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## **Mapping The Inner Self: Cognitive Behavioural Therapy, Islamic Psychology, And Heart-Centred Spirituality Approaches To Healing**

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### **Abstract**

In today's increasingly complex psychological and spiritual landscape, there is an urgent need for integrative frameworks that address not only mental distress but also the deeper human search for meaning, purpose, and inner balance. This paper explores the inner self through three distinct yet potentially complementary approaches to healing: Cognitive Behavioral Therapy (CBT), Islamic Psychology, and a modern reflective model called the 3As Heart-Centered Framework, which includes Awareness, Awakening, and Action. CBT, rooted in Western clinical psychology, focuses on restructuring thought patterns to influence behavior and emotional well-being. Islamic Psychology, on the other hand, is based on a spiritually grounded epistemology that emphasizes the purification of the soul (*tazkiyat al-nafs*) and aligning the *qalb* (heart) with divine guidance. The 3As Framework integrates elements from both traditions, providing a practical, spiritually sensitive pathway that guides from deep self-awareness to spiritual awakening and ethically guided action. By examining the theoretical foundations and shared values of these models, the paper proposes a more holistic approach to inner healing—one that engages the intellect, nurtures the heart, and honors the spiritual dimension of human existence.

**Keywords:** Cognitive Behavioural Therapy, Islamic Psychology, Heart-Centred Spirituality, 3As Model, Inner Healing

## Introduction

In recent decades, the conversation around mental health has expanded beyond clinical diagnosis and pharmacological treatment to include holistic and integrative approaches to healing. People are not just cognitive machines or emotional beings but also spiritual, ethical, and relational beings who seek meaning, inner balance, and connection. As rates of anxiety, depression, and existential emptiness increase worldwide, especially among youth and professionals, scholars and practitioners are asking: What truly heals the human? What care models address not only the mind but also the soul and heart?

This paper examines three frameworks that provide different yet potentially complementary views for understanding and supporting inner healing: Cognitive Behavioral Therapy (CBT), Islamic Psychology, and the 3As Heart-Centered Spirituality (HCS) Framework. CBT is a well-established, evidence-based therapy that explores the connections between thoughts, emotions, and behaviors, aiming to help individuals change harmful thinking patterns to reduce psychological distress. However, while CBT effectively addresses surface-level thoughts and behaviors, it may not fully engage the spiritual and existential dimensions of human suffering. Islamic Psychology, on the other hand, presents a spiritually integrated model rooted in the Islamic worldview, where the self (*nafs*), heart (*qalb*), intellect (*'aql*), and spirit (*ruh*) interact within a divine moral order. Healing from this perspective involves purifying the self (*tazkiyat al-nafs*) and aligning with one's fitrah, the innate spiritual nature. To bridge the gap between psychological science and spiritual transformation, the 3As Model and Heart-Centered Spirituality Framework are developed as modern tools for guiding personal change through three interconnected stages: Awareness, which involves self-honesty and reflective insight; Awaken, which activates the moral and spiritual consciousness of the heart; and Action, which involves ethical and purposeful engagement with life, relationships, and the divine.

This paper examines how three frameworks—CBT, Islamic Psychology, and 3As-HCS—can be compared, contrasted, and potentially integrated to support a holistic view of healing that is ethically grounded, spiritually informed, and culturally sensitive. Each of these approaches offers insights into the human condition, therapeutic possibilities, and pathways of transformation. While CBT is widely used in mainstream therapy, its secular and cognitive focus may limit its ability to address spiritual and existential questions deeply. Conversely, Islamic Psychology provides a theologically grounded model of human development, but it is still developing in structured clinical applications. The 3As framework aims to bridge these gaps by integrating the psychological, spiritual, and ethical aspects of healing in a way that is both accessible and spiritually resonant. This paper aims to outline the key principles of each model, examine their similarities and differences, and suggest how a spiritually integrated approach can enrich therapeutic and educational practices, especially in multicultural and post-secular contexts.

