

DECRIMINALIZING SUICIDE: A REVIEW WITH ISLAMIC PERSPECTIVES

^{i,*}Mohamad Putera Shazam Rasit & ⁱ Asmidah Ahmad

ⁱ Faculty of Syariah and Law, Universiti Sains Islam Malaysia, Bandar Baru Nilai, 71800 Nilai, Negeri Sembilan, Malaysia

*(Corresponding author) e-mail: puterashzms@gmail.com

Article history:

Submission date: 11 September 2023
Received in revised form: 9 October 2023
Acceptance date: 12 November 2023
Available online: 31 December 2023

Keywords:

Suicide, Islamic perspectives, Mental Health, Legal Changes

Funding:

This research did not receive any specific grant from funding agencies in the public, commercial, or non-profit sectors.

Competing interest:

The author(s) have declared that no competing interests exist.

Cite as:

Rasit, M. P. S., & Ahmad, A. (2023). Decriminalizing suicide: A review with Islamic perspectives. *INSLA E-Proceedings*, 1(2), 13-23.



© The authors (2023). This is an Open Access article distributed under the terms of the Creative Commons Attribution (CC BY NC) (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is properly cited. For commercial re-use, please contact penerbit@usim.edu.my.

ABSTRACT

The recent decriminalization of suicide in Malaysia is the subject of this study, which specifically looks at it from an Islamic perspective. Using a qualitative research methodology, the study thoroughly reviews the literature, including both articles and research papers. The main objective is to identify obstacles and offer suggestions related to decriminalization. Religious perspectives and cultural implications are major areas of analysis. The goal of the study is to present a thorough grasp of the implications of decriminalizing suicide considering Islamic teachings. The research explores legal, cultural, and religious aspects while concentrating on barriers to implementing global policies and the stigma associated with mental illness that prevents people from seeking help. It makes suggestions for how Islamic organizations can actively address mental health issues in Malaysia and provides advice for helping those who suffer from mental illness that is based on Islamic principles. The expected results are intended to add to the conversation about mental health, Islamic perspectives, and international guidelines by offering sophisticated perspectives to researchers, policymakers, and Islamic organizations involved in these conversations. The study emphasizes how important it is for the Islamic community to work together to eliminate stigma and create a welcoming atmosphere for mental health.

Introduction

In the contemporary landscape of Malaysian society, the escalating rates of suicide have emerged as a pressing concern, prompting a reevaluation of existing legal frameworks and intervention strategies. According to recent statistics, there has been a troubling rise in attempted suicide rates, particularly among Malaysian teens, reaching an alarming 10% (CodeBlue, 2023). This disturbing trend is further underscored by the completion of parliamentary amendments to the Section 309 of Penal Code related to suicide attempts. Against this backdrop, the intersection of Islamic perspectives and mental health has become a focal point of interest for researchers, given its potential contributions to addressing this complex issue.

Mental health is a state of well-being in which an individual can cope with the normal stresses of life, work productively, and contribute to their community (World, 2022). The relevance of this research is underscored by the critical need to understand and respond effectively to the growing mental health challenges and suicides in Malaysia, recognizing that mental health is an integral aspect of overall well-being.

This research project aims to delve into the complexities and possibilities surrounding the application of Islamic perspectives in addressing mental health and suicide prevention within the Malaysian context. By situating itself within the field of legal and mental health research, the study seeks to illuminate the challenges and opportunities at the intersection of Islamic perspectives and mental health, recognizing the imperative to bridge gaps between legal, ethical, cultural, and healthcare dimensions.

This issue is propelled by the undeniable urgency and gravity of the rising suicide cases in Malaysia and the broader understanding that mental health is a fundamental component of individual and societal well-being. The attempted suicide rate among Malaysian teens, accentuates the need for a comprehensive understanding of the factors contributing to mental health challenges and potential solutions (CodeBlue, 2023). This research seeks to navigate the intricate dynamics surrounding the integration of Islamic perspectives principles into the broader mental health and suicide prevention landscape.

Moreover, this study extends beyond academic realms, envisioning its impact on national and international communities. The insights gained from examining the evolving role of Islamic perspectives in mental health and suicide prevention could serve as a valuable resource for policymakers, mental health professionals, and organizations both within and outside Malaysia. It aims to contribute to a broader discourse on promoting mental health, religious inclusivity, and social well-being within the unique legal and cultural framework of Malaysia.

Literature Review

The cited article by Raaj et al, (2021) contributes to the understanding of mental health in Malaysia by exploring the prevalence of mental disorders and highlighting a notable increase in lifetime prevalence. The study focuses on Malaysia and provides valuable insights into the mental health landscape of the country.

The literature on mental health in Malaysia has seen a growing emphasis on epidemiological studies to assess the prevalence and trends of mental disorders. Raaj et al.,'s (2021) research builds upon this foundation by specifically investigating the lifetime prevalence of mental disorders, shedding light on the scale and scope of the issue.

