

The Therapeutic Dimensions of the Soul in Al-Ghazali: A Study of Islamic Psychotherapy

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Özet

Bu makale, Abū Ḥāmid al-Ghazālī'nin düşüncesinde nefsin terapötik boyutlarını incelemekte ve bunun çağdaş İslam psikoterapisi açısından taşıdığı önemi ortaya koymaktadır. Çalışma, esas olarak al-Ghazālī'nin başyapıtı *Ihyā' Ulūm al-Dīn*'e dayanmakta olup, insan psikolojisine dair modelini ve iyileşme mekanizmalarını yeniden inşa etmek amacıyla nitel, metin merkezli ve kavramsal analiz yöntemini kullanmaktadır. al-Ghazālī, insanı nefis, kalp (*qalb*), akıl (*ʿaql*) ve ruh (*rūḥ*) bileşenlerinden oluşan bütüncül bir varlık olarak tasavvur eder; psikolojik bozuklukların ise bu birbirine bağlı unsurlar arasındaki dengesizlikten kaynaklandığını ileri sürer. Modern indirgemeci yaklaşımların zihinsel bozuklukları ruhsal durumlardan ayırmasına karşılık, al-Ghazālī psikolojik hastalıkları, kıskançlık, kibir ve dünyevî arzulara aşırı bağlılık gibi kalp hastalıklarını da içeren ahlâkî ve ruhsal yönelim bozukluğunun bir tezahürü olarak ele alır. Çalışma ayrıca al-Ghazālī'nin, *tazkiyat al-nafs* (nefsin arındırılması), *mujāhadah* (nefis mücadelesi) ve *riyādah* (ruhsal eğitim) merkezli yapılandırılmış bir terapi süreci önerdiğini ve bunun *maʿrifah* (Allah'ı ve nefsi bilme) yoluyla bilişsel yeniden yönelimle desteklendiğini göstermektedir. Bu unsurlar birlikte, ahlâkî arınmayı, bilişsel dönüşümü ve davranışsal düzenlemeyi bütünleştiren bütüncül bir psikoterapi sistemi oluşturmaktadır. Bulgular, al-Ghazālī'nin modelinin bilişsel yeniden yapılandırma ve farkındalık (*mindfulness*) gibi çağdaş terapi

yaklaşımlarının temel unsurlarını öngördüğünü, ancak aynı zamanda belirgin bir teosentrik yönelimi koruduğunu göstermektedir. Bu araştırma, al-Ghazālī'nin terapötik psikolojisinin sistematik bir yeniden inşasını sunarak ve modern psikolojik sorunların ele alınmasındaki sürekliliğini vurgulayarak, İslami temelli bütüncül bir psikoterapi çerçevesinin geliştirilmesine katkı sağlamaktadır.

Anahtar Kelimeler: al-Ghazālī; İslami psikoterapi; nefis; *tazkiyat al-nafs*; ruhsal psikoloji

Abstract

This article examines the therapeutic dimensions of the soul (*nafs*) in the thought of Al-Ghazali and explores its relevance for contemporary Islamic psychotherapy. Grounded primarily in al-Ghazali's magnum opus *Iḥyā' Ulūm al-Dīn*, the study employs a qualitative textual and conceptual analysis to reconstruct his model of the human psyche and its mechanisms of healing. Al-Ghazali conceptualizes the human being as an integrated entity composed of the *nafs*, *qalb*, *ʿaql*, and *rūḥ*, where psychological disturbances arise from imbalances among these interrelated faculties. Unlike modern reductionist approaches that isolate mental disorders from spiritual conditions, al-Ghazali frames psychological illness as a manifestation of moral and spiritual disorientation, including diseases of the heart such as envy, arrogance, and excessive attachment to worldly desires. The study further demonstrates that al-Ghazali proposes a structured therapeutic process centered on *tazkiyat al-nafs* (purification of the soul), *mujāhadah* (self-discipline), and *riyāḍah* (spiritual training), supported by cognitive reorientation through *maʿrifah* (knowledge of God and the self). These elements collectively form a holistic psychotherapeutic system that integrates ethical refinement, cognitive transformation, and behavioral regulation. The findings suggest that al-Ghazali's model anticipates key aspects of contemporary therapeutic approaches, such as cognitive restructuring and mindfulness, while maintaining a distinct theocentric orientation. This research contributes to the development of an Islamically integrated psychotherapy framework by offering a systematic reconstruction of al-Ghazali's therapeutic psychology and highlighting its enduring relevance in addressing modern psychological challenges.