## **Literature Review and Theoretical Foundations**

This section examines the theoretical and epistemological foundations of the three models: Cognitive Behavioral Therapy (CBT), Islamic Psychology, and the 3As Heart-Centered Spirituality Framework. Each approach is based on different philosophical assumptions about the nature of the human being (ontology), the process of healing (epistemology), and what constitutes well-being (teleology).

### **Cognitive Behavioural Therapy (CBT)**

Cognitive Behavioural Therapy (CBT) originated in the 1960s through the pioneering work of Aaron Beck and Albert Ellis, who combined cognitive psychology with behavioural theory. Fundamentally, CBT is based on the idea that unhealthy thoughts cause emotional pain and unhelpful

behaviors, and changing these thoughts can lead to better psychological health (Beck, 1976).

Cognitive Behavioral Therapy (CBT) operates within a secular and empirically grounded framework, focusing on measurable, evidence-based outcomes. It is well-known for its structured, short-term, goal-oriented approach, making it one of the most accessible and effective forms of psychotherapy in clinical practice. Essentially, CBT highlights the dynamic connection between thoughts, feelings, and actions, suggesting that unhelpful thinking patterns significantly contribute to psychological suffering. Its primary strategies include cognitive restructuring, which involves identifying and challenging distorted or irrational beliefs; behavioral experiments, where clients are encouraged to test new thoughts or behaviors in real-world situations; and emotional regulation techniques, which help individuals develop healthy coping skills for managing difficult emotions (Kazdin, 2008). While CBT's strengths lie in its clarity, structure, and strong scientific support, its secular nature might limit its appeal for clients seeking more existential or spiritual depth in therapy. CBT is effective for a range of issues, including anxiety, depression, and trauma (Hofmann et al., 2012). However, critics argue that CBT may lack depth in addressing existential, spiritual, and moral aspects of suffering, often reducing distress to dysfunctional thinking without acknowledging the soul's longing for meaning and transcendence (Rose, 2016).

### **Islamic Psychology**

Islamic Psychology, which draws on the teachings of classical scholars like al-Ghazali, Ibn Sina, and al-Raghib al-Isfahani, provides a holistic and spiritually integrated approach to understanding the human mind. Unlike Western psychology, which often separates mental functions into distinct parts, Islamic psychology views the human being as a unified entity composed of four interconnected faculties. These include *nafs* (the self or ego), which is the origin of basic desires and inner conflicts; *qalb* (the

heart), the spiritual center of consciousness and moral judgment; *aql* (the intellect), the reasoning ability responsible for thought and understanding; and *ruh* (the spirit), the divine essence breathed into humans, symbolizing their connection to the Creator (Rothman, 2018).

In this paradigm, the goal of healing is not just to reduce psychological symptoms but to transform the self through the process of *tazkiyat al-nafs*, or the purification of the soul (Rassool, 2010). This involves aligning one's thoughts, feelings, and behaviors with divine guidance (*hidayah*) and working toward moral excellence (*akhlaq*).

True mental wellness is achieved when the *qalb* is spiritually awakened and free from the control of the *nafs*, allowing the individual to return to a state of *fitrah*. This original, pure nature embodies harmony, clarity, and closeness to God.

Thus, Islamic Psychology provides not only a model for individual healing but also a purpose-driven vision of human flourishing rooted in *tawhid* (the oneness of God), self-accountability, and ethical living. It highlights the stages of the *nafs*, from *ammarah* (the commanding self), to *lawwamah* (the self-reproaching soul), to *mutma'innah* (the tranquil self). It also emphasizes the role of the *qalb* as the center of perception, intention, and ethical judgment. Islamic Psychology further offers a variety of therapeutic tools based on spiritual practices, including remembrance (*dhikr*), reflection (*tafakkur*), repentance (*taubah*), gratitude (*shukr*), and reliance on God (*tawakkul*). Contemporary scholars such as Badri (1979), Ghamidi, and Rasjid Skinner have promoted the indigenization of psychotherapy to better reflect the spiritual and cultural values of Muslim clients. Although Islamic Psychology remains underrepresented in mainstream psychology, it provides a comprehensive framework that connects mental health with spiritual well-being, moral growth, and relational harmony.

