

## EFFECTIVENESS OF INTEGRATING ISLAMIC SPIRITUAL PRACTICES IN PSYCHOTHERAPY FOR TREATING POST-TRAUMATIC STRESS DISORDERS

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### ABSTRACT

*As the modern therapeutic approaches have shortcomings dealing patients with severe PTSD symptoms, this research highlights the integration of psycho spiritual method in the conventional therapeutic method. The study explores the effectiveness of Islamic spiritual practices like Salah (prayer), Dhikr (remembrance of Allah), Qur'anic recitation, and Tawakkul (trust in Allah) in alleviating PTSD symptoms among Muslim participants. A total of 41 participants responded to the survey. Quantitative and Qualitative methods were used to assess the impact of these practices on trauma-related symptoms. The quantitative data was analyzed using a Chi-Square test, revealing a statistically significant association between the severity of PTSD symptoms and the perceived effectiveness of Salah and Dhikr, which were identified as the most effective practices. Qur'anic recitation also showed beneficial effects, while Tawakkul was reported as less effective. The importance of Tawakkul in life needs to be integrated at a very early age for it is one aspect that can suffice mental stability. Qualitative responses highlighted the emotional relief provided by Salah and Dhikr, with participants describing these practices as sources of comfort and spiritual connection. The findings suggest that Islamic spiritual practices, particularly Salah and Dhikr, offer meaningful support for Muslims suffering from PTSD. The study concludes with recommendations for integrating these practices*

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*into therapeutic settings and further exploration of their long-term effects in managing PTSD.*

**Keywords:** *Islamic Spiritual Practices; Psychotherapy; Post-Traumatic Stress Disorders (PTSD).*

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## **1. INTRODUCTION**

Post-traumatic stress disorder (PTSD) is a debilitating condition that develops in response to exposure to terrifying events involving physical harm. It is characterized by symptoms such as intrusive memories, emotional numbness, hypervigilance, and avoidance, which significantly impair daily functioning (American Psychiatric Association, 2013). This can be the person himself who has been harmed or is a witness to his close and loved one being harmed. Trauma has taught people to become resilient or it affects in totality or is neutral. The person who is affected by the trauma is the one who develops this PTSD. They tend to lose hope and is in fear of being harmed again and tend to lose and will be unable to take life forward. For Muslims, PTSD is not only viewed as a psychological issue but also as a test of faith, emphasizing reliance on Allah's will (Qadr). As it is mentioned in Quran "...And whosoever puts his trust in Allah, and then He will suffice him..." (65:3). This verse would serve as a reminder and is enough assurance for those who have faith in Allah. It is here where we lack and are slaves to our emotions and fail to face the adversities of life.

Various psychological treatments have been devised but have failed or are unsuccessful in eliminating symptoms of PTSD. A

major trend among psychologists emphasizing importance of religion as a factor in treatment of mental illnesses has emerged. Islamic history and the development of Islam in stages from its beginning is witness how individual personalities who learnt Islam from the prophet PBUH changed. The impact of Quran and Islamic preaching had designed their personalities from which one's conscience shakes and soul is awakened. It renews the thinking capacity and clears the negativity. The exposure to Quran and its influence in life makes a person a new version of humility and confidence to face the world.

The following are the specific research objectives of the study:

1. To assess the effectiveness of Dhikr, Salah, Qur'anic recitation, and Tawakkul in reducing PTSD symptoms.
2. To explore the integration of these practices with conventional therapy for improved outcomes.

## **2. REVIEW OF LITERATURE**

Islamic psycho-spiritual therapy guides, educates and cultivates characters aiming to restore the original fitrah or the innate human nature by strengthening the Tawakkul or trust in Allah. Asyraf & Bahari (2017) describe the psycho spiritual therapy as one that integrates religion and spirituality. Islamic psychotherapy has roots in Quran and Sunnah and descriptions of healing technique which transforms the sickness to well-being in accordance to the creator. Carl Jung states that patients who consulted him in thirty years of his practice suffered from similar causes and it was lack of faith and shaky beliefs and recovered as faith regained. The contemporary psychotherapy uses Cognitive Behavioral Therapy (CBT) to

treat patients with PTSD but neglects the spiritual and cultural needs of Muslim clients (Abu-Raiya & Pargament, 2010). Islamic practices such as Salah (prayer), Dhikr (remembrance of Allah), Tawakkul (trust in Allah), and Qur'anic recitation are powerful coping mechanisms. The Qur'an promises relief with hardship, stating "Indeed, with hardship comes ease" (94:6), and encourages seeking comfort through patience and prayer (2:153). Scholars like Ibn Kathir interpret these practices as remedies to inner peace and resilience. Hadith supports this as Prophet Muhammad (PBUH) taught that strength lies in self-regulation and reliance on Allah (Sahih Muslim, Hadith 2999). These teachings emphasize resilience, and through these spiritual practices one can reduce stress and anxiety.