Keywords: Al-Ghazali; Islamic Psychotherapy; Nafs; Tazkiyat al-Nafs; Spiritual Psychology

Introduction

In recent decades, the intersection between psychology and spirituality has gained increasing attention within global academic discourse, particularly in response to the perceived limitations of secular and reductionist models of mental health. Contemporary psychological paradigms—while highly developed in cognitive and behavioral domains—often struggle to account for existential anxiety, moral disorientation, and the search for meaning. This has led scholars to revisit pre-modern intellectual traditions, including Islamic scholarship, in order to recover holistic models of the human psyche. Among the most influential figures in this regard is Al-Ghazali, whose synthesis of theology, philosophy, and Sufism presents a comprehensive framework for understanding the structure, pathology, and therapy of the soul.¹

Al-Ghazali's magnum opus, *Ihyā' 'Ulūm al-Dīn*, occupies a central position in this intellectual tradition, offering not only a moral and spiritual guide but also a sophisticated psychological system. Modern scholarship increasingly recognizes that al-Ghazali's work contains a proto-psychological framework grounded in the concept of *tazkiyat al-nafs* (purification of the soul), which integrates cognitive, emotional, and spiritual dimensions of human experience.² This holistic orientation challenges the dominant dualism in modern psychology, where mind and body are often treated as separate from spiritual concerns.³

From a theoretical perspective, al-Ghazali conceptualizes the human being as a multi-layered entity composed of the *nafs* (soul), *qalb* (heart), *'aql* (intellect), and *rūh* (spirit). These faculties are dynamically interconnected, and their imbalance leads to what he describes as *amrād*

¹ Abū Ḥāmid Muḥammad ibn Muḥammad al-Ghazālī, *Ihyā' 'Ulūm al-Dīn* (Beirut: Dār al-Ma'rifah, n.d.), 3:3–10.

² Malik Badri, *Contemplation: An Islamic Psychospiritual Study* (Herndon: IIIT, 2000), 45–60.

³ Amber Haque, "Psychology from Islamic Perspective: Contributions of Early Muslim Scholars and Challenges to Contemporary Muslim Psychologists," *Journal of Religion and Health* 43, no. 4 (2004): 357–377.

al-qulūb (diseases of the heart), such as envy, arrogance, and excessive attachment to worldly desires.⁴ Importantly, these conditions are not merely moral failings but represent deep psychological disturbances. Contemporary studies highlight that al-Ghazali's classification of the soul into stages—*ammārah*, *lawwāmah*, and *muṭma'innah*—can be interpreted as a developmental model of personality.⁵

In addition to diagnosing psychological disorders, al-Ghazali proposes a structured therapeutic methodology grounded in spiritual discipline. Central to this process is *tazkiyat al-naḥs*, which involves the systematic purification of the soul through practices such as self-examination (*muḥāsabah*), repentance (*tawbah*), and disciplined training (*riyāḍah*).⁶ These practices are not merely ritualistic but function as therapeutic interventions aimed at restoring balance within the psyche.⁷

Moreover, al-Ghazali's approach can be situated within a broader response to what modern scholars describe as “existential emptiness”—a condition marked by anxiety, loss of meaning, and spiritual alienation in contemporary society.⁸ Unlike modern therapeutic systems that often prioritize symptom management, al-Ghazali's model seeks to transform the very structure of the self by reorienting it toward its ultimate metaphysical purpose.⁹

Despite the growing body of literature on Islamic psychology, significant gaps remain. Much of the existing scholarship tends to either generalize al-Ghazali's thought within broader discussions of Sufism or selectively compare it with Western psychological theories without reconstructing its internal coherence as a therapeutic system. There is still a need for a systematic analysis that integrates textual interpretation with

⁴ Al-Ghazālī, *Iḥyā' 'Ulūm al-Dīn*, 3:52–65.