### The 3As Heart-Centred Spirituality Framework

The 3As Model, which includes the three levels—Awareness, Awaken, and Action—is a modern framework designed to turn spiritual consciousness into real-life transformation. It is based on the principles of Islamic Psychology but also incorporates transformational learning theory, heart-centered pedagogy, and reflective practice.

Figure 1: The Hikmah Triad 3As Model

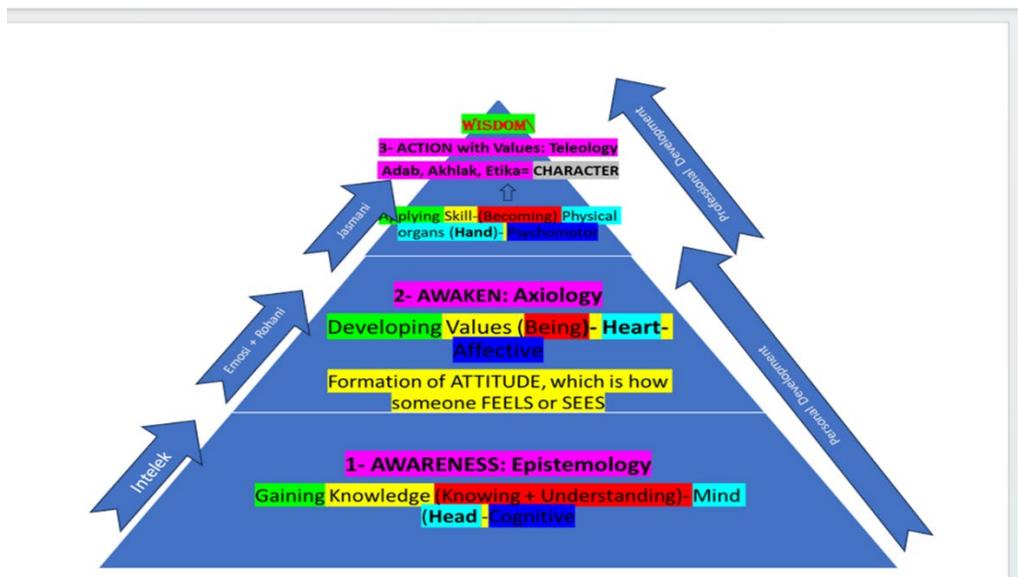
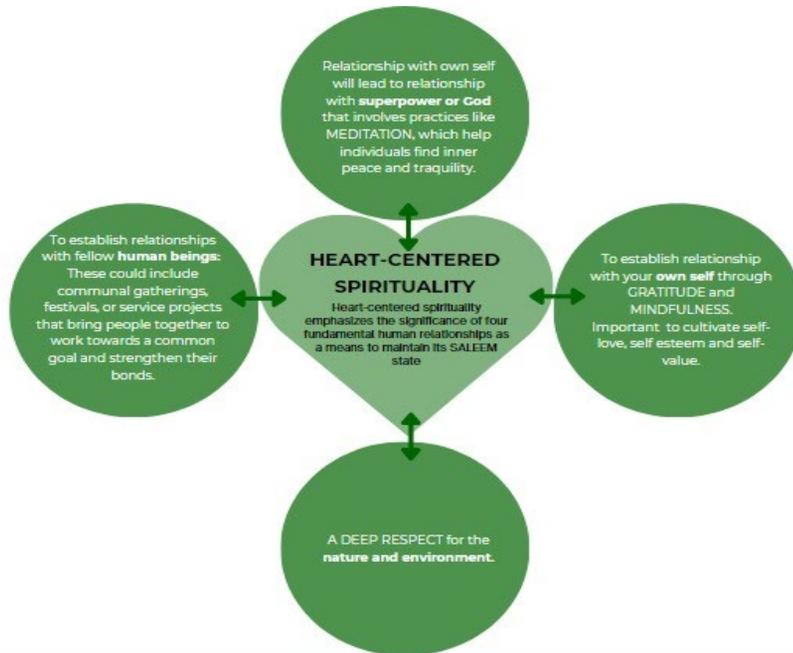


