

CAUSES AND REMEDIES OF DEPRESSION: A COMPARATIVE STUDY OF WESTERN AND MUSLIM INTELLECTUAL PERSPECTIVES

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Abstract

This study explores the causes, manifestations, and remedies of depression through a comparative analysis of Western and Muslim intellectual traditions. The research investigates how major Western thinkers such as Thomas Aquinas, René Descartes, and Robert Burton understood melancholy, sorrow, and psychological suffering within philosophical, theological, and medical frameworks. At the same time, the study examines the contributions of prominent Muslim scholars and physicians including al- Fārābī, Ibn Sīnā, Abū Zayd al- Balkhī, al- Rāzī, al- Jurjānī, Ibn Rushd, Fakhr al- Dīn al- Rāzī, al- Ghazālī, and Ibn al- Qayyim. Their discussions reveal a remarkably holistic understanding of mental health in which body, soul, intellect, emotions, environment, and spiritual conditions are deeply interconnected. The research demonstrates that both traditions viewed depression not merely as a biological disorder or moral weakness, but as a multidimensional human condition arising from imbalance in physical, psychological, cognitive, social, and spiritual domains. Muslim thinkers particularly emphasized the harmony of body and soul, moderation of temperament, correction of thoughts, spiritual purification, and ethical discipline, while Western thinkers increasingly explored the interaction between cognition, emotion, and bodily processes. The study further highlights that many classical theories anticipate aspects of modern biopsychosocial and cognitive approaches to depression. By comparatively analyzing these intellectual traditions, the study seeks to present an integrated understanding of depression that combines philosophical insight, spiritual awareness, and psychological depth, thereby contributing to contemporary discussions on mental health and human well-being.

Keywords: Depression, Melancholy, Muslim Thinkers, Western Philosophy, Islamic Psychology, Mental Health, Biopsychosocial Model, Cognitive Therapy, Spirituality, Comparative Study.

INTRODUCTION

In the modern era, depression is one of the most complex and pervasive psychological problems in human life affecting not only the mental state of the individual but also his physical, spiritual, social and moral existence. Although modern psychology describes the biological, psychological and social aspects of this disease in detail, the intellectual and philosophical repertoire of human history has contained very deep and diverse views

regarding the interpretation and treatment of this condition. Western thinkers such as Plato, Aristotle, Thomas Aquinas, René Descartes and Robert Burton tried to understand depression sometimes as a spiritual anxiety sometimes as a mental and physical imbalance, and sometimes as an existential crisis, while Muslim thinkers such as Al-Farabi, Ibn Sina, Abu Zaid Balkhi, Razi, Jurjani, Ibn Rushd, Imam Ghazali and Ibn Qayyim presented a comprehensive interpretation of this problem in the light of the interrelationship of the soul, temperament, intellect heart and soul. The present study presents a comparative analysis of these Western and Muslim views to illustrate that depression is more appropriate to understand as a multifaceted human condition rather than as a mere medical or psychological illness. The research also highlights that ancient philosophical and spiritual concepts appear to be 'surprisingly compatible with today bio-psycho-social model' and still have the potential to provide scientific and practical guidance on human mental health.

Hippocrates and ARISTOTLE

On the horizon of ancient Greek thought, Hippocrates' medical insight is a cultural source that explained the relationship between human psychology and physical condition in a very precise manner. The explanation of diseases in Greek medicine was based on concrete observations of human mood, temperament, and physical conditions. In these scientific endeavors, Melancholia, "which was later considered synonymous with "depression" or "depression", but Hippocrates' explanations are also the foundations of the relationship between physical and mental health in modern psychology. Hippocrates sought the causes of Melancholia in the theory of the four temperaments, in particular, he considered the excess of bile as the main cause of this disease. An explanation of this concept is found in the writing attributed to him as follows:

Melancholia arises from an excess of black bile (Hippocrates, as cited in Jackson, 1986, p. 3) when the black bile becomes abundant and remains for a long time, fear and despondency follow (Hippocrates, as cited in Radden, 2000, p. 65) Melancholia is caused by an excess of black bile. When black bile is present in excess and persists for a long time, fear and despair arise.

For Hippocrates, melancholy or depression was not the result of moral decadence, weak will, or spiritual crisis, but rather a manifestation of a clear physical and chemical imbalance. Thus, the foundation was laid for the transfer of human psychology beyond moral decision-making into a medical category. This perspective was also confirmed by and later Greek physicians, especially Galen, who further developed the theory of melancholia. Described as a medical "disorder associated with the dominance of "black bile".

Therefore, when we try to understand the concept of sadness or grief in Aristotle, it is necessary to first put forward his general theory of emotions. An important explanation in this regard is that Aristotle defines human emotions as *pathos*. It is explained under (self-indulgences). It is explained as follows:

When considering an author's conception of depressive disorder, the most obvious place to start is with their thoughts on sadness. But with Aristotle this immediately presents a problem. Aristotle discusses human emotion in great detail, particularly in *Nicomachean Ethics* and *Rhetoric*. The emotions are part of Aristotle's group of *pathe* (passions). In *Nicomachean Ethics* the *pathe* includes 'appetite, anger, fear, confidence, envy, joy, love, hatred, longing, emulation, pity, and in general feelings that are accompanied by pleasure or pain. (Enright, 2018, p. 159)

For Aristotle, emotions are an essential part of human nature and he sees them as psychological states associated with pleasure and pain. That is, sadness, fear, love, pity or joy, all of these are natural movements of the human soul, and not necessarily will or abnormal states. This point leads us to the concern about his mercantile disposition.

