Chapter 12 Living the Good Life: An Islamic Perspective on Positive Psychology



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Islam means submission to the will of God. In the present chapter, we describe Islam as a religion and explore its connections to positive psychology by reviewing research that examines positive psychological constructs as experienced by Muslims. We do so in five major sections. First, we overview the reach of Islam throughout the world. Then we review key Muslim religious/spiritual beliefs, teachings, practices, and texts. In the third section, we discuss common Muslim understandings of virtues, health, and well-being. In the penultimate section, we review potential implications for science and practice at the intersections of positive psychology (PP) and religion/spirituality (R/S). Finally, we make recommendations for guiding research and practice when working with Muslims at these intersections.

The Worldwide Reach of Islam

The world's Muslim population is large and growing fast. Muslims compose about 1.8 billion of the world's current population (24%) and are projected to represent 31% of individuals worldwide by 2060 (Pew Research Center, 2017). Muslims can vary in demographics, depending on geography, ethnicity, and language; thus, they are an inherently diverse population. For example, Muslims in the United States are the most ethnically and racially diverse faith group (Mogahed & Chouhoud, 2017). There are two major sects in Islam: Sunni and Shi'a. About 85% of Muslims

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identify as Sunni Muslims, whereas 15% identify as Shi'a Muslims. Historically, the division between Sunni (meaning "people of tradition") and Shi'a (meaning "followers of Ali") Muslims stems from the disagreement regarding the successor of Prophet Muhammad. Following the death of Prophet Muhammad, a majority of Muslims (later referred to as Sunni Muslims) believed the successor should be appointed through consensus, whereas a minority of Muslims (later referred to as Shi'a Muslims) believed the successor should be Prophet Muhammad's cousin, due to kinship. Although there are differences between these two major branches of Islam, Sunni and Shi'a Muslims predominantly abide by the same religious doctrine.

Similarly, although the global Muslim population's tremendous diversity reflects inevitable variations, there are central Islamic beliefs and practices that unite Muslims around the world. For instance, a recent worldwide survey found that Islam was reported to be *very important* to Muslims (69–99%) living in Africa, the Middle East, and South Asia; likewise, in the United States, 66% of Muslims described Islam as *very important* to them (Pew Research Center, 2018). Although Islam may play a substantial role in the lives of many Muslims, it is important to keep in mind that there are both Muslims who do not practice Islam and Muslims who practice Islam to varying degrees. Thus, an important caveat for the current chapter is that the information presented is framed from an Islamic perspective but will not apply equally to all Muslims. The majority of this chapter's content will apply most squarely to practicing Muslims.

Key Islamic Beliefs and Practices

Key Islamic beliefs and practices are derived from two primary sources: the Qur'an and the hadith. Muslims believe the Qur'an is the direct Word of God, which was revealed in Arabic to Prophet Muhammad over the span of 23 years (610–632 CE). The Qur'an is an integral part of many Muslims' lives, and it establishes the overarching meaning framework for guiding Muslims as they seek to live a good life. Correspondingly, the *hadith* are sayings and actions of Prophet Muhammad that were recorded and transmitted over centuries. The hadith are a major source for understanding the legal and theological Islamic tradition. In sum, Muslims rely on both the Qur'an and Prophet Muhammad's life, actions, and sayings to guide their lives.

Islam emphasizes both faith and practice. First, six articles of faith establish the main doctrines of Islam. The first article of faith emphasizes belief in the existence and oneness of God (*tawheed*). *Tawheed* is the backbone of Islam and is based on the tenet that God has no equal or offspring and is the sole entity of worship. The second article of faith is the belief in angels. Angels are viewed as immortal entities who carry out God's commands and can serve as messengers between God and humans. The third article refers to believing in the holy scriptures of God (Qur'an,

Torah, Gospel, and Psalms). Belief in all four books is an essential component of Islamic faith. The Qur'an acknowledges prior revelations but is proclaimed to be the final revelation that completes prior holy scriptures.

The fourth article of faith is the belief in the prophets and messengers of God (e.g., Moses, Jesus, and Abraham), including the belief that Prophet Muhammad is the final messenger of God. The fifth article is the belief in the Day of Judgment. According to Islamic thought, the Day of Judgment is the day when humans will ultimately be resurrected, held accountable for all deeds and actions, and accordingly receive reward or punishment. The sixth article of faith is believing in divine decree, which proposes that all events (whether good or bad) occur within God's Will, Power, and Knowledge. At the same time, belief in divine decree does not negate human will; Muslims are responsible for their actions, which can govern their destiny.

In addition, the five pillars of Islam were formulated as the fundamentals of worship and the primary obligations of a practicing Muslim. The first pillar, *shahadah*, is the verbal profession of faith, which refers to the statement "There is no god but God [Allah] and Muhammad is the messenger of God"; this pillar underscores the monotheistic nature of Islam (Esposito, 2002). The second pillar, *salah*, refers to the daily obligatory prayers. Muslims are prescribed to offer five prayers that take place at certain times of the day (dawn, noon, midafternoon, sunset, and evening). The obligatory prayers involve a series of physical movements such as standing, kneeling, bowing, and touching the ground with one's forehead. When completing *salah*, Muslims orient themselves towards the Ka'bah—the holy shrine. The five daily prayers help Muslims cultivate a God-conscious mindset amid their worldly concerns and help nurture a sense of submission, connection, and gratitude towards God (Esposito, 2002).

