

**Religious Cognitive Behavioral Therapy**  
(Muslim Version)

**10-Session Treatment Manual for Depression in  
Clients with Chronic Physical Illness**

**Joseph W. Ciarrocchi, Ph.D.**  
**Debbie Schechter**  
**Michelle J. Pearce, Ph.D.**  
**Harold G. Koenig, M.D.**  
**Sasan Vasegh, M.D.**

With contributions by Rebecca Propst, Ph.D.

**Muslim version developed by Sasan Vasegh, M.D.**

This workbook is a variant of the treatment protocol  
originally designed by A. T. Beck, M.D.

2014

\*Please cite appropriately\*

Contact Information:

Sasan Vasegh, M.D.  
Psychiatry Department  
Shahid Beheshti University of Medical Sciences  
Tehran, Iran (Islamic Republic of)  
Tel: 0098-912-3751790  
sasan\_vasegh@yahoo.com

## **TABLE OF CONTENTS**

### **PART I**

**Therapist Training Overview**

### **PART II**

**Session 1 – Assessment and Introduction to RCBT**

**Session 2 – Behavioral Activation: Walking by Faith**

**Session 3 – Identifying Unhelpful Thoughts: The Battlefield of the Mind**

**Session 4 – Challenging Unhelpful Thoughts: Bringing All Thoughts Captive**

**Session 5 – Dealing with Loss**

**Session 6 – Coping with Spiritual Struggles and Negative Emotions**

**Session 7 – Gratitude**

**Session 8 – Altruism and Generosity**

**Session 9 – Stress-Related and Spiritual Growth**

**Session 10 – Hope and Relapse Prevention**

## **PART I: THERAPIST TRAINING**

### **Session Length and Time**

Each session is 50 minutes long. You may find that you run 5-10 minutes longer on the first session depending on how long it takes to gather the assessment information. I have indicated how long you should spend on each section in the session. If you stay within these guidelines your session should be 50 minutes long. That said, there is a lot of information in the manual and at times, depending on what the client brings to the session, you may find that you are unable to cover all of the material in the allotted time for the session. You can add a few minutes to the session, if necessary, and if you have time. But please to not add more than 10 minutes. The material that is not covered in one session should be covered after the homework review in the following session.

### **Session Format**

Each session follows the same format:

1. Goals of session
2. To do before the session begins
3. Materials needed in client workbook
4. Set the agenda
5. Review of Home Practice Activities
6. Introduction to topic(s) for that session
7. Exercises to be completed in session
8. Home Practice Activities
9. Terminate session

### **Scheduling Sessions**

It will be easiest for the client if you are able to choose the same meeting time each week. Please emphasize in the first session (and throughout treatment, if necessary) how important it is that the client complete all ten sessions. Discuss with the client how he can contact you should he be unable to make one of the sessions. If this happens, please reschedule the session as soon as possible.

### **Client Information**

You can decide on the best way to keep track of the information you collect from your clients as you progress through treatment. It will be helpful for you to have detailed notes for each session that you can refer back to in later sessions. This is what the Therapist Workbook for each client is for. This way you can track exactly what the client is following and completing. Suggest a separate Therapist Workbook for each client.

### **Differences from CBT intervention**

As early as possible in treatment, the goal is to socialize clients into the treatment model in order to facilitate communication between counselor and client. In general, socialization is a dance between conventional cognitive behavior therapy (CBT) and religiously integrative cognitive behavior therapy (RCBT). The framing of each aspect of treatment reinforces both traditional CBT and religiously integrative CBT. To use a metaphor to capture what is intended, think of a two-dimensional drawing of a square placed into a three-dimensional cube. Everything within the square is contained in the cube, yet the cube contains so much more. In the same way conventional CBT is like the square that fits into religiously integrative CBT. When a client discusses symptoms and reactions to symptoms, counselors will want to frame this material in terms of traditional CBT models. Counselors also listen with a "third ear" for how this material can also be framed within a religiously integrative CBT model. Many examples will be given throughout the manual, the worksheets, and training.

### **Workbook/Home Practice Activities**

Your clients should be given a copy of the Participant Workbook that has been written to complement this manual. Please familiarize yourself with the Therapist Workbook, which is an almost identical copy of the Participant Workbook. For each of the ten sessions, there is a home practice activities instruction page. This is the same as the Home Practice Activities section in your manual. You will review the assignments with your client at the end of each session. Have them follow along in their workbook as you review the assignments for that week. The pages that follow the instruction sheet in the Workbook will be completed by the client during the week. For example, in the earlier sessions, clients will complete a daily thought log. Sometimes you will complete a worksheet, or part of a worksheet, with your client in session. This will be clearly indicated in the manual.

The home practice activities are critical for the effectiveness of the treatment. (Note: we are calling them home practice activities because that is a more inviting term to clients than is homework, although in the manual the word 'homework' may be used. Please try to refer to this as home practice activities when you are speaking with your client). It is very important that clients understand from day one that they are expected to complete the Home Practice Activities. The more they put into treatment, the more they will get out of it. At the same time, we need to remember that we are working with a depressed population who will also be limited in some degree by their medical illness. Therefore, when clients do not complete their homework, praise them for what they did do (e.g., think about the assignment) so that they do not become discouraged. Focus the conversation on what barriers they faced and problem solve with them so that they will be more likely to complete the homework that week. It is much better for you to take responsibility for the incomplete assignment (i.e., not explaining it well enough or helping the client to anticipate barriers) rather than to let the client feel discouraged about their inability to do yet another thing in their life. We don't want them to feel like they failed!

It is also very important that clients have their completed home practice activities with them when they meet with you (i.e., they need their workbook with them during each session, as do you). Be sure to emphasize this point at the end of each session. You will need to indicate on the Therapist Completion Form after every session the extent to which the client completed their home practice activities.

### **Adherence to the Manual**

For research purposes, it is important that you closely adhere to the manual throughout treatment. Sessions will vary between clients based on the specific problems, beliefs, and behaviors of the individual clients. However, the information you teach, the order in which you teach it, and the way in which you teach it should be similar across clients.

Suggested counselor dialogue in the Manual is provided in *italics* throughout. Counselors do not have to use the exact wording given; however, it is important that the same information is conveyed to the client. The manual specifically includes much of the counselor dialogue so as to make the delivery of treatment as easy and efficient as possible for the counselors. If you are using the telephone, you can read the dialogue (without sounding like you are reading!). If you are using Skype, you can have the manual with you and refer to it frequently as you deliver the treatment.

### **Handling a crisis**

Patients should be given emergency contact numbers before they begin treatment. If an emergency situation arises, you should take the necessary measures to stabilize the patient and to ensure the safety of those in danger.

### **Training**

All therapists should receive initial baseline training. We are hoping to develop an online training program for this purpose.

### **Notes on Muslim Version**

As Islam is the second most prevalent religion in the world and the third most prevalent religion in the United States, a group of the clients will describe themselves as being of various kinds of Islamic spiritual/religious tradition.

From an Islamic point of view, religiously integrative CBT means counselors facilitate clients' *transformation of mind*, which means increasing their faith in God and in the "last day" in a way that leads to more good deeds and hope and less anxiety and sadness. The following verse from Koran illustrates this concept: "...Whoever believes in Allah and the last day and does good-- they shall have no fear nor shall they sorrow" (5(Maedah):69).

For example, consider worthlessness thoughts which are common among depressed patients. In the Islamic framework, people's worth is mostly contained in terms of how righteous they are (Holy Koran 49(Hujuraat):13. But in Islam, apart from what people actually do, their *intentions* have a critical role in qualifying an act. It means that God praises people if they are believers and have good intentions and wish to do good, even if they *cannot* do it. Such Islamic concepts can be used in the therapeutic sessions to strengthen depressed patients' self-worth. Here as in many other cases counselors can point out to clients how their cultural or other assumptions (not their Islamic faith views) drive their automatic thoughts; and buying into those assumptions is often the source of much distress. Therapists and counselors can help Muslim clients to pay more attention to their original Islamic beliefs to decrease their distress and to improve their condition.

Because many psychotherapists using this manual may not be Muslims themselves and may live in western countries where Muslims are minorities, their own feelings, thoughts and beliefs regarding Muslims may interfere with their therapeutic relationships with Muslim patients and may have negative impact on the therapeutic outcome. Therefore, it is recommended that all non-Muslim counselors encountering Muslim clients make themselves more familiar with the Islamic belief system and culture of their Muslim patients. They can use original or trusted resources (and, of course, the clients themselves).<sup>1,2</sup>

Arabic to English quotes from the Holy Koran used in this manual were obtained from ParsQur'an website: <http://www.parsquran.com/eng/index.html>. Minor changes in wording of some quotes were made by psychiatrist Sasan Vasegh, M.D. for easier reading.

---

<sup>1</sup> Vasegh, S. (2009). Psychiatric treatments involving religion: Psychotherapy from an Islamic perspective. In P. Huguelet & H. G. Koenig (Eds.), *Religion and Spirituality in Psychiatry* (pp. 301-316). New York: Cambridge University Press.

<sup>2</sup> Vasegh, S. (2011). Cognitive Therapy of Religious Depressed Patients: Common Concepts between Christianity and Islam. *Journal of Cognitive Psychotherapy* 25(3), 177-188

<sup>3</sup> About 85% of Muslims are Sunnis and 15% are Shias. Imam Ali ibn al-Hussain (PBUH) (Ali the son of Hussain) is the 4<sup>th</sup> of the 12 Shia Muslim Imams (sacred leaders) and is the son of Imam Hussain the 3<sup>rd</sup> Shia Imam. Imam Hussain is the grand son of Prophet Muhammad. Ali ibn al-Hussain is more often called by one of his epithets such as Imam Sajjad (the one who prostrates very much) or Zein al-Abedin (the ornament of the worshippers). Sahifah Sajjadiyah (the supplications of Imam Sajjad) is famous among Shia Muslims and consists of many beautiful supplications. The above prayer is quoted from one of his prayers in the Sahifah called "His Supplication on Nobel Moral Traits and Acts Pleasing to God". All of the Sahifah is available from: <http://www.al-islam.org/sahifa/> Sunni Muslims, too, usually respect Imam Sajjad, but they do not refer to him as Imam and do not use the phrase "Peace Be Upon Him" (PBUH) after his name. So the Psychotherapist should first ask the Sunni patient like: "There are many beautiful prayers in Islam, and I have chosen one of them as our termination prayer to pray together. This supplication is from Ali the son of Hussein the grandson of the Prophet Muhammad (PBUH) who is respected by most Sunni and Shia Muslims. Do you mind if we say it together?" And then if agreed, say the prayer.

## **Part II: Individual Sessions RCBT Manual**

### **SESSION 1: Assessment and Introduction to RCBT**

#### **Goals of Session:**

There is a lot packed into this session. You will likely need 60 minutes instead of 50 minutes. You need to allow time for subject to respond; this is critical, even if time runs out and session goes over 60 min. Be careful that this session does not turn into a lecture by the therapist.

- 1) To introduce clients to the basic format of the program
- 2) To begin to establish rapport by allowing the client to discuss his/her basic problem, life circumstances and religious beliefs with the therapist
- 3) To present the basic rationale for the treatment
- 4) To teach clients how to monitor their activities and mood.

#### **Notes:**

- Suggested counselor dialogue is highlighted in yellow.
- Some of the material in the Manual is repeated in the Workbook. We have highlighted in blue some of this overlap. Note that there may be other sections that are the same in both, including the Home Practice Activities that are not highlighted.
- Suggested counselor dialogue in this Manual will be provided in *italics* throughout. Counselors can adapt according to their own needs.
- Use the Therapist Workbook to keep track of your client's responses and comments for each of the ten sessions. It will be helpful for you to have detailed notes for each session that you can refer back to in later sessions. It is essential to keep therapist workbook for each client in a locked cabinet.
- The use of he/his and she/her are alternated throughout the Manual.

#### **Materials Needed in Client Workbook**

- Homework Assignment Worksheet
- Thinking and Depression Overview
- Activity and Mood Monitor

## **Rapport Building and Introduction of Basic Format (10 mins)**

1. Counselors introduce themselves and invite the client to do the same.

*Before we get into the program itself, I want to take some time for us to get to know each other briefly. I will start by saying a few things about myself.*

Introduce yourself and provide the client with your professional credentials and perhaps share where you received your training. Also state if you are not coming from a Muslim belief system:

*Although I am not a Muslim, I believe that Islamic faith can help one to deal with one's problems. With the help of Muslim therapists in our group, I will help you make use of your faith in these sessions to deal with your problems as it seems appropriate and you feel comfortable with it. Because I am not a Muslim, I will certainly need your help in this regard, so please feel free to notify me every time you feel I am inaccurate about your Islamic beliefs or practices.*

2. Counselors review with client the purpose of the study, its intentions, and its goals.

*As you know, this treatment is designed to help people who are suffering from depression and who are also dealing with a medical illness or disability. Having a medical illness or disability is challenging and can be very stressful. We also know that your challenges go far beyond just your physical body. Many people facing a medical illness notice changes in their mood, thoughts, and relationships. Some question their identity and the meaning and purpose of their illness. Many struggle with issues related to their faith and relationship with God.*

3. Reassure clients again that we will do everything possible to ensure that all information will be confidential and will only be seen by the therapist. Ask for questions.

4. Counselors inquire about the client's expectations and hopes regarding the treatment.

5. Counselors invite clients to ask any questions they have about treatment, and clarify any misunderstandings that may have cropped up when asking about client expectations.

6. The completion of \*all\* ten sessions is very important. Clients should be informed that each of the ten sessions offers different information. They should also be told that while the treatment is effective for depression it can only help them if they make an active commitment to participate fully in therapy. Emphasize that this is a partnership. If they cannot make a session, they should contact you, the therapist, as soon as they know that they will not be able to make the session and schedule an alternative time for that session.

### **Introduce Mood Rating Scale (2 mins)**

\*\*This should be BRIEF each week. Only allot 2-3 minutes at the most each week for this check in.

*Each week we will ask you before we begin to rate what your mood was during the week. Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

\*Note: At times you may then ask what made their week negative or positive. This is not necessary this week because you will be assessing the reasons for their participation in treatment in a few minutes

### **Initial Assessment Questions in Spiritual/Religious Domains (10 mins)**

The questions below (partially taken from Ciarrocchi, 2002) provide one way to explore clients' spiritual and religious experience. They should be used flexibly and do not necessarily have to be asked in this order, although there is a certain logic in the way they are currently arranged. Regardless of where you are personally coming from, be very accepting of the client's expression of their faith.

1. *What role, would you say, spirituality or religion plays in your life?*

2. *Do you attend religious services? How frequently?*

3. *How often do you do the 5 daily Islamic prayers (salah)? Do you pray in addition to the 5 prayers? How often?*

4. *Do you enjoy reading religious or spiritual literature, such as the Koran?*

5. *What effect, if any, does . . . [the issue that brings the person into treatment] have on your spirituality?*

The reason for gathering this information is to obtain a solid understanding of the clients' faith tradition, religious beliefs, language and sacred symbols used to express their faith, so that this can be integrated into therapy in a client-centered way. Of critical importance is that therapists begin where clients are in terms of their spirituality, utilizing whatever spiritual resources clients may have. Therapists should avoid arguing with patients about spiritual or religious matters, and instead go with wherever patients feels comfortable with (at least to start), while gently introducing more explicitly religious material to them over time as they are able to receive it.

### Assessment of Problems (5 mins)

After the initial introductions, ask the client what problems led them to decide to participate in the current treatment program. It will be helpful for you to have already read through the client's assessment materials so that you are somewhat familiar with the reason he is seeking treatment and his medical issue(s). Ask the client to state the three to four reasons they are seeing treatment. Or, ask them to say in a sentence or two why they are seeking treatment. These prompts will help to keep this section brief. Paraphrase back to the client to make sure that you understand him. Do not spend more than 5 minutes on this assessment.

Try to empathize at least once with each problem that is presented. For example, "*It sounds like you are feeling \_\_\_\_\_ ?*"

To gain rapport with the client, summarize through reflective listening the major struggles you have heard and any personal or environmental strengths/resources you have noticed.

It is also not too early to ask the client to identify which aspects of their emotional distress and environmental problems they might like to work on during the treatment:

*Of all the different things you've mentioned, which ones stand out for you as creating the most difficulty, and which you want to work on together during the sessions?*

### Presentation of Rationale for Treatment (8 mins)

As early as possible in treatment, the goal is to socialize clients into the treatment model in order to facilitate communication between counselor and client. In general, socialization is a dance between conventional cognitive behavior therapy (CBT) and religiously integrative cognitive behavior therapy (RCBT). The framing of each aspect of treatment reinforces both traditional CBT and religiously integrative CBT. To use a metaphor to capture what is intended, think of a two-dimensional drawing of a square placed into a three-dimensional cube. Everything within the square is contained in the cube, yet the cube contains so much more. In the same way conventional CBT is like the square that fits into religiously integrative CBT. When a client discusses symptoms and reactions to symptoms, counselors will want to frame this material in terms of traditional CBT models. Counselors also listen with a "third ear" for how this material can also be framed within a religiously integrative CBT model. Many examples will be given throughout the manual, the worksheets, and training.

## CBT Model Overview

*Our goal is to provide the most up-to-date treatment available to help you with your difficulties with depression and your medical condition. Recent research has identified a number of treatments that are called "evidence-based". This means that a sufficient amount of research has determined that a specific treatment is effective in reducing certain symptoms. We have selected one of the most well researched evidence-based treatments for depression known as cognitive behavior therapy (or CBT). This treatment is based on the idea that emotional distress is in many ways associated with how we view a situation, and that we can obtain emotional relief by changing our views about the events in our life.*

The most effective way of employing the model is to use material the client has given you from this early assessment. Ideally, pick some emotional reaction that appears connected to how the client is viewing the situation. Potentially good examples include getting angry at those who do not anticipate their needs, getting depressed because they imagine people are viewing them in certain negative ways, giving up on activities because they don't believe they have sufficient support or the proper skills, etc. The idea here is not to prove anything to the client, but simply show how things tend to go together. Never argue with the client. Remember the adage, "Win an argument and lose a client".

If you do not get any material from the client you can share a commonly used example:

*Let me share an example from the workbook that can help illustrate my point. Please feel free to follow along with me. It says: "Imagine that you have a flat tire on a deserted highway and do not have anything to change the tire with, including a car jack. As you are standing there stranded, your next-door neighbor drives by and looks up briefly but keeps going. How would you feel about the fact that your neighbor kept driving? What would you most likely be telling yourself about the situation?"*

*Now let's imagine, further, that you see your neighbor the next day and he comes over to you and apologizes for driving by you. "I'm so sorry I couldn't stop; my son fell and was bleeding from his head and I was rushing him to the emergency room." How might you be feeling now? What changed? What are you now telling yourself about the situation that is different from when you were standing on the road?"*

NOTE: When sharing material from the workbook, it is helpful to find out whether the patient has already read the material. If the sections have already been read, the therapist or patient can summarize and discuss the illustration. If the section hasn't been read, a helpful alternative may be to ask the patient to read the section and share reflections.