Figure 2: Heart-Centred Spirituality Model



The 3As Heart-Centered Spirituality (HCS) framework unfolds through three interconnected stages: Awareness, Awaken, and Action, each representing a vital aspect of inner transformation. The first stage, Awareness, involves developing deep self-insight by recognizing one's internal states, thought patterns, emotional triggers, and areas of spiritual disconnect. It encourages honest reflection and mindful observation of the self as a way to awaken to more profound truths. The second stage, Awaken, signifies the spiritual reactivation of the heart (qalb), where

clarity of conscience, ethical discernment, humility, compassion, and sincerity emerge. This marks the inner shift where insight becomes illumination and values come alive. Lastly, the Action stage involves embodying healing through intentional living—translating awakened values into meaningful, relational, and ethical engagement with the world. This is where transformation manifests through responsible choices, service to others, and alignment with divine purpose. Together, these stages offer a spiritually rooted process that enhances and deepens traditional psychological models by reaffirming the heart's role as the center of healing and action.

Unlike CBT, which is driven by techniques, or Islamic Psychology, which is highly theoretical, the 3As framework provides a structured yet adaptable path for personal growth that is both practical and spiritually enriching. It encourages the individual to transition from self-reflection to spiritual awakening and ultimately to purposeful service, aligning internal change with social responsibility.

The model has been used in educational settings, reflective journaling, and community-based programs, especially in the Malaysian context (Razak, 2024). It is intentionally heart-centered, with the qalb as the center of perception, intention, and transformation.

## **Finding And Discussion**

### **Integrating Paradigms: A Case for Holistic Healing**

While the three models come from different backgrounds—CBT from clinical psychology, Islamic Psychology from sacred tradition, and the 3As from interdisciplinary integration—they all focus on healing the inner human experience.

Cognitive Behavioural Therapy (CBT), Islamic Psychology, and the 3As Model each contribute uniquely yet complementarily to inner healing and

transformation. CBT offers structure and clarity through its systematic approach to identifying and restructuring harmful thought patterns, providing practical tools for emotional regulation and behavioral change. While CBT excels at managing cognitive and emotional issues, it may lack spiritual depth and existential grounding. Islamic Psychology addresses this gap by offering spiritual connection and ethical direction, based on a theocentric view of the self. It describes psychological healing as a process of returning to one's *fitrah* (primordial nature) by aligning the *nafs* (self), *qalb* (heart), and *ruh* (spirit) with divine guidance. The 3As Model (Awareness–Awaken–Action) serves as a flexible and reflective link between these frameworks, enabling individuals to internalize cognitive and spiritual insights through contemplative self-awareness, moral awakening, and embodied ethical action. Together, these models confirm that true healing happens not just in the mind but also in the heart and through a purposeful life aligned with meaning, virtue, and transcendence. They offer a three-part view of human healing—covering the mind, heart, and soul.

### **Comparative Analysis**

This section provides a structured comparison of Cognitive Behavioral Therapy (CBT), Islamic Psychology, and the 3As Heart-Centred Spirituality Framework, examining their similarities, differences, and unique contributions to the process of inner healing. The comparison is organized around five main dimensions: anthropology, methodology, goal of healing, tools for transformation, and practical application.

### Human Nature and Source of Suffering

Dimension	CBT	Islamic Psychology	3As Framework
View of the Human	A thinking, feeling, and behaving being	A moral-spiritual being with <i>nafs</i> , <i>qalb</i> , and <i>ruh</i>	A dynamic self shaped by heart awareness, ethical values, and purpose
Source of Suffering	Cognitive distortions and maladaptive behaviours	Spiritual disconnection, unrefined <i>nafs</i> , forgetfulness of Allah	Inner misalignment: loss of awareness, lack of meaning, moral dullness,

CBT alleviates suffering caused by distorted thought patterns; Islamic Psychology attributes suffering to spiritual disconnection and imbalance in the *nafs*. The 3As model combines both perspectives by emphasizing inner awareness as a pathway to healing the mind and soul.