The third pillar, *zakat* (translated as *purification*), is the obligatory act of almsgiving. *Zakat* refers to the more financially fortunate giving to the less fortunate. Muslims with financial ability are required to donate 2.5% of their yearly wealth and assets to individuals of less fortunate socioeconomic backgrounds. The fourth pillar, *syiam*, is fasting during the month of Ramadan. Around the globe, Muslims who have the health and ability to do so are required to fast daily (from dawn to dusk) throughout the ninth month of the lunar calendar (Ramadan). Importantly, this fasting not only involves abstaining from eating and drinking but also involves abstaining from behaviors considered sinful, such as gossiping, lying, and cheating. Ramadan is intended to be a month of spiritual reflection (Esposito, 2002), and it also promotes a sense of social solidarity—both locally and globally. The fifth pillar, *hajj*, is the pilgrimage to Mecca. Muslims who have the physical and financial means are required to visit the holy shrine Ka'bah, located in Mecca, Saudi Arabia. Taking part in *hajj* is believed to cleanse a Muslim of past sins and to renew and deepen their faith. It is often considered one of the highest forms of worship.

Common Muslim Understandings of Virtues, Health, and Well-Being

The Good Life

An Islamic understanding of health and well-being maintains that a good life is primarily achieved through living in accordance with Islamic teachings. Thus, studying PP from a Muslim perspective must entail the study of virtues drawn both from PP and the Islamic religion. Nevertheless, it is noteworthy that Muslims consider Islam to be much more than a religion. Through the Qur'an and hadith, Islam is viewed as a comprehensive social, psychological, and spiritual guide that governs all domains of a Muslim's life. Both beliefs and behaviors (practices) are seen as central, interconnected components in living a good life along the path of God, as reflected in the Qur'anic verse "Whosoever acts righteously—whether a man or a woman—and embraces belief, We will surely grant him a good life; and will surely grant such persons their reward according to the best of their deeds" (16:97). Even so, living a good life is not necessarily an end goal for Muslims; instead, Muslims' end goal is to obtain God's pleasure. Thus, Muslims view the quest to live a good life as a lifelong journey.

Islamic Faith and Well-Being

Numerous studies have found an association between religiousness and psychological well-being among Muslims (e.g., Abu-Raiya & Agbaria, 2016). For example, data gathered from large, Kuwaiti-Muslim youth samples has revealed evidence that overall religiousness is related to higher happiness (Abdel-Khalek, 2007; N = 5,042) and life satisfaction (Baroun, 2006; N = 941), as well as to lower depression and anxiety (Abdel-Khalek, 2007). Similarly, research among Pakistani Muslims (N = 200) has found that Islamic spirituality is associated with more positive mood and higher meaning in life (Khan et al., 2015). Moreover, among Muslim undergraduates in England (N = 60), taking part in religious activities was ranked as their most important source of personal meaning, on average (Aflakseir, 2012). However, there is a dearth of literature examining more specific Islamic beliefs and practices that may contribute to well-being. Hence, the following section proposes some common Islamic beliefs and practices that may foster health and well-being from an Islamic perspective. Wherever possible, we incorporate discussion of prior empirical studies of R/S and psychological outcomes among Muslims.

Trust in God

Prominent Islamic scholars have highlighted *tawakkul* (reliance on or putting trust in God) as a construct of high spiritual virtue among Muslims (Al-Ghazzali, 1972). The Qur'an frequently encourages Muslims to put their trust in God, as reflected in the verse "Put your trust in Allah: Allah is sufficient as Guardian" (3:33). Trusting God is viewed as particularly central in the face of distressing life events, and it is the ultimate framework for receiving blessings in the worldly life and in eternal life (Huda et al., 2019). For example, Prophet Muhammad stated, "If you trusted Allah with due *tawakkul* [i.e., reliance and trust in God], He would provide you sustenance as He provides for the birds; they go out in the morning with empty stomachs and come back in the evening with full stomachs" (Al-Tirmidhi, 1975, p. 573).

Data on *tawakkul* among Muslims is limited to a few qualitative studies, yet the available research suggests *tawakkul* may play a frequent role in Muslims' coping with adversity. For example, qualitative data from Palestinian Muslim women diagnosed with breast cancer revealed that *tawakkul* played an important role in their positive coping and coming to terms with their illness (Hammoudeh et al., 2017). Similarly, Iranian Muslims diagnosed with end-stage renal disease reported their *tawakkul* helped foster a greater sense of peace and tolerance of their difficulties (Shahgholian & Yousefi, 2015). Iranian Muslim patients with hemophilia also indicated that *tawakkul* helped them with their coping and problem solving (Rambod et al., 2019). Islamic scholars have suggested *tawakkul* can foster positive attitudes toward God, a feeling of security during adversity, and a sense of peace (Khodayarifard et al., 2016).

