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Suicide Prevention for Muslim Communi



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Trigger Warning: *This article discusses suicide, which some might find disturbing. If you or someone you know is having serious thoughts of suicide, please call 911 or the National Suicide Prevention Lifeline at 1-800-273-8255.*

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“Whoever saves a life, it will be as if they saved all of humankind.”
[Qur’an 5:32]

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Suicide is clearly forbidden in Islam, but that does not mean that Muslims not have suicidal thoughts or do not die by suicide. Suicide is a complex phenomenon. Several factors relate to a person's risk for suicide, including biological factors like genetic traits that increase a person's susceptibility to mental health problems, psychological factors like feelings of worthlessness and hopelessness, social factors like the type and quality of relationships a person has with others, and spiritual factors like a person's ethical or religious beliefs. Muslims, just like all other people, are influenced by these various biological, psychological, social, and spiritual factors. For Muslims living in some Western countries, there may be additional and unique factors that lead to the development of suicide risk such as Islamophobia, discrimination, and marginalization. In fact, our recent study in JAMA Psychiatry shows that U.S. Muslims were twice as likely to report attempting suicide sometime in their lives as compared to other faith and non-faith groups. However, suicide is 100% preventable. That is precisely why we believe this article on suicide prevention in Muslim communities is of utmost importance.

Among Muslims, just like members of other communities, there are people who have died by suicide and many others who struggle with thoughts of suicide. As a result, it is critical for Muslim communities to spring to action and implement measures to prevent suicides before they happen. *Suicide prevention* involves the actions that individuals and communities can take to help prevent suicide. Suicide prevention is a long-term process, and it relies on communities prioritizing the discussion of mental health and seeking treatment whenever a person is in need. Although many suicide prevention strategies call for

mental health education, awareness events, and even the formation of community crisis response teams, there are impactful steps that each individual can take to combat mental health stigma and help prevent their own communities too.

The Qur'an and Hadith emphasize the sacredness that Allah ^{سبحانه و تعالی} has bestowed upon each human life, as well as the mandate of preventing its loss. The Qur'an says *"And do not kill the soul which Allah ^{سبحانه و تعالی} has made sacred"* [17:33] and that *"whoever kills a person, it is as though they killed the humankind; and whoever saves (a life), it is as though they saved the humankind"* [Qur'an, 5:32]. These verses underscore Islam's forbiddance of suicide and highlight the sacredness of the human soul. These verses serve as a call-to-action to prevent suicide based on the same value that Allah ^{سبحانه و تعالی} has placed on each human soul.

The Qur'an and Hadith also emphasize the reality and nature of trials in this world. For instance, the Qur'an says *"We will test you with some fear, hunger, and loss of wealth and lives and crops—but give good news to those who patiently endure. Upon these are blessings and mercy from their Lord. These are the guided ones."* [Qur'an 2:155-157]. Hardship and difficult realities of this life that we are encouraged to face using the tools prescribed by Allah ^{سبحانه و تعالی}, including patient perseverance (*sabr*), gratitude (*shukr*), and the support of our communities. The teachings in Islam convey a duty for suicide prevention that we all bear. In fact, fulfilling this responsibility to the best of our abilities is not only a responsibility that individuals *can* fulfill, but they *should* fulfill. In short, suicide prevention is a *fard kifaya*— a com-

obligation on us all.

Here is a list of 6 Do's and Do Nots for all Muslims to follow when building a suicide prevention program in their community:

1. DO hold regular community social events and check in on others

One notable Hadith reads, *“None of you will believe until you love for brother what you love for yourself,”* and another reads *“No two people love each other for the sake of Allah, behind their backs, but that the most of them to Allah ^{سبحانه و تعالي} has the strongest love for their companion”* [Bukhari Muslim; al-Mu’jam al-Awsat 5424]. These Hadith underscore the importance of strong, interconnected, and empathic communities- the types of communities that are also essential for combating suicide. Community gatherings, those that are welcoming to all people, are great places for people to meet others, and work on addressing risk factors for suicide including loneliness and social isolation. Community gatherings help to promote a sense of belonging, which can go a long way in terms of reducing suicide risk. In community programs, dinner parties, at the masjid, or at other public gatherings, try to make an effort to include others in your conversational activities, especially those at the margins of the community. Invite people from your social group, listen to them, speak kindly, and if you are concerned about them, make sure to check in to see how they are really feeling.