According to Aristotle's theory, since *pathe* They manifest on both physical and psychological levels, so in a certain temperamental structure these emotions can become unusually intense. There is a similar condition, in which the depth of feeling, impressionability and mental activity are greater than in ordinary people. This question is actually an intellectual observation. According to Aristotle, the *sadistic* condition is a temperamental intensity that gives extraordinary depth to human emotional and mental life. Since emotions (*pathe*) are associated with both pleasure and pain, a person with a *sadistic* temperament feels both these extremes more intensely. This intensity, when moderate, is transformed into insight, contemplation and creative power. It is as if, for Aristotle, depression is not a completely negative condition in its essence. It is part of the natural structure of human temperament in which emotional depth, intellectual activity and creative sensitivity are hidden.

From Pythagoras to Hippocrates Evolutionary Concept of Depression

The concept of both the universe and man as a harmonious system is very old in the Greek intellectual tradition. In the 6th century BC, the Pythagoreans of Samos are considered the first thinkers to call the dynamic, balanced structure of the universe *harmonia* (ἁρμονία) meaning harmony. For them, the universe is an orderly system in which various elements are interconnected in mutual proportion. This balance is sometimes disturbed by forces that create chaos

and sometimes restored by favorable forces that re-establish harmony. Thus, harmony is not a static state but a continuous process in which balance is disturbed and re-established. In the 5th century BC, two thinkers, who were associated with both the medical and philosophical traditions, further expanded this concept. Empedocles of Akragas mentioned two fundamental active forces at the cosmic level: *neikos* That is, conflict or strife, and *philotes* That is, love or affection. According to him, these two forces sometimes separate and sometimes unite the elements. Thus, the structure of the universe is maintained by the interaction of conflict and harmony. In the same intellectual atmosphere Alcmaeon of Croton applied this concept of harmony to human existence. According to him, man is also a complex system within which different forces and qualities are in mutual balance. He called this internal balance *isonomia*, called, that is, an equilibrium in which no one element dominates over the other. If this balance is maintained, a person remains healthy, and if any one force becomes dominant, disease occurs. Continuing this intellectual tradition, in the late fifth century BC, Hippocrates of Kos who is considered the founder of scientific medicine, based human health, on the principle of temperamental balance. According to him, the mutual moderation of the four humors in the body is *eucrasia*. It is called, that is, a pleasant and healthy mixture. On the contrary, when this balance is disturbed and there is an imbalance in the mixture, it is called *dyscrasia*. It is said that the root cause of disease is the cosmic harmony of Pythagoras, the forces of conflict and harmony of Empedocles, the internal balance of the human being of Alcmaeon and the ethical theory of health of Hippocrates, all together indicate a fundamental principle in Greek thought: health is the name of balance and harmony at all levels of existence, while disease and disorder are the result of imbalance. This concept also provides the basis for understanding Aristotle's later theory of temperament and emotional states, where the human soul, body, and temperament are seen as an integrated and balanced system. In the 6th century BCE, Pythagoras of Samos was the first philosopher to call the dynamic balance of the universe *harmonia* (ἁρμονία, harmony) teaching that this balance is threatened by forces with disruptive tendencies, while it is restored by adaptive forces.⁶ Two Pythagorean physicians who lived in the 5th century BCE contributed thoughts on this line. Empedocles of Akragas wrote about two active forces, *neikos* (νεῖκος, strife) and *philotes* (φιλότης, friendship), which disrupt and restore balance, while Alcmaeon of Croton wrote that the human being, as a complex system, is also in harmonious balance, which he called *isonomia* (ἰσονομία, now meaning equality under the law). At the end of the 5th century BCE, also influenced by Pythagorean notions, the father of scientific medicine Hippocrates of Kos proposed that health is a balance of harmonious coexistence of four humors (εἰς ἁσῖα, *eucrasia*), while any disharmony or imbalance (δυσκρ ἁσῖα, *dyscrasia*) would be the cause of a disease. (Yapıjakis, 2022, p. 175)

Seneca, the Stoic thinker

In the Roman intellectual capital, Seneca is counted among those sages who linked the interrelationship of human emotions, mental decisions, and moral attitudes into a very subtle and profound philosophical system. According to the Stoic school of thought, the inner state of a person does not depend on external events, but on his perceptions, expectations, and preferences regarding these events. From the same theoretical perspective, Seneca considered states such as sadness, anxiety, and depression to be the result of wrong mental decisions and unfulfilled expectations. According to him, emotions are structures born from the decided errors of practical reason, which can be corrected through adaptation and self-discipline. Seneca's Letters to Lucilius The rational basis of human emotions is described as follows:

Seneca depression is the result of a fundamental deviation in a person's value structure. He attributes human suffering to mental and moral faults rather than physical or external causes. For him, a person becomes depressed when he begins to measure his reality by the standards of physical weakness, social opinion, and apparent success even though his true identity is linked to reason and virtue.

Many people think that we are promising more than human nature can handle—and not without reason. For they are considering the body. Let them turn their attention to the mind and they will soon be measuring humans by the standard of God. Raise yourself up, my excellent Lucilius, and leave behind those grammar-school philosophers who bring something which is truly splendid down to the level of syllables and, by teaching petty matters, depress and wear out the mind. You will come to resemble those who discovered those things, not those who teach them and make philosophy difficult rather than great. (Seneca the Younger, 1969, pp. 63–64)

Many people think that we are expecting more from human nature, and this idea is not altogether without reason, for they look at man by the measure of the body. If they turn their attention to the mind, they will soon begin to measure man by the divine standard. O my excellent Lucilius! Raise yourself up and leave those seminary-like philosophers who reduce great truths to mere words, and wither and wear out the mind by teaching trivial things. You will resemble those who have discovered truths, and not those who make philosophy difficult instead of great.