Worship

From an Islamic perspective, worshiping God is a fundamental component of well-being (Joshanloo, 2013). The Qur'an indicates: "And I did not create the jinn and mankind except to worship Me" (51:56), which underscores the Islamic belief that the act of worshiping God is the primary reason for the creation of humankind. Similarly, Prophet Muhammad stated: "Goodness and comfort are for him who worships his Lord in a perfect manner and serves his master sincerely" (Al-Bukhari, 2001, p. 149). Within the Islamic tradition, worshiping God may entail any deed that is conducted in accordance with Islamic teachings, such as (but certainly not limited to) praying, fasting, giving charity, beginning a meal with *bismillah* (in the name of God), and visiting a sick person. Everyday activities that are mundane in nature can take on a deeper sense of meaning when completed with the intentional purpose of worship. Indeed, a recent meta-analysis in the psychology of the R/S field revealed the sanctification of various aspects of life is linked with better positive psychosocial adjustment (Mahoney et al., 2021).

Additionally, worship can foster both a sense of connectedness with God and a sense of transcendence. According to Ibn Sina—a historically prominent Islamic philosopher and physician—true happiness is attained through the knowledge and contemplation of God (Awaludin, 2017). From an Islamic perspective, human nature is inherently inclined toward knowing and worshiping God; thus, a harmonious psychological state is viewed as achievable through connecting meaningfully with God (Rothman & Coyle, 2018). For example, a qualitative study of Jordanian Muslims with heart disease found that participants viewed worshiping God as central to their lives, and their faith in God and engagement in prayer fostered a sense of hope, inner strength, meaning and purpose in life, and acceptance of self-responsibility (Nabolsi & Carson, 2011). Furthermore, a quantitative study of Canadian Muslims found that spiritual experiences of perceived connectedness with God were related to higher prayer frequency and life satisfaction (Albatnuni & Koszycki, 2020).

Gratitude

Throughout the Qur'an and hadith, practicing the virtue of gratitude is encouraged. For example, one of many verses reminding Muslims to express gratitude is the Qur'anic verse, "So remember Me; I will remember you. And be grateful to Me and do not deny Me" (2:152). In fact, practicing gratitude is thought to lead to increased favor and blessings, as reflected in the verse "And [remember] when your Lord proclaimed, 'If you are grateful, I will surely increase you [in favor]'" (14:7). Along similar lines, Prophet Muhammad stated: "Allah is pleased with His servant if, when he eats something, he thanks Allah for it, and when he drinks something, he thanks Allah for it" (Muslim, 1967, p. 2095), suggesting gratitude enhances God's pleasure.

There are a few studies on gratitude among Muslims. In a study of Muslim (and Hindu) young adults (N = 152) in India, trait gratitude was associated with higher psychological well-being (Anas et al., 2015). Similarly, a study of Muslim university students in Pakistan (N = 230) found that trait gratitude predicted higher life satisfaction (Perveen & Yasin, 2017). In a longitudinal study of earthquake survivors (N = 310) in Indonesia (a predominantly Muslim country), trait gratitude was associated with lower concurrent posttraumatic stress at 8 months postdisaster, even after controlling for personality and coping-related factors (Lies et al., 2014).

Patience

Patience (sabr) is prescribed throughout the Qur'an and hadith, and as such, it is a core Islamic virtue. Patience is seen as both the ability to restrain oneself from what is discouraged (or prohibited) and as an essential ingredient for pursuing goals

while practicing self-control and endurance (El-Aswad, 2014). The Qur'an indicates that believers who practice patience will be "attainers of success" (23:111). The Qur'an underscores the notion that goodness comes from engaging in patience, as reflected in the verse "But only those who are steadfast in patience, only those who are blessed with great righteousness, will attain to such goodness" (41:35). Correspondingly, the hadith encourages patience in the face of hardships and promises Muslims that God will forgive their sins in response to their patience: "Never a believer is stricken with a discomfort, an illness, an anxiety, a grief or mental worry, or even the pricking of a thorn, but Allah will expiate his sins on account of his patience" (Al-Bukhari, 2001, p. 114).

Psychological studies of patience among Muslims are scarce. However, a qualitative study of Pakistani Muslims with chronic illness (N = 31) found that patience helped alleviate participants' anger and supported their meaning-making coping with their illness (Mir & Sheikh, 2010). Furthermore, in a quantitative study of Muslim survivors of a volcanic disaster in Indonesia (N = 68), participants in a patience- and prayer-focused spiritual intervention evidenced decreased psychopathological symptoms at post-treatment, compared to the control group (Uyun & Witruk, 2017). Moreover, in a qualitative study of older Muslim women who immigrated to Belgium (N = 30), patience was identified as a centrally important virtue to enact in the face of suffering and as a means by which Muslims develop a closer relationship with God, obtain forgiveness of their sins, and enhance their well-being (Baeke et al., 2012).