The development of research highlights the effectiveness of Islamic spiritual practices in alleviating anxiety, depression, and PTSD. Studies by Keshavarzi (2020) and Razali et al. (2002) suggest that Salah and Dhikr reduce emotional distress, complementing conventional therapies. Moulaei et al. (2023) found Qur'anic recitation effective in reducing stress and anxiety by restoring emotional balance. Tawakkul, placing trust in Allah's plan promotes resilience by alleviating anxiety (Tirmidhi). This sense of peace helps individuals cope with life's uncertainties (Hasbi, 2020). Despite evidences about the benefits, empirical research on the impact of these practices on PTSD remains limited. This calls for the need to further exploration. This study aims to assess the effectiveness of Islamic spiritual practices—Salah, Dhikr, Qur'anic recitation, and Tawakkul—in reducing PTSD symptoms and enhancing psychological resilience.

## **2.1 PTSD and Conventional Therapy**

Post-Traumatic Stress Disorder (PTSD) impairs daily functioning and is typically treated with Cognitive Behavioral Therapy (CBT). However, CBT overlooks the spiritual and cultural needs of Muslim clients, highlighting the need for therapies that incorporate Islamic spirituality (Abu-Raiya & Pargament, 2010). Practices like patience and gratitude are important for emotional resilience and stress reduction (Emmons, & McCullough, 2003).

## **2.2 Islamic Spiritual Practices and PTSD**

Islamic spiritual practices are holistic in approach to healing, with key practices supporting emotional recovery. Dhikr (Remembrance of Allah), reduces anxiety and depression by promoting mindfulness (Insyra et al., 2023). Salah (Prayer) regulates emotions and enhances well-being, as in the Qur'an (2:153). Qur'anic Recitation: Offers emotional grounding and healing (17:82). Tawakkul (Trust in Allah): Fosters resilience and reduces stress (Maulana, 2023; Utz, 2011). Integrating these practices into therapy promotes a balance of spiritual and psychological healing (Rothman & Coyle, 2018).

Imams and community networks play a crucial role in trauma recovery by offering spiritual support and reducing mental health stigma (Abu-Ras et al., 2008).

Studies show that Islamic spiritual practices alleviate mental health issues. For example, Dhikr and Tazkiyah (spiritual purification) help reduce anxiety and depression (Manalu et al., 2022), and Tawakkul and patience are key in managing stress (Fahm, 2019).

### **2.3 Gap in the Literature**

Longitudinal Studies: There is limited research on the long-term effects of Islamic practices on PTSD (Razali et al., 2002).

- **Quantitative Evidence:** There are minimal studies that use standardized tools like the PTSD Checklist (PCL) to measure effectiveness (Hassan & Dar, 2016).
- **Cultural Variability:** Most studies focus on Muslim-majority regions, with limited research in multicultural contexts (Hooman, 2013).
- **Holistic Integration:** Few studies explore the combined impact of multiple practices (Keshavarzi & Khan, 2018).
- **Ethical Barriers:** Further research is needed on integrating spiritual practices in secular therapy (Razali et al., 2002).

Islamic spiritual practices like Dhikr, Salah, Qur'anic recitation, and Tawakkul provide a meaningful and culturally grounded way to treat PTSD. By promoting emotional healing and resilience, these practices highlight the importance of further research and their amalgamation into conventional therapeutic methods.

### **3. RESEARCH METHODOLOGY**

The study included 40 Muslim participants who self-identified as experiencing PTSD symptoms. Participants were selected through responses from community groups, representing varied ages, genders, and backgrounds. Informed consent was obtained prior to participation.

### **3.1 Research Design**

A quantitative design was used to assess the effectiveness of Islamic spiritual practices, Salah, Dhikr, Qur'anic recitation, and Tawakkul, in alleviating PTSD symptoms. Both quantitative and qualitative methods were employed to evaluate the relationship between PTSD severity and the perceived effectiveness of these practices.

### **3.2 Data Collection**

**3.2.1 Quantitative Data:** Post-Traumatic Stress Disorder Checklist (PCL-5): Assessed PTSD severity, categorizing participants into minimal, mild, moderate, or severe PTSD levels.