### Process of Transformation

Stage	CBT	Islamic Psychology	3As Framework
Starting Point	Identifying negative thoughts	Self-reckoning ( <i>muhasabah</i> ) and recognising spiritual stagnation	Self-awareness: noticing emotional, mental, and spiritual dissonance
Middle Phase	Restructuring beliefs and behaviours	<i>Tazkiyat al-nafs</i> (purifying the self through discipline and worship)	Awakening the <i>qalb</i> to truth, values, and moral responsibility
Outcome	Improved mental well-being	Alignment with God, inner peace ( <i>nafs mutma'innah</i> )	Ethical action, purpose-driven living, peace with self and others

CBT emphasizes correction, Islamic Psychology focuses on purification, and the 3As target awakening and alignment, all striving for well-being but defined differently across paradigms.

### Tools and Practices

Tools	CBT	Islamic Psychology	3As Framework
Techniques	Thought records, behavioural activation, journaling	<i>Dhikr</i> , prayer, fasting, <i>tafakkur</i> , <i>tawbah</i>	Reflective writing, value-based intention setting, and ethical service
Role of Therapist/Guide	Instructor/Coach	Spiritual guide ( <i>murabbi</i> or <i>shaykh</i> )	Facilitator, teacher, or even self-led reflection
Role of Client/Seeker	Rational participant	Moral-spiritual aspirant	Reflective actor seeking personal and communal meaning

The 3As model does not replace either CBT or Islamic Psychology but serves as an accessible middle ground: spiritually aware yet methodologically flexible.

### Pedagogical and Therapeutic Application

Application	CBT	Islamic Psychology	3As Framework
Clinical settings	Strong empirical base, widely practised	Emerging, limited structured protocols	Adaptable to reflective therapy, education, and community work
Education & learning	Limited to mental health curricula	Used in Islamic character development	Can be integrated into curriculum, journaling, mentoring, and workshops
Community engagement	Individual focus	Moral formation within Ummah	Values-driven action rooted in empathy and social ethics

Here, the 3As model demonstrates its versatility: it is not limited to therapy but is also applicable in education, mentorship, and spiritual growth across different contexts.

### Summary Table: Converging Paths of Healing

Aspect	CBT	Islamic Psychology	3As Model
Strength	Structure, evidence-based tools	Soul-depth, spiritual clarity	Integration, accessibility, action
Limitation	Lacks metaphysical grounding	Limited contemporary scaffolding	Needs further clinical validation
Shared Value	Human agency and growth	Accountability to Creator	Self-awareness with ethical purpose

While CBT teaches us how to think, Islamic Psychology reminds us why we exist, and the 3As model guides us to live with heartfelt meaning and service. Together, they create a layered map of healing, from the mind through the heart.

### Implications For Practice And Integration

The comparative analysis of CBT, Islamic Psychology, and the 3As Heart-Centered Spirituality Framework highlights not only their individual strengths but also the potential to blend them into a more comprehensive and human-centered approach to healing and personal growth. This section explores the practical implications of such integration for clinical therapy, education, community leadership, and spiritual development.

### Toward a Spiritually Informed CBT

While Cognitive Behavioral Therapy (CBT) is widely appreciated for its structured approach, accessibility, and substantial evidence base, its

secular framework may not fully address the deeper existential, spiritual, and ethical aspects of human suffering. For Muslim clients especially, therapeutic effectiveness can be improved by incorporating Islamic concepts such as *tawakkul* (trust in God), *sabr* (patience), *shukr* (gratitude), and *niyyah* (intention) into cognitive and behavioral analyses. A more spiritually sensitive CBT approach might also include heart-centered inquiry, shifting the question from “What are you thinking?” to “What does your heart need right now?” and using reflective journaling as a spiritual-therapeutic tool to explore deeper patterns of meaning within distress. This method moves beyond merely reducing symptoms to promoting the restoration of moral clarity, inner harmony, and alignment with the client’s spiritual identity and values. This integration honors both scientific methods and sacred meaning-making, allowing the therapist-client relationship to serve as a space for both psychological and spiritual healing.

### **Operationalising Islamic Psychology Through the 3As Model**

Notably, organizations such as the International Association of Islamic Psychology (IAIP), the Institute for Spirituality and Psychology (ISIP), and various Muslim mental health initiatives in the UK, Malaysia, and the US are actively working to develop clinical training rooted in Islamic principles. These efforts are laying the foundation for an empirically grounded Islamic Psychology that bridges classical sources with modern therapeutic needs.

