

ROUTLEDGE FOCUS

# Islāmic Integrated Narrative Therapy

G. HUSSEIN RASSOOL



# Islāmic Integrated Narrative Therapy

This book explores the integration of narrative therapy within the framework of Islāmic psychotherapy, combining modern therapeutic practices with the rich cultural and spiritual heritage of Islām.

Narrative therapy, which emphasises the importance of personal stories in shaping an individual's identity and experiences, finds a natural complement in the Islāmic tradition, where narration has always played an important role. This integration provides a culturally sensitive therapeutic model that respects and utilises the client's faith and cultural background. The book details how narrative therapy principles align with Islāmic teachings, particularly the emphasis on introspection, personal responsibility, and the transformative power of stories found in the Qur'ān and hādith. It provides detailed guidelines and techniques for therapists to use narrative therapy with Muslim clients, including culturally relevant storytelling methods and exercises. These techniques are illustrated with real-life examples and case studies. In addition to practical techniques, the book addresses the ethical considerations involved in integrating narrative therapy with Islāmic psychotherapy along with emerging trends, ongoing research, and potential areas for further development.

This book offers an original contribution by developing a culturally and spiritually integrated model of narrative therapy tailored for Muslim clients. By aligning therapeutic techniques with Islāmic teachings, it provides mental health professionals with practical, faith-sensitive tools, making it especially valuable for therapists, counsellors, and scholars working within Muslim communities.

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## **Focus Series on Islāmic Psychology and Psychotherapy**

Series Editor: Professor Dr. G. Hussein Rassool, Professor of Islāmic Psychology.

### **About the Series**

In contemporary times, there is increasing focus on the need to adapt approaches of psychology, counselling psychology and psychotherapy to accommodate the integration of spirituality and psychology. With the increasing focus on the need to meet the wholistic needs of Muslims, there was a call to adapt approaches to the understanding of behaviour and experiences from an Islāmic epistemological and ontological worldview.

The aim of the Focus Series on Islāmic psychology and psychotherapy is to introduce a range of educational, clinical and research interventions relating to Islāmic psychology and psychotherapy that are authentic, practical, concise, and based on cutting-edge research. Each volume focuses on a particular aspect of Islāmic psychology and psychotherapy, its application with a specific client group, a particular methodology or approach, or a critical analysis of existing and emergent theoretical and historical ideas.

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*By G. Hussein Rassool*

# **Islāmic Integrated Narrative Therapy**

**G. Hussein Rassool**

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**Dedicated to Asiyah Maryam bint Adam Ibn Hussein  
Ibn Hassim Ibn Sahaduth Ibn Rosool Ibn Olee Al  
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لَقَدْ كَانَ فِي قَصَصِهِمْ عِبْرَةٌ لِّأُولِي الْأَلْبَابِ

- ***There are certainly in their stories a lesson for those of understanding.*** (Yusuf (Joseph) 12:111, interpretation of the meaning)

**“Indeed, in their stories, there is a lesson for men of understanding. It (the Qur’ân) is not a forged statement but a confirmation of the Allah’s existing Books [the Taurat (Torah), the Injeel (Gospel) and other Scriptures of Allah] and a detailed explanation of everything and a guide and a Mercy for the people who believe.”** (Muhammad Taqiud-Din alHilali)



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# Focus series: background and context

Over the past four decades, there has been a noticeable revival of interest in Islāmic psychology and its practical applications across various domains, though largely within specialised circles. This renewed engagement has been accompanied by an expanding body of literature dedicated to Islāmic psychology and psychotherapy, reflecting a growing recognition of the need to address the holistic well-being of Muslims through approaches that are consistent with Islāmic values and worldviews. The *Focus Series* is a direct response to this emerging demand. These books are intentionally concise, practical, and grounded in evidence, designed to offer clear and accessible insights into Islāmic psychology and psychotherapy. Avoiding unnecessary complexity, the series aims to serve as a reliable resource for students, academics, clinicians, and the wider public seeking to engage with the field in a meaningful and informed way.

