

DRUG ADDICTIONS AND MENTAL HEALTH



BOOKLET 7

يَا أَيُّهَا الَّذِينَ آمَنُوا إِنَّمَا الْخَمْرُ وَالْغَمْرُ وَإِذَا سَأَلَكَ السَّئِرَاتُ الْخِطَابَ حَسْبُكَ إِنَّكَ إِلَىٰ عِزِّ اللَّهِ مُتَوَكِّلٌ

O believers! Intoxicants, gambling, idols, and drawing lots for decisions are all evils of Satan's handicraft. So, avoid them so you may be successful.

QUR'AN 5 : 90

AUG 2023

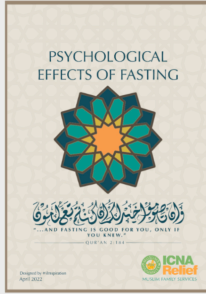
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<https://cambridgemuslimcollege.academia.edu/AmberHaque>

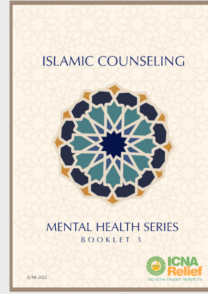
MENTAL HEALTH SERIES



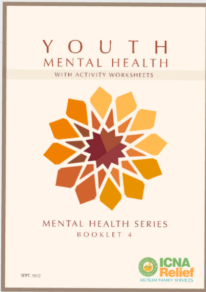
Booklet 1



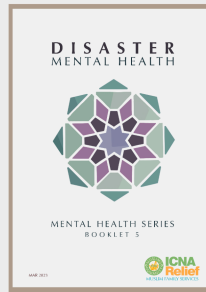
Booklet 2



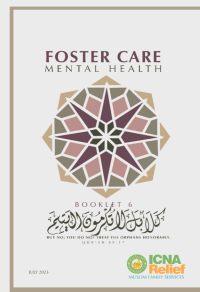
Booklet 3



Booklet 4



Booklet 5



Booklet 6

Why this booklet?

Drug addiction or substance use disorder (SUD) continues to be a menace to American society, and Muslims are no exception. Part of the reason for drug addiction is a lack of knowledge about controlled substances and their effects on users and society. Drug education can play a significant role in understanding the dangers of drug use and becoming a more productive citizen. The need for education on drugs is particularly important for Muslim communities where social stigma has resulted in evading issues of substance use and mental health, affecting the younger generation more than ever.

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Mental Health Booklet 7; AUG 2023

DRUG ADDICTION AND MENTAL HEALTH



Drugs are chemical substances that change a person's mental or physical condition. They affect how the brain works, change thinking and feeling, and can be unpredictable and dangerous. Drugs may come from plants, plant products, or synthetic chemicals. Some drugs like alcohol or tobacco are legal but subject to restrictions for minors. Legally manufactured drugs are prescribed by doctors and are meant to cure illnesses. Illegal or street drugs may have ingredients that produce the desired effects but could be fatal and highly addictive.

Nearly **DRUGS AND DEATHS**

92,000 AMERICANS DIED OF DRUG OVERDOSES IN 2020
up from around 70,000 in 2017.



RISE FROM 21.7 TO 28.3 PER 100,000 PEOPLE DURING THE SAME PERIOD IN

FATAL OVERDOSES

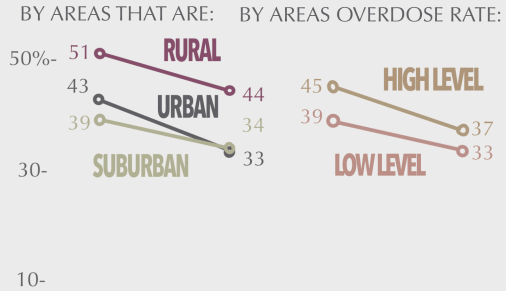
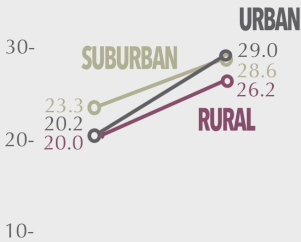
DESPITE THESE INCREASES, AMERICANS WHO SAY **DRUG ADDICTION IS A SIGNIFICANT** PROBLEM DECLINED BY 7 PERCENTAGE POINTS IN PEW RESEARCH CENTER SURVEYS **FROM 42% IN 2018 TO 35% IN 2021.**

