INTRODUCTION

Islam, if it is (mis-)construed as a monolithic set of religious dogma, does not say a great deal about disability and deafness. Even the statements that can be found in a few revered texts may be of equivocal interpretation, often best understood figuratively or metaphorically. Not surprisingly, these features are shared with the other 'Abrahamic' monotheisms, Judaism and Christianity. Yet the enormously varied historical and current practice and experience of Islam, by Muslims across the Middle East, Africa, South Asia, and further afield, does meet and address many issues and realities of disability and deafness in everyday life. The encounter may be in folklore, in legal rulings, in charitable and spiritual practices, in medicine and the healing arts, in philosophical debate, in humour, and in many other ways, with some reference to texts in the Qur'an, the life and teaching of the prophet Muhammad, the formulations of early schools of thought on Islamic law and welfare provisions, and modern expositions of these sources. Some of these everyday practices are again similar to those of the other major monotheisms; some are more distinctively Islamic.

About 210 items are listed below, in which aspects of Muslims' lives and practices appear in connection with disability or deafness. This is an idiosyncratic choice of items, accumulated during some 25 years of studies. It by no means exhausts the topic, but perhaps sketches something of the range. Many of the writers are Muslims. The locations are mostly in the major regions of Muslim population, or in western academic studies of classical Muslim regions. Some studies on disability have also been made by Muslims living as minorities in western countries, or as visiting research students. While many of these are interesting and perceptive, there is also a tendency to take a defensive or reactive stance, either minimising differences so as to be more easily assimilated in the host society, or perhaps asserting and exaggerating differences, for various reasons. Such studies may be authentic for parts of the Muslim diaspora, and might indeed become the 'cutting edge' of the future. They may also run some risk of misrepresenting the traditional and majority understanding and practice of Islam.
Some more general items are included on how 'suffering' has been understood in Islam; yet it should be borne in mind that very many disabled people prefer to be seen as simply 'living with' their impairment or disability, rather than being in a 'suffering' or 'oppressed' state. A few studies are listed on abortion in Islamic law, where variations exist from country to country, and one of the grounds for abortion may be some 'deformity' in the foetus. This is not the happiest branch of law in any country or religious context; but because it is often a contested area, it is also one that elicits the expression of conflicting views about the prevailing social attitudes and responses to impairment in infants and the prospects for living a life with disability. It is also necessary to look at some items on all aspects of ordinary childhood, from heredity through foetal development, normal child development and psychology, etc, in order to understand some of the differences that arise when a child has an impairment or disability.

**REPRESENTATION AND GENERALISATION**

It is quite difficult to make general statements about disability and disabled people, or about any of the world's major religions, without annoying either some scholars, or some lay believers, or some people with disabilities, or some feminists, or all of these. The items below, and the annotations, are certainly not intended to give offence, nor to imply anything derogatory about Islam or about Muslim believers, nor to annoy disabled people, whether Muslims or not. Items are listed for their material relevant to impairment, disability, deafness, and Islam, and social responses to these phenomena. The opinions expressed by authors are not necessarily approved or endorsed merely by the fact of listing them. Some common historical behaviours would obviously be unacceptable to many people now, of whatever religion or philosophy. If they are listed below, they are part of the historical evidence of how people may have behaved in past times. (People of earlier times would also undoubtedly find some aspects of modern behaviour quite unacceptable). Similarly, historical words such as 'mute', 'crippled', 'deformity', have now mostly been replaced by other terms; but they are shown here in their historical context.

Of course, it is true that the practice and behaviour of Muslims (as also of Christians, Buddhists, Jews, or adherents of any other religion or philosophy), at particular times and places, has often fallen short of the highest standards taught by each faith or belief; and both belief and practice are usually mixed up with some secular practices that are less than ideal. To portray the authentic, living reality of religious belief and practice, including lapses and conflicts, may displease some readers who would prefer that an idealised picture be maintained. It is not easy to balance the different preferences, as already noticed in paragraphs above.

For example, the question arises, whether to include or exclude the account of disabled people casually seen by Edward Lane in Egypt in the 1830s. Many foreigners passed
briefly through 19th century Egypt, and mentioned blind and other disabled people. Lane was unusual in that he had a significant period of residence, he was diligent in studying Arabic, and he was keenly interested in Islam. He clearly made considerable efforts to understand how Egyptian people lived, what they believed and how they practised Islam, and to cross-check his observations with his teachers (one of whom was an elderly Sheikh who was nearly blind). Lane recorded what he had thus learnt, in a densely factual but lively and readable style, mentioning some human flaws but not lacking in respect for culture and customs different from those of his native England. After many years of being widely read, without noticeably being charged with errors or misrepresentation, Lane was sharply criticised, with dozens of others, by Edward Said in his diatribe against 'Orientalism'. No doubt Lane, like every other author, had his unconscious biases. He did not necessarily portray in the most sympathetic light all the evidence he saw of Islam and of Muslim everyday life. Yet it is not hard to see that Lane had great pleasure in living among Egyptian Muslims, noting their human strengths and weaknesses and learning the great variety of their thoughts and ideas, amidst one of the world's oldest and most interesting cultures. His notes on this topic are therefore listed below; yet some readers may wish to bear in mind the 'Orientalism' critique.

WOMEN AND DISABILITY

If one were to survey opinion across the Arab world, about who does the practical, everyday work of caring for disabled children, or for elderly people with the infirmities of age, there can be little doubt that the participation of women would be very prominent. The mothers, sisters, wives, daughters, aunts, female cousins and in-laws can be found at home, tackling these duties of practical caring, feeding, washing, providing clean clothes and house, making comfortable. Perhaps as many as half of all disabled adults and children are also female. Yet Amira Abd el-Khalek (2004, listed below) found that, among the current disability literature of Egypt, men and children were given some attention, but women were invisible. In the present bibliography, women contributed about 20% of the items listed; and a few items focus specifically on women and disability. It is doubtful whether any items from women, or about disabled women and Islam, would have been available to list 25 years ago, so a little progress has taken place. Should the quantity be somewhere between 40% and 60%, to give a more equal representation along with men? Perhaps a better target would be that the views and experiences of disabled women, and of women caring for people with disabilities, and of women providing professional services relevant to disability, should gain a stronger representation in everyday life, after which they are more likely also to be reflected in the literature. Certainly, 20% is more appropriate than nothing; but much more can be targeted.
CAUTIONS

International relations, between population groups broadly defined by different faiths, beliefs and historical memories, have obviously been under strain in the news media in recent years; though it is also true that the media rarely focus on the millions of daily small acts of kindness or mutual tolerance between ordinary people of different religions or none, across the world. Any title beginning “Islam and ...” may therefore rightly be regarded with some caution, to see if the aim is to increase carefully researched and balanced knowledge, or to increase emotional reactions, or some other agenda. The present bibliography is one of a series studying disability and responses to disabled people, in mostly 'non-western' populations and geographical areas. The outcomes, so far, suggest that far more has been written on these topics, across Asia and Africa, than has been recognised either inside or outside these regions; and there is much to be learnt from the recorded historical experiences. Each region, each religion, has some admirable contributions to make to the human heritage in the field of disability. Each population also has had its share of treating people with disabilities in ways that are flawed, often in contradiction of religious admonitions. A comprehensive bibliography on these topics might run to a hundred thousand items, so the present efforts are merely a brief introduction to what many people have written, subject to the fallibility of one compiler.

The annotations of items listed below must not be regarded as a substitute for reading the actual works listed! The views of textual commentators cannot substitute for the original texts on which they are commenting! All translations should be regarded with caution!

Omission of material in languages other than English and French (with a few exceptions) is a regrettable result of the compiler's limitations. There are of course many works in other languages that could illuminate the topic. There is also certainly a great deal more in French than is represented here. There are other editions and translations of many of the ancient texts, and new ones appear each year that will be worth consulting, or might become the definitive edition. The present bibliography is a work permanently 'under construction'. It is hard to know where to draw the line, particularly with the growth of inter-religious interest and publications on suffering and on ethical questions that have some disability implications.

INTERNET

A small, token number of web site locations are shown, some for material that has both print and web publication, and a few that may be only web published. A keyword search with combinations of e.g. 'disability' 'deafness' 'Islam' 'Muslim' or similar words would bring up hundreds of thousands of pages of variable quality, including some very offensive materials. No other site (using English) currently seems to offer an annotated
bibliography such as the present item. However, there has been an increase in availability of search tools for people interested to know, for example, what the Qur'an 'says' about various topics, in translation. Thus, for example, a keyword search for 'deaf' at http://www.searchquran.org shows 17 Qur'anic verses, with their location, containing the word 'deaf', in a variety of English translations. A few sites offer translation and some commentary, including some parts of the Qur'an that may be relevant to disability and deafness, usually by Muslim teachers who have training and accreditation for the exposition of religious teaching. However, it is not the purpose of the present bibliography to offer a guide to such web sites.

TECHNICAL NOTES

The Annotations. In most cases these do not attempt a full abstract of the listed item, but indicate specific pages where disability material appears, or bring out what the compiler considers to be some interesting point(s). In some annotations, remarks in square brackets indicate the compiler's own attempted explanation, beyond what the author wrote. This distinction should be carefully observed! In some cases, a single anecdote is highlighted, to illuminate some attractive feature of Islamic practice.

Transliteration. Authors have followed many different schemes. No attempt has been made to harmonise or unify them. Regrets are offered to those who would prefer uniformity, or some particular usage. Most diacriticals that are not standard in European languages have been omitted, because of problems with different codes in screen readers.

Dates. These are given on the 'Christian Era' calendar, which seems to be well understood across the electronic world. However, the items have not been ordered by date or partitioned by period. The Qur'an, and Jahiz, and the Hedaya of Marghinani, are all texts in current use, so they sit together with texts from the 20th and 21st centuries, though of course all texts are not considered to be of equal value.

Website URLs. These were functioning when checked in July 2007.

Apologies. The main apologies to be made are that very few items appear in Arabic, Turkish, Persian, Urdu, or other Asian languages; and the voices of disabled people are poorly represented. The full flavour of disability and deafness within the Islamic world will not appear until a great deal more scholarly work has been done on primary sources in the relevant languages, of which the present compiler is largely ignorant. Some might think it better to offer nothing, rather than listing work that is mostly in European languages and conceptual worlds. Yet even through translations, some of the flavour, originality, directness and subtleties of Islamic thought in this field can be communicated. The compiler believes that the rest of the world may benefit from hearing at least an echo of that major cultural contribution.
Acknowledgements. Some of the items in this bibliography have appeared in the compiler's earlier bibliographies during the past ten years, such as those on disability and social responses in the Middle East, or on deafness in South and South West Asia, or more generally on religions and disability across Asia and the Middle East, sometimes with similar annotation; and some specific people or libraries have been acknowledged there. The primary debts are of course to all the authors, translators, editors and publishers whose work is listed below. For the present specific work, I am particularly appreciative of a small number of people who read through the bibliography at earlier stages and responded with comments, such as M Ghaly, N Khan, C Miles, K Richardson, K Sprick, A Tareen; and also to J Swinton, who first expressed an interest in hosting it on this website. However, in view of the nature of the bibliography, and the possibility of errors, omissions or idiosyncratic annotations, it should be made clear that 50 or more items have been added since these and other colleagues saw the bibliography, so they bear no responsibility for what now appears.

MAIN ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>c.</td>
<td>circa (approximately)</td>
</tr>
<tr>
<td>ed, eds</td>
<td>editor(s)</td>
</tr>
<tr>
<td>p. pp.</td>
<td>page(s)</td>
</tr>
<tr>
<td>transl.</td>
<td>translation, translated (by)</td>
</tr>
<tr>
<td>vol. vols</td>
<td>volume(s)</td>
</tr>
<tr>
<td>[ ]</td>
<td>In some annotations, remarks in square brackets indicate the compiler's own attempted explanation, beyond what the author wrote. In other instances, square brackets indicate some uncertainty.</td>
</tr>
</tbody>
</table>

BIBLIOGRAPHY

ABBAS KHAN [c.1580] Tarikhi Sher Shahi. In: HM Elliot & J Dowson (eds) (1867-1877) The History of India as told by its own historians. The Muhammadan period, vol. IV, reprinted 1976 & 1979, Lahore: Islamic Book Service. pp. 423, 549. Under the administration of the Afghan Muslim leader Sher Shah Suri (c. 1472-1545), whose brief rule in the 1540s extended from Eastern Bengal to Western Punjab, it was reported that “Destitute people, who were unable to provide for their own subsistence, like the blind, the old, the weak in body, widows, the sick, etc, to such he gave stipends from the treasury of the town in which they were resident, and giving them the expenses of their journey sent them away.” [Sher Shah Suri thus followed, in
India, a pattern of Islamic welfare provisions that had flourished some centuries earlier in the Arab civilisation. The flaw in his system seems to have been that the indigent or blind person needed to gain Sher Shah Suri's ear in person, for a stipend order to be issued to the local town treasury. Had Sher Shah lived longer and consolidated his rule, his undoubted administrative gifts, energy and perseverance could well have devised a more durable, effective and decentralised system.

[Comparative study of people who are 'mute' or 'dumb', in Islamic law. (NB Ghaly, see below, lists this as a PhD dissertation, 1997)]

(See note in Introduction). The daily lives are described of four physically disabled women, across the socio-economic spectrum in Egypt, living in widely different communities. The author looked at a number of variables in the ways in which these women's lives and disabilities were socially constructed, such as “class, age, education, religion, power relations, time and space”; yet she found that these were all “intertwined and interchangeable. They are all related to one another, and in this case, they were all overridden by the fact that these women are disabled” (p. 94). The apparent context of their lives is a Muslim country, patriarchal power structures, and 'third world' medical services; yet Islam is almost invisible in the constructions studied here. Religion is barely mentioned, except in the case of the one woman belonging to a rural Coptic Christian community.

[Not seen. On the web, the author states (in French) that he has summarised the instructions from Allah concerning disabled people, and hopes that this will enlighten them and their families and carers, about the teachings of Islam in their case.]

Remarkable book by an Iranian emigré, built around a deaf character, Aga Akbar, who was a carpet weaver in a village of Persia, and later moved to the modern world of Teheran. Aga Akbar is the narrator's father, and together they communicate by 'home sign', which the son interprets to his father's rural world. Reflections on the culture, religion and history of Persia / Iran are cast in the format of a novel about various kinds of communication. The tale is imbued with the Qur'anic verses, Persian poetry and ceremonies of rural Muslim life, in a world that begins to change rapidly under political and religious pressures.

`ABD UL-ILAH Bin ʿUthman ash-Shayi` (1997) [compiler] *Al-Lu'lu' uth-Thamin Fatwa 'l-Mu`awwagin* [Precious Pearls of Verdicts Concerning the Disabled], Riyadh: Dar as-Sumay’i.
Cited as source by Al-Jibaly (1998), see below.