According to him, depression is actually the result of attachment to external values. If a person associates his happiness with social acceptance, fame or material success, he will inevitably suffer from a feeling of fear, humiliation and deprivation. According to Seneca, true happiness is only honorable. That is, virtue. When a person limits the definition of good to virtue, external harms cannot affect his inner security. This is a kind of moral autonomy in which a person is not a prisoner of external events. Furthermore, the meaning of holding all things in contempt is not hatred of the world but an awareness of its non-absolute status. It is a reorientation of values that becomes a source of mental peace. According to Seneca, the treatment of depression is not medicinal or merely emotional, but cognitive and moral: a correct distinction between good and evil, the centrality of virtue, and indifference to external objects. Thus, the concept of mental health in Stoic philosophy is linked to moral fortitude. When a person establishes himself on the standard of virtue, neither insults undermine him nor deprivations make him defeated. This is Seneca's concept of the cure for sadness: elevation of consciousness, purification of values, and internal stability based on virtue.

Epicurus

Epicurus' philosophy, the problem of depression (mental anxiety and boredom) is primarily related to human desires, false beliefs, and irrational fears. According to Epicurus, man is naturally pleasure-seeking and pain-averse, and this tendency is the basis of his moral and psychological structure. However, if pleasure is not properly interpreted, this natural tendency can cause anxiety, restlessness, and inner turmoil. Therefore, he defines pleasure not as mere sensory pleasure, but as a state in which there is a lack of both mental anxiety (ataraxia) and physical pain (aponia). Epicurus observed that humans seek pleasure and avoid pain since childhood, because it is in their nature. As previously mentioned, he taught that eudaimonia is a pleasurable state in which there is no mental agitation (ἀταραξία, ataraxia) and no corporeal pain (ἀπὸ οὐκ ἔστιν, aponia). He maintained that people could exercise prudently their free will to avoid useless beliefs and careless acts and to prefer useful opinions based on reality and virtuous acts to achieve a happy life. The Athenian philosopher taught that 'there is no pleasant life without prudence, goodness and justice, nor is a life with prudence, goodness and justice without pleasure.' (Yapijakis, 2022, p. 178)

Epicurus observed that from childhood man is innately drawn to pleasure and pain, because it is part of his nature. As mentioned earlier, he taught that happiness (eudaimonia) is a pleasurable state in which there is no mental anxiety and no physical pain. He believed that man could avoid frivolous beliefs and reckless actions by using his free will wisely, and could achieve a happy life by adopting useful opinions and virtuous actions based on reality. This Athenian philosopher taught that 'a happy life is not possible without wisdom, goodness, and justice, nor can a life based on wisdom, goodness, and justice be devoid of pleasure.'

Epicurus seeks the root of depression in a false understanding of pleasure. If a person associates pleasure with temporary pleasure, fame, wealth, or the fulfillment of unnecessary desires, he will inevitably suffer from mental anxiety. For him, true happiness lies in mental tranquility (ataraxia) and the absence of physical pain (aponia). Therefore, the cure for depression is to improve the quality of pleasure: only pleasure that is compatible with virtue and wisdom can provide lasting peace. Thus, for Epicurus, ethics and psychology are not separate but interconnected. Furthermore, he considers prudence to be the root of all virtues.

'According to Epicurus, 'Wisdom is the beginning and highest good from which all other virtues arise.' With wisdom: decisions can be made that lead to mental and physical health and a happy life. (a) Objective studies of nature: The knowledge gained from the knowledge that gives satisfaction to the conscious individuals should be adopted, and the unreal myths that create fear and anxiety should be avoided. (b) Reasoning based on empirical standards of truth should be preferred and fallacious dialectical and rhetorical methods should be avoided. (c) Virtues should be adopted as a means of a happy life and vices that cause anxiety and misery should be avoided. (d) Natural and necessary desires should be fulfilled and unnatural and unnecessary desires should be avoided. (e) Those pleasures that lead to happiness should be adopted and those that cause pain and anxiety should be abandoned. (f) Fear should be cured by the knowledge of nature and superstitions and the irrational fear of death should be avoided. (g) Friendships that nourish the mind and the soul should be preferred over solitude.

Ficino And Robert Burton: Depression as Melancholia

the Renaissance, in Europe, the revival of ancient sciences changed the map of the scientific world. Philosophy, medicine, astrology, magical concepts, and the Hermetic tradition all began to become part of the intellectual dialogue again. Medical thought, which until the Middle Ages had been largely limited to the microcosm of the human body, now entered a broader cosmic perspective. A prominent example of this change was iatromathematics, or astral medicine, that is, a combination of medicine and astrology. In this new trend, the concept emerged that man is not just a physical being, but rather the opposite. The microcosm is a harmonious relationship with the larger cosmic system, the macrocosm. Celestial bodies, planets, and cosmic forces influence human mood, health, and psychological

states. Although this trend had begun to take shape in the thirteenth and fourteenth centuries, its full intellectual form emerged in the Renaissance, especially in thinkers such as Marsilio Ficino, Giovanni Pontano, Heinrich Cornelius Agrippa, and Paracelsus.