<https://www.pewresearch.org/social-trends/2021/12/16/americans-are-less-likely-than-before-covid-19-to-want-to-live-in-cities-more-likely-to-prefer-suburbs/>

Fatal drug overdose rates have increased across the US but the share of Americans who say drug addiction is a major problem has declined

U.S. Drug overdose death rate per 100,000 people by areas that are:

% of Americans saying drug addiction is a **major problem** in their community

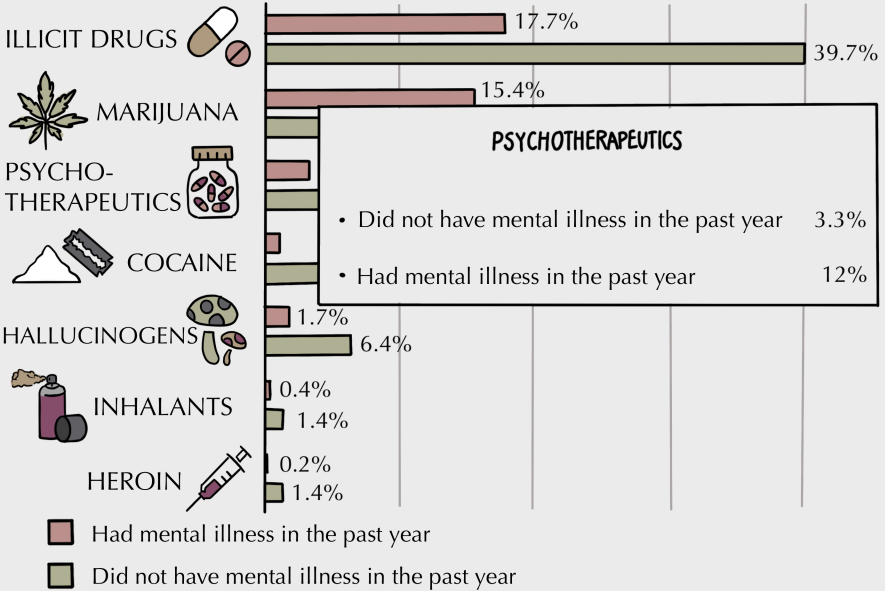


https://www.pewresearch.org/short-reads/2022/05/31/concern-about-drug-addiction-has-declined-in-u-s-even-in-areas-where-fatal-overdoses-have-risen-the-most/ft_22-05-26_addictionopinion/

According to surveys, the reason why public concern about drug addiction has declined is because Americans have prioritized other issues, including the national economy, reducing health care costs and dealing with the coronavirus outbreak.

DRUGS AND MENTAL HEALTH

As of 2021, almost 40% of the respondents diagnosed with mental illness in the US, reported using illegal drugs in the past year.



<https://www.statista.com/statistics/252470/substance-use-among-us-adults-by-any-mental-illnes/>

DRUGS AND AMERICAN MUSLIMS

In a 2020 American Muslim Poll, 37% of respondents said they know a Muslim who has or is struggling with addiction. Asian Muslims were less likely (20%) than other races to say they know someone in their faith community struggling with addiction. See report here: <https://www.ispu.org/substance-abuse-and-addiction-in-the-muslim-community/>

In a study on Muslim-American undergraduate students, 46% reported drinking alcohol in the past year, and 25% reported illicit drug use (Ahmed, Abu-Ras, & Arfken, 2014). 70% reported drinking alcohol before college, and 26% consumed alcohol while they felt religion was important. In a separate national survey, 14% of Muslim Americans reported binge drinking. (Gallup Muslim West Facts Project, 2009).



Overall, research suggests that drug and alcohol use among Muslims is far lower among those who commit to their faith. However, because of the intense stigma in Muslim communities towards drugs and mental health, both problems are vastly underreported. The significant risk factors for a higher incidence of drug abuse are for Muslims who identify with the predominant culture and show a lower commitment to religious beliefs. See *Are There Islam-Based Addiction Treatment Options?* (americanaddictioncenters.org)

WHY DO PEOPLE USE DRUGS?



Curiosity



Peer pressure



Recreation



Experimentation



Increased energy



Excitement



Relaxation



Stress reduction

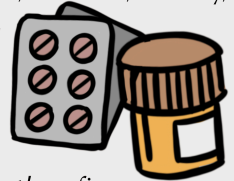
Drugs are taken by mouth, inhaling, snorting, injecting, as a patch or suppository. Whichever way the drugs are taken, they end up in the bloodstream and affect different body parts.