This chapter aims to address issues concerning some different principles and techniques of psychotherapy as practised in Arab-Muslim nations and cultures. Some examples of difference are: the strongly patriarchal nature of such societies; some client resistance toward insight-oriented therapy; the opportunities of integrating specifically Islamic spiritual support and reassurance; the reality that the “basic psychosocial unit is not the individual but the family, the group and the whole community”. Case histories illustrate the difficulty of finding solutions to some relationship problems generated by rapid modernisation of some, but not other, aspects of Arab Muslim societies.


Cited as source by Al-Jibaly (1998), see below.


Introducing the cultural background of Iran's provisions for disabled children and young people, Afrooz discusses in some detail the provision of Islam in this respect, e.g. pp. 94-102, 107-108, and the consequent duties of the state, the local community, the family and the individual Muslim.


Brief article differentiating some views and practices commonly found in Muslim-majority countries, actually based on indigenous traditional beliefs, from the orthodox Islamic teaching based on a few verses in the Qur'an and sayings of the prophet Muhammad.


These essays were written over 20 years by a man who became one of Pakistan's most senior psychologists, also serving as a university vice chancellor and Federal Education Secretary. He endured the conflicts of “a man who has been reared in the Western intellectual tradition” and has “owed allegiance to one Western god after another” (p. 1), while becoming aware that the cultural roots and traditions of his own country, and of the historical Islamic world, had many truths and strengths to offer to the psychological understanding of the human condition. That contribution had been largely ignored, or reduced to anecdotes and decorative snippets. Ajmal reflects on what the Muslim savants and Sufi teachers wrote, how their teaching can be understood in the later 20th century, and how far they address universal concerns of continuing relevance to the widespread modern disabilities of mind, soul and spirit. Ajmal’s professional interest in cognitive development also brought a theme of children's perceptions of life, truth and relationship into several essays.

AKSOY, Sahin (2005) Making regulations and drawing up legislation in Islamic
countries under conditions of uncertainty, with special reference to embryonic stem cell research. *Journal of Medical Ethics* 31: 399-403.

Gives a succinct description of the sources of authority and methods by which moral and ethical issues are discussed among Muslim jurists and scholars, and a consensus may be reached for legal rulings on new issues. As a professional bioethicist, Aksoy examines the Qur'anic basis, and some hadiths, for understanding the status of the human embryo and fetal development, upon which a number of important ethical decisions rest. Among the most important Qur'anic references are: 32 (as-Sajdah): 8-9; 23 (al-Mu'minun): 13-14. Two reported sayings of the prophet Muhammad, in al-Buhkari's collection, further explain how the embryo is formed and established. The available texts may suggest either that 'ensoulment' of the embryo takes place 120 days after conception, or between 49 and 55 after conception, with some consequences for issues of stem cell use, and others for questions of abortion.


News item on use of Sign Language at a mosque in Turkey.

ALDEEB Abu-Sahlieh SA (1994) *Les Musulmans face aux droits de l'homme.* Bochum: Verlag Dr Dieter Winkler. [Note: Author spells his own name as above in his reference list. The title page has: Abu-Salieh]

Detailed, wide-ranging and well referenced work on historical understandings of human rights in Islam and current interpretations and legal practice across the Arab world. In a chapter on Abortion and Birth Control (pp. 42-52), the classical Jurists are shown to have had different position on abortion, from total prohibition, to permission up to the 40th or the 120th day of pregnancy, or at any time in a special case, e.g. serious risk to the mother. Current Arab laws are mostly prohibitive, but Tunisian law reportedly permits termination in the first trimester. A source states that South Yemen permits abortion when a family with three children has no means to raise further children, or in case of fetal malformation (p. 47). A fatwa of the Academy of Muslim Law, of the World Muslim League, based on legal advice of Muhammad ‘Ali Al-Bar, issued in 1990, reportedly permits abortion of a deformed fetus in the first 120 days of pregnancy, but no later unless the mother's life is at risk.


Carefully drawn pictures of childhood in village Egypt. Chapter 10 (pp. 202-213) reflects on “Indigenous learning and teaching”, and describes daily activities in Islamic village schools of Silwa - where three of the six teachers were blind men. The village teacher, “especially if he is blind, relies a great deal on one or two monitors (‘areef)” (p. 208). The curriculum was almost entirely learning the Qur'an, and was under challenge from the compulsory education at government-sponsored schools with a broader and more modern curriculum. Parents often withdrew able-bodied boys to help with agricultural work; however, “Blind boys find in the Kuttab a place where they can absorb themselves in learning the Koran, and it is mostly these blind boys who remain in the Kuttab until they finish memorizing the whole of it” (pp. 212-213). In Appendix XII, on ability testing of village children, a few “mentally deficient” individuals are noted, whom the villagers regard as holy fools.
Often known as the “1001 Nights”, many stories in this collection probably originate in India or Persia, and are associated with the story-teller Scheherazade beguiling Sultan Schahriar in order to save her own life and those of many other young women, possibly in the 9th century. The stories are well embedded in the ethics and morality of Middle Eastern life, with features of Islam prominent, but also a few Jewish and Christian characters. Some disabled people appear incidentally; a few are more noticeable, e.g. the disfigured Amine (pp. 66-80); the Little Hunchback (222-228) leading to tales of people with hands severed, and then to the hunchback Bacbouc, his toothless brother Backbarah, blind brother Bacbac, and brother Schacabac with a hare lip (229-306); and the blind man, Baba Abdalla (729-736).


The current legality of abortion, in countries where the Qur'an and the practice of the prophet Muhammad are dominant authorities, varies with the interpretations of religious scholars. Different views are shown (p. 79) on whether a deformity in the fetus, discovered before 120 days of pregnancy, may justify abortion. (This section relies on evidence collected by Rispler-Chaim, 1999, see below). The author classifies current laws in various Muslim states as conservative, lenient or liberal.


Gives a background of traditional and modern practice in treating mental illness in Malaysia, a Muslim majority nation. Describes the authors' practice of religious psychotherapy with Muslim patients. It is emphasized that they do not preach or exhort, but “work together with the patient to find the patient's values using the Qur'an and Sunnah (prophet tradition) as guidance.” Support of the patient's own ideals and valued religious practice seemed to generate more insight and motivation (compared with a control group). During the dialogue, computer access to a Qur'an translation in the Malay language facilitated discovery of appropriate suras. There was some success in showing patients how to “know the Islamic coping skills”, so that they could manage their problems for themselves, whenever they arose.


Sketches the roots of psychiatry and mental health from antiquity, in the region later understood as the 'Arab countries', giving a background of Islam, mental health and the Qur'an, psychological approaches, traditional psychotherapeutics, interpretation of dreams, and religious techniques and therapies.


Baghawi's selection of hadiths (11th century) became popular after Tibrizi's 14th century revision. Some mention disabilities and treatments, e.g. Blindness & eye problems (pp. 36, 138, 217, 221, 231, 397-99, 405, 532, 663, 708-709, 745, 878, 889,
Leprosy (pp. 98, 397-99, 526, 619, 955-56, 1221, 1379). Epilepsy, idiocy, possession (pp. 329, 526, 638, 697, 931, 945-54, 1033, 1220, 1260, 1291). Miscellaneous conditions (pp. 5-6, 36, 313, 508, 582, 664, 689, 763, 925, 934, 945-54, 997, 1274, 1345). Hadiths show the prophet Muhammad regularly using finger and hand signs (pp. 594, 622, 628, 856, 913-14, 959-60, 1031-32, 1032, 1035, 1108, 1125, 1336). For example, he was in the mosque on one occasion when “a man whose head and beard were dishevelled entered, and God's messenger pointed his hand at him as though he were ordering him to arrange his hair and his beard”, so that the man retired and came back with a more orderly appearance (p. 938). Other symbolic finger or hand signals made by Muhammad are described a little more closely.

The interpretation of hadiths, and study of their sources, authenticity, and the situations in which they may have arisen or been brought to prominence, is a complex field that has occupied Middle Eastern scholars through many centuries. The disability-related hadiths listed here (in translation) should be approached with some caution. Many of them seem to suggest social responses existing in earlier centuries of Islam, and they probably helped to shape attitudes in various ways.

BARANI, Ziauddin [later 14th century] Tarikh-i Firoz Shahi. In: HM Elliot & J Dowson (eds) (1867-1877) The History of India as told by its own historians. The Muhammadan period, vol. III, reprinted 1976 & 1979, Lahore: Islamic Book Service. pp. 107-108. Sultan Balban (regn. 1266-1287), while restoring the economy of Lahore and region, learnt that some old military grantees of land “were unfit for service, and never went out”, so he ordered reforms. (Decades earlier these veterans had received land as an income, in return for continuing military service when required; but such service had virtually lapsed as they were “old and infirm”, some had died, others were sending bribes etc). The plans were not ungenerous -- but those concerned feared the worst and sent a senior official to plead for them. This man took the line that he too was “an old man and feeble, and if old men are to be rejected in the Day of Judgement, and are to find no place in heaven, what will become of me?” The reform was duly revoked, and this early Islamic example of an ‘elderly and disabled veterans pension’ continued.

AL-BASIT, Musa (2000) Huquq al-Mu`awwaqin fi al-Shari`a al-Islamiyya [Rights of the disabled in the Islamic Shariah.] Um el Fahem: Markaz al-Dirasat al-Mu`asira. [Not seen. In Dr Rispler-Chaim’s “Disability in Islamic Law” (listed below, 2007, see pp. 123-134, plus notes and references pp. 152-153) her English translation of “a portion” from Dr al-Basit's work appears, with permission. That amounts to a wide-ranging essay of more than 6000 words, addressing definitions and variety of disability, duties and liabilities of disabled persons, Islamic ways to prevent disability, moral, spiritual and psychological care afforded to disabled persons within Islam, some notable Muslims having disabilities, material provisions for disabled people, and references in the Qur’an, hadiths and other literature.]


History of service development under various regimes in the Sudan from 1820 onward. A brief review of traditional practices (pp. 35-44) includes mention of bone-setters, amputation with cauterisation, Koranic therapies and other methods with mental illness, from the Arab heritage (pp 38-39).

Version appears also as a conference paper: http://www.disabilitystudies.net/dsaconf2004/fullpapers/bazna_hatab.pdf

The authors compare traditional interpretations of relevant texts with some modern perspectives on disability. They examine the meanings of some disability-related words as given in the early 14th century *Lisan ul-Arab* (Beirut: Dar Ehia al-Tourath al-Arabi) by Ibn Manzur [c. 1230-1311], a massive lexicon compiled on the basis of earlier dictionaries.


Literary analysis is directed at the novel *Tombéza* (by Rachid Mimouni, 1984, Paris: Laffont), in which the principal character is deformed in body and further disabled by social rejection, in Algeria of the 1930s and 1940s. While societies in the Maghreb tend to be “more forgiving and accommodating when physical abnormalities are borne by a male”, yet this relief is denied to Tombéza. The human sufferings are played out against a background of traditional Islamic societies in a process of involuntary modernisation, under both internal and external pressures.


The decennial census of India collected information on infirmities, such as blindness, deafness, mental defects, between 1871 and 1931, and reports were made on differences in distribution of infirmities by location, caste, religion, gender etc. Analysis in the 1920s of data on deaf-mutism (among other infirmities) in 9.36 million people of Hindu, Muslim and Sikh affiliation in the 1921 Census of Punjab failed to find a specific relationship between consanguineous marriage and deafness. The present study controlled for major confounding factors, such as the high incidence of iodine deficiency disorders in some localities with very high Hindu population, and found striking differences in the patterns of “deaf-mutism” between the two major religious communities, attributable to the differences in marriage practices.


Includes a description in the 17th century of the 'mutes' in the seraglio, the deaf male servants who customarily served the Sultan (and deaf women serving in the harem), whose sign language became a common means of communication in the palace, probably from the middle of the 16th century. Bobovius notes that sign language was taught by older deaf people to the younger, at a specific location, and it was sufficient for communicating matters of any complexity, including the holy texts and the prophets of Islam. (pp. 33-34).
An innovative psychiatrist, writer and humanist, Boucebci pioneered in the 1970s a 'middle way' for people with mental disabilities and learning difficulties, by basing a form of Community Based Rehabilitation in low-cost, locally controlled, 'neighbourhood centres' in urban Algeria. These activities, among his many involvements in psychiatry, were not described in terms of Islam. They are listed here as exemplifying the humane, tolerant and compassionate sides of Islam shown by a Muslim professional of large vision and practical concern. [Boucebci was murdered in 1993 by political extremists.]

Based in Morocco, Professor Bourquia reviews some Islamic viewpoints on disability, the responses of families having a child with disability, the duties owed to the disabled person by the Muslim community, the religious duties of disabled adults and children, and also some traditional, cultural influences in the Arab Muslim world which may be positive or adverse in the upbringing of children with disabilities. Governments have tended to rely on families and non-government organisations to make their own efforts to find help and information, and to overcome any difficulties or social barriers. Government commitments and legislation have begun to increase in recent years, but the gap still exists between official rhetoric and everyday reality.

With relevance to the histories of signing by deaf people, see pp. 269-272, on “Du langage par gestes et signes chez les Arabes”, derived (with much abbreviation) from I GOLDZIHER (1886) Ueber Geberden- und Zeichensprache bei den Arabern. Zeitschrift f. Völkerpsychologie 14: 369-386. While mainly on signing within the historical Arab world, there is some discussion of traditions embodying the finger and hand signs and gestures that were much used by the Prophet Muhammad, with explanations in commentaries.

Problems of suffering as perceived in Judaism, Christianity, Islam, Marxism, Hinduism, Buddhism, Zoroastrianism, Manicheeism and Jainism, are given by reference to textual foundations in each religion or philosophy, and by considering later developments of thought, up to the late 20th century. This summary is partly contradicted by John Bowker's opening statement on 'Hinduism': “To summarise the thought of any religion is difficult, but in the case of Hinduism it is impossible.” (p. 193) Nevertheless, Bowker gives a readable and lucid account of his subject, with many quotations from the literature of each religion. Very little direct reference is made to disability.

Discusses the meanings of legal capacity and legal inhibition (hijr) understood by various early Hanifite sources, mentioning the cases of infants, pre-pubertal children.
and the *safih* (prodigal, or person lacking reason in the disposition of his affairs and belongings) for whom guardians were necessary.


Vol. VII contains several hadiths pertinent to disability, e.g. No.s 555 (pp. 376-77, epilepsy); 557 (p. 377, blindness); 582 (p. 395, for every disease, Allah makes treatment available); 608 (pp. 408-409, leprosy). Other major hadith collections contain further examples. See cautionary note under Al-Baghawi (above) on interpretation of hadiths.


Detailed, lucid exposition of origins and differences between Galenic and later Prophetic influences during the formative centuries of Arabic medicine. Mentions six standard 'specialist' fields of study, among which were oculist and “orthopedist (mujabbir, literally bone-setter)”. Discusses hadith underlying Prophetic medicine, e.g. merit of patiently bearing epilepsy or blindness, using amulets against Evil Eye.


Poem by Sharaf-al-Din Muhammad al-Busiri (1213 - c. 1296), widely recited in time of sickness. It celebrates the prophet Muhammad's powers of healing (e.g. verse 85; see also v. 104). One legend tells that “the Poet was stricken with palsy, and obtained his recovery of God through the Prophet's intercession” (p. 322).