Having some discussion around this idea will get across what you will be looking for in treatment. (You can have the patient turn to page 2 in the Workbook: "Thinking and Depression" for a description and pictorial model),

*The main point is how we view a situation and interpret it often drives how we end up feeling and what we do. Research has shown that the perceptions and interpretations of depressed individuals are usually not accurate. They have a greater tendency to jump to conclusions and see only the negative side of an issue. The way you look at a situation in turn will influence your behaviors, and thus a vicious cycle is set up. Together you and I will attempt to identify the ways of looking at situations that make negative emotions worse, with the idea of changing the situation or the way it is being interpreted.*

Again at this point it is important to pause so as to ascertain the extent to which the client has understood and agrees with these points. At this point, complete agreement with this framework by the client is not necessary. However, this process should have been initiated. Ask for questions.

Also underline the fact that these points will be emphasized again and again in the remaining therapy sessions. In addition, an explanation and diagram of this model is provided for clients in their workbook. You can tell clients about this resource and have them read it on their own this week. In other words, if this session feels like a lot of information at once, it is! As such, a summary of this information in the session is provided in the workbook so that they can refer back to it during the week.

### **Religiously Integrative CBT Model Overview. (10 mins)**

Extend and emphasize the rationale by giving a theological basis for it. If the client asks about the specifics of your own faith, you can return the focus to the client by reminding her that the purpose of the treatment is to integrate her faith into treatment. As such, you will want to learn about what she believes and practices, as this is what is important for the success of treatment and helping her to feel better. The following can be included. Please use prompts and questions about clarity of the material to break up lengthy therapist dialogue as you see fit, both here and throughout the entire manual.

*What is innovative about this treatment is that we want to use as many of the important resources available to people to combat their depression and to make their lives more effective. As we discussed earlier, one of the most overlooked resources people have is their religious faith.*

Call attention, as appropriate, to your referencing of the following workbook material:

*The idea that our **thoughts and beliefs** and our **behaviors** play an important role in influencing our emotions is a very common idea in Koran and Islamic scriptures. Indeed, for Muslims the cognitive behavior model is more than 1400 years old! Let me give you some examples from the Koran:*

*Many verses in Koran imply that belief in God (our good thoughts and beliefs) and doing good (our good behaviors) can deeply affect our emotions and can eliminate most of human's fears and sorrows. For example, "whoever believes and acts aright, they shall have no fear, nor shall they grieve" (6(Anaam):48); and "verily those who say, 'our lord is Allah,' and remain firm (on that path), they shall have no fear nor shall they grieve"*

*(46(Ahqaf):13). And there are many other verses like this in the Koran. What do you think? Do you think that Islamic beliefs and righteous behaviors can influence our emotions or lessen our sufferings, sorrow and anxiety?*

*At the beginning of Islam, Prophet Muhammad (PBUH) and his companions were facing lots of distresses and difficulties, and again, it was verses from the Koran and their belief in Allah, the prophet, and the afterlife that brought them comfort and strengthened their will power because: "Surely in the remembrance of Allah do hearts find rest!" (13(Raad):28).*

*Actually, the Holy Koran says, "Surely Allah does not change the condition of a people until they change their own condition" (13(Raad):11). What is your opinion? Do you think if we can change ourselves God may change our conditions? Do you think changing our thoughts or beliefs may play a role? How?*

*We'll work on more examples from the Holy Koran as we go through this treatment together.*

### Introduction to role of behavior to change mood

*One of the ways we can change our thinking is by changing what we are doing. Some activities or behaviors give us a sense of reward, satisfaction, or pleasure. These positive activities produce positive or good moods. For example, if you talk to a friend or do a job well, you will feel good. However, if you fail at something or get a parking ticket, you will tend to feel in a bad mood. Therefore, in this treatment we will focus not only upon changing our thoughts and perspectives but also upon changing some of our behaviors and activities so that we will feel better about that aspect of our lives as well.*

### **Introduce Concept of Renewing Your Mind (5 mins)**

\*It is very important that you spend adequate time on this section and provide a thorough explanation for why memory verses will be given each week. This section provides the "buy-in" for the client for this critical part of treatment.

*One of the ways we will begin to change our thoughts and perspectives is by replacing negative and unhelpful thoughts with the Words of God. You know how much attention is given in Islam to reading or memorizing the Holy Koran. One reason is that as we meditate on scripture, God's words become alive in us and change us from the inside out. Think about what happens when you plant a seed. The kind of crop you grow depends on the kind of seed you put in the ground. If you plant a tomato seed, don't expect to grow cucumbers! The same is true for the "seeds" you plant in your heart. If you plant positive seeds of truth in your heart, God's words and promises, you will begin to think in the way that God thinks and will reap the good things He says about your life.*

[elicit feedback from client]

*Each week I will give you a verse that is relevant to the topic we are studying. Part of your homework assignment each week will be to memorize this verse. You don't have to memorize the Arabic verse, but can choose to memorize the English translation. The more of God's Word you have hidden in your heart, the easier it will be to challenge and change your negative thinking, a skill we will learn in a few weeks. At the beginning of next session, I will ask you to say the memory verse to me, as a way to review what we learned in our previous session. I'll also teach you an effective way of meditating on these verses, called contemplative prayer, that will help you remember and apply God's way of thinking in your life. Do you have any questions about this part of the treatment?*

### **Homework Assignments (10 mins)**

*Please open your Workbook to Session 1, page 1.*

*We are just about out of time for today. I only have you for 50-60 minutes each week. Therefore, most of the change you will experience in your life will occur outside of these sessions. This treatment will only be effective if you are spending the week putting what you learned in your session into practice. The more you put into this treatment over the next ten weeks, the more you will get out of it! What's your opinion? [elicit feedback]. The last thing we will do in each session is go over your homework assignments, which are found in your workbook. Each session after this one will begin by reviewing your homework assignments. It's very important that you complete all of your assignments, and thank you for trying to do that, but if you couldn't complete any part of them try not to blame yourself. We will discuss the problem in the following session. Now, we review together your home assignments for the coming week.*

#### 1. Memory Verse

*This week your memory verse from the Holy Koran is the following:*

***“Allah sets forth a parable that a goodly word is like a goodly tree, whose root is firmly fixed, and its branches are in the heaven, giving its fruit at all times by permission of its lord.” (14 (Ibrahim): 24,25)***

*These verses imply that good beliefs (which can be implied by good words) can have plenty of fruitful results at any time.*

*Please write the verses down and post it somewhere you will see it often, perhaps on a sticky note placed on your mirror or fridge. You may want to make several copies and post them in places you will see it throughout the day.*

Make sure clients understand why they are being given this assignment and the importance of taking the time to commit the verse to memory.

## 2. Activity and Mood Monitor

Explain to the client that part of the active nature of the treatment is to try out different approaches between sessions to see what works best.

The goal of the first session's homework assignment is begin developing skills in self-monitoring negative emotions. The goal at this stage is not to change any regular habits. Rather, clients are merely to complete the self-monitoring log as follows:

*The second part of your first homework assignment will be to record your daily activities and mood. Please turn to page 4 in your Workbook. The self-monitoring logs in your workbook have a place to record your activities and mood every two hours. Please complete this log daily. It may be easiest to fill out the activity log twice during the day. For example, you could record all of your morning activities when you eat lunch and all of your afternoon and evening activities just before you go to bed. I would like you to do this until our next appointment.*

*This record will give us some information as to which activities may lead to better moods and which activities may lead to worsened moods. I will show you how to do it by helping you fill in the spaces for the present time period. For example, right now the time is \_\_\_\_\_. What types of activities have you been doing the last two hours, especially the last half hour or so? \_\_\_\_\_ Finally, what is your mood right now? \_\_\_\_\_ Generally, you should record your mood and activity as they exist at the end of the time period.*

[Or, you can guide the client fill in her activities and mood so far that day, rather than just the last two hours.]

The following principles should be communicated to the client regarding self-monitoring. These instructions are included in the client's workbook.

[Ask the client to turn to the first page of her workbook and have her follow along with you as you review these principles.]

a. *Keep the self-monitoring log with you throughout the day and record your activities as close as possible to the end of the time periods.*

b. *Record the activity in a very few words. For example, you could record "went out to dinner" or "washed my clothes" or "read a book" or even "watched TV."*

c. *Immediately after recording your activities, record your mood.*

d. *Purchase a notebook to put the logs in, so that you will have a record of your activities. We will make use of them later.*

e. *Make sure you have your logs with you during each session. They are necessary for the rest of the program*

f. *Be sure and include even trivial events on your chart, such as missed the bus or read the newspaper.*

Solicit feedback on how the session went today.

Solicit feedback on the home practices given.

Does the patient disagree with or have negative feelings toward any of them? If so, briefly discuss with the patient the alternative ways and the underlying thoughts or beliefs. Ask the patient not to criticize himself if he could not do some of the homework because this may intensify his negative feelings.

### **Terminate the Session**

1. End the session by **making sure you are both clear on your next meeting time**, as well as the homework assignments.
2. Be sure that the client understands that he needs to **have his completed homework assignment worksheets readily accessible next week** so you can review them together.
3. Thank the client again for the courage he has demonstrated through his willingness to work on these difficult issues.

## SESSION 2: Behavioral Activation: Walking by Faith

### Goals of Session:

- 1) To reinforce the client's basic understanding of the treatment rationale;
- 2) To further refine the client's ability to self-monitor mood and activities;
- 3) To contract with the client to add more positive activities to their daily schedule.

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- Pleasant Activities to Consider
- Planning Pleasant Activities Instructions
- Planning Pleasant Activities Worksheet
- Unhelpful Thinking Styles and Theological Reflections

### Set the Agenda

*Our session today is called “Behavioral Activation: Walking by Faith.” We will be examining how our behavior directly impacts our mood and ways we can engage in more positive behaviors to improve our moods. At the end, I will give you a homework assignment based on what we sent over today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your mood this week and homework assignments.*

### Complete Mood Rating Scale (2 mins)

- a. *Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

To keep this section brief, you may find it best to only ask what the client's mood was like on average, but not why. You can then cover the 'why' aspect as you review the thought logs.

- b. Indicate that today you will be discussing alternative ways of coping that may be more effective.

### Review of Home Practices Activities (10 mins)

It is important to begin each session with a review of the previous week's homework assignments, as this reinforces their efforts and feeds their motivation to complete future assignments. It also represents an ongoing socialization of the CBT model.

1. Memory Verse Review:

Ask the client to say last week's verse to you from memory. If they can't remember the

verse, have her read it out loud from her Workbook (follow this protocol each week). Ask the client to tell you how this verse ties in with the topic of the first session last week.

***“Allah sets forth a parable that a goodly word is like a goodly tree, whose root is firmly fixed, and its branches are in the heavens, giving its fruit at all times by permission of its lord.” (14 (Ibrahim): 24, 25)***

2. Go over the home practice activities log with the client, correcting any errors and suggesting that she either write more or less when describing activities, if necessary. Be brief!
3. It is important to give the client positive reinforcement for completing the homework at least two or three times during the discussion.
4. Review with the client any negative emotional experience, which they tracked by writing it down, or, if they didn't write it down, what they can recall from memory.

#### Tips and Problem-Shooting

Remember for some depressed individuals it is often difficult to do any activity. If the client collected no data at all, complete the log for one or two events with them.

Clients frequently do not get the hang of this the first time, so it is useful to praise anything that they accomplished and fix things that were not completed correctly in a nonjudgmental manner. The main point of the exercise is to see if they understand the mood-behavior-sequence or saw a pattern emerging.

The counselor uses information from the client's experiences during the week to further socialize the client into the CBT model. The counselor points out how our beliefs, expectations, or thoughts are closely connected to the way we end up feeling and to what we end up doing.

#### Practice: Alternative Ways to View Situations from the Week

Briefly, you can invite clients to consider alternative ways they could have viewed one situation. Clients are then invited to consider other ways they may have ended up feeling and what other behaviors they might have tried had they viewed the situation in this different way. When client and counselor together work their way through one simple example, the counselor can point out that, in essence, this is the heart of what they will be attempting to do over the course of treatment. Even though they will need to develop skills in doing this "on the spot" so-to-speak, the main point of the therapy is really not more complicated than what they have just accomplished.

### Incorporate Religious Faith in Developing Alternative Viewpoint

As they develop the alternative viewpoint counselors can now ask the following:

*When you look at your original belief, expectation, or your way of thinking about the situation, are there any beliefs or attitudes from your Islamic faith that strike you as helping to generate an alternative viewpoint?*

### **Behavioral Activation: Positive Activities and Walking by Faith (15 mins)**

Point out from the client's chart how it is indeed that certain activities lead him to have a more negative mood (this may be a reiteration of above). Indicate also, if this is the case, (which it usually is) that there do not seem to be too many positive activities in his daily schedule. As such, one of the first things we want to do is change that. Introduce the exercises with the following rationale. You can break up this lengthy dialogue by asking questions or providing other prompts.

*Our main idea today is quite simple: one of the most effective ways to change our mood is to engage in pleasant activities. One of the first steps in changing our perceptions and negative thoughts is to begin to see the good things in our environment and to make some of them a part of our daily activity.*

*In the Holy Koran 2 (Baqarah):216 it says that "it may be that you dislike a thing while it is good for you, and it may be that you love a thing while it is evil for you, and Allah knows, while you do not know". In other words, many times we don't feel like doing something, but we are asked to do it anyway. At the time of Prophet Muhammad (peace be upon him), many believers probably didn't feel like immigrating to another city leaving their homes and living a hard life as refugees, but they did it anyway: "and those who emigrated for the cause of Allah after they have been oppressed, we will lodge them with a good (life) in this world, but greater still is the wage of the everlasting life, if they but knew" (16 (Nahl):41). Notice that the joy in this verse is in the future. They were not feeling joyful about leaving their homes, but they were able to look at their difficult circumstance from the perspective of what the result of their effort would be—victory over the unbelievers so that they could have a nice life themselves in this world and afterlife, and Islam could be saved as an eternal religion for the people.*

*So God asks us to do things that we may not feel like doing for our own good. He asks us to walk by faith and act in a certain way or engage in a certain behavior and trust that our feelings will follow the decision we make with our wills. We have to trust that our feelings and desire will follow our attention and our actions.*

*We cannot always remove the source of the negative events -- in your case, for example, your medical condition -- but things can be improved by increasing the number of positive events. .*

*Can you recall any time that you have been feeling badly but forced yourself to attend some pleasant social or physical event and it picked up your mood?*

[Review with the client any examples given and analyze in detail what precisely the client did, what was going on at the time, and how, in the client's opinion, this picked up his or her mood].

*Later we will see how inactivity is often a form of avoidance. Avoidance has a snowball effect. We're tired and don't go out. By staying home it seems like we get even more tired, and now we want to go out even less. So on and so on until we barely can do anything to help ourselves.*

*To break this vicious cycle we need to ---*

- *Identify the link between doing nothing and bad moods and feelings.*
- *Identify activities that are likely to pick us up.*
- *Plan which activities can happen at what time in our schedule.*
- *Identify and obtain commitments from others who will be part of these plans.*

*To help with this work we have a simple Record sheet to identify which events give us a sense of enjoyment and accomplishment as well as a Planning Worksheet\* to help us follow through on fun activities.*

### **Choose Pleasant Activities for Homework Assignment (10 mins)**

Ask the client to turn to page 10 in the Workbook (“Planning Pleasant Activities Instructions”) to follow along as you describe this next activity. Assist the client in identifying both mundane events (doing dishes, making beds, cleaning the garage, driving a child to school, a special project at work, etc.), as well as less common ones that might be considered recreational (taking visitors out to dinner, a visit to a museum, going to the movies, etc.). Turn to page 9 in the Workbook: “Pleasant Activities List” for a list of potential activities.

Ask her to decide on two activities that she would like to do between now and the next appointment. Stress that the activities need only be small activities and often it is the small things that make a difference in their lives. These activities should be ones that take more than 10 to 15 minutes to perform yet that can be accomplished in one day.

After she has made a decision on two activities, refer her to the Planning Pleasant Activities Worksheet\* on Pages 11 and 12 and complete \*both\* pages (items #1 to #3) with her. The following rules are important:

1. The activity should be specified exactly. For example, if it is to browse in a bookstore, have her specify the bookstore that they will visit. Likewise if she is to visit some setting she should exactly specify that and how she will get there. This is important to insure that the activity will be carried out.
2. All information regarding date and time should also be noted.
3. The chart should be completed before the end of the session. Indicate she can note on the chart when she has completed the activity.

She should also be careful to note on her logs when the activity is carried out, also being careful to note her mood.

\*\*Note: **Both** activities should be planned and written down before the end of the session.

### **The Power of People for Improving Mood (5 mins)**

*For most people, associating with others gives our reward and pleasure centers a big boost. When considering Pleasant Activities\* keep in mind activities that involve being with others. People are usually great distractions from our own troubles. Similarly people will generally be empathic about our struggles and we naturally shift topics to more pleasant conversation over time.*

*A great way to engage in more than one pleasant event at once is to identify supportive persons from your faith community. Such people not only can be there for you as others are, but even without speaking about religious topics there is a deep bonding that takes place because of your common faith. It also helps to choose someone who is suffering, too. That way you can get your mind off of your problems by listening to and caring for them, and it helps you to be grateful for what is going well in your life.*

*Therefore, we can use today and the coming week to try to identify such persons if they already exist, and if not, figure out how we might discover them in your community. Once this is accomplished the next task is to make contact with them and find out whether they could be ongoing contact persons and supportive resources in the future. Are there such persons in your life now? How often are you able to be with them?*

\*Note: The person needs to be local and ideally not a family member. If they do not belong to a faith community, you can help them think of someone else in their community.

This leads to a problem solving discussion of how to identify and make contact with such persons. The homework assignment will be to at least identify several possible faith companions, and to begin to make contact, if not during the week, after discussion with you after the next session.

### **Homework Assignment (8 mins)**

Ask the client to turn to page 7 in her Workbook to follow along with you as you describe her Home Practice Activities.

#### 1. Memory Verse

***“It may be that you dislike a thing while it is good for you, and it may be that you love a thing while it is evil for you, and Allah knows, while you do not know” (2 (Baqarah): 216)***

*As you did last week, write the verse down and put it in a place, or ideally more than one place, where you will see it many times a day. The more you meditate on these verses the more your mind is renewed and the greater improvement you will begin to see in your mood.*

## 2. Plan Pleasant Events

*Complete the two pleasant events we planned together to accomplish between now and next session. Fill out a Planning Pleasant Activities Worksheet for both activities. Remember to complete the worksheet after you finish the activities.*

## 3. Identify and Contact Member of Faith Community

*When you reach out to people, especially those who are in a worse situation than yourself, it helps to get your mind off of your problems, helps you realize that things could be worse, and helps you to feel grateful for what you do have. It also gives you a sense of purpose and meaning that will result in eternal rewards as a service to God by caring for another.*

*This week, identify several possible faith companions and make contact with at least one of them. You might say something like this to the person you reach out to: "I'm having a pretty difficult time now and I'm wondering if you would agree to pray for and with me during this period. Maybe we could talk on the phone or go out for coffee once a week or every other week."*

## 4. Reading

*\*Emphasize: Please read the pages in your workbook titled, "The Categories of Unhelpful Thinking" to prepare for next week's session. This is somewhat lengthy and to make the most of the limited time in session it very important that you have already reviewed this material.*

*\*There are seven pages in this reading; you can suggest that she read one page a day to make it seem less overwhelming.*

Review with the client any questions about the assignments, and brainstorm any potential problems that could get in the way of carrying them out: e.g., the client is going on vacation this week.