⁵ Abdallah Rothman, “Developing a Model of Islamic Psychology and Psychotherapy,” *Journal of Religion and Health* 57, no. 5 (2018): 1731–1749.

⁶ Al-Ghazālī, *Iḥyā' 'Ulūm al-Dīn*, 3:70–85.

⁷ Syed Muhammad Naquib al-Attas, *The Nature of Man and the Psychology of the Human Soul* (Kuala Lumpur: ISTAC, 1990), 22–35.

⁸ Viktor E. Frankl, *Man's Search for Meaning* (Boston: Beacon Press, 2006), 99–120.

⁹ Al-Ghazālī, *Kīmīyā' al-Sa'ādah* (Beirut: Dār al-Kutub al-'Ilmiyyah, 1989), 15–25.

conceptual reconstruction, particularly in understanding how al-Ghazali's model of the soul functions as a comprehensive framework for psychotherapy.¹⁰

This study, therefore, aims to fill this gap by examining the therapeutic dimensions of the soul in al-Ghazali's thought through a close reading of his key texts, primarily *Iḥyā' 'Ulūm al-Dīn*. It seeks to answer the following questions: (1) How does al-Ghazali conceptualize the structure and pathology of the soul? (2) What therapeutic mechanisms does he propose for its healing? and (3) To what extent can his model contribute to contemporary Islamic psychotherapy? By addressing these questions, this research not only reconstructs al-Ghazali's psychological framework but also highlights its relevance in bridging classical Islamic thought and modern therapeutic discourse.

Methodology

This study employs a qualitative library-based research design to examine the therapeutic dimensions of the soul in the thought of Al-Ghazali. The primary sources consist of al-Ghazali's major works, particularly *Iḥyā' 'Ulūm al-Dīn* and *Kīmīyā' al-Sa'ādah*, which are analyzed to reconstruct his conceptualization of the *nafs* and its therapeutic processes.

The research adopts a textual and conceptual analysis approach. First, a close reading (*taḥlīl naṣṣī*) is conducted to identify key terminologies and themes related to the structure, pathology, and treatment of the soul, such as *nafs*, *qalb*, *tazkiyat al-nafs*, and *riyāḍah*. Second, a thematic analysis is applied to classify al-Ghazali's ideas into coherent categories, including psychological disorders, spiritual diseases, and therapeutic mechanisms.

In addition, the study utilizes a theological-philosophical approach to interpret the metaphysical foundations of al-Ghazali's psychology, particularly the relationship between the soul, intellect, and divine reality. A comparative dimension is also incorporated by relating

¹⁰ Rashid Skinner, "Traditions, Paradigms and Basic Concepts in Islamic Psychology," *Journal of Religion and Health* 58, no. 4 (2019): 1087–1094.

al-Ghazali's framework to selected contemporary psychological theories, especially in the areas of cognitive and spiritual therapy.

To ensure analytical rigor, secondary sources from modern scholarship on Islamic psychology and psychotherapy are used to contextualize and validate the findings. Through this integrated methodology, the study aims to systematically reconstruct al-Ghazali's model of soul therapy and evaluate its relevance for contemporary Islamic psychotherapy.

Discussion

This study demonstrates that the psychospiritual framework developed by Al-Ghazali constitutes a coherent and sophisticated model of therapy that integrates ontology, ethics, and psychology into a unified system. Unlike modern psychological paradigms that often fragment the human experience into cognitive, emotional, and behavioral components, al-Ghazali conceptualizes the human being as an ontologically unified entity whose inner imbalance manifests simultaneously across moral, psychological, and spiritual domains.¹¹ This integrative vision allows his model to address not only the symptoms of psychological distress but also their deeper existential and metaphysical roots.