In Marsilio Ficino and Robert Burton, the concept of depression takes the form of an all-encompassing intellectual and psychological phenomenon under the title of melancholy. In the Renaissance, when ancient Greek and Roman sciences were rediscovered, medicine, philosophy, astrology, and the Hermetic tradition began to merge together to form a new intellectual horizon. Man was no longer considered a mere physical being (microcosm) but a being who had a harmonious relationship with the macrocosm. In this context iatro-mathematics or astral medicine was born, in which human health and psychological conditions were linked to planetary influences. This intellectual atmosphere did not allow melancholy to remain a mere medical disorder but made it a complex condition associated with intelligence, madness, spirituality and creative power.

With the dawning of the Renaissance, all kinds of ancient knowledge found its way back to revolutionize the scholarly playing field. One such revolutionary event was the permeation of medical thought with astrological and magical notions. Medical thought, which was predominantly concerned only with the human microcosm, was now being transformed by iatro-mathematics into 'astral medicine,' the combination of astrology and medicine. Focus was thereby expanded to include the principle of correspondence between the human microcosm and the larger astral macrocosm. This transformation matured during the Renaissance through the works of Marsilio Ficino, Giovanni Pontano, Agrippa of Nettesheim and Paracelsus. With this transformation of medical thought, the topic of melancholy was given new life, especially with regards to the melancholy genius and inspiration. (Nijhuis, 2020, p. 3)

The revival of ancient sciences with the beginning of the Renaissance revolutionized the scientific world. One important change was the incorporation of astrological and magical concepts into medical thought. Medicine, previously largely confined to the human microcosm now iatro-mathematics was changing into 'astral medicine', that is, a combination of medicine and astrology. Thus the principle of correspondence and harmony between the human microcosm and the macrocosm became central. This change was consolidated in the Renaissance through the writings of Ficino, Pontano, Agrippa and Paracelsus. As a result of this change, the subject of melancholy found new life, especially with regard to the concept of the 'melancholic genius'. (Nijhuis, 2020, p. 3)

For Burton, melancholy is a multifaceted and multifactorial condition. He describes it as a state resulting from a combination of physical, psychological, social and astrological factors. According to him, depression is a chaos that can include physical imbalance, wrong thoughts, loneliness, fear, religious obsessions and social factors. The treatment is also diverse: dietary reform, companionship, study, music, worship, moderation and sometimes astrological measures. Thus, in the context of Ficino and Burton, depression as melancholy becomes a cosmic-moral-psychological concept. It is not only a disease but also a mood, a spiritual test and sometimes a source of creative greatness. In Renaissance thought, this condition became a symbol of the inner depth of man and cosmic connection a condition that, if out of moderation, can open the door to suffering, and if balanced, can open the door to wisdom and inspiration.

ST. Augustine

In the Christian intellectual tradition, a single definition was not considered sufficient to understand depression. In different periods and religious schools of thought, it has been seen as a sign of sin, spiritual weakness, temptation sanctification, or an opportunity for spiritual evolution. Thus, depression is not simply a psychological or medical problem, but on the contrary, it also becomes a spiritual and theological question. Although it is not easy to draw precise boundaries between these definitions, for the convenience of discussion they can be divided into three main types. Definitions of depression in Christian theology are generally divided into three types: Spiritual Illness (SI), Spiritual Health (SH) and Potentially Transformative (PT).

There are many Christian theologies of depression. Depression is spoken of variously as the result of personal or original sin, as a kind of sin (eg, despair), as a sign of demonic possession or as involving demons, as a test of faith, as a sign of holiness, or as an occasion for spiritual transformation. Although it is difficult to draw any absolute distinctions, we might helpfully split them into the following three categories for the sake of discussion: (i) Spiritual illness (SI)... (ii) Spiritual health (SH)... (iii) Potentially transformative (PT)... Of these three, SI theology is the most famous... particularly in some Evangelical and Charismatic communities. (Scrutton, 2015, pp. 3–5)

There are many interpretations of depression in Christian theology. It has sometimes been seen as a result of personal or inherent sin, sometimes a sin itself (e.g., despair), sometimes a sign of demonic influence, sometimes a test of faith sometimes a sign of sanctification, and sometimes an opportunity for spiritual transformation. Although precise demarcations are difficult, for the sake of discussion they can be divided into three categories: (i) spiritual illness

(SI)... (ii) spiritual health (SH)... (iii) potential for transformation(PT)... Of these, the spiritual illness view is the most popular, especially in some Evangelical and Charismatic circles.

For Augustine, a major form of depression *acedia* spiritual laziness, apathy, and a decline in the desire for—goodness. Although *acedia* was sometimes considered a sin in later monastic tradition, Augustine saw it not as a mere moral weakness but as the result of misdirected love. When a person becomes so attached to mortal objects that their absence would shake his being, he sinks into melancholy. The remedy is the reordering of love (*ordo amoris*). That is, turning love towards God, who is immortal and absolute. In this context, Augustine's treatment appears on three levels: confession (confession) - the release of inner burdens and the end of self-deception. Prayer - the renewal of the heart and connection with the divine light. Conversion - the correction of the direction of love. Looking back on his experience of grief twenty years later, he admits that at that time his concept of God was just a mental concept, that could not comfort him. This confession includes both self-accountability and intellectual evolution. Thus, depression for him is not just darkness but also a precursor to the awakening of consciousness. For Augustine depression is neither just Spiritual Illness nor necessarily Spiritual Health but it is an inner test that, if taken in the right direction, can become Potentially Transformative. His thought reminds us that human grief cannot be confined to only biological or only moral boxes. It is a multifaceted experience in which physical states, psychic memories, love relationships, and connection with God—all are intertwined. Thus Augustine's interpretation makes depression a spiritual-existential dialogue: man returns to his origin through his brokenness, and through tears he reorders love.