## 5. Solicit feedback on how the session went today.

### **Terminate Session**

Terminate the session, following the instructions listed in Session 1.

## SESSION 3: Identifying Unhelpful Thoughts: The Battlefield of the Mind

### Goals for Session:

1. Introduce cognitive processing: Teach client to identify mood and thoughts accompanying changes in mood
2. Introduce categories of unhelpful thinking
3. Present theological reasons for why these types of thinking are unhelpful and inconsistent with Islamic teachings
4. Introduce Contemplative Prayer

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- Unhelpful Thinking Styles
- Contemplative Prayer: Praying God's Word
- ABC Method for Challenging Beliefs Leading to Negative Emotions
- Planning Pleasant Events

### Set the Agenda

*Our session today is called "Identifying unhelpful thoughts: The battlefield of the mind." We will learn how to identify the thoughts you have that lead to negative emotions. We'll examine a number of unhelpful thinking styles and theological reasons for why these types of thinking styles are unhelpful. We will also discuss contemplative prayer. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Review Homework Assignments (10 mins)

1. Review Memory Verse:

Ask the client to say the verse from memory. If she is not able to do so, have her read the verse from the Workbook instead.

*"It may be that you dislike a thing while it is good for you, and it may be that you love a thing while it is evil for you, and Allah knows, while you do not know" (2 (Baqarah): 216)*

2. Review with the client the Weekly Mood Scale to get an overall sense of the level of depression recently.

a. *Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

- b. Empathize with her response and state that you will review why this was the case as you go through the session.
3. Review the client's success in making contact with a person from faith community
4. Review the client's two Scheduled Pleasant Activities. Discuss with the client any difficulties he may have had with the assignment. Do not spend too much time attending to the problems and complaints.
  - Praise the client for his efforts in carrying out the assignment, specifying what he did well; even if the assignment was not completed.
  - Note very carefully whether there was any change in mood while the activities were being done.
  - Reflect on whether or not this exercise brought home the idea that he might not be paying attention to how ordinary aspects of daily living give him some sense of control and pleasure.
    - Did the sheets help him plan for more activities that bring him feelings of control and pleasure?
    - What immediate and long-term effects did planning and carrying out these activities have on his mood?

### **Didactic: Identify Thoughts Accompanying Changes in Mood**

#### If Mood Changed Following Activity:

If the individual's mood was improved, the Therapist should reinforce the rationale, pointing out:

*Indeed, as had been discussed, changing one's activities, leads to a change in mood. This is because one is led to pay more attention to the positive aspects of one's environment and perhaps see more readily some of God's gifts that were there all the time.*

#### If Mood Did Not Change Following Activity:

If the individual's mood did not improve because of the increased positive activities, he will most likely be puzzled and a bit discouraged. This puzzlement will present the perfect opportunity to present him again with the cognitive model.

*If changing your activities did not result in a more positive mood, it probably is because you had thoughts which were not paying attention to the positive aspects of the situation and instead were saying something negative to you about the situation. However, since I did not ask you to monitor your thoughts, you do not know what those thoughts were. In a few moments we will do that, but first I want to say a few things about the examination of our thoughts.*

### Thought Monitoring Rationale (5 mins)

*As I said before, our thoughts are closely related to our emotions and the behaviors we do. A decrease in a certain activity may result, for example, because we have told ourselves that 'I won't be able to do it,' or 'if I do this I will only feel worse.' Likewise, if an individual tells herself that, 'I am stupid,' she is not likely to feel very good. These thoughts, however, are not something that we are readily aware of. Often the depressed individual has become so use to saying negative things to herself, that she is completely unaware of them. The purpose of the program then is to teach you to become aware of what you are saying to yourself. This will take some time and effort on your part. Patterns that have become so deeply engrained over the years are hard to become aware of and remove. For example, if you drive a car, you have ceased to become aware of all the behaviors you do while driving a car. The same is true of thoughts. However, I will work with you to make you aware of them.*

[Here it might be good to ask the client what he / she thinks about this, before proceeding]

*The importance of being aware of our thoughts is, again, a very important notion in the scriptures. For example, in the Holy Koran, Allah says, "indeed, we created the human and know the whisperings of his soul, and we are closer to him than his life vein" (50 (Qaaf): 16). So as you proceed through these exercises, you may find it helpful to stop and pray and ask God to reveal your thoughts to yourself. Indeed, if we are going to modify our thoughts and 'change our conditions' as God wants, we must become aware of those aspects of our thought which are incompatible with Allah's words. What do you think? Do you have any questions about this?*

### ABC Method of Identifying Thoughts (15 mins)

\*This is the meat of the cognitive component of the intervention. Be sure the client has a good understanding of this by the end of the session. We will continue this in Session 3, adding the next steps for challenging their thoughts.

*Now I'd like to teach you the ABC method to identify your thoughts. This method will help you see how your thoughts, feelings, and behaviors are all linked. You will learn to be like a scientist, examining your thoughts carefully and objectively, before automatically accepting them as truth.*

*The first step, "A," stand for the Activating Event. When you notice that you are feeling a negative emotion, I would like you to stop and ask yourself, what just happened? What did I do? What did others do? This step is used to describe the situation. It can be helpful to use the 'who, what, where, when' questions to complete Step A.*

*The second step, “B,” stands for Beliefs. You are going to identify the thoughts that went through your mind as a result of the activating event. You will ask yourself questions such as, What do I believe about the activating event? What just went through my mind? What am I telling myself about this situation? What is my interpretation of what just happened?*

*The third step, “C,” stands for Consequences. There are two kinds of consequences I want you to identify. The first is the emotional consequences. You will ask yourself, what am I feeling right now as a result of the automatic thoughts I identified in Step B? (e.g., anger, depression, frustration, self-pity, etc.). You will then rate how intense those feelings were using a scale from ‘0’ indicating the worst you have ever felt to ‘10’ indicating the best you have ever felt.*

[Here it might be good to ask the client what he / she thinks about this, before proceeding]

*The second consequence is behavioral. You will ask yourself, What am I doing as a result of believing these thoughts and having this interpretation of the activation event? Am I behaving in a way that is unhelpful or destructive? (e.g., drinking, attacking, moping, avoiding, etc.).*

*Note that usually the best way to know that we have just had some sort of negative thought or interpretation is the negative emotion we are feeling. So, although emotional consequence isn’t recorded until step 3 (Step C), you may find yourself using your negative emotions as the first clue that you have been thinking negative or unhelpful thoughts.*

*Does this ABC method for identifying your thoughts and their consequences make sense to you? Do you have any questions?*

[Encourage feedback here]

*Next week will add another two steps to this method, but for this week we are going to practice these first three steps.*

### Put Steps into Practice

*Let’s try this method together using the ABC Worksheet\* in your workbook. Let’s choose an example from this week and work through it together. I’d like you to write down your answers on the worksheet as we go. This way you will have an example to refer back to this week when you are completing this on your own this week*

\*Work with the client to come up with a suitable situation to work through together. It may be something that came up earlier in the session or in previous session.

*What is Step A, our activating event? What are we doing right now?*

Have the client write this down on the worksheet.

*What will you write down for Step B? What are you thinking about or have you been thinking about as I've been explaining how to identify your thoughts?*

Allow the client to answer and then sum up the answer with the following:

*"It sounds like you are telling yourself \_\_\_\_\_"* (Have the client record this on their worksheet in the appropriate row.)

*Step C is the emotional and behavioral consequences. How depressed are you right now? Now rate how intense those feelings were using a scale from '0' indicating the worst you have ever felt to '10' indicating the best you have ever felt.*

Provide feedback for the client about how they used the ABC method and be sure to praise their efforts.

### **Introduce Categories of Unhelpful Thinking and Theological Reflections (10 mins)**

*Last week I asked you to read over the pages in your workbook on the Categories of Unhelpful Thinking. Did you have a chance to do that to prepare for this week's session?*

Whether or not the client has read these sheets, review each category of thought with them by sharing with them 1) the name of the category, 2) the definition, and 3) the example. You can skip the section on why these thoughts are unhelpful.

After you have provided the client with these three pieces of information, have her read the theological reflect to herself. One at a time, go through all ten categories in this manner.

If she did not read these sheets last week, ask her to do so this week. You can have her read one page a day, as there are seven pages, to make the task seem less overwhelming.

*We all have our "favorite" categories of unhelpful thinking, myself included. As you read through all of the different types, which kinds of unhelpful thinking categories do you find yourself using often?*

After briefly discussing her "favorite" categories, ask the client if she has any questions or thoughts about the theological reflections. It is important to highlight this aspect as you want them to draw upon their faith and Islamic beliefs to challenge their unhelpful and negative thoughts. The theological reflections ground this exercise in their faith, which is different from secular CBT, and, we think, more effective. It also helps them to see Islam's perspective and shows them that this is more than just thinking positive thoughts. It is about focusing their minds on Truth. Be sure to emphasize these points in this session.

## Complete ABC Thought Log

Now, return to the ABC log you filled out together earlier in this session and ask him to categorize his beliefs, indicating the appropriate abbreviation on the log. Ask him why he thinks each thought thus categorized belongs in the chosen category. This way, not only are you applying the information, but you can also be teaching it as you go through each thought on the thought log.

\*\*Note: The following are included for the therapist's convenience. They are also provided in the client and therapist workbook.

### 1. All-or-Nothing Thinking (AN):

You see things in black-and-white categories. If your performance falls short of perfect, you see yourself as a total failure.

Example: An example would be a straight-A student who received a B on an exam and concluded, "Now I'm a total failure."

#### A. Why is this thinking incorrect?

This type of thinking causes one to fear any mistake or imperfection because that is taken as an indication of being worthless. This way of evaluating things is unrealistic because life is rarely completely either one way or the other. For example, no one is absolutely brilliant or totally stupid. Nothing on earth is totally one way or the other. Rarely, does everyone always like us, or rarely do we always find the perfect solution.

#### B. Theological reflection

*The believers at the time of Prophet Muhammad had many ups and downs. Some of them felt sad and lost their courage at the time of difficulties, but God revived their strength by normalizing these ups and downs, implying that victory and defeat are not all-or-nothing concepts: " if a wound has afflicted you (at the battle of Uhud), a wound like it has also afflicted the (unbelieving) people; and we alternate such days between the people ..." (3(Aal-e-Imran):140). So although some of the Muslim people failed in their duty at that time, but they were **not** failures through and through.*

### 2. Overgeneralization (OG):

You see a single negative event as a never-ending pattern of defeat.

Example: An example of this type of thinking would occur when a shy man, who is self-conscious of his artificial leg, mustered up his courage to ask an employer for a job. When the employer politely declined because of lack of a position, he said to himself, "I'm never going to get a job. No one wants to employ a guy with only one leg." He believed that all employers will turn him down just because one declined his offer. And,

he erroneously assumed it was because of his artificial leg. The pain of rejection is generated almost entirely from overgeneralization.

A. *Why is this thinking incorrect?*

It is logically incorrect to conclude that one thing that happened to you once will occur over and over again. It is also incorrect to assume that all situations are similar; or that all individuals are similar.

B. *Theological reflection*

*There are several stories in the Koran that suggest that one failure does not mean that there will always be failure. Perhaps the most vivid story is that of the Battle of Uhud. In this battle, Muslims initially had a better position and were near to victory, but suddenly, because of the disobedience of some of them, they were defeated and most of them ran away and many were martyred. But after this sad and hard time, Muslims moved on with many more victories and joys: "So indeed, hardship is followed by ease, Indeed, hardship is followed by ease" (94 (Inshirah): 5-6). It certainly sounds as if one major catastrophe or mistake does not mean that the individual will continue to make those mistakes or the catastrophe will continue forever.*

### 3. Mental Filter (MF):

You pick out a single negative detail and dwell on it exclusively so that your vision of all reality becomes darkened, like a drop of ink that discolors an entire beaker of water.

Example: A woman with severe arthritis failed to complete one task that she had hoped to complete. She became more depressed and angry at herself for not completing that task. She overlooked the fact that there had been many tasks that she had, in fact, completed.

A. *Why is this thinking incorrect?*

It is more sensible to clearly view one's environment and be aware of the positive things one has done in addition to negative occurrences. It is not adaptive to filter out anything positive. It is irrational to say, "I should preoccupy myself with dangerous or negative ideas." Nothing is gained by dwelling on them.

B. *Theological reflections:*

*The Scriptures usually emphasize that one should reflect on the positive rather than the negative. One should certainly reflect on what is true, and that includes seeing the positive things you have accomplished with the help of God. This theme is reflected in Holy Koran 3 (Al-e-Imran): 103 which says, "... remember the favor of Allah bestowed upon you when you were enemies, and how he united your hearts, so that by his favor you became brothers." Although Muslims had hard times too, here Allah draws their attention to positive changes in their life following Islam, thereby increasing their positive feelings and gratitude towards God.*

#### 4. Disqualifying the Positive (DP):

You disqualify positive experiences by insisting they "don't count" for some reason or other. In this way you can maintain a negative belief that is contradicted by your everyday experiences. You don't just ignore positive experiences as in the Mental Filter, but you clearly and swiftly turn them into their very opposite.

Example: An example would occur when someone praises your appearance or your work and you automatically tell yourself, "They're just being nice."

##### A. *Why is this thinking incorrect?*

Again, it is maladaptive not to pay attention to feedback you get from your environment. We should take that feedback at face value and incorporate it into our understanding of ourselves. If we disbelieved everything everyone told us, we might still believe the world was flat. An adjusted person is one who pays attention to everything in their environment.

##### B. *Theological Reflections*

*In the Holy Koran, a constant theme is put forth that every believer is valuable because of his belief in Islam, even the individuals who may think they were sitting in the back row when talents were handed out. One place where such a theme is discussed is in 2(Baqarah):221, which says: "certainly a believing maid is better than an idolatress woman, even though she should please you; ... and certainly a believing servant is better than an idolater, even though he should please you". So there may be many positive qualities in one's life which are disqualified and neglected by the negative thoughts.*

#### 5. Jumping to Conclusions (JC):

You make a negative interpretation even though there are no definite facts that convincingly support your conclusions. There are two areas in which depressed individuals jump to conclusions.

##### Mind Reading (MR):

This is one area in which depressed individuals jump to conclusions. You arbitrarily conclude that someone is reacting negatively to you, and you do not bother to check this out.

Example: Suppose a friend says she does not have time to have a conversation with you on the telephone at a certain point. The depressed individual may conclude, "She is ignoring me and does not want to talk with me, because she does not like me anymore."

##### A. *Why is this thinking incorrect?*

One should never make an assumption about what someone is thinking without asking them because it is usually impossible to know what another person is thinking, no matter

how sure we are we know. Jumping to conclusions about what the other is thinking is also maladaptive because our negative reactions to their imagined thoughts may set up a self-fulfilling prophecy. That is, we may react negatively to them when we suspect they do not like us, when in fact they do. However, our negative reactions will soon turn them off.

### B. Theological reflections

*In the Holy Koran, it is recommended to rely on people's own declaration and not to try to read their minds to take advantage of them, as it says, "O you who believe! When you go to war in Allah's way, make investigation, and do not say to any one who offers you peace: you are not a believer ...". It may be also that we begin to try to read other's minds because we are overly concerned about their perceptions of us, to the extent of basing our worth on their perceptions of us. Prophets in the Holy Koran, however, present examples of those who were not overly concerned about others' impression of them, and indeed, surely did not pay much attention to the unjust words directed against them, such as being sorcerers (43(Zukhruf):49), insane (68(Qalam):51) or liars (54(Qamar):25).*

### The Fortune Telling Error (FT):

The second way in which depressed individuals jump to conclusions is they anticipate that things will turn out badly. They feel convinced that their predictions are an already established fact.

Example: Depressed individuals will tell themselves that they are never going to recover, "I will feel miserable forever."

#### A. Why is this thinking incorrect?

No one can successfully predict the future with 100% certainty; there are so many factors that could have an impact upon the future. Furthermore, our predictions are likely to be even more off base if we predict only negative events because probability suggests that both positive and negative events will occur.

### B. Theological Reflections

*Often our jumping to conclusions regarding the future implies a fear about the future. The Holy Koran certainly emphasizes the idea that God will give us a spirit of power and love, the ability to control our fears rather than a spirit of timidity. For example, remember when Prophet Muhammad was facing danger of being found and killed by the heathens in the cave. At that hard time, he told his companion, "do not sorrow, surely Allah is with us" (9(Tawbah):40). Essentially, by worrying and imagining a negative future we do not improve the situation. Our thoughts should be on the present and on trusting God, and we should say to ourselves, "... Allah is sufficient for us and He is the best one in whom we trust" (3(Aal-e-Imran):173).*

## 6. Magnification (Catastrophizing) or Minimization (MM):

You exaggerate the importance of things (such as your goof-up or someone else's achievement), or you inappropriately shrink things until they appear tiny (your own desirable qualities or the other fellow's imperfections). This is also called the "binocular trick".

Example: A depressed individual accidentally misfiled some papers while working at his job. He concluded, "I made a mistake. How horrible! I am incompetent." An example of minimization would occur when the same employee was told by one of his or her colleagues that he had done a good job on a report. His reaction was to think, "oh well, doing the report was very simple and anyone could do a good job on it."

A. *Why is this thinking incorrect?*

It is important to have an accurate perception of ourselves and our performance. It is also important to realize that everyone makes mistakes and that they are to be expected. It is impossible for anyone to be perfect.

B. *Theological reflections*

*God actually wants us to alter our point of view, so that many things that people consider not so important should be very important to us, and many important things in other people's view should not be so important to us. For example, have you ever given monetary help to others? If so, do you consider it of a very great value? According to the Holy Koran, even a small amount of monetary or other help to other people, if done with belief in God, is regarded as very valuable. It says: "who is he that will lend Allah a good loan so he will multiply it many multiples! Allah grasps and outspreads, and to Him you shall be returned" (2(Baqarah):245). Here, helping people by lending them money is regarded as helping Allah directly!*

*On the other hand, all the good things you do might be valuable in God's eyes but may be less remarkable to other people, like tolerating life difficulties and continuing your efforts to help yourself, fighting hopelessness, and even trivial things like doing your housework and earning money for your living!*

## 7. Emotional Reasoning (ER):

You assume that your negative emotions necessarily reflect the way things really are: "I feel it, therefore, it must be true."

Example: A depressed individual may tell himself, "I feel overwhelmed and hopeless, therefore, my problems must be impossible to solve, or I'll feel inadequate, therefore, I must be a worthless person."

