

Islamic Psychospiritual as the Main Pillar of Strengthening the Biopsychosocial-Spiritual Component

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ABSTRACT

The biopsychosocial-spiritual model has gained increasing recognition as a holistic framework in healthcare and well-being studies. However, the spiritual component is often underrepresented or generalized without anchoring it in specific religious worldviews. This paper proposes that Islamic psychospirituality, rooted in concepts such as tauhid (faith), worship, sabr (patience), syukur (gratitude), and tazkiyah al-nafs (purification of the soul), should not only be integrated into the biopsychosocial-spiritual model but also serve as its core foundation. This study argues that spiritual consciousness serves as a unifying force that strengthens and harmonizing the biological, psychological, and social domains. This article develops a theoretical and conceptual framework to support the incorporation of Islamic psychospirituality as the central pillar of the biopsychosocial-spiritual model, particularly in contexts involving rehabilitation and holistic recovery.

Keywords: Islamic Psychospiritual, Biopsychosocial-Spiritual, Holistic, Healthcare

INTRODUCTION

The biopsychosocial-spiritual model operationalizes the holistic concept, which emphasizes the interdependence of all facets of an individual's existence, by methodically addressing the four fundamental dimensions of biology, psychology, society and spirituality. Every element represents a crucial aspect of the human experience, from social interactions, spiritual meaning to physical well-being and cognitive-emotional functioning. The biopsychosocial-spiritual paradigm goes beyond reductionist conceptions of health and illness by combining these interconnected components, enabling a more complex and person-centered approach to treatment, recovery, and rehabilitation.

Concept of Biopsychosocial-Spiritual

The biopsychosocial-spiritual model operationalizes the holistic concept, which emphasizes the interdependence of all facets of an individual's existence by methodically addressing the four fundamental dimensions of biology, psychology, society and spirituality. Every element represents a crucial aspect of the human experience, from social interactions and spiritual meaning to physical well-being and cognitive-emotional functioning. The biopsychosocial-spiritual paradigm goes beyond reductionist conceptions of health and illness by combining these interconnected components, enabling a more complex and person-centered approach to treatment, recovery and rehabilitation.

Biology Aspect

Biological care refers to the management of the individual's physical aspects. Physical care constitutes a fundamental aspect in ensuring the person's comfort and well-being. The type and extent of assistance rendered should be tailored to the individual's condition, whether they are able to manage their own personal care or require support from others. The caregiver's full attention and commitment are vital in preserving the individual's quality of life. Among the key elements that should be emphasised in the context of physical care are maintaining personal and environmental hygiene, (Al-Ghazālī, 2005) ensuring proper nutritional intake (Paul S. Mueller, 2001) in accordance with dietary recommendations prescribed by medical professionals and assisting with daily activities such as bathing, mobility, reading and other routine tasks. Lastly, effective pain management must be prioritised to alleviate the individual's physical discomfort and enhance their overall quality of life.

Psychology Aspect

According to the American Psychological Association (APA), psychology is the scientific study of the mind and behavior. The field of psychology has its origins in philosophical discourse. The practice of psychology encompasses several objectives, including the understanding and treatment of mental, emotional, physical and social dysfunctions. The analysis and enhancement of behavior across various human activity settings such as education, the workplace, sports and daily life and also the improvement of human-centered infrastructure through psychological research. Such research typically involves structured observation, controlled experimentation and comprehensive analysis to examine the biological, cognitive, emotional, personal and social factors that shape human behavior (APA, 2022).

The role of psychology is particularly crucial in ensuring the stability of individuals facing suboptimal health conditions, as psychological factors significantly influence the healing process (Hatala, 2013). Furthermore, the psychological domain is closely intertwined with the spiritual dimension. Spiritual well-being enhances psychological well-being and vice versa. Studies have shown that daily spiritual experiences are associated with decreased alcohol and cigarette use, improved individual's quality of life and more positive psychosocial state (Sulmasy, 2002). Recent studies have highlighted an increasing focus on positive psychology. Positive psychology is defined as the scientific study of optimal human functioning. The development of positive psychology represents an additional commitment among research psychologists to shift their attention towards the sources of psychological well-being, rather than concentrating solely on the early identification and treatment of illness and disorders (Phan & White, 2021).

Spiritual Aspect

Meanwhile, the term spiritual refers to aspects related to the soul or the inner self, rather than to physical or external characteristics. In the context of holistic health care, spirituality is increasingly recognized as a fundamental dimension of human well-being. It encompasses the search for meaning, purpose, connection and transcendence, which can influence how individuals perceive and cope with illness, suffering and life challenges (Pulchalski et al., 2009). The integration of spiritual well-being into psychological and medical care is essential, particularly in psychospiritual approaches, as it supports not only emotional resilience but also overall healing and quality of life (Dewan Bahasa dan Pustaka, 2020). Another definition of spirituality extends beyond an individual's religious faith. It encompasses one's relationship with life, an appreciation of existence and what ought to be valued, as well as a sense of inner peace. Spirituality, in this broader sense, reflects a person's orientation toward meaning, purpose, and harmony within oneself and with the surrounding world (Academy of Medicine College of Physicians, 2015).

Spirituality and religiosity are conceptually distinct, although they are often perceived as synonymous by certain groups, depending on local practices, traditions, and cultural contexts. This is because religiosity is generally understood as a concrete expression or outward practice that typically reflects an individual's inner spiritual experience (Watson et al., 2019). It is evident that both concepts share a fundamental similarity as they do not involve the physical domain, but rather pertain to the inner dimensions of human experience, specifically the soul

and the mind. In other words, they engage the heart (qalb) and the intellect ('aql), highlighting the integral role of non-material elements in shaping an individual's worldview, emotional resilience, and overall well-being (Dewan Bahasa dan Pustaka, 2020). Embraced spiritual themes will increased ability to cope and recover from their illness experiences when compared to nonspiritual controls (Stripp et al., 2022).

Social Aspect

While for the social aspect, religious coping measures the internal resources and reactions toward external such as community that can be mustered on behalf of an individual. It can be considered a subset of social support (Sulmasy, 2002).