## Aims of series

The *Focus Series* on Islāmic psychology and psychotherapy is dedicated to integrating Islāmic principles into the theory and practice of psychology, with a particular emphasis on educational, clinical, and research contexts. Its goal is to promote psychological well-being and personal development through insights rooted in the Islāmic tradition. By presenting authentic themes alongside contemporary research, the series strives to make Islāmic psychology and psychotherapy more accessible and relevant to educators, clinical psychologists, psychotherapists, and counsellors, ultimately contributing to the advancement of this evolving field.



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# Preface

In recent years, narrative therapy has gained prominence as a postmodern approach that helps individuals shape meaning and identity through the stories they tell. By re-examining and rewriting these narratives, clients can reshape their experiences and find new ways to navigate challenges. As psychotherapy continues to evolve, there is increasing awareness of the importance of cultural and religious sensitivity, particularly when working with diverse populations such as Muslims. Traditional Western approaches, rooted in secular, individualistic, and Eurocentric frameworks, often overlook the spiritual and communal values that are fundamental to cultures like Islām. For Muslim clients, effective therapy calls for an integrative approach that interlaces together psychological principles with Islāmīc spirituality and theology. Culturally adapted methods like narrative therapy enhance outcomes by aligning with clients' beliefs, values, and worldview. Within an Islāmīc framework, this means integrating Islāmīc epistemology, spiritual practices, and culturally meaningful narratives into the therapeutic journey.

Narrative therapy aligns well with Islām's tradition of storytelling as a tool for teaching, healing, and transformation. The Qur'ān, hadīth, and historical narratives are filled with stories that offer profound moral, emotional, and psychological insight. Accounts of Prophets Yūsuf, Ayūb, and Mūsā (عليهم السلام) illustrate enduring lessons on trauma, patience, resilience, courage, and spiritual growth. Incorporating these narratives into therapy helps Muslim clients reframe their struggles not as random suffering but as divinely guided trials with purpose. This perspective fosters hope, meaning, and a deeper connection to Allāh throughout the healing process.

*Islāmīc Integrated Narrative Therapy*, the central theme of this book, introduces a therapeutic model that blends narrative therapy with Islāmīc teachings, offering a spiritually and culturally grounded framework tailored for Muslim clients. It equips therapists with practical tools, such as Qur'ānic storytelling, metaphors, and spiritual narratives, to support clients in re-authoring their life stories in ways that are both meaningful and transformative. Through detailed case studies and real-world applications, the book demonstrates how narrative techniques can effectively address various mental health challenges within

an Islāmic context. It serves as a vital resource for Islāmic psychotherapists, mental health professionals, psychologists, and counsellors working with Muslim populations. Additionally, it provides valuable insight for students, scholars, and anyone interested in the integration of Islām and psychotherapy, offering strategies for faith-informed therapeutic practice.

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I humbly pray that Allāh forgives me and accepts this modest effort. May He make this book a source of benefit for all who engage with it, and a means of guidance for those seeking knowledge and understanding. Any clarity or benefit found in these pages is solely by the Grace of Allāh, and any errors are mine alone. I ask Allāh to pardon any unintentional shortcomings and to allow this work to serve a fruitful purpose for all those who find value in it.

مَا أَصَابَكَ مِنْ حَسَنَةٍ فَمِنَ اللَّهِ وَمَا أَصَابَكَ مِنْ سَيِّئَةٍ فَمِنَ نَفْسِكَ ۗ

- *Whatever of good befalls you, it is from Allāh; and whatever of ill befalls you, it is from yourself.* (An-Nisā' 4:79).



Praise be to Allāh, we seek His help and His forgiveness. We seek refuge with Allāh from the evil of our own souls and from our bad deeds. Whomsoever Allāh guides will never be led astray, and whomsoever Allāh leaves astray, no one can guide. I bear witness that there is no god but Allāh, and I bear witness that Muhammad is His slave and Messenger. (*Sunan al-Nasa'i: Kitaab al-Jumu'ah, Baab kayfiyyah al-khutbah*).