A. *Why is this thinking incorrect?*

One cannot assume that one's emotions are a reflection of the true state of things. Our

emotions are a reflection of our thoughts and beliefs, which as we have seen are a product of our past and may be distorted. Emotions may also be a reflection of our physiology and how tired we are, but they are not necessarily a reflection of the true state of affairs.

### B. Theological Reflections

*Many verses in Koran speak about Emotional Reasoning, where people actually feel like their thoughts are true, but they are not: "when we give people a taste of mercy, they rejoice in it, but when evil befalls them through the forwarding of their own hands, they become despondent" (30(Roum):36). So many people when having good fortune feel like it will last forever and become overly happy, and when they face troubles they feel like it will last forever and fall into despair, but both feelings (actually strong beliefs) are incorrect and temporary.*

## 8. Should Statements (SS):

You try to motivate yourself with shoulds and shouldn'ts, as if you had to be whipped and punished before you could be expected to do anything. "Musts" and "oughts" are also offenders. The emotional consequence is guilt. When you direct should statements towards others, you feel anger, frustration, and resentment.

Example: One example is the depressed housewife who says to herself, "I should keep my house cleaner, and I shouldn't complain," or, "I should be able to get my work done during the day."

### A. Why is this thinking incorrect?

"Should" statements generate a lot of unnecessary emotional turmoil in your daily life, and, paradoxically, usually do not motivate you to change your behavior. Usually, you resent the source of the "shoulds." Saying, "I should do this", or "I must do this," usually causes one to feel pressured and resentful.

### B. Theological Reflection

*Several verses in Holy Koran emphasize the concept that, "Allah does not impose upon any soul a duty but to the extent of its ability" (2(Baqarah):286, 2(Baqarah):233, 6(Anaam):152, 23(Mumenun):62, and 7(Aaraaf):42). "Should statements" on the contrary, often expect us or other people to do or feel what they cannot do or feel under those circumstances. Therefore, they cause resentment and despair and are dysfunctional. For example, when you are depressed, if you tell yourself, "I shouldn't be so weak, I shouldn't feel sad like that"; you usually feel bad about yourself and this can lead to more sadness, weakness, and depression. Even Prophet Muhammad (PBUH) is encouraged in the Koran not to be so hard on himself: as God says to him, "we have not sent down the Koran to you for you to be distressed" (20(Taa-Haa):2); so we could be taught that being hard on ourselves can sometimes be dysfunctional.*

### 9. Labeling and Mislabeled (L or ML):

This is an extreme form of overgeneralization. Instead of describing your error, you attach a negative label to yourself: "I'm a loser." When someone else's behavior rubs you the wrong way, you attach a negative label to him or her: "You are an idiot." Mislabeled involves describing an event with language that is highly colored and emotionally loaded.

Example: An individual fails to get a job which they applied for and they call themselves a "failure."

#### A. Why is this thinking incorrect?

We are not our behavior. Labeling yourself is not only self-defeating, it is irrational. You cannot be equated with any one thing you do. Your life is made up of many events, thoughts, actions, and emotions. For example, you do not call yourself a "Breather" just because you breathe. Likewise, you do not call yourself a "failure" because you made a mistake.

#### B. Theological Reflection

*God does not base our worth only on our activities. Likewise, He does not label us based only on our present activities. God shows great mercy for us even when our activities would not merit that. An example in Koran is Prophet Yunus. He left his people without Allah's command but eventually was rescued and respected by God and even was sent to another 100 thousand people to preach to them (37(Saaffaat):147); so he was not a failure because of his mistake. Furthermore, we still have our future acts, and our worth cannot be evaluated only based on our present acts or our lowest level of function. For example, in the battle of Uhud, Muslims were defeated but they weren't failures, because eventually they could overcome their despair and had many future victories.*

### 10. Personalization (P):

You see yourself as the cause of some negative external event for which you were not primarily responsible.

Example: One example is the child who misbehaves or is rude. The depressed mother says, "I am a failure or a bad mother," (as if she could control everything her child did).

#### A. Why is this thinking incorrect?

Essentially, the person with this problem has confused influence with control. While we obviously have some influence over people, especially our children, we cannot control everything they do. What another individual does is ultimately their responsibility and decision, not yours. We are not omnipotent.

#### B. Theological Reflection

*God has control over the events that happen in the world. However, for the most part, we do not. We should not presume to be God or try to do so. This is especially important when negative events happen to us.*

[end of categories]

### **God's Thoughts are Higher than Our Thoughts**

\*More helpful information to continue to increase clients' understanding of the treatment rationale and their "buy-in." Don't underestimate how important explanations of assignments and benefits can be to clients in terms of their motivation and adherence to treatment.

*As we have gone through these categories of unhelpful thinking, we have examined why they are unhelpful from a Koranic perspective. Koran says "this Koran guides to the straightest way. It gives glad tidings of a great wage to the believers who do good deeds" (17(Israa):9) and "surely by Allah's remembrance are the hearts set at rest" (13(Raad):28). This is another reason why it is important for us to continually fill our mind with God's words; we want our minds to be full of His words and remembrance, and this, will lead to feelings of joy, peace, hope, and increased motivation for good deeds, the kind of emotions we would rather feel than depression and hopelessness.*

[Get feedback from client on this]

### **Contemplative Prayer: Praying God's Word (10 mins)**

Note: The section in blue highlight is provided in the Workbook. You can ask the client to follow along with you in the Workbook as you explain Contemplative Prayer.

*Contemplative prayer is a way to meditate on God's word and leads to a more intimate relationship with Him, because God desires his worshipers to talk and whisper to him. One of the most common metaphors for contemplative prayer is of the lover or friend. Prayer is also a discipline, undertaken as one would undertake to learn to play the piano. Practice is the key.*

*One way to engage in contemplative prayer is to take a verse from the Koran, one of Godly words, and meditate on it. In other words, you spend some quiet time thinking about the verse, repeating it to yourself, and saying it as a prayer to God. It's like letting yourself be saturated in God's words. Some forms of meditation have you focus your attention on your breath. When you notice yourself thinking about something else, you are to bring your attention back to your breath. Contemplative prayer is different in that instead of focusing on your breath you focus on God's words. This leads to a contemplative, prayerful state.*

*It's normal to find that your mind has wandered to thinking about something else. When you notice that this has happened, don't get upset with yourself. When you become quiet in prayer the first thing you are likely to notice is the how busy the mind remains. This is normal, though unnoticed in everyday life. Some find the interior noise overwhelming at first. Don't panic. Think of your thoughts as boats sailing along a deep river. Boats will sail into view, and they will sail past. Let them sail on; you do not need to be concerned with them. The quality of your prayer time is not measured by the quality or intensity of your thoughts or by how often your attention is captured by them. Simply bring your attention back to the verse.*

[Get client's feedback]

*It might be helpful to have the verse written on a piece of paper or underlined in the Koran in front of you so that you can more easily keep your attention on the words. It is also normal to find yourself wanting to pray to God as you are in this state. If that happens just go with it and pray whatever comes up in your heart.*

### **The Method**

Practice this for a few minutes with the client using this week's memory verse. Make sure she understands how to use this tool (i.e., contemplative prayer) before ending the session. Inform the client that these instructions and steps are included in the workbook on page 21.

1. Choose a scripture. Begin with your memory verse for the week.
2. Sit comfortably, but not too comfortably, back straight, chest open so the breath is free and open.
3. Read the passage slowly. Savor each phrase. What word phrase or idea speaks to you?
4. Read the passage again. Where does this passage touch your life? What do you see, hear, touch, or remember?
5. Read the passage a third time. Listen quietly.
6. Note insights, reflections, and personal response to the reading in your journal (optional).
7. Follow the steps in order or go back and forth between them as you feel moved.
8. Finish by waiting for a few moments in silence.

### **Homework Assignments (5 mins)**

Ask the client to turn to page 20 in the Workbook to follow along with you.

#### 1. Memory Verse

*"Surely by Allah's remembrance are the hearts set at rest." (13(Raad):28)*

#### 2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.*

#### 3. Thought Log

*Please write down your thoughts once a day using the ABC method. Be sure to fill out all of the sections and categorize each thought into one of the unhelpful thought categories. If you have more than one stream of ideas in one time period, you can indicate several categories. There are seven thought logs included in the manual this week so that you can*

*fill one out each day.*

*Remember that this is a learning experience; you should not worry about completing the logs perfectly.*

#### 4. Positive Activity

*Add another positive activity to your week. Follow the same procedure for scheduling this activity as we used in Session 2.*

#### 5. Contact Member of Faith Community

*Be sure to contact someone from your faith community and ask them to partner with you during this period or agree to partner with them in their difficult situation. If you are having trouble doing this, be sure you bring it up when the therapist asks about this.*

Solicit feedback on how the session went today.

#### **Terminate the Session**

Follow the instructions listed in Session 1.

## SESSION 4: Challenging Unhelpful Thoughts: Bringing All Thoughts Captive

### Goals of Session

- 1) To reinforce and refine the client's ability to monitor her thoughts, and to clarify her understanding of the thought distortion categories
- 2) Introduce how one's interpretation leads to change in mood
- 3) Develop alternative ways of responding to negative automatic thoughts, beliefs, and expectations in light of the client's personal value system and goals;
  - i. Religious beliefs can help clients pay attention to more effective ways of looking at the situation
  - ii. Religious practices can be used as behavioral experiments to generate coping responses to negative or unpleasant events which are forms of direct coping rather than avoidance

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- Disputing Questions
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions

### Set Agenda

*Our session today is called "Challenging unhelpful thoughts: Bringing all thoughts captive." We will learn how one's interpretation of situations leads to changes in one's mood. I will also give you tools to respond differently to your automatic thoughts. We will examine how your religious beliefs can help you look at situations in a more positive manner. We will also look at how religious practices can be used as coping resources for negative or unpleasant events. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Review Homework Assignment (10 mins)

1. Review Memory Verse:

Ask the client to say the verse from memory, or read it from the Workbook:

*"Surely by Allah's remembrance are the hearts set at rest." (13(Raad):28)*

## 2. Review Mood Scale

- a. *Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*
- b. Empathize with response and say that you hope to learn why as you review the thought log.

## 3. Contemplative Prayer:

**Did the client spend 20 minutes a day in contemplative prayer?** Did she use her memory verse?

## 4. ABC Thought Log or Worksheet:

**Review the client's efforts at thought monitoring.** Ask them if she had any particular difficulties. Attempt to clarify her understanding. Examine thought rows to ensure that actual thoughts were recorded.

Ask about the thoughts recorded to ensure that actual thoughts, not feelings, were recorded. Also check for relative specificity of thoughts. That is, does the client list each thought separately, or does she blend a number of thoughts together?

Correct at least one entry, if necessary. Be careful to praise the client for her efforts. Remember that while you are hoping to correct them, it is important to keep the relative amount of praise and reinforcement greater than the amount of focus on problems and complaints.

5. **Review unhelpful thought categories with the client.** Ask her if there are any she does not understand. Ask the client why she placed a particular thought in a particular unhelpful thought category. Do this with 2-3 thoughts. Positively reinforce them for their answers.

If you suspect that one is improperly labeled, ask the client to explain why she placed the thought in that category. If the explanation is sufficient, suggest why you think it may belong in an alternative category. This is to be offered only as a suggestion, however, as clients are usually the best judge of their thoughts.

6. Review whether or not the client added a positive activity (you likely won't have time to discuss this in detail; just check for completion).

### **Didactic: Interpretation of Events leads to Emotion (8 mins)**

*Many people believe that the events in our lives cause us to feel certain ways. For example, if you had plans to go for a walk outside and it starts to rain, some people would then feel disappointed or angry that they can no longer go for a walk. They think the rain caused them to feel this way. But other people who saw that it was raining would feel happy instead of feeling upset because they like the rain and think the walk will be even more fun in the rain. Others might have a neutral emotional response, shrug their shoulders, and simply take an umbrella on their walk.*

*The point is that it was not the rain that caused each of these individuals to feel a certain way. We know that because the situation was the same for all, but each had a different emotional response. Rather than the event (in this case the rain), it is our interpretation of the events that happen in our lives that determine how we feel and how we then behave (e.g., either going for a walk in the rain or staying inside feeling glum). This is important to remember when you are dealing with a physical illness. We need to remember that our quality of life doesn't just depend on current health status, but largely on attitude we have towards the illness and the meaning we give to it. Two people can have the exact same diagnosis, but one is content and the other is miserable.*

[elicit some feedback from the client here]

### **Religious Application**

*There are many examples in the Koran of how we are to challenge our thoughts and behave in ways that may not seem consistent with the negative circumstances we find ourselves in. God says in the Koran 2 (Baqarah): 155-156 "be sure we shall test you with something of fear and hunger, some loss in goods or lives or the fruits, but give glad tidings to patient, who, when a calamity befalls them, say: surely we are Allah's and to him we shall surely return". Strong believers realize that they have nothing by themselves and all their possessions are indeed Allah's and should be consumed in His way, so they don't grieve much for what they have lost. They also know that there will be a judgment day and they shall return to Allah and all their patience will be rewarded in this world or afterlife.*

*This view in life allows them to be content and rejoice, no matter what the situation. No one likes to be beaten up, imprisoned, starved or stoned, like Prophet Muhammad and his companions were. But they learned how to interpret these negative events through what they considered their life purpose—to move towards Allah. Being in these difficult situations allowed them to sincerely experience God's presence and reach the sacred patience position. They sometimes interpreted these negative events as positive events because they furthered their life purpose. We, too, can use our faith-- and the purpose we derive from our faith -- to give meaning to the negative events in our lives. Like them, we can learn to rejoice no matter what the circumstance. Let's keep this in mind as we learn the next step in changing our thoughts.*

Ask the client if she has any thoughts or questions about these ideas.

### The ABCDE Method of Identifying and Challenging Thoughts (8 mins)

*Last week we learned how our emotions are directly linked to what we are thinking and to how we behave. We used the ABC method (Activating event, Beliefs, Consequences) to examine these relationships. We also learned about a number of categories of unhelpful thoughts. This week we are going to take the ABC model a little further; we're going to add steps D and E.*

*D stands for Disputing. This is the step we use to challenge our unhelpful and negative thinking. We will ask ourselves a number of questions to dispute our original belief, such as "What evidence do we have that this belief is true? What evidence do I have that the opposite is true?" Sometimes the situation can't change. In this case, we need to look for evidence that you can manage it. Evidence can be found in such things as your talents, your past experience, your support persons, and resources. The answers we derive from these disputing questions, such as about evidence, will result in step E: an Effective new belief and new Emotional and behavioral consequences.*

[elicit some feedback from the client here]

*As a Muslim, you are not just challenging unhelpful thoughts and replacing them with more positive thoughts. You also have the added power of being able to replace your negative thoughts with the true words of God, which, according to the Holy Koran, "guides to the straightest way" (17(Israa):9). According to the Koran, the mind is a battlefield. We are at war! Identifying our thoughts and challenging them—making sure they are consistent with what God says-- is serious business.*

*On the one hand, we have a serious enemy, Satan. As God says, "Satan is indeed your enemy; therefore take him for an enemy" (35(Faatir):6). According to Koran, Satan and his crew always try to seduce people to do wrong and fall into troubles. On the other hand, God wants people to obey His words and to be saved from troubles: "if the people of the townships had believed and kept from evil, surely we should have opened for them blessings from the sky and from the earth" (7(Aaraf):96). We want to win the battle going on in our minds, and God's word is the most powerful way to do this. When we put His words of truth in our minds we can change the way we think and as a result, how we feel, no matter what the situation.*

*Therefore, part of step D is examining your religious beliefs and resources to see how they might help you dispute your automatic negative thought. For example, you can look to your view of God, the way you believe the world works from a Muslim viewpoint, the Koran and religious writings, spiritual wisdom, and other sources for evidence to challenge your automatic negative beliefs and your beliefs that you can't cope with the situation.*

[elicit some feedback from the client here]

*Let's practice steps D and E using the examples from your thought log this past week. As we do this, we are going to think about how God's word and our faith can help us come up with more helpful and true beliefs. We can also use the Disputing Questions\* worksheet on page 31 of the Workbook to help us challenge our beliefs.*

### **Using the Client's Faith to Challenge Dysfunctional Thoughts (15 mins)**

Go through several examples from last week's thought log with the client to practice disputing their negative thoughts and coming up with effective new beliefs. Be sure to discuss the new emotional and behavioral consequences of these new beliefs. Have her write her answers down on the ABCDE Worksheet\*. Continue practicing until the client can complete steps D and E without your assistance. The thought log is included below for your convenience.

#### Therapist Information:

\*\*The following are a few things for therapists to keep in mind as they proceed with steps D and E with the client.

#### Religious Beliefs

In addition to material generated from your general conversation with the client, you have available other sources of information that pertain to the client's religious and spiritual beliefs, such as the religious assessment questions administered in the first session. Using all this information, choose any that seems most relevant to the topic at hand. For example, if the client has mentioned trust in God as an important value or as a consoling aspect of their faith, explore with the client how such beliefs could have been used in any of the situations the two of you have examined together.

Imagine the client had underestimated their ability to cope with the situation. An appropriate exploration would be around the degree to which focusing on trusting in God might have affected the degree to which he believed that he could not cope with the situation. The idea here would be to have him attend to how religious beliefs are an additional resource he could have called on in that situation.

Similarly, if the client revealed that considerable avoidance occurred prior to the situation, examine with the client how attending to their trust in God might have led to different outcomes. Once again, the religious viewpoint may have provided him with a resource that could have helped, but which his emotional distress at the time created a kind of tunnel vision that left this potentially valuable resource unexplored.

#### Religious Practices

When examining these religious resources, bear in mind that it is not only beliefs that could be an effective resource, but specific religious practices may also directly change the situation. For example, it is one thing to know that attending to trust in God might have made the person feel more courageous in managing the situation, but having this skill to attend to that belief might require accessing some type of religious practice, such

as prayer, meditation, or speaking to someone who shares the client's religious values and beliefs.

What has proceeded is the heart and soul of religiously integrative CBT. Accessing individualized faith beliefs is a matter of practice. The counselor's main goal is to support clients in discovering creative ways of reminding themselves about these religious resources. Assignments in-between sessions should focus client attention on this goal. Asking the client to monitor negative emotional experiences, while at the same time using religious and other beliefs to challenge negative automatic thoughts, is the most appropriate way to reinforce such skill building.

**Activating Event:** Describe the situation around the time the negative emotion(s) began.

**Beliefs:** What negative beliefs or expectations automatically went through you mind when you were in that situation?

**Consequent Feelings and Behavior:** What painful feelings did these beliefs or expectations lead to? Rate each feeling using a scale of 1-10, where 10 is very painful. What behavior did these beliefs and feelings lead to?

**Dispute the Beliefs and Deal with the Situation:** Is there any evidence that those beliefs or expectations are not totally accurate or true? Describe the contrary evidence. Specify the unhelpful thought category that best describes the error in the belief. Even if the situation can't change, what evidence do you have that you could manage it (based on your talents, past experience, support persons, and/or resources)?