Concept of Islamic Psychospiritual

Psychospiritual

The term psychospiritual is derived from the combination of the words psychology and spirituality. Psychology refers to the scientific study of the soul or the human mind (Dewan Bahasa dan Pustaka, 2020). According to Pusat Rujukan Persuratan Melayu, Malaysia, psychology is defined as the study of the soul or the human mind, whereas spirituality refers to matters that are related to or possess a spiritual or soulful nature (Dewan Bahasa dan Pustaka, 2023). The term spiritual is increasingly being used and understood by various segments of society, including politicians, religious figures and more recently, health practitioners (Watson et al., 2019). Spirituality is a concept that is interpreted through a wide range of definitions, shaped by various factors such as an individual's background, education, life challenges and personal experiences. These influences contribute to the unique ways in which spirituality is understood, practiced, and integrated into different aspects of human life, including health, coping mechanisms and overall well-being (Yahya and Sa'ari, 2016).

Psychospiritual is a term that represents an effort in the process of developing an individual's soul and spiritual self. It is a combination of two main words psycho, referring to psychology, and the term spiritual. The concept of psychospiritual has also entered the discourse between psychology and religion (Gleig, 2020). This is due to the fact that the spiritual element has long been a subject of deep discussion among religious scholars. To gain a clearer understanding, the terms 'psychology' and 'spirituality' are further examined in detail. In general, psychospiritual refers to the addition, integration, introduction or synthesis of two domains, psychology and spirituality. It is commonly used to describe various therapeutic systems that incorporate the spiritual dimension of the human being as a foundation for psychic health and holistic human development. These systems employ both psychological and spiritual methods such as meditation, yoga, dream work, breathwork and others within an integrated, holistic approach aimed at healing and the cultivation of inner strength (Gleig, 2020).

Islamic Psychospiritual

Islamic psychospirituality is an expanding field of discourse and practice that is increasingly applied across various domains, contributing to the resolution of physical, psychological, spiritual and social challenges. Although Islamic psychospirituality encompasses a broad conceptual framework, its primary emphasis lies in the application of tasawuf (Islamic spiritual purification). It represents a way of life grounded in Islamic teachings, exemplified by the practices of the Prophet Muhammad (peace be upon him) and subsequently followed by classical Islamic scholars. The integration of Islamic psychospiritual elements into healthcare care aligns with the core teachings of Islam, which advocate for holistic well-being during times of hardship, calamity, trials, and illness. Through this approach, individuals are guided to manage physical suffering, spiritual unrest, psychological distress and social challenges, ultimately attaining well-being in both this life and the hereafter.

Psychology

Psychology is a field of knowledge that studies human beings. The term psychology is derived from the combination of two Greek words, psyche and logos. Psyche refers to the soul, spirit, mind and mental aspects, while logos means study or discourse. When combined, psychology carries the meaning of the study of the human soul, mind and spirit. From this definition, human behaviour is often closely linked to the state of one's mind and soul. Therefore, psychologists generally define psychology as the scientific study of the human mind, mental processes and behaviour. In discussing psychology, the field can be categorised into several aspects, as a scientific discipline, a study of human behaviour and a study of mental processes (Hamjah, 2021).

Spiritual

The Muslim community understands spirituality as a way of life in which religious practices and acts of worship serve as expressions of servitude to God (Sa'ari, 2003). Spirituality, also encompasses the inner dimension of human life that relates to meaning, purpose, and connection with the Divine or the transcendent (Syed Muhsin &

Sa`ari, 2013) that is acquired through personal experience and inner wisdom (Abdul Aziz & Sa`ari, 2011). Spirituality is often cultivated through one's environment and upbringing from an early age. However, in today's culture, there is a growing disconnection from a sense of meaning and purpose. Humanity has increasingly lost its connection with nature and the sense of interconnectedness with all living beings. This spiritual void lies at the heart of many social, political, and environmental crises (Gawain, 1997). Imam al-Ghazālī discussed how many people are deceived by the worldly life due to their misunderstanding of the true meaning of existence, which stems from a flawed comprehension of knowledge. True knowledge, according to him, is the source of spiritual strength and the most effective shield in facing the challenges of life (Al-Ghazālī, 2011).

A comprehensive definition of spirituality remains a subject of discussion with no consensus among Western scholars (Muhamad Arib, Amat & Hamjah, 2021). Generally, the term spiritual is derived from the Latin word *spiritus*, which encompasses meanings such as breath, courage, vitality, and life. Spirituality is often viewed as an individualistic phenomenon, in which its meaning is personally constructed and interpreted by individuals according to their unique spiritual experiences and states (Koenig, 2004). Spirituality refers to an aspect of human experience that enables individuals to connect with something beyond themselves in an effort to establish a meaningful relationship with the surrounding world. It encompasses values, beliefs, purpose, consciousness, subjectivity, personal experiences, direction, and the pursuit of something greater and more meaningful than the self (Sumari et al., 2014). Spirituality is an extraordinary force that has the potential to transform adversity into ease, hostility into cooperation, and differences into compassion. It also represents an inner human quality that fosters connection with others and supports individuals in adapting to various life situations (Hamjah, 2018).

In the medicine context or healthcare, spirituality is understood as a dynamic and intrinsic aspect of humanity, wherein individuals seek meaning, purpose, and transcendence, while experiencing connectedness with the self, family, others, community, society, nature, and with something significant or sacred. Spirituality is expressed through beliefs, values, traditions and practices (Puchalski et al., 2014). Spirituality becomes especially important and takes precedence in the face of critical illness, as it raises profound questions, particularly concerning the sensitivities of patients in relation to matters of life and death. This is because any approach to supporting a patient's spirituality must be grounded in an understanding of the patient's own spiritual perspective (Rosmarin & Koenig, 2020).

In Islam, spirituality is fundamentally synonymous with religiosity itself. Islamic spirituality is centered on the primary sources of reference for Muslims, namely the Qur'an and the Sunnah. Spirituality in Islam is inseparable from the awareness of the existence of Allah SWT. This principle of *tawḥīd* (oneness of God) governs Islamic spirituality across various dimensions, conditions, and circumstances. This indicates that in whatever situations Muslims may encounter, they are required to return to the concept of *tawḥīd* and refer to the primary Islamic sources (Nasr, 1987). This paper contends that the Islamic psychospiritual dimension is not just compatible with the BPSS model, it is essential as its core pillar, providing meaning, direction, and harmony to all other dimensions. Thus, this theoretical framework positions Islamic psychospirituality not as a fourth pillar of the model, but as the unifying core that permeates and reinforces all other domains of the BPSS model.