TYPES OF DRUGS



Stimulants - taken to feel high. Stimulants make one more alert, confident, and energetic due to faster messages between brain and body but in high blood pressure, heartbeat, agitation, etc. Larger doses may cause anxiety, panic, seizures, etc. Some common stimulants are amphetamines, caffeine, cocaine, ecstasy, and nicotine.

Depressants - taken to relax. While a low dose of depressants can make one relax and uninhibited, a larger amount can cause sleepiness, unconsciousness, or even death. Common depressants are alcohol, benzodiazepine, cannabis, and opioids (pain relievers).



Hallucinogens - taken to affect the five senses. Hallucinogens change one's senses, so one may see or hear things that are not there, resulting in unusual thoughts and feelings. Common hallucinogens are cannabis, ketamine, LSD, psilocybin, and PCP. These can cause hallucinations, impulsive behaviors, flashbacks, feelings of separation from one's body, etc.

A drug like cannabis has characteristics of all three categories.

TEN MOST COMMONLY ABUSED DRUGS (USERS IN MILLIONS)



Why alcohol and marijuana? They are easier to access, despite age limits and are cheaper than more expensive habits.

National Institute on Drug Abuse (NIDA): <https://www.samhsa.gov/data/release/2019-national-survey-drug-use-and-health-nsduh-releases>

FENTANYL: THE MOST DANGEROUS ILLEGAL DRUG IN AMERICA!

Fentanyl is a synthetic opioid **50 times** stronger than heroin and **100 times** stronger than morphine. It is used for pain management but can be highly addictive. A tiny overdose can kill the user in a very short time. Prescription drugs bought online or from unlicensed dealers may often be laced with fentanyl. Street names for fentanyl are Apace, China Girl, China Town, Dance Fever, Friend, Goodfellas, Great Bear, He-Man, Jackpot, etc.

<https://www.rand.org/blog/rand-review/2020/01/fentanyl-the-most-dangerous-illegal-drug-in-america.html>

POPULAR STREET DRUGS

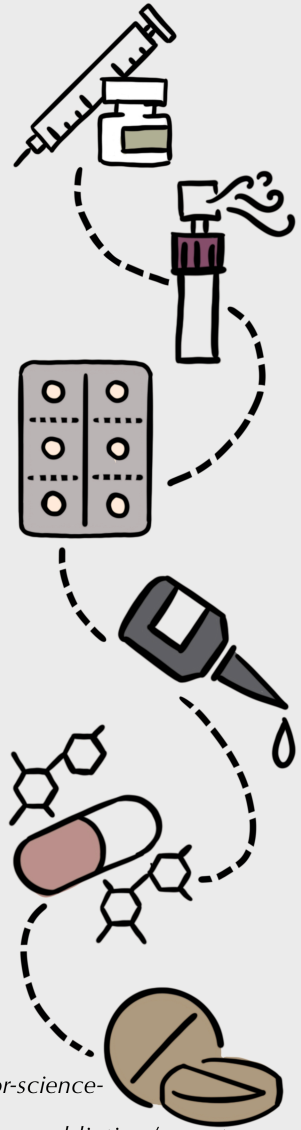
Also known as club drugs, popular street drugs can be very dangerous because the users most often do not know the chemicals drugs carry.

- **Bath Salts.** These are highly addictive and come in powder that the user swallows, inhale, or inject. These drugs became popular because they were easy to get and used to be hard to detect in drug tests. These drugs are also named bloom, cloud nine, ivory wave, lunar wave, vanilla sky, white lightning, etc. Bath salts are stimulants that increase dopamine levels, creating a sense of euphoria.
- **Cocaine.** Also highly addictive, cocaine comes in a variety of forms. The powder is snorted through the nose or injected into the bloodstream. Other names of cocaine are blow, bump, candy, Charlie, crack, coke, flake, rock, snow, and toot. It increases the dopamine level creating a sense of euphoria.
- **Ecstasy.** These come in pill form and are taken by mouth. Known also as MDMA or Molly, these are synthetic hallucinogens that produce both dopamine and serotonin altering mood and giving an energy rush.
- **Flakka.** These come in crystal form that users eat, snort, inject or vaporize with an e-cigarette. Known also as gravel, this is also a stimulant but can cause hallucinations and paranoia.
- **Heroin.** This drug comes in power form, either white or brown or sticky black, and called black tar. Users can inject, inhale, or smoke it. The street names for heroin are brown sugar, China white, dope, horse, junk, skunk, smack, etc. Heroin is a stimulant, made from opium and highly addictive.
- **LSD.** Although more popular in earlier days, it is still used in the US. Other names for LSD are acid, blotters, doses, hits, sugar cubes, trips, and windowpanes. LSD is a hallucinogen that causes “trips” that can last for hours.
- **Marijuana.** Marijuana is dried leaves, flowers, and stems of the cannabis plant. It can be smoked or eaten. Common names for marijuana are dope, joint, pot, reefer, hash, etc. It has the quality of stimulant, depressant, and hallucinogen.
- **Methamphetamines.** Meth is white powder that can be swallowed, smoked, snorted, or injected. It acts as a stimulant and is highly addictive. Some common names for meth are crystal meth, chalk, crank, and Ice.
- **PCP.** Although developed as an anesthetic drug, it can be snorted, swallowed, or smoked. It contains hallucinogenic properties.