Previous studies in Malaysia have touched upon various aspects of mental health, including cultural influences, stigma, and the availability of mental health services. Raaj et al.,'s (2021) work is situated within this broader context, deepening our understanding of the prevalence rates and contributing factors that may influence mental health outcomes in the Malaysian population.

Furthermore, the article is part of the ongoing discourse on the global burden of mental disorders. By focusing on Malaysia, the study adds a unique perspective to the international literature, allowing for cross-cultural comparisons and a nuanced understanding of the factors contributing to the increase in lifetime prevalence.

In conclusion, Raaj et al.,'s (2021) article serves as a significant contribution to the literature on mental health in Malaysia. By addressing the lifetime prevalence of mental disorders, the study not only expands our knowledge of the local context but also adds valuable information to the global discourse on mental health. Further research in this area is warranted to explore the specific factors contributing to the observed increase and to inform targeted interventions and policies aimed at improving mental health outcomes in Malaysia.

The outbreak of the COVID-19 pandemic has had a significant impact on global mental health, leading to a range of mental health problems such as stress, anxiety, depressive symptoms, insomnia, denial, anger, and fear worldwide (Torales et al., 2020). The practice of physical distancing during the pandemic has further exacerbated these mental health issues, with increases in depression, posttraumatic stress disorder (PTSD), substance use disorder, and other mental and behavioral disorders expected in both the short and long term (Torales et al., 2020). This literature review aims to synthesize the existing research findings on the global perspectives of mental health and suicide prevention, highlighting the impact of COVID-19 and identifying knowledge gaps for future research.

The current outbreak of COVID-19 has had a profound impact on global mental health, leading to additional health problems and weakening strategies for COVID-19 control (Torales et al., 2020). The pandemic has resulted in increased levels of stress, anxiety, depressive symptoms, and insomnia among individuals worldwide (Torales et al., 2020). These mental health issues can have detrimental effects on individuals' overall well-being and may require additional mental health support at a global level (Torales et al., 2020).

The practice of physical distancing during the COVID-19 pandemic has raised concerns about its consequences for mental health and well-being (Torales et al., 2020). It is expected that there will be increases in depression, PTSD, substance use disorder, and other mental and behavioral disorders as a result of the prolonged physical distancing measures (Torales et al., 2020). Additionally, the closure of schools and the implementation of quarantine measures may contribute to an epidemic of child abuse, further exacerbating the mental health challenges faced by individuals during the pandemic (Torales et al., 2020).

Previous research has shown that economic crises, such as the global economic crisis in 2008, can have a significant impact on suicide rates, particularly in men and countries with higher levels of job loss (Galea et al., 2020). The 2008 global economic crisis had adverse effects on mental health, leading to increased suicide rates in certain populations (Galea et al., 2020). This finding highlights the importance of considering the broader socio-economic context when examining mental health and suicide prevention on a global scale.

Suicide remains a leading cause of years of life lost globally, despite a decrease in suicide rates since 1990 (Galea et al., 2020). Mental and substance use disorders play a significant role in suicide deaths, with depression identified as the leading cause of suicide DALYs (disability-adjusted life years) (Naghavi, 2019). These findings emphasize the urgent need for effective suicide prevention strategies and mental health interventions on a global scale.

Quarantine and isolation measures during infectious disease outbreaks, such as the COVID-19 pandemic, can have severe mental health consequences (Chang et al., 2013). Individuals may experience depression, anxiety, mood disorders, psychological distress, posttraumatic stress disorder, insomnia, fear, stigmatization, low self-esteem, and lack of self-control as a result of these measures (Chang et al., 2013). These adverse mental health outcomes highlight the importance of implementing comprehensive mental health support systems during periods of quarantine and isolation.

Falls and fall-related injuries are common in older adults and have negative effects on functional independence and quality of life (Hossain et al., 2020). It is crucial to implement comprehensive falls prevention and management recommendations, considering a person-centered approach and recent developments in e-health (Hossain et al., 2020). This finding underscores the need to address mental health issues in older adults, particularly during periods of isolation and limited mobility.

The COVID-19 pandemic may increase the risk of population suicide through its effects on well-established suicide risk factors (Hossain et al., 2020). However, actionable steps can be taken to mitigate suicide risk during and after the pandemic (Hossain et al., 2020). Prioritized, evidence-based strategies for clinicians, health care delivery systems, and policymakers can significantly reduce the negative effects of the pandemic on suicide risk (Holland et al., 2021). This highlights the importance of focusing political will, investments, and the global community on suicide prevention, particularly during the COVID-19 era.

While the provided research findings shed light on the global perspectives of mental health and suicide prevention, there are several knowledge gaps that warrant further investigation. Future research should explore the long-term mental health consequences of the COVID-19 pandemic and physical distancing measures, particularly in vulnerable populations. Additionally, more research is needed to understand the specific mechanisms through which economic crises impact suicide rates and mental health outcomes. Furthermore, there is a need for studies that examine the effectiveness of different interventions and strategies for preventing and managing mental health issues during periods of quarantine and isolation. Finally, future research should focus on developing and evaluating comprehensive suicide prevention programs that address the unique challenges posed by the COVID-19 era.