Meanwhile, Imam al-Ghazālī discusses Islamic spirituality as involving a combination of four key aspects, namely *al-naḥs*, *al-qalb*, *al-rūḥ* and *al-'aql*. *Qalb* carries two meanings which are inner nature and second nature. Inner nature encompasses three main attributes of the inner reality of the human being (*ḥaqīqah al-insān*), which are conscious (*mudrik*), knowledgeable (*'alim*) and guided by intuition (*'arif*). This nature is closely related to the physical heart. Al-Ghazālī describes the inner essence of the heart as subtle (*latīfah*), spiritual (*rūḥānī*) and divine (*rabbānī*), which are closely connected with the three other essential spiritual elements; *rūḥ* (soul/spirit), *naḥs* (desire) and *'aql* (intellect). The *rūḥ* has two meanings. The first refers to a subtle force that flows from the physical heart into the entire human body through the nervous system. The second meaning refers to a subtle faculty responsible for awareness and understanding of a situation. This second meaning is related to the second nature of the heart, which was not discussed in depth by Imām al-Ghazālī, as it is based on Allah's command to the Prophet Muhammad (peace be upon him) in the Qur'an, Sūrah al-Isrā', verse 85: "And they ask thee about the Spirit. Say thou: "The Spirit is by command of my Lord; and you have been given of knowledge only a little" (Al-Ghazālī, 2005).

The second term for *qalb* is *naḥs* (soul), which has two primary meanings. The first is that *naḥs* is the locus of anger and all forms of desire. Sufi scholars state that the *naḥs* is the source of all blameworthy (negative) traits within a person. Therefore, one must strive diligently to overcome all negative tendencies within oneself. The second meaning is related to the inner nature of a person, which is divided into three primary categories; *al-naḥs al-mutma'innah*, *al-naḥs al-lawwāmah* and *al-naḥs al-ammārah bi al-sū'*. *Al-naḥs al-mutma'innah* means the highest level of faith, submitting and obeying only Allah Almighty, in which the soul is at complete peace. Manakala *al-naḥs al-lawwāmah* is the intermediate state of the soul, often described as the state of the common believer whose faith fluctuates. At this stage, one is actively striving to resist evil temptations to attain the best state of the soul. Final level of the soul is *al-naḥs al-ammārah bi al-sū'*, means the lowest and negative state of the soul, dominated by desires, anger, and

harmful tendencies. The final term is *'aql* (intellect), a divine gift that distinguishes humans from animals. The *'aql* is the locus where information and knowledge develop. Its special function is to think, reflect, and bear responsibility. The first meaning of *'aql* is knowledge of the true reality of something, representing the reality of knowledge residing in the human heart. The second meaning explained by al-Ghazālī refers to a secondary nature of the human being, which he did not elaborate upon. In conclusion, *'aql* represents a person's intellectual capacity and how they construct their own perspective on a matter (Al-Ghazālī, 2005). Figure 1 illustrates the interconnection between each element of the physical and spiritual dimensions (Al-Ghazālī, 2005; Jenkins & Azimullah, 2016).

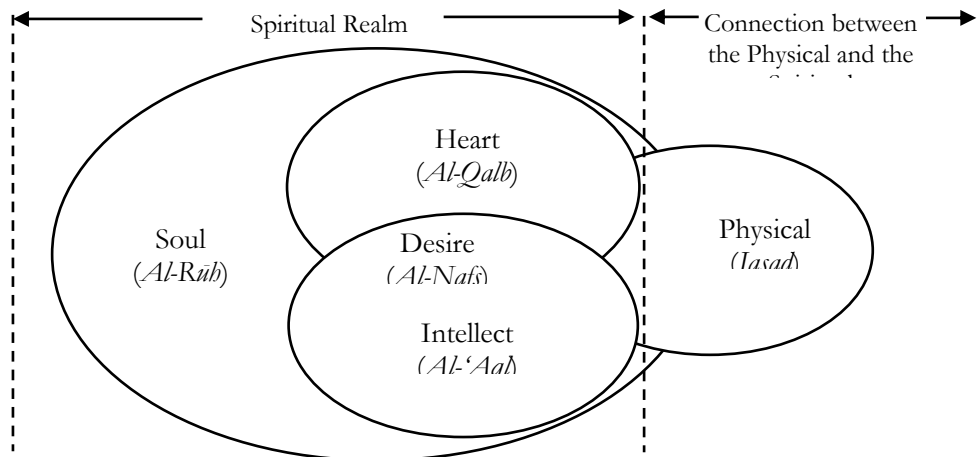


Figure 1. Connection between the Physical and the Spiritual (Al-Ghazālī, 2005; Jenkins & Azimullah, 2016)

METHODOLOGY

Conceptual data is essential for establishing the foundation of the study. This section employs a qualitative research approach, which is primarily concerned with exploring questions and statements related to a particular phenomenon. Qualitative research involves an inductive process of understanding, which begins with observation, followed by generalisation and hypothesis formation, and ultimately the development of theory. The collection of conceptual data aims to address the first research question: 'What are the key elements of individual healthcare based on Islamic psychospirituality?'

This study begins by examining the essential components of healthcare, particularly in the context of palliative care, namely the physical, psychological, spiritual, and social dimensions. The discussion is framed within the realm of social sciences. Following the conceptual exploration of the topic, the study further elaborates on the primary needs in care involving key individuals as well as the critical elements within each care component. This process of observation views healthcare through the lens of Islamic psychospirituality.

The primary references used in this study include books and articles focusing on healthcare, Islamic psychospirituality, holistic care, palliative care, psychology, spirituality, physical and social care, caregivers, patients, and various support systems relevant to healthcare and Islam. Both primary and secondary sources are utilised, particularly classical Islamic texts (kutub turāth) authored by scholars such as Imam al-Ghazālī, Abū Ṭālib al-Makkī, al-Muḥāsibī, Ibn Sīnā, Ibn Qayyim al-Jawziyyah, among others. Contemporary Islamic scholars such as Uthman Najati and Malik Badri are also referenced.

In addition, academic journal articles serve as key sources of reference, especially those indexed in Web of Science (WoS), Scopus, Google Scholar, MyCite, and others. Figure 1 presents the flow chart for the conceptual data collection process.