Almost all the aforementioned drugs may cause serious health effects, including death. The list is partial, and more details can be found in the sources, including **WebMD**, **narcotics.com**, **dea.gov**, etc.

DRUG GROUPS BASED ON HOW THEY ARE USED

- **Analgesics** or painkillers are taken to relieve pain. Some analgesics are bought over the counter (aspirin, ibuprofen, Tylenol) and some prescribed by physicians (codeine, fentanyl, morphine, pethidine), and there are some that come in the form of street drugs.
- **Inhalants** are taken in by breathing through the nose or mouth. They are absorbed quickly into the bloodstream and give the user an immediate high. Common forms of inhalants as paint thinners, gasoline, aerosol sprays, and some gases. Most inhalants are depressants except for the laughing gas (nitrous oxide). Inhalants may cause excitement, dizziness, agitation, rash, etc.
- **Opioids** are made from poppy seeds or produced synthetically. These are also painkillers and give a sense of wellbeing, reduced pain, lack of awareness to the people in their surroundings, etc.
- **Party drugs** that are stimulants and often used by young people. The most common are ecstasy, MDMA or molly and GHB.
- **Performance and image enhancing drugs** like steroids (synthetic hormones) used to build muscles and peptides to stimulate the release of growth hormone also have potential for abuse.
- **Prescription drugs** that are not used safely and per instructions may also cause serious damage to the user.
- **Synthetic drugs** are not regulated, and the ingredients are unknown, therefore can be quite unpredictable and fatal.



<https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drugs-brain>

<https://www.mayoclinic.org/diseases-conditions/drug-addiction/symptoms-causes/syc-20365112>

<https://www.health.gov.au/topics/drugs/about-drugs/types-of-drugs>

Recreational drugs overstimulate the brain's reward center, and with repeated drug use, the reward center becomes less sensitive, after which one doesn't get the same level of pleasure from anything except the drug. Due to increased tolerance of drugs over time, one needs more drugs to get the same satisfaction. Dopamine creates euphoria and enables the brain to remember and repeat the same experiences, especially from the cues and surroundings where the drugs were taken.

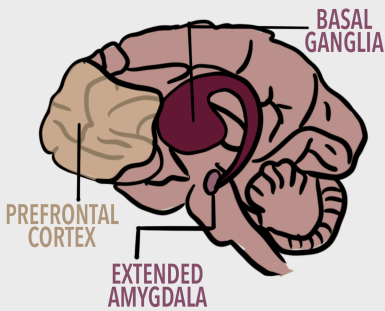
WHAT PARTS OF THE BRAIN ARE AFFECTED BY DRUGS?

Three main parts of the brain are affected by drugs:

1. *The basal ganglia*, which motivates us to do healthy activities, like eating, socializing, and exercising, but drug intake creates a feeling of unnatural high and makes the healthy activities less attractive.

2. *The extended amygdala* becomes very sensitive after taking drugs. This process makes the users feel incredibly sick, so they use the drug again to feel better.

3. *The prefrontal cortex* is for thinking and decision-making, which are affected after taking drugs. Some drugs may also affect other brain parts like the brain stem affecting heart rate and breathing.



https://nida.nih.gov/sites/default/files/NIDA_MindMatters_508_DrugsBrain_2022.pdf

IS ALCOHOL A DRUG?