2. DO confront mental health stigma

Another notable Hadith reads, “*Whoever relieves a Muslim of a burden the burdens of the world, Allah ^{سبحانه و تعالٰى} will relieve them of a burden from the burdens on the Day of Judgement. And whoever helps ease a difficult world, Allah ^{سبحانه و تعالٰى} will grant him ease from a difficulty in this world and in Hereafter. And whoever covers (the faults of) a Muslim, Allah ^{سبحانه و تعالٰى} will cover (the faults) for them in this world and the Hereafter. And Allah ^{سبحانه و تعالٰى} is engaged in helping the worshipper as long as the worshipper is engaged in helping his brother*” [Jami` at-Tirmidhi 1930, Book 27, Hadith 36]. Mental health stigma refers to the process of devaluing people with mental health problems. It has real consequences for how mental health challenges are addressed in the community. Talking about mental health problems is still taboo in many Muslim communities. This means that people must endure the burden of a mental health challenge, and also endure the extra burden of doing so alone. People with mental health problems are often devalued and are considered very uninteresting, or even sinful by others in the community. People who experience mental health stigma can have difficulties finding a job, a spouse, adequate housing, and belonging in a community. When people are unwilling to talk about mental health, the stigma grows, making people who need help afraid to reach out because of fears that they will be labelled as crazy or bad Muslims.

When we recognize that mental health problems exist and are common, we can help to challenge the stigma. Moreover, we can fulfill the encouragement of Allah ^{سبحانه و تعالٰى} to ease the burden of others. When people are willing to talk about mental health, then others will often feel more empowered to reach out for help.

help or even admit that they need it in the first place. Combating mental health stigma is important for suicide prevention because it creates a path for people to find support when they need it. Mental illnesses are treatable, and normalizing conversations around mental illness allows those who are struggling to share, gain support, and seek help. Confronting stigma is as easy as asking others how they are doing, creating a space where people are invited to share their struggles, or clearly identifying sources of support within your own community. This last point is especially important—by proactively identifying where to seek mental health treatment, it will be easier to reach out when you need it. Find mental health professionals around you who you can reach out to, or where you can refer your friends and family, in times of need.

3. DO know the signs of suicide and seek Gatekeeper training

When a person is thinking of killing themselves, they may show several *signs* like withdrawing from their usual social circles or talking about wanting to be a burden to others. Understanding the warning signs for suicide can help individuals recognize when someone in their community is considering killing themselves and can help ensure that the individual receives the support that they need. Proactively learning the warning signs of suicide is a way for the community to build its capacity to help people who are harming themselves in some way.

If possible, and especially if you are in a leadership or authority position, such as Imam, community leader, youth director, teacher, professor, parent, or caregiver, sign up for a Gatekeeper training program. Gatekeeper training programs

specially designed to help people learn the warning signs for suicide and intervene, when necessary, until professional help can arrive. The Suicide Prevention Resource Centre (SPRC) has compiled a [list](#) of available Gatekeeper training programs for different community groups. Additionally, Mariam has partnered with the Stanford Muslim Mental Health & Islamic Psychology Lab to create a custom-tailored [Muslim Community Suicide Response](#). Muslim Communities in which people are trained to recognize suicide risk and intervene appropriately are best equipped to prevent a suicide from happening.

4. **DO NOT look to one stakeholder to address mental health promotion**

As mentioned previously, suicide prevention is a *fard kifaya*—a communal obligation—and we each have a role to play. Suicide prevention requires long-term community commitment to mental health promotion. Because communities are made up of diverse stakeholders (such as Muslim religious leaders, youth directors, mental health professionals, social workers, community members, individuals, and more), suicide prevention cannot be something that one stakeholder addresses. For example, mental health professionals have specialized training in how to address mental health concerns, but their training is most helpful after a person comes in for treatment. Others, such as local Imams, do not have professional mental health training, but can leverage their knowledge of the *Deen* and general counseling skills to promote wellness and direct people to professional treatment-seeking. Similarly, community members in various roles occupy powerful roles in promoting mental health treatment. Parents, grandparents, siblings, aunts, uncles, cousins and other family members

friends are usually the first points of contact when a person is struggling with mental health challenges. Lending a listening ear when it is needed and directing a loved one to appropriate support & resources—including mental health professionals—is a powerful way to reduce mental health challenges throughout the community. Mental health challenges are common, and they can happen to anyone. We all have a part to play in establishing mental health and wellness as a priority in our communities.

5. **DO NOT try to do everything yourself**

Allah سبحانه
وتعالى says, “*So ask the people of knowledge if you do not know*” [Qur’an 16:43].

Although everyone in the community plays a role in suicide prevention, by adopting behaviors that promote better mental health and by creating different types of support systems for each other, it is important to recognize our own limits. Mental health professionals like psychologists, psychiatrists, and therapists are equipped to treat people who are having thoughts of killing themselves, whether that is during a crisis or not. Community members and leaders can, and should, play an active role in promoting mental health awareness, but within the limits of their capabilities. This does not mean you should abandon a person who is at risk for suicide. Rather, individuals who are not trained in suicide intervention should make sure that a person who needs appropriate mental health training can provide care for someone at risk of suicide, as soon as possible. This includes calling emergency responders away if you are aware of someone planning suicide or attempting to t

own life. It is important to err on the side of caution — seek help if you are unsure what your next step should be.