The COVID-19 pandemic has had a significant impact on global mental health, leading to a range of mental health problems worldwide. The practice of physical distancing and the economic consequences of the pandemic further exacerbate these mental health issues. Suicide remains a leading cause of mortality globally, emphasizing the need for effective suicide prevention strategies. Quarantine and isolation measures during infectious disease outbreaks can have severe mental health consequences, highlighting the importance of comprehensive mental health support systems. Falls prevention and management in older adults are crucial for maintaining their mental well-being. Mitigating suicide risk during the COVID-19 era requires prioritized, evidence-based strategies. Future research should address knowledge gaps and focus on long-term mental health consequences, economic crises, intervention effectiveness, and comprehensive suicide prevention programs.

Translation: Surely this Quran guides to what is most upright, and gives good news to the believers—who do good—that they will have a mighty reward.

(Surah Al-Isra, 17:9)

Surah Al-Isra (17:9) underscores the Quran's role as a guiding light toward what is most suitable and beneficial for individuals. It extends a message of encouragement to believers engaging in righteous deeds, promising them a great reward. Beyond the physical realm, this guidance resonates strongly with mental well-being. By partaking in virtuous actions, believers not only fulfill spiritual obligations but actively contribute to activities fostering positive mindsets and emotional wellness. Acts of kindness and generosity associated with righteous deeds, recognized in psychological studies, correlate with increased levels of happiness. The promise of a great reward underscores the positive impact of aligning actions with Quranic guidance, offering psychological and emotional benefits in the present. Amid life's challenges, the Quran serves as a source of solace and direction, intertwining spiritual and mental health. Adherence to its teachings not only nurtures the soul but also contributes to believers' resilience and flourishing mental states, offering a pathway to enduring well-being in life's journey.

Translation: Indeed, humankind was created impatient (19) distressed when touched with evil,(20) and withholding when touched with good— (21) except those who pray, (22) consistently performing their prayers; (23) and who give the rightful share of their wealth (24) to the beggar and the poor; (25) and who 'firmly' believe in the Day of Judgment; (26) and those who fear the punishment of their Lord— (27) 'knowing that' none should feel secure from their Lord's punishment— (28) and those who guard their chastity (29) except with their wives or those 'bondwomen' in their possession, for then they are free from blame, (30) but whoever seeks beyond that are the transgressors. (31) 'The faithful are' also those who are true to their trusts and covenants; (32) and who are honest in their testimony; (33) and who are 'properly' observant of their prayers. (34) These will be in Gardens, held in honour. (35)

(Surah Al-Ma'arij, 70: 19-35)

Surah Al-Ma'arij (70:19-35) underscores the intricate connection between human behavior, spiritual well-being, and mental health. While acknowledging humanity's inherent tendencies towards complaint and miserliness, the passage identifies a distinct group exempt from such negative traits. This group is characterized by a steadfast commitment to prayer, a vigilant and devoted worship practice that forms the core of their spiritual connection. The narrative further underscores the importance of charitable acts, justice, fulfilling commitments, and the belief in the Day of Judgment, instilling a sense of accountability and fear of divine consequences. The passage also emphasizes the significance of maintaining personal integrity, including upholding chastity and ethical conduct within marital relations. Ultimately, those who embody these qualities are promised an elevated status in the Gardens of Paradise, highlighting the profound interplay between spiritual connection and mental well-being. The consistent practice of prayer, ethical conduct, and a belief in a higher purpose collectively contribute to a holistic approach to mental health, fostering emotional resilience and a profound sense of purpose.

Translation: O believers! Avoid many suspicions, 'for' indeed, some suspicions are sinful. And do not spy, nor backbite one another. Would any of you like to eat the flesh of their dead brother? You would despise that!¹ And fear Allah. Surely Allah is 'the' Acceptor of Repentance, Most Merciful.

(Surah Al-Hujurat, 49:12)

Surah Al-Hujurat (49:12) offers a profound directive to believers, urging them to avoid negative assumptions and behaviors such as backbiting and spying. In the context of mental health, this guidance takes on added significance as it discourages the perpetuation of stigma associated with conditions that may not be readily visible. The verse's analogy, equating negative assumptions to the repulsive act of consuming the flesh of a deceased brother, vividly underscores the abhorrence of judgment and discrimination. By promoting an environment free from such negativity, the verse encourages a compassionate and empathetic approach, fostering a community where individuals facing mental health challenges can openly discuss their struggles without fear of condemnation. The mention of Allah's attributes—Accepting of Repentance and Merciful—serves as a powerful reminder to cultivate understanding, aligning with broader Islamic principles of justice and mercy in addressing mental health issues within the Muslim community.