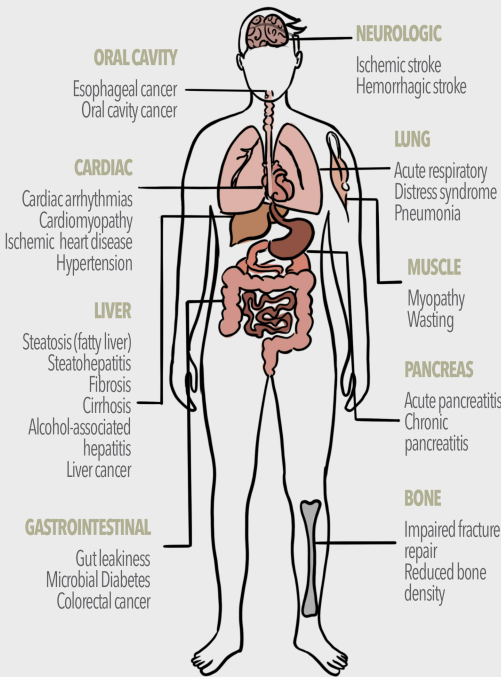
Alcohol is a depressant drug that slows down brain activity and other vital organs of the body. The use of alcohol in large quantities results in poor cognitive functioning, delayed reaction time, poor coordination, lessened inhibitions, slurred speech, and a whole lot more. Interestingly, alcohol may also work as a stimulant resulting in increased confidence levels and euphoria yet negatively affecting heart rate and blood pressure.



Source: 2021 NSDUH

Source: CDC WONDER, 2022

ALCOHOL-ASSOCIATED ORGAN DAMAGE



Drug Abuse vs. Addiction
Drug abuse is using drugs frequently with adverse effects on one's health and relationships, but eventually, one can get control of the habit. Addiction means one cannot stop abuse even if one wants to. Addiction changes how the brain functions, and the effects can last for a very long time, even after someone has stopped taking the drugs. Addictive behaviors include feeling that one must use drugs regularly, needing more drugs to get the same effects, and taking larger quantities longer.

<https://www.niaaa.nih.gov/alcohols-effects-health/alcohol-topics/alcohol-facts-and-statistics/alcohol-use-united-states-age-groups-and-demographic-characteristics>

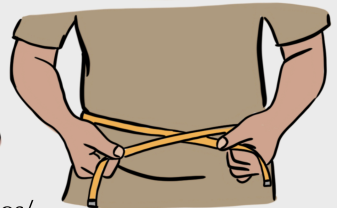
SIGNS OF ADDICTION



Sleeping/eating patterns change



Struggle to meet deadlines/fatigue/lack of motivation



Weight loss/gain



Job loss/instability/spending on drugs



Socialize less/have new friends they spend all their time with



Neglect hygiene/appearance

CRITERIA FOR SUBSTANCE USE DISORDER

The DSM-5 TR, or the official diagnostic manual of the American Psychiatric Association, lists the following features that describe a pattern of substance use leading to significant impairment or distress occurring within 12 months. Someone meeting two or three criteria is diagnosed as a “mild,” four or five a “moderate,” and six or more a “severe” disorder.

1. The substance is often taken in larger amounts or over a longer period than was intended.
 2. There is a persistent desire or unsuccessful effort to cut down or control the use of the substance.
 3. Much time is spent on activities necessary to obtain the substance, use it, or recover from its effects.
 4. Craving, or a strong desire or urge to use the substance, occurs.
 5. Recurrent use of the substance results in a failure to fulfill major role obligations at work, school, or home.
 6. Use of the substance continues despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of its use.
 7. Important social, occupational, or recreational activities are given up or reduced because of substance use.
 8. Use of the substance is recurrent in situations in which it is physically hazardous.
 9. Substance use is continued despite the knowledge of having a persistent or recurrent physical or psychological problem likely to have been caused or exacerbated by the substance.
 10. Tolerance, as defined by either of the following:
 - A need for markedly increased amounts of the substance to achieve intoxication or desired effect
 - A markedly diminished effect with continued use of the same amount of the substance.
- Withdrawal, as manifested by either of the following:
- The characteristic withdrawal syndrome for that substance (as specified in the DSM-5 for each substance).
 - The use of a substance (or a closely related substance) to relieve or avoid withdrawal symptoms.

When to seek professional help?