While Islamic Psychology provides a comprehensive view of the human soul and its journey, its application in structured therapeutic or educational settings remains underdeveloped. The 3As framework offers a practical bridge, turning abstract spiritual concepts into actionable processes that can be integrated into Islamic counseling and coaching: guiding clients from awareness (of the *nafs*), to awakening (of the *qalb*), to action (*amal*) that reflects their inner growth. For curriculum design in Islamic

education: embedding reflection (awareness), adab and values (awakening), and service learning (action) into teaching modules. Regarding spiritual supervision and mentoring, it helps seekers move through blocks of stagnation or self-doubt with gentleness and structure. Indeed, this 3As model does not claim to replace spiritual tradition but aims to activate its transformative potential in a contemporary and human-centered way.

### **Enhancing Heart-Centred Learning in Education and Community Work**

The 3As framework, when applied beyond therapy, becomes a teaching tool for values-based leadership, community healing, and ethical education. It can be integrated into reflective writing programs (e.g., “Letter to God” journaling), character education modules that combine emotional intelligence with spiritual depth, service learning or usrah-based action projects that help students move from empathy to engagement, and teacher development programs that foster awareness of one’s own role, inner state, and influence on learners. This approach aligns with the philosophy of tarbiyyah, not just to inform the mind but to shape the heart and change behavior.

### **Risks, Ethics, and Future Directions**

While the integration of spiritually rooted models like the 3As and Heart-Centered Spirituality (HCS) into therapeutic and educational settings holds promise, it must be approached with caution and integrity. Therapists, for example, need to stay mindful of the professional boundaries between clinical intervention and spiritual guidance, ensuring that religious elements are introduced with cultural sensitivity and client consent. Similarly, educators should avoid reducing rich spiritual traditions into superficial or decontextualized techniques, as this could diminish their depth and authenticity. Additionally, the 3As model, although theoretically solid, requires empirical validation through rigorous research, especially

in multicultural, interfaith, and non-Western contexts where ideas of healing and selfhood may differ. Institutions adopting such integrative frameworks must also focus on training facilitators who not only have content knowledge but also possess the wisdom, humility, and ethical grounding necessary to create transformative, spiritually sensitive learning environments. What is needed is not just a method, but a shift in intention toward healing that is not only effective but also sacred, ethical, and life-affirming.

### **A Case Study**

To demonstrate how the 3As model works in practice, here is a concrete example of a short reflective vignette based on a real person from my journaling program with students in the philosophy course, SKP3112. Alia, an undergraduate student, was struggling with academic burnout and a disconnect from her spiritual practices. Through guided reflective journaling (Awareness), she realized her sense of self-worth was connected to external validation. With support, she explored her inner spiritual longings (Awaken) and gradually rebuilt her routine by realigning with her values, including community volunteering (Action). Her transformation was not dramatic but genuine, characterized by a newfound calmness and sense of purpose.

### **Limitations and Critiques of Integration**

While the integration of Cognitive Behavioral Therapy (CBT), Islamic Psychology, and the 3As heart-centered framework offers promising paths for inner healing, it is essential to acknowledge several limitations and critiques that warrant attention and reflection.

While integrative approaches offer great potential for holistic healing and transformational education, several important limitations and considerations need to be recognized. First, although Cognitive Behavioral Therapy (CBT) is a widely used and empirically supported method, its

roots in secular Western epistemology pose challenges when dealing with existential and spiritual issues. Its focus on thoughts and behavior may unintentionally overlook deeper processes of meaning-making, spiritual trauma, or identity crises—especially in collectivist cultures or religious settings. Therefore, any effort to combine CBT with spiritual models must be culturally and epistemologically sensitive to prevent reductionism or mismatches.

Secondly, Islamic Psychology is a deeply layered tradition but not a single, uniform one. Rooted in classical thinkers such as al-Ghazali, Ibn Sina, and al-Raghib al-Isfahani, it includes a variety of theological and philosophical viewpoints across different times and regions. While shared concepts like *nafs*, *qalb*, and *ruh* offer a common vocabulary, their interpretations and uses differ greatly. This diversity, though intellectually enriching, creates challenges in standardization, practitioner training, and acceptance within mainstream global psychology, where Islamic ideas still face epistemic marginalization.