Forgiveness

Concepts of forgiveness such as *afw* (pardon), *safh* (overlooking a wrong), and *ghafir* (erasing sin) are collectively mentioned 277 times in the Qur'an (McCullough et al., 2001). Because humans are inevitably prone to making mistakes, hurting each other, and engaging in transgressions, forgiveness is an essential virtue within Islam. God encourages Muslims to ask Him for forgiveness for wrongdoings, as evidenced by the verse "And whoever does a wrong or wrongs himself but then seeks forgiveness of Allah will find Allah Forgiving and Merciful" (4:110). Not only is seeking divine forgiveness from God encouraged, but practicing interpersonal forgiveness is encouraged as well. In fact, the Qur'an suggests divine forgiveness can be fostered through forgiving other humans, as reflected in the verse "Let them forgive and overlook, do you not wish that Allah should forgive you? For Allah is Oft-Forgiving, Most Merciful" (24:22). Likewise, Prophet Muhammad stated: "When you come to one who is in straitened circumstances, forgive him, for perhaps God may forgive us" (Al-Bukhari, 2001, p. 176).

A few studies have found evidence that interpersonal forgiveness is associated with better psychological and spiritual outcomes. A qualitative study of Pakistani Muslims (N = 20) found that participants reported their practice of forgiveness led to greater happiness, life satisfaction, confidence, relaxation, positive social

interactions, and spiritual development (Gull & Rana, 2013). Similarly, in a quantitative study of Turkish Muslim university students (N = 560), forgiveness predicted both higher life satisfaction and lower generalized anxiety (Ayten & Karagoz, 2021). These findings were replicated in a large multinational Muslim sample (N = 706), in which forgiveness was associated with higher life satisfaction, lower generalized anxiety, and more involvement in religious/spiritual practices (Abu-Raiya & Ayten, 2019).

Awareness of an Afterlife

Belief in the afterlife is a fundamental component of the Islamic faith as well. The worldly life is viewed as a temporary place of residence prior to entering the eternal life. Life is understood as a place of trials and tests, and a Muslim's actions during these tests and trials are thought to determine whether they enter heaven or hell on the Day of Judgment, as mentioned in the Qur'an: "[He] who created death and life to test you [as to] which of you is best in deed" (67:2). The Qur'an promises "a great reward" (64:15) for Muslims who act in accordance with Islamic teachings in the face of such trials, promising that "the Hereafter is better than the first [life]" (93:4). Hence, Muslims often live with strong awareness of an afterlife; although one's worldly life can be good, Muslims' ultimate goal is to achieve well-being in the afterlife through obtaining God's pleasure in the worldly life.

A few studies have examined the role of afterlife beliefs in Muslims' well-being. Living in awareness of the afterlife can possibly foster Muslims' sense of consciousness regarding their behaviors, helping promote delayed gratification, circumspect perspective-taking, and thoughtful choices in accordance with Islamic teachings. For example, Muslims can reframe their worries as being temporary worldly concerns (Hamdan, 2008). In a similar way, a qualitative study of Muslim Moroccan women (N = 15) found it was common for these women to view death as a liberation from an unfair worldly life and as a transition to a more peaceful and sincere life (Ahaddour et al., 2019). In a quantitative study with an elderly Pakistani Muslim sample, having positive afterlife beliefs was associated with higher religiousness and lower depression symptoms (Ghayas et al., 2021). Moreover, a qualitative study of Somali refugees (N = 42) found that participants described their works (actions) in this life as helping them earn a good afterlife (McMichael, 2002).

Implications for Science and Practice

Studies examining the role of specific Islamic beliefs and practices on Muslims' well-being are scarce within the field of psychology. The available literature predominantly involves qualitative studies or cross-sectional studies examining the association between general Islamic religiousness and well-being. Although such

studies are beneficial in recognizing the links between the Islam religion and well-being, there is little to no longitudinal or experimental evidence examining the causal direction of this relationship (i.e., whether Islamic religiousness enhances well-being, well-being leads to increased religiousness, or both). There also is very limited examination of the effects of specific Islamic beliefs and practices on well-being. Additionally, studies of Islamic spiritual or psychological interventions are sparse, so there currently is little practical guidance for whether, when, and how Muslims might benefit from certain interventions (e.g., Muslim-accommodated forms of evidence-based interventions).

Furthermore, there is a need for examining the Qur'an and hadith more systematically to identify religiously indigenous PP constructs (e.g., ways of understanding and cultivating virtue and well-being from a distinctly Islamic perspective). For example, in a content analysis of the Qur'an, Riaz (2015) identified 41 categories of PP-relevant constructs (e.g., contentment, humility). Similar studies may help develop and refine a positive Islamic psychology framework.

Currently, most of the PP literature is grounded in Western ideas and ideals, which are often overly secular and culturally bound, thereby limiting their validity, utility, and generalizability among (a) Muslims generally, (b) specific subgroups of Muslims (e.g., Sunni and Shi'a Muslims), and (c) Muslims in particular cultures around the world. Regarding the latter point, given the geographic and cultural diversity among Muslims, there is a pressing need for culture-focused theory and research at the intersections of PP, Islamic religiousness, and well-being (see Mattis, Chap. 9, this volume). For instance, cultural psychologists have called for the development of indigenous PP models that better capture the strengths, values, ideas, and positive characteristics of often neglected non-Western cultural groups (Lambert et al., 2015).

