Public health: An Islamic perspective

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Abstract: This article discusses the relevance of Islamic teachings and principles to the subject of public health. Far from the mistaken notion that Islam is a great impediment to science and human progress, the author argues that the ideas and worldview promoted by Islam – through the two main sources – are scientifically sound and compatible with the foundations of public health. Few topics of contemporary public health discourse are selected and elaborated from an Islamic perspective.

Keywords: Religion and health, Islam and science, public health, Islamic perspective, social justice and health.

Introduction

Prince Charles of the British royal family delivered a speech at the Oxford Centre of Islamic Studies in 1993 and highlighted the integrative aspect of Islam as follows:

> If there is much understanding in the west about Islam, there is also ignorance about the debt our own culture and civilization owe to the Islamic world. It is a failure which stems, I think, from the straightjacket of history we have inherited […]. But because we have tended to see Islam as the enemy of the west, as an alien culture, society and system of belief, we have tended to ignore or erase its great relevance to our society.

> Islam nurtured and preserved the quest for knowledge. In the words of the tradition, 'the ink of the scholar is more sacred than the blood of the martyr.' Cordoba in the 10th century was by far the most civilised city of Europe […]. Many of the traits on which modern Europe prides itself came to it from Muslim Spain. Diplomacy, free trade, open borders, techniques of academic research, anthropology, etiquette, fashion, alternative medicine, hospitals, all came from this great city of cities.

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At the heart of Islam is its preservation of an integral view of the universe. Islam refuses to separate man and nature, religion and science, mind and matter, and has preserved a metaphysical and unified view of ourselves and the world around us […]. But the west gradually lost this integrated vision of the world with Copernicus and Descartes and the coming of the scientific revolution. A comprehensive philosophy is no longer part of our everyday beliefs (quoted in De Leeuw & Hussein, 1999).

The integrative perspective of Islam as highlighted in this speech will serve as the framework of this article and a starting point to discuss the relevance of the Islamic creed to the discipline of public health.

Islam and the foundation of public health – where the two meet

The essence of public health – health, community and science (know-how) – is among the precious elements nurtured and preserved by Islam. The Islamic worldview as reflected mainly in the Qur'ān followed by Prophetic traditions puts man at the centre of creation. His heart and conscience is the main driver of all his efforts and the channel through which he is able to discriminate right from wrong; his mind (intellect) is the tool that enables him to acquire knowledge and skills in his mission to achieve a higher purpose; and his physical body is a means to execute this function. Health, therefore, is regarded as a sacred entity meant to be protected and safeguarded, for the disruption of health constitutes a barrier for man to perform his duties and responsibilities.

To Muslims, Islam is a system of belief, a way of life and a set of guidelines prescribed for humans to achieve success and salvation in this world and the afterlife. This "path" to success requires that humans behave responsibly, restrain from self-destructive activities, and establish justice and order on earth – a condition that will enable them to realize their ultimate potentials and achieve self-realization so that they can know God. Thus, 'health preservation' has been laid out as one of the five *maqāṣid sharī'ah,* the higher purposes of the Islamic law. Without sound physical and mental health, humans would be distracted and limited in their capabilities in doing good and serving others, thus defeating the purpose of creation.

The second essence, community, lies at the core of Islamic teachings as the nucleus of human interaction where social support, mutual cooperation and trust

are built for the common good. Four out of five pillars of Islam – obligatory daily prayers (ṣalah), fasting in Ramadan (ṣawm), almsgiving (zakāh), and pilgrimage (ḥajj) – have a higher goal of fostering brotherhood and strengthening human relations and the spirit of collectivism. While salah may be seen as merely a ritual to connect the individual to God, the Prophetic traditions demonstrated a more sophisticated idea, that ṣalah nurtures social engagement and unity through the establishment of mosques as centres of regular congregational prayers and other important activities. Similarly, ṣaum has a number of objectives, among which is to instil sympathy and compassion for the less fortunate so that humans understand the importance of sharing and relieving others' sufferings. Obligatory charity or almsgiving, zakāh, is an extension of fasting where Muslims give a small proportion of their wealth to the poor. Other than a sign of solidarity with those of less socio-economic advantage, the systematic collection and distribution of zakāh is a tool for poverty alleviation (Abdulai & Shamshiry, 2014; Raimi, Patel & Adelopo, 2014). The fifth pillar of the Islamic faith, hajj, is a symbol of global brotherhood as it gathers humans from all parts of the world to testify their faith in one God.