6. DO NOT put anyone on the spot or invade their privacy

Some of us may know people in our communities who have dealt with significant mental health challenges. While it is important to realize that those who have dealt with mental health challenges have unique perspectives on the community about mental illness or even thoughts of self-harm, it is imperative that these individuals are not singled out for suicide prevention programs. First, it is unfair to exclusively put the burden of mental health awareness on those who have struggled with their own mental health. Prevention needs to be a community effort supported by all. Second, it is unacceptable to infringe on a person's privacy—no one should be coerced into sharing their personal stories in public settings. Third, and perhaps most importantly, detailed discussions about personal motives and feelings about self-harm and suicide are not appropriate for a community space. The goal of discussion, though well-intentioned, can have the unintended consequence of transmitting self-harming behaviors, suicide ideation, and suicide risk to other members of the community. Remember the goal is never to glorify self-harm or suicide, but to normalize the acts of sharing, reaching out, and supporting those who are struggling without judgement.

Conclusion

Suicide is preventable and mental health problems are treatable. Com

and individual community members have an important responsibility an active commitment to suicide prevention in their own communities. Successful long-term suicide prevention has much to do with individual capacity building and actively combating mental health stigma. When promoting mental health becomes an important and foundational part of a community's environment, people are more likely to feel supported and more likely to have access to professional help when they need it. A knock to a stranger or checking in on a friend who is struggling can have profound impact. Above all, remember that the Qur'an tells us, "*Whoever saves will be as if they saved all of humanity*" [5:32]. Working together to prevent suicide, we can all fulfill our joint Islamic responsibility of saving lives

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If you are interested in furthering your knowledge on suicide response in the Muslim community, the [Stanford Muslim Mental Health & Islamic Psychology Lab](#) has developed a robust, evidence-based and Islamically-grounded prevention, intervention, and post-vention manual and training. It provides depth, step-by-step guidance for Muslim community and religious leaders. This manual was developed in collaboration with Muslim leaders and suicide experts. The [Stanford MMHIP Lab](#) in collaboration with [Maristan.org](#) has developed a training and certification program for Muslims across the world to learn how to effectively prevent, intervene, and respond to suicides in their own communities. To learn more please follow us on social media @stanford and @maristan_org and be sure to join the mailing list to receive downloadable resources such as khutbahs, speaking guides and training opportunities.

If you or someone you know is having thoughts of self-harm, please or one of the following hotlines:

- **24/7 National Suicide Prevention Hotline: 1-800-273-TALK (82**
- **Naseeha Muslim Mental Health Hotline: 1-866-627-3342 (availa**
- 6PM PST)
- **AMALA Muslim Youth Hopeline: 1-855-952-6252, (available 6PM**
PST except Tuesdays and Thursdays)
- **Find a Muslim Mental Health Provider in your area here:**
[Maristan.org/resources](https://maristan.org/resources)

Bios

Rania Awaad M.D., is a Clinical Associate Professor of Psychiatry at the Stanford University School of Medicine where she is the Director of the Stanford Muslim Mental Health & Islamic Psychology Lab, Associate C the Division of Public Mental Health and Population Sciences, and Co the Diversity and Cultural Mental Health Section in department of Ps and Behavioral Sciences. Her research and clinical work are focused o mental health of Muslims. Her courses at Stanford range from teachin pioneering course on Islamic Psychology, instructing medical student residents on implicit bias and integrating culture and religion into me to teaching undergraduate and graduate students the psychology of xenophobia. Some of her most recent academic publications include

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Belal Zia, MA, is a former co-leader of the suicide line of research at the Stanford Muslim Mental Health & Islamic Psychology Lab and is one of the authors of the lab's suicide community response manual. He is a Canadian Scholar pursuing his PhD in Clinical Psychology at the University of Manitoba where his research includes addressing barriers to mental health treatment for religious and ethnic minority patients. He holds a MA in Clinical Psychology from the University of Manitoba and a BSc (Hon. Spec.) in Psychology from Western University.

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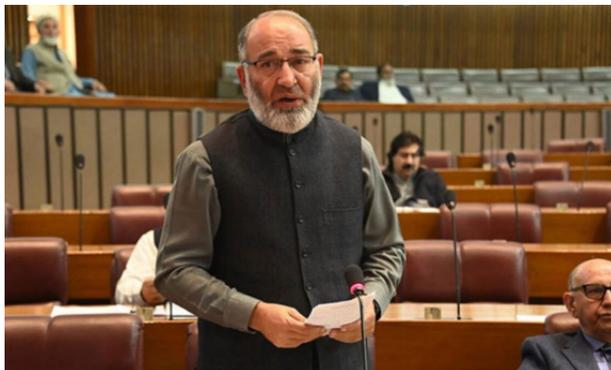
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