When health and work are negatively affected



When despite all harm, one cannot stop using drugs



Withdrawal symptoms appear after attempts to stop taking the drug

Drug care professionals can be addiction counselors, psychologists, psychiatrists, and detox specialists. The process can start by calling a local drug treatment program. Drug treatment includes detox, medication, residential inpatient, intensive outpatient, aftercare, and telehealth. Agencies not equipped to treat drug-abusing clients must immediately refer clients to a qualified treatment center.

Drug Abuse Treatment

Drug abuse treatment usually starts with a medically supervised detox, where addictive substances and toxins are removed from the body, and medication is given to treat withdrawal symptoms. For severe addictions, residential treatment may be needed, and the following services may be provided:

- Detox Treatment – allows the body to eliminate the build-up of drugs while safely managing withdrawal symptoms
- Medication Assisted Treatment – A pharmacological and behavioral approach tailored to a patient's needs.
 - Inpatient Services – treatment that requires hospitalization or health care facility and close monitoring by medical professionals
 - Rehabilitation – a structured treatment program for the substance abuse population
 - Family therapy – psychological counseling that can help family members improve communication and resolve conflicts
 - Group therapy – psychotherapy that involves several clients and one or more therapists at the same time
 - Educational classes – teaching subjects related to drugs and their effects on humans
- Stress management – teaching techniques to help people deal effectively with stress
- Motivational interviewing – techniques moving people away from indecision and motivating them to make positive decisions about life
- Cognitive Behavioral Therapy (CBT) – A short-term therapy focusing on present thoughts and beliefs and challenging and changing cognitive distortions.
- Dialectical Behavior Therapy (DBT) – A talk therapy to help people manage and regulate emotions.
- Relapse Prevention – strategies that help reduce the risk of going back to drug use after remaining sober or away from drugs
- 12 Step Recovery programs such as Narcotics Anonymous (NA), Alcoholics Anonymous (AA), Millati Islami (MI), etc.

For addictions not considered severe, outpatient treatment is possible, and allows the freedom and flexibility to live at home and receive therapy and counseling, on a part-time basis.



Research shows that prevention strategies have drastic benefits for personal and public health. Also, when protective factors, like healthy family and peer group and financial stability are in place, drug abuse and related harms are less likely to occur.

The community, parents, and teachers can take these steps to prevent drug abuse:



How do Imams perceive drug abuse in Muslim communities?

In a paper by Mallik et al. (2020), the Imams’ perceptions of individuals with SUD ranged from focusing on sin, shame, and social disruption to acceptance and forgiveness. While imams agreed judgmental language might cause stigma, they also agreed on treatment that includes non-judgmental language, encouragement to recovering, prayer, and professional referrals. DOI: 10.1016/j.jsat.2020.108224

While drug addictions are generally stigmatized in Muslim-majority populations, research providing professional treatment is emerging.

ALCOHOL BAN IN THE QURAN AND HADITH

In Islam, there is a clear prohibition against the use of drugs and alcohol. The Qur’an contains three verses that condemn the use of substances, and alcohol consumption was gradually forbidden in three phases over several years.

At first, alcohol was prohibited for recreational reasons. The Arabs consumed alcohol in parties and gatherings. Some Muslims, seeing the effect that alcohol had on a person’s cognitive faculty and social consequences, asked the Prophet (peace be upon him) to provide

them with some Qur’anic guidance, after which this verse was revealed:

“They ask you (prophet) about intoxicants (khamr) and gambling: say, ‘There is great sin in both, and some benefit for people: the sin is greater than the benefit.’” (al-Baqara 2:219)

After this verse was revealed, some of the Prophet’s companions refrained from drinking alcohol while acknowledging that it was not prohibited. Others still consumed alcohol.

The second phase of prohibition was revealed when the leader of a prayer recited the Qur'an incorrectly after a heavy drinking session. Then the verse was revealed:

"O you who believe, do not come anywhere near the prayer if you are intoxicated, not until you know what you are saying..." (al-Nisa 4:43)

In Arab culture, at the time of the Prophet, Muslims held their drinking sessions after the night prayer, giving them enough time to sober up before the dawn prayer. In one such gathering, under the influence of alcohol, a person from one tribe recited offensive poetry about another tribe that led to a fight. Then the final revelation came down, which made alcohol completely prohibited for Muslims. This verse has the final say on matters related to recreational alcohol drinking:

"O believers! Intoxicants, gambling, idols, and drawing lots for decisions are all evils of Satan's handicraft. So, avoid them so you may be successful." (Qur'an 5:90)

The previous two verses have been made ineffective regarding social drinking through a process known as the rules of abrogation (al-nasikh wa al-mansukh).