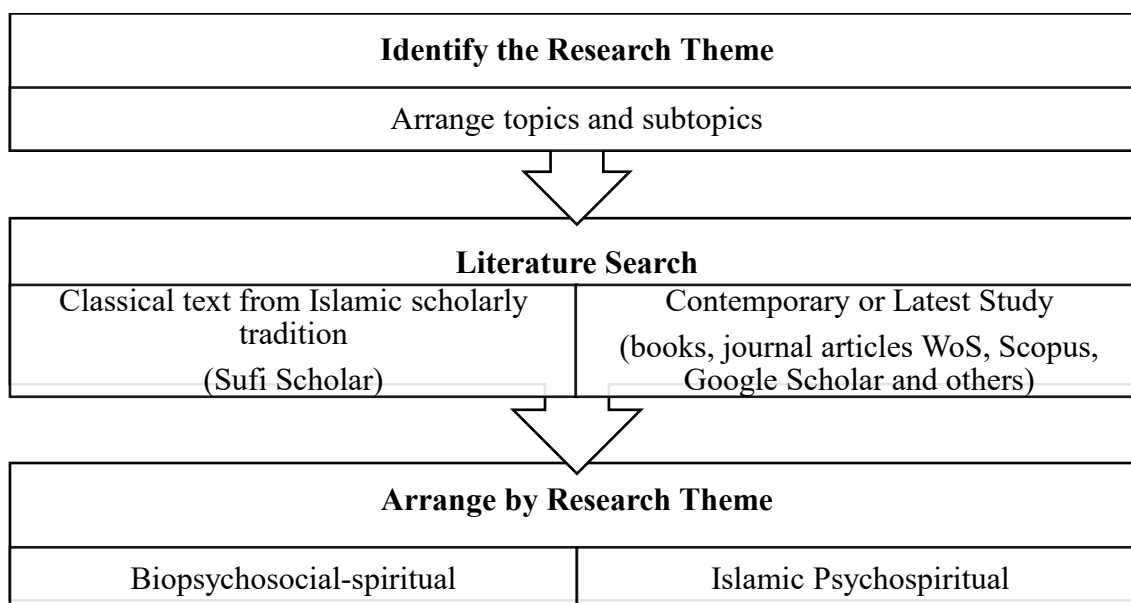


Figure 2. Flow Chart for Research Methodology

DISCUSSION

Personal Healthcare

The principles of Islamic psychospirituality encompass several key elements that serve as guidelines in the implementation of personal healthcare. Among the considerations within these principles are the application of Shari‘ah in healthcare, as well as the underlying philosophy, objectives, and core principles that guide Islamic psychospiritual practice.

Shari‘ah Principles in Personal Healthcare

Shari‘ah principles refer to Islamic legal rulings and guidelines derived from the teachings of Islam. All recommended practices and acts of worship must align with the teachings of the Prophet Muhammad (peace be upon him). Any treatment provided for patients must conform to Islamic guidelines. Additionally, patient preferences and choices must be respected, so long as they do not contradict the objectives of Shari‘ah (maqāṣid al-shari‘ah). The product or manual developed through this framework offers a form of treatment grounded in Islamic psychospirituality and is appropriate for use in hospitals or healthcare centres throughout Malaysia. It adheres to religious requirements based on the creed of Ahl al-Sunnah wa al-Jamā‘ah and complies with Shari‘ah principles. Furthermore, it is aligned with the Shari‘ah-based quality management system as outlined in the Malaysian Standard (MS 1900, 2014).

According to the framework of maqāṣid al-shari‘ah, the essential benefits (maṣlaḥah ḍarūriyyāt) of human life are structured in a hierarchical order consisting of five primary objectives: the preservation of religion, life, intellect, lineage (or progeny), and property. Islam does not prohibit the use of any means to treat illness in order to preserve life, as long as the sanctity of faith (‘aqīdah) and adherence to religious law (shari‘ah) are maintained. In addition to employing the maqāṣid al-shari‘ah as a guiding framework for healthcare decisions and treatment, the application of legal maxims (qawā‘id fiqhiyyah) is also essential to assist medical practitioners in ensuring that their practices conform to Islamic rulings. Islamic psychospirituality is a practical approach that takes into account the specific conditions of the patient, their family, and the healthcare providers involved (Abd Razak, Zainal Abidin & Harun, 2023).

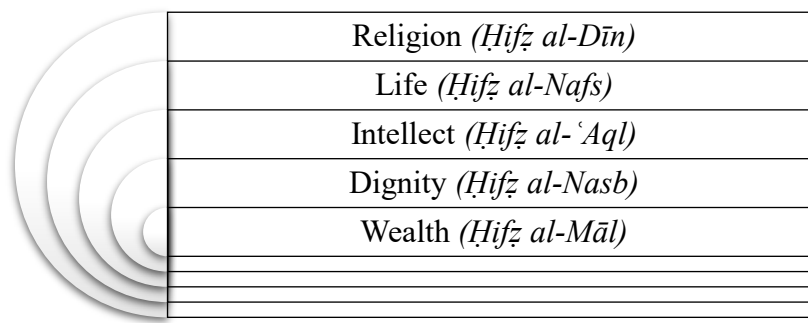


Figure 3. *Maslahah Daruriyyat*

According to al-Suyūṭī, when a particular need becomes widespread and affects the general public, it is to be treated with the same legal status as a necessity (*ḍarūrah*). This concept is applied in the context of healthcare providers, where their role constitutes a matter of public interest and significance, and is therefore regarded as a necessity under Islamic law (al-Suyūṭī, 1983). A brief explanation and description of each component within the *maqāṣid al-sharī'ah*, based on the framework of *maṣlaḥah ḍaruriyyāt*, are as follows (Al-Ghazālī, 1969; Al-Qaradhawi, 2006; Abd Razak, Zainal Abidin & Harun, 2023):