THOMAS Aquinas

was born in Italy, studied philosophy and theology in Paris and Naples, and died in Italy. In the Christian intellectual tradition of the Middle Ages, when the tendency to treat human psychology, ethics, and spirituality as a unity had become established, Thomas Aquinas emerges as a thinker who considers human depression to be an all-encompassing condition whose causes and manifestations spread across different levels. In his philosophical and theological view, human sadness is a complex reality that cannot be resolved into a single angle; it is sometimes a physical weakness and medical condition, sometimes a tangle of mental consciousness, and sometimes a form of lack of light arising in the subtle places of the soul. For Saint Thomas Aquinas, sadness or grief is not a vague condition but a regular passion, which has a clear definition:

According to St. Thomas' schema, sorrow is a passion, defined as a kind of pain arising from the apprehension of a present evil. (Wright, 2022, p. 5) According to the theological framework of Saint Thomas, sorrow is an emotion defined as a form of pain that arises from the perception of an existing evil.

That is, grief is not related to illusion or weak faith, but to the awareness that there is real harm or evil. Depressing here denotes a state of pressure, burden, and internal contraction, which is also consistent with modern psychological understanding. This description is strikingly similar to the modern psychological concept of the freeze response that is, the freezing of the body and nerves in response to trauma. Today it is considered one of the fight, flight, freeze responses, and it is deeply related to depression. St. Thomas also recognizes that these physical effects may not be temporary, especially if the cause of the suffering is long-lasting or occurs in the early and formative period of life.

RENÉ Descartes

According to Descartes, human depression is not a one-sided social, psychological or physical problem, but a condition that appears when the ongoing organizational harmony between the mind and the body is disrupted. In his philosophy, man is certainly composed of two essences, mind and body, but emotions arise from the inseparable connection of these two components. Thus, depression is neither just mental disorder nor just physical weakness, but the tension between the two that surrounds a person's perception, will and feeling with a certain burden. In his *Meditations* he writes, associating human identity with the ability to think,:

what about thinking? Here I make my discovery: thought exists; it alone cannot be separated from me. I am; I exist this is certain... I am therefore precisely nothing but a thinking thing; that is, a mind, or intellect, or understanding, or reason. (Correll, 2022, p. 4)

What about thought? This is the place where I discover myself: thought exists; it is the only thing that cannot be separated from me. I am, I exist, that is certain... So I am really just a thinking being; that is, mind, intellect, or understanding. This concept had a profound impact on later psychological thought, because it linked the true nature of man to mind and consciousness, and thus mental states such as sadness, despair, and depression were not on the margins of human existence but at its center. Descartes's view was also confirmed by many later thinkers. Spinoza who, although he disagreed with the principle of duality, considered emotions to be states arising from the interaction of the state of the body and the concept of the mind, which is in some way an extension of Descartes's interactionist

concept (Spinoza, 1994), William James considered emotions to be essentially mental perceptions of physical states which is an example of a scientifically inclined continuation of Descartes's interpretation. All these views confirm the fact that the foundation that Descartes laid in the philosophy of emotions is not incompatible with the theory of modern psychology that mental illnesses, including depression, are multifactorial and arise from the interaction of physical, psychological, and social elements. Thus, Rene Descartes' theory presents emotions as a comprehensive and multifaceted process, a process in which the civilization of reason, the organization of emotions, and the restoration of body balance are fundamental to the health of the human psyche.

Abu Nasr Al-Farabi

Abu Nasr al-Farabi's concept of the psychological and spiritual structure of man has a very harmonious, philosophical and cultural depth. He does not associate the causes of depression and sorrow only with physical or material conditions, but rather with the discord and imbalance that arises between the three basic levels of the human soul: vegetative, animal and rational. According to him, human happiness lies in the fact that his faculties are concentrated on one center and each force moves in its appropriate direction. When this balance is broken, anxiety arises in the soul, worry in the mind and a state arises in the inner self that can be interpreted in today's language as depression, mental decay or depression. In his *Ehsa' al-Uloom* and *Ara'ah Ahl al-Madinah al-Fadila*, al-Farabi describes the classification of the soul and the interrelationship of the forces as follows:

"Then he mentioned the ultimate happiness to which the souls of the people of the virtuous cities attain in the afterlife, as well as the types of misery to which the souls of the people of the cities opposing the virtuous cities revert after death." (Al-Fārābī, 1993, p. 36)

According to Al-Farabi, the three levels of the human soul, the vegetative, the animal, and the rational, are distinct in their functions but interconnected. The vegetative is concerned with the survival of the body, the animal with sensation and movement, while the rational is concerned with reason and consciousness. When the rational is dominated by animal desires or the animal is disturbed by vegetative demands, a disproportion arises in the soul that takes the form of intellectual disorder, internal weakness, and deviant emotions.