- *Fear Allāh as He should be feared and die not except in a state of Islām (as Muslims) with complete submission to Allāh.* (Al-'Imran 3:102, interpretation of the meaning).<sup>1</sup>
- *O mankind! Be dutiful to your Lord, Who created you from a single person, and from him He created his wife, and from them both He created many men and women, and fear Allāh through Whom you demand your mutual (rights), and (do not cut the relations of) the wombs (kinship) Surely, Allāh is Ever an All-Watcher over you.* (Al-Nisā' 4:1, interpretation of the meaning).
- *you who believe! Keep your duty to Allāh and fear Him and speak (always) the truth.* (Al-Ahẓāb 33:70, interpretation of the meaning).
- *What comes to you of good is from Allāh, but what comes to you of evil, [O man], is from yourself.* (An-Nisā' 4:79, interpretation of the meaning).

The essence of this book is based on the following notions:

- The fundamental of a religion is based on the Oneness of God.
- The source of knowledge is based on the Qur'ān and *hādīth*. (*Ahl as-Sunnah wa'l-Jamā'ah*)
- Empirical knowledge from sense perception is also a source of knowledge through the work of classical and contemporary Islāmic scholars and research.
- Islām takes a holistic approach to health: physical, psychological, social, emotional, and spiritual health cannot be separated.
- Muslims have an Islāmic or Qur'ānic worldview different from the Western-oriented worldview.

It is a sign of respect that Muslims would utter or repeat the words 'Peace and Blessing Be Upon Him' after hearing (or writing) the name of Prophet Muhammad (ﷺ).

### **Note**

- 1 The translations of the meanings of the verses of the Qur'ān in this book have been taken, with some changes, from Saheeh International, The Qur'ān: Arabic Text with corresponding English meanings.



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## **Section 1**

# **Theoretical and conceptual model**



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# 1 Foundations of narrative therapy

## Introduction

Narrative therapy is a postmodern, client-centred approach to psychotherapy developed by Michael White and David Epston in the late 20th century. It views identity as shaped by the stories individuals tell and share. Unlike traditional therapies that focus on diagnoses, narrative therapy adopts a non-pathologising stance, separating problems from the person. Through externalisation, clients can view their issues as distinct from their identity, allowing them to re-author their life stories with new meaning and direction. This approach highlights the power of language and narrative in shaping reality, acknowledging that experiences are influenced by personal and cultural contexts. Clients are encouraged to reconstruct their narratives based on their values, goals, and strengths. Maladaptive behaviours are seen as responses to external influences rather than fixed traits, fostering self-compassion and change. Narrative therapy can be used with individuals, couples, and families to enhance psychological well-being, emotional expression, resilience, and coping. It empowers clients to replace self-defeating stories with strength-based ones, promoting growth and healing. According to White & Epston (2009), Wallis et al. (2011), and Harms (2007), the core aim is to transform negative narratives into empowering ones. This chapter will explore the theoretical foundations, therapeutic process, client–therapist relationship, and key techniques used in narrative therapy.

## Concept of narrative therapy

White and Epston (2009) define narrative approaches as centring individuals as experts in their own lives, viewing problems as separate from the person, and recognising that people have the skills, values, and strengths to reduce the impact of those problems (cited in Wallis et al., 2011). This definition captures the core principles of narrative therapy: externalising problems, empowering clients, and drawing on their existing capabilities. Narrative therapy is a

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respectful, non-blaming approach that positions clients as the authors of their lives. It sees identity as distinct from problems and promotes the use of personal strengths to reshape one's narrative (Dulwich Centre, n.d.). According to the British Association for Counselling and Psychotherapy (BACP, n.d.), this approach encourages individuals to rewrite their stories in more empowering ways, fostering resilience and self-determination. As a strengths-based and collaborative model, narrative therapy supports clients, whether individuals, couples, or families, in recognising their capacity to live according to their values. During crises or trauma, it promotes a hopeful, future-oriented mindset, with the therapist acting as a supportive partner (Rice, 2015). The Narrative Therapy Centre (n.d.) further emphasises its non-pathologising and collaborative nature, acknowledging people's expertise and resources for change. It also considers broader social contexts, including class, race, gender, sexuality, and ability, recognising how these factors shape personal narratives and experiences.

