Abū Hurayrah RA, The Prophet SAW said: "Verily Allah forgives my people for what passes through him as long as he does not do it or talk about it" (al-Bukhari, No. Hadith: 5269).

According to Al-'Ayni (17), this hadith explains that Allah SWT does not count or even forgive every act that stems from the problem of obsession. In conclusion, the interpretation of the compilation of the above verses proves that the problem of waswas faced by human beings is forgivable and can be recovered with the forgiveness and mercy of Allah SWT.

DISCUSSION

According to the findings, the Quranic method of dealing with a problem is often focusing on preventing the cause. In this context, unresolved doubts are often the main cause of OCD. Based on the compilation of the five verses of the Quran, the study found that five suitable complementary methods can be used to treat OCD problems. Consistent with the compilation of understandings of obsessive-compulsive disorder in the Quran, the problem of OCD is believed to be preventable and treatable holistically through a complementary approach. Furthermore, the complementary solution was also found in line with the guidelines of Act 775 - Traditional and Complementary Medicine Act 2016. Ultimately, the OCD recovery process based on the

interpretation of waswas concepts in the Quran should be recognized as part of the complementary treatment model for OCD problems.

RECOVERY APPROACHES FOR OCD BASED ON QURANIC VERSES

In Islam, there is a difference between waswas that comes to the heart and does not affect faith with doubts that can damage faith. Based on surah al-'Araf: 16-17 and al-Nisa': 76, the devil tends to deceive believers with whispers of confusion. Thus, the prevention of obsessive problems based on the Quranic method is a significant approach. To treat this problem there are several methods revealed by Allah SWT in the Quran such as the five suitable complementary methods based on the Quranic verses.

The first step, in general, is that every Muslim is required to recite al-ta'awwudh (Invocation from Allah SWT) as stated in surah al-Naḥl: 98. This verse explains the requirement to recite al-ta'awwudh every time before performing the religious duties or when there is *waswas* (18). Moreover, Al-Qurṭubī states that the revelation of surah al-Nās is a method of al-ta'awwudh from the suspicions of satan and human evil (14,15).

The importance of al-ta^cawwudh also aims to prevent satanic obsessive interference about the essence and nature of Allah SWT as the hadith narrated by al-Bukhārī from Abū Hurayrah RA. The Prophet SAW said; "Satan will come to you, and say: Who created this ?, and this?", Until he said: "Who created your Lord?", If it comes to him (the suspicion) then he should do isti`āzah (Invocation from Allah) and stop (from thinking about it)". (No. Hadith: 3276).

The second step is to multiply the dhikr of Allah (remembrance of Allah) which is the basis of calming the human soul as stated in surah al-Ra'd:28 (14,15). The meaning of dhikr of Allah also includes the practice of repentance (16). Additionally, the dhikr of Allah that calms the soul is the recitation of the Quran as stated in surah al-Anfāl:2 (13). Furthermore, the practice of *dhikr Allah* at all times is like a fortress that can prevent the interference of the devil and human evil. Only believers who practice monotheism Allah SWT, practice zikrullah, recite the Qur'an and always be grateful for the blessings of Allah SWT would be blessed with peace of mind (13,14,15,18).

The third step is to increase the recitation of the Quran by the believers, mainly surah al-Baqarah (14). Among the main advantages of surah al-Baqarah is as found in the hadith narrated by Muslim from Abū Hurayrah RA, Rasulullah SAW said; "Do not make your house like a grave. Indeed, the devil ran away from the house in which surah al-Baqarah was recited". (Muslim, No. Hadith: 780). Accordingly, the act of reciting verses of the Qur'an when the soul is restless can produce peace of mind (21). In addition, among the appropriate verses of the Qur'an for dealing with obsessive problems are al-Baqarah 2: 248, al-Tawbah 9:26, 40 and 103 and al-Fath 48: 4, 18 and 26. The verses focused on the theme of peace of mind and the prevention of anxiety and fear disorders (22).

The fourth step focuses on the need for a Muslim to cleanse his residence from all the sins that will invite the devil and avoid the angels from entering (14). The same procedure also needs to be applied for every other place that the individual goes through his daily activities. This is in line with the approach required by Allah for all His believers. Inter alia, the combination of tawhid, values of faith, deeds of worship, prevention of immorality and purification of the soul can deal with obsessive problems and psychological disorders (14,22).