While maintaining a traditional reverence for the Qur'an as the word of Allah for all times and places, the authors suggest that modern scientific knowledge in the health care and rehabilitation fields can facilitate a better understanding of the sacred text and of the hadiths of the prophet Muhammad. They explain how some verses can be matched with modern scientific practice, though this interpretation was not open to earlier ages. For example, the story about the Sleepers, in Surah 18 (The Cave), states that “We turned them [i.e. the Sleepers] on their right and their left sides”. This could now be understood in terms of avoiding pressure sores by regular turning of people with paralysis.


Examines from historical and modern understanding various questions of legal competence or incompetence, according to mental capacities or their absence; also
psychiatric malpractice, intention, and liability; according to the major schools of legal thinking.

Brief account of positive teaching given in Islam about disability and disabled people.

Discusses some incidents with blind men in hadiths of the Prophet Muhammad, or from legends that were dated back to the time of the Prophet by blind West African bards.

Heavily referenced review of suffering, and the part in it that is attributed to Allah, with occasional mention of disability.

Zar ceremony in Northern Sudan.

Detailed description of a large mosque and educational centre and the waqf foundation funding it, of which the building operation began in 1774, opposite the site of Al-Azhar, Cairo. Public recitation of the Qur'an continued from early morning to nightfall. Daily and annual disbursements are listed to “5 blind men as muezzins and muballighun”. Among the provisions for utilising any surplus from the waqf, after the original donor and his dependents had died, “two thirds of the surplus from the waqf was to go to the blind residents of al-Azhar and the zAwiya of the blind next to it.”

Based on field notes from 1929 to 1936. Mentions a range of attitudes to social and communal responsibility. Among a Beduin family, Dickson asked about a “very old blind man ... huddled in the corner. 'He is no relation of ours,' the woman said, 'but he has lived with us for four years now. We found him in Kuwait, blind and uncared for, and with no one to look after him, so we brought him out here and have looked after him ever since. He is one of our own tribe and we must do this for the honour of our tribe.’” They had fixed a piece of fishing line from the tent to a peg 80 yards away, “for the old man to follow when he wants to relieve himself at night; we fear he might get lost should we all be asleep and not hear him calling, so now he goes out and comes back safely by himself, holding on to the cord” (p. 289). The blind man played a role as “leader of the family prayers” (p. 30), and other ceremonial occasions (p. 142).
Elsewhere, Dixon noted a different “fate of the old and decrepit: the man or woman no longer of use to the master because of physical disability. These poor folk are given
their freedom, outwardly no doubt to salve the hypocritical conscience of their master, and to conform to the injunctions of the Prophet, but in actual fact they are no longer worth their keep. They are thus forced to go on the streets and beg for a precarious living. It is true that many decent families, to their great honour, go on clothing and feeding their worn-out slaves until they die, but I think that in the majority of cases, giving slaves their freedom goes hand in hand with stopping their allowance of food and clothing” (p. 500).

http://www.internationalsped.com/documents/02Diken.doc  
Thirteen Turkish mothers, each identifying herself as Muslim and having at least one child with mental retardation, participated in the study by semi-structured interview. The children's disability was attributed by them to a mixture of causes or origins. While bio-medical causation was identified by all, “they also constantly highlighted various religious causal agents ... Fate and God were underlined as causal agents by almost half of the mothers.” Evil spirits, spells, and folkloric superstitions were also mentioned. Several had taken advice from religious agents, i.e. local holy men.

Mention is made of blind boys studying the Qur'an at Al-Azhar, Cairo, possibly from the 12th to the 20th century CE, on pp. 44, 86-87, 101, 165, 206. A special hostel was built for them by Osman Katkhuda in the early 1730s. The sheikh in charge was customarily a blind man.

Detailed scholarly discussion of social aspects of leprosy and other disabilities in the history of Islam. Dols found that although Muslims had ambivalent views and beliefs about leprosy, the Qur'an had nothing comparable to the Levitical 'separation' laws which [whether rightly or wrongly understood] profoundly affected both Jewish and Christian attitudes towards people with leprosy.

[This entire journal has now been placed online, full text, open access.]

Comprehensive and highly-acclaimed scholarly work on mental disability in earlier Islamic societies, with extensive referencing. There is comparatively less specifically about idiocy, but records of 'strange behaviour' were often not differentiated by 'modern' categories. Dols reviews madness from medical, magical/religious, social and legal viewpoints, with great detail and documentation from across the Muslim world. Much well-researched supplementary information is included, relevant to broader disability histories. (Dols died in the late stages of preparing the book, which was completed by his student and research assistant Diana Immisch, with other colleagues).

Detailed account of Syrian/Arabian travels between 1875 & 1878, and of life, survival and death among Bedouin and settled populations. Frequent mention of disease (e.g. I: 254-58, 314-16; 617-18; II: 4-5), for which Doughty sometimes offered treatment; and of people with disabilities, especially visual impairment (e.g. I: 42, 527, 547-48, II: 308, 343, 347-48, 358, 380-81, 383, 408-413, 441) and mental problems (e.g. I: 498; II: 14, 276, 287-88, 293, 298, 384, 437), but also some deaf or physically disabled people (e.g. I: 222; II: 8, 30, 48-49, 67, 82, 302, 328, 358, 410, 466). Not all are listed clearly in the extensive index. [Doughty's views about the people among whom he lived and travelled were sometimes perceptive, sometimes affectionate or compassionate, and sometimes coloured by the knowledge that some of the people thought it would be good to kill him, for the sake of religion.]

Brief text, passionately asserting the right of blind people to take part in ordinary, everyday life, and to receive education and earn their living on the same terms as anyone else. The blind Muslim is required to perform religious duties, no less than anyone. Further, “there is no place for segregation in Islam”, and “absolutely no provision for begging in Islam”. God “creates as He wishes”, and it is not permissible for any Muslim to “find fault with God's creation”. The prophet Muhammad was reminded of that, in the sura on the blind man. Aisha was rebuked by Muhammad when she “passed remarks about the short statured wife of the Prophet”.

Bibliography of 1,972 items in Arabic, English, French, German, Hebrew, Hungarian, Italian, Latin, Russian, Spanish, Turkish, and a few other languages. (Arabic and Hebrew titles are given in original language and script, with translation to English; those in Russian, Hungarian, Turkish etc are transliterated, with translation). A few items seem to have direct relevance to disability; many more of them provide useful background. Indexes of authors and subjects, pp. 137-50.

Includes consideration of abortion on grounds of “deformities” (pp. 86-89).

Maulana Edhi has been Pakistan's best known front-line social worker, serving and strengthening the poor, the injured, the mentally ill and the downtrodden, while denouncing bureaucrats and resisting attempts by powerful people and organisations to co-opt his work or incorporate him in their empires. As a boy in the 1930s, in a small town near Bombay, he learnt to be charitable toward those who were disabled or destitute, and to defend mentally disturbed people against street bullies (pp. 27-29).
One of his ambitions was to “build a village for the handicapped” (p. 34). Years later, living in Karachi, Edhi and his wife Bilquise ran a kind of community asylum for mentally distressed or disabled people, among many other activities (pp. 222-28, 237-38).
Maulana Edhi takes an enchantingly robust view of Islam. He has bulldozed his way through any 'supposedly Muslim' law, custom or ritual that might be cited against doing the work that clearly needed to be done. If any person or viewpoint was preventing the poor and needy from getting their bread and standing on their own feet, then that person or viewpoint could not be any part of Islam that Edhi would recognise. Naturally he earned the wrath of the puritanical, the image-conscious, the suspicious and the bureaucratic. Edhi has swatted them away as though they were flies on one of the thousands of corpses he personally has retrieved and given burial to.

ELGOOD, Cyril (1951) A Medical History of Persia and the Eastern Caliphate from the earliest times until the year 1932. Cambridge University Press. This and Elgood's later work (1970) contain many incidents and references pertinent to disabilities, and range much beyond Persian boundaries.


ELGOOD C (1970) Safavid Medical Practice or the practice of medicine, surgery and gynaecology in Persia between 1500 A.D. and 1750 A.D. London: Luzac.

ENCYCLOPEDIA of Disability, edited by GL Albrecht et al (2006) Thousand Oaks, Ca.: Sage. (Five vols). Some entries are pertinent to Islam and disability, and notable disabled Muslims. For example, articles on: 'Chuas of Shah Daulah' (I: 263-264), and 'Deaf people at the Ottoman court' (I: 353), both by KB Selim; 'Middle East and the Rise of Islam' (III: 1092-1096) by S Sufian; 'Religion' (III: 1374-1381) by W Gaventa & C Newell. Also brief biographies of: Abu'l 'Ala al-Ma’arri (I: 4); Abu'l Aswad ad-Duwal; ’Ata ibn Abi Rabah (I: 137); Bashshar ibn Burd (I: 157); Taha Hussein (II: 897-898); Ibn al-Athir (II: 905); Ibn Sirin (II: 905); Ibn Umm Maktum (II: 905-906); al-Khalil ibn Ahmad (III: 1013); Al-Jahiz (III: 983-984); Katada ibn Di’ama As-Sadusi (III: 1010); Mir Nasiruddin Harawi (III: 1097); Muwaffak ad-Din Muzaffar (III: 1127); Thalab (IV: 1552); Timur the Lame (IV: 1552). (Many of these articles are dependent on Ibn Khallikan's biographical dictionary, see below, and the Encyclopedia of Islam, Leiden: Brill).

EVLIYA Efendi [Evliya Celebi] (transl. 1834, reprint 1968) Narrative of Travels in Europe, Asia, and Africa, in the seventeenth century. Transl. from Turkish by Joseph von Hammer. London: Oriental Translation Fund. New York: Johnson Reprint Corporation. (Two vols bound as one). The famous Turkish Muslim traveller Evliya was a deeply religious man, and noted matters of religious interest, mostly concerning Islam, throughout his travels in Turkey, Eastern Europe, Asia Minor and North East Africa. He has some notes on simpletons, saint-fools, dwarfs, mutes and freaks at Istanbul and elsewhere; e.g. I (i): 64-65, 114-15, 149, 174-75, 180; I (ii): 21, 25-29, 45, 80-81, 115-19, 240-41; II: 141-42. Thoughts of
the father of a boy with huge hydrocephalic head at Shin Kara Hissar in 1647, II: 207-208.


Naysaburi, a well-known theologian and Qur'anic scholar lived at Nishapur, Persia, and died c. 1015. His short book on the 'wise mad' ('Uqala' al-majanin) first discusses the concept and terminology of madness (jinna), then gives more than 100 reports about mad people. Ezabi translates the first chapter, placing the wise/mad people within the purposes of Allah who has created people with some “contradictory qualities”, linking strengths and weaknesses, sickness and health, and the vicissitudes of life. Prophets who spoke the word of Allah, shaking up the normal ways of human living, have always been considered mad, but Allah has vindicated them. Examples are given from the life of the prophet Muhammad. Real folly is the inability to discern and practice right conduct. The madman is he who “builds for his worldly life and wrecks his life in the hereafter”. From the 'case histories', Ezabi gives excerpts on Bahlul, a renowned 'fool', portrayed as something of a simpleton, heedless of self-care and formal knowledge, yet holding to some higher truths.


Reviews the legal incapacity of minors, and the extent of the child's legal responsibility, in the early centuries of Islam (issues which had implications for the status of people with cognitive disabilities).


Adult psychiatric patients in public hospitals at Lahore reported their contacts with a variety of traditional healers (Pirs, Aamils, hakims, magicians, palm readers, and others). The healing practices are listed as homeopathy; Unani Tibb (or naturopathy); faith healing (using Islamic prayers, Qur'anic texts, and amulets); sorcery or black magic; and combinations of methods. The religious-cultural background of Pakistan is explained in some detail, with positive commentary on Islamic worship and religious practice as aids to mental health (pp. 402-405). It is admitted that 'modern' psychiatric care is accessible and affordable to a small fraction of those needing it, while the traditional healers offer some help at modest cost to the majority of the population.


Reviews evidence for an elevated level of congenital and genetic disorders, with some connection of the latter with the high consanguinity rates among the majority Muslim population, and lack of appropriate preventive measures. Genetic counselling, which is inadequately accessible, does not necessarily lead to abortion of a fetus that is expected to have severe impairment, for at least two reasons: abortion is either illegal or strictly limited in most countries; and the parents (and extended family) may in any case not consider such a solution. From the UAE, a mother's perspective is given, whose first baby had several abnormalities, and whose second was normal. On becoming aware of a third pregnancy, she would not go for genetic testing. “As Muslims we consider life
itself as a test. When God gives me a child with a problem, it is like he is testing me to see how I accept, help, teach, and be patient with this child. I am sure that in every creation in this world there is a wisdom that is known only to God. I am six months pregnant now, and ultrasound has shown that the baby is affected.” Suggestions are offered for improving public and family education on these issues.


While focusing a particular controversy, on the issue whether an author had illegitimately drawn attention to prominent people having physical impairments and exposed them to ridicule, the author usefully sketches and comments on a much wider range of Arabic literature in which people with impairments and disabilities appear for various purposes, e.g. juristic rulings and comic anecdotes, from the 9th century CE onward. (Based on M. Ghaly's doctoral dissertation, “Islam and disability: theological and jurisprudential perspectives”, at Leiden University).


GOLBERRY SMX (1802) Travels in Africa, performed during the years 1785, 1786, and 1787, in the western countries of that continent, etc. Transl. from French by F Blagdon. London.

Includes a description (II: 353-354) of blind men on the West African coast, begging in groups, chanting Islamic scriptures.


Eleven cases of hydrocephalus in young children were treated in hospital at Mogadishu by modern medical methods. Interviews were conducted with relatives, and also some traditional doctors. Children showing signs of hydrocephalus were first taken to a religious practitioner for traditional therapy using Qur'anic verses worn as amulets, or where the ink has been dissolved in water; secondly, a traditional Somali doctor used red-hot wooden sticks to produce small burns on the scalp. The aim of both procedures was to drive away the evil spirit believed to be causing the head swelling.


Focus on Islamic Middle East, 632-1258 CE; mostly on blindness, physical disabilities, and their causation. “Just as deafness was hardly ever mentioned in the literature of the period, so it was that mental retardation was neglected in Arabic writings.” (p. 163) Though based on a doctoral thesis at New York, the style is more popular and anecdotal
than academic. Lists some material (pp. 177-82) on famous blind people from as-
Safadi’s dictionary.

Communauté musulmane de Maroua, Cameroun, publiés avec introduction et
Blind singers at Maroua in the period 1970-1976 demonstrated Islamic songs in the
Peul language to Haafkens (pp. 5-9, 29, 32, 42-43, 47-49). Some of these informants
were itinerant mendicants, a long tradition in the region.