The third essence of public health, science or knowledge, represents a set of systematic skills, expertise and know-how in dealing with health issues, aiming at disease prevention, health protection and health promotion at the community level. The role of Islam in this can be categorized into a) providing the foundation upon which knowledge and the culture of seeking knowledge can flourish, and b) setting guidelines and some basic rules pertaining to health in line with the Qur'an and Prophetic traditions. The ground established to enable knowledge and the culture of knowledge to thrive can be traced back to the very first verse revealed (Qur'ān, 96: 1) which read Iqra', literally translated as "Read". Various Islamic scholars have unanimously agreed that this first divine order to mankind to "read" indicates the importance of literacy – the ability to read and write – as the most basic task/process of seeking knowledge. What is more interesting is the context in which the revelation occurred, that is pre-Islamic Arabia, was known for widespread illiteracy (Inayatullah, 2013) and continuous tribal wars (Meeker, 1979). Conveying a message on the importance of literacy and seeking knowledge in the midst of widespread illiteracy and indifference towards learning was revolutionary in the context of seventh-century Arabia. The verse was challenging the Arabs of that time to defy the norms and to break old traditions and systems and initiate changes.

Following the injunction to read, the Qur'ān further ordered men to think (Qur'ān, 3: 191), understand (Qur'ān, 7: 179), reflect (Qur'ān, 30: 8), contemplate (al-Qur'an, 4: 82; 38: 29), and "challenge old habits and traditions" (Qur'ān, 2: 170) if they are found to be of no benefit. These calls were meant to invigorate the human soul and remind humans that they are created for a purpose, and that intellect is a gift unique to them as it distinguishes them from other creations. To further reinforce human intellect, the Qur'an reiterates few times that there is something called *sunnat-Allah* or the "laws of God", and that these laws do not change (Qur'ān, 48: 23; 33: 62; 35: 43). Various interpretations exist in reference to this, but there has been more or less a general consensus in defining these "laws" as "science" or "a set of scientific formulas" which are universal and are not subject to change. Humans' duty thus is to study these rules and principles and find ways to apply them in order to solve problems in daily lives.

The second role Islam plays with regard to public health– setting guidelines and basic rules – is manifest in a number of Qur'ānic themes and Prophetic traditions. Various themes as proposed and endorsed by the Qur'ān are relevant to health and men's well-being. These include:

1) The obligation to be persistent in upholding justice regardless of personal interests (Qur'ān, 4: 135). Though justice is a comprehensive concept, its application and implementation in political and economic organizations determine the extent to which human welfare and quality of life can be guaranteed. A growing body of literature has equated public health with social justice – evidence of how justice is a central element without which health equity cannot be achieved (Lawrence Gostin, 2006). Social justice, in fact, has been regarded as one of the pillars of public health (Ursano, Fullerton & Terhakopian, 2008).

2) Islam lays an overarching emphasis on the protection of, and kindness towards, vulnerable groups such as orphans (Qur'ān, 2: 23; 2: 230), widows (al-Qur'an, 4:19), the elderly (Qur'ān, 17: 23-24), travellers (Qur'ān, 2: 177), those held captives (Qur'ān, 2: 177) and refugees (Qur'ān, 8: 72, 8: 74). This points to how Islam acknowledges the less fortunate who are often termed as 'vulnerable groups' by contemporary syllabus and need higher degrees of care due to their greater likelihood of becoming ill and exploited. Numerous study findings support the relationship between being vulnerable (socially disadvantaged) and having

poorer health (Braveman & Gottlieb, 2014; Mani, Mullainathan, Shafir & Zhao, 2013).

3) The explicit prohibition of alcohol and elements destructive to health (Qur'ān, 5: 90-91).

4) The instruction to consume what is *halal* (permissible) and pure (nutritious) (Qur'ān, 2: 168; 2: 172).

5) The discouragement of eating and drinking excessively (Qur'ān, 7: 31) – another way of describing poor dietary habit which is one of the main contributing factors to non-communicable diseases (WHO, 2003).

6) The importance of health protection, even while performing rituals and acts of worship (Qur'ān, 2: 185; 2: 196). Many Qur'anic verses forbid the sick from performing *saum* (fasting), Hajj (pilgrimage) and salah (prayer) in the normal manner if their health can be deemed at risk, suggesting that health cannot be compromised even when it comes to the question of performing mandatory religious practices.