1. **Preservation of Religion (*Hifz al-Dīn*):** The preservation of religion is the foremost priority in healthcare, as it is essential to maintain the belief that Allah (SWT) is the One who causes illness and the One who grants healing. Furthermore, maintaining a healthy and strong body is crucial in enabling individuals to perform religious obligations such as prayer (*ṣalāh*), fasting (*ṣawm*), pilgrimage (*ḥajj*), and other acts of worship.
2. **Preservation of Life (*Hifz al-Nafs*):** The preservation of life is a central objective in medical treatment. All efforts in healthcare are directed towards saving lives, restoring health, and ensuring the comfort of patients. Life is regarded as sacred and of immense value in Islam, warranting the highest level of care and protection.
3. **Preservation of Intellect (*Hifz al- 'Aql*):** The preservation of intellect in healthcare involves preventing individuals from engaging in activities or substances that can impair the mind, such as the use of drugs and alcohol. It also includes protecting the mind from harmful thoughts or behaviours that could lead to self-harm, suicide, or other destructive actions. Islam permits the use of certain medications to safeguard the intellect, such as those used in addiction treatment to control withdrawal and dependence. Furthermore, counselling sessions and awareness programmes conducted by responsible agencies serve as important means of imparting knowledge and information. All these efforts are essential to ensure that patients remain mentally sound and emotionally stable when facing the psychological pressures of illness and treatment.
4. **Preservation of Lineage (*Hifz al-Nasb*):** The concept of preserving lineage and dignity involves the protection and safeguarding of progeny. It is essential for the development of a healthy, productive, and functioning society. The preservation of lineage is a religious obligation, as it upholds the integrity of the social system within the community.
5. **Preservation of Wealth (*Hifz al-Māl*):** The preservation of wealth can be achieved through the prevention of illness by seeking early medical intervention, which helps reduce the financial burden associated with treatment and recovery. Preventing disease is more effective and economical than curing it, aligning with the Islamic principle of safeguarding one's resources (Rosman et al., 2019).

Meanwhile, the *fiqh* principles referenced in the discussion of *maqāṣid al-sharī'ah* are as follows (Al-Suyūṭī, 1983):

1. All actions are judged by intentions (*al-umūr bimaqāṣidihā*): With a sincere intention, even permissible (neutral) acts can be elevated to the level of worship. However, acts that are inherently prohibited (*ḥarām*) remain prohibited, regardless of how pure the intention may be. Islam does not sanction the use of unlawful means as a justification for achieving noble ends.
2. Certainty is not overruled by doubt (*al-yaqīn lā yazūl bi al-shakḥ*): If a person has established certainty regarding a matter and subsequently experiences doubt, the original ruling based on certainty remains. For example, if one is certain of having performed ablution (*wuḍū'*) but later doubts whether it has been nullified, the state of *wuḍū'* is still considered valid.
3. Hardship brings about ease (*al-mashaqqab tajlib al-taysīr*): Difficulty and hardship serve as valid grounds for permitting ease and simplification in religious obligations. For example, prayers (*ṣalāh*) may be combined (*jam'*) or performed according to one's capacity in situations of hardship.

4. Harm must be eliminated (*al-darar yuzāl*): Any form of harm to oneself should be removed, while also ensuring that no harm is caused to others in the process (Adnan, Mokhtar & Samuri, 2023).
5. Custom is recognised as a source of legal judgment (*al-‘ādah muḥakkamah*): This principle takes into account local customs (‘urf), culture, environment, climate, and societal needs, aligning them with contextual values of locality and time in the process of legal determination.

Islamic Psychospiritual Principles in Personal Health Care

Islamic psychospiritual principles also emphasize the philosophy of Islamic psychospirituality to ensure that human beings, as servants of God, attain safety and well-being in both this world and the hereafter. Individuals must pay attention to all aspects holistically in fulfilling their responsibilities as servants and vicegerents (khalifah) of Allah SWT in life, guided by the Qur’an, the Sunnah, the practices of the righteous predecessors (salaf), and knowledge that does not contradict the principles of Islamic creed (‘aqidah) and Shariah. The ultimate goal of Islamic psychospirituality aligns with its philosophy, which is to preserve the health of the soul, mind, and body by ensuring that today is better than yesterday, and tomorrow is better than today, ultimately achieving success in both worldly life and the hereafter (Sa’ari, 2019).

In the principles of care based on Islamic psychospirituality, the core foundation lies in the concepts of tawḥīd (belief in the Oneness of God), shari‘ah (Islamic law), and akhlāq (ethics), which encompass faith in the absolute power of Allah SWT. Any form of treatment is ultimately subject to the will of the One who truly heals is Allah SWT. Inner peace involves a complete surrender to the divine decree (qadar) of Allah SWT (Al-Ghazālī, 2011). The foundations of religious teachings and Islamic law serve as guidance, ensuring that one does not transgress religious boundaries or cause harm to oneself. Spiritual practice involves deep internalisation and striving to perform every action in the best possible manner (iḥsān).

A fundamental aspect of Islamic psychospiritual practice is the approach rooted in the guidance of Sufi scholars such as Imām al-Ghazālī, al-Muḥāsibī, Abū Ṭālib al-Makkī, and others. The Sufi methodology emphasizes the purification of the heart from all negative traits, the cultivation of positive character, and ultimately the attainment of true happiness in this world and the hereafter. The psychospiritual approach of these scholars is typically divided into five key components: muḥāsabah al-nafs (self-accountability), ma‘rifah al-nafs (self-realisation), mujāhadah al-nafs (self-struggle), riyāḍah al-nafs (self-training), and al-sa‘ādah (true happiness). The following is a detailed explanation of each of these components and how they are applied in psychospiritual intervention.

1. Muḥāsabah al-Nafs (Self-Reflection/Self-Accountability) (Hawwa, 1988):

The process of muḥāsabah al-nafs (self-accountability) involves evaluating one’s actions both before and after they are performed. This reflective process is continuous and repetitive, requiring the individual to assess every step taken, identify potential problems that may arise, and seek solutions for improvement. It serves as a mechanism for personal reform and spiritual growth, fostering greater awareness and responsibility over one's intentions and behaviours.

2. Ma‘rifah al-Nafs (Self-Realization) (Al-Ghazālī, 2012):

Following the process of muḥāsabah al-nafs (self-accountability), individuals are able to gain a deeper understanding of themselves. This stage is person-centred, focusing on the individual's capacity for transformation, recognising personal strengths and weaknesses, seeking life purpose, identifying problems, and setting goals. These outcomes are achieved through the initial self-assessment process of muḥāsabah al-nafs, which lays the foundation for further self-development (Al-Ghazālī, 1119).

3. Mujāhadah al-Nafs (Self-Struggle) (Hawwa, 1988):

Mujāhadah al-nafs refers to the inner struggle undertaken with utmost sincerity and effort to purify oneself from all forms of immoral and sinful behaviour. It involves the struggle to free oneself from despair in the mercy of Allah SWT, the struggle to fulfil His commandments and abandon His prohibitions, and ultimately, the struggle to attain the pleasure and paradise of Allah SWT.