Translation: And do not throw [yourselves] with your [own] hands into destruction [by refraining]. And do good; indeed, Allah loves the doers of good."

(Surah Al-Baqarah 2:195)

Narrated Abu Huraira:

"Whoever purposely throws himself from a mountain and kills himself, will be in the (Hell) Fire falling down into it and abiding therein perpetually forever; and whoever drinks poison and kills himself with it, he will be carrying his poison in his hand and drinking it in the (Hell) Fire wherein he will abide eternally forever; and whoever kills himself with an iron weapon, will be carrying that weapon in his hand and stabbing his `Abdomen with it in the (Hell) Fire wherein he will abide eternally forever."

(Abu Huraira, n.d., Hadith No. 670)

Islam strongly discourages believers from engaging in self-harm or destructive behaviors, as emphasized in both the Quran and the teachings of Prophet Muhammad PBUH. In Surah Al-Baqarah (2:195), the Quran warns against throwing oneself into destruction, stressing that Allah does not burden a soul beyond its capacity. This verse underscores the need for individuals to avoid practices that may lead to harm. Correspondingly, Prophet Muhammad PBUH explicitly prohibited self-harm, stating,

"Whosoever drinks poison and kills himself with it will endure its consequences in the Hereafter."

(Abu Huraira, n.d., Hadith No. 670)

Together, these Islamic teachings emphasize the sanctity of life and the responsibility of individuals to safeguard their well-being, promoting a balanced and healthy approach to life that aligns with the divine guidance provided by Allah SWT and the wisdom of the Prophet PBUH.

Methodology

The research methodology employed in this study is qualitative in nature, emphasizing the acquisition of insights and comprehension through an extensive review of articles and research papers. The data collection process predominantly involves the examination and analysis of existing literature in the field, facilitating a comprehensive exploration of the topic. Through this approach, the study aims to delve deeply into the subject matter, identify patterns, and extract valuable information from a diverse range of scholarly sources.

To investigate the role of Islamic perspectives in addressing mental health and suicide prevention in Malaysia, a qualitative research design will be embraced. The research will commence with a thorough literature review, scrutinizing articles and research papers relevant to the intersection of Islamic perspectives, mental health, and suicide prevention in Malaysia. This will provide an in-depth overview of the current state of mental health within the context of Islamic perspectives, the challenges faced, and the opportunities available for intervention.

The literature review will play a pivotal role in establishing a knowledge base and identifying key themes and arguments in the field of Islamic perspectives impact on mental health and suicide prevention in Malaysia. It will involve a comprehensive analysis of existing research and academic discourse, enabling the identification of challenges such as stigma, accessibility to mental health services, cultural nuances, legal frameworks, and the role of religious authorities.

Moreover, the literature review will highlight potential opportunities for leveraging Islamic perspectives to enhance mental health and suicide prevention efforts in Malaysia. This includes areas such as destigmatizing mental health issues, integrating mental health awareness into religious teachings, improving accessibility to mental health services, fostering collaboration between religious and mental health professionals, and leveraging digital platforms for outreach and support.

By conducting a qualitative analysis of the literature, this study aims to gain deeper insights into the role of Islamic perspectives in addressing mental health and suicide prevention in Malaysia. The findings will offer valuable information for policymakers, researchers, religious leaders, and mental health practitioners, empowering them to make informed decisions and develop effective strategies to address mental health challenges within the framework of Islamic perspectives in Malaysia.

Results and Discussion

Global Initiatives in Enhancing Mental Health Services

Mental health services play a crucial role in addressing the challenges posed by the COVID-19 pandemic and promoting overall well-being. This literature review aims to explore the efforts made by other countries in providing the best mental health services. The review synthesizes research findings from various studies to gain insights into the strategies employed, challenges faced, and potential future directions for improving mental health services.

In response to the mental health challenges caused by the COVID-19 pandemic, countries like China have established mental health crisis interventions and online mental health services. These initiatives aim to provide accessible and timely support to individuals in need (Semrau et al., 2016). Such interventions can help bridge the gap between mental health service demand and supply, especially during times of crisis.

The impact of COVID-19 on mental health in sub-Saharan Africa is expected to be immense. Efforts should be made to provide accessible and available mental health services to this population (Xiang et al., 2020). However, low- and middle-income countries in this region face challenges in providing mental health services due to limited financial resources and a shortage of skilled staff (Semo & Frissa, 2020). To overcome these challenges, community-based mental health care and the delegation of basic mental health interventions to non-specialist health workers have been suggested as potential approaches (Semo & Frissa, 2020).

The COVID-19 pandemic has necessitated changes in mental health care delivery. Mental health professionals have adapted their practices by shifting towards telemedicine and implementing safety measures such as the use of personal protective equipment (Starace & Ferrara, 2020). These adaptations ensure the continuity of care while prioritizing the safety of both service providers and recipients.

Efforts to support the scale-up of integrated mental health care in low- and middle-income countries should focus on building human resource capacity and evaluating the impact of capacity-building activities (Cowman et al., 2017). By investing in training and empowering mental health professionals, countries can enhance the quality and accessibility of mental health services.