The final step is based on the interpretation of the compilation of verses on *waswas*, every believer is allowed to seek ruqyah al-Shar'iyyah (healing method based on the Quran and Hadith) treatment sourced from the Quran and Hadith either through the recitation of Quranic verses, dhikr or prayers aimed at treating diseases or problems related to psychology (19). However, its implementation should be carried out by scientists who are experienced in the field (23). In addition, the necessity of trying to use rugyah al-Shar'iyyah must be accompanied by the belief that the real healer is only Allah SWT (20). In this regard, the Division of Traditional and Complementary Medicine, Ministry of Health Malaysia also lists the practice of Islamic medicine such as ruqyah al-Shar'iyyah as a complementary method that is suitable to be applied in maintaining psychological sustainability (19,22).

Taken as a whole, the combination of the OCD recovery process based on the Quranic method can be understood as shown in Figure 1.

Figure 1. explains the combination of conventional and complementary treatments based on the Quran is believed to provide more effective recovery benefits to OCD patients.

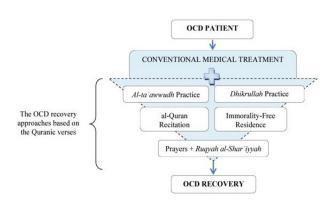


Figure 1. Combination of OCD Recovery Approaches Based on Quranic Verses

CONCLUSION

The diversity of non-clinical support methods in the OCD recovery process displays the ingenuousness of the development of mental health problem rehabilitation programs nowadays. Research on the revelation of the Quran displays various therapeutic verses that provide peace of mind to human beings.

The integration of the compilation of Quranic verses in the context of OCD recovery was found to be able to produce a more optimal effect. Through this integration, the recovery process of OCD patients will take place holistically in parallel with the maqāṣid al-Sharīʿah. In consequence, this paper is presented as an effort to strengthen OCD rehabilitation treatment following the guidelines of Act 775-Traditional and Complementary Medicine Act 2016. As a result, the OCD rehabilitation process based on the Quran deserves to be recognised as a complementary treatment model for OCD.

REFERENCES

- 1. Abramowitz, J. S., & Reuman, L. Obsessive compulsive disorder. Encyclopedia of personality and individual differences. 2020. 3304-3306.
- Reed GM, First MB, Kogan CS, Hyman SE, Gureje O, Gaebel W, Maj M, Stein DJ, Maercker A, Tyrer P, Claudino A. Innovations and changes in the ICD-11 classification of mental, behavioural and neurodevelopmental disorders. World Psychiatry. 2019 Feb;18(1):3-19. doi: 10.1002/wps.20611.
- 3. Olatunji BO, Davis ML, Powers MB, Smits JA. Cognitive-behavioural therapy for obsessivecompulsive disorder: A meta-analysis of treatment outcome and moderators. Journal of psychiatric research. 2013 Jan 1;47(1):33-41. doi: 10.1016/j. jpsychires.2012.08.020
- 4. Din NC, Nawi LM, Ghazali SE et al. Preliminary analysis of the factor structure, reliability and validity of an obsessive-compulsive disorder screening tool for use with adults in Malaysia. International journal of environmental research and public health. 2019 Jan;16(23):4763. https:// doi.org/10.3390/ijerph16234763.
- McKay D, Sookman D, Neziroglu F, Wilhelm S, Stein DJ, Kyrios M, Matthews K, Veale D. Efficacy of cognitive-behavioral therapy for obsessive– compulsive disorder. Psychiatry research. 2015 Feb 28;225(3):236-46. doi: 10.1016/j. psychres.2014.11.058
- 6. Spinhoven P, Drost J, van Hemert B, Penninx BW. Common rather than unique aspects of repetitive negative thinking are related to depressive and anxiety disorders and symptoms. Journal of Anxiety Disorders. 2015 Jun 1;33:45-52. doi: 10.1016/j. janxdis.2015.05.001.
- 7. Varigonda AL, Jakubovski E, Bloch MH. Systematic

review and meta-analysis: early treatment responses of selective serotonin reuptake inhibitors and clomipramine in pediatric obsessive-compulsive disorder. Journal of the American Academy of Child & Adolescent Psychiatry. 2016 Oct 1;55(10):851-9. doi: 10.1016/j.jaac.2016.07.768.