Preliminary findings from intervention studies highlight the potential promise of developing distinctly Islamic PP interventions for use with Muslims. For example, in a quasi-experimental study of Muslim women with multiple sclerosis (N = 40), participants in a seven-session Islamic PP program (designed to improve participants' relationships with themselves, others, and the world) evidenced higher gains in self-reported quality of life than people in the no-treatment control group (Saeedi et al., 2015). Furthermore, researchers examining Iranian Muslim participants (N = 65) with breast cancer found that participants who were assigned to a 6-week spiritual well-being intervention group endorsed significantly higher postintervention spiritual well-being in comparison to the participants assigned to the control group (which was psychoeducational in nature; Jafari et al., 2013). However, the study did not include a secular form of psychotherapy as an active comparison group. Similarly, in qualitative data from a pilot study with Somali Muslims (N = 26), participants in an Islamic-accommodated, trauma-focused intervention reported they benefited from the incorporation of Islamic beliefs and practices (e.g., Prophetic traditions, verses from the Qur'an, prayer to God) into the treatment (Zoellner et al., 2021); however, it is worth noting that this pilot study lacked a control condition.

Moreover, establishing an evidence-based wellness intervention for practice will require bridging together Islamic beliefs and practices within a psychological model that is effective in promoting well-being. For example, researchers have suggested that well-being can be facilitated through Acceptance and Commitment Therapy (ACT) within an Islamic context, given the theoretical commonalities between ACT and Islam (Tanhan, 2019). Nevertheless, empirical studies are necessary to establish such posited links. Notably, Captari et al. (2018) recently conducted a meta-analysis investigating the efficacy of R/S-modified psychotherapy and found that R/S-adapted psychotherapy was as effective as standard secular forms of psychotherapy in promoting psychological outcomes and was more effective in fostering spiritual outcomes. Similarly, treatments adapting and incorporating cultural values have exhibited larger effect sizes in comparison to treatments that do not modify methods (Soto et al., 2018). Integrating elements of one's R/S and culture into standard forms of psychotherapy may be particularly relevant for Muslims, given the modally salient role of Islam and culture in their lives, identities, and worldviews.

Despite several interventionists who have accommodated treatments to Muslim beliefs and practices, limited randomized controlled trials have demonstrated that Muslim-accommodated treatments are equally or more effective than nonaccommodated treatments. For example, a study examining a culturally and religiously adapted form of CBT revealed that Pakistani participants (N = 137) assigned to the treatment group endorsed significantly greater improvements in depression, anxiety, somatic, and disability scores compared to the participants in the control group (Naeem et al., 2015). However, the study did not examine a standard (nonadapted) form of CBT. Thus, the available studies stress the need for more rigorous research in order to develop, test, and refine evidence-based, Muslim-accommodated interventions. In particular, randomized controlled trials are needed to test whether gains made by accommodating to Islam are as or more effective than standard (i.e., "secular") treatments.

Recommendations for Guiding Research and Practice

By incorporating specific Islamic beliefs and practices into treatment, clinicians working with Muslims in diverse settings might help foster Muslim clients' well-being and sense of living a good life; however, more scientific data is needed to establish support for such claims. To begin with, mental health providers, whether Muslim or non-Muslim, may inquire about the degree to which Islamic beliefs and practices are important in a client's everyday life. For non-Muslim clinicians, additional steps may be necessary to become familiar with their client's belief system. Given the central relevance of Islam for practicing Muslims, clinicians are encouraged to develop their religious/spiritual clinical competencies (Vieten & Lukoff, 2022). For example, mental health providers can learn how to explore clients' religious/spiritual sources of support and strength while also addressing clients' religious/spiritual struggles. Given the geographic diversity of the Muslim population,

clinicians should also be mindful of the role of culture. Such information will foster culturally sensitive explanations of a client's behaviors, thoughts, and emotions, as well as an understanding of what may (or may not) be adaptive (Abu-Raiya, 2015).

As part of culturally responsive practice, clinicians can draw on Islamic concepts to promote clients' well-being. Promoting well-being through an Islamic perspective could include the incorporation of Qur'anic verses and the sayings and actions of Prophet Muhammad. Doing so might help clients connect better with the content of psychotherapy. For example, clients may be encouraged to discuss how specific Qur'anic verses or hadith teachings relate to their perception of life in general, their approach to their current experience, and their psychological and spiritual well-being (Abu-Raiya, 2015). Specific interventions may include developing R/S-focused client goals (such as enhancing one's relationship with God), dialoguing about how the presence of an afterlife relates to clients' making meaning of their current circumstances, or exploring how Islamic concepts of patience and trust in God can promote clients' well-being. However, it is important to note that there is a dearth of clinical research on Muslims, and further research is necessary in order to ascertain the effectiveness of such possible interventions.