AL-HABEEB, Tariq Ali (2002) Knowledge, beliefs and practice of faith healers in
Reports interviews with 45 faith healers (27 others declined to take part), who deal with
people having mental disorders, in Al-Qassim region. Their normal method of
treatment is readings from the Qur’an, particularly some special verses believed to have
healing power, and to protect the patient from the evil eye, magic, and jinn possession.
About 40% also reported using herbal or other traditional treatments. The majority
(77%) would suggest to patients that they should consult a psychiatrist. A variety of
other questions indicated the range of the healers' views on mental illness, religious
practice, ideas on aetiology, and level of acceptance of patients.

Barnes & G Mercer (eds) The Social Model of Disability: Europe and the Majority
Mainly descriptive of current concepts and features of impairment and disability in
Egypt. Hagrass points out (pp. 154-55) that the “charitable response to disability”,
while it may be questioned by campaigning groups in western countries, is perceived as
quite appropriate in Islamic countries where religious belief is a major factor in the
social context. The practice of Islam prompts individuals to give regularly on a
charitable basis, and for many needy people there is no organised alternative source of
welfare provision.

HALIM, Ahmed Abdel (1939) Native medicine and ways of treatment in the Northern
Description based on personal experience, also with reference to three papers on similar
topics, by Hassan Effendi Zaki & R von Slatin Pasha; L Bousfield; and RG Anderson;
“in the third report (1908) of the Wellcome Research Laboratories” (in Sudan). In a
traditional rural Islamic context, use was made of herbal treatments, cupping, cautery,
massage and manipulation, surgery, and religious treatments, i.e. fumigation with small
papers carrying Qur’anic verses. Various disabling conditions are included, e.g. fits and
convulsions, cerebro-spinal meningitis, severe headaches, facial paralysis, hemiplegia,
paraplegia, madness, rheumatism, bone-setting, plastering and splints for fractures,
severe burns, cataracts and other eye diseases.

HAMDY, Sherine F (2005) Blinding ignorance: medical science, diseased eyes, and
Discusses literary and biographical evidence on the efforts of reformers in the Islamic
world to move from traditional toward scientific approaches to public health and
biomedicine in the 19th and 20th centuries, using the example of eye disease and
treatment in Egypt.


Dr Hassan reviews a range of therapies having an Islamic basis. Traditionally, for mental retardation, a simple but rather patronising form of integration was achieved, with easy tasks allocated to the person of weaker intellect. For combatting mental illness, the Sufis practised various techniques for strengthening the moral will, so as to approach Allah (and, if necessary, discuss their sins with the deity). Dream analysis was used and music therapy. Faith healers (“generally known as Professors in urban areas and peers in rural areas”), healers of spirits (gins), palmists, witchcraft practitioners and black magicians are also discussed. A classic description is given of one rural healer, an elderly woman, who preconditioned her female patients with dancing and drumming until they were in a state of altered consciousness, then asked them about their problems. In such a state, the patient could freely tell all without fear of reprimand, and the 'spirit' speaking from inside could also propose conditions on which she would get better (e.g. family stop pressuring her to marry; husband treating her better, etc).


HELANDER B (1995) Disability as incurable illness: health, process, and personhood in Southern Somalia. In: B Ingstad & SR Whyte (eds) Disability and Culture, 73-93. Berkeley: University of California Press. Helander made field studies of various aspects of medicine, health, individuality and mysticism, disability and rehabilitation, mainly among the Hubeer clan of Southern Somalia, who are Sunni Muslims. He discusses differences between typical Somali conceptualisations of impairment, disability, illness, disease, and personhood, and those current in European discourse. Activities and beliefs around these conditions, and social responses to them, are given in some detail.


Famous autobiography of the earlier years of a blind Arab Muslim who became one of Egypt's outstanding 20th century literary figures and modernisers. After his experiences as a blind child memorising the Qur'ān, and later education at modern universities in Cairo and France, his understanding of Islam also underwent some modernisation. (See Malti-Douglas, 1988, below).

The title omits the fact that these South Asian disabled women were living in England. Twenty nine young disabled men and women were interviewed, and 15 siblings. This paper reports the experiences of 13 women, 9 Muslims and 4 Sikhs, aged between 17 and 30. Three pages are given to “Religious practices”, which formed a prominent part of the women's lives and identities, though some of them found difficulty in gaining access to religious education, and almost all avoided attending mosque or temple or religious gatherings in houses, because of anticipated problems. The Muslims attributed their impairment to Allah, who was also believed to provide the necessary resources. They “turned to Islam for help and guidance during difficult times”, and some had made their own studies of the Qur'ān, to understand Islamic principles and use these as a means of empowerment.

Perceptions of Islam among the populations catalogued here were somewhat mixed with Hindu legends and folk superstitions. Incidental disability notes occur, e.g. I: 127 deformity in baby resulting from actions of either parent during an eclipse; 254, cures for epilepsy, blindness; 460, one-eyed deity; 465, simpleton who became a local deity; I: 594, 596-98, 601, 604, 605, 609, 616 shrines and springs noted for cure of disabilities, leprosy, affliction by jinns, and other conditions; 617, 623, pirs with palsy; 630-37, notes by several writers on the microcephalic chuas of Shah Daulah; 742-46, lucky and unlucky children. II: 256-58, many disability nicknames; II: 489, anyone intruding in a Khagga house is struck blind; III: 39, a wife who concealed her blindness for many years; 113, a cripple employed by his brothers; 445, Surdas, generic name for blind bards. (There are probably many more such references. Parts of the work are in very small print).

Twelfth century writer who compiled 'Stories about Idiots and Sots' (of which there were many). According to Zakharia (1995, see below) this broke new ground in differentiating idiocy as a permanent, innate condition, from madness and folly.

A few points about disability occur in this famous work. Ibn Khaldun (1332-1406) listed four agreed conditions for the Caliph. One stated that “Freedom of the senses and limbs from defects or incapacitations such as insanity, blindness, muteness, or deafness, and from any loss of limbs affecting (the imam's) ability to act, such as missing hands, feet, or testicles, is a condition of the imamate, because all such defects affect the (imam's) full ability to act and to fulfill his duties. Even in the case of a defect that merely disfigures the appearance, as, for instance, loss of one limb, the condition of freedom from defects (remains in force as a condition in the sense that it) aims at perfection (in the imam).” (I: 395-396). He noted ironically that people very well acquainted with the charitable requirements of Islam often failed to make any connection with their own personal conduct (III: 39-40). Among his comments on education, he saw the problems of starting children on an inappropriately advanced and restricted curriculum (III: 303-304). Clearly some experiential knowledge of learning abilities, stages and difficulties was in written circulation. (See next item).

IBN KHALDUN. The Muqaddimah, transl. F Rosenthal, abridged and edited by NJ Dawood, with new introduction by BB Lawrence (2005). Princeton University Press. See annotation of previous item. In this abridged edition, the quotation on the fourth necessary condition for the Caliph appears on pp. 158-159. See also p. 86, for a great 14th century Muslim scholar's appraisal of the spiritual capacity of imbeciles: “Among the adepts of mysticism are fools and imbeciles who are more like insane persons than like rational beings. None the less, they deservedly attain stations of sainthood and the mystic states of the righteous. The persons with mystical experience who learn about them know that such is their condition, although they are not legally responsible. The information they give about the supernatural is remarkable. They are not bound by anything. They speak absolutely freely about it and tell remarkable things. When jurists see they are not legally responsible, they frequently deny that they have attained any mystical station, since sainthood can be obtained only through divine worship. This is an error. The attainment of sainthood is not restricted to the correct performance of divine worship, or anything else. When the human soul is firmly established as existent, God may single it out for whatever gifts of His He wants to give it. The rational souls of such people are not non-existent, nor are they corrupt, as is the case with the insane. They merely lack the intellect that is the basis of legal responsibility.”

IBN KHALLIKAN. Ibn Khallikan's Biographical Dictionary, 4 vols (1842-1871), transl. Baron Mac Guckin de Slane, Paris, for Oriental Translation Fund. 13th century collection of 865 biographies of well-known Muslims through six centuries, many also giving incidental information on lesser known persons. Over 100 entries mention some disability, often recorded in a nickname (e.g. II: 3, 10, 'broken-tooth', 'the one-handed', 'the club-footed'). Some became learned men in spite of childhood disabilities; others became disabled in old age. Many entries have anecdotes involving disability, and the Islamic context is omnipresent. See e.g. I: 83-86, Thalab, a deaf scholar who died in a traffic accident; I: 191-92, the proverbially stupid Ijl; I: 633, academic fraud at the expense of a blind scholar; I: 662-667, Abu'l-Aswad Ad-Duwali could hardly walk but knew he must appear in public or be forgotten; II: 32-36, Sharaf ad-Din ibn Abi Ussrun and a debate on whether a judge could continue work after becoming blind (cf IV: xiv, refusal of office to a deaf judge); II: 132, Abu Hashim al-Jubba'i's son, a simpleton; II: 203-205, Ata ibn Abi Rabah, a notable black lawyer at Mekka, who could use one eye, one arm and one leg; II: 425-37, al-Faiz al-Obaidi, a
child ruler suffering epileptic fits; II: 513-14, Katada ibn Diama as-Sadusi, a learned blind man who “used to go from one end of Basra to the other without a guide”; II: 551-54, Majd Ad-Din Ibn al-Athir, who had reasons for wishing to remain disabled; II: 586-89, Muhammad Ibn Sirin, a highly esteemed law lecturer with impaired hearing; III: 269, an early writing prosthesis; III: 459, grief of Muwarrij as-Sadusi on losing his sight; IV: 379-85, Ibn as-Saigh, a teacher known for his patience with slow learners; IV: 416, notes on some Arabic disability terms.

A contemporary of Ibn Khallikhan was Muzaffar ad-Din (1154-1233), known as Kukuburi, ruler of Arbela (Iraq) from 1191. Among many welfare institutions, Kukuburi built “four asylums for the blind, and persons with chronic distempers: these were always full, with all things requisite for their wants”. An unusual detail was that “every Monday and Thursday he visited these establishments and entered into all the chambers”, giving gifts, asking how people were, “conversing affably with the inmates and jesting with them so as to soothe their hearts.” (vol. II: 535-43). Ibn Khallikan's own family had received many benefactions from this ruler, but he emphasized that he had witnessed all the humanitarian work of Kukuburi, and “avoided even the slightest exaggeration”.

See also:


See previous item. (Reprint, making Ibn Khallikan more accessible; also editing out some doubtful passages; but organised in a substantially different order, so comparison cannot be done quickly).


The blind author, who worked initially as a teacher at the Zeitoun blind school, gave some historical background mentioning blind schools begun at Alexandria in 1896 and at Zeitoun in 1901. It was customary for blind Muslims to earn a living by “reading the Koran in private houses, in shops and in the streets” [by 'reading', presumably Ibrahim means 'reciting from memory']. Also the blind Copts “have been used to chant in the churches, as chanting is a very old custom in the orthodox churches, especially in Egypt. Very few of these blind Copts, except in the large cities, earned enough in this way to secure a comfortable living.” In 1921, Ibrahim learnt to weave carpets, and then began teaching other blind men to read and write, and some handicraft skills. In 1925, he came in contact with “one of the blind sheikhs at El Azhar University”, and
discovered that this man had no knowledge of Braille. Ibrahim then began teaching
twelve blind people at the Azhar, and the numbers grew to 90 in 1927. He was now
teaching blind Muslims at one place and blind Christians elsewhere. Some suspicions
arose when Ibrahim, himself a Christian, used some Bible material while teaching the
sheikhs. However he persevered with work in several blind schools and a training
workshop at Cairo, for both Muslims and Copts.

This substantial collection of well-referenced modern chapters on mental disorders
opens with chapters on religion and historical topics (Al-Issa, pp. 3-70). The book
explores issues of “how to integrate the Qur’anic teaching and the Prophet[s] model of
tradition and behavior, which represent Islamic ideals, with the present rapid cultural
change and Westernization”, and does so without dogmatic assertion. Chapters follow
on Forensic Psychiatry and Islamic law (K Chaleby, 71-98); Algeria (Al-Issa, 101-119);
Kuwait & Qatar (MF El-Islam, 121-37); Iran (F Mehrabi et al, 139-61); Malaysia (MZ
Azhar & SL Varma, 163-86); Pakistan (Mubbashar, 187-203); Saudi Arabia (A Al-
Subaie & A Alhamad, 205-233); and various types of illness and their treatments in
Arab and Muslim cultures. Indexes, pp. 355-382. (Some chapters are annotated
separately above and below).

AL-ISSA, I (2000) Does the Muslim religion make a difference in psychopathology?
In: I Al-Issa (ed) *Al-Junun: mental illness in the Islamic world*, 315-53. Madison,
Conn.: International Universities Press.
The author discusses his question at length and in detail, and with a fairly impartial
attitude, noting the problems of differentiating causal factors in mental illness or in its
remedies. He finds that insufficient research has been reported in Muslim countries for
any clear conclusions to be drawn.

JAFARI MT (1989) *Farsi* [Islam and mentally retarded children. *Journal of
Chapter.

Al-JAHIZ (Abu Othman Amr bin Bahr). *Al-Barsan wal-Argan wal-Umyan wal-
Hawlan* [The Lepers, the Lame, the Blind, and the Squinting], edited by Abdel-Salam
Al-Jahiz (776-868) was a prolific, influential and notably ugly writer with 'goggle eyes'
(jahiz), at Basra (now in Iraq), whose work has been much quoted across the Arab
world over centuries. Here, according to Michael Dols, he discussed “physical
infirmities such as skin disorders, lameness, paralysis, and deafness and personal
characteristics such as baldness, leaness, and ugliness.” His aim was to show that
“physical infirmities and peculiarities do not hinder an individual from being a fully
active member of the Muslim community or bar him from important offices. Al-Jahiz
maintained that physical ailments are not social stigmas but are what may be called
signs of divine blessing or favor.” (M Dols, 1983, The leper in Medieval Islamic
society. *Speculum* 58: 891-916, on p. 901) A recent (unpublished) paper by Geert Jan
van Gelder discussed “two concluding chapters” of this work, on right-handed, left-
handed and ambidextrous people, and the advantages and disadvantages of different
laterality. (See also Trembovler, 1993-94, listed below).
Despite his own experience of negative public reactions, Al-Jahiz in one of his better-known works, 'The Wonders of Creation', wrote harshly about social aspects of deafness. Apart from the deaf person's loss of music, “People are bored in his company and he is a burden on them. He is unable to listen to any of the people's stories and conversations. Though present it is as though he were absent, and though alive it is as if he were dead.” (quoted by F. Haj, Disability in Antiquity, q.v., p. 159). See next items. Another commentator notes that “Al-Barsan wal-Argan...” is among the most difficult works by Jahiz, and its topic is practically unique in historical Arabic literature. A footnote by Lawrence Conrad (ARAM, 6, 1994, pp. 225-244, on p. 234) notes that in “Al Bursan wa-l-`urjan...”, Jahiz collects “a large corpus of the lore extant in his day on leprosy, famous people who had suffered from the disease, and poems and tales concerning them...” (There does not seem to be a European-language translation available at present).