Effective stigma reduction interventions in low- and middle-income countries utilize multiple methods, including educational, social contact, and therapeutic approaches. However, there is minimal mention of social contact despite strong evidence for its effectiveness (Thorncroft & Semrau, 2018). Future research should explore the potential of social contact interventions in reducing mental health stigma and promoting inclusivity.

In conclusion, the global response to the mental health challenges posed by the COVID-19 pandemic has seen diverse strategies. Countries like China have implemented crisis interventions and online services to address immediate needs, showcasing the importance of accessible support during crises. In sub-Saharan Africa, where financial constraints and a shortage of skilled staff are prevalent, community-based care and task-shifting to non-specialist health workers emerge as potential solutions. The pandemic has prompted a shift in mental health care delivery worldwide, with professionals adapting through telemedicine and safety measures. To ensure sustainable improvements, efforts must focus on building human resource capacity, especially in low- and middle-income countries, emphasizing training and empowerment for mental health professionals. Additionally, reducing stigma in these regions requires exploring the untapped potential of social contact interventions. As the landscape of mental health services evolves, ongoing research and a commitment to inclusivity are crucial for advancing global mental health initiatives.

Obstacles for Implementing These Measures in Malaysia

Resource Allocation

Malaysia might face difficulties in allocating resources for mental health services. Having enough financial support is crucial for setting up crisis interventions, online services, and enhancing human resource capacity. According to Health Minister Dr. Zaliha Mustafa, "More funding is needed to resolve multiple issues pertaining to the public healthcare system (FMT Reporters, 2023)." This includes challenges like budget constraints, where Malaysia may struggle to allocate sufficient funds for mental health initiatives due to overall budget limitations. Additionally, competing priorities within the government, such as education and infrastructure, could divert attention and resources away from mental health services. This might result in underfunding and impede the development of comprehensive mental health programs.

Workforce Shortages

Addressing the pressing issue of mental health in Malaysia is further complicated by a scarcity of qualified professionals, as highlighted by Malaysian Mental Health Advisory Council member Tan Sri Lee Lam Thye. Presently, the country grapples with a mere 360 registered psychiatrists across both public and private sectors, sounding an alarm about the shortage of competent experts needed to effectively tackle mental health problems (Lim, 2017). This deficiency poses a significant challenge in providing comprehensive and timely mental health support to the population. Malaysia's struggle with an insufficient number of psychiatrists per capita exemplifies the critical need to bolster its mental health workforce. Tan Sri Lee Lam Thye's concerns emphasize that workforce shortages are an alarming hindrance that must be urgently addressed to fortify the nation's ability to implement and sustain vital mental health strategies outlined in global efforts. It underscores the necessity for strategic initiatives, such as educational expansions, scholarships, and international collaborations, to enhance the overall mental health landscape in Malaysia (Lim, 2017).

Stigma and Cultural Factors on Mental Health

Stigma and cultural factors play a significant role in shaping mental health outcomes for individuals and communities. This literature review aims to synthesize and integrate research findings on the impact of stigma and cultural factors on mental health, with a focus on the use of alternative approaches, the association between self-stigma and Serious Mental Illness (SMI), and the effects of COVID-19-related discrimination and stigma on mental health. By examining these findings, this review aims to identify knowledge gaps and suggest potential future research directions in the field.

One alternative to traditional mental health services for refugee families facing stigma and a lack of knowledge about available services is the implementation of Tree of Life groups. These groups employ a strength-based narrative methodology rooted in cultural and social histories, allowing participants to develop culturally congruent solutions to their problems (Hughes, 2013). By providing a platform for individuals to share their experiences and draw upon their cultural backgrounds, the Tree of Life groups offer a unique approach to mental health support that addresses the specific needs and challenges faced by refugee families.

Research has shown that self-stigma is associated with poor clinical and functional outcomes in individuals with Serious Mental Illness (SMI) (Hughes, 2013). This finding highlights the importance of addressing self-stigma as a significant barrier to recovery and well-being for individuals with SMI. To improve outcomes, there is a need to develop anti-stigma campaigns and recovery-oriented practices that specifically target self-stigma and promote a more positive self-perception among individuals with SMI (Hughes, 2013).

The COVID-19 pandemic has brought to light the impact of discrimination and stigma on mental health. Exposure to the virus, COVID-19-related discrimination, and stigma have been found to be associated with poorer mental health outcomes (Hughes, 2013). Moreover, sociocultural inequalities in mental health related to COVID-19 have been observed, with the burden being most noteworthy for the Black community (Dubreucq et al., 2021). These findings emphasize the need for public health authorities and health professionals to advocate against the discrimination of racialized minorities and ensure accessible and culturally sensitive mental health services during and after the pandemic (Dubreucq et al., 2021).

