Islamophobia and Psychiatry
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Recognition, Prevention, and Treatment
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H. Steven Moffic, M.D. Inspired by Rusti, his wife and muse of 50 years, H. Steven Moffic, M.D., has been an award-winning psychiatrist over his 45-year career for his academic, administrative, clinical, community, educational, and cultural endeavors. In recognition of his cultural psychiatry work, he was awarded the one-time designation as a Hero of Public Psychiatry by the Assembly of the American Psychiatric Association. Educationally, his focus on educating psychiatric residents and medical students on cultural psychiatry produced the first model curricula on the subject in 1979. He later went on to write or edit several books on various topics, as well as wrote hundreds of articles and gave countless presentations. Administratively, he was Medical Director of the first community mental health center to be highlighted in Community Mental Health Center Spotlight in 1979, and in 2016 received the intermittently given Administrative Psychiatry Award by the American Psychiatric Association and the American Association of Psychiatrist Administrators. He was a Founding Board Member of the American Association of Community Psychiatrists, where he was known as “da man in ethics.” Clinically, he was honored by both the local and national NAMIs. Academically, he received both Wisconsin state and federal grants for the mental healthcare of refugees in the 1990s, including Muslims from various countries, and now believes that Islamophobia and Muslim mental healthcare are the major cultural challenges in psychiatry and many societies.
John Peteet, M.D. After receiving his M.D. at Columbia University, he completed a medical internship at UNC in Chapel Hill, a residency in psychiatry at the Massachusetts Mental Health Center, and a fellowship at the Peter Bent Brigham Hospital, in Boston. For over 40 years, he has been a psychiatrist at Brigham and Women’s Hospital and Dana-Farber Cancer Institute, where he is an Associate Professor of Psychiatry at Harvard Medical School. A Distinguished Life Fellow of the American Psychiatric Association, he has received several teaching awards and published numerous papers in the areas of psychosocial oncology, addiction, and the clinical interface between spirituality/religion and psychiatry. He has authored or co-edited six books, including Doing the Right Thing: An Approach to Moral Issues in Mental Health Treatment, Depression and the Soul, and The Soul of Medicine: Spiritual Perspectives and Clinical Practice. He serves as president of the American Psychiatric Association’s Caucus on Religion, Spirituality, and Psychiatry.

Ahmed Zakaria Hankir, M.D. is Yvonne Yurichko Professor of Psychiatry with the Carrick Institute for Graduate Studies (USA) and Senior Research Fellow of the Bedfordshire Centre for Mental Health Research in association with the University of Cambridge (UK). Dr. Hankir’s research interests include pioneering and evaluating innovative programs that challenge mental health–related stigma and Islamophobia, and he has published extensively in these areas. Dr. Hankir is passionate about raising awareness of the importance of mental health and has delivered keynote lectures with Nobel Prize Laureates and Ted speakers in international conferences worldwide. Dr. Hankir is the recipient of the 2013 Royal College of Psychiatrists (RCPsych) Foundation Doctor of the Year Award which marks the highest level of achievement in psychiatry in the UK and was twice a Finalist for the RCPsych Psychiatric Communicator of the Year.
Rania Awaad, M.D. is a Clinical Assistant Professor of Psychiatry at the Stanford University School of Medicine where she is the Director of the Muslim Mental Health Lab and Wellness Program and Co-Director of the Diversity Clinic. She pursued her psychiatric residency training at Stanford where she also completed a postdoctoral clinical research fellowship with the National Institute of Mental Health (NIMH). Her research and clinical work are focused on the mental health needs of Muslims. Her courses at Stanford range from instructing medical students and residents on implicit bias and integrating culture and religion into medical care to teaching undergraduate and graduate students the psychology of xenophobia. Her most recent academic publications include works on Islamic Psychology, Islamophobia, and the historical roots of mental health from the Islamic Golden Era. Through her outreach work at Stanford, she is also the Clinical Director of the San Francisco Bay Area branches of the Khalil Center, a spiritual wellness center pioneering the application of traditional Islamic spiritual healing methods to modern clinical psychology. She has been the recipient of several awards and grants for her work. Prior to studying medicine, she pursued classical Islamic studies in Damascus, Syria, and holds certifications (ijaza) in Qur’an, Islamic Law, and other branches of the Islamic Sciences. Dr. Awaad is also a Professor of Islamic Law at Zaytuna College, a Muslim liberal arts college in Berkeley, CA, where she teaches courses on Shafi‘i Fiqh, Women’s Fiqh, and Islamic Psychology. In addition, she serves as the Director of the Rahmah Foundation, a non-profit organization dedicated to educating Muslim women and girls. At Rahmah, she oversees the Murbiyyah spiritual mentoring program for girls. Dr. Awaad is a nationally recognized speaker, award-winning teacher, researcher, and author in both the Islamic and medical sciences.
Editors’ Introduction

Since the beginning of the new millennium, there have been many important societal changes. The escalation of Islamophobia is one of them.