Khamr is an Arabic word for alcohol, but in Islamic jurisprudence, it refers to forbidden substances. Islamic jurists classified other intoxicants as *khamr* based on a hadith

stating, *Kullu Muskherin Khamrun, Wa Kullu Khamrin Haram—Sahih Muslim* (36/92/2003a). "Every intoxicant is *khamr*, and all *khamr* is unlawful." During the Prophet's time in Arabia, *khamr* (alcohol), was the only form of intoxicant. In another hadith, Abu Darda reported that the Prophet recommended him ten things, one of which was, *Wala tashrabanna Khamr, fainnaha miftahu kulla sharr.* "Do not consume intoxicants, for they are the key to every evil."—Ibn Majah 4034.

The Qur'an calls intoxicants the "handiwork of Satan"; as drug dependence would mean that one has succumbed their "self" or *nafs* to satanic impulses. This is echoed in the verse of the Qur'an where Allah says that intoxicants sever the relationship with Him, as well as family and the community. It urges believers to shun and reject the habit so that they may prosper in their relationships with family and Allah.

It is narrated from Ibn Umar that the Prophet (pbuh) said: "Wine is cursed from ten angles: The wine itself, the one who squeezes (the grapes, etc.), the one for whom it is squeezed, the one who sells it, the one who buys it, the one who carries it, the one to whom it is carried, the one who consumes its price, the one who drinks it and the one who pours it."—Sunan Ibn Majah, Vol. 4, Book 30, No. 3380.

In another hadith, the Prophet said, "Whoever drinks wine, Allah will not accept his prayer for forty days, but if he repents, Allah will accept his repentance..." —Sunan Tirmidhi 1862.

MILLATI ISLAMI: ADDICTION TREATMENT FOR MUSLIMS

The 12-step Millati Islami (MI) recovery program integrates the Islamic faith and addiction treatment. A group of MI members created the fellowship in 1989 in Baltimore, Maryland, and in 1992, Zaid Imani published the first book, *Millati Islami: Islamic Treatment for the Disease of Addiction*. Incidentally, Zaid Imani gave the author of this booklet a copy of the original text at an Islamic conference in Chicago in 1993, only to be used thirty years later! That book became an impetus for the booklet author to get MI classes started in ICNA Relief Offices in Seattle and New York in 2023, run by recovering addicts.

MI, or the path of peace, is modeled on the 12-step program of Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) but modified to reflect Islamic beliefs. The philosophy behind MI is that “We look to Allah to guide us on Millati Islami. While recovering, we strive to become rightly guided Muslims and submit our will and services to Allah.” See Home (millatiislami.org)

A comparison between the Alcoholics Anonymous and Millati Islami 12-step programs.

Alcoholic Anonymous 12 Steps

1. We admitted we were powerless over alcohol—that our lives had become unmanageable.
2. We came to believe that a Power greater than ourselves could restore us to sanity.
3. We made a decision to turn our will and our lives over to the care of God as we understood Him
4. We made a searching and fearless moral inventory of ourselves.

Millati Islamic 12 Steps

1. We admitted that we were powerless over our addiction and our lives had become unmanageable.
2. We came to believe that Allah could and would restore us to sanity.
3. We made a decision to submit our will to the will of Allah.
4. We made a searching and fearless moral inventory of ourselves.



Alcoholic Anonymous 12 Steps

5. We admitted to God, to ourselves, and to another human being the exact nature of our wrongs

6. We were entirely ready to have God remove all these effects of character.

7. We humbly asked Him to remove our shortcomings.

8. We made a list of people we had harmed and became willing to make amends to them all.

9. We made direct amends to such people wherever possible except when to do so would injure them or others.

10. We continued to take personal inventory and when we were wrong promptly admitted it.

11. We sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.

12. Having had a spiritual awakening as a result of these steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.

Millati Islamic 12 Steps

5. We admitted to Allah and to ourselves the exact nature of our wrongs.

6. We ask Allah for the right guidance, we became open for change, ready to have Allah remove our defects of character.

7. We humbly ask Allah to remove our shortcomings.

8. We made a list of people we have harmed and became willing to make amends to them all.

9. We made direct amends to such people wherever possible except when to do so would injure them or others.

10. We continued to take personal inventory and when we were wrong promptly admitted it.

11. We sought salat and Iqra to improve our understanding of Taqwa and Ihsan.

12. Having increased our level of Iman and Taqwa, as a result of taking these steps, we carried these messages to addicts and began practicing these principles in all our affairs.