Importantly, research suggests that imams (Muslim religious leaders) can play a prominent role in promoting healthy behaviors among Muslim communities and that imams may even serve as an alternative to behavioral health providers in providing support for mental health-related concerns (Padela et al., 2011). Imams can provide faith-based interventions on an array of topics, given their knowledge in Islamic theology and their expertise in Muslim practices. Thus, they can play a role in fostering well-being in R/S-grounded ways. Although there is little available empirical data on mosque-based interventions, one qualitative study found that mosque members expressed interest in imam-led sermons on health education (Vu et al., 2018); the participants interviewed in this study viewed the mosque as a space to target a wider community audience, and they reported having a preference for imams who are more knowledgeable on health-related topics. Thus, prior to disseminating information, it may be important for imams to work closely with mental health consultants to receive training and education on well-being related constructs from a psychological and scientific perspective.

Finally, studies examining Muslim and/or non-Muslim chaplains have revealed evidence that Muslim patients in a hospital setting often incorporate religious beliefs and practices in the face of their illness (Abu-Ras & Laird, 2011). Thus, chaplains working with Muslim patients in hospital settings can help promote psychological well-being within the context of patients' physical illness. In a qualitative study focusing on Muslims with chronic illness in Iran, a chaplain visiting patients in their homes and the hospital noted the importance of having R/S-focused discussions that help chronically ill Muslim patients make meaning of their health status (Irajpur & Moghimiyan, 2018). Muslims in this study who were patients with chronic illness reported a need to engage in prayer to build a relationship with God and a need for divine forgiveness (from God) and interpersonal forgiveness (from others) to help them feel a sense of peace and acceptance in the face of their death (Irajpur &

Moghimiyan, 2018). In facilitating conversations about specific Islamic beliefs and practices, chaplains can help address possible emotional and/or spiritual distress while also helping foster a sense of peace and comfort.

Conclusion

The study of positive psychology from an Islamic perspective continues to be an avenue for growth in both research and clinical practice. The constructs proposed in the current chapter can contribute to the development of R/S-accommodated psychological interventions tailored for Muslims. Through more rigorous research and systematic studies of Islam and well-being, psychology can play a vital role in helping Muslims live a good life.

References

- Abdel-Khalek, A. M. (2007). Religiosity, happiness, health, and psychopathology in a probability sample of Muslim adolescents. *Mental Health, Religion and Culture, 10*(6), 571–583. https://doi.org/10.1080/13674670601034547
- Abu-Raiya, H. (2015). Working with religious Muslim clients: A dynamic, Qura'nic-based model of psychotherapy. Spirituality in Clinical Practice, 2(2), 120–133. https://doi.org/10.1037/ scp0000068
- Abu-Raiya, H., & Agbaria, Q. (2016). Religiousness and subjective well-being among Israeli-Palestinian college students: Direct or mediated links? *Social Indicators Research*, 126(2), 829–844. https://doi.org/10.1007/s11205-015-0913-x
- Abu-Raiya, H., & Ayten, A. (2019). Religious involvement, interpersonal forgiveness and mental health and well-being among a multinational sample of Muslims. *Journal of Happiness Studies*, 21, 3051–3067. https://doi.org/10.1007/s10902-019-00213-8
- Abu-Ras, W., & Laird, L. (2011). How Muslim and non-Muslim chaplains serve Muslim patients? Does the interfaith chaplaincy model have room for Muslims' experiences? *Journal of Religion and Health*, 50(1), 46–61. https://doi.org/10.1007/s10943-010-9357-4
- Aflakseir, A. (2012). Religiosity, personal meaning, and psychological well-being: A study among Muslim students in England. *Pakistan Journal of Social and Clinical Psychology*, 10(1), 27–31.
- Ahaddour, C., Broeckaert, B., & Van den Branden, S. (2019). "Every soul shall taste death." Attitudes and beliefs of Moroccan Muslim women living in Antwerp (Belgium) toward dying, death, and the afterlife. *Death Studies*, 43(1), 41–55. https://doi.org/10.1080/0748118 7.2018.1437096
- Albatnuni, M., & Koszycki, D. (2020). Prayer and well-being in Muslim Canadians: Exploring the mediating role of spirituality, mindfulness, optimism, and social support. *Mental Health, Religion & Culture, 23*(10), 912–927. https://doi.org/10.1080/13674676.2020.1844175
- Al-Bukhari, M. B. I. (2001). Sahih al-Bukhari. Dar Tawq al-Najat.
- Al-Ghazzali, A. M. (1972). *Revival of religious science* (Translation of Ihya ulum Al-din by Bankey Behari). Sufi Publishing Company.
- Al-Tirmidhi, M. B. I. (1975). Sunan al-Tirmidhi. Mustafa Babi al-Halabi.
- Anas, M., Aijaz, A., & Nazam, F. (2015). Relationship between gratitude and psychological well-being among youths. *Indian Journal of Health & Wellbeing*, 6(5), 517–519.