Narrative therapy views problems as separate from the individual, reducing their personal impact. It empowers clients by recognising them as experts in their own lives and supports change through the development of strengths, skills, and values. This non-pathologising approach avoids labels, focusing instead on the broader context of clients' experiences. The process is collaborative, with therapist and client working together to reframe narratives. It also considers social factors such as race, gender, and class. By fostering hope and resilience—especially in times of crisis—narrative therapy helps individuals transform self-defeating stories into empowering ones. Common themes in narrative therapy are summarised in Table 1.1.

*Table 1.1* Common themes in narrative therapy

<i>Key theme</i>	<i>Explanation</i>
Separation of problems	Viewing problems as distinct from the person, reducing their personal impact.
Client as expert	Clients are regarded as experts in their own lives, empowering them to guide change.
Focus on strengths	Emphasises the use of personal skills, competencies, and values to overcome obstacles.
Non-pathologising	Avoids labelling and diagnoses, focusing on understanding the broader context.
Collaborative process	The therapist and client work together to reframe and reconstruct personal narratives.
Contextual awareness	Considers individual context such as race, gender, class, and other life experiences.
Hope and resilience	Cultivates hope and encourages resilience, particularly in times of crisis.
Rewriting narratives	Helps individuals alter self-defeating stories into more empowering and positive ones.

## **Theoretical framework and assumptions**

Narrative therapy is grounded in postmodern social constructionist theory, which emphasises language, social context, and self-determination in shaping human experience. Influenced by postmodernism, it challenges the notion of absolute truth, asserting that reality is subjective and constructed through language, culture, and history. Different people and cultures create different worldviews. Parry and Doan (1994, cited in Morris, 2006) state that narrative therapy assumes “there is no truth, only different interpretations of reality,” with meaning shaped by social, cultural, and political contexts. Narrative therapy holds that people make sense of their lives through stories, which are not fixed but open to re-authoring. Identities are formed and reshaped through these narratives, which are influenced by language and social interaction.

A core principle of narrative therapy is separating the person from the problem. Problems are viewed as external influences rather than inherent traits, allowing individuals to see them as challenges rather than personal flaws. This externalisation reduces shame, guilt, and self-blame. Another key concept is re-authoring one’s life narrative. By examining and deconstructing dominant, often negative, stories, clients can challenge limiting beliefs and highlight overlooked strengths, values, and abilities, fostering purpose, autonomy and self-determination. Language plays a vital role in this process. Beyond communication, it shapes identity and influences how people interpret their experiences. Language becomes a tool for transformation, enabling clients to reframe problems and envision new possibilities. For example, rather than saying “I am anxious” or “I have anxiety,” a client might say, “Anxiety is something I struggle with,” creating psychological distance and a more constructive outlook. Narrative therapy recognises that personal challenges are often shaped by broader social and cultural forces, including power dynamics related to race, class, gender, sexuality, and identity. It considers the wider context in which problems arise, such as environmental, relational, and cultural factors, to deepen understanding.

A key principle is its collaborative nature, where therapist and client work as equal partners. The therapist, acting as a facilitator, supports clients in exploring and reshaping their life stories without imposing interpretations. This client-centred, non-hierarchical approach values the client’s expertise and lived experience. White and Epston (1990) emphasise respecting clients’ views, separating the person from the problem, avoiding blame, and affirming the client’s ability to address challenges. Narrative therapy is strengths-based, focusing on clients’ skills and resources rather than deficits. By highlighting past strengths, it fosters resilience and hope, empowering clients to face current issues. Morgan (2000) describes narrative therapy as a respectful, non-blaming approach that empowers individuals as experts in their own lives. It separates the person from the problem, recognising inherent strengths, values, and abilities to change their relationship with challenges. Emphasising

curiosity and open-ended exploration, the therapy process is collaboratively shaped by the client. Narrative therapy is flexible and empowering. It focuses on personal narratives, challenges dominant cultural discourses, and promotes a collaborative therapist–client relationship. Through externalisation, clients are supported in re-authoring their stories, fostering purpose, self-determination and hope.