Abu Ali Sina (Avicenna)

Avicenna describes *Melancholia* as a complex disease whose roots lie in both physical and psychological factors. For Avicenna (980, 1037), depression (which he usually places under *melancholia/excessive sadness*) is the result of the interaction between the body and the soul. He views human health and illness as a systematic system of causes, in which physical, psychological, environmental, and lifestyle factors are equally effective. In the text you provided Avicenna describes what he calls the causes of action. It has been said that they actually play a fundamental role in the formation of conditions like depression. Avicenna writes:

"As for the efficient causes: they are the factors that alter or maintain the states of the human body, such as the ambient air and what connects to it; food, water, and drinks and what connects to them... physical and mental movements and rest, including sleep and wakefulness... habits, and external factors coming into contact with the human body, whether they are in harmony with nature or contrary to nature." (Ibn Sīnā, 1999, p. 24)

The meaning of this phrase is:

And as for the effective causes, they are those that cause the conditions of the human body to change or maintain such as the winds and their related matters, food, water and drinks, the things associated with them, physical and mental movements and rest, including sleep and wakefulness, as well as habits and all those things that affect the human body, whether they are in accordance with nature or against nature.

In this context, according to Ibn Sina, depression is a condition that arises from psychological movements and imbalance between sleep and wakefulness, bad habits, unsuitable environment (الحركات والسكنات النفسانية), stillnesses and deterioration of physical balance. He explains that the state of the soul affects the body, and the deterioration of the body gives rise to states such as sadness, fear, and illusion in the soul. Thus, depression is also a sign of the breakdown of the natural order. This concept of Ibn Sina seems to be consistent with modern psychology in that he does not consider depression to be a one-sided mental illness, but rather considers it to be the result of the overall effects of lifestyle, environment, physical health, and mental states. This is why his treatment is based on a diet in accordance with nature, balanced sleep, appropriate movement, a pleasant environment, and the restoration of mental peace. Thus, in Ibn Sina's theory, depression is a comprehensive condition, which requires seeing the human being as a whole (body and soul) to understand and manage. In his concept, treatment is a psychological and aesthetic art, in which the reformation of the depths of the soul has a central place. This is why the *Ikhwan al-Safa*, Ibn al-Muskawiyya

and Ibn Rushd all carried forward this comprehensive concept of Ibn Sina, and considered the mutual balance of revelation, reason, and temperament as the real criterion in the diseases of the human soul.

Abu Zaid Balkhi

Abu Zaid Balkhi(d.934) is considered one of the first thinkers in the Islamic scientific tradition to divide human health into two harmonious spheres, physical and psychological, and to give equal importance to both, establishing an intellectual relationship between them that is very close to the foundations of modern psychosomatic medicine . His book *Masalah al-Abdan wa al-Anfs* is a perfect example of this combination, where he gave depression, fear, delusion, grief and other psychological conditions the same status as physical diseases and integrated the three elements of mental, moral and medical in their treatment. Abu Zaid Balkhi divides depression into two main types: depression that arises from the states of the soul and mind, and depression that arises from the deterioration of the body, matter and mood. He writes in *Masalah al-Abdan wa al-Anfs*:

"As for anxiety and grief, some originate from the soul, while others arise from physical causes (causes pertaining to the body)." (Al-Balkhī, 1984, p. 112).

There are two types of grief and mental anguish: one that originates in the soul, and the other that arises from bodily causes.

This division is very important, because it makes it clear that Balkhi does not consider depression to be solely biological, but rather gives primary importance to mental, spiritual, and cognitive factors within it. According to him, delusions, distorted thoughts, or unfounded fears, if they become persistent, become the cause of psychological depression, while the effects of physical deterioration remain in place. Abu Zaid Balkhi emphasizes that just as a physician focuses on treating physical diseases, a physician should pay equal attention to mental diseases. He writes: "Just as we treat our bodies for diseases using medicines, we must heal our souls of their ailments using that which serves as medicine for them." (Al-Balkhī, 1984, p. 145)

Just as we treat our bodies with medicines, it is necessary to treat our souls with the diseases for which psychological medicines exist.

Balkhi gives equal importance to mental health, and in some cases even more, than physical health, and therefore his treatment system bears a deep resemblance to today's cognitive-behavioral therapy . In describing the treatment, Balkhi gives first place to psychological counseling. According to him, the elimination of wrong thoughts, satisfying the soul, and correcting fears and illusions are the basic treatments for mental illnesses. He states:

"Whoever is afflicted with anxiety should speak to their soul with that which brings it peace, and provide it with new focus to divert it from dwelling on that which saddens it." (Al-Balkhī, 1984, p. 141)

It is essential for someone who is experiencing grief to talk to their soul in a way that will bring them comfort, and to present to it things that will distract them from the subject of grief.

In which the individual conducts a rational and behavioral dialogue with his or her self so that the triggers of depression are weakened. Balkhi also makes pleasant hobbies, social relationships, appropriate entertainment, and moderate mood maintenance part of the treatment, so that the self is not confined to the continuation of sadness. According to him, the correction of fears and illusions is necessary because many mental illnesses arise from the dominance of thoughts, and the correction of thoughts lightens the burden of emotions. His concepts later influenced Islamic psychology, Eastern medicine, and moral philosophy, and this is why he is also called the precursor of modern psychotherapy .

Razi

Razi's thought, melancholia is a multifaceted condition in which the body's temperamental constitution and the inner movements of the soul influence each other in a complex way. In his medical and psychological view, the rise of the melancholic substance does not only bring about changes in the physical organs but also affects the structure of perception, illusion and imagination. That is why he understands melancholia in the mutual relationship between the body and the soul, and by establishing the inner hierarchy of symptoms, he presents a special medical and psychological analysis on it.

