

## Prevalence Of Faith Healing Practices In Mentally Ill Patients Attending Outpatient Of Tertiary Care Hospital

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### Abstract

#### Background:

Patients at psychiatric facilities frequently engage in faith healing. This study was done to assess the prevalence of faith healing practices in mentally ill patients and its relationship with their socio-demographic data and diagnosis.

**Methods:** In this study, 200 mental patients who were attending Psychiatry OPD at a tertiary care facility in Western India, religion healing practises were examined.

#### Results:

Regardless of diagnosis, 58.5% of patients in this study consulted a faith healer. Males with intermediate and secondary education who were young adults (35.1–10.8 years old) and the majority of participants were those who hadn't sought medical attention before their visits. The most common mental disorders among research participants were psychotic, bipolar, and dissociative; the remainder suffered from depression or anxiety disorders as well as other psychiatric conditions.

#### Conclusion:

Patients still go to faith healers even if psychiatric therapies are available. These have implications for how psychiatry practises. Focus should be placed on educating patients and their families about common myths about the aetiology and management of psychiatric disorders.

**Keywords:** Faith healing, Psychiatry, India

### Introduction

Mental disorders continue to be viewed as “Non-medical diseases” that were believed to be caused by invisible and abstract elements in many cultures<sup>1</sup>. Faith healing methods are frequently employed, particularly in underdeveloped nations. According to WHO, the phrase “Traditional medicine” refers to a variety of indigenous medical practises as well as Traditional Medicine systems including Traditional Chinese Medicine, Indian Ayurveda, and Arabic Unani Medicine<sup>2</sup>. Aboriginal ideas about wellness and health encompass not just the physical but also the psychological, spiritual, and emotional facets of wellbeing. Through the use of traditional medicine, healing rituals, and practises, this holistic approach to health is widely acknowledged and used in aboriginal communities<sup>3</sup>.

In the past, people referred to as “faith healers” were thought to be the foremost authorities on holistic medicine. They were highly sought after by the community because they were thought to have special abilities that may help people maintain a healthy balance<sup>3</sup>. Faith healers are subject to a wide range of opinions, from unquestioning adoration to intense scepticism without sufficient evidence.

Faithholistic conceptions of health and healing techniques are becoming more popular around the world, despite historical attempts by mainstream culture to eradicate them and replace them with Western medical concepts of health<sup>3</sup>. Up to 80%

of the population in Africa uses TM to assist with meeting their healthcare needs. Due to historical events and cultural beliefs, populations in Asia and Latin America still use TM<sup>2</sup>.

The cost of traditional medicine (TM) and complementary and alternative medicine (CAM) is not only large, but it is also rising quickly in many regions of the world<sup>2</sup>. Faith healers and biomedical professionals both provide primary care in the majority of African nations, with the former frequently being more accessible<sup>4-6</sup>.

Faith healing practises are recognised as givers of curative, rehabilitative, and restorative benefits in India where they coexist alongside modern mental health care. Faith healing modalities and methods are crucial but divisive in the provision of mental health services<sup>7</sup>. The psychological state of those seeking assistance at these religious facilities or the therapeutic effects of healing have not been thoroughly studied in research. Instead of acute psychotic illnesses, it has mostly concentrated on possession and non-psychotic disorders<sup>8</sup>. In India, there haven't been many research focusing on using faith healing treatments for psychiatric patients. This study was done to assess the prevalence of faith healing practices in mentally ill patients and its relationship with their socio-demographic data and diagnosis.

## Materials and Methods

### Study design and setting

A descriptive cross-sectional study was carried out at Out-Patient Department of Psychiatry in MGMCH, Jaipur from 1<sup>st</sup> June 2019 to 31<sup>st</sup> Aug 2019.

### Data Collection

Data collected included socio-demographic details, visit to faith healers before consultation and the diagnosis as made by consultant psychiatrists according to DSM 5.<sup>9</sup> Regardless of their diagnosis, 200 consecutive OPD patients were chosen for the study. The questionnaire was used to conduct an interview with the patient or any attending family members. This contained data on age, sex, education, religion, family structure, place of residence, and monthly income. A professional psychiatrist used a clinical interview to determine the individuals' DSM 5 diagnoses. It was noted how long the disease had lasted. Everyone who entered the hospital was questioned about whether they had previously sought the advice of a faithhealer. Either "yes" or "no" was written next to the response. The number of visits, costs associated with the faithhealer's involvement, and whether or not they felt it was successful were also noted.

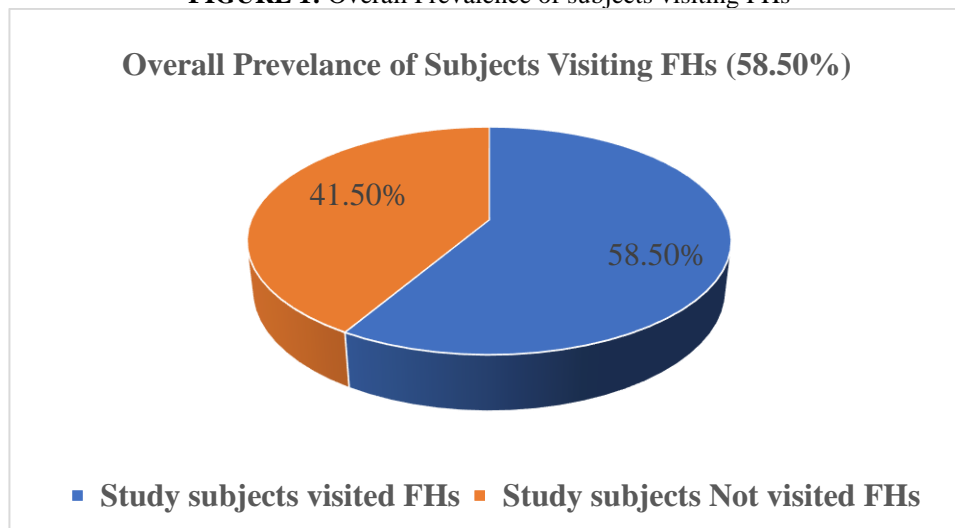
### Statistical Analysis

Data were collected through questionnaires and analyses were done by Descriptive Statistical Techniques.