Islamophobia has been extensively covered in the popular media, and its politics have been addressed in many publications and books. However, despite the inclusion of a psychological term like phobia, attention to Islamophobia within psychiatry is just emerging. Indeed, as many of our authors learned in carefully researching their topics, relevant literature is minimal.

To help address this deficiency, we embarked in June 2017 on a comprehensive edited text, inspired by a Symposium given at the annual meeting of the American Psychiatric Association in May 2017. Led by Roomana Sheikh, M.D., “Islamophobia: Social, Religious and Clinical Perspectives” was well attended, and led to considerable discussion. Following this session, Dr. Moffic was contacted by a representative from Springer about the possibility of an edited book on the topic. Dr. Moffic, in addition to editing other psychiatric books, had focused on cultural psychiatry over his 45-year career, including establishing the first model curriculum on this subject for psychiatric residents in training. Following that, another of the symposium’s participants, John Peteet, M.D., who has had a major interest in the importance of religion and spirituality in the practice of psychiatry showed interest, and both then decided to test the feasibility of the project through collegial contacts.

Fortunately, not only did there seem to be enough potential chapter authors, but serendipity and contacts soon led to two other well-known psychiatrists, co-editors Ahmed Zakaria Hankir, M.D., and Rania Awaad, M.D., each a major spokesperson on Islamophobia and Psychiatry in their respective countries, Great Britain and the United States. That left us with four co-editors representing a spectrum of age, experience, religion, gender, and countries of professional work, united in a passionate concern for the psychological and societal harm of Islamophobia.

Though represented mostly by Muslim psychiatrists, the same multicultural spectrum of psychiatrists, and more, is now reflected in the chapter authors, itself a reflection of the importance for a multicultural endeavor. Diversity is represented not only by the varied perspectives on Islamophobia of Muslim psychiatrists, but psychiatrists of other religions. Most authors come from the United States, but there are also psychiatrists associated with other countries, including the United Kingdom, Saudi Arabia, Canada, and Pakistan.
Moreover, the chapter authors included prominent scholars, everyday clinicians, and a combination of both. Some as residents in training to be psychiatrists already recognize the importance of this topic for their education and that of all mental healthcare clinicians. Selected psychologists and psychiatric social workers added their expertise. All suggested that the time had come for what seemed to be the first book on this topic.

In addition to the Introductory and Concluding material, the chapters of this book are divided into four main sections, which convey the main psychiatric and psychological implications of Islamophobia and Psychiatry along the lines of recognition, prevention, and treatment: General Issues, Psychiatric Implications of Islamophobia, Specific Clinical Challenges, and Social Psychiatric Implications. Chapters are meant to both stand alone, as well as to connect with other chapters in this book. Because of this book’s new and comprehensive approach to this area, some overlap and lack of consensus are inevitably present. For instance, specific definitions of Islamophobia can vary from chapter to chapter. General principles for culturally competent care are also presented from different perspectives in several chapters. It is as if the rainstorm of Islamophobia has produced a rainbow of different insights.

This book contains much information that is likely to be new to many readers. Examples include the role of Islam in establishing the first psychiatric hospitals, and the contributions of Muslim physicians to precursors of Freudian theory. Other chapters present updated perspectives of Jungian and psychoanalytic thinking on Islamophobia.

Controversial topics such as homosexuality and Islam generated among us extensive debate and discussion, but were included in the end.

In addition to covering the basics, we also included topics rarely covered topics that seemed relevant to Islamophobia. Examples included the Rohingya refugees and African-American Muslims, and the contributions of neurobiology and social psychology to intergroup conflict. Muslim women and children receive special attention. Patient care is a primary focus, but “treatment” of both civilian and military communities is also considered. When proposed chapters could not be accepted, their subject matter was covered elsewhere in this book.

Since a long scholarly book can seem dry and even well-crafted words often cannot convey all necessary meaning, we have infused this book with visual art, and devoted an entire chapter to the relevance of art. We hope that this volume is a model for the bio-psycho-social-spiritual approach of psychiatry to important human problems having broad cross-cultural implications, and that its ripple effects among readers will reduce Islamophobia and improve Muslim mental healthcare.

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