**Religious Beliefs and Resources:** How can your view of God, your Muslim worldview, the Koran and religious writings, spiritual wisdom, and other sources provide evidence that challenge your automatic negative beliefs and beliefs that you can't cope?

**Effective New Belief and Consequence:** What is a different way to now look at the situation? How did your feelings change after you looked at the situation differently? Rate each feeling using a scale of 1-10, where 10 is very painful.

### Homework Assignments (5 mins)

Ask the client to turn to page 30 in the Workbook to follow along with you.

1. Memory Verse

*"Indeed, we created the human. We know the whisperings of his soul, and are closer to him than the life-vein" (50(Qaaf):16)*

2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.*

3. Thought Log Monitor

*Complete the ABCDE thought monitor at least once a day.*

*Be on the outlook for automatic negative thoughts that trigger emotional upset and negative behaviors such as avoidance. The goal is to improve on the ability to spot these negative patterns at the time they occur, and to attempt to develop alternative ways of responding through the use of more effective beliefs and expectations.*

*Remember to use your religious beliefs and practices, as well as scriptures, to help challenge your unhelpful and negative beliefs.*

4. Elicit feedback from the client about how the session went today

### Terminate the Session

## SESSION 5: Dealing with Loss

### Goals of Session:

1. Identify losses in client's life as a result of illness
2. Identify spiritual losses
3. Teach tools for dealing with loss
4. Explain control versus active surrender
5. Emphasize the use of religious resources to understand and make meaning of losses

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions
- Active Surrender Exercise

### Set Agenda

*Our session today is called "Dealing with loss." We will identify the losses you have suffered as a result of your illness, including something we refer to as spiritual losses. I will then provide you with some tools to help you deal with your losses. In particular, we will examine how the use of religious resources can help you better understand your losses and deal with them in healthy ways. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Review Homework Assignments (10 mins)

1. Review Memory Verse:

*"Indeed, we created the human. We know the whisperings of his soul, and are closer to him than the life-vein" (50(Qaaf):16)*

2. Ask the client whether or not she used contemplative prayer this week and, if so, what the experience was like.

3. Review a few of the client's ABCDE Thought Logs.

The goal of this review is to determine whether clients understand the full model and, in particular, if they understand how to gather evidence to challenge negative beliefs and to use this to derive alternative beliefs and expectations (Steps D and E). Make sure clients understand how to complete these steps correctly since this is at the heart of cognitive processing. Pay special attention to how they went about

integrating religious beliefs and practices as a method for discovering alternative beliefs and as a method for generating behavioral experiments.

#### 4. Examine Weekly Mood Rating:

- *Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

Discuss any significant events relating to the client's depression and medical illness. Encourage discussion around how using religiously integrative CBT strategies helped in any way to interrupt the negative feelings. Also, examine any situations that resulted in significant depressive feelings with discussion focused on what he might have done differently or how he could use this event as a learning experience in case it re-occurs in the future.

Once again the purpose is to determine if the client understands how to implement religiously integrative cognitive processing or religiously integrative behavioral experiments either to combat worldviews which are depression-inducing, or self-defeating ways of behaving that keep the person stuck in a downward depressive spiral.

#### **Issues Pertaining to Loss in the Client's Life (5-8 mins)**

##### How to Introduce this Theme.

We see essentially three issues related to loss: 1) loss of identity, 2) loss of capacities, and 3) loss of relationships. Many more certainly could be chosen and counselors are free to take the theme in any direction relevant to the client's existential situation. We will discuss spiritual losses in the next section, although you may find that material becomes interwoven in this section.

Counselors should review all the assessment material gathered to this point and identify whatever relates to the themes of loss in the three areas noted here (or other areas). Counselors may begin in any way that seems suitable to introduce the topic. The following is one example:

*Dealing with chronic medical illness is in many ways similar to dealing with grief. Grief results from significant losses in our life whether it is the death of a loved one, loss of friendships or other significant relationships, loss of a job that was meaningful, loss of an environment or routine that one had gotten used to, or loss of the sense of who one is as a person outside of the medical illness. From our discussion, I have noticed some areas that possibly could be seen as losses to you and wanted to check that out to see how significant these losses are to you in terms of living a satisfied life.*

[Invite client to review topics the counselor has noticed up to this point related to loss].

*I also have a few questions about your current losses to help fill in the picture regarding how bothersome they are to you.*

*As a result of your illness or depression have you experienced any of the following?*

[For each positive response the counselor asks as a follow-up, "On a scale of zero to 10 with zero being no problem at all and 10 being about as bad as it could get, where would you place that loss?"]

1. *Have you lost one or more important or meaningful relationships?*
2. *Have you had to reduce the amount of time you spend with friends and family?*
3. *Have you lost any capacity for recreation or fun that you miss?*
4. *Has your work capacity been reduced in a way that is bothersome?*
5. *Has your illness led you to question who you are as a person or whether or not you will be able to reach the goals that make for a satisfying life?*
6. *Has your illness led to not being able to participate in social activities that you once enjoyed? What are they, if any?*
7. *What is the most important thing you have had to give up as a result of your illness?*

### **Spiritual Losses (10 mins)**

Note that these may have already been covered in the section above. If not, introduce the concept now and discuss the questions listed below.

*Some of the losses we suffer as a result of illness are spiritual losses. Or, in other words, losses that are related to our faith and our relationship with God. Some examples of spiritual losses include the loss of relationships with members of your faith community, feeling abandoned by God, and the loss of specific faith beliefs (e.g., A good God doesn't let His slaves suffer).*

1. *Have you suffered any spiritual losses?*
2. *How have you dealt with these spiritual losses?*
3. *Have they been harder to deal with or caused more suffering than the other losses you have had because of your illness?*

[elicit client feedback]

Note that some of the following is also included in the Workbook on page 40.

*The important question is, what can we do when we suffer an important loss to decrease our suffering and increase our strength? There are several important means towards this goal, and we will discuss 2 of them in this session. One is re-interpreting the losses, and the other is Active Surrender that we will discuss later if we have time.*

*One important way to decrease our suffering is to try to look at the losses in a different way or from different aspects. We can use the Holy Koran in this regard, because the stories we read about in the Koran are there to encourage us, to provide a model for us to interpret the events in our own lives, and to create in us strength and hope. For example, it may be comforting to know that a number of individuals in the Koran suffered*

*great losses. In fact, one could argue that almost all individuals mentioned in the Koran did lose something important to them and did suffer in some significant way. Think of Prophet Jacob (Ya'qub). He and God had a very special relationship. Yet, according to Holy Koran, over and over again he suffered great losses, for example, losing his beloved son Yusuf, losing his eyes (12(YusufYusof):84), and losing his other son. Even Prophet Muhammad (PBUH) and his believer companions and family members suffered greatly; many were eventually killed, and these were the individuals with the closest relationship to Allah! We can see that it doesn't matter who we are or what we do in life. As Muslims or human beings we will suffer: "We will most certainly try you with somewhat of fear and hunger and loss of property and lives and fruits; and give good news to the patient; who, when a misfortune befalls them, say: surely we are Allah's and to him we shall surely return; on those will be prayers and mercy from their lord, those are guided" (2(Baqarah):155-157). So one coping method with losses is to try to remember the sufferings of Allah's close friends. As human beings or Muslims, we all may suffer.*

Ask the client for his thoughts about the ideas shared above. Has he ever tried to look at his losses in alternative ways?

### **Identification of Specific Losses to Target (5-8 mins)**

Now return to the information you gathered about all the losses the client has suffered, secular and sacred, and using reflective listening flesh out in more detail which aspects of the loss(es) are most troublesome.

When this has been completed, counselor and client collaboratively target one or two areas of loss that will be the focus of the treatment in this session and the next one.

The assignment should be quite concrete, and the counselor brainstorms with the client any potential barriers that may interfere with attempting these strategies.

Counselors should assess which of the loss topics are more amenable to cognitive restructuring and which are more amenable to behavioral experiments. A rough rule of thumb to use is that losses which seem related to clients' views of themselves can proceed initially with cognitive restructuring (i.e., thought log using ABCED method) until it is determined that changing what the client actually does behaviorally (i.e., behavioral activation, behavior experiments) will have more impact. Active surrender is another tool that the client can use, which will be explained in the next section.

For example, if the client's social life is quite weak and appears to be related to seeing oneself as unattractive or having nothing to offer in a relationship, cognitive restructuring would probably be a useful place to start. However, if the medical illness has depleted the client's environment of fun things to do, then working on behavioral activation of pleasant events would seem to be more fruitful.

## Control Versus Active Surrender (10 mins)

**\*\*Note:** You may not have time to cover this material in this session. If not, orient the client to page 43 in her Workbook on active surrender. Ask her to read the instructions and carry out the task on her own this week. Answer any questions she may have. This tool may or may not be useful at this time to deal with the losses she has identified as this week's target(s).\*\*

[If time allows, proceed (if not, then skip to Homework Assignment)]

*Some aspects of life are under our own personal control, while others are beyond our control. Life becomes more difficult when we try to control the uncontrollable. Some of the things we believe and feel make letting go difficult. Surrendering to God helps us begin the process of letting go. It is important to remember that active surrender to God is different from giving up. Notably, surrender is paradoxical— letting go inadvertently increases control.*

*Now I'd like to differentiate the things in your life that you are able to control from the things you are not able to control. We are also going to talk about why letting go of the things we cannot control is difficult. Then we will discuss what it means to let go by surrendering things to God.*

*I'd like you to make a list of the things you have under your control and of the things beyond your control.*

Examples of things under personal control include: choosing a doctor, the number of hours one works, eating well, taking medications, exercise, participation in hobbies/activities.

Examples of things beyond personal control include: course of illness, final outcome of treatment, how family copes with illness/death.

*1. How do you cope with issues under your control? With issues beyond your control?*

*2. What happens when you try to control aspects that you don't have control over?*

*Although it may be our nature to want to take control of every aspect of our lives, sometimes it makes more sense to give control to God. This is called active surrender. Active surrender involves a conscious decision to release or let go of those things in your life that you do not have the power to change. Active surrender is one resource that may help you better manage those aspects of life that are beyond your control.*

*Remember that surrendering to God is different from surrendering to an enemy, which implies defeat. God is loving and kind. When you surrender to God you have faith that things will work out; that God will take care of things in his own way. Paradoxically, people often report feeling more in control after surrendering something to God.*

*Is there anything that you would like to surrender to God?*

*How do you think this might help you cope with your illness and your losses better?*

### **Homework Assignment (5 mins)**

Ask the client to turn to page 39 in the Workbook to follow along with you.

1. Memory Verse

*“Allah charges no soul except to its capacity. What it has earned is for it, and what it has committed is against it. 'Our lord, do not take us to account if we have forgotten, or made a mistake. Our lord, do not burden us with a load as you have burdened those before us. Our lord, do not over burden us with more than we can bear. And pardon us, and forgive us, and have mercy on us. You are our guide, so give us victory over the unbeliever people.’” (2(Baqarah):286)*

2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.*

3. Thought Log

*Use the ABCDE thought log to actively address one or two losses you have experienced as a result of your illness. You and your therapist should have come up with a concrete plan to do so in session. Remember that integrating your religious beliefs and practices into the use of each of these tools makes them even more effective.*

4. Active Surrender

*Reflect on the things in your life that you want to surrender to God. Use the worksheet provided to make a list. Then, set aside a block of time to surrender these things to God in prayer. This is another effective tool to address the losses you have experienced as a result of your illness.*

5. Elicit feedback from the client about how today's session went.

### **Terminate the Session**

## SESSION 6: Coping with Spiritual Struggles and Negative Emotions

### Goals of Session

1. Discussion of spiritual struggles
2. Explore core experiences that may have contributed to a change in client's faith
3. Discussion of forgiveness and repentance and imagery exercise

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions

### Set Agenda

*Our session today is called "Spiritual Struggles: Dealing with negative emotions." We will identify the spiritual struggles and negative emotions that you may have experienced as a result of your illness, including core experiences that may have contributed to a change in your faith. We will discuss the meaning of forgiveness and repentance and other spiritual resources you have available to you. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Homework Assignment Review (10 mins)

1. Review Memory Verse:

*"Allah charges no soul except to its capacity. What it has earned is for it, and what it has committed is against it. 'Our lord, do not take us to account if we have forgotten, or made a mistake. Our lord, do not burden us with a load as you have burdened those before us. Our lord, do not over burden us with more than we can bear. And pardon us, and forgive us, and have mercy on us. You are our guide, so give us victory over the unbeliever people.'" (2(Baqarah):286)*

2. Inquire about the client's use of contemplative prayer. (Note: You may need to remind the client about how to engage in contemplative prayer this during each session and ask about problems he is running into if he fails to follow through).
3. **Examine Weekly Mood Rating**

*Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

4. **Review client's Thought Log** that she used to address one or two of the losses in her life.
5. **Assess integration and use of their religious beliefs/practices/resources.**
6. **Inquire about the client's use of Active Surrender.** Did she make a list of things she wanted to surrender? What was on the list? Did she spend time in prayer surrendering these things to God? What was the outcome?

Note about the use of Cognitive versus Behavioral Strategies

The basic point of the assignment review is to consolidate the clients' strategies that seem to be having the most impact on their depression at this point. We want to ensure that the client is using the strategies properly and suggest additional strategies from the repertoire provided in this manual. Normally clients resonate with one or two strategies that they find work for them. Counselors should note whether the strategies are more along the lines of shifting perspective or taking action, as that may be the pathway for encapsulating the major thrust of what works for them.

This is a good time to review with clients the distinction between changing perspective and changing behavior. Both are able to combat depression, but people seem to have preferences for one or the other. Clients should be made aware that they do not have to choose between one or the other and can choose both depending on the current problem. That being the case, when a client uses a strategy successfully counselors should point out what seemed to have made a strategy work. That is, was it a change of perspective that encouraged them to change their behavior, or a change of behavior that altered their perception of the situation?

In this way clients are introduced to what we technically refer to as reciprocal determinism -- the idea that thinking, behaving, and the environment often influence each other and that one is not more causal than the other.

**Introducing Spiritual Struggles (10 mins)**

“Spiritual struggles” is a topic that needs to be assessed for its presence within a given client. It can be thought of as a dimensional quality or experience. That is, not all clients experience this to the same degree; some experience it not at all, some experience it to a mild degree, some experience it but it leaves them, and some continue to experience it intensely. The way spiritual struggles is determined comes from asking several questions, two of which were on the spiritual assessments questionnaire (RCOPE) administered early on. You should have been provided with a copy of this baseline measure by the study coordinator. These questions focused on whether the client has the feeling that God is punishing him right now or whether God is abandoning him right now.

Remember to emphasize the following during this session and call attention to these points in the workbook:

- It is normal to question God in the face of illness.
- It is normal to feel negative emotions toward God.
- God created us to experience a range of emotions and He can accept all of them.
- God wants us to be true and honest with Him.

*Today we're going to talk about some challenging questions and feelings that can make it difficult to connect with God. In particular, we will be reflecting on times that we have felt abandoned by God or angry with God. In the face of illness, tragedies, and suffering, it is normal to question God. We may ask: "Where was God? Did God forsake me? How can a loving God allow this to happen? Why is there suffering?"*

*Sometimes people grow up thinking or learning that they should never question God or feel angry with God. But, indeed, negative thoughts and feelings towards God can ensue automatically and beyond our wish or will. Many people in the face of the illness or troubles feel negative towards God or question him. God desires us to be honest with ourselves and with others, including Him. It may be hard to talk to others or even to God. Sometimes there is fear that God does not hear or that He will punish us. It can help to express honestly to God your feelings towards God, and ask Him to help you overcome and tolerate these feelings. Honesty can lead to healing and restoring one's relationship with God, with others, and with oneself. It can also lead towards growth.*

[elicit feedback from client about this]

### **Discussion:**

*Here are some questions to guide the discussion. Do not ask all of these questions. Just ask those that are relevant to the type of answers the client provides. Use your clinical judgment. Remember, there is only 10 minutes allotted for this section.*

1. *Has your relationship with God changed because of your illness or depression?*
2. *What kinds of questions do you find yourself asking?*
3. *Modify as needed: I noticed from a questionnaire you answered earlier in our treatment that you had [or, that you did not have] a feeling that God was punishing you or abandoning you. I was wondering if that is still the case and how it seems to affect you?*

OR:

4. *Have you ever felt abandoned by God? Describe. How did you cope with this?*
5. *Have you ever felt angry with God? Describe. What did you do to cope?*
6. *Additional questions about spiritual struggles (e.g., resentments, bitterness, questioning, shame, guilt) as deemed appropriate to this particular client*

Clients can answer these questions in an infinite number of ways. Counselors need to use a lot of reflective listening, which permits clients to describe precisely what this religious experience is like for them. Obviously, there will be little difficulty for clients who are not experiencing religious struggles, yet the discussion itself may reveal some interesting things about religious motivations.

### Reflective Listening

The basic goal of the reflective listening portion is simply to have clients hear themselves express these often unacceptable feelings out loud. Give the client about 10 minutes to express her feelings. There is a lot to cover in this session so if you have to cut this part short, reassure the client that you will return to these issues later in the session and in subsequent session.

Only after the client has spent about ten minutes or so expressing these negative feelings and understood them in some way from her own perspective should counselors normalize her feelings in some way.

The point here is to keep it simple without getting into a lot of elaborate theology. Most of the time people aren't truly asking "why" questions -- more often they are asking "why me" questions. Simple reflective listening alone often permits clients to sort this out for themselves.

### **Examples of Suffering and Spiritual Struggles in Koran**

**\*\*You can use these examples during this part at of the session if you feel they are applicable and would be helpful. You can pick and choose between them or offer your own based on an individual in the Koran.**

It seems that some concepts or thoughts specifically cause negative emotions in spiritual struggles:

- Guilt feeling

Patients may think that they are bad or sinners because they have questioned God's wisdom or because they have been angry at God. The therapist can emphasize that our thoughts and feelings can be largely automatic or involuntary and so may not be regarded as a sin. The therapist also can use the following verse from Koran that shows even the prophets sometimes questioned God to the extent that they even thought God may have lied to them: "(Remember) *when the messengers despaired and thought that they were denied, then came unto them our help, and whom we would want were saved*" (12(Yusuf):110). The therapist also can use the patient's positive deeds and qualities against the thought that they are bad or sinners.

- Feeling abandoned by God

Patients may think God does not pay attention to them because they are still suffering in spite of their prayers and supplications. The therapist can cautiously use many examples of religious figures loved by God who still suffered much in their lives; and reinterpret these sufferings as means of spiritual development and growth.

- Fear from God's punishment

Some patients may have negative feelings towards God and be upset with thoughts such as: "God is angry, harsh, or He is an oppressor". They then have fears that God will punish them because of these thoughts so that they may suffer more in this world or

afterlife. The therapist can use Koranic examples that show the mercifulness of God and emphasize that many of these thoughts are not sins; and even if they were, God is most forgiving and kind. The following verses are helpful in this regard: "*And (mention) zunnun (Prophet Jonah) when he went away in anger thinking we had no power over him. But (later) in the darkness he cried: 'there is no God except you. Exaltations to you! I was among the harm doers'. So we responded to him and saved him from the grief, and thus do we save the believers* (21(Anbiaa):87-88).