From the book of Animals, IV: 404-405. “Theologians say that your dumb man is deaf: his inability to speak is due not to any malformation of the tongue, but to the fact that having never heard sounds, articulated or otherwise, he does not know how to produce them. Not all deaf people are completely dumb, and there are also degrees of deafness.” (p. 164). [Gives examples of loud noises that some deaf people can hear.] “Others can hear words if spoken in their ear, but otherwise they hear nothing, even if the speaker raises his voice; if the speaker positions himself so that the sound goes right into their ear, they understand perfectly, whereas if he speaks just as loudly into the air, the sound of his voice not being concentrated and conducted along a canal into the brain, they do not understand.” [From the 9th century CE, this is an unusually detailed and perceptive description. Unfortunately, this level of understanding of deafness and hearing impairment was hardly attained by the majority of Middle Eastern or European populations, even a thousand years later.]

References to physical or sensory disability in this work are few (see e.g. the faked disabilities of some beggars, pp. 36-37, 43-44; blind Ali, 102); but Jahiz is energetic in dissecting and putting on display the disabilities of the human spirit that cause his Misers to behave in their ludicrously avaricious manner.

Exorcism of jinns by a traditional healer at Nablus.

Introduces the context of al-Tibb al-Nabawi by al-Jawziyya (751-1350) and gives translation with several indexes / glossaries, including all Hadith references. See general index for bonesetter, elephantiasis, epilepsy, eyes, leprosy, madness, melancholy, mind, ophthalmia, paralysis.


KASSIS, Hanna E (1983) *A Concordance of the Qur'an*. Berkeley: University of California Press. Gives Roman transliteration of Qur'anic vocabulary (with compounds). Alphabetical index of topics in English gives relevant Arabic word(s) transliterated, facilitating location of texts on any topic. Examples (concerned with deafness, muteness, sign or gesture language; and also with mental weakness):

<table>
<thead>
<tr>
<th>Page</th>
<th>Root</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>203-10</td>
<td>A Y W</td>
<td>used in many references to Signs or revelations from Allah.</td>
</tr>
<tr>
<td>317-18</td>
<td>B K M</td>
<td>used in 6 references to 'dumb'.</td>
</tr>
<tr>
<td>1020</td>
<td>R M Z</td>
<td>used when Zakariya should speak only “with signals”. (Sura 3: 41)</td>
</tr>
<tr>
<td>1194</td>
<td>S M M</td>
<td>used in 15 references to 'deaf'.</td>
</tr>
<tr>
<td>1265</td>
<td>W H Y</td>
<td>used when Zakariya “made signal” to people”. (Sura 19: 11).</td>
</tr>
<tr>
<td>1305</td>
<td>Y D Y</td>
<td>used when Zakariya “made signal” to people”. (Suras 24: 24, and 36: 65).</td>
</tr>
<tr>
<td>1061</td>
<td>S F H</td>
<td>used in 11 references to fools, folly, people of weak intellect. [See also Kherie; The Qur'an; Sacred Writings.]</td>
</tr>
</tbody>
</table>


KHAFI KHAN. *The Muntakhab Al-Lubab*, II: 556-559, Bibliotheca Indica, Calcutta. [Relevant passage is translated to English by M Mujeeb (1967) 'The Indian Muslims', London: Allen & Unwin, p. 67.] The 17th century sufi Mir Nasiruddin Harawi (died 1708) lived most of his life with paralysis of both legs and left arm. With his one good hand he was able to support himself very modestly by writing copies of the Qur’an. Nasiruddin was an influential teacher, an independent thinker, and a fearless critic of men who exercised power unjustly and trampled on the weak.

This international congress reportedly “enlarged the horizon of the non-Islamic participants as to the interrelation between religion and psychology as well as psychotherapy in Islamic countries”, and individual sections of this paper support the claim, with useful observations on the differences of stance among international participants, towards the topics discussed.


References to “Blindness; Deafness; Dumbness; Lameness; etc”, and to “Weakness”, pp. 922-27. The great majority are used metaphorically, to signify e.g. people's deafness to the law of Allah. (See also Kassis; The Qur'an; Sacred Writings.)


The Persian religious teacher and traveller Khosrau visited Egypt from 1046 to 1049, and his account is largely confirmed by other sources. One detail concerned the annual rise of the Nile and the nationally important ceremony of opening a major water canal (pp. 136-142). The Caliph of Islam gave the first symbolic blow to the embankment sealing the river; then the crowd piled in with picks and shovels, until the water poured through, and it was possible to launch boats. A vast population then took part in the celebrations. The honour of opening the boating was reserved for deaf-mute people, who were believed to bring good luck: “La première barque, lancée dans le canal, est remplie de sourds-muets appelés en persan Koun ou Lal. On leur attribue une heureuse influence et le sultan leur fait distribuer des aumônes.” (p. 142). This seems to be one of the earliest reports in Africa or the Middle East in which a group of deaf people gathered and performed an important symbolic role in a major ceremonial occasion. En route for Egypt, Khosrau also passed through Ma'arat en Na'am in Syria. This town was governed by the famous blind poet, Abu 'l `Ala al-Ma'ari, who was reportedly wealthy, but lived as an ascetic (pp. 34-37).


Suggests that Islamic texts from the Qur'an and hadiths made extensive provision for all the needs of disabled people to be taken care of.

AL-KRENAWI A, & GRAHAM JR (1999) Social work and Koranic mental health
Copiously referenced overview of such Islamic healers' work in many Muslim countries.

(See notes in Introduction, above). First published 1836. Describes in considerable detail the beliefs and practices of Muslims in Egypt, as observed by Lane and discussed with his local teachers and advisors. Numerous mentions of active blind men, e.g. pp. 107, 165, 417-418 476; including description of a college of some 300 blind students and teachers, one of whom became the Sheikh of al-Azhar (pp. 192-93), blind beggars (299, 394, 431); lunatics, idiots and holy fools, who are regarded as being those “whose mind is in heaven, while his grosser part mingles among ordinary mortals” (pp. 208-210, 398, 410) and other men with disabilities (pp. 111, 177, 361, 415), also charms and healing (pp. 233-38). In effect, these urban disabled men seem to have been casually integrated in street life and public religious ceremony, their poverty and disadvantage shared with many non-disabled people, with a few specific religious roles for some blind men. (Disabled women are hardly mentioned - presumably they stayed mostly within family dwellings).

III: 262-86 discusses meanings of words for mental disabilities, and provisions for guardianship, in the various legal schools of antiquity and modern times.

Some proverbs suggest folk attitudes to disability, often (not always) of a negative nature. “The mother of the mute understands what he says” (p. 94) could be derisive, or sympathetic, or purely metaphorical. “If you meet a blind man, throw him on the ground and steal his lunch, for you are not more merciful than God” (p. 14), could seem dismissive of disabled people's lives. If spoken by a blind man, it would be unanswerable, though hardly a pious thought. See also pp. 22, 23 35, 45.

[annotation based on remarks by John Racy] The distinguished Sudanese psychiatrist and WHO regional advisor, Dr El-Mahi, wrote many papers (see Racy, 1970, pp. 133-138) illustrative of the inner life, personal relations and mental stresses of people in the Arab region. He was not afraid to make observations about the practice of Islam and its teachings in the rapidly changing Arab countries. In this paper, El-Mahi shows social aspects of Islam evolving to meet changed situations. [In another paper, El-Mahi, making a point about addiction, personality and perception, used an old tale that also applies well to some aspects of religious belief: An alcoholic, an opium eater and a hashish user reached Isfahan one evening to find the gate already closed. The alcoholic proposed that they batter the gate down, and so gain admittance. The opium eater thought it better to sleep where they were until morning, when the gate would be opened. The hashish user suggested that they should all enter through the key hole.]
Detailed history of the development of Madrasas and of European colleges, and of the waqf or charitable trust, and other legal frameworks for continuing financial support. Brief mention appears of disabled people, mostly blind. A person could not be appointed mutawalli, to administer a waqf, if insane, incompetent or untrustworthy; but equal consideration could be given to “males and females, the blind and those with eyesight” (p. 45). Some blind men became notable teachers, learning by heart the legal, grammatical and religious books they would teach to others: the jurisconsult Abu'l Hasan at-Tamimi (died 918) was one such; and also Ibn al-Muna (d. 1187), who “went blind at the age of forty and was hard of hearing” (pp. 99-101). A Qur'anic scholar at Baghdad, Abu Mansur al-Khaiyat (d. 1106), who was imam of the masjid of Ibn Jarada, had a very long life teaching the Qur'an to blind students (p. 180). The total of these students, said to be 70,000, is an end-note issue (p. 331), with a possible reading of 700 being suggested. Another source explained that al-Khaiyat's students also taught many more blind people, greatly multiplying the total. There was clearly an established and significant practice of educating blind youths in this way in 11th century Baghdad, and onward. (See also Dodge, above, for notes on the similar practice at Al Azhar, Cairo).

Study of dreams in as-Safadi's (q.v.) biographical dictionary of famous blind Muslims in the East.

In a critical examination of Taha Husayn's autobiography, Malti-Douglas reviews various aspects of blindness in the current and historical Arab world. Husayn's education initially aimed toward the traditional blind male skills of memorising the Qur'an and teaching it with an orthodox approach and exegesis. He studied further at Al-Azhar, where there had long been a school for blind students of Islam, then moved to the new, modernising University of Cairo where he wrote his thesis on the blind poet and freethinker Abu ’l-`Ala al-Ma’arri. Advanced studies and travel in Europe brought further challenges and secularisation of Husayn's thoughts. His first book was controversial, using source criticism on pre-Islamic poetry and seeming to suggest a possibly heretical view of the Qur'an. In this, and at other points in his life, Husayn may have been influenced by his literary predecessor al-Ma’arri.

With some discussion of historiographical approaches, Malti-Douglas attempts “the identification of the principal roles of blindness and the blind in Mamluk mentalities”, based on as-Safadi's biographical dictionary of some 310 distinguished blind Arabs. The identified roles are compared favourably with some of the roles of blind people in modern 'western' countries. [The Mamluks ruled Egypt independently from 1250 to c. 1517. and continued under the Ottomans until 1811.]

Translation of a highly influential commentary by 12th century lawyer, taking account of the major legal schools of Islam, used over centuries in Middle East & South Asia. (Lecturing on Muslim law, Sir Abdur Rahim, see below, pp. 32-33, noted that the Hedaya was “a most difficult book to translate”, and that Hamilton actually translated a Persian commentary, rather than the 'bare text'.) See index entries: Blind; Child, Children; Divorce (Ch.I, of a dumb person; Ch.IX, of expiation, slaves with defects; Ch.XI, husband leprous, scrophulous or insane; Ch.XV, maintenance to other relations, a father & mother); Dumb, Dumb person; Foundlings; Guardian (disposition of a lunatic woman) Infants; Idiot, Idiotism; Inhibition (operates upon infants, slaves, & lunatics; Ch.II, from weakness of mind); Lunacy, Lunatic; Maniacs; Property (destruction of an infant or lunatic); Punishment (Ch.II, whoredom committed by infant or idiot; or who goes blind); Safeeyaa; Sale (Ch.III, inspection of a blind person, defects incident to children; lunacy operates as a perpetual defect; Ch.X, fine incurred by maiming); Wills (Ch.IV, or to the orphans, blind lame); Zabbah (provided he be ... infant or idiot); Zakat (not due from infants or maniacs); etc. These indicate varied applications of law to disabled persons, e.g. entitlement to some protections & exemption from taxes or punishments, incapacities as witnesses or in transaction of business, etc. (These are discussed in great detail in many Arabic legal texts).


Al-Mas’udi (c. 896-956) included more everyday life and humour than many historians, and told some stories of disabled people. The Caliph Mansur and a blind poet (pp. 21-23); the ugly, crippled and sharp-witted Ahnaf ibn Qais (61); a madman known as 'Sheep's Head' (68); a bonesetter works on Caliph Amin's hand (142); history illustrated by verses of the blind poet of Baghdad, Ali ibn Abi Talib (146, 151-53, 156-65); inhabitants of Kufa choose a deaf man to plead their case before Caliph Ma'mun, which he does with subtle wit (193-94); Caliph Mu'tasim disobeys doctor's orders (224-25); traffic accidents involving infirm or blind people in Baghdad (228); Caliph Wathiq and medical science (233-35); ugliness of Jahiz causes his rejection as tutor to the sons of Caliph Mutawakkil (249); ailments and death of Jahiz (309-11); wit and self-preservation of the blind Abu al-Ayna (322-34); former-Caliph Qahir's revenge for losing his eyes (409-410); Caliph Muttaqi has his eyes gouged out (415); the warrior Utrush 'The Deaf' (425).


[Seen on microfilm.] The thesis reviews Islamic teaching on 'Man and Society'; 'Disability' (definitions and types; responses within Muslim communities (pp. 83-88); 'Poverty' (and responses within Islam to relieve poverty, including the provision of Zakat); and 'Other Islamic Resources', with regard to human efforts for a healthy and balanced society. Implementation of these teachings in Saudi Arabia is presented as an example of modern practice. Qur'anic verses cited, and Saudi rules on Zakat, appear in Arabic appendices. Bibliography lists 91 items in Arabic, and 42 in English (16 being
books on disability in UK or Europe, from the early 1980s).

A summary of the “principles underlying the Islamic attitude towards disability” is given (pp. 83-84), comprising: (1) Recognition that “the human being consists of body, mind and soul, and that a disability affecting any one of these involves concomitant effects on the others.” (2) There are limits on everyone’s “ability, to perform even his duty”, so Islam does not “require anyone to act beyond his ability”. (3) Islam takes into account the maturity, or lack of it, in anyone's body, mind and soul, so “performance of any Islamic duty can be required only from those in whom this threefold maturity is present.” (4) Even when these mature capacities are present, a person's “obligations are waived if he is temporarily incapacitated.” (5) Acting under compulsion or duress “is also counted as a disability in Islam; the person compelled is thus absolved from responsibility.” Examples are given of these features, “to illustrate Islamic concern for the disabled, the weak and the oppressed” (p. 87).

A tentative definition of disability in Islamic terms is suggested: “Disability is a state of failure to produce and perform what a normal person can produce or perform, or failure to control actions or behaviour in a way that a normal person can, and thus to differ from those who constitute the normal categories of society.” (p. 87) The thesis concerns itself with the first part (“failure to produce and perform what a normal person can produce or perform”). An appropriate role for the Islamic State is illustrated (p. 200) from the Caliphate of Abu Bakr: “the most significant, as both giving the same right to non-Muslims as Muslims alike, and designating particular classes of people as eligible for such relief, is that of the peace treaty agreed between Khalid b. al-Walid and the people of al-Hirah. Khalid reported to Abu Bakr, ‘I have promised them to give financial support to the elderly who can no longer work, to those who have suffered disability and to those who were rich and have become poor; I have exempted these from paying taxes, and they will be paid from the treasury.’ (Abu Yusuf, Kitab al-kharaj, p. 144).”