Effectiveness of Islamic Practices Questionnaire: Participants rated the effectiveness of Salah, Dhikr, Qur'anic recitation, and Tawakkul in reducing PTSD symptoms.

**3.2.2 Qualitative Data:** Participants provided open-ended feedback on the impact of each spiritual practice on their well-being, which was analyzed for insights into the perceived benefits and limitations.

### **3.3 Statistical Analysis**

The data were analyzed using the Chi-Square Test for Independence to examine the relationship between PTSD severity and the perceived effectiveness of the spiritual practices. A significance level of 0.05 was used, with 3 degrees of freedom for the analysis.

### 3.4 Ethical Considerations

Ethical approval was obtained, and all participants were informed about the study's purpose. Participation was voluntary, and confidentiality was maintained.

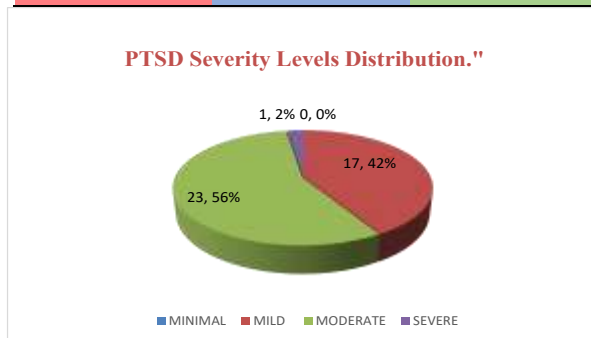
## 4. ANALYSIS AND INTERPRETATION

This section presents the findings on PTSD severity and the perceived effectiveness of Islamic spiritual practices (Salah, Dhikr, Qur'anic Recitation, and Tawakkul) in alleviating symptoms. Data were collected from 40 participants, and a Chi-Square test for independence was conducted.

### 4.1 PTSD Severity

The severity of PTSD symptoms among participants was as follows:

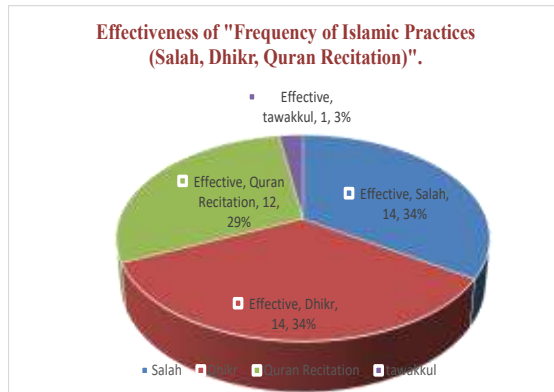
Severity	participants	percentage
Mild	17	42%
Minimal	0	0%
Moderate	23	56%
Severe	1	2%





The majority of participants (98%) reported moderate to mild stress, indicating significant trauma-related symptoms in the sample. The perceived effectiveness of the spiritual practices in alleviating PTSD symptoms was reported as:

Salah (Prayer):	14
Dhikr (Remembrance of Allah	14
Qur'anic Recitation:	12
Tawakkul	1



### Chi-square test:

A Chi-Square test for independence was conducted to examine the relationship between PTSD severity and the effectiveness of Islamic spiritual practices (Salah, Dhikr, Qur'anic recitation, and Tawakkul) in alleviating symptoms.

### Chi-Square Calculation:

The Chi-Square statistic is calculated using the formula:  $\chi^2 = \sum [(O - E)^2 / E]$

Where: O = Observed frequency, E = Expected frequency

Islamic practice	Observed (O)	Expected(E)	$((O - E)^2)$	$((O - E)^2 / E)$
Salah	14	10	16	1.6
Dhikr	14	10	16	1.6
Quranic recitation	12	10	4	0.4
Tawakkul	1	10	81	8.1
Total			117	11.7

The Chi-Square test was calculated as follows:  
 $\chi^2 = 1.6 + 1.6 + 0.4 + 8.1 = 11.7$

With 3 degrees of freedom (df=4-1), the critical value at a significance level of 0.05 is 7.815. Since the calculated Chi-Square value (11.7) exceeds the critical value (7.815), the null hypothesis is rejected, indicating a statistically significant difference in the effectiveness of the spiritual practices for alleviating PTSD symptoms.

The results showed that Salah and Dhikr were reported as the most effective practices, with 14 participants citing significant benefits from each. Qur'anic recitation was effective for 12 participants, while Tawakkul was effective for only one participant. These findings suggest that the action-oriented nature of Salah and Dhikr may contribute to their higher effectiveness, while Tawakkul, perceived as more abstract, which warrants further exploration.