In Islam, all of the 114 surahs (distinct separate parts of Koran) except one, begin with the phrase "*In the name of Allah, the beneficent, the merciful*". Also there are many stories of the Prophet Mohammad showing compassion to people, sometimes even the most cruel or sinful people. For example, in the Uhud Battle, even though the Prophet Mohammad's face was injured and his tooth was broken by thrown stones from the enemy, he refused to curse the unbelievers but asked for good to them from God, saying, "*O Allah, guide my people because they do not understand*". Concretely, then, when using a cognitive restructuring worksheet and having identified the negative automatic thought(s) behind the shame and guilt, alternative beliefs can be generated by keeping in mind of Muhammad or other compassionate religious figures, whose attitude provides guidance and perhaps direct scriptural input on the content of these alternative beliefs. You may add any other Islamic examples you think would be helpful.

Note: If there is an irrational component to be addressed here from the perspective of religiously integrative CBT, it would be those beliefs driving spiritual struggles which are related to feelings of low self-esteem or self-worth. In other words, counselors need to be on the lookout for people having spiritual struggles because they believe that God is punishing them or abandoning them because the client deserves to be punished or abandoned.

### **Forgiveness and Repentance (15 mins)**

\*\*\*This is a critical component not only of this session, but of the entire treatment. Give yourself enough time so that you are not rushing through this section. Allow client time to provide feedback.

Spiritual struggles often involve resentment and unforgiveness. Forgiveness can be a powerful antidote for some spiritual struggles (e.g., resentment, anger, bitterness) and an integral part of the process of healing. Indeed, research has shown strong relationships between emotions such as anger and resentment and physical health problems and compromised immune functioning.

This can be a sensitive topic for some people. And, it has the potential to come across in a self-righteous and inconsiderate manner. We want to avoid this at all costs. One way to introduce this topic is by asking the client about her definition of forgiveness and of repentance before presenting these as resources. This allows you the chance to discuss any misperceptions or concerns about these topics and the reason you would like to discuss them as part of treatment.

*In the Koran, forgiveness of Allah is mentioned almost 124 times, so we know from the sheer number that this is an important topic to God. On the other hand, according to the verse 24(Noor):22, people forgiving each other is closely related to God forgiving them: "let them pardon and forgive, do you not yearn that Allah forgives you?"*

*Prophet Muhammad (PBUH) was a true example of forgiveness himself. When he eventually defeated the unbelievers and entered Mecca in his victory, he forgave all of those who tortured him and his companions for years, and told them: "Go! You are free!"*

*The topics of forgiveness and repentance are also highly relevant to our emotional and physical health. Many scientific studies have revealed that strong negative emotions can harm us physically and emotionally. For example, our immune system becomes compromised by continuous feelings of anger and resentment. That means our bodies can't fight off infections and viruses as effectively as they can when we are experiencing positive emotions. Indeed, every system in our body can be negatively impacted by the stress of negative emotions, such as bitterness and resentment.*

[elicit feedback from client]

*There are verses in the Koran that point to a mind-body relationship. One of the most typical is 12(Yusuf):84 about Prophet Jacob, which says, "and he (Jacob) turned away from them, and said: alas for Joseph! And his eyes became white on account of the grief" We learn from this verse that our body is connected closely with our soul, and extreme negative emotions, even when justified, can harm bodily organs. So if we harbor unforgiveness and bitterness toward others, God, or ourselves, then our souls suffer and because of this nothing else in our life can be enjoyed either.*

*The Koran makes it clear that God wants us to be well and strong, physically, emotionally, and spiritually. We also have a role to play. We have to be obedient and deal with the negative emotions (including unforgiveness), thoughts and deeds which God calls sin so that God's power is able to flow freely in us and on our behalf. As a Muslim, repentance and forgiveness are among the main tools you have been given to deal with negative feelings toward others and yourself that are due to being wronged. Before we discuss what the Koran had to say about repentance and forgiveness, I'm interested in hearing how you define these two concepts.*

*What does forgiveness mean to you?*

*How would you define repentance?*

Continue this discussion until you feel you have a clear understanding of how the client defines forgiveness and repentance and whether or not this is a difficult and/or sensitive topic for the client.

*Now I'd like to share with you some of the things that the Islam teaches us about repentance and forgiveness. We know that because God is all-knowing, He never forgets anything; however, it says that when people ask for forgiveness, when they repent and believe in Allah and do good, He "will change their evil deeds into good deeds; Allah is ever forgiving and merciful" (25(Furqaan):70). The Koran defines forgiveness as canceling the debt; no longer holding someone accountable for their action and its consequences. It doesn't say forgiveness is seeing the action as okay now. Sin is never okay with God.*

[elicit feedback from client]

*God commands us to forgive others as He has forgiven us. That doesn't mean He wants you to change your mind and decide that what happened to you was right or justified. As I mentioned, God never says that our sins are good deeds, but He may spare us from punishment and retribution. Prophet Muhammad himself is an excellent example. He never said that the unbelievers' deeds of killing, torturing and abducting the believers were ok, but he forgave them and gave up his right to retaliate. So what forgiving someone does mean is that we give up the right to hold this action against the person. We give up our right to feel resentful, bitter, and angry. When we make a decision with our will to forgive someone, even when we don't feel like it, God then begins to change our feelings. Usually our feelings are the last part to change. That doesn't mean you haven't forgiven, it just means your feelings having yet come into alignment with the decision you made with your will to forgive.*

*What do you think about this definition of repentance and forgiveness?* [elicit feedback]

*Some of the most common spiritual struggles people face include resentment, anger, and bitterness.*

If you have not already discussed these above, ask the client now if she has experienced any of these emotions as a result of her medical illness and/or depression:

*Have you experienced any of these emotions as a result of your medical illness and/or depression?*

*Do you think repentance and forgiveness would be helpful tools for helping you to overcome your feelings of (insert specific feelings here)?*

*Is there anyone you would like to forgive? That could include others, yourself, and even God (although He never sinned against us, we can perceive a wrong against us in our minds).*

*Is there anything you would like to ask forgiveness for (repent of), either from God or from others?*

### Forgiveness and Repentance List (10 mins)

**\*\*Note:** You may not have time to generate the list and/or pray the prayers of forgiveness and repentance in this session. There are worksheets for both of these activities in the client workbook. You can direct the client's attention to these worksheets (Instructions on pages 44-45 and exercise on page 46) and review the instructions so that the client can complete this exercise on her own this week.\*\*

1. If there is time, and if the client answered positively to either or both of these questions, ask the client if she'd like to make a list of those she needs to forgive or the things for which she needs forgiveness.
2. If there is time, you can give her the choice of praying prayers of forgiveness and/or repentance now or at a later time. If she chooses the latter, come up with a specific plan of how and when she will do this and have her write a reminder note for herself.

**Do not push the client to engage in anything she does not wish to do.** If there is no one she needs to or wants to forgive, or anything she wants to seek forgiveness for, let her know that this is okay and move on to other spiritual resources that help us with spiritual struggles. Let this didactic be food for thought and leave it at that. It may be that in time the client may want to revisit this topic with you. As you end this section on forgiveness, give her permission to discuss it with you again should she so desire in the future.

#### Forgiveness Imagery Exercise

Again, if there is time, you can lead the client through her list and ask her to pray something like the following for each item on her list. It is important that the prayers be specific and that she does not just offer one blanket prayer for all the things listed.

*“O God, I purpose and choose to forgive \_\_\_ (the person) for \_\_\_ (the action). I release him/her and cancel their debt to me completely. I will no longer hold any accusation against them. I ask that you would forgive them too for this sin and separate the sin from them forever. Please relieve me from the unforgiveness/bitterness (or other feelings against this person) that I have stored in my heart. I give you all my feelings of \_\_\_ and ask that You would cause my feelings to line up with my decision to forgive \_\_\_ (the person). I choose to forgive myself and ask you to forgive me. Thank you for forgiving me and making me righteous in your sight. O God, please heal my heart and tell me your truth about the situation.”*

You can then lead her in prayer, having her say the prayer out loud herself. After she has finished praying, you can lead her through an imagery exercise such as the following:

Instruct the client to close her eyes and to imagine herself standing or prostrating before Allah or God. Then instruct her to give the list of wrongs that others have done to her, and that she has just forgiven, to Him. Have her hand the list of her own sins to God, too,

and hear Him saying, “You are forgiven. Go in peace.” Ask her to continue to listen to hear what else God might have to say to her or what else He might do as she stays in this image. When the client indicates that she is finished, have her thank God for what He has just done for her.

Be sure to process this experience with her.

#### ABCDE Method and Forgiveness

It is often very helpful for the client to use the ABCDE method to help see the situation from the other’s perspective, causing the development of empathy, and allowing the client’s feelings to come into alignment with their decision to forgive. The ABCDE method used in previous weeks may have already brought some issues to the client’s attention that she would like to attend to through forgiveness. Use your knowledge from previous sessions to guide you in this discussion.

#### **Homework Assignment (10 mins)**

Ask the client to turn to page 44 of the Workbook to follow along with you.

##### 1. Memory Verses

*"We shall certainly test you with something of fear and hunger, and loss of goods, life and fruits; and give glad tidings to the patient. Who, when a misfortune befalls them, say: surely we are Allah's and to him we shall surely return. On those will be blessings and mercy from their lord; and those are the really guided" (2(Baqarah):155-157).*

##### 2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer.*

##### 3. Spiritual Struggles

*It is important to remember the following points:*

- *It is normal to question God in the face of illness.*
- *It is normal to feel negative emotions toward God*
- *God created us to experience a range of emotions and He can accept all of them*
- *God wants us to be honest with Him and to bring all of our concerns to Him*

*If you and your therapist identified spiritual resources that would be helpful in addressing any spiritual struggles you have, make a plan to use these resources this week to address that issue. Spiritual resources include, but are not limited to, prayer, journaling, social support from friends, conversations/counseling with clergy, Koran studies, repentance and forgiveness, attending religious or spiritual services, attending support groups like the ones providing help for physical or mental disorders, attending activities sponsored by spiritual or religious groups, and discussion groups. Several ABCDE thought logs have also been included in the workbook for this session; this may also be a helpful tool in addressing spiritual struggles this week.*

#### 4. Repentance and Forgiveness

*Is there anyone you would like to forgive? That could include others, yourself, and even God (although He never sinned against us, we can perceive a wrong against us in our minds). Is there anything you would like to ask forgiveness for (i.e., repent of), either from God or from others? If yes, and if you did not address these in session, make a list of the people you want to forgive or the things for which you need forgiveness.*

*Take some time to pray about each item on your list. It is important that your prayers be specific and that you do not just offer one blanket prayer for all the items listed. You can use a prayer such as the following:*

*“O God, I purpose and choose to forgive \_\_\_ (the person) for \_\_\_ (the action). I release him/her and cancel their debt to me completely. I will no longer hold any accusation against them. Even now I release them from this sin. I ask that you would forgive them for this sin and separate the sin from them forever. Please relieve me from the unforgiveness/bitterness (or other feelings against this person) that I have stored in my heart. I give you all my feelings of \_\_\_ and ask that You would cause my feelings to line up with my decision to forgive \_\_\_ (the person). I also choose to forgive myself and ask you to forgive me. Thank you for forgiving me and making me righteous in your sight. O God, please heal my heart and tell me your truth about the situation.”*

*After you have finished praying, you might try closing your eyes and imagining yourself standing or prostrating before Allah. See yourself giving the list of wrongs that others have done to you, and that you have just forgiven, to Allah. Give the list of your own sins to Allah, too, and see Him crossing over these lists. Listen as Allah says, “You are forgiven. Go in peace.” Continue to listen to hear what else Allah might have to say to you as you stay in this image. When you are done thank Allah for what He has just done for you.*

#### 5. Contact Member of Faith Community

*If you have not already done so, please make contact with a person(s) in your faith community and plan a time to get together with them, ideally sometime this week.*

#### 6. Solicit feedback on how the session went today.

At this point it would be natural and easy for clients to become overwhelmed with the plethora of religiously integrative CBT strategies introduced. Counselor clinical acumen is necessary for choosing a strategy that seems to resonate best with a client at this point and go with it.

#### **Terminate the Session**

## SESSION 7: Gratitude

### Goals of Session

1. Introduction to gratitude and how this relates to the client's illness experience
2. Practice cognitive restructuring from a gratitude framework
3. Focus on religious gratitude
4. Introduce concept of giving thanks in all situations
5. Grateful behavior directed toward others

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions
- Gratitude Exercise: Counting Our Blessings
- Gratitude Exercise: Celebrating Our Blessings

### Set Agenda

*Our session today is called "Gratitude." We will discuss what it means to be a grateful person and how your feelings of gratitude may have been impacted by your experience with illness. We will particularly focus on religious gratitude and the things in your life for which you are grateful. We will also discuss gratitude toward others. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Homework Assignment Review (10 mins)

1. Memory Verse Review:
- 2.

*"We shall certainly test you with something of fear and hunger, and loss of goods, life and fruits; and give glad tidings to the patient. Who, when a misfortune befalls them, say: surely we are Allah's and to him we shall surely return. On those will be blessings and mercy from their lord; and those are the really guided"  
(2(Baqarah):155-157).*

3. Ask the client about his experience with contemplative prayer
4. **Examine Weekly Mood Rating.**

*Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

5. **Inquire whether the client met with a companion from the faith community and what transpired.** Of particular interest is the effect of the interaction on client mood.
6. **Process any issues regarding spiritual struggles** as discussed in the previous session. It can be difficult to talk about spiritual struggles and to express painful feelings towards God. Ask the client if he would you like to discuss what it was like to express these feelings and thoughts about God?
7. **Discuss the strategies the client implemented to manage spiritual struggles.** How did they work? What was effective? What was less effective? Identify whether anything fit into the religiously integrative CBT model for improving depression.
8. **Discuss the forgiveness exercise.** Did she complete the list? Did she pray prayers of repentance and forgiveness? If so, what was that like for her?

For situations that did not go particularly well try to make this a win-win situation; that is, how can the client turn what did not work particularly well into a learning experience? At minimum clients can observe that they managed to survive the situation despite its unpleasantness. This information can be used to point out to clients their unacknowledged reserves to battle against difficult environmental situations. In other words, their ability to hang in without being totally defeated can strengthen their belief in their own self-efficacy to manage and cope with worries and anxiety.

### **Introduce Religious Gratitude (5 mins)**

Much recent research has indicated a strong association between experiencing gratitude with both subjective well-being and positive mental health. The approach for using gratitude is slightly different from approaches used to this point. Except for increasing the number of pleasant events, most of the emphasis has been on reducing emotional pain rather than increasing positive emotions. With gratitude, however, the results of positive psychology research is that some sadness and human discomfort can coexist with strong positive feelings to distract from or directly combat the depression.

It is important that the counselor focus this session on religious gratitude, not just on gratitude in general, which is what the CBT intervention will be focusing on (i.e., we need to differentiate our intervention, RCBT, from the CBT intervention). For example, you can focus on how gratitude is an important part of the client's faith tradition and involves being grateful to God and the things, people, and experiences God has provided.

Gratitude can be a difficult emotion for some people to grasp, especially when currently experiencing pain and suffering. Counselors need to be sensitive to this fact both for gratitude and for the upcoming session on stress-related growth. One way to approach this would be the following:

*Sometimes the best way to drive out negative emotions is to find alternative emotions that capture our attention and also improve our mood. It seems that we have difficulty*

*focusing on things that make us feel depressed or nervous when we are feeling grateful about something.*

*The Koran has a lot to say about being thankful. The word "Shukr" (thanksgiving) and its derivatives are repeated about 50 times in Koran, and many other verses talk about the favors of Allah, stating that favors of God are so plenty that no one can count them: "if you count the favors of Allah, you could not number them" (16(Nahl):18). Prophet Muhammad (PBUH) was a thankful worshiper of God and he was thankful and patient even when he suffered much in the way of Allah. These tell us that it doesn't matter whether we feel like giving thanks or we are experiencing negative or painful events in our lives; at all times, being thankful to God is recommended and beneficial because it can increase our tolerance, lessen our pain and suffering, and increase God's favors: "Be grateful to Allah, and whoever is grateful, he is only grateful for his own; and whoever is ungrateful, surely Allah is self-sufficient and praised (31(Luqman):12). Indeed, many times the word "thanksgiving" is paired with the words "sacrifice" and "offering". This suggests that giving thanks to God when we don't feel like giving thanks is seen as a pleasing sacrifice of our wills and desires to God.*

*Why do you think being thankful is God's will for us no matter what we are going through in life?*

This question can lead to a fruitful discussion that ties in with the themes of focusing on the positive, not letting our lives be driven by our feelings, and reframing our situations to see things from God's perspective.

### **Gratitude List Exercise (10 mins)**

*Our goal is to pay more attention to what we are grateful for instead of what is not going our way in life. This will not only induce positive emotions and help to reduce depression, but it will also be pleasing to God. A useful way to start this process is simply to make a list of the many different things in life for which you feel grateful. This can include people, places, and things which are either a regular part of life now, or which were present in your life in the past and made it enjoyable, satisfying, or else effective.*

Ask the client to turn to page 51 in the Workbook. Take five to ten minutes to guide the client in generating a gratitude list which is fairly comprehensive in terms of people in relationships, past and present experiences and opportunities, along with environmental features, such as one's living conditions, nature, or creation. This can be accomplished using the Gratitude Exercise – Counting Our Blessings\* worksheet (pg. 51). Have the client write the items down on her worksheet.

*I see that you have a number of things and people on your list about which you feel grateful. The next step is to put a number from 1 to 10 next to each item to indicate the degree of gratitude you experience from each one, where 10 is very grateful. This step should be completed fairly quickly; it's not necessary to give this part a lot of thought.*

*Let's take a look at some of the items you ranked as feeling the most grateful about. Could you share a little bit about what it is that generates that feeling in you? What about it that touches you when you think or imagine it?*

Counselors take a few minutes allowing clients to explore the meaning of their gratitude. This information should be most useful for placing it within cognitive restructuring and other ways of accessing grateful feelings to shift moods.

### **Practicing Cognitive Restructuring from a Gratitude Framework. (10 mins)**

*Now that we have this nice list of experiences for which you feel grateful, let's see if we can make gratitude feelings work for you in a positive direction. The way we can do this is similar to what we have done before when we have used the ABCDE approach to challenging our thoughts. The only difference this time is that when we come to the part where we challenge our negative beliefs we want to look at your gratitude list to see if any of these experiences are a good challenge or refutation of the negative beliefs and expectations.*

*Let's begin with any specific concern or depressive thought that you have had recently -- perhaps even today. Let's use our ABCDE Method for Challenging Beliefs Worksheet which can be found in your workbook to analyze the experience. (Or, you can work with a completed thought log from a previous week).*

Work with the client to complete this worksheet so there is enough data to continue the exercise.