4. Riyāḍah al-Nafs (Self-Training)

To attain ultimate happiness in the Hereafter, continuous self-discipline and training are essential as a complement to the process of mujāhadah (spiritual struggle) (Al-Ghazālī, 2005). Three Main Stages in Purifying the Soul According to Sa‘id Ḥawwā:

- a. **Taṭahhur (Purification of the Heart) (Hawwa, 1988)** - Purifying the soul from various spiritual diseases and negative traits through the teachings and life practices of the prophets, as mentioned in the Qur’an and the Sunnah.
- b. **Tahaqquq (Strengthening the Heart) (Hawwa, 1988)** - The process of rebuilding and strengthening the heart to transform the soul so that it draws closer (taqarrub) to the Creator,

ultimately attaining a noble position in His sight. The soul becomes capable of focusing the heart and mind solely on its Creator.

- c. ***Takhalluq (Self-actualization) (Hawwa, 1988)*** - Achieving a level of personal development grounded in the Divine Names and Attributes of Allah SWT, and following the exemplary character of the Prophet Muhammad SAW.

5. ***Al-sa'ādah (Happiness):***

According to al-Ghazālī, the ultimate form of happiness is divine bliss, and the truest form of pleasure is the eternal happiness of the Hereafter. Genuine happiness is attained through the knowledge and recognition of Allah SWT (Al-Ghazālī, 1119). The key to happiness lies in ability, will and knowledge.

Based on the Islamic psychospiritual approach mentioned above, the processes of muḥāsabah al-naḥs (self-reflection) and ma'rifah al-naḥs (self-realization) serve as the initial stages in self-improvement or the beginning of therapy needed to understand one's internal condition. Meanwhile, the processes of mujāhadah al-naḥs (self-struggle) and riyāḍah al-naḥs (self-training) are intervention phases aimed at improving and enhancing the self; these two processes are complementary and should be undertaken concurrently. The final and ultimate goal in Islamic psychospirituality is al-sa'ādah, which is the attainment of true happiness in both this world and the hereafter.

Holistic in Islamic Psychospiritual

The integration of Islamic psychospiritual elements in healthcare represents an effort or alternative approach to help optimise patient care and enhance quality of life. Psychospirituality is not a newly emerging field in the discourse of inner and spiritual development. However, its application within the domain of palliative care remains at an early stage. Within psychospiritual discussions, the soul and spirit constitute core dimensions of the human self, playing a significant role in influencing one's happiness, well-being, and emotional balance, which in turn contribute to physical health.

Concept of Biopsychosocial spiritual based on Islamic Psychospiritual

The biopsychosocial-spiritual model is a structured representation of the holistic philosophy, offering a practical way to assess and intervene in a person's overall well-being across four essential dimensions. Holistic according to the Kamus Dewan Bahasa dan Pustaka refers to an interrelated system in which all components are connected to one another as a unified and comprehensive whole, rather than focusing on isolated aspects alone. The term holistic is widely used across various fields and approaches, including in the context of healthcare, education, the holistic concept of Islamic law and others. In this study, the holistic concept will be applied within the context of reducing drug addiction.

In this study, the term holistic refers specifically to the context of self-care and healing, which encompasses four primary components based on biopsychosocial-spiritual which are physical well-being, social awareness, psychological state, and spiritual beliefs (Kinchen, 2015). The theoretical underpinning of this study is a synthesis of the biopsychosocial-spiritual model and the Islamic psychospiritual tradition. The biopsychosocial-spiritual model, first introduced by Engel in 1977, highlights the interplay between biological, psychological and social factors in determining health outcomes (Engel, 1977). Later scholars incorporated the spiritual dimension, recognizing its significant impact on well-being, particularly in palliative care, addiction recovery and trauma intervention.

Holistic care refers to comprehensive care that encompasses all aspects of life, both worldly and spiritual (hereafter). The term 'holistic' is defined as being interrelated and interconnected, forming an integrated and comprehensive system (Dewan Bahasa dan Pustaka, 2023). In Islam, the concept of holistic is referred to as *syumul*, which denotes completeness, comprehensiveness, and perfection (Dewan Bahasa dan Pustaka, 2023). In Arabic, the term is *syumul* which means completely and comprehensively (Al-Ma'āni, 2023). In this context, holistic refers to the comprehensive discussion of health aspects in human life. Islam addresses all matters encompassing every dimension of life in a detailed and thorough manner.

As emphasized by al-Ghazālī in his seminal work *Iḥyā' 'Ulūm al-Dīn*, there are three essential elements of a human being, with the soul (al-naḥs-النفسية) being one of the most crucial components, physical (البدنية) and also other priorities beyond the physical (الخارجة عن البدن) (Al-Ghazālī, 2011) or also called as *ḥabariyyah* (Al-Attas, 2014). The components of the soul (spiritual and psychological) refer to knowledge and good character, while the physical (bodily) aspect pertains to health and well-being. The final element is the external aspect beyond the physical, which includes wealth and other contributing factors such as one's social environment or surroundings (Al-Ghazālī, 2011). Al-Ghazālī stated that every external matter influences the internal elements, and vice versa (Al-Ghazālī, 2010). Here is Figure 3, which illustrates the essential needs within a human being;

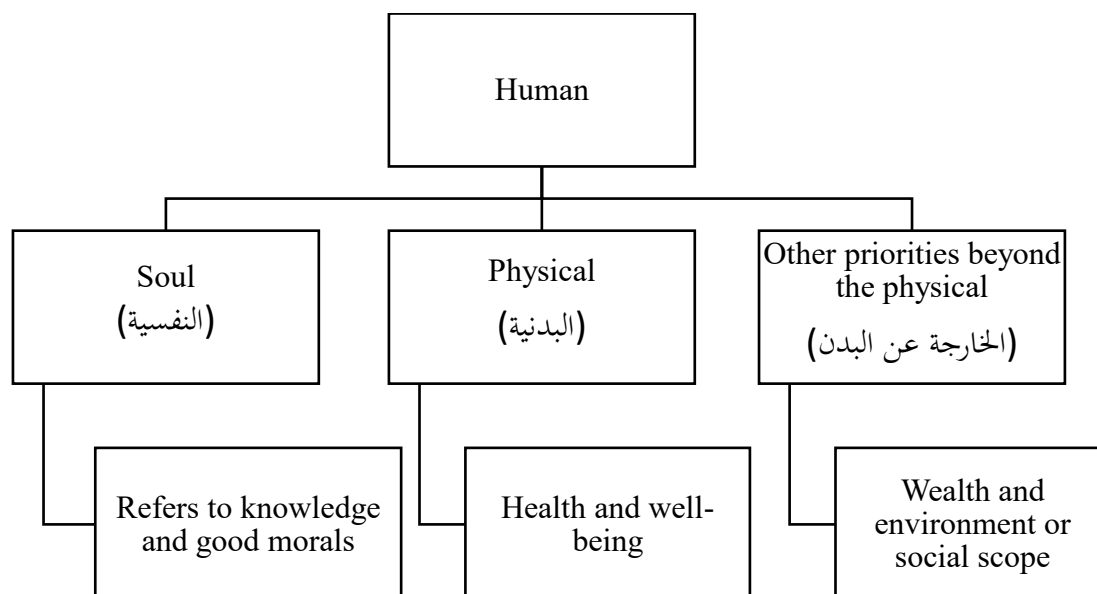


Figure 4. The Basic Needs of Humans (Al-Ghazālī, 2011; Al-Attas, 2014)