7) The directive to remain physically pure (clean) on a regular basis (Qur'ān, 9: 108; 2: 222; 74: 4) points to the stress Islam lays on personal hygiene. Additionally, the Qur'an clearly describes the steps of wudu– ablution or a way of washing or cleaning oneself prior to performing salah – (Qur'ān, 5: 6) and this shows how important physical cleanliness is in Islam.

The realm of hadith (Prophetic traditions) is similarly not disconnected from individual and community health. Hygiene, the most basic element in health was mentioned in a famous hadith where the Prophet is reported to have said, 'Cleanliness is part of faith (in God)' (Muslim). The Qur'an further reinforces this by stating "Indeed, God loves those who repeatedly purify (or clean) themselves" (Qur'ān, 9: 108). The Prophet's words and traditions have been reported by various authentic sources to encompass the following:

1) The importance of basic personal hygiene and purity as being part of faith (Maghen, 2004).

2) Prohibition of contaminating sources of water on which people may rely, or polluting rest areas with possible sources of infection (Islam, 2004).

3) Oral hygiene which includes cleaning the teeth regularly (Bos, 1993).

4) A healthy diet and eating moderately (Selian & Abd Hamid, 2013).

5) Maintaining sound judgment and rationality through the avoidance of alcohol and intoxicants (Mustafa, 2013).

6) Quarantine as a measure of infectious disease prevention (Rahman, 2007).

7) Illnesses as a natural event in human life, and the need for a positive outlook when facing calamities (Koenig & Al Shohaib, 2014).

8) Visiting the sick as a highly regarded act (Koenig & Al Shohaib, 2014; Sheikh, 1998). This can be interpreted as giving social support to the sick, which is in line with existing findings in scientific literature corroborating the link between social support and positive health outcome (Kruithof, van Mierlo, Visser-Meily, van Heugten, & Post, 2013; Melchiorre *et al.,* 2013; Park *et al.,* 2013).

Contemporary public health discourse

Current heated debates in the public health arena revolve around issues like war and social unrest, family violence, non-communicable diseases, socio-economic disparities, climate change, antibiotic resistance, tobacco, mental health, and evidence-based public health practice. Few selected topics are discussed here from an Islamic standpoint.

Health and socio-economic inequities

In an article titled "Income Inequality and Health: A Causal Review", Pickett and Wilkinson (2015) reiterate income inequality as a major factor negatively influencing health and well-being (Pickett & Wilkinson, 2015). Health inequalities have been defined as the "unjust differences in health between groups of people occupying different positions in society", and structural causes were reported to best explain this phenomenon (Mc Cartney, Collins & Mackenzie, 2013). In contemporary public health discourse, the subject of wealth and social class disparities is gaining currency as it forms a huge barrier to health equity which is one of the ultimate goals of public health.

The Qur'ānic theme which emphasizes egalitarianism is, perhaps, relevant to the current state of affairs. Verse 59: 7 of the Qur'an unambiguously denounces the concentration of wealth in the hands of the rich, while verse 4:1 highlights equality and the eradication of discrimination as the essence of global

brotherhood. The concept of equity and fair distribution of wealth among members of society is further reinforced through: 1) zakat, the fourth pillar of Islam, which obligates every capable Muslim to pay alms to people of lower socio-economic status deemed as deserving (Kabir, 2010); 2) waqf, a form of voluntary charitable endowment often used for funding sustainable community and social development programmes, and; 3) the prohibition of usury (Qur'ān, 2: 279) which paves the way for injustices and financial exploitation of the poor. Addressing issues of poverty and income inequality is vital, as proliferating evidence has shown that tackling socio-economic disparities is vital to achieving health equity (Marmot & Health, 2007).

Climate change

The subjects of climate change and public health are now intertwined, for it is no longer possible to discuss climate change without debating its massive health consequences. Since the early 1960s, scientists have warned about climate change, an impending catastrophe resulting from excessive emission of greenhouse gases and subsequent global warming which could threaten the very existence of humankind (Taylor, 2013). A growing body of evidence shows that this phenomenon is human-made or what is termed as 'anthropogenic' (Willett & Twiss, 2015). Health has been a major concern with regard to climate change, as all the impacts of global warming – the rising of sea level, increase in global temperature, a decline in the food supply, land erosion, contamination of fresh water supply, more frequent natural disasters, potential spread of diseases, etc – have negative consequences on people's health, directly or indirectly.

In the Qur'an, human beings have largely been held responsible for the reckless exploitation of, and damage caused to, the earth:

> Corruption (damage) has appeared throughout the land and sea by what the hands of people have earned so He may let them taste part of [the consequence of] what they have done that perhaps they will return (Qur'ān, 30: 41).