### **Sample Dialogue for Cognitive Restructuring using Religious-Based Gratitude**

Counselor. *For persons like yourself who mention feeling grateful to God and for your faith, you may experience an added burst of positive feelings when you think about God or the divine in terms of gratitude. You mentioned on your list that one of the things that makes you grateful is the idea that the world right here is not the end of things. Could you elaborate on that a bit?*

Client. *With my condition I'm grateful that I can think of being with my friends and family in the next life. I'm grateful there is a loving God who is watching over us and who will bring us together eventually.*

Counselor. *How do you think that belief could help you with negative thoughts when they pop up such as resentment or self-pity?*

Client. *It helps to know that God is in charge and that there's some plan behind all this even though I'm not sure what it is. It also helps to know that in the end everything is going to turn out well.*

Counselor. *It's pleasing to know there's a plan and the outcome will be good.*

Client. *Yes.*

Counselor. *What if we go through your worksheet again, and when we get to the challenging section with religious resources think about those two ideas that God has a plan and the outcome will be good. Could you give that a try?*

Here the client and counselor pause as the client tries the cognitive processing.

Counselor. *What did you notice?*

Client. *This time it was more a sense of peace; knowing in my head that everything was going to work out for the good.*

Counselor. *And how did that work against the resentment and self-pity beliefs?*

Client. *I didn't think so much about that because I was focusing on the fact that someone was in charge for the long-range. I wasn't so much focused on this minute feeling resentful. It was kind of like, "This is temporary".*

Counselor. *And how much change did you notice in your mood improvement? What number did you reach?*

Client. *I guess I got down to a three or four.*

Counselor. *So you experienced noticeable change in your negative experience and mood.*

Client. *Yes.*

Counselor. *Once again, it would be important to think about whether this can work for you at the time these negative feelings pop up. Do you think that is worth a try?*

Client. *Yes I do.*

Counselor. *Well then this would be a second thing to try before next session. The idea would be to consider your gratitude to God when these negative feelings rise up and see whether they help improve your mood.*

Counselor and client collaboratively identify the kinds of feelings and situations where using this strategy might be helpful.

### **Gratitude Behavior Directed Toward Others (10 mins)**

*Up until this point we've been discussing generating grateful feelings toward people, events, and God. It is not necessary to leave it at that. We can also generate grateful behaviors toward others. For example, when someone does a favor for you, what do you usually say or how do you usually respond to that person?*

Here clients typically note that they say 'thank you' or sometimes return the favor.

*Exactly. That is a typical grateful behavior. Often, however, it's an automatic reaction that we don't give a great deal of thought to. What we want to do here is think more carefully about what others – friends, family, God – have done for us, and see if we have perhaps more to say or do for them with regard to grateful responses than we have in the past. Perhaps we have said simply 'thank you' but have not fully expressed in depth what their kindness or behavior meant to us.*

This next exercise to which this dialogue is directed can be an extremely powerful one, yet needs to be carefully coordinated. Full instructions are included in the Gratitude Exercise – Celebrating Our Blessings\* worksheet. Ask the client to turn to page 52 in the Workbook. The idea is for the clients to identify some person in their life whom they have "more to say" regarding how grateful they are for what that person has done and for how they have contributed to the person's well-being. Start by asking about two or three people to whom the client would have more to say regarding gratitude.

The exercise works best when the person selected is a living person. Often people regret that they did not express their gratitude to people who have died, but that is more suitable for healing shame or guilt rather than generating the positive emotion of gratitude. Therefore, in this dialogue the goal is to identify living people; in some cases people will want to intentionally name God but that is not a necessary or even a desirable part of the exercise. Just as the person needs to be alive they should be in some way able to be contacted by the client. The contact can be ideally in person. Telephone can be a powerful form of contact as well. Writing a letter sometimes is the only behavior a client is willing to choose. They do so because they themselves feel it would be too intense, or they are concerned that the person on the other end will be overwhelmed. Counselors can gently suggest the more direct modality of in person or telephone, but should not push the client into a form he or she does not desire.

For this exercise people select a wide variety of persons: former teachers, spouses, siblings, parents, other friends and relatives. This same strategy will also be used in the next session on altruism. That is, a very specific person should be selected along with concrete times and places as well as the means of delivery for the expression of gratitude.

1. Elaborate on the selected gratitude behavior.
  - a. Generally the gratitude behavior will be in the form of expressing the client's feelings of gratitude toward the individual. This ordinarily takes place in person, by phone, or letter. Counselor and client together must outline the content of the communication to ensure it touches all the important bases. Once again it should be done by writing out together the topics to be communicated.
  - b. The points that should be made universally are the following:

1). Precisely and specifically what it was that the other person did for you. Thus, "you were a nice person to me", is not as suitable as, "when I was in the hospital you came to visit me and you prayed for me every day."

- 2). Counselors should elicit as many of these concrete activities as possible for which clients feel grateful.
- 3). Clients should note what the meaning of the person's activities for them was. That is, how the activity or way of being made the clients feel, influenced their life, caused them to grow, taught them things they needed to know, etc.

2. Pick the time, place, and modality for expressing client gratitude.

Counselors and clients together should identify the specific way in which the gratitude will be expressed, as well as the specific time and place. This prevents the exercise from becoming too vague and thus not able to be accomplished. Counselors should make clear that they expect to review the gratitude exercise within the remaining sessions.

**Homework Assignment (5 mins)**

Ask the client to turn to page 50 in the Workbook to follow along with you.

1. Memory Verse

*“Remember me so that I will remember you, and be thankful to me, and do not be ungrateful to me” (2(Baqarah):152).*

2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks’ memory verses or other favorite scriptures you may have.*

3. Grateful Feelings Exercise: Counting Our Blessings

*Use your gratitude list, particularly your gratitude toward God for all that He is and all that He has done, as well as gratitude for those in your faith community, to help challenge negative thoughts and to replace negative emotions. Continue to add to your gratitude list this week as you think of more things for which you are grateful.*

4. Gratitude Expression Exercise: Celebrating Our Blessings

*Express your feelings of gratitude toward the individual you identified in session. This ordinarily takes place in person, by phone, or letter. Complete at the specific time and place you chose in session. Remember to include the following:*

- *Precisely and specifically what it was that the other person did for you. Thus, "you were a nice person to me", is not as suitable as, "when I was in the hospital you came to visit me and you prayed for me every day."*
- *Include as many of these concrete activities for which you feel grateful as possible*
- *Be sure to note what the meaning of the person's activities was for you. That is, how the activity or way of being made you feel, influenced your life, caused you to grow, taught you things you needed to know, etc.*

5. Solicit feedback on how the session went today.

**Terminate the session**

## SESSION 8: Altruism and Generosity

### Goals of Session:

1. Review gratitude exercises: Gratitude Expression and Grateful Feelings
2. Introduce the notion of expressing religious gratitude by being generous and practicing altruism.
3. Religious motivation for altruism: Verses from the Koran pointing to altruism
4. Altruism Exercise

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions
- Altruistic Acts

### Set Agenda

*Our session today is called "Altruism and Generosity." This session builds on our session on gratitude last week. We will explore how we can express religious gratitude by being generous and engaging in altruistic (positive, kind) acts for others. We will discuss some verses from the Holy Koran that point to altruism. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Homework Assignment Review (10 mins)

1. Review Memory Verse:

*"Remember me so that I will remember you, and be thankful to me, and do not be ungrateful to me" (2(Baqarah):152).*

2. Inquire about use of contemplative prayer
3. Review Mood Rating Scale

*Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

4. Review gratitude exercise, if the client has carried it out. It is likely that the client carried out either the gratitude expression exercise or the grateful feelings exercise. Time should be made for either or both. In the event that neither was carried out,

explore this with the client and tweak, if necessary, whichever exercise to make it more possible to be accomplished.

#### **Review of Grateful Feelings Exercise: Counting Our Blessings**

Begin with the grateful feelings exercise and review the impact that carrying out the exercise had for the client. The focus of this review should be on what happened as the client maintained her attention on people, places, and things for which she is grateful. In general, clients report that such focus has an uplifting effect on their feelings. Counselors should inquire as to why clients think this effect occurred.

The goal of the inquiry is to get at the meaning of being grateful -- that is, when I focus on things to be grateful about, what kind of person do I become, what does that say about me? Clients may only say it made them feel better and this is okay. However, to get the most out of the exercise it is useful to have the client reflect back on what gratitude does to and for their character.

It is especially useful to connect grateful feelings to any events, experiences, or situations that have a direct or indirect religious meaning. For example, people may speak about feeling grateful for the beauty of the universe, and with some gentle questioning this may come back to feeling grateful for a God who created the universe.

#### **Review of Grateful Expression Exercise: Celebrating Our Blessings**

Follow this up with a review of the grateful expressions exercise. The point of the review is to help clients see the value in explicit expressions of gratitude. Once again, careful inquiry may relate these feelings to the kind of person clients want to be. At times, this exercise can be quite powerful emotionally so counselors need to pay attention and debrief with sufficient focus so that clients fully process what has happened.

Once again, counselors should attend to whether or not grateful expression was connected directly or indirectly to religious meaning. If so, that meaning should be explored in some detail.

#### **Assess Client's Desire to Continue to Develop Value of Gratitude**

Finally, the ultimate goal of both generating grateful feelings and generating grateful expressions is to determine whether or not clients wish to continue developing these values in their life, and what this connection can have for them in light of their present suffering. The more immediate goal is to determine whether clients are willing to incorporate generating grateful feelings into their everyday life. This can be done via conscious focus using the worksheet

#### **Catch up Time (5-10 mins)**

Use a few minutes now to catch up on any material you may have run out of time to address in previous sessions.

### Introduce Altruism and Generosity (10 mins)

*The purpose of this part of our treatment is to re-focus our attention to the healing aspects of giving to others and being generous, even if to a limited degree. Research tells us that if we pay even a little attention to giving to others that, over time, we end up feeling better ourselves. We also know that one of the most prominent characteristics of Islam is its focus on caring for other people and helping them. Many verses in Koran praise those who help other people and solve their problems and are generous to the needy, such as: "Righteousness is not whether you face towards the east or the west, but righteousness is to believe in Allah and the last day and the angels and the book and the prophets, and to give wealth however cherished, to kinsmen, to the orphans, to the needy, to the destitute traveler, and to the beggars, and to ransom the slaves . . ." (2(Baqarah):177). God has a neat way of rewarding us when we obey him: giving to others and being generous has more positive an effect on the giver than it does on the receiver! This positive effect can be both in this world (as, for example, a positive shift in our spirits), or in the afterlife, as said in the Holy Koran: " the parable of those who spend their property in the way of Allah is as the parable of a grain growing seven ears (with) a hundred grains in every ear; and Allah multiplies for whom he pleases; and Allah is ample-giving, knowing" (2(Baqarah):261), and: " Whoever brings a good deed, he shall have ten like it, and whoever brings an evil deed, he shall be recompensed only with the like of it, and they shall not be dealt with unjustly" (6(Anaam):160).*

[elicit feedback from client]

*The dark side of depression and physical illness is how easy it is to forget the curative nature and importance of giving to others. It is part of our human dignity to care for and take care of people in need. When we cut ourselves off from that quality, we have lost something of ourselves. However, because of our own pain it is easy to become self-focused -- and this is quite natural. It is very difficult to think about a neighbor's needs when you are experiencing acute pain yourself. In those situations it is necessary to take care of yourself first. However, most of us fortunately do not experience this intense level of pain every moment of our lives -- even though we have a chronic illness. Most of us have windows of peace or relative calm where we could be available to others if we planned properly*

*Koran greatly values altruistic acts. According to the Holy Koran, giving to others while needy ourselves, is very much praised, as Koran praises the first Muslims in Medina who freely divided their properties with other Muslims who migrated toward them from Mecca: "They prefer them above themselves, even though they themselves may be in poverty" (59(Hashr):9). Another impressive story is told in the Surah Al-Insan, in which the righteous are described as people who give their property to the needy despite themselves needing and loving it, and say: "we feed you only for Allah's sake; we don't want from you any recompensation or thanks" (67(Mulk):9).*

*Although one of our motivators to engage in altruistic acts is for our emotional benefit, the most important motivator to give to others should be to obey Allah's command and*

*follow the example of His prophet. Muhammad (PBUH) was generous with his time, his energy, his resources; indeed, his generosity involved great sacrifice: he spent his entire life to restore us to a right relationship with God. We are made in his image and are being transformed to be more like him. Part of this transformation to be more like him is to give generously, even if it means sacrificing something to do so.*

1. Assess what the client what thinks of the notion of altruism and generosity and how this is (or is not) tied into their identity and practice as a Muslim.
2. Assess the change in mood they may have experienced when being generous and giving to others. Ask for specific examples in their past.
3. Assess how their illness and/or depression have impacted their altruistic focus and activities.

### **Example of Dialogue with Client:**

Counselor. *In what ways have you been able to give to others since you have been ill?*

Client. *Not too often really. It seems like everyone around me has to pay attention to me, so I'm the center of attention all the time.*

Counselor. *And what does that feel like?*

Client. *In some ways it's okay. It's good to know others are around. But in some ways it gets to be tiresome. Everyone doing for you and you not doing for anyone else.*

Counselor. *Are you still interested in carrying out this value?*

Client. *Yes I am. I just can't seem to figure out how.*

Counselor. *That's great. That's exactly what we want to spend some time talking about right now.*

If the client goes in the other direction of mentioning ways in which he or she has continued to be generous and altruistic, then the counselor should explore what that feels like on the occasions when that has happened. Usually people will talk about how it felt good. The counselor than should pick up on this and talk about how systematically planning to reach out to others and help them is what the focus of this time will be.

### **Religious Motivation for Altruism (5 mins)**

From the religious perspective, remind the client to connect their own goals of helping others with the famous passage in the Koran in which Allah describes people who do good, such as giving people a goodly loan and so on, are as if really doing it to Allah, and it will be ultimately beneficial for themselves: "... *Lend Allah a generous loan, and whatever of good you send on beforehand for yourselves, you will find it with Allah; that is best and greatest in reward...*" (73(Muzzammil):20).

You can also use from Koran the following verse (59(Hashr):9) to increase the client's motivation. "...They (Medina City people) prefer them (Muslims withdrawn from Mecca

to Medina) above themselves, even though they themselves may be in poverty; and everyone who is saved from the greed of his own soul, they are the successful ones”.

[Elicit feedback from client]

### Caution

At the same time, counselors want to be on alert for clients whose lives start to resemble slavery; where they are constantly doing for others, even in their impaired condition. For these clients the focus of the session should be on the obligation to take care of themselves. According to Holy Koran, we are all Allah's properties and do not belong to ourselves per se (*"we belong to Allah and to him we shall return"* 2(Baqarah):156), so we have the duty to take care of ourselves too.

### **Altruistic Exercise (10-15 mins)**

The worksheet Altruist Acts\* is provided in the client's workbook on page 56. Please have the client turn to this worksheet. There is space available to plan three altruistic acts. It is important to ensure that the client is not expecting a reward or gratitude from the person helped, but is motivated by her relationship with God and reward and praise from God (not man).

1. The counselor discusses with the client ways in which the client has been helpful in the past and ways in which he sees he is able to be helpful now.
2. Together counselor and client collaboratively make a list of situations and possibilities. Then, as we typically do with strategies such as this before implementation, the client is asked to rank them from easiest to most difficult. This can be done by using a simple percentage such as from zero to a hundred, with 100 being the most difficult of all.
3. Together counselor and client select which of the easier altruistic acts the client would like to initiate. This is discussed in some detail in terms of the questions who, what, when, where, why, and how of carrying out the activity. This makes the activity concrete and provides a visual picture of what is needed to carry it out, and also anticipates any barriers that could be present.
4. Next, client decides on the frequency of the altruistic acts. One trap is for clients to get very enthusiastic but then find that they have overreached and give up making any attempts. Counselors should be alert to this trap and consider reining in activities that will be ultimately too much at this point.
5. A second concern is how others in their environment will react to these behaviors on the part of the client. Sometimes family and friends in their concern will worry that such activities tax the clients' emotional or physical energy and caution clients about carrying them out. Counselors should ask whether or not family and friends will support them in doing these activities and, if not, what they might

want to say to them. Here the counselor can brainstorm ways to describe their goals and perhaps even role-play what to say in such an event.

6. In order **to increase motivation for selecting altruistic acts**, counselors should explore with clients how they will probably end up feeling should they carry out their goal of giving to others. The idea here is to accentuate whatever is related to positive desires, ability, and importance or benefits from giving to others.
7. **Remind the client to connect their own goals of helping others with the verse 73(Muzzammil):20 in Koran**, in which God describes that anyone who does good (like giving others a goodly loan) is the same as doing it directly to God. If you have not already read this passage to the client or had him read it himself, do so now.

For some clients this will be a familiar passage; for others it will be vaguely familiar. In either event discussion around the meaning of this passage for the clients personally at this point in their life can help generate additional motivation for being altruistic.

8. **In addition to the altruistic acts the client has chosen, ask the client to pray for someone Daily this week.** Help her to choose the person she will lift up in prayer. Perhaps the person she has made contact with from her faith community. Pray for this person each day. Emphasize that praying for another helps to get one's mind off of one's own problems and is a great way to be generous with one's time and energy. It also helps to put one's own problems in perspective.

### Homework Assignment (5 mins)

Ask the client to turn to page 55 in the Workbook and follow along with you.

1. Memory Verse

*“Who is he that will lend Allah a good loan so that he will multiply it for him many times! Allah grasps and outspreads and to him you shall be returned”  
(2(Baqarah):245)*

2. Contemplative Prayer

***Spend 20 minutes a day in contemplative prayer.*** Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.

3. Altruistic Acts

*Carry out the specific altruistic acts to be done for the particular persons at a particular time you and your therapist chose in session. Be sure to have more than one option in case other people are unavailable. These assignments, like others, should be written down so that no confusion remains.*

4. Pray for Someone Daily

*If you have not been doing so already, begin to pray daily for the person in your faith community with whom you have begun to have contact. Praying for someone other than ourselves helps to get our minds off of our own problems and is a great way to be generous with our time and energy. It also helps to put our own problems in perspective.*

5. Solicit feedback on how the session went today.

**Terminate the Session**

## SESSION 9: Stress-Related and Spiritual Growth

### Goals of Session

1. Introduce and develop the concept of stress-related growth, especially from a spiritual perspective
2. Explore ways the client may have experienced positive growth through the illness experience
3. Help the client “look for the positives” through a series of exercises.
4. Revisit the importance of interpretation: Story of Joseph (Yusuf) in prison and Job (Ayyub) in the Koran

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions
- Looking for the Positive
- Spiritual Reflections

### Set Agenda

*Our session today is called “Stress-related and Spiritual Growth.” We will explore the concept of stress related-growth, especially from a spiritual perspective. We will complete a series of exercises that will help you to look for the positives in your life, even in the midst of the negative things you have been experiencing. To remind ourselves about the importance of the interpretations we make, we will read how several individuals in the Koran were able to change their perspective about an event that seemed quite negative on first glance. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Homework Assignment Review (7 mins)

1. Memory Verse Review:

*“Who is he that will lend Allah a good loan so that he will multiply it for him many times! Allah grasps and outspreads and to him you shall be returned”  
(2(Baqarah):245)*

2. Review experience with contemplative prayer.

3. Review Mood Rating Scale

*Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

4. Review altruism exercise.
5. Review exercise to pray daily for someone. Did they do this? What was the experience like?