- Awaludin, A. (2017). Martin Seligman and Avicenna on happiness. *Tasfiyah*, *1*(1), 1–30. https://doi.org/10.21111/tasfiyah.v1i1.1840
- Ayten, A., & Karagoz, S. (2021). Religiosity, spirituality, forgiveness, religious coping as predictors of life satisfaction and generalized anxiety: A quantitative study on Turkish Muslim university students. Spiritual Psychology and Counseling, 6(1), 7–28. https://doi.org/10.37898/spc.2021.6.1.130
- Baeke, G., Wils, J. P., & Broeckaert, B. (2012). "Be patient and grateful": Elderly Muslim women's responses to illness and suffering. *Journal of Pastoral Care & Counseling*, 66(3), 1–9. https://doi.org/10.1177/154230501206600305
- Baroun, K. A. (2006). Relations among religiosity, health, happiness, and anxiety for Kuwaiti adolescents. *Psychological Reports*, 99(3), 717–722. https://doi.org/10.2466/PR0.99.3.717-722
- Captari, L. E., Hook, J. N., Hoyt, W., Davis, D. E., McElroy-Heltzel, S. E., & Worthington, E. L., Jr. (2018). Integrating clients' religion and spirituality within psychotherapy: A comprehensive meta-analysis. *Journal of Clinical Psychology*, 74(11), 1938–1951. https://doi.org/10.1002/ jclp.22681
- El-Aswad, E. S. (2014). Patience in Sunni Muslim worldviews. In D. A. Leeming (Ed.), Encyclopedia of psychology and religion (pp. 1318–1321). Springer.
- Esposito, J. L. (2002). What everyone needs to know about Islam. Oxford University Press.
- Ghayas, S., Batool, S. S., & Adil, A. (2021). Relationship between religiosity and depression level of Pakistani elderly population: Mediational role of afterlife belief. *Trends in Psychology*, 29(1), 1–11. https://doi.org/10.1007/s43076-020-00021-7
- Gull, M., & Rana, S. A. (2013). Manifestation of forgiveness, subjective well being and quality of life. *Journal of Behavioural Sciences*, 23(2), 17–36.
- Hamdan, A. (2008). Cognitive restructuring: An Islamic perspective. *Journal of Muslim Mental Health*, 3(1), 99–116. https://doi.org/10.1080/15564900802035268
- Hammoudeh, W., Hogan, D., & Giacaman, R. (2017). From a death sentence to a disrupted life: Palestinian women's experiences and coping with breast cancer. *Qualitative Health Research*, 27(4), 487–496. https://doi.org/10.1177/1049732316628833
- Huda, M., Sudrajat, A., Muhamat, R., Teh, K. S. M., & Jalal, B. (2019). Strengthening divine values for self-regulation in religiosity: Insights from Tawakkul (trust in God). *International Journal of Ethics and Systems*, 35(3), 1–23. https://doi.org/10.1108/IJOES-02-2018-0025
- Irajpur, A., & Moghimiyan, M. (2018). Dimensions of the spiritual needs of Muslim chronic patients: A qualitative study. *Journal of Muslim Mental Health*, 12(2), 29–43. https://doi. org/10.3998/jmmh.10381607.0012.203
- Jafari, N., Farajzadegan, Z., Zamani, A., Bahrami, F., Emami, H., Loghmani, A., & Jafari, N. (2013).
 Spiritual therapy to improve the spiritual well-being of Iranian women with breast cancer: A randomized controlled trial. Evidence-Based Complementary and Alternative Medicine, 2013, 1–9. https://doi.org/10.1155/2013/353262
- Joshanloo, M. (2013). A comparison of Western and Islamic conceptions of happiness. *Journal of Happiness Studies*, 14(6), 1857–1874. https://doi.org/10.1007/s10902-012-9406-7
- Khan, Z. H., Watson, P. J., Naqvi, A. Z., Jahan, K., & Chen, Z. J. (2015). Muslim experiential religiousness in Pakistan: Meaning in life, general well-being and gender differences. *Mental Health, Religion & Culture*, 18(6), 482–491. https://doi.org/10.1080/13674676.2015.1079602
- Khodayarifard, M., Ghobari-Bonab, B., Akbari-Zardkhaneh, S., & Zandi, S. (2016). Positive psychology from Islamic perspective. *International Journal of Behavioral Sciences*, 10(1), 29–34.
- Lambert, L., Pasha-Zaidi, N., Passmore, H.-A., & York Al-Karam, C. (2015). Developing an indigenous positive psychology in the United Arab Emirates. *Middle East Journal of Positive Psychology*, 1(1), 1–23.
- Lies, J., Mellor, D., & Hong, R. Y. (2014). Gratitude and personal functioning among earthquake survivors in Indonesia. *The Journal of Positive Psychology*, 9(4), 295–305. https://doi.org/1 0.1080/17439760.2014.902492