The verse, however, while reprimanding men for their blunder, simultaneously reminds that they can always "return" to good sense and to God's mercy. The term "return" here could be interpreted as realizing their mistakes and rectifying them. As such, the Qur'ānic approach in addressing this environmental crisis is rather balanced. Despite holding men accountable for their carelessness and greed, it provides room for correction and improvement. This may suggest that men have

the capacity to mitigate and fix the crises they have caused if they are determined and willing to control their greed and personal interests.

Additionally, men are continuously called upon to engage in nature and contemplate (Qur'ān, 3: 190; 16: 65). Numerous verses in the Qur'ān highlight the importance and role of nature without which men cannot survive, thus implying the latter's responsibility to protect and nurture the former. These include: one, mountains as stabilizers of the earth crust (Qur'ān, 78: 6-7; 16: 15); two, seas as sources of food and ornaments (Qur'ān, 16: 14); three, honey as a potential therapeutic tool for diseases (Qur'ān, 16: 69) and; four, the sky (atmosphere) as a form of protection for humans (Qur'ān, 21: 32; 40: 64). Similarly, the Qur'ān warns against causing damage to, and chaos on, the earth (Qur'ān, 7: 85), as God dislikes those who commit mischief and corruption (Qur'ān, 28: 77).

All in all, the Islamic perspective on the issue of climate change or environmental crisis – a highly relevant subject to public health – serves two purposes. First, it admonishes humans for having committed huge damage to, and chaos on earth out of greed, short-sightedness and recklessness. Second, it motivates them to rethink and repent, thus encouraging men to rectify their mistakes by fixing the current crises as much as possible.

Mental health

According to the World Health Organization (WHO), mental disorders will be the most significant health problems worldwide by 2020. One in four people are predicted to experience mental disorder(s) at some point in their lives and currently there are 450 million people suffering from such conditions (WHO, 2001). Some of the commonly occurring disorders include depression and anxiety (Baxter, Scott, Vos & Whiteford, 2013; Kessler & Bromet, 2013), which are said to be caused by a combination of factors: genetics, neurochemical imbalances, history of trauma (difficult life events) and psychosocial environment (Saxena, Rathore, & Bharti, 2015). Modern life associated with substance abuse, less sleep, time pressure, more competition, social isolation and less engagement with the family unit similarly have been reported to predispose individuals to mental disorders (Sarris, O'Neil, Coulson, Schweitzer & Berk, 2014).

Religion and spirituality, on the other hand, contribute positively to physical and mental health (Sodhi, 2014). Religious attendance and social engagement have been demonstrated to protect against depression and suicide in a number of

studies (Balbuena, Baetz & Bowen, 2013; Barton, Miller, Wickramaratne, Gameroff & Weissman, 2013; Vander Weele, Li, Tsai & Kawachi, 2016). Islam addresses mental health concerns from multiple perspectives and at different levels. At its core, the Qur'an scrutinizes man's physical and spiritual makeup (Qur'ān, 76:1-3), describing in detail his strength and weaknesses (Qur'ān, 50: 16; 6: 2; 4: 28; 17: 83; 42: 48), and answers 'the big questions' (Qur'ān, 51: 56; 2: 30; 2: 156; 23: 115). This is to give man peace of mind and a greater sense of meaning in life, so that he remains positive and motivated.

At the individual level, Islam promotes healthy lifestyles and moderation, prohibits self-destructive habits (including substance misuse), prevents excessiveness and extravagance (Qur'ān, 17: 26-29), emphasizes God's love and forgiveness (Qur'ān, 39: 53), and instils optimism and resilience in facing life difficulties (Qur'ān, 8: 46). At the community level, it upholds the sanctity of marriage and family life (Qur'ān, 24: 32; 39: 21; 4: 21), promotes mutual cooperation and trust, and denounces enmity, conflicts and division (Qur'ān, 3: 103) (Bukhari: 5178). Faith, the most basic Islamic tenet, is the source from which one draws strength in facing life adversities and striving for success. The Qur'ān tells believers to "have faith" and "put their trust in God" when difficulties occur (Qur'ān, 3: 160), and that with every calamity comes relief (al-Qur'an, 94: 6). Having faith is a greater power in times of distress which has the effect of "activating neurological pathways for self-healing", while the daily rituals of praying and remembrance of God yield the relaxation response (Syed, 2003).