While the research findings discussed above shed light on the impact of stigma and cultural factors on mental health, there are still several knowledge gaps that warrant further investigation. Firstly, more research is needed to explore the effectiveness and long-term outcomes of alternative approaches such as the Tree of Life groups in addressing stigma and improving mental health outcomes for refugee families. Additionally, future studies should focus on developing and evaluating targeted interventions that specifically address self-stigma in individuals with SMI, with the aim of improving their clinical and functional outcomes. Lastly, further research is needed to understand the complex interplay between discrimination, stigma, and mental health during the COVID-19 pandemic, particularly in marginalized communities.

In conclusion, stigma and cultural factors have a significant impact on mental health outcomes. Alternative approaches like the Tree of Life groups offer a promising avenue for addressing stigma and improving mental health outcomes for refugee families. Self-stigma is associated with poor outcomes in individuals with SMI, highlighting the need for anti-stigma campaigns and recovery-oriented practices. The COVID-19 pandemic has further highlighted the detrimental effects of discrimination and stigma on mental health, particularly in marginalized communities. Future research should focus on evaluating the effectiveness of alternative approaches, developing targeted interventions for self-stigma, and understanding the complexities of discrimination, stigma, and mental health during the pandemic.

Support Systems within Islamic Communities

The intersection of mental health and religious communities has gained prominence in recent research, with a focus on understanding support systems within Islamic communities. This article draws insights from two key works: Sabry and Vohra's (2013) "Role of Islam in the management of Psychiatric disorders" published in the *Indian Journal of Psychiatry* and Byrne, Mustafa, and Miah's (2020) "Working together to break the 'circles of fear' between Muslim communities and mental health services" featured in the book *"Psychoanalytic Perspectives on Fundamentalism, Radicalization and Terrorism."*

Sabry and Vohra (2013) delve into the role of Islam in the management of psychiatric disorders, providing a comprehensive understanding of Islamic perspectives on mental health. The paper explores how Islamic principles can be harnessed to create supportive frameworks for individuals facing psychiatric challenges. Sabry and Vohra emphasize the importance of a holistic approach that integrates both spiritual and psychological dimensions, shedding light on the potential role of Islamic teachings in reducing stigma and fostering a supportive environment.

Byrne, Mustafa, and Miah (2020) shift the focus to collaborative efforts between Muslim communities and mental health services. In their work, the authors highlight the "circles of fear" that exist between these entities and propose strategies to break down barriers. The paper underscores the significance of mutual understanding, cultural competence, and collaborative initiatives to enhance support systems for mental health within Muslim communities. It emphasizes the role of community engagement and partnership in dismantling stigmas and fostering a conducive environment for mental well-being.

Both works underscore the integration of spiritual and psychological support within Islamic communities as a crucial aspect of mental health care. Sabry and Vohra (2013) provide a theoretical foundation, advocating for the incorporation of Islamic principles into therapeutic interventions. Byrne, Mustafa, and Miah (2020) complement this by emphasizing the importance of collaboration and understanding between mental health services and Islamic communities, suggesting that joint efforts can create a more supportive environment for those facing mental health challenges.

While recognizing the potential benefits, it is essential to acknowledge the challenges in implementing support systems within Islamic communities. These may include cultural nuances, diverse interpretations of Islamic teachings, and the need for inclusive, culturally sensitive mental health services. However, the opportunities for collaboration and mutual understanding outlined by the authors present a promising foundation for overcoming these challenges.

In conclusion, Sabry and Vohra (2013) and Byrne, Mustafa, and Miah (2020) contribute valuable perspectives on support systems within Islamic communities. By exploring the role of Islam in mental health management and proposing collaborative strategies to bridge gaps between communities and mental health services, these works offer a nuanced understanding of the complex interplay between religion and mental well-being. As we strive for more inclusive mental health practices, these insights pave the way for culturally competent and collaborative approaches within Islamic communities.

Role of Religious Leaders in Mental Health Advocacy

The role of religious leaders in mental health advocacy is a burgeoning area of research, particularly within Muslim communities. This essay explores this theme, drawing insights from two pivotal works: Padela et al.'s (2011) "The role of imams in American Muslim health: perspectives of Muslim community leaders in Southeast Michigan" published in the *Journal of Religion and Health*, and Amri and Bemak's (2013) "Mental health help-seeking behaviors of Muslim immigrants in the United States: overcoming social stigma and cultural mistrust" featured in the *Journal of Muslim Mental Health*.

Padela et al., (2011) provide a comprehensive examination of the role of imams in American Muslim health, presenting insights from community leaders in Southeast Michigan. The research delves into the perceptions and attitudes of imams concerning health matters, including mental health. The study emphasizes the influential role that religious leaders play in shaping community perspectives on health issues and underscores the potential for imams to serve as conduits for mental health awareness and support.

Amri & Bemak (2013) complement this perspective by exploring the mental health help-seeking behaviors of Muslim immigrants in the United States. The study unveils the pervasive influence of social stigma and cultural mistrust on mental health-seeking behaviors within Muslim communities. In this context, the role of religious leaders becomes paramount as they possess the potential to dismantle stigma, foster cultural competence, and encourage mental health support within the community.