One of the central findings of this study is that al-Ghazali's notion of the *nafs* functions as both the locus of pathology and the site of transformation. The classification of the soul into *ammārah*, *lawwāmah*, and *muṭma'innah* is not merely descriptive but reflects a dynamic developmental trajectory.¹² In contemporary terms, this may be understood as a model of psychological maturation in which the individual progresses from impulsivity and internal conflict toward self-regulation and inner tranquility. What distinguishes al-Ghazali's framework from modern developmental psychology, however, is its

¹¹ Abū Hāmid Muḥammad al-Ghazālī, *Iḥyā' 'Ulūm al-Dīn* (Beirut: Dār al-Ma'rifaḥ, n.d.), 3:3–10.

¹² *Ibid.*, 3:5–8.

teleological orientation: the ultimate goal of this progression is not merely psychological well-being but proximity to the Divine.¹³

Furthermore, the analysis reveals that al-Ghazali's concept of *amrāḍ al-qulūb* (diseases of the heart) provides a nuanced understanding of psychological disorders that transcends the conventional categories of modern psychiatry. Traits such as envy, arrogance, and excessive attachment are interpreted not simply as moral deficiencies but as structural distortions within the soul.¹⁴ These conditions parallel what contemporary psychology identifies as maladaptive personality traits and cognitive distortions.¹⁵ However, al-Ghazali's framework goes beyond symptom classification by linking these disturbances to a fundamental misalignment between the human self and its ultimate purpose.¹⁶

The therapeutic mechanisms proposed by al-Ghazali further reinforce the holistic nature of his model. Practices such as *tazkiyat al-nafs*, *mujāhadah*, and *riyāḍah* operate on multiple levels of the human psyche. At the behavioral level, they function as techniques of habit formation and self-discipline, comparable to behavioral interventions in modern therapy.¹⁷ At the cognitive level, the emphasis on *ma'rifah* serves to correct distorted beliefs and perceptions, aligning closely with the principles of cognitive restructuring found in contemporary psychotherapy.¹⁸ Yet, at the spiritual level, these practices aim to reorient the individual toward God, thereby addressing what modern psychology often leaves unresolved: the question of ultimate meaning.¹⁹

In this regard, al-Ghazali's model exhibits notable parallels with contemporary therapeutic approaches while maintaining a

¹³ Syed Muhammad Naquib al-Attas, *The Nature of Man and the Psychology of the Human Soul* (Kuala Lumpur: ISTAC, 1990), 25–30.

¹⁴ Al-Ghazālī, *Ihyā' 'Ulūm al-Dīn*, 3:52–65.

¹⁵ Aaron T. Beck, *Cognitive Therapy and the Emotional Disorders* (New York: Penguin, 1979), 45–60.

¹⁶ Al-Ghazālī, *Kīmīyā' al-Sa'ādah* (Beirut: Dār al-Kutub al-'Ilmiyyah, 1989), 18–22.

¹⁷ Al-Ghazālī, *Ihyā'*, 3:70–85.

¹⁸ Judith S. Beck, *Cognitive Behavior Therapy: Basics and Beyond* (New York: Guilford Press, 2011), 102–120.

¹⁹ Malik Badri, *Contemplation: An Islamic Psychospiritual Study* (Herndon: IIIT, 2000), 55–70.

fundamentally distinct orientation. For example, the practice of *muhāsabah* (self-accounting) resembles reflective techniques used in psychotherapy, while *dhikr* (remembrance) and *tafakkur* (contemplation) bear similarities to mindfulness-based interventions.²⁰ However, unlike secular mindfulness, which is typically grounded in present-moment awareness, al-Ghazali’s contemplative practices are explicitly theocentric, aiming to cultivate awareness of the Divine presence.²¹ This distinction highlights the difference between a purely psychological state of awareness and a spiritually grounded consciousness that transforms the individual’s existential orientation.