Human beings are the most perfectly created of Allah SWT's creations. Therefore, the approach that must be taken to help individuals address both internal and external issues must also be a comprehensive and holistic one (Rajab, 2015). Ibn Qayyim, in his work *Al-Fawā'id*, states that the physical, cognitive, and emotional tendencies share a similar rhythm, a notion that aligns with the modern cognitive psychological approach. Therefore, holistic care which embraces the natural disposition (*fiṭrah*) of human beings must be emphasised, as Islam places great importance on achieving balance across all dimensions of life (Badri, 2018). This matter is also discussed by Dr. Muhammad Uthman Najati in his works entitled *al-Qur'ān wa 'Ilm al-Nafs* (The Qur'an and Psychology) and *al-Hadīth wa 'Ilm al-Nafs* (The Hadith and Psychology) (Najati, 1988).

Therefore, in the concept of self-care, it must be complete and holistic, encompassing both the internal and external aspects of an individual. The holistic concept in Islam refers to the view that human life should be perceived comprehensively, covering the psychological, spiritual, physical, and social components. This is because human beings are complex creatures with diverse needs and desires. Hence, all aspects of life must be maintained in balance in order to attain true happiness and well-being (Hassan, 2010).

Among the aspects of holistic care in life according to Islamic teachings include maintaining physical health through healthy eating habits, regular exercise, and quality sleep; preserving mental and emotional well-being through relaxation, meditation, and positive social relationships; and most importantly, nurturing spiritual health through religious practices such as prayer (*ṣalāh*), fasting, reciting the Qur'an, engaging in *dhikr* (remembrance of Allah), and other forms of worship. Even if the problem faced by an individual pertains to only one component, such as physical health, it can potentially have a comprehensive impact on other areas of their life (Rajab, 2015; Muhamad, 2018).

Application of Islamic Psychospiritual Therapy

Islamic Psychospirituality is a comprehensive concept, lifestyle, and guiding principle rooted in the teachings, recommendations, and guidance of Islam as derived from the Qur'ān and the Sunnah. It refers to a school of thought or body of knowledge that integrates psychological and spiritual elements to understand mental and spiritual processes from an Islamic perspective. Islamic psychospirituality can be understood as both a concept and a therapeutic approach to address disorders of the soul (*nafs*, *rūḥ*, *qalb*), the mind (*'aql*), emotions (*'āṭifah*), and moral behaviour (*akhlāq*). This is grounded in Islamic sources and practices, particularly the Qur'ān, Sunnah, the teachings of scholars of *Ahl al-Sunnah wa al-Jamā'ah*, as well as scientific knowledge that does not contradict the principles of Islamic Shari'ah. Its ultimate goal is to guide the individual back to the remembrance and consciousness of Allah SWT, the One and Only, thereby attaining well-being in this world and the Hereafter (Sa`ari, 2019).

Islamic psychospiritual knowledge refers to a theoretical framework that is studied and understood within the context of Islamic teachings. The practical application of this knowledge is referred to as psychotherapy. Islamic psychotherapy constitutes a therapeutic approach to addressing mental, spiritual, moral, and physical disorders, grounded in the principles and guidance of Islam, including the Qur'an, the Sunnah, the insights of classical and contemporary Islamic scholars, as well as the broader body of Islamic intellectual tradition (Sa`ari & Syed Muhsin, 2012). The terminology and knowledge related to Islamic psychospirituality have been increasingly developed in

recent times, as research that integrates both psychological and spiritual components has proven to be more impactful and beneficial to the human self. Psychospiritual well-being refers to a subjective experience that encompasses emotional health and an awareness of life's meaning. It implies a state of positivity, comprising characteristics such as self-awareness, the ability to cope with and adapt to stress, fulfilling and meaningful interpersonal relationships, a sense of belief, capability, and confidence, as well as living with purpose and hope (Lin & Bauer-Wu, 2003). In contrast, the definition of Islamic psychospirituality is more specific and clearly defined; it refers to the understanding or study of mental processes and spiritual cognition from the perspective of the Islamic faith (Abdul Aziz & Sa`ari, 2011).

Among the factors that influence spirituality in Islam are an individual's background and religious practices, as these elements shape and impact the course of their life journey (Baharuddin & Ismail, 2013). An example of emphasis within Islamic psychospirituality is the element of *tazkiyah al-nafs* (purification of the soul), which encompasses various components of the *maqāmāt*, refer to the spiritual stations, which constitute the principal sequence in the attainment of human perfection, must be traversed by an individual engaged in the path of *sulūk*. These stations represent the enduring outcomes of sincere and disciplined striving (*mujābahadah*) in devotion to Allah Almighty, embodying both a lasting essence and a tangible, physical dimension. Example of *maqāmāt* are *tawbah* (repentance), *ṣabr* (patience), *rajā'* (hope), and *khawf* (fear of God) (Sa`ari & Syed Muhsin, 2013). These qualities represent stages and pathways in the process of becoming a person of upright character and sound spiritual condition. Equipping oneself with Islamic knowledge is essential as a provision for facing life's challenges and adversities. Such provisions have been extensively discussed, highlighting the importance of studying the Qur'an and Hadith as foundational sources of guidance (Al-Ghazālī, t.t.; al-Hafiz, 2006). Among the approaches employed are elements of *'ibādah* (acts of worship), such as *dhikr* therapy (remembrance of God) and *ṣalāh* therapy (prayer) (Sa`ari, 2001), *wudhū'* therapy (ablution), *istighfār* therapy (seeking forgiveness), and *ruqyah* therapy (spiritual healing through Qur'anic recitation) (Zainal Abidin, Sa`ari & Syed Abdul Rahman, 2018) and other therapeutic practices that incorporate acts of worship.