Both works highlight the pivotal role of religious leaders as advocates for mental health within Muslim communities. Padela et al., (2011) illustrate the significance of imams as influential figures who can facilitate positive health behaviors, including mental health awareness and destigmatization. Amri and

Bemak (2013) extend this narrative by portraying religious leaders as essential allies in overcoming cultural barriers, thereby promoting mental health help-seeking behaviors.

While recognizing the potential impact of religious leaders in mental health advocacy, it is crucial to acknowledge challenges. These may include religious leaders' varying levels of mental health literacy and potential resistance to addressing mental health within a religious context. However, the opportunities for collaboration between mental health professionals and religious leaders present a promising avenue for fostering understanding, trust, and a supportive environment for mental health advocacy within Muslim communities.

In conclusion, Padela et al., (2011) and Amri & Bemak (2013) contribute valuable perspectives on the role of religious leaders in mental health advocacy within Muslim communities. These works underscore the influential position of imams and religious leaders in shaping community attitudes toward mental health and promoting support-seeking behaviors. As we seek more inclusive and culturally competent mental health practices, understanding and leveraging the role of religious leaders emerges as a key component in advancing mental health advocacy within diverse communities.

Conclusion

In summary, this study explores mental health in Malaysia, looking at it globally and considering Islamic perspectives. We've found that while other countries are making strides, Malaysia faces challenges like limited resources, not enough staff, stigma, and others. To tackle these hurdles, it's crucial to increase awareness. This means smartly using resources and actively fighting against the stigma around mental health. Also, involving religious leaders can make a big difference. They can help change how communities see mental health and create supportive spaces. The key to a mentally strong Malaysia lies in robust awareness efforts. These efforts, which include education and community involvement, are vital for changing how society views mental health. Teaming up with religious leaders can make these efforts even more powerful, making Malaysia a place where mental well-being is not just important but seamlessly part of overall health.

References

- Amri, S., & Bemak, F. (2013). Mental health help-seeking behaviors of Muslim immigrants in the United States: Overcoming social stigma and cultural mistrust. *Journal of Muslim Mental Health*, 7(1), 43–64.
- Andrews, L. (2016). Non-specialist health worker interventions for the care of mental, neurological, and substance-abuse disorders in low- and middle-income countries. *Issues in Mental Health Nursing*, 37(2), 131–132. <http://doi.org/10.3109/01612840.2015.1128299>
- Byrne, A., Mustafa, S., & Miah, I. Q. (2020). Working together to break the ‘circles of fear’ between Muslim communities and mental health services. Dalam *Psychoanalytic Perspectives on Fundamentalism, Radicalisation and Terrorism* (pp. 120–127). Routledge.
- Chang, S. S., Stuckler, D., Yip, P., & Gunnell, D. (2013). Impact of 2008 global economic crisis on suicide: Time trend study in 54 countries. *The BMJ*, 347, Artikel f5239. <http://doi.org/10.1136/bmj.f5239>
- CodeBlue. (2023, May 29). Attempted suicide rate rises to 10% among Malaysian teens: NHMS survey. *CodeBlue*. <https://codeblue.galencentre.org/2023/05/29/attempted-suicide-rate-rises-to-10-among-malaysian-teens-nhms-survey/>
- Cooper, W. (2022, March 28). Countries with the best mental healthcare in the world – Mapped. *William Russell*. <https://www.william-russell.com/blog/countries-best-mental-healthcare/>
- Cowman, S., Björkdahl, A., Clarke, E., Gethin, G., & Maguire, J. (2017). A descriptive survey study of violence management and priorities among psychiatric staff in mental health services, across seventeen European countries. *BMC Health Services Research*, 17, Artikel 198. <http://doi.org/10.1186/s12913-017-1988-7>
- FMT Reporters. (2023, February 1). More funds needed to resolve public healthcare issues, says Zaliha. *Free Malaysia Today* (FMT). <https://www.freemalaysiatoday.com/category/nation/2023/02/01/more-funds-needed-to-resolve-public-healthcare-issues-says-zaliha/>