MEHRABI F, BAYANZADEH SA, ATEF-VAHID MK, BOLHARI J, SHAHMOHAMMADI D, & VAEZI SA (2000) Mental health in Iran. In: I Al-Issa (ed) *Al-Junun: mental illness in the Islamic world*, 139-161. Madison, CT: International Universities Press, Inc. Provides an historical background of psychiatry in Iran (pp. 140-45), with some references, followed by a broad overview of the present state of epidemiology, characteristics and treatment of mental illness. A brief passage appears on the influence of religious beliefs (pp. 154-55). A story, attributed to Naysaburi, is told of a madman seeking refuge from the usual group of street boys throwing stones. He gets into the governor's palace, where he sees servants keeping flies away from the governor's face. Then the madman realises that, if the governor cannot even keep flies off his own face, he will be useless as protection against the boys.

A story is told of the saint al-Gharib who had leprosy and then became paralysed and blind. After a healing ritual at the mosque he was able to walk home, holding his wife's hand. “And at home he asked his wife: 'Who put the books over there?' and he pointed in their direction. His wife said: 'They're not there!' He replied: 'Yes they are!'” (p. 463) After demanding that he show her a particular book, which Gharib did, the wife knew that her husband really could see again. [No ophthalmological examination report is offered in support of this story; yet many scholars would consider that the dialogue sounds quite credible.]


Translation of an Ottoman law code compiled during the 1870s and apparently presented to the Grand Vizier in 1885, as the “Report of the Mejelle Commission” (p. ix). Some disability and deafness references appear. An early section gives guidance on philosophical and linguistic issues, i.e. the interpretation of evidence, whether spoken or silent.

“70. The well known signs of a dumb man are like an explanation by speech.
71. In every case the word of an interpreter is accepted.” (p. 11). [It is not entirely clear whether 70 and 71 are intended to have a link, or appear in succession without the second relating to the first. There were many spoken languages in the Ottoman Empire, and interpreters were often needed in legal situations.]

“1573. It is a condition that the person who makes the admission should have arrived at years of discretion. Therefore, the admission of an infant, madman or person of unsound mind, male or female, is not good.” (p. 263)

“1586. An admission made by the known signs of a dumb person are held good. But the admission by signs of a person who can speak is not considered. For example -- If someone says to a person who can speak 'Has such a one a claim against you for so many piastres' that person does not admit the claim by bowing his head.” (p. 266).

“About the description of evidence (shehadet). ... 1686. The evidence of the dumb and blind is not admissible.” (p. 294).

[Within the legal framework, provisions 70, 1586 and 1686 need not be mutually in conflict. A (possible) explanation would be that an “admission” could be the simplest kind of Yes or No to propositions put to a mute person, such as “At midday on September 7th you stood by the East gate of town?” [Sign: YES] “You saw this man go out through the East gate?” [Sign: YES] “He was leading a white donkey?” [Sign: NO] “He was leading a white horse with one black hind leg?” [Sign: YES]. On the other hand, to give “evidence” could be a much heavier legal responsibility, in which the witness took upon himself to describe the whole story in detail and to draw out the moral point (for example, that he recognised the horse as one belonging to his neighbour, and believed that the man leading it out of town had stolen it). Muslim lawyers, in different schools of legal tradition, had in fact discussed the validity of mute people's signs for at least one thousand years before the Mejelle. They had accepted signs where they were clearly understood, while admitting that in more complicated situations there could be some doubt. See the *Hedaya* (Guide) of the 12th century scholar al-Marghinani, transl. Hamilton (1870), pp. 707-709.]

This is a sympathetic portrayal of the historical Tabligh movement for deepening people's understanding and practice of Islam in a non-sectarian way, in which small groups would voluntarily itinerate in the community and 'reach out' with the invitation to worship and learn. The movement had a tradition of accepting the contribution of anyone who volunteered, whether great or small, learned or unlettered. The story is cherished, of a village simpleton who accompanied such a wandering group. Wherever they went, he begged people to say the *kalima*, the core statement of Islam, which he had never been able to memorise. Thus, artlessly, all these people were obliged to repeat the few words that every Muslim knows, to help the poor simpleton, and perhaps to be confronted by their own need to understand more of the faith they professed. Metcalf suggests that “As an educational movement, nothing is more striking in Tabligh than the conviction that anyone can learn, that one learns by doing, and that the lives of ‘ordinary’ people can be profoundly transformed.” (p. 59)

Revised, with commentary, from first publication as: “Imran's Djinn”. EPICADEC News (Epilepsy Care Developing Countries) No. 16 (2000) 9-10.
Tells of an Asian Muslim boy living in UK, whose family had some difficulty in using the health services. In their concept of Imran's illness, he was often visited at night by a spirit, and the whole family had to pray and read the Qur'an until the spirit departed. One of Imran's teachers understood this concept and respected the family's beliefs. She also suggested that they might like to consider a possible treatment in terms of 'brain electricity'. By avoiding conflict with their beliefs, and giving them time to digest a different approach, the family came round to consenting to medical treatment, which was successful in terms of epilepsy control. A scientific reviewer comments on the story.

Reviews concepts of mental retardation in Pakistan with an Asian and Islamic background, using historical texts, official definitions, attitude surveys, and information given by families in Peshawar and region during the 1980s.

Historical study of the shrine of a Muslim saint, Shah Daulah, at Gujrat in the Punjab. Families used to bring children with microcephaly (known as chuas, or rats) and leave them at the shrine, where they were cared for, but were also used for begging. Numerous reports were made about them, from the 1860s onward. The shrine was taken over in 1969 by the Government of Pakistan Auqaf Department, and no longer receives children. From an era when microcephaly was not understood to be a congenital impairment, rumours circulated about deliberate deformation at the shrine, supposedly using metal caps on infant heads. The allegations have repeatedly been investigated, from British times to the present, without any significant evidence being found. The stories may have originated by conflation with the well-known and
apparently harmless regional practice of mothers shaping their babies' heads for beautification. [Up to now, the earliest report found on the chuas was by Shahamat Ali. He was at Gujrat between the 26th and 29th January 1839 and wrote that he had seem some of the children called “chuhas”].

MILES M (2002) Some historical texts on disability in the classical Muslim world. *Journal of Religion, Disability & Health* 6 (2/3) 77-88. Reviews some significant texts concerned with disability in the Qur'an, the hadiths, the Hedaya of al-Marghinani, and some early Arabic literature concerned with education.

MILES M (2002) Disability In The Middle East. A bibliography comprising materials with technical, cultural and historical relevance to child and adult disabilities, special needs, social and educational responses and rehabilitation. At: http://cirrie.buffalo.edu/bibliography/mideast/index.html Lightly annotated bibliography of about 1000 items from antiquity to the present time, showing disability and deafness in a pre-Islamic or predominantly Islamic social context.


MILES M (2006) Disability & Deafness in North East Africa: Egypt, Sudan, Djibouti, Ethiopia, Eritrea, Somalia. Introduction and bibliography, mainly non-medical, with historical material and some annotation. at: http://cirrie.buffalo.edu/bibliography/neafrica/index.html Lightly annotated bibliography of about 500 items from this predominantly Islamic region of Africa. (Material on Egypt has been updated from the material contained in the Middle East bibliography, Miles 2002, listed above).

MILES M (2006) Signs of Development in Deaf South & South-West Asia: histories, cultural identities, resistance to cultural imperialism. Revised, extended and updated with a new appendix shows 110 items on deafness and sign language in the Arab countries of the Eastern Mediterranean and South West Asia.
http://www.independentliving.org/docs7/miles200604.html

The revised article offers evidence and hypotheses for a short cultural history of deaf people, culture and sign language in South Asia and South West Asia, using documents from antiquity through 2005. Includes references to deafness in Islamic law, the rare innovation of deaf clubs for women in an Arab Muslim country, and a number of talented Muslims in regional history who were deaf but achieved fame as poets, artists. The 'language experiment' of the Emperor Akbar, and possible origins in earlier Persian literature, are considered, and also the presence of children with impaired hearing in ordinary schools of Pakistan. Developments in Turkish Sign Language and Arab Sign Language are documented in the appendix.


Mourad capably reviewed the background, variety and ramifications of Arabic physiognomical writings, the major Greek and Arab sources and the ideas involved (pp. 7-66), then introduced and translated al-Razi's influential *kitab al-firasa* (69-128) with notes and commentary (129-144) and bibliography (145-153). The Arabic text follows. [To many adherents of modern sociological 'disability discourse', the physiognomical lore might seem rather absurd, reinforcing popular prejudices about anyone whose physical appearance deviates from the male norm. However, these texts codify observations and judgements that have been influential throughout human history, and probably have some 'modern' equivalents.] For example, the person supposedly of a cool, humid temper is expected to be slow-thinking and stupid, the more so if he has a small head, following Galenic notions (96, 102). Connections are made with the imagined characteristics of various animals and females, e.g. someone with a thick, swollen nose has low intelligence by analogy with the bull (p. 120); one with a small face must, like the monkey, be of mischievous disposition (121); a narrow, weak back signifies moral weakness, by analogy with women [!] (124). Some positive views also appear, e.g. one whose appearance is like that of an (idealised) child, with bright, cheerful eyes and face, will live long (119).


Presents six short accounts, from deaf people who had grown up in Muslim families in Kuwait, England, USA, Iran, and Somalia, discussing their experience of education and the lack of instruction in Islam, which apparently they did not receive because of their deafness, and the mistaken idea that deaf children would not be able to understand religious teaching.


During more than five years of travels, 1869-1874, in the Sahara and Sudan (then a much broader region than the present Sudan), Gustav Nachtigal, who had been physician to the Bey of Tunis, made extensive notes on the diseases in various regions (see indexes) and also observed many disabled people, in almost entirely Muslim populations. He noticed some deaf individuals, e.g. at Tejerri (Tajarhi, Southern Libya) there was “Gedde, the burgomaster's deaf and dumb son-in-law, who was perpetually drunk”, and from whom he hired a camel (II: 40-41) with some difficulty. At Kuka (west of Lake Chad) he remarked that “Deaf and dumb slave girls” were sold for high prices to serve the wives of businessmen in some Islamic countries, and dwarf slaves were also in demand for Muslim rulers (II: 218). Nachtigal acquired a companion, Abd el-Ati, a wandering scholar and teacher, who was “half blind and hard of hearing” (II: 344-346). Blind beggars in “unbelievable numbers” sat individually or roamed in groups through Kuka (II: 160). Nachtigal visited a derelict “village of the blind” (*Beled el-Amian*) (II: 369). At Borku he saw people with “harelip”, but no other physical deformity (II: 425). Later, at Bornu in 1872, he learnt that the ruler and dignitaries had given gifts including “ordinary slaves, eunuchs, deaf-mutes and dwarfs” to the emissary of the Ottoman Sultan at Istanbul (IV: 4). Travelling to Darfur (western Sudan) in 1874, he noticed a very poorly dressed Arab, with two slaves, a deaf Dinka and a small girl (IV: 243). In historical notes, Nachtigal referred to an early ruler of the Tunjur people, Ahmed el-Maqur (Ahmed the lame) (IV: 274-275). An appendix by the translators, on Wadai (Ouadai, Chad) and Darfur after Nachtigal's visit, notes the long reign (1874-1898) of Sultan Yusuf. “Yusuf sent eunuchs to Constantinople almost yearly, and once, when the Ottoman Sultan Abd el-Hamid asked him particularly for deaf-mutes, he searched his kingdom and sent all whom he could find.”. Indexes to each volume indicate further material on diseases with disabling effects, among the various countries and peoples.


Based at Baghdad, Al-Nadim (c. 935 - c. 990 CE) is highly informative across a range of literary, religious and cultural topics, and biographical detail (indexed separately, pp. 931-1135). People with a 'disability' name, or impairments in lives and literature, are mentioned or implied on pp. 73, 88, 92, 116, 154, 320, 337, 399, 405, 414-415, 463-464, 519, 522, 621, 673-711 (on physicians and medicine), 773 and 794 (Mani's deformed foot or feet), 784 (deformity of Cain), 963, 978, 1005, (and probably more).


Under 'Dissolution of Marriage', some notes are given on mental or physical defects of husband or wife, as understood by the Jurists, and in modern Islamic legal systems (pp.
123-28). Under 'Guardianship' there is a review of 'Legal capacity' and 'Interdiction' (Hajr) of people deemed to have mental disabilities, in modern systems (189-93). Glossary defines relevant terms, e.g. “dhul ghafla”, “hadina, hadini”, “matooh”, “majnoon”, “safeeh” (263-65).


Taha Baasher (1975, see above) noted that al-Naysaburi [Nasaboury] (d. 1014-15 or 1015-16 CE) offered an early “outline of the definitions, terms, classifications, and clinical descriptions of mental disorders”, including those with mental or intellectual disabilities. Also mentioned by Katia Zakharia, 1995, below, as: al-Nisaburi, *Uqala almaganin* (Les Sages Insensés), Beirut: Dar al-Kutub al-Ilmiyya. See partial translation by Shereen El Ezabi, above.

NWIYA P (1978) *Ishara. Encyclopaedia of Islam* (new edition), IV: 113-114. “Ishaara (A.), 'gesture, sign, indication', has acquired in rhetoric [ ] the technical meaning of 'allusion' but, in its early connotation, a gesture of the hand, a sign of the head, of the elbow, the eyebrows etc., is considered by al-Jahiz (*Bayaan*, i, 80; Hayawaan, i, 33), together with speech, writing, *nusba* and computation on the fingers [ ] as one of the five methods by which a man may express his thoughts” ... “In fact the Arabs considered anyone who did not understand the language of gestures and obliged his interlocutor to express his thoughts in words to be a fool”. Nwiya remarks that further research is needed “on the ritual or symbolic gestures, which with the Arabs go back to remote antiquity...”


Article (in Turkish) addresses deaf-mutism in Islam, and history of deaf people at the Ottoman court and their signing system.


Dr Ouertani, who lost his sight at the age of six, and left Tunisia for Germany at 17, explores the contrasting situations of native Germans with disabilities, and Muslims with disabilities living in Germany after immigration from North Africa. The disabled German “develops in a socio-political environment in which individualism and independence” are both the expected norm, and are enforced by legal authority (p. 146). Muslim immigrants can see what the expectation is, and how it works; yet it is alien to the world in which they have learnt to understand themselves, a world in which the family is paramount, and members of the family expect to sustain one another, with the sanction of their faith: “the Islamic code of social ethics, which is systematically set down in the *Qur’an*. As stipulated by this code, the rights of orphans, the disadvantaged
and the disabled are protected. This means that the Qur'an is concerned with social
groups that require the protection and care of the community. On this basis, the
inclusion of the disabled is a necessary and self-evident attitude in an Islamic society.”
(p. 147). The recent situation in Germany had changed for economic reasons, reducing
the opportunities for disabled people to find employment and meet social expectations
of independent self-support; yet the modern disabled person “has no communal and
familial back-up system to rely on any more.” (p. 151). The merits of the North African
system now become rather clearer.