Another significant insight emerging from this study is the epistemological dimension of al-Ghazali’s therapeutic framework. His emphasis on knowledge (*maʿrifah*) as a central component of healing suggests that psychological disorders are not only emotional or behavioral but also cognitive in nature. Ignorance (*jahl*) and false beliefs distort the individual’s perception of reality, leading to maladaptive responses and inner conflict.²² By restoring correct knowledge—particularly knowledge of God and the self—al-Ghazali’s therapy seeks to realign the individual’s cognitive framework with ontological truth.²³

Moreover, this study highlights the relevance of al-Ghazali’s model in addressing what modern scholars describe as the “crisis of meaning” in contemporary society. In a context where psychological distress is often linked to feelings of emptiness, alienation, and loss of purpose, al-Ghazali’s emphasis on spiritual orientation provides a compelling alternative.²⁴ His framework suggests that true psychological well-being cannot be achieved solely through symptom management or

²⁰ Al-Ghazālī, *Ihyāʾ*, 4:380–400.

²¹ *Ibid.*, 4:410–420.

²² Al-Ghazālī, *Ihyāʾ*, 1:25–30.

²³ Frank Griffel, *Al-Ghazali’s Philosophical Theology* (Oxford: Oxford University Press, 2009), 120–135.

²⁴ Viktor E. Frankl, *Man’s Search for Meaning* (Boston: Beacon Press, 2006), 110–130.

behavioral adjustment, but requires a fundamental reorientation of the self toward its ultimate end.²⁵

At the same time, the findings of this study also point to important challenges in integrating al-Ghazali's model into contemporary psychotherapy. One such challenge lies in the translation of metaphysical concepts into clinically applicable frameworks. Terms such as *nafs*, *qalb*, and *rūḥ* do not have direct equivalents in modern psychology, and their operationalization requires careful conceptual adaptation.²⁶ Additionally, the explicitly religious nature of al-Ghazali's approach may limit its applicability in pluralistic or secular therapeutic contexts. However, this limitation can also be viewed as a strength, particularly in settings where clients seek spiritually integrated forms of counseling.²⁷

In sum, the discussion underscores that al-Ghazali's psychospiritual model offers a rich and multidimensional approach to therapy that addresses the human condition at its deepest levels. By integrating ethical refinement, cognitive transformation, and spiritual realization, his framework transcends the limitations of modern reductionist models and provides a holistic paradigm for understanding and treating the soul.²⁸

Results

This study reveals several significant findings regarding the therapeutic dimensions of the soul in the thought of Al-Ghazali. Through a systematic textual and conceptual analysis of his major works, particularly *Iḥyā' Ulūm al-Dīn*, the results demonstrate that al-Ghazali's framework constitutes a coherent and multi-layered model of psychotherapy grounded in spiritual ontology.

First, the study finds that al-Ghazali conceptualizes the human psyche as an integrated structure composed of the *nafs*, *qalb*, *'aql*, and *rūḥ*, each playing a distinct yet interrelated role. Psychological imbalance

²⁵ Al-Ghazālī, *Kīmīyā' al-Sa'ādah*, 20–25.

²⁶ Abdallah Rothman, "Developing a Model of Islamic Psychology and Psychotherapy," *Journal of Religion and Health* 57, no. 5 (2018): 1735–1740.

²⁷ Amber Haque, "Psychology from Islamic Perspective," *Journal of Religion and Health* 43, no. 4 (2004): 360–365.

²⁸ Rashid Skinner, "Traditions, Paradigms and Basic Concepts in Islamic Psychology," *Journal of Religion and Health* 58, no. 4 (2019): 1088–1092.

arises when the *nafs* dominates the other faculties, leading to moral and emotional disturbances. This confirms that, in al-Ghazali's view, psychological disorders are not isolated mental phenomena but manifestations of a deeper imbalance within the total structure of the self.