- Galea, S., Merchant, R., & Lurie, N. (2020). The mental health consequences of COVID-19 and physical distancing: The need for prevention and early intervention. *JAMA Internal Medicine*, 180(6), 817–818. <http://doi.org/10.1001/jamainternmed.2020.1562>
- Getaran. (2023, June 21). Proses pindaan undang-undang nyahjenayah cubaan bunuh diri peringkat parlimen selesai. *Getaran*. <https://www.getaran.my/artikel/semasa/49362/proses-pindaan-undang-undang-nyahjenayah-cubaan-bunuh-diri-peringkat-parlimen-selesai>
- Holland, K. M., Jones, C. M., Vivolo-Kantor, A. M., Idaikkadar, N., Zwald, M., Hoots, B., Yard, E., D'Inverno, A. S., Swedo, E. A., Chen, M., Petrosky, E., Board, A., Martinez, P. D., Stone, D. M., Law, R., Coletta, M., Adjemian, J., Thomas, C. W., Puddy, R., . . . Houry, D. (2021). Trends in US emergency department visits for mental health, overdose, and violence outcomes before and during the COVID-19 pandemic. *JAMA Psychiatry*, 78(4), 371–379. <http://doi.org/10.1001/jamapsychiatry.2020.4402>
- Hossain, M., Sultana, A., & Purohit, N. (2020). Mental health outcomes of quarantine and isolation for infection prevention: A systematic umbrella review of the global evidence. *Epidemiology and Health*, 42, Artikel e2020038. <http://doi.org/10.2139/ssrn.3561265>
- Koh, E. (2023, June 28). Here's why Malaysia and other countries are decriminalizing suicide. *TIME*. <https://time.com/6290858/malaysia-suicide-decriminalization-mental-health/>
- Lim, B. (2017, January 23). Mental Health Council sounds alarm bell on M'sia's psychiatrist shortage. *NST Online*. <https://www.nst.com.my/news/2017/01/206598/mental-health-council-sounds-alarm-bell-msias-psychiatrist-shortage>
- Naghavi, M. (2019). Global, regional, and national burden of suicide mortality 1990 to 2016: Systematic analysis for the Global Burden of Disease Study 2016. *The BMJ*, 364, Artikel 194. <http://doi.org/10.1136/bmj.194>
- Ospina-Pinillos, L., Davenport, T., Diaz, A. M., Navarro-Mancilla, A., Scott, E., & Hickie, I. (2019). Using participatory design methodologies to co-design and culturally adapt the Spanish version of the Mental Health eClinic: Qualitative study. *Journal of Medical Internet Research*, 21(8), Artikel e14127. <http://doi.org/10.2196/14127>
- Padela, A. I., Killawi, A., Heisler, M., Demonner, S., & Fetters, M. D. (2011). The role of imams in American Muslim health: Perspectives of Muslim community leaders in Southeast Michigan. *Journal of Religion and Health*, 50(2), 359–373.
- Pejabat Mufti Wilayah Persekutuan. (2019, October 10). *Bayan Linnas Siri Ke-216: Islam, Joker dan stigma masalah mental*. Pejabat Mufti Wilayah Persekutuan. <https://www.muftiwp.gov.my/ms/artikel/bayan-linnas/3733-bayan-linnas-siri-ke-216-islam-joker-dan-stigma-masalah-mental>
- Raaj, S., Navanathan, S., Tharmaselan, M., & Lally, J. (2021). Mental disorders in Malaysia: An increase in lifetime prevalence. *BJPsych International*, 18(4), 97–99. <https://doi.org/10.1192/bji.2021.4>
- Sabry, W. M., & Vohra, A. (2013). Role of Islam in the management of psychiatric disorders. *Indian Journal of Psychiatry*, 55(Suppl 2), S205–S214.
- Semo, B. W., & Frissa, S. (2020). The mental health impact of the COVID-19 pandemic: Implications for Sub-Saharan Africa. *Psychology Research and Behavior Management*, 13, 713–720. <http://doi.org/10.2147/PRBM.S264286>
- Semrau, M., Lempp, H., Keynejad, R., Evans-Lacko, S., Mugisha, J., Raja, S., Lamichhane, J., Alem, A., Thornicroft, G., & Hanlon, C. (2016). Service user and caregiver involvement in mental health system strengthening in low- and middle-income countries: Systematic review. *BMC Health Services Research*, 16, Artikel 228. <http://doi.org/10.1186/s12913-016-1323-8>
- Starace, F., & Ferrara, M. (2020). COVID-19 disease emergency operational instructions for Mental Health Departments issued by the Italian Society of Epidemiological Psychiatry. *Epidemiology and Psychiatric Sciences*, 29, Artikel e107. <http://doi.org/10.1017/s2045796020000372>
- Thornicroft, G., & Semrau, M. (2018). Mental health capacity building in low- and middle-income countries: The Emerald Programme. *Epidemiology and Psychiatric Sciences*, 27(1), 1–2. <http://doi.org/10.1017/S2045796017000592>
- Torales, J., O'Higgins, M., Castaldelli-Maia, J., & Ventriglio, A. (2020). The outbreak of COVID-19 coronavirus and its impact on global mental health. *International Journal of Social Psychiatry*, 66(4), 317–320. <http://doi.org/10.1177/0020764020915212>
- World Health Organization. (2022, June 17). *Mental health*. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

Xiang, Y., Jin, Y., & Cheung, T. (2020). Joint international collaboration to combat mental health challenges during the Coronavirus Disease 2019 pandemic. *JAMA Psychiatry*, 77(10), 989–990. <http://doi.org/10.1001/jamapsychiatry.2020.1057>