"Sometimes black bile overcomes the brain and alters the soul's perceptions, causing the patient to fall into delusion, sorrow, and fear." (Al-Rāzī, 1955, p. 8)

Sometimes it happens that the mind is overwhelmed and the perceptions of the soul are altered, causing the patient to be overcome by delusion, sadness, and fear.

Razi considers this melancholy dominance not only as a physical disorder but also as a fundamental change in the mental and perceptual system, due to which such a distortion is created in the structure of concepts that is transformed into a permanent state of illusion, sadness and fear. According to him, the symptoms of melancholia indicate a deep

qualitative breakdown of the heart and mind. That is why, while classifying the symptoms, he first gives place to delusional melancholy in which the world of perception is distorted; then sadness that creates heaviness in the mood, of the heart; then fear that creates causeless anxiety about the future; and finally narrow-mindedness that limits the scope of thought. In the chapter on treatment, Razi adopts a very balanced and culturally sophisticated strategy. He mentions elements such as good food, fragrance and natural scenery, in which the possibilities of comfort and mood improvement are hidden on both physical and spiritual levels. Similarly, he considers good company and walking as factors that smooth out a person's internal states. This strategy testifies to the fact that for Razi, the treatment of melancholia is not only a correction of physical morality but also an aesthetic, psychological process that re-establishes a person's spiritual elegance and mental balance. This concept among ancient Muslim physicians is also supported by the Galenic school of thought, where the melancholic substance is considered the primary factor influencing perception and imagination, and both Al-Farabi and Ibn Sina have described this moral and psychological connection in their own philosophical language, thus Razi's theory seems to be connected to a broader scientific tradition.

Ibn Rushd

Ibn Rushd's approach to mental illness, especially depression, is a fine blend of pure philosophical and medical insight. He sees the composition of the soul and body as such an interconnected system in which the health of both is so intertwined that the deterioration of one undermines the structure of the other. From this basic concept, he derives the cause of mental illness: the mixture of mood swings and delusions. For him, depression is not an isolated psychological condition but a disturbance in the overall system of body and soul that encompasses perceptions, ideas and emotions. For Ibn Rushd, a fundamental characteristic of the human psyche is that it achieves balance through pleasure and enjoyment. In the Middle Commentary on Rhetoric, he defines pleasure as follows:

Pleasure is a change to a disposition that is suddenly generated by a natural feeling through the thing that is felt, when the thing that is felt is natural to the feeling. (Ibn Rushd, 1977, p. 95)

Pleasure is a sudden change in the state of the soul that is produced by a natural sensation from an object that is naturally suitable for that sensation.

According to Ibn Rushd, pleasure is a positive and natural change in the disposition of the soul. Accordingly if a person is in a state where this natural change does not occur, that is, neither the feeling is in harmony with the object nor does the soul experience pleasure, then this state can turn into mental stagnation, disgust, and depression, which forms the intellectual basis of depression. Ibn Rushd describes two basic sources of pleasure: Nature and habit. He writes:

There appear to be two sources of pleasure: one natural, which we delight in willingly, and another acquired through habit. (Ibn Rushd, 1977, p. 95)

There appear to be two sources of pleasure: one natural, in which man feels pleasure naturally and joyfully; and the other that which is acquired through habit.

This concept is part of the great wisdom tradition of the Muslim world, in which Avicenna considered the adjustment of the mood, Al-Farabi the balance of the strong, Al-Razi the rise of the dark matter, and Al-Jurjani considered the mutual effects of the states of the soul and body as the basis of depression. Ibn Rushd is one of the last strong links in this chain, who gave a new intellectual depth to medicine in the light of philosophy.

Fakhraddin Razi

Imam Fakhr al-Din Razi was born in the city of Ray, Iran, studied in the scholarly centers of Khorasan and Transoxiana, and finally died in Herat. For Fakhraddin Razi, the cause of mental anguish and depression is an imbalance in the mutual movements of perception, illusion, and intellect, which pushes the soul away from its center and into the realms of anxiety and sorrow. He understands mental states through the interaction of the power of perception and the power of illusion, and considers the unbalanced actions of both of them to be the main source of sorrow and grief. According to him, depression appears when illusion takes hold of a particular concept and intensifies it, and the intellect, instead of weighing and analyzing it, keeps pulling it in that one direction. Thus, the mind becomes a victim of one-directional fixation and a state is imposed on the soul in which both intellectual space and emotional expansion begin to shrink. For Imam Fakhraddin Razi, the rational soul is a simple essence, but its perceptual and intellectual activities are very diverse and numerous. He explains this problem as how a simple soul carries out so many concepts and affirmations. They write :

"For the rational soul is a simple substance... and that multiplicity cannot be due to a multiplicity in the recipient, because the recipient of those intellectual impressions (intellections) is the very essence and substance of the soul itself." (Al-Rāzī, 1990, p. 352)

The rational soul is a simple essence, and the multiplicity of its functions cannot be due to the multiplicity of its potential (capable of perception), because the potential of these perceptions is the soul's own essence and nature. Razi presents three basic principles for treatment : cognitive correction , attentional redistribution and mood balance , .Intellectual Correction Of Through Illusion Of Made Done One sided meanings dissolve; division of attention frees the mind from the constriction in which it clings to a single concept; and temperamental balance moderates mental and physical movements .This Method Treatment This Talk Of Indication Does Is That Razi Of Near Depression Wisdom, Perception And Illusion Of is the result of complex interactions, and its solution is also associated with the improvement of these three .Of This Theory It also bears striking similarities to modern principles of cognitive therapy , especially intrusive thoughts , cognitive fixation and ,attentional rebalancing .