Second, the analysis identifies that al-Ghazali classifies the soul into three principal states—*al-nafs al-ammārah*, *al-nafs al-lawwāmah*, and *al-nafs al-muṭma'innah*—which function as stages in a developmental trajectory. These stages reflect a process of inner transformation, moving from impulsivity and moral disorder toward self-regulation and psychological tranquility. This finding indicates that al-Ghazali's model incorporates a dynamic understanding of personality development rather than a static classification of human behavior.

Third, the study finds that al-Ghazali's concept of *amrād al-qulūb* (diseases of the heart) serves as a comprehensive diagnostic framework. Conditions such as envy, arrogance, and excessive attachment are interpreted as both moral and psychological disorders. These findings suggest that al-Ghazali's diagnostic system integrates ethical and psychological dimensions, offering a broader perspective than conventional clinical categorizations.

Fourth, the results show that al-Ghazali proposes a structured therapeutic system centered on three core mechanisms: *tazkiyat al-nafs* (purification of the soul), *mujāhadah* (self-discipline), and *riyāḍah* (spiritual training). These mechanisms operate across behavioral, cognitive, and spiritual levels. Behavioral regulation is achieved through disciplined practice, cognitive transformation through the acquisition of *ma'rifah* (true knowledge), and spiritual healing through the reorientation of the self toward God. This demonstrates that al-Ghazali's model is inherently holistic and multi-dimensional.

Fifth, the study finds that al-Ghazali emphasizes a sequential therapeutic process consisting of self-awareness (*muḥāsabah*), repentance (*tawbah*), disciplined training (*riyāḍah*), and eventual attainment of tranquility (*tuma'nīnah*). This process reflects a structured pathway of healing that integrates introspection, behavioral change, and spiritual realization.

Finally, the results indicate that al-Ghazali's therapeutic framework exhibits notable conceptual parallels with modern psychological approaches, particularly in areas such as cognitive restructuring, emotional regulation, and mindfulness-like practices. However, these similarities are embedded within a fundamentally theocentric paradigm, distinguishing al-Ghazali's model from secular psychotherapy by grounding psychological well-being in spiritual and metaphysical fulfillment.

In sum, the findings confirm that al-Ghazali's conception of the soul provides a comprehensive and systematic model of psychotherapy that integrates diagnosis, developmental theory, and therapeutic intervention within a unified spiritual framework. This model offers significant potential for the development of contemporary Islamic psychotherapy grounded in classical intellectual traditions.

This study has demonstrated that the psychospiritual framework of Al-Ghazali offers a comprehensive and coherent model for understanding and treating the human soul. By analyzing his key works, particularly *Iḥyā' Ulūm al-Dīn*, this research shows that al-Ghazali conceptualizes the human psyche as an integrated system composed of the *nafs*, *qalb*, *'aql*, and *rūḥ*, in which psychological disturbances arise from imbalances among these interrelated faculties.

The findings confirm that al-Ghazali's classification of the soul into *ammārah*, *lawwāmah*, and *muṭma'innah* reflects a dynamic model of inner development, emphasizing transformation rather than static categorization. His concept of *amrāḍ al-qulūb* further illustrates that psychological disorders are not merely emotional or cognitive dysfunctions but deeply rooted moral and spiritual conditions. In this regard, al-Ghazali expands the scope of psychological analysis by integrating ethical and metaphysical dimensions into the understanding of mental health.

Moreover, this study highlights that al-Ghazali proposes a structured therapeutic system centered on *tazkiyat al-nafs*, *mujāhadah*, and *riyāḍah*, supported by cognitive reorientation through *ma'rifah*. These therapeutic mechanisms operate simultaneously at behavioral, cognitive, and spiritual levels, forming a holistic model of healing that addresses both symptoms and underlying causes. The process of therapy, as outlined by al-Ghazali, progresses

through stages of self-awareness, repentance, disciplined practice, and eventual attainment of inner tranquility (*tuma'nīnah*).