### **Narrative therapy – the evidence**

Narrative therapy has proven effective across various conditions and settings, benefiting individuals, families, and communities (Kelley, 2011). Research supports its use for a wide range of psychological and behavioural issues. It has shown positive outcomes in treating major depressive disorder (Vromans & Schweitzer, 2011), improving behaviour in children with ADHD (Looyeh et al., 2012), reducing psychological distress (Cashin et al., 2013), treating childhood social phobia (Looyeh et al., 2014), and managing PTSD (Erbes et al., 2014). It is especially helpful for those affected by adverse childhood experiences, domestic violence, attachment issues, and bullying (Lonne, 2015). Further studies highlight its role in enhancing empathy, decision-making, and social skills in children (Beaudoin et al., 2016); its recognition by the APA (American Psychological Association) as a treatment for PTSD (2017); and its effectiveness in reducing PTSD and depression symptoms (Lely et al., 2019). Narrative therapy has also shown benefits in treating depression and anxiety (Shakeri et al., 2020), improving marital satisfaction (Ghavibazou et al., 2020), restoring life wisdom (Chow & Fung, 2021), strengthening relationships and preventing conflict (Chimpén-López et al., 2021), addressing ADHD (Attention-Deficit/Hyperactivity Disorder) (Fatahi et al., 2021), and enhancing resilience among orphaned and abandoned children (Karibwendea et al., 2022). A recent study also found it significantly reduced loneliness through a phone-based, wisdom-focused intervention (Jiang et al., 2025). The evidence indicates that narrative therapy is a valuable approach for reframing experiences across a wide range of conditions. However, its long-term effectiveness compared to traditional therapies remains debated. Critics argue that its focus on storytelling may oversimplify complex issues by neglecting the interaction of multiple factors.

One concern is its strong foundation in social constructionism, which, while offering important insights, may overlook biological and neurological influences on mental health (NeuroLaunch Editorial Team, 2024). Positioning clients as experts can be challenging for those with cognitive limitations, and reframing alone may not fully address entrenched trauma or negative thought patterns. Cultural differences, lack of confidence, and communication barriers may also limit self-expression. Without a clear therapeutic agenda, the process can become unfocused. Since personal narratives are subjective, clients may unconsciously omit difficult truths or portray experiences more positively

than they were. For those with limited language or emotional expression, narrative therapy may be less effective.

Another limitation lies in evaluating outcomes. Unlike approaches that use standardised measures, the success of narrative therapy is harder to quantify, making scientific assessment more complex (NeuroLaunch Editorial Team, 2024). Further research is needed to identify which mental health conditions narrative therapy treats most effectively. It is also important to explore how this approach works across different cultural groups, especially with Muslim clients. Future studies should examine both the overall effectiveness of narrative therapy and its cultural and religious relevance, particularly how these factors shape the therapeutic process.

## **Techniques used in narrative therapy**

Narrative therapy uses various techniques to empower individuals and reshape their relationship with challenges. It focuses on building a strong therapeutic alliance, deconstructing problem-narratives, and co-authoring alternative stories that reflect the client's values and goals (Vromans & Schweitzer, 2015). This process supports embracing new narratives, promoting growth, self-determination, and transformation. Key techniques include narrative construction, externalisation, deconstruction, identifying unique outcomes, and existential exploration. Together, these methods help clients to re-author their lives and face challenges with resilience and confidence.