The MI program emphasizes that addiction is due to the addicts' neglecting their souls and not worshiping Allah, and by admitting their addiction, they realize that they depend on Allah. They also recognize that being dependent on substances caused their life to become unmanageable. They argue that their addiction is due to not reading and internalizing Qur'anic guidance related to intoxicants.

MI mentions Allah instead of a "Greater Power" and contends that true belief in the powers of Allah and His infinite mercy is the only thing that can save one from addiction. The program emphasizes Muhasaba, or taking account of one's actions, which is a step towards recovery, repentance, and return to Allah. The MI embraces the Quranic declaration, "He is the one that accepts repentance from His servants and forgives sins, and He knows all that you do." Ash-Shura: 25.

THE MUSLIM ADDICTION RECOVERY PROGRAM

The manual *Overcoming Addictions: An Islamic Approach to Recovery* by Tayba Foundation explains the 12 steps in detail plus adds a section on Muslim Addiction Recovery Program developed by Justin Abdus-Salam Saalik Steiner. The section discusses additional steps to “heal the addict's diseased heart.” Based on a model like Maraqaba Durus (lessons of spiritual vigilance) taught by Shaykh Nuh Ha Mim Keller on how to tame the seven limbs, Steiner discusses the use of the following steps with prescribed exercises:



HOPE AND REPENTANCE
having remorse, intention to never return, leaving the sin



PATIENCE AND PRAYERS
guarding the prayer, 40-day chart to utilize for lessons



KILLING THE MENTAL RELAPSES
(multiple exercises)



A PURE HEART: A CURE TO ADDICTION
(guarding the stomach, the tongue, the ears, the eyes)



KNOW THYSELF:
Understanding Addiction



DRUGS WERE MY DUNYA



INWARD SUNNAH
Husn al-Dhann of Allah, Shukr, Taqwa

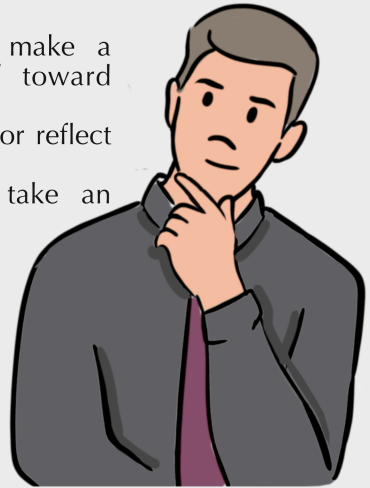


SUHBA
(Good Companionship) and Changing our Environment

AL-GHAZALI'S SIX STAGES OF SELF-PURIFICATION

Imam Al-Ghazali's six-stage process of self-purification has clear potential for treating addictions.

- Musharata ("shart" stipulation): to make a contract or agreement with oneself toward meeting identified goals.
- Muraqabah ("raqab" guard): to guard or reflect over one's actions.
- Muhasabah ("hisab" account): to take an ongoing self-account of one's actions.
- Muaqabah ("raqabah" punish): to consecrate oneself for failing to keep up with the self-agreement or contract.
- Mujahadah ("jhad" strive): to strive to overcome the desire of the lower nafs.
- Muataba ("atab" repent): to regret for making an error and vowing not to make the same mistake(s).



See book chapter by Mohr and Ahmed (in press), *Islamically integrated strategies for addictions treatment: Al-Ghazali's ilm-un-nafs, RCBT, MI, and Stages of Change*, in Haque, A. and Rothman, A. (eds.), *Clinical Applications of Islamic Psychology*, International Association of Islamic Psychology.

Educational and Recovery Resources

<https://www.taybafoundation.org/>

<https://www.dea.gov/recovery-resources>

<https://www.hhs.gov/opioids/recovery/recovery-resources-tools/index.html>

<https://nida.nih.gov/nidamed-medical-health-professionals/for-your-patients>

<https://drugfree.org/community-resources/>

<https://www.addictioncenter.com/treatment/faith-based-drug-and-alcohol-rehab/muslim/>

Drug Crisis Hotline

<https://www.samhsa.gov/find-help/national-helpline>

1-800-662-4357

<https://www.help.org/drug-abuse-hotline/>

24/7 Helpline: 1-844-289-0879