The common perception that Islam views all mental illnesses as being related to demons and evil spirits has not been based on solid facts and evidence. On the contrary, the Europeans during the medieval period viewed mental disorders as demon- and witchcraft-related whereas Muslim scholars at that time, including Ibn Sina (Avicenna), rejected such notions and suggested that mental health problems had a physiological origin (Haque, 2004). Among the earliest systematic provisions of psychiatric care documented in history was the hospital in Cairo built in 872 by Ahmad IbnTulun which provided care for the insane using different modalities including music therapy (Koenig, 2009). Also, Imam al-Razi (Rhazes) was reported to have established the first psychiatric ward in human history in the city of Baghdad, employing psychotherapy and drugs to treat his patients (Sabry & Vohra, 2013).

Evidence-based practice

The formal discourse on the nature and scope of evidence-based public health (EBPH) practice originated in the late 1990s (Brownson, Fielding & Maylahn, 2009). Evidence-based medicine (EBM), a more established and widely known term, generally refers to clinical treatments involving pharmaceuticals though it may have some exceptions. EBPH, on the other hand, represents public health programs aimed at health protection, disease prevention and health promotion at the population level using the best available evidence. Despite the differences between EBPH and EBM (Brownson *et al.,* 2009), the basic tenet is similar – both incorporate the practice of using the best current evidence available in the scientific literature to guide their decisions.

The contributions of Islam in the arena of evidence-based practice are multi-dimensional. First, the Qur'ān worldview as demonstrated by a number of verses supports the concept of using "evidence" or "proof" in verifying or authenticating an idea or argument (Qur'ān, 27: 64; 2: 111). The word "burhan" used in these two verses in respect of God's challenge to those who are bent on denying the truth has been translated as "the firmest, strongest, or most valid piece of evidence" by the Edward Lane's *Arabic-English Lexicon* (Lane, 1865). Other terms used by the Qur'an while describing itself as the ultimate truth include 'huda' (a clear guidance) (Qur'ān, 2: 2), 'fussilat' (detailed explanation) (Qur'ān, 41: 3; 11: 1), 'mizaan' (the ultimate scale or weighing instrument) (Qur'ān, 42: 17), 'furqaan' (discernment between truth and falsehood) (al-Qur'an, 25: 1) and 'bayyinah' (clear proof) (Qur'ān, 6: 157).

These linguistic expressions collectively carry themes of clarity and precision, rationality and logic, judgment and reasoning, and transparency and unambiguousness. In other words, one of the predominant Qur'ānic messages is to train the human mind to think in a critical manner, question and challenge ambiguities, and reason and judge soundly. Such skills are the fundamental elements in scientific thinking and learning. Moreover, the Qur'ān criticizes those who base their decisions merely on 'assumptions', do not make proper investigations and do not seek knowledge (Qur'ān, 53: 23, 28).

From the historical perspective, Islam has similarly made significant contributions to the emergence of an evidence-based approach in medicine and health sciences. The eleventh-century Muslim physician and philosopher IbnSina

(Avicenna) is said to have "formulated an approach to EBM that broadly resembles modern-day principles and practice" (Shoja *et al.,* 2011). Conversely, Vincent Barry in his book titled *Bioethics in A Cultural Context* argues that it was Al Razi who first explored the subject of evidence-based medicine through his *Comprehensive Book of Medicine* (Barry, 2011). Even though EBM has been formally conceptualized only recently, sociological and historical studies seem to suggest that it originated from scientists in the past, with Muslim physicians during the Golden Era being at the forefront.

Conclusion

The Islamic view of, and approach to, population health is balanced and holistic. It addresses the multiple facets of individuals and health at different levels. By putting humans at the centre of creation and declaring them as having been "created in the best of stature" (Qur'ān, 95: 4), humans are directly given the responsibility to establish order on earth and protect the welfare and interest of other living beings. By upholding justice, humans are able to realize their ultimate potentials and perform their duties. Similarly, Islamic teachings safeguard the larger contexts or environment in which health and health systems can easily flourish. These can be seen in the Qur'ānic message of egalitarianism, promotion of a just economic and political system, complete rejection of the excessive gap between the rich and poor, prohibition of usury and other forms of exploitation, protection of vulnerable groups, and preservation of nature. To further empower humans in achieving the objectives of public health, the Qur'ān and Prophetic traditions highlight the importance of knowledge and reasoning, besides providing some guidelines and basic rules. The relevance of Islam to the foundations of public health and contemporary public health discourse is best perceived when its all-embracing idea and message is understood in a comprehensive – not fragmented – manner.

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