PERREIMOND, Victor (1903) De la protection juridique des incapables en droit
musulman: étude de droit comparé. Doctoral thesis, Faculty of Law, University of
The author, a French lawyer and “Lauréat de l'Ecole de droit d'Alger”, noted that
Algerians continued to live under Islamic personal law after the French captured
Algiers in 1830; but some inconveniences arose in relations between the indigenous
population and the colonialists who acted under French law. His thesis examines in
detail the legal capacities and disabilities of various groups, such as minors, married
women, people with mental disabilities (e.g. those considered 'mad', and the 'prodigals'
who did not know how to manage their property), and those deemed to be responsible
for others (e.g. as fathers, husbands or appointed guardians) under the Muslim legal
traditions, compared with those of France, which in many ways differed from them
significantly.

PFLEIDERER, Beatrix (1981) Mira Data Dargah: the psychiatry of a Muslim shrine. In
I Ahmed (ed) Ritual and Religion among Muslims in India, 195-234. New Delhi:
Manohar.
The Muslim saint's shrine Mira Data Dargah specialized in helping 'mad' people, such as
those afflicted by a bhut (spirit), or epilepsy, since the 19th century or much earlier.

QARQAZ, Na'il Muhammad Ibrahim (1999) Athar al-ikhtilalat al-'aqliyah wa-al-
idirabat al-nafsiyah fi masa'il al-ahwal al-shakhsiyyah. Amman: Dar ul Bayariq. 264
pp.
Based on MA thesis concerned with domestic relations, legal capacity, disability and
insanity in Islamic law.

Corporation. (Arabic & English)
See disability references under “Sacred Writings”, (next item).
Examples of metaphorical uses of disability reference: Sura 6 (Al An'am), v.39 “Those
who reject our Signs / Are deaf and dumb -- / In the midst of darkness / Profound:
whom Allah willeth, / He leaveth to wander; / Whom He willeth, he placeth / On the
Way that is Straight.” Sura 17 (Al Isra', or Bani Isra'il), v.97: “It is he whom Allah
guides, / That is on true guidance; / But he whom He leaves / Astray - for such wilt thou
/ Find no protector besides Him. / On the Day of Judgement / We shall gather them
together, / Prone on their faces, / Blind, dumb, and deaf: / Their abode will be Hell: / ...
” (p. 701). Interest in signs and gestures was sustained among Muslim scholars by the
Qur'anic incident (Sura 19, 1-11) where Zakariya, temporarily mute, “told them by
signs / To celebrate Allah's praises” (p. 746).
Parallel English & Arabic text. Most references to disabilities seem to be metaphorical (see Kherie; Kassis). Some Suras where the disability reference is probably non-metaphorical: 2. Al-Baqarah, 282 (mentally weak borrower); 3. Al-`Imran 49, & 5. Al-Ma`iddah, 110 (prophet Isa healing blind, lepers etc); 4. An-Nisa, 5-6 (wardship of property of mentally weak person); 16. An-Nahl, 76 (dumb & useless servant); 24. An-Nur, 61 (disabled or sick people may eat in your house); 48. Al-Fath, 17 (disabled or sick people exempt from call to arms); 80. `Abasa, 1-16 (rebuke for discourtesy to blind man). See also: 5. Al-Ma`iddah, 33, 38, 71; 9. At-Taubah, 91; 11. Hud, 24; 12. Yusuf, 84, 96; 17. Bani Isra`il, 72, 97; 20. Ta Ha, 27-28; 30. Ar-Rum, 52-53; 35. Al-Fatir 19-22; 36. Ya Sin, 65-67; 41. Ha Mim As-Sajdah, 5, 17; 43. Az-Zukhruf, 36, 40. Many Qur'anic exhortations to behave with kindness and practical help towards the poor and needy have readily been applied to people with disabilities in Islamic countries from the earliest times to the present day.

Translated by a non-Muslim Orientalist, but one having a genuine respect and appreciation of the Islamic text. Arberry also had modern English as his mother tongue, as compared with Abdullah Yusuf Ali, and Ahmed Ali, the Muslim translators of the two versions listed above. See disability references in notes under the latter.


Racy introduces his sources and the geographical, historical, religious and cultural parameters of the Arab world, together with remarks on child rearing and personality (pp. 9-33); then describes psychiatric institutions, practice, teaching and research, and contributions from folklore, magical and religious therapies (35-79). There follows an extensive and critically annotated bibliography (81-171), including notes on Arabic items and “a large number of references in obscure journals, reports of limited circulation, and even some in manuscript” (p. 83), mostly from the 1920 to mid-1960s. Conscious of the very early tradition of “amazingly humane and enlightened treatment of the mentally ill” in the Arab world, Racy considered that the indigenous practitioners in the 20th century continued often to provide good advice for everyday problems of a psychological nature, though approaches to serious mental illness were variable. Of a Sufi shrine near Khartoum, with mosque, Koranic school and “facility for the treatment of the insane”, he noted that “neurotics are provided a congenial setting for spontaneous recovery, but that psychotics tend to suffer” (pp. 65-66).


Gives the substance of a lecture series at the University of Calcutta in 1907, by a senior judge. Conditions of the mind or intellect affecting legal capacity (e.g. to act as a witness, or enter a contract), such as idiocy, lunacy, childishness, decrepitude etc, have (mostly very brief) comments on pp. 10, 172-73, 178-79, 189-94, 200-203, 253, 296, 298, 306, 313, 319, 322. Duty to maintain disabled or infirm relatives, pp. 270-271.
Blindness, pp. 296, 304.

RASHID SK (1978) *Wakf Administration in India*. New Delhi: Vikas. The *wakf* is an Islamic legal practice intended to secure property in perpetuity as a trust for charitable purposes. Across India there was a great variety of *wakf* benevolence by wealthy Muslims, from the 12th century or earlier. Even if a considerable part may have been organised to protect family heritage, and the practice was undoubtedly abused, there were also substantial public benefits in the system and British administrators had some involvement from 1765 onwards. Some disabled people undoubtedly received assistance, as well as those who were poor for other reasons. In this published doctoral thesis, Khalid Rashid documented the British administration's swings from 'caution followed by interference', through 'mistaken but intelligible non-interference, followed by gradual involvement', to a period of increasing legislation (pp. 11-36).

RASMUSSEN, Susan J (1989) *Accounting for belief: causation, misfortune and evil in Tuareg systems of thought*. *Man* 24: 124-144. Rasmussen reports anthropological studies during nearly six years among the Kel Ewey Tuareg of Niger, focusing on their range of beliefs concerned with misfortune, illness and various kinds of physical or mental impairment in everyday life. Local beliefs, related in folk tales, case histories, and casual encounters and conversations, tended to exhibit “complexities, overlappings and contradictions”. They involved elements and vocabulary from both Islam and pre-Islamic times. The broad outlines of the deity and of expected human conduct seem to belong to Islam, refracted through local cultural norms. While using some technical vocabulary to describe what she thought she was hearing, Rasmussen was concerned to allow local beliefs and expressions an authentic level of non-systematisation, rather than imposing alien concepts and structures. (Further details appears in many later publications; see next two items).

RASMUSSEN S (1992) *Reflections on Tamazai, a Tuareg idiom of suffering*. *Culture, Medicine and Psychiatry* 16: 337-365. (See notes on previous item). Rasmussen here focuses on a particular manifestation of suffering among the Tuareg of Niger, an “illness of the heart and soul”, which could also be a form of communication, or a covert bid to acquire some power, and in any case involves some mental, physical and social disability. Various characterised as an “altered state of general dysphoria and mutedness”, with “possession trance”, an “inner illness” experienced by women, with strong depression, irritability, mute withdrawal, disorientation and “taking off of the head”, *tamazai* is placed outside the range of conditions expected to respond to Islamic therapies such as recitation of Qur'anic verses by (male) religious practitioners; but the Islamic scholars (marabouts) may be involved in diagnosing the spirits. It can respond to exorcism rites, involving drumming, women's singing, dancing, joking, communal interactions, which involve the sufferer to the point of her falling exhausted but cured. Many women involved have close family links with marabouts, and the suffering course is described within a normal background of Muslims' lives. The 'possession' seems to be regarded as a deviation of minor significance; thus “the common reaction to it among such social categories as the Islamic clergy: subtle disapproval but also laughter.”

RASMUSSEN S (2001) *Healing in Community. Medicine, contested terrains, and cultural encounters among the Tuareg*. Westport, Conn.: Bergin & Garvey. xxxiv +
(See two previous items). After conducting fieldwork among the Tuareg of northern Niger over a period of more than 20 years, with growing relationships and understanding between anthropologist and host communities, Rasmussen is more than ever concerned to respect the complexities and ambiguities of life as lived and perceived by people whose thoughts are not easily reconfigured in English, for reading in a western context. While this book does concern healing, and involves discussion of spirits, marabouts, possession, sorcery, evil eye, exorcism, amulets, herbalists, bone-setters, birth defects and anomalies, a number of disabling mental or physical conditions, and a pervasive religious thought-world in which elements of Islam are prominent, it may be incorrect to identify “Islam and disability” in this book. Those features do appear and are indexed; yet it may be that the Tuareg would not see it that way.


The paper reports on 134 Malay patients, all Muslims, who were referred for psychiatric treatment. They were asked to rate the most likely cause of mental illness, among 20 items on a checklist that took into account the prevalent local beliefs about aetiology. Most of the respondents were of lower socio-economic status, and secondary education. A majority (53%) attributed their illness to supernatural agents or magic. Others suggested psychosocial stress (16%), biological or genetic inheritance (13%), problems with family or job (10%). Among supernatural causes, evil spirits and witchcraft were commonly mentioned. Local traditional healers (bomohs) were the major source of information on the subject, supporting the idea of supernatural causes. The authors consider that the view is commonly held among Malays, that 'modern medicine' is “effective in curing physical illnesses but powerless against black magic or supernatural causes of mental illness.” Bomohs have various ways of combatting the supernatural forces.


Covers a number of topics indirectly relevant to disability, some of which Rispler-Chaim covered more fully in the following listed items.


Describes arguments for and against the citing of epilepsy, or other disabilities, as grounds for divorce petitions, from the early legal schools through to recent cases. Extensively referenced.

Discovery of reliable means to identify genetic or developmental disorders in the fetus at various stages of pregnancy has raised issues around the possibly conflicting rights of the fetus, the mother, other close relatives, and the wider community. The default position in Islam is that abortion is not permitted without strong reason. Rispler-Chaim presents a variety of legal opinions from Islamic scholars (c. 1980-1999), about the permissibility of aborting a 'deformed' fetus during the first 40, 90 or 120 days of pregnancy (or perhaps even later). Uncertainties arise in estimating the severity of handicap predicted from the anticipated deformity, and in opinions about the ensuing 'quality of life' and problems of child-rearing. Some comparison is made with the disadvantaged fetus in a pregnancy after rape.

RISPLER-CHAIM V (2007) *Disability in Islamic Law*. Dordrecht: Springer. 184 pp. Extensive and detailed review, based on the works of Muslim Jurists from medieval times to the present, and many years of experience in the modern Middle East. Different perspectives and terminologies of law, religion and medicine are used to describe legal and social responses to disability and people with disability, in a variety of situations that arise in everyday life and the practice of Islam. Chapters are headed (1). People with disabilities and the performance of religious duties; (2). People with disabilities and jihad; (3). People with disabilities and marriage; (4). The *Khuntha* [hermaphrodite]; (5). Disabilities caused by humans: intentional and unintentional injuries. A useful Appendix (pp. 97-134, plus notes and references pp. 150-153) gives English translation of “Contemporary fatwas on people with disabilities”, by Islamic scholars mostly in Saudi Arabia, Egypt, Lebanon, Jordan, and a few on the web. The Appendix ends with an excerpt from a book by Dr Musa al-Basit (listed separately above) which considers the rights of disabled people in a broader way than the specific fatwas.

RITTER, Hellmut (1952) Muslim mystics strife with God. *Oriens* 5: 1-15. After discussing schools of Islamic thought on the 'problem of evil' in the realm of an omnipotent deity, the paper considers various tales in which anger is expressed to God by some Muslim 'wise fools', whose sense of intimate relationship put them in a good position to inform God of their complaint (though this was far from the orthodox position of submission to the Will of Allah; and also from the sufi teaching of delight in divine providence). See next item.

RITTER H (1955) *Das Meer der Seele. Mensch, Welt und Gott in den geschichten des Fariduddin 'Attar*. Leiden: Brill. ix + 781 pp. In this wide-ranging book on the writings of the 13th century Persian poet and mystic Fariduddin Muhammad 'Attar, chapter 10 “Das Hadern Mit Gott - Der Narr” (pp. 159-180) discusses in greater detail the quarrels that some 'wise fools' had with Allah, in the context of Sufi teaching (see previous item). In the analytical index, “narr” has a full page (pp. 742-743) listing many entries apart from that chapter. (See also, e.g. Bahlul, blind(er), lahm(er), stummheit, taubheit, and similar older terms in index.) An English translation of Ritter's work has recently been published by Brill, Leiden.

the thoughts and writings of Al Ghazali (1058-1111), Shah Wali Allah (1703-1762), and Maulana Thanvi (1863-1943).

Careful discussion of the life, medical practice and writing of al-Razi on speech disorders, with background details and context. Al-Razi associated speech defects mainly with adverse conditions of the tongue.

With a brief review of the status of blind men in the early Islamic world, the author quotes and comments in detail on the work of the blind poet of Basrah, Bashshar bin Burd [c. 690-783], and the extent to which he used visual imagery and described situations as though seeing them (sometimes aided by being seriously enamoured of the young woman he was describing). Weighing evidence and counter-claims, it seems likely that Bashshar was blind from birth or early childhood.

To understand perceptions of children with disabilities in Islam, it is necessary first to look at how able-bodied and able-minded children have normally been perceived. Historically, the child in Islam has been one who has little legal status or responsibility, one who plays, is frivolous and little better than an animal; who should be educated and forced to leave that imperfect state. However, there are also other views that respect the innocence of childhood, and the child's purer insights into the values of life.


Discusses women and disability mostly in Morocco. Not very much direct reference to Islam, apart from attribution of disability to fate or Allah.

Useful background study on poverty and charity. Mentions disabled people only incidentally (e.g. blind, lame, crippled, lepers etc, pp. 47-49, 60-61, 74-78, 85), but they were there among 'the poor' for whatever modest benefits were provided.

Suggests some of the diversity of solutions reached by Muslims on questions of health.
suffering and divine purpose, with reference to the Qur'an, hadiths, and development of theodicies. (The title word 'unrequited' may be inappropriate. The text suggests that a sense such as 'purposeless', 'unrelieved', or 'uncompensated' is intended).


Faith healers are acknowledged to be a major source of care for people having mental disorders in rural Pakistan, working in the local cultures of belief and social response, within a context of Islam. A majority of the faith healers' diagnoses, with 139 people having some apparent mental disorder, involved spiritual forces, as against the 'modern, medical' diagnoses that the psychiatric researchers would have given.


SAFI al Din ibn Abi l-Mansur ibn Zafir. La 'Risala' de Safi al-Din ibn Abi l-Mansur ibn Zafir: Biographies des maîtres spirituels connus par un cheikh égyptien du VIIe/XIIIe siècle (transl. Denis Gril, 1986). Cairo. Some of the 'holy fools' described by Safi d-Din in 13th century Egypt and elsewhere were more holy than foolish, others perhaps the reverse.