There are also other therapeutic methods that have been discussed, such as *Ilāhī* therapy (divine-centered therapy), *Asma' al-Ḥusnā* therapy (therapy through the Beautiful Names of Allah), and others. All of these methods of implementation are collectively referred to as Islamic psychotherapy (Chik, 2018). This psychotherapeutic approach is founded upon a systematic methodology and teachings. Such structured practices are effective in facilitating the healing process, particularly in relation to mental and spiritual health (Zainal Abidin, Sa`ari & Syed Abdul Rahman, 2018). Thus, psychotherapeutic practices based on Islamic psychospirituality can help reduce spiritual distress experienced by individuals, as they address both mental (psychological) well-being and inner tranquility. Islamic psychotherapy also emphasizes external aspects, including physical and social dimensions. Among the key elements in physical care is personal hygiene, known as *ṭahārah* (ritual purity-طهارة) (Sa`ari, 2005). *Ṭabarāh* refers to personal hygiene and purification, which includes rulings related to water, cleansing, and the removal of impurities (*najāsah*), all of which must adhere to the requirements and regulations outlined in Islamic jurisprudence (*fiqh*) (Dewan Bahasa dan Pustaka, 2023). All rulings related to cleanliness are clearly outlined in the Qur'an and the Hadith of the Prophet Muhammad (peace be upon him), reflecting the great emphasis Islam places on this matter. Furthermore, the classical work *Iḥyā' 'Ulūm al-Dīn* discusses this subject in detail, underscoring the central importance of cleanliness in the Islamic tradition (Al-Ghazālī, 2005). Studies conducted in the Western also acknowledge the importance of cleanliness as a fundamental element of well-being (Galek et al., 2005).

In addition, within the physical component, another essential aspect is maintaining a healthy and balanced diet to ensure stability in meeting physiological needs (Al-Ghazālī, 2005). Another important aspect is the understanding of the use of medications derived from both *halal* (permissible) and *haram* (prohibited) substances (Mustaqim et al., 2013). A healthy and balanced diet is also strongly encouraged to ensure that the individual's physical condition remains stable, in accordance with dietary recommendations provided by health professionals (Mueller et al., 2001). Although an individual may suffer from a chronic or incurable illness, appropriate dietary management can help them lead a better quality of life and experience overall well-being, without being adversely affected by the consequences of uncontrolled food intake (Al-Bukhari, 1999). Furthermore, daily lifestyle and personal routines are also given significant emphasis in Islam (Al-Ghazālī, 2004; Zamzam, 1994).

The final component is the social dimension, which also contributes to the well-being of a Muslim and serves as an essential element in self-care (Rajab, 2015). Social care in Islam refers to the following *ḥadīth*, which discusses the rights of one Muslim over another, means: "Abu Huraira reported Allah's Messenger as saying: Six are the rights of a Muslim over another Muslim. It was said to him: Allah's Messenger, what are these? Thereupon he said: When you meet him, offer him greetings; when he invites you to a feast accept it. when he seeks your council give him, and when he sneezes and says: "All praise is due to Allah," you say *Yarhamuk Allah* (may Allah show mercy to you) ; and when he fails ill visit him; and when he dies follow his bier." (Imam Muslim, 2015).

Meanwhile, social well-being refers to organized activities aimed at enhancing social welfare through the provision of assistance to those in need across various aspects, such as family support, child welfare, healthcare,

livelihood, leisure, and social relationships. Social well-being focuses on the individual, groups, communities, and population units, encompassing preservation, treatment, and prevention efforts (Abd. Wahab, 2010). Therefore, within the social component, one of the key aspects that must be emphasized is the quality of human relationships and the roles individuals play in relation to one another (Chik, Sa`ari & Ee Chin, 2017; Ahmad Razak et al., 2013). In this regard, the role of individuals surrounding the patient is crucial in providing support and motivation to help the individual cope with daily life. Additionally, the management of social activities should be tailored to the individual's physical capacity (Sarris et al., 2014; Stephen Lutz, 2011) and abilities, including activities such as visiting the sick (Al-Ghazālī, 2004). Visiting the sick is highly encouraged in Islam; however, it must be done with respect to proper etiquette and in consideration of the patient's condition (Ab Rahman, 2018; Md Noor, 2004). Another important element within the social component involves logistical matters, such as the individual's socioeconomic status (Ibn Khaldun, 1904), to ensure that treatment and daily living conditions proceed smoothly without being hindered by financial burdens (Michael et al., 2016).

CONCLUSION

This article underscores that Islamic psychospirituality should be recognized not simply as an adjunct to the biopsychosocial-spiritual model, but as its central pillar. Drawing upon Islamic epistemology and the psychospiritual framework, the study presents a comprehensive model wherein spiritual awareness and divine connection play a vital role in strengthening the physical, mental, and social well-being of individuals. Future research should further explore the practical application of this integrated model in clinical settings, social work, and disaster recovery. Incorporating psychospiritual elements within therapeutic frameworks will ensure that interventions are not only holistic but also grounded in meaning, values, and purpose, especially in Muslim contexts.

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Author Contributions

Conceptualization, Che Zarrina Sa`ari and Hasimah Chik; Methodology, Che Zarrina Sa`ari and Hasimah Chik; Software, Che Zarrina Sa`ari and Hasimah Chik; Validation, Che Zarrina Sa`ari and Hasimah Chik; Formal Analysis, Che Zarrina Sa`ari and Hasimah Chik; Investigation, Che Zarrina Sa`ari; Resources, Che Zarrina Sa`ari; Data Curation, Hasimah Chik; Writing Original Draft Preparation, Che Zarrina Sa`ari and Hasimah Chik; Writing Review and Editing, Che Zarrina Sa`ari and Hasimah Chik; Visualization, Hasimah Chik; Supervision, Che Zarrina Sa`ari; Project Administration, Che Zarrina Sa`ari; Funding Acquisition, Che Zarrina Sa`ari. All authors have read and agreed to the published version of the manuscript.

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Conflicts of Interest

The author declares no conflicts of Interest. Especially, although the preparation of this manuscript was greatly assisted by Editage's pre-submission peer review, there is no conflict of interest between the authors and Editage.

Consent to Publish

The authors affirm that human research participants provided informed consent for publication.

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