

Islamic Religion and Psychoanalysis: An Overview

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Abstract

Religion is an important constituent of a person's identity. All religions share some common features that affect the analyst and the analysand's reactions (1). All major religions contain ideas about human motivation, interpersonal relations, and moral behavior that reflect a specific view of human nature (3). Many psychoanalysts have focused on religion's impact on therapy; both positive and negative, and some psychoanalysts and psychoanalytic thinkers have written more recently on Islam. In this review, we conduct an overview of the Islamic religion and psychoanalysis. We conclude that the outcome of the psychoanalysis of Muslim patients may go either very well or very poorly, and that Islam, per se, presents no major obstacle to psychoanalysis.

Introduction: Religion is an important constituent of a person's identity. All religions share some common features that affect the analyst and the analysand's reactions (1). Some have mistakenly believed Islam to have been dismissive of psychopathological phenomena, but it has expanded beyond a limited psychopathological viewpoint, and has widened the horizons of psychoanalytic teachings (Fayek, A., 2004).

Some psychoanalysts and psychoanalytic thinkers have written more recently on Islam. Historically, psychoanalysts have not made Islam a significant object of study or concern.

This article presents an overview of the Islamic religion and psychoanalysis.

Key words: Islam, Psychoanalysis, Therapy

Demographic Background

Islam emerged from the Arabian Peninsula in the 7th century. People who follow Islam are called Muslims. They represent 23% of the total world population. It is commonly found in the Arabian peninsula, the Near and Middle East, North Africa, and major parts of Asia, comprising more than 50 countries. As it spread to different peoples and nations, its beliefs were influenced by the different religious and cultural identities it encountered. Given its enormous spread, Islamic communities have had to deal with the sociohistorical impact of the introduction of Islam into their pre-Islamic beliefs and culture (14).

The Islamic religion and psychoanalysis

All major religions contain ideas about human motivation, interpersonal relations, and moral behavior that reflect a specific view of human nature (3). Many psychoanalysts have focused on religion's impact on therapy, both positive and negative. For example, Freud's rather negative view of religion is that God arises out of Oedipal Conflict, where a powerful father provides for and makes demands upon those under his care, while other psychoanalysts argue for a more positive interpretation, some defining faith as a state of relatedness to an object whose dimensions exceed the reach of our affective or cognitive grasp (8). Consequently, a psychoanalyst's view of religion's impact on therapy will vary depending on which psychoanalytic thinking the analyst follows.

Islam, like other major religions, praises self knowledge, values morality and transcendence, and teaches the primacy of meaning. Psychoanalysis similarly seeks deepening of self-knowledge through introspection, searching for value, and the personal meaning of one's experiences (8). Islam has a deterministic view of human life, which may resemble Freud's doctrine of psychic determinism. For a Muslim, God knows everything about the individual from infancy to death. And the Muslim prioritizes community needs over their needs. In addition, faith is regarded as a transformative force, able to perform miracles, and this is core to a Muslim believer's integrity and sense of self (8). These factors may inhibit therapy as the patient may deny having issues or the need to change.

Studies show that personality development in Muslims is similar to that of other religions. Personality is conceptualized as a configuration of cognition, emotion and habit, activated when situations stimulate their expression (7). The Islamic view centers around the Islamic 'self' (Nafs), which encompasses heart (Galb), spirit (Ruh), intellect (Aql) and desire (Irada) (10). The Nefs has different levels. At a superficial level, it corresponds to the psychological ego. At a lower level, it encompasses all the basic qualities of an individual, including physical appetites and any inclination toward evil or undesirable behavior. At the deepest level, it represents the individual's conscience; roughly it may correspond to Freud's superego (3), but the Islamic superego may differ from it.

Thus the Islamic view of mental structure, is difficult for a traditional psychoanalyst to grasp, and posing an obstacle to therapy, it would at the same time aid a therapist in working with a Muslim client if properly understood. It is also the case that some Islamic traditionalists believe that new knowledge may lead to harmful innovation and the unknown (10), which may perhaps explain why some Muslims don't seek psychoanalytic therapy.

In Islam, as in other faiths, self-sacrifice and the suppression of forbidden impulses require constant vigilance. Psychoanalytic treatment may indeed facilitate and enhance spiritual growth and faith (8) to bridge this gap.

In order to facilitate therapeutic process, psychoanalysts wishing to work with Muslim patients ought to be familiar with the above-mentioned factors, and have a grasp of the various cultural peculiarities and moral and gender boundaries which determine what is permissible in public and in private (8). Failure to do so, may negatively affect the therapy.

Conclusion

We conclude that psychoanalysis with Muslim patients may go well or poorly, but understanding Islam's view of mental structure is a good starting point for the therapist who wishes to work with a Muslim patient. While there may not be any major intrinsic obstacle in Islam for the successful practice of psychoanalysis, there are few case reports of Muslims in psychoanalytic therapy, and so it is premature to arrive at any final conclusion. Therefore, we recommend further studies.

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