- Mahoney, A., Wong, S., Pomerleau, J. M., & Pargament, K. I. (2021). Sanctification of diverse aspects of life and psychosocial functioning: A meta-analysis of studies from 1999 to 2019. Psychology of Religion and Spirituality. https://doi.org/10.1037/rel0000354
- McCullough, M. E., Pargament, K. I., & Thoresen, C. E. (2001). Forgiveness: Theory, research, and practice. Guilford Press.
- McMichael, C. (2002). "Everywhere is Allah's place": Islam and the everyday life of Somali women in Melbourne. *Australia. Journal of Refugee Studies*, 15(2), 171–188.
- Mir, G., & Sheikh, A. (2010). "Fasting and prayer don't concern the doctors... they don't even know what it is": Communication, decision-making and perceived social relations of Pakistani Muslim patients with long-term illnesses. *Ethnicity & Health*, 15(4), 327–342. https://doi. org/10.1080/13557851003624273
- Mogahed, D., & Chouhoud, Y. (2017). *American Muslim poll 2017: Muslims at the crossroads*. Institute for Social Policy and Understanding.
- Muslim, H. N. (1967). Sahih Muslim. Dar Ihya al-Turath al-Arabi.
- Nabolsi, M. M., & Carson, A. M. (2011). Spirituality, illness and personal responsibility: The experience of Jordanian Muslim men with coronary artery disease. *Scandinavian Journal of Caring Sciences*, 25(4), 716–724. https://doi.org/10.1111/j.1471-6712.2011.00882.x
- Naeem, F., Gul, M., Irfan, M., Munshi, T., Asif, A., Rashid, S., Khan, M. N. S., Ghani, S., Malik, A., Aslam, M., Farooq, S., Husain, N., & Ayub, M. (2015). Brief culturally adapted CBT (CaCBT) for depression: A randomized controlled trial from Pakistan. *Journal of Affective Disorders*, 177, 101–107. https://doi.org/10.1016/j.jad.2015.02.012
- Padela, A. I., Killawi, A., Heisler, M., Demonner, S., & Fetters, M. D. (2011). The role of imams in American Muslim health: Perspectives of Muslim community leaders in Southeast Michigan. *Journal of Religion and Health*, 50(2), 359–373. https://doi.org/10.1007/s10943-010-9428-6
- Perveen, A., & Yasin, M. G. (2017). Materialism and life satisfaction in Muslim youth: Role of gratitude and religiosity. *Pakistan Journal of Psychological Research*, 32(1), 231–245.
- Pew Research Center. (2017). *The changing global religious landscape*. Retrieved from https://www.pewforum.org/2017/04/05/the-changing-global-religious-landscape/
- Pew Research Center. (2018). How religious commitment varies by country among people of all ages. Retrieved from https://www.pewforum.org/2018/06/13/how-religious-commitment-varies-by-country-among-people-of-all-ages/
- Rambod, M., Sharif, F., Molazem, Z., & Khair, K. (2019). Spirituality experiences in hemophilia patients: A phenomenological study. *Journal of Religion and Health*, 58(3), 992–1002. https://doi.org/10.1007/s10943-018-0621-3
- Riaz, M. N. (2015). Portrayal of positive psychological capital in Qur'an. Al-Idah, 31(2), 37–73.
- Rothman, A., & Coyle, A. (2018). Toward a framework for Islamic psychology and psychotherapy: An Islamic model of the soul. *Journal of Religion and Health*, *57*(5), 1731–1744. https://doi.org/10.1007/s10943-018-0651-x
- Saeedi, H., Nasab, S. H. M., Zadeh, A. M., & Ebrahimi, H. A. (2015). The effectiveness of positive psychology interventions with Islamic approach on quality of life in females with multiple sclerosis. *Biomedical and Pharmacology Journal*, 8(2), 965–970. https://doi.org/10.13005/bpj/848
- Shahgholian, N., & Yousefi, H. (2015). Supporting hemodialysis patients: A phenomenological study. *Iranian Journal of Nursing and Midwifery Research*, 20(5), 626–633. https://doi.org/10.4103/1735-9066.164514
- Soto, A., Smith, T. B., Griner, D., Domenech Rodríguez, M., & Bernal, G. (2018). Cultural adaptations and therapist multicultural competence: Two meta-analytic reviews. *Journal of Clinical Psychology*, 74(11), 1907–1923. https://doi.org/10.1002/jclp.22679
- Tanhan, A. (2019). Acceptance and commitment therapy with ecological systems theory: Addressing Muslim mental health issues and wellbeing. *Journal of Positive School Psychology*, 3(2), 197–219. https://doi.org/10.47602/jpsp.v3i2.172
- Uyun, Q., & Witruk, E. (2017). The effectiveness of sabr (patience) and salat (prayer) in reducing psychopathological symptoms after the 2010 Merapi eruption in the region of Yogyakarta,

Indonesia. *Trends and Issues in Interdisciplinary Behavior and Social Science*, 165–174. https://doi.org/10.1201/9781315269184-28

Vieten, C., & Lukoff, D. (2022). Spiritual and religious competencies in psychology. *American Psychologist*, 77(1), 26–38. https://doi.org/10.1037/amp0000821

Vu, M., Muhammad, H., Peek, M. E., & Padela, A. I. (2018). Muslim women's perspectives on designing mosque-based women's health interventions: An exploratory qualitative study. Women & Health, 58(3), 334–346. https://doi.org/10.1080/03630242.2017.1292344

Zoellner, L. A., Bentley, J. A., Feeny, N. C., Klein, A. B., Dolezal, M. L., Angula, D. A., & Egeh, M. H. (2021). Reaching the unreached: Bridging Islam and science to treat the mental wounds of war. Frontiers in Psychiatry, 12, Article 599293. https://doi.org/10.3389/fpsyt.2021.599293

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