## **5. DISCUSSION**

This study explored the effectiveness of Islamic spiritual practices Salah (prayer), Dhikr (remembrance of Allah), Qur'anic recitation, and Tawakkul (trust in Allah), in alleviating PTSD symptoms among Muslims. The results suggest that Salah and Dhikr were perceived as the most effective practices, with Qur'anic recitation showing some benefits, but Tawakkul was less frequently cited as effective. The cause may be the lack of awareness among participants regarding reliance on Allah SWT, which could not be explained, as it was an online survey.

### **5.1 Effectiveness of Salah and Dhikr**

Salah and Dhikr were acknowledged as the most effective practices by 14 participants. These practices help calm emotions and reduce anxiety associated with PTSD. The organized nature of Salah, which is divine, involving physical movement and mindfulness, probably activates the parasympathetic nervous system, promoting relaxation (Kabat-Zinn, 2003). Dhikr, with its rhythmic repetition, serves as a cognitive distraction, aiding in trauma recovery and providing a sense of spiritual connection, which is crucial for trauma survivors.

### **5.2 Impact of Qur'anic Recitation**

Qur'anic recitation was effective for 12 participants, consistent with previous studies indicating its role in stress reduction and emotional healing (Al-Krenawi & Graham, 2011). However, fewer participants reported it as effective compared to Salah and Dhikr, possibly due to individual preferences or the more passive nature of recitation. In contrast to the active

engagement required by Salah and Dhikr, Qur'anic recitation might not have been as immediately accessible for trauma management as it needs attention and literacy of reading Quran.

### **5.3 Effectiveness of Tawakkul**

Tawakkul was cited by only one participant, suggesting that its abstract nature may make it harder to apply in the face of active PTSD symptoms. Tawakkul, which involves trust in Allah's plan, may require deeper spiritual maturity and long-term engagement to be effective in trauma recovery. This finding suggests that Tawakkul could be complementary, but in real sense it is a primary tool in managing trauma only for those who understand and have faith. This act should be incorporated in early years of development for a successful and happy life ahead.

The Chi-Square test confirmed a significant relationship between PTSD severity and the effectiveness of the practices. Salah and Dhikr were more frequently perceived as effective, while Tawakkul was less commonly reported. The Chi-Square value (11.7) exceeded the critical value (7.815), indicating that the differences in effectiveness are statistically significant. These results suggest that while Salah and Dhikr may provide more immediate relief, Tawakkul might support long-term spiritual resilience.

## **6. CONCLUSION, IMPLICATIONS AND RECOMMENDATIONS FOR FUTURE STUDIES**

This study explored the effectiveness of Islamic spiritual practices, Salah, Dhikr, Qur'anic recitation, and Tawakkul in alleviating PTSD symptoms among Muslim participants. The results indicated that Salah and Dhikr were the most commonly reported practices for reducing PTSD symptoms, with significant emotional relief. Qur'anic recitation showed some benefits, though less frequently, and Tawakkul was the least perceived as helpful. The Chi-Square analysis confirmed a significant relationship between the perceived effectiveness of these practices and PTSD severity. These findings suggest that Islamic spiritual practices, particularly Salah and Dhikr, can support trauma recovery and emotional well-being.

Integrating Islamic spiritual practices into trauma-focused therapy can offer customarily relevant tools for managing PTSD. Salah and Dhikr could balance traditional therapeutic methods, promoting emotional regulation and spiritual well-being. Further exploration of Tawakkul's role is needed, as it may require deeper spiritual engagement to be fully effective in trauma recovery.

In conclusion, while Salah and Dhikr appear most effective in alleviating PTSD symptoms, further research should explore Qur'anic recitation and Tawakkul, particularly in Muslim communities, to enhance our understanding of how spiritual practices can support mental health and recovery.

To enhance trauma-focused therapy for Muslim clients, it is important to integrate Islamic practices such as Salah and Dhikr

alongside traditional methods to support emotional regulation. Emphasizing the role of *Tawakkul*—trust in Allah’s plan—warrants further research to understand its therapeutic potential in managing long-term stress. The impact of specific Qur’anic recitations on PTSD symptoms should also be explored, particularly in relation to their frequency and duration. Longitudinal studies are essential to assess the sustainability of Islamic spiritual practices in PTSD recovery. Additionally, culturally sensitive therapeutic approaches are crucial, encouraging therapists to incorporate relevant Islamic elements into treatment plans. Finally, more research is needed to investigate the psychological and physiological mechanisms through which practices like Salah, Dhikr, and Qur’anic recitation contribute to trauma healing.

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