Imam Ghazali

Imam Ghazali was born in Tus, attained scholarly prominence in Nishapur and Baghdad , and finally died in his hometown of Tus. The most profound analysis of the inner tension that manifests itself in the human psyche in the form of sadness, ego, and horror is found in the Islamic intellectual tradition of Imam Abu Hamid al-Ghazali; for he sees the illness of the soul not only as a moral crisis but also in the context of an existential disorder, in which the temperament, intellect, soul, and heart influence each other. According to al-Ghazali, the influence of inner suffering also casts a shadow on the physical condition, and thus the unity of the human personality begins to be weighed down by an invisible anxiety. In this composite understanding, Greek temperaments, Quranic humanism, and Sufi observation, all three come together in an intellectual synthesis that serves as a precursor to many cases of post-traumatic psychology.

Imam Ghazali (RA) considers the internal states of the human soul, especially fear, sadness, and anxiety, as functions of the heart. He considers fear to be a permanent mental and emotional state, which, if exceeded, burns the heart and causes a person to suffer internal breakdown. He writes:

"Thus, anyone who is afraid must inevitably picture in their mind a harm from one of the two categories, and the expectation of it grows so intense in their heart that it burns their heart due to sensing that impending harm." (Al-Ghazālī, n.d., *Kitāb al-Khawf wa al-Rajā'*)

It is necessary for every person who fears to establish in his soul the idea of some abomination, and to strengthen the anticipation of it in his heart so much that his heart begins to burn with the feeling of this abomination.

According to Ghazali, when a person's heart is constantly occupied with the idea of an expected loss, failure, or punishment, this state turns into heartburn, despondency, and despair, which are the basic features of depression in the language of modern psychology.

Such as those whose hearts are overcome by the fear of death, or the fear of failing to repent, or the fear of not being able to fulfill the rights of Allah, or the fear of losing the softness of the heart and turning into hardness. All these conditions are deeply related to existential depression and moral anxiety in modern terms. According to Ghazali when the heart is constantly worried about its own moral failure, spiritual decline and fear of a bad end, if this fear is deprived of the balance of hope (raja), then it leads a person to inner depression, self-blame and heart withering.

Ibn al-Qayyim

Ibn al-Qayyim al-Jawziyyah was born in Damascus , studied in the same city as his teacher Ibn Taymiyyah, and was buried in the same city. In the context of ancient Islamic psychology, Ibn al-Qayyim al-Jawziyyah's writings represent a comprehensive perspective in which grief, sorrow, melancholy, fear, and anxiety were not seen merely as internal states or spiritual afflictions, but rather as a psychological, physical, and temperamental reality. For him, the dynamics of the human soul emerge as the interaction of the body, mind, thought, temperament, and external circumstances. For this reason, Ibn al-Qayyim's interpretation of grief and sorrow takes on a multifaceted form that is remarkably close to the psychological interpretations of later times.

Ibn al-Qayyim, the cause of harmful sadness or grief that arises within a person is not simply an inner weakness; this condition sometimes arises from physical weakness, sometimes increases due to mental anxiety, causes of fear, or negative thoughts, and sometimes becomes intense due to the burden of external circumstances. Thus, in *Zad al-Ma'ad* he describes these same complexities of the human inner self as follows:

"Anxiety and grief occur due to the weakness of the soul, alterations in temperament, and the dominance of negative thoughts, as well as the frailty and weakness resulting from physical conditions." (Ibn Qayyim al-Jawziyyah, 1998, p. 112)

Sadness and grief arise due to weakness of the soul, deterioration of mood, dominance of negative thoughts, and weakness arising from the condition of the body.

Three important aspects are prominent in the quoted passage : the relationship of psychological states to mood and body, the role of mental and intellectual stimuli, and the influence of external circumstances. The combination of all these elements is what modern psychology calls the bio-psycho-social model. Ibn al-Qayyim's treatment also reflects this point of view. He not only mentions spiritual perseverance, but also considers physical comfort, mental strength, hope, and temperamental balance as the basic principles of treatment. Thus, Ibn al-Qayyim's interpretation of grief and sorrow contains an intellectual and experimental synthesis that harmonizes the physical, mental, and intellectual aspects of human existence, and this is the characteristic of his writings that has made him one of the important architects of Islamic psychology.

SUMMARY

Depression in modern times is a pervasive psychological problem that affects the physical, mental, spiritual, and social aspects of human existence. Although modern psychology views it in terms of biological, psychological, and social factors, ancient Western and Muslim thinkers also offered very profound interpretations of this condition. Greek thinkers, especially Hippocrates and Aristotle, linked depression to physical mood and emotional balance. Hippocrates attributed it to an excess of "black bile," while Aristotle associated the melancholic mood with creative sensitivity and intellectual depth. The Stoic philosophers Seneca and Epicurus attributed mental anxiety to false values, irrational desires, and fear. In the Renaissance, Ficino and Robert Burton saw melancholia as a combination of physical, spiritual, and cosmic factors. Christian thinkers Augustine and Aquinas linked depression to spiritual and moral experience. Muslim thinkers such as al-Farabi, Ibn Sina, Abu Zaid al-Balkhi, Razi, Ibn Rushd, al-Ghazali and Ibn al-Qayyim presented a comprehensive interpretation of depression through the interrelationship of the soul, intellect, heart and temperament. All these ideas highlight the fact that depression is not just a medical illness but a multifaceted human condition, which requires an integrated view of the body, mind, spirit and society to understand.

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