Briefly reviews ways in which religious phenomena may be associated with mental illness in popular belief, and various 'spiritual healing' activities, locations and procedures. Twenty elderly Egyptian patients known to have had some kind of spiritual healing, and who had had schizophrenic relapses, were compared with 20 who had had relapses but were not known to have had spiritual healing. Patients were male and female, aged between 60 and 72, Muslim and Christian. (Attempted healings took place at Mosque or Church. Therapy was sometimes by extended reading of Qur'an or Bible). The authors did not differentiate by religion, but noted that four (10%) reported having no religious beliefs, 73% reported 'moderate' and 23% 'deep' beliefs. Results suggested that a positive association might exist between receiving “some form of spiritual healing and the risk of developing an acute relapse” in these patients; yet the authors are cautious when discussing this result, based on a small sample and with some confusing factors. Simply holding religious beliefs, without spiritual healing, did not seem to raise
the risk of relapse.

Autobiography of a Senegalese Muslim writer, who reports his experiences of growing up with deafness, starting around 1953 when he was a schoolboy of 12 years. His impoverished family could not afford medical treatment that might have saved some hearing. The depth of Sangaré's hearing loss became apparent rather slowly, as the boy and young man became adept at lip-reading and patching together some meaning from odd words he could half hear (p. 134). Later, a physical ailment affected his mobility, and took his voice away. After much internal struggle, he determined that he would use his creative powers to speak through the printed word. Later he adopted an African name, Dono Ly Sangaré. He told European interviewers in 1986 that he was a practising Muslim, and his adoption of an African name in place of an Arab Muslim name was merely a reaffirmation of African roots, not a rejection of Islam.

Brief official statement of current services and facilities available.

Includes a story (pp. 83-84) of Yuhanna ibn Masawayh (777-857 CE), the Nestorian Christian physician who served four Caliphs at Baghdad and wrote several medical works. Highly intelligent, he married a woman of great beauty and weak intellect. Their son, Masawayh ibn Yuhanna ibn Masawayh, was like his mother, feeble-minded. Yuhanna expressed a wish to dissect the useless lad, learn the causes of his stupidity, and so add to knowledge; but the Caliph forbade him. Yuhanna's frustrated wish (which was perhaps rhetorical, rather than a serious plan), apparently became known to his father-in-law, who was much displeased. A little later, the boy became ill, and died after medical treatment, which caused further suspicions and recriminations. (Source: Ibn-al-Qifti, *Tarih al-hukama’*, edited by J Lippert, Leipzig).

Reviews Arabic terminology of deafness, medical perceptions and treatment, the legal and religious implications (“Does God hear silent prayers? The mute and religious practice”), and notes some deaf people in the stated place and period, from Arabic primary sources.

SCALENGHE S (2006) Being Different: Intersexuality, Blindness, Deafness and Madness in Ottoman Syria. Unpublished doctoral dissertation, Georgetown University. Extended introduction and review of disability-related historical materials in the Middle East, with closer focus on particular kinds of ‘difference’ in Ottoman Syria (a much larger area than the present Syria). Terminology, social and religious views on the origins of disability, appropriate and inappropriate responses, and issues of Islamic law are considered, with many useful primary Arabic sources.
This sketch was one of the earlier efforts by European scholars to recognise the social responses of Islam toward fools and folly. [“Schipperges has emphasized the dignity of the insane that was based primarily on a religious interpretation of the irrational. And the notion of unreason, as in the law, is basically neutral; mental incapacity has no moral meaning but entails serious social consequences.” (Dols, Majnun, 1992, p. 6)]

Muhammad Ibn Sirin (654-728 CE) of Basra was known for his hearing impairment, and was a highly regarded law lecturer, and an accurate transmitter of hadiths (sayings of the prophet Muhammad). As-Shabi used to tell law students, “Stick to that deaf man!” (meaning Ibn Sirin).

Text and translation of a 16th century Turkish treatise on physiognomy, following a 700-year Islamic tradition; with detailed lists (pp. 15-20, 32-45) of deviations from 'normal' appearance, linked with character defects. Reinforcement of prejudice about people with impaired or abnormal appearance is implied e.g “Small eyes denote stupidity”; “A long drawn-out head signifies disability and lack of intelligence”; “Very tall persons are rarely intelligent. Scholars say, 'Short people are very clever, but those of them who are tacitless are simpletons. However, though of rare occurrence, there are some among the tall and the short who are intelligent, irrespective of their height.” (15-20) See Mourad (above) and notes.

Describes healing shrines such as the Ziarat at Mazar-i-Sharif, “famous for its power to cure blind and crippled people” (p. 288).

Well documented research from historical texts and interviews, 1992-93, with nearly 200 former leprosy patients and health workers in Mali. Arabic materials by Ahmad Baba, a 16th century West African scholar, discussed leprosy in some detail (pp. 46-49). There were ongoing situations in which Islamic law had implications for the family life of people with leprosy. Religious therapies were used, as well as medical treatments.

Recognises that although Muslims historically have taken seriously their duty to the poor and needy, studies on this topic have been few - charity has been largely an unrecorded, individual exercise rather than an official matter.

Brill.
Revisiting the topic 25 years after his first paper, Stillman used a more sceptical gaze, following the trend for historians to question who actually benefitted from charitable activities. (No specific mention of disabled people, who were subsumed among 'the poor and needy').


With some background of history and social structure in the Kingdom, traditional diagnoses are described (pp. 207-211), including skull malformation, possession by Jinns, 'evil eye', witchcraft, and Zar possession. Traditional therapy or healing, widely resorted to, includes cautery; Qur'an recitation; Zar ritualistic healing; herbal treatment and dietary management; seclusion and chaining; and electrical jolts (212-215). Modern psychiatry is described in medical education, health services and specific psychiatric services, the latter beginning in 1959 (pp. 215-220). The epidemiology of mental illness is described, noting some adverse effects of intergenerational conflicts, and possible dissonance between modernisation and Islamisation. Some remarks link Islamic beliefs with trends in mental illness (220-229).


15th century compilation of Tibb an-Nabi, attributed to Suyuti. Includes advice for prevention or treatment of disabilities, e.g. pp. 10, 17, 18, 35, 57-59, 70, 91, 101, 106, 109, 140-41. Mentions hidden blind brother of Ayesha (wife of Muhammad) (35), and epileptic fit of Umar (162); but see note under Elgood (1962) above.

AL-TABARI, abu-Ja`far Muhammad ibn-Jarir (d. 923 CE) Ta'rikh al-Rusul w-al-Muluk.


Detailed, open-minded paper on Islam and mental handicap. Quotes from the Qur'an and hadiths of the prophet Muhammad, suggesting that Islam approves the integration of mentally retarded people in education, and gives them the right to an appropriate level of support in conducting their lives and managing their own affairs.


The idea was expressed in the work “Kitab al-Bursan wa'l-urjan wa'l-umyan wa'l-hulan” by al-Jahiz (see above) that physical impairment or peculiarity may be a sign of divine favour, or an opportunity for spiritual strengthening, rather than a social stigma. Trembolver finds this unusual in medieval Islamic tradition, and discusses how it would have been accommodated among Muslims, with some parallels or contrasts in Eastern Christianity and Jewish traditions.


In laconic style, Tritton gave referenced notes on the start, practice and administrative problems of registration and pensions in the early centuries of the Muslim world. Disabled recipients are listed under the authority of Mansur (“unmarried women, orphans, and the blind”); Mahdi (“prisoners and lepers”); and Umar II (“the poor ... and the cripples”).


Dullness in students occasioned various measures (pp. 37, 48, 52-53, 80-81, 131). Primary teachers were assumed to be stupid, with many mordant stories. (E.g. A slave brought his master a cooked sheep's head from market. En route he ate the eyes, ears, tongue and brains. Questioned, he said the sheep had been blind, deaf and dumb. But where were the brains? Well, this sheep had been a teacher... p.8) Some teachers or scholars were blind, deaf or crippled (pp. 14, 60, 88, 106, 140, 150, 153, 200); blind people also appear on pp. 120, 155, 181. Speech therapy is noticed (pp. 60-61).


Rather unflattering portrayal of the lives of disabled women in Middle Eastern countries, apparently as measured by West European feminist standards of the 1990s. It is linked with a few texts from the Qur'an and hadiths of the prophet Muhammad, which may have been interpreted as supporting the oppressive treatment of women and disabled people. [This is more of a campaigning article on social issues than a balanced account of disabled women as represented in Islam. However, the author perceives opportunities for substantial positive change through political lobbying by existing pressure groups in the region.]


Much cited historical survey, with some discussion of blindness, eye disease and ophthalmology, various forms of leprosy, epilepsy, and disabling diseases associated with malnutrition. (More exists than is shown in the rather scanty index). States (p.1) that the health and disease profile noted by Charles Doughty (see above) “certainly existed in the same form in pre-Islamic Arabia.”
Gives “the most popular beliefs and opinions that the Persian world held about epilepsy”, based on Persian medical texts and also “folk beliefs and superstitions”. Three case histories appear from al-Razi. Avicenna's views are outlined, and those of more recent practitioners.

Brief, readable study with well chosen illustrations, noting in conclusion that “one of the great achievements of Sunnite Islam [was] that it enabled countless men and women to lead tolerable lives in conditions of incredible hardship.” [No specific mention of disability.]

Examines theories on reproduction, heredity and prenatal development in medieval Arab-Islamic medical writings.

Indexed by topic (see e.g. sickness, medicine, incantation). The relevant tradition is summarised in a phrase or sentence, and authorities for it are given. See also Al-Bukhari, Kassis, Kheri.

Contains extensive lists and descriptions of beliefs, rituals, and expected outcomes, observed in 21 visits, totaling seven years in Morocco, between 1898 and 1926. Westermarck planned to write on the origin and development of moral ideas, and “thought it might be useful for me to acquire some first-hand knowledge of some forms of culture which differ from our own” (i.e. from British and Nordic cultures). Chapters on Islamic or otherwise religious concepts such as blessedness, *baraka* (pp. I: 35-261), spirits, *jnun* (I: 262-413), the Evil Eye (I: 414-478), witchcraft, homeopathy and transference of evil (I: 570-608), magical influences, omens and dreams (II: 1-57), practices connected with the Muslim and solar calendars (II: 58-207) and with birth, childhood and death (II: 370-560), are sprinkled with physical and mental impairments and disabilities, suffered or possibly cured. The index (II: 561-629) has entries, e.g. under blind(ness), buhali, deafness, ear, epileptic, evil eye, fingers (six on hand), idiots, lameness, left-handed, Jnun, lepers and leprosy, lunatics, madness, mejdub, mejnun, miracles, night-blindness, one-eyed, stupidity, etc. Westermarck's approach had some naive and 'orientalist' features, but he recorded a mass of material seen or heard in a period when memories of tradition reached back many centuries. Many references are also made to comparable beliefs and practices in other parts of the Islamic world.

Meanings of mental incompetence among the Nyole people of eastern Uganda are described and discussed in some detail, with attention to the terms used, individual cases in their family context, and various means of management within the community. Local religious beliefs were mostly not an issue, but one of the subjects with mental peculiarity, nicknamed “Obutu”, had a rather fine religious vision or obsession, the 'angelic construction project'. This he was building not only in his imagination, but by 'construction' on a massive scale in fields of several acres (with land and bricks 'borrowed' from his brothers): “a heavenly city of the future where all of us, men and women, black and white, Muslims and Christians, angels all, will enter into a life of harmony and ease” (p. 168). The idea came from God (Allah). What was visible so far was a series of “wide ditches and pillars of locally made bricks”; but the author was given a tour with description of the great city that was taking shape for the benefit of humankind. Obutu's vision was not widely shared in the neighbourhood. His brothers gave him food and shelter, but were unhappy that valuable land had been requisitioned for a project lacking any clear earthly benefit. Obutu's family were active in the local Muslim community, and he included in the 'angelic construction project' an area for the mosque, “where he knelt to pray in Arabic” (p. 169).

Detailed, scholarly account of the varied understanding of terms in Latin, Hebrew, Arabic, (and also Greek) for the 'internal senses' as used by thinkers in the classical and medieval Mediterranean and Middle East, ranging from Aristotle through the Church Fathers, the major Arab philosophers and later Medieval Christian theologians. Various systems of classification were used for cognitive processes, with some mutual influence, sometimes hampered by shifts of meaning in translation. [While not concerned with disability, the paper has importance, and a cautionary function, for historical studies of the meaning of some impairments and disabilities across the Mediterranean and Middle Eastern regions. Lack or serious diminution of receptive senses such as sight and hearing (and to a lesser extent, touch, taste and smell) is both historically inherent and fairly transparent in ideas of impairment and disability. Absence or diminution of internal processing by the 'cognitive faculties', exhibiting as weaknesses in the development, maturing and practice of thinking, awareness, common sense, intellect, focus, memory, imagination, planning, communication, (and other related terms), seem to be inherent in concepts of 'mental retardation' or 'intellectual impairment'. Yet these have been, and are, considerably less transparent in their meaning, as there is a wide range in both the popular, the educated, and the scientific conceptualisation of these processes.]

Some experienced Pakistani physicians and surgeons discuss modern issues of medical ethics, in an Islamic context. Relevance to disability issues occurs e.g. in issues of embryos, deformity and abortion, pp. 45-46 (MB Azami); 113-114, 241-43, 246-48 (SH Zaidi). The possibility is contemplated, with much doubt, of aborting a foetus with abnormality because of anticipated maternal trauma on bearing an impaired baby, or of family distress in raising such a child.


A key figure in this study is Shaykh Umar `Abd al-Rahman (pp. 391-393). As a blind young boy (b. 1938) he followed the traditional path of learning the Qur'an by heart. He studied theology at Al-Azhar in the early 1960s, while President Nasser was attempting fundamental reforms in that institution. In 1970 `Abd al-Rahman openly criticised Nasser, for which he spent time in jail. He pursued his studies, and held teaching posts in Egypt and Saudi Arabia. By the 1980s he had become the spiritual guide to some radical Islamist groups, and was suspected of active militancy, but apparently his blindness prevented him from being accepted as a leader of armed struggle. Yet in the 1990s he was convicted of conspiracy in acts of terrorism in the USA. [Whatever may have been his part in acts of violence, `Abd al-Rahman seems to have been one among a number of formidable blind Arab teachers of Islam who were sharply critical of the State and of decadent religious practices.]


See previous item, and AS-SAFADI (above). (Ахмед Зеки Пача также появляется как А. Заки Баша, и другие варианты). French National Bibliography notes on the present item: “Communication faite, le 25 février 1911, au Cinquième Congrès international pour l'amélioration du sort des aveugles.” Мальт-Дуглас (1988, 44-45) comments that Ahmad Zaki was the editor of as-Safadi's Nakt al-Himyan fi Nukat al-`Umyan, and “also the author of a study in French celebrating the achievements of medieval blind Muslims”, i.e. the item listed here.