- 8. Bandelow B, Sher L, Bunevicius R, Hollander E, Kasper S, Zohar J, Muller HJ, WFSBP Task Force on Mental Disorders in Primary Care, WFSBP Task Force on Anxiety Disorders, OCD and PTSD. Guidelines for the pharmacological treatment of anxiety disorders, obsessive–compulsive disorder and posttraumatic stress disorder in primary care. International journal of psychiatry in clinical practice. 2012 Jun 1;16(2):77-84. doi: 10.3109/13651501.2012.667114.
- Reid AM, McNamara JP, Murphy TK, Guzick AG, Storch EA, Geffken GR, Bussing R. Side-effects of SSRIs disrupt multimodal treatment for pediatric OCD in a randomized-controlled trial. Journal of Psychiatric Research. 2015 Dec 1;71:140-7. doi: 10.1016/j.jpsychires.2015.10.006.
- 10. Akta 775. Akta Perubatan Tradisional Dan Komplementari 2016. Kuala Lumpur: Percetakan Nasional Malaysia Berhad; 2016.
- 11. Lazarov A, Cohen T, Liberman N, Dar R. Can doubt attenuate access to internal states? Implications for obsessive-compulsive disorder. Journal of Behavior Therapy and Experimental Psychiatry. 2015 Dec 1;49:150-6. doi: 10.1016/j.jbtep.2014.11.003.
- 12. Al-Tha'labi Al. Tafsir al-Tha'labi al-Kashf wa al-Bayan 'An Tafsir al-Quran, Salah Ba'uthman (eds). 2015. Jeddah: Dar al-Tafsir.
- Al-Razi FD. Mafatih al-Ghayb (al-Tafsīr al-Kabir).
 1999. Beirut: Dar Ihya` al-Turath al-'Arabi.
- 14. Ibn Kathir IU. Tafsir al-Quran al-'Azim. al-Din MHS. (ed). 1999. Beirut: Dār al-Kutub al-'Ilmiyyah.
- 15. Al-Qurtubi SD. al-Jami' Li Ahkam al-Quran. al-Barduni A & Atfish I. (eds). 1964. Kaherah: Dar al-Kutub al-Masriyyah.
- 16. Al-Tabari MJ. Jami' al-Bayan fī Ta'wil al-Quran. Shakir AM. (ed). 2000. Beirut: Muassasah al-Risalah.
- 17. Al-'Ayni BD. 'Umdah al-Qari Sharh Sahih al-Bukhari. n. d. Beirut: Dar Ihya' al-Turath al-'Arabi.
- 18. Al-Zahrani MH. al-Nazarat al-Mati'ah fī Surah al-Fatihah. 2005. Madinah: Jami'ah al-Islamiyah bi al-Madinah.
- 19. Ahmad K, Ramli MA & Rahman NAA. Understanding the Use of Ruqyah (Healing Method Based on The Quran and Hadith) in the Treatment of Disease: Analysis based on Fiqh al-Hadith Al-Imam Al-Bukhari. 2016. Al-Bayan: Journal of Qur'an and Hadith Studies, 14(2), 168-205. doi: https://doi.org/10.1163/22321969-12340038.
- 20. Kasimin A. Darussyifa'. 1991. Kuala Lumpur: Percetakan Watan Sdn. Bhd.
- 21. Al-'Utaybi AM. Nitāj al-Fikr Fī Aḥkām al-Dhikr. 2014.Riyadh: Dar al-Tadmuriyyah.

- 22. Rahim KZ & Nordin MKNC. Interpretation of qur'anic tasliyah verses: A study of alternative psychotherapy treatment for neurosis'. 2019. Global Journal Al-Thaqafah, 9(2), 93.
- 23. Din H. Pengantar Pengubatan Islam. 2011. Bandar Baru Bangi: Persatuan Kebajikan dan Pengubatan Islam Malaysia & Koperasi Darussyifa' Berhad.
- 24. Kaar SJ, Natesan S, Mccutcheon R, Howes OD. Antipsychotics: mechanisms underlying clinical response and side-effects and novel

treatment approaches based on pathophysiology. Neuropharmacology. 2020 Aug 1;172:107704. doi: 10.1016/j.neuropharm.2019.

- 25. Al-Shāțibī, IS. Al-Muwafaqat. Hasan AU (ed) 2000. n. p. Dar Ibn 'Affan.
- 26. Al-Qazwīnī AK. Fatḥ al-ʿAzīz bi Sharḥ al-Wajīz al-Sharḥ al-Kabīr. Ali Muawwad & al-Mawjud AA (eds). 1997. Beirut: Dar al-Kutub al-Ilmiyyah.