Importantly, while al-Ghazali's framework exhibits conceptual parallels with modern psychotherapeutic approaches—such as cognitive restructuring and mindfulness—it remains fundamentally distinct due to its theocentric orientation. Psychological well-being, in his view, is inseparable from spiritual realization and alignment with the ultimate purpose of human existence.

In conclusion, this study affirms that al-Ghazali's model of the soul provides not only a rich theoretical foundation but also a practical framework for contemporary Islamic psychotherapy. By bridging classical Islamic thought and modern psychological discourse, his approach offers a holistic and meaningful paradigm for addressing the complexities of human psychological experience in both traditional and contemporary contexts.

Conclusion

This study has demonstrated that the psychospiritual framework of Al-Ghazali offers a comprehensive and coherent model for understanding and treating the human soul. By analyzing his key works, particularly *Iḥyā' Ulūm al-Dīn*, this research shows that al-Ghazali conceptualizes the human psyche as an integrated system composed of the *nafs*, *qalb*, *'aql*, and *rūh*, in which psychological disturbances arise from imbalances among these interrelated faculties.

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From the above discussion, it can be concluded that Ibn Sīnā's ethical philosophy is not far different from that expounded by classical philosophers such as Socrates, Plato, and Aristotle, namely the ethical philosophy of eudaimonism, a philosophy centered on the discussion of happiness. However, it is developed with Islamic influences. Akmaluddin An-Nakhjuwānī, in his commentary on Ibn Sīnā's work, emphasizes Islamic thinking even more by incorporating numerous textual references focused on the issue of happiness. To answer the question of why this ethical discussion revolves around the issue of happiness, it is because happiness is central to both classical philosophy and Islam. This is because every human being, on a personal and communal level, aims for happiness. Therefore, to attain happiness, in accordance with the level of achievement, individuals must think deeply to determine what is good, valuable, and beneficial. The eudaimonistic ethical philosophy begins this journey with self-purification, as discussed by Akmaluddin An-Nakhjuwānī in the first part of the ethics section in the manuscript of his commentary. Therefore, this study only covers the conceptual aspects of

ethics in the manuscript. The second part, which consists of two additional chapters discussing the stages of those who have reached high levels of happiness and the signs of those who have attained the highest level, has not been addressed at all. These untouched sections await further research by subsequent scholars to uncover their contents.

Bibliography

- Al-Attas, Syed Muhammad Naquib. *The Nature of Man and the Psychology of the Human Soul*. Kuala Lumpur: ISTAC, 1990.
- Al-Ghazālī, Abū Ḥāmid Muḥammad ibn Muḥammad. *Iḥyā' 'Ulūm al-Dīn*. Beirut: Dār al-Ma'rifah, n.d.
- . *Kīmīyā' al-Sa'ādah*. Beirut: Dār al-Kutub al-'Ilmiyyah, 1989.
- Badri, Malik. *Contemplation: An Islamic Psychospiritual Study*. Herndon: International Institute of Islamic Thought (IIIT), 2000.
- Beck, Aaron T. *Cognitive Therapy and the Emotional Disorders*. New York: Penguin Books, 1979.
- Beck, Judith S. *Cognitive Behavior Therapy: Basics and Beyond*. New York: Guilford Press, 2011.
- Frankl, Viktor E. *Man's Search for Meaning*. Boston: Beacon Press, 2006.
- Griffel, Frank. *Al-Ghazali's Philosophical Theology*. Oxford: Oxford University Press, 2009.
- Haque, Amber. "Psychology from Islamic Perspective: Contributions of Early Muslim Scholars and Challenges to Contemporary Muslim Psychologists." *Journal of Religion and Health* 43, no. 4 (2004): 357–377.
- Rothman, Abdallah. "Developing a Model of Islamic Psychology and Psychotherapy." *Journal of Religion and Health* 57, no. 5 (2018): 1731–1749.
- Skinner, Rashid. "Traditions, Paradigms and Basic Concepts in Islamic Psychology." *Journal of Religion and Health* 58, no. 4 (2019): 1087–1094.