## **Telling one's story (putting together your narrative)**

Narrative therapists help clients construct their stories, identifying dominant and problematic narratives in their own words. Storytelling shapes human experience, culture, and worldview, serving as a fundamental way to process information, connect socially, and create meaning (Ricoeur, 1984). It transmits cultural values and norms (Bascom, 1965), fosters moral imagination (Nussbaum, 1997), and holds transformative power for personal and collective change (Angus & McLeod, 2004; White & Epston, 1990). The process of telling one's story – often called “re-authoring” or “re-storying” – involves making sense of experiences and exploring different meanings. Narrative therapy encourages clients to recognise their power to create new meanings, understanding that a single event can be interpreted in many ways based on individual perspectives (Dulwich Centre, n.d.; Vinney, 2019).

## **Externalisation**

After constructing the client's story, the therapist helps create psychological distance from their problems through externalisation. This technique separates

the person from the issue, allowing clients to see problems as external rather than part of their identity. Bennet (2018) highlights that externalising the problem offers a clearer perspective, reducing self-blame and promoting empowerment. This distance helps clients focus on changing harmful behaviours instead of feeling overwhelmed or defined by them. For example, instead of saying, “I am an anxious person,” a client might say, “Anxiety sometimes affects my life.” This shift enables objective reflection and proactive change. Externalisation helps clients realise they are not powerless, fostering empowerment and self-determination by showing they can influence their thoughts, emotions, and behaviours to create meaningful change.

### **Deconstruction**

Deconstruction is a vital phase in narrative therapy that helps clients clarify their stories. When overwhelmed by their narratives, clients work with the therapist to break their story into smaller, clearer parts (Wallis et al., 2011). This process uncovers the roots of their struggles. For example, someone feeling lonely might initially think their partner no longer cares, but deconstruction helps explore deeper causes and alternative explanations. This technique fosters a deeper understanding of underlying issues by examining stressful events or patterns, empowering clients to gain insight and confidence in addressing their challenges.

### **Unique outcomes**

Unique outcomes in narrative therapy highlight exceptions to dominant negative stories, offering openings for new, positive narratives and therapeutic change (Gonçalves et al., 2009). Clients often get stuck in negative patterns, and therapists help them explore alternative interpretations. Since experiences can be seen in many ways, discovering different perspectives builds clients’ confidence to overcome challenges. This process promotes growth, resilience, and a renewed sense of control over their lives.

### **Existentialism**

Existential therapy focuses on exploring what it means to be human, helping clients face life’s challenges with meaning. According to Iacovou & Weixel-Dixon (2015), it clarifies personal values, goals, and relationships. A common method within narrative therapy is phenomenological therapy, defined by Van Deurzen (2015) as a systematic description of conscious awareness that uncovers universal meanings by setting aside assumptions and biases. This approach allows clients to openly explore their perceptions and experiences, helping them find clearer meaning and purpose. Rather than

imposing interpretations, existential therapy supports clients in constructing their own life narratives based on lived experience.

## Conclusions

Narrative therapy, grounded in social constructionism and postmodernism, highlights language's role in shaping identity and meaning. It effectively addresses trauma, low self-esteem, depression, PTSD, anxiety, learning disabilities, eating disorders, and family conflicts. Core techniques include externalising problems, deconstruction, identifying unique outcomes, meaning-making, and challenging unhelpful discourses. These help clients reshape their narratives, promoting positive change and growth. A central principle is externalising problems, separating the individual from their issues to reduce helplessness and self-blame. Research shows that proper use of these techniques enhances effectiveness (Ghavibazou et al., 2020). By shifting focus from blame to meaning, clients find healthier ways to face challenges. Therapists collaborate with clients as experts of their own lives, fostering autonomy and self-discovery. Clients learn to align their lives with their values and aspirations in a supportive, non-judgemental space. Narrative therapy acknowledges cultural, social, and political influences, helping clients reframe experiences, uncover hidden strengths, and build resilience. It moves away from pathology towards empowerment and personal meaning.

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