### Results

In the period of 3 months, a total of 200 cases were interviewed at Out-Patient Department basis. It showed that almost 58.5% of subjects visited to Faith Healers (Figure 1).

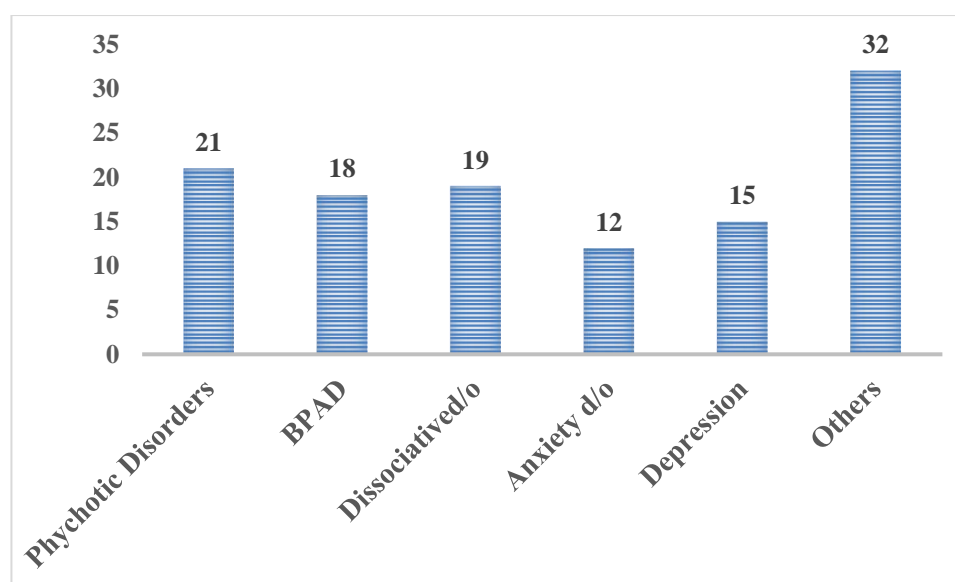
**FIGURE 1:** Overall Prevalence of subjects visiting FHs



**Table-I:** Distribution of socio-demographic variables of study subjects visiting FHs.

| Variables                      | No. (%)     |
|--------------------------------|-------------|
| Males                          | 71 (60.68%) |
| Females                        | 46 (39.31%) |
| Married                        | 73 (62.39%) |
| Unmarried                      | 44 (37.60%) |
| Unemployed                     | 74 (63.24%) |
| Employed                       | 43 (36.75%) |
| Monthly Income<br>< 10,000 INR | 57 (48.71%) |
| > 10,000 INR                   | 60 (51.28%) |
| Urban                          | 41 (35.04%) |
| Rural                          | 76 (64.95%) |
| Education :                    |             |
| Illiterate                     | 23 (19.65%) |
| Primary                        | 37 (31.62%) |
| Secondary                      | 26 (22.22%) |
| Graduate                       | 14 (11.96%) |

**Table 1** showed that the most participants were young adults ( $35.1 \pm 10.8$  years) and males with intermediate and secondary levels of education who had not sought medical help prior to their visits.



**FIGURE 2:** Prevalence of different lifetime/current psychiatric illnesses assessed by DSM-5 among the subjects visiting FHs.

Figure 2 showed that the psychotic, bipolar and dissociative disorders were the most prevalent among the study participants; Rest were affected with depressive or anxiety disorders and other psychiatric disorders.

## Discussion

In our investigation, we discovered that 58.5% of patients with some form of mental disease had contacted a faith healer prior to entering a hospital for mental health. As a result, every second patient we encounter in a hospital setting has already sought the advice of a member of an indigenous and culturally appropriate system of practise or treatment. These numbers are extremely high and coincide with those from the WHO study on conventional medicine<sup>2</sup>. According to this study, 40 to 80 percent of people in poor nations prefer Traditional medical practises<sup>2</sup>. It has been seen that patients suffering from mental illnesses tend to access 'faith healers' first<sup>10</sup>. In our study the prevalence of faith healer visits came to be 58.5% which is close to the study by Jiloha et al reporting 56% psychiatric patients attributing their illness to supernatural forces (ghosts, evil spirits, and witchcraft).<sup>11</sup> Also a study done by Ramakrishna Biswal et al reported nearly 66% of the patients consulting multiple healing points.<sup>12</sup> A high proportion of the FH visitors have diagnosable mental illnesses.

In normal hospitals, psychiatric consultations are free, but the appointments are brief and there is little time to discuss symptoms or get information about health issues. Ancestors and witches are frequently blamed for causing mental diseases, which are frequently seen as sources of bad luck. While these conditions may be considered as having magical, social, physical, or religious roots, they are rarely viewed as diseases under the Western biomedical paradigm<sup>13</sup>. Patients may believe that these belief systems are connected to the rituals used by faith healers to promote overall wellbeing.

## Conclusion

Patients still go to faith healers even if psychiatric therapies are available. Focus should be placed on educating patients and their families about common myths about the aetiology and management of psychiatric disorders. Additionally, there is a need to increase the price and accessibility of psychiatric care.

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