Thirdly, the 3As Model, which includes Awareness, Awaken, and Action, is a compelling framework for spiritually informed pedagogy and therapy. It is especially effective at connecting cognitive insight with emotional and ethical transformation. However, the model is still in development and lacks systematic scientific validation in clinical settings. Its spiritual foundations need to be carefully adapted to align with evidence-based psychological care without sacrificing spiritual depth or academic rigor.

Fourth, ethical concerns emerge when integrating spiritual elements into therapeutic or educational settings. Practitioners must be trained to ensure that spiritual language and frameworks are offered with informed consent rather than imposed. Concepts such as *tawakkul* (trust), *shukr* (gratitude), or *taqwa* (God-consciousness) should be introduced thoughtfully and with cultural sensitivity. Without this approach, there is a risk of spiritual bypassing—the use of religious narratives to avoid addressing

psychological wounds or emotional complexity. Ultimately, the success of any integration largely depends on the practitioner's competence and readiness. Educators, therapists, and facilitators need cross-disciplinary knowledge in psychology, theology, pedagogy, and ethics to create meaningful integrative spaces. Without proper training, these frameworks may be misunderstood or misapplied, potentially causing more harm than good. A strong, ethically grounded training system is vital to ensure that such models are delivered with wisdom, humility, and effectiveness.

The author recognizes that the article offers a well-structured and comprehensive overview of CBT, Islamic Psychology, and the 3As Heart-Centered Spirituality framework. However, it could benefit from greater engagement with empirical evidence and recent case studies to enhance its practical credibility. There is a clear need to go beyond broad generalizations by including more detailed critiques and a variety of perspectives within each model, as well as openly addressing the real-world challenges of integrating these approaches, especially in cross-cultural or secular settings. In future research, the author plans to conduct more rigorous empirical studies, present detailed application scenarios, and critically examine relevant theoretical debates. This will improve the article's depth, methodological rigor, and relevance to clinical, educational, and community-based environments.

## **Conclusion**

In an era marked by inner fragmentation, spiritual restlessness, and increasing psychological distress, the pursuit of healing must extend beyond clinical effectiveness into the sacred realms of meaning, morality, and the human soul. This paper has examined three distinct yet complementary approaches to inner healing, such as Cognitive Behavioral Therapy (CBT), Islamic Psychology, and the 3As Heart-Centered Spirituality Framework, highlighting how each offers its own insights, pathways, and promises. CBT provides structure, evidence-based clarity,

and cognitive empowerment, but may fall short when suffering is rooted in existential or spiritual loss. Islamic Psychology, rich in metaphysical depth and moral purpose, reminds us that healing involves not just correcting thoughts but also purifying the *nafs*, softening the *qalb*, and returning to the fitrah of the soul. The 3As framework builds upon these traditions by providing a practical process that integrates reflection (awareness), inner awakening (spiritual consciousness), and meaningful ethical living (action). Together, these three models form a tripartite map of healing, aligning mind, heart, and soul. They invite us not merely to feel better but to live better, with purpose, integrity, and presence.

The implications of this integrative approach are extensive. Therapists can incorporate spiritual values into cognitive frameworks without sacrificing clinical integrity, enabling more holistic care. Educators are empowered to nurture heart-centered learners through reflective teaching and ethically grounded engagement. Community leaders may find guidance by grounding their actions in inner clarity and compassion, fostering more authentic service. Meanwhile, spiritual seekers are offered a language and process of healing that honors both revelation and reason, bridging the sacred and the psychological in meaningful, transformative ways. Ultimately, healing is not a one-size-fits-all formula. It is a journey—personal, relational, and sacred. Whether we start with thoughts, the soul, or the heart, what matters most is returning to ourselves and, through ourselves, to Allah. This integrative vision aims to show us that true well-being is not just about relieving symptoms but about becoming whole—not only in psychology but in the light of divine mercy and human connection.

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