Counselors should carefully explore the emotional reaction to carrying out these activities, as well as the effect on their physical well-being.

The goal of this review is to determine to what degree the client desires to make altruistic activities an ordinary part of his or her life. Clients have any number of common responses:

1. For some, these are activities they commonly engage in so that such practices do not significantly alter how they operate. For such people, the discussion should center on what it was like to intentionally connect these events to the religious motivation discussed in the previous session. Thereafter, the discussion should focus around ways in which they can continue to carry out such activities and plans for themselves despite their medical condition.
2. For others, it will be a return to activities that they once engaged in. For these individuals the discussion will be whether this is something they want to continue. Also discuss what it was like to intentionally connect these events to the religious motivation discussed in the previous session. Thereafter, the discussion should focus around ways in which they can continue to carry out such activities and plans despite their medical condition.
3. For others, it will be like a breath of fresh air and will create a whole new way of thinking about who they are and what they are doing. For such people the counselor will want to take considerable time in discussing the implications of these activities in terms of their well-being and religious perspective. Also discuss what it was like to intentionally connect these events to the religious motivation discussed in the previous session. Tying these activities into ABCDE model will connect it to the overall CBT model.

### **Introduce Stress-Related Growth (8 mins)**

The research literature in positive psychology offers ample evidence that many people who are suffering from serious trauma, losses, or intense medical conditions are able to find something positive about a painful experience or one that causes suffering. Naturally, this is an extremely sensitive area and one in which counselors can come across as boorish and unfeeling. Also, depending on how it is introduced, clients may end up feeling even more shame and guilt because they have not been able to experience any positive outcomes as a result of their suffering. Thus, this whole topic can have exactly the opposite effect as intended and come across as still one more demand clients are unable to fulfill.

To help steer the conversation in a productive manner, counselors can begin broadly by asking about changes rather than by first talking about positive outcomes.

*Before we finish our work together there is one last topic that may be helpful. We have reviewed many topics that are related both to your depression and your medical condition. We would like to finish by taking a bird's eye view of all the changes that have occurred as a result of your medical illness and/or depression. Some of the changes are things you definitely did not want and some of the changes might have been unexpected. I'm wondering if you can talk about some of the changes that were expected and some that were not expected.*

Some such opening gives the client permission, so to speak, to delve into the positive changes that have occurred. Counselors can word this opening in any general way they like as long as it does not descend into the pitfalls mentioned above. After that opening counselors listen carefully for anything that strikes them as related to a positive shift.

What you are looking for specifically are positive changes in their own personal relationships with other people (e.g., I didn't know how much so-and-so really cared about me), positive changes that may have occurred for the people close to them (e.g., bringing people closer together, having family members who were formerly estranged now speaking to each other), positive changes in their own character or abilities (e.g., I am a much stronger person than I was before; I can tolerate so much more than I thought I could; I am a much less selfish person than I was).

When clients mention those kinds of changes this is what counselors should zone in on with their reflective listening skills and explore these in detail.

Once positive changes have been broached as a topic it is relatively easy to tag these changes onto religiously integrative CBT. Counselors now have a very large database of information about the client on which to draw. For example, if the client has admitted to spiritual struggles, counselors can invite clients to consider what these positive changes mean in reference to their strong negative feelings about being abandoned by God. The ABCDE Thought Monitor worksheet\* and Dispute Questions\* from Session 4 can be used to generate alternative beliefs for the negative ones driving emotional distress and self-defeating behavior. Thus, the client has come full circle from focusing on beliefs that lead him or her into a negative downward spiral and now has a new toolkit for generating a positive upward spiral.

### **Looking for Positives (10 mins)**

In this section, introduce clients to the Looking for Positives\* worksheet (page 60). It is hoped that this exercise will top off their experience over the last nine weeks, and at least create the potential for a positive summary of the experience, as well as the thrust of the therapy itself.

*Feelings of discouragement, sadness, and helplessness are common and normal when dealing with physical and mental illness. What happened to you may seem terribly unfair. It may be terrifying. It may feel like your body or medical system has betrayed you and can no longer be trusted. These thoughts and feelings are certainly understandable. The challenge of coping effectively with illness is to learn how to both acknowledge and accept these changes, losses, and your feelings, and at the same time actively pursue growth, meaning, purpose, an appropriate sense of control, and a healthy relationship with your body, others, and God. Many describe illness as an end of life; others as an end of a way of life. Some are able to see the possibility of a new beginning; that perhaps even though they never asked for this experience of illness, nor would they wish it on anyone else, that something positive can come from it.*

[elicit feedback from client]

*Koran provides several good models of how we can find meaning and even good when our dreams are thwarted and we suffer from negative experiences. Early Muslims were good examples themselves. Many times, they suffered troubles and difficulties including death and injury in the wars and hunger and thirst, but they saw both victory and defeat good for them, because both were in Allah's way: "Say (to the enemy): 'are you waiting for anything to befall us except one of the two excellent things (victory or martyrdom)?...'" (9(Tawbah):52).*

*Another Koranic example is prophet Yusuf, who was thrown into the well and spent many years innocent in the jail, but these unfortunate events led him to become a high authority in the land and to be an example of morality among the people. So as is said in Surah Yusuf: "certainly those who keep from evil and are patient, Allah does not let the wage of the good doers go to waste" (12(Yusuf):90).*

*Yusuf wasn't even angry about being imprisoned for nothing. Instead, he saw his prison as a means to fulfill his purpose of advancing his religion and preaching, as he said to his fellow prisoners: "My fellow prisoners, say which is better, many gods at variance, or Allah the one, the conqueror?" (12(Yusuf):39). No matter what situation he finds himself in, he trusts that God will take care of him and that God has a purpose for the situation, even if it seems negative or confusing. When we encounter these types of situations in our lives, we can be encouraged by Yusuf's response and ask God to help us see the meaning, purpose, and even the positives in the situations we face.*

*Maryam daughter of Imran (mother of prophet Jesus) is another example in Koran. She was in a very difficult situation: becoming pregnant, hungry, and thirsty, and becoming so sad that she once wished to be dead, and said, "Oh, wish I had died before this and become forgotten!" (19(Maryam):23). But God never forgot her and soon she was relieved and became an example of good and believing women in the Koran.*

[elicit feedback from client]

### “Looking for the Positives” Exercise (10 mins)

(Note: these are the exact words at the top of the client’s Looking for Positives\* worksheet).

*It may sound insensitive to suggest there is anything positive in pain and suffering, yet many people who cope admit they eventually make sense of the situation or find something that benefited them or others. This does not mean they like what happened or stop wishing it had never happened. They discovered that despite the pain they went through they could also describe positive changes in themselves and others or found parts of it that made sense. In the long run, finding benefits seems to give people a measure of serenity.*

Have the client turn to the Looking for Positives\* worksheet in her Workbook on page 60. Answer the three questions in session. Have the client write down her answers during this time so that she can refer back to them later. (Note: The Spiritual Reflections\* worksheet will be assigned as homework so you will not ask these questions in session.)

1. *In what ways, if any, can you make sense of what happened to you?*

2. *What positive changes have you noticed as a result of what happened?*

- *In you?*

- *In others and the people close to you?*

- *In the way you look at the world?*

- *In your religious views and belief?*

3. *How can these changes help you live your life more fully?*

#### Need to Remind Self Often

It does little good for clients to simply list the positive changes or benefits that have occurred as a function of their struggles. It is absolutely essential for benefit-finding to be effective that clients remind themselves at regular intervals of these benefits.

#### Focus on Meaning of Benefits or Changes

The bulk of the discussion should focus on the meaning of the benefits or changes and what the client can do in order to remind himself or herself of these changes.

#### Incorporation in Prayer Life

The suggestion should be raised about how these changes can fit into the client’s prayer life. If he has a brief morning or evening prayer, what does he want to say to God about

these changes? How do these changes affect his relationship with God? What do they say about how he wants to relate to God given that good and bad can co-exist with each other?

### Religion and Benefit Finding

Benefits and positive changes have embedded within many aspects of consolation. At some point, most people turn to their religion and faith for consolation. Up until this point this has only been mentioned marginally. Now, however, it is easier to point out the connection between benefit-finding and its associated consolations. This feature should be emphasized when it is apparent.

You may or may not want to address the following questions with the client.

- When people attend to new capacities and strengths, what does this say about their ability to manage their lives with its pain and suffering?
- If some people are now more conscious of God's presence in the universe, how does this console them as they face their uncertain futures?
- If positive outcomes are possible, and you – the client – have witnessed them, what does this say about the possibilities in the future as you deal with what you are handed?

### **The Importance of Interpretations (10 mins)**

**\*\*If you have time, this is a good illustration to share with the client** to demonstrate, again, the importance of our interpretations. It also ties in well with today's theme of seeing the positive in a seemingly negative situation.\*\*

*I'd like to share a story with you from the Koran that demonstrates how important our interpretations can be. The story of Talut in Koran is a good example of how people can have very different interpretations of the same situation that result in different outcomes. Two peoples' interpretations of a situation can cause them to experience very different emotions from one another, which could lead to different behaviors and outcomes (2(Baqarah):246-253). According to Koran, Talut was one of the Israelites kings about to fight their enemy Jalut and his large army. When Talut departed with his smaller army, some of his people said, "We have no power today against Jalut and his forces"; but others who had stronger beliefs said, " How often has a small party vanquished a numerous host by Allah's permission, and Allah is with the patient". Fortunately, they eventually followed the latter thought and at last, they successfully defeated Jalut's army.*

*Every day we are faced with the same sort of choices. We can choose to look at the negative things in our lives and predict doom and destruction—because it can certainly look that way! Or, we can go to God's Word and see what he has promised his people and base our view of ourselves, our lives, and our futures on his words. This will lead to feelings of peace, joy, and hope, and will allow you to move forward and through the difficult things in your life instead of retreating from them or giving up. We'll never be*

*perfect with this. We all fall into complaining and seeing things from a negative perspective and always will—Thank God for grace! But the important thing is to become aware of this and to challenge those negative beliefs and predictions as soon as you notice them using the promises of God. It gets easier with practice!*

*What are your thoughts about this story?*

*How would you summarize the moral of the story?*

(Note: You just summarized the moral of the story for the client, but asking her to tell you in her own words allows you to check her understanding of it and correct any misinterpretations.)

### Homework Assignments (5 mins)

Ask the client to turn to page 59 in the Workbook to follow along with you.

#### 1. Memory Verses

*"(Prophet Yaqub said) O my sons! Go and inquire respecting Yusuf and his brother, and despair not of Allah's mercy; surely none despairs of Allah's mercy except the unbelieving people." (12(Yusuf):86,87)*

#### 2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.*

#### 3. Complete the Spiritual Reflections Worksheet

#### 4. Positive Changes

*Add to your list of the changes in your life that you could view as positive or that have caused growth, including spiritual growth. It will be helpful to look to your faith and God's promises in the Koran to help you view some of the changes that have occurred as positive.*

*Reflect on the meaning of these changes in terms of your character and the predictions you make regarding negative beliefs. In particular, what power do these changes give you to stop avoiding unpleasant experiences and to face them courageously?*

#### 5. Daily Prayer for Someone

*Continue to contact the person in your faith community and to pray daily for this person daily.*

6. Solicit feedback on how the session went today.

**Terminate the Session**

Remind the client that next week is that last week of treatment. Your client will likely have many feelings about ending treatment with you. Let them know that next week you will be processing her experience in treatment and how to maintain the gains she has made.

## SESSION 10: Hope and Relapse Prevention

### Goals of Session

1. Introduce the topic of hope as a general way of being that results from using religious cognitive and behavioral strategies
2. Discuss dreams and goals
3. Discuss what the client has learned/gained through these ten weeks
4. Review spiritual resources
5. Discuss how to maintain the gains in therapy through their faith, involvement in their faith community (receiving and giving support), and other spiritual resources
6. Termination of treatment

### Materials Needed in Client Workbook

- Homework Assignment Worksheet
- ABCDE Method for Challenging Beliefs Leading to Negative Emotions

### Set Agenda

*Our last session is called "Hope and Relapse Prevention." We will explore the concept of hope and faith, and how these two things can help us create and achieve new dreams and goals despite illness and suffering. We will then review what you have learned over the past ten weeks and the spiritual resources you have available to you. We will also discuss how to maintain the gains you have made in treatment. Finally, I will be interested in your feedback about your experience in this treatment study and what you found most helpful. And, as always, I will leave you with an encouraging memory verse from the Word of Allah.*

[elicit feedback from client at this point]

*Before we begin, I'd like to review your homework assignments and mood this week.*

### Review Homework Assignments (8 mins)

#### 1. Memory Verse Review:

*"(Prophet Yaqub said) O my sons! Go and inquire respecting Yusuf and his brother, and despair not of Allah's mercy; surely none despairs of Allah's mercy except the unbelieving people." (12(Yusuf):86,87)*

#### 2. Review experience with contemplative prayer.

#### 3. Review Mood Scale

*Using a scale ranging from 0 to 10, where 0 is the worst that you've ever felt in your life and 10 is the best you've ever felt, what was your mood like on average this week?*

4. **Looking for the Positives and Spiritual Reflections worksheets:**

Explore what worked in terms of being effective benefit-finding reminders. What did he experience when he found himself noticing any positive changes in his life as a result of his learning to cope with his medical and environmental struggles?

When clients mention any aspect of benefit-finding, counselors need to explore what is the meaning of this. That is, the fact that they can see positives even under their current difficult circumstances says something about the following:

- Who they are as persons.
- What their capacities are.
- How their worldviews can influence their everyday mood and life.

*Such reflections help us end on a note of empowerment and a sense of control over life's vicissitudes.*

5. **How did the client use his faith and God's promises to help view life changes as positive?**

**Hope (10 mins)**

Benefit-finding and positive changes naturally lend themselves to discussion about hope. Share this with the client and ask him the following questions:

- *What does hope mean for someone in a seemingly hopeless situation?*
- *Where can you find hope?*
- *What does hope mean concretely for you?*
- *How does your faith relate to your experience of hope?*
- *How can you hang on to hope?*

These questions are just different ways of benefit-reminding but couched in the framework of different religious terminology that may open up other perspectives.

*In the Holy Koran, it is emphasized that believers should be in a state between fear and hope (17(Israa):57, 23(Mumenun):9): fear from their sins and God's punishment, and hope to God's beneficence and mercifulness. Believers should fear their afterlife fate but **not** to the extent that leads to hopelessness; and should have hope for their kind God's mercifulness but **not** to the extent that leads to carelessness and sinning more. In fact, hopelessness from Allah's mercy is sometimes regarded as one of the greatest sins in Islam: "Surely none despairs of Allah's mercy except the unbelieving people" (12(Yusuf):87).*

*Prophet Muhammad (PBUH) was a good example himself. He suffered much in the way of Allah: he suffered severe hunger and insecurity for 3 yrs in the Abi Talib Valley, he suffered the death of his only beloved wife and beloved uncle after this period (his most respected and powerful supporters at that time), he suffered casualties and injuries in the wars, but he never was disappointed because he had his reliance on his Lord. Another good example in the Holy Koran is again the prophet Yusuf. He spent many years innocent in jail, and was about to be killed by his own brothers, but he always had hope in God's mercy, so even in the jail he continued to preach to his fellow prisoners and never lost his hope for God's mercy.*

[elicit feedback from client]

### **Meaning, New Dreams, and Spiritual Goals (7 mins)**

- *Do you feel that there is a greater purpose or meaning in what has happened to you?*
- *Do you have any new dreams as a result of your diagnosis?*
- *What about new spiritual goals?*
- *How might God help you change and achieve your dreams and goals?*

### **Termination Protocol (10 mins)**

The main idea before the nitty-gritty items that follow will be to offer the client an opportunity to reflect on the meaning of the therapy process overall.

- *What parts of the process did you find most helpful?*
- *Why?*
- *What parts seemed to help you with your depression?*
- *How and why?*
- *What parts helped you deal with your physical condition?*
- *How and why?*
- *Did anything in particular surprise you about the experience?*
- *Are there any other things you want to discuss before we end?*

At no point should counselors be defensive about any client response; rather, the use of reflective listening and empathy is especially called for here at the end. If the client asks a question which requires gathering information, let the client know someone from the research team will address that with him.

## Maintenance and Relapse Prevention (10 mins)

\*Note: The following are included in their workbook. Please review these points with the client now. You can direct his attention to page 66 in his Workbook.

### 1. Continue to Use the Tools Daily

*In order to maintain the gains you have achieved in treatment you need to keep using the tools you have learned.*

Ask the client to list some of the tools he has learned over the last ten weeks.

These tools include the following:

- *Challenging and changing your negative interpretations*
- *Gratitude*
- *Altruism (encourage a specific activity for a specific person)*
- *Finding the positives in your life*
- *Praying for member of faith community*
- *Maintaining communication with God*
- *Look for examples in the Koran for encouragement*
- *Spending time with others*
- *Connecting with your faith community, specifically the person(s) identified earlier in treatment*
- *Filling your mind and heart with the Word of God*

*One way to remind yourself to continue to put into practice the things you have learned is to incorporate them into a daily devotional period. Each day during this time you can review your thoughts and behavior with God to make sure they line up with the truth in His Word. You might find it helpful to use a journal during this time.*

### 2. Make Use of Your Spiritual Resources

*Spiritual resources include, but are not limited to, prayer, journaling, social support from friends, conversations/counseling with Islamic clergy, Koran studies, repentance and forgiveness, attending religious or spiritual services, attending support groups, attending activities sponsored by spiritual or religious groups, such as the activities organized in the mosques, and discussion groups.*

### 3. Anticipate Set Backs

*Remember that there will be set backs and times that are more challenging and difficult than others. It is at these times that it is even more important to engage in the activities and resources you learned, especially if you don't feel like it.*

### Final Homework Assignment (10 mins)

1. Memory Verse

*"Surly those who say, 'Our lord is Allah', and, further, stand straight and steadfast, the angels descend on them saying: 'don't be scared and don't be sad! And receive the glad tidings of the garden which you were promised!'"*  
(41(Fussilat):30)

2. Contemplative Prayer

*Spend 20 minutes a day in contemplative prayer. Begin by using the memory verse for this week, and then try with previous weeks' memory verses or other favorite scriptures you may have.*

3. Daily Prayer for Someone

*Continue to contact the person in your faith community and to pray daily for this person daily.*

4. Solicit feedback on how the therapy has gone overall for them.

### Final Thoughts

1. Be sure to thank your client for what he has contributed to the therapy experience, his hard work, courage and honesty in facing these most difficult times and topics.
2. Be appropriately open with what your client taught you personally so your client can have a sense of his own altruism despite his receiving help at the same time.
3. End with a supplication from Ali son of Hossein<sup>3</sup>. Read the prayer together (it is included on the homework page 67 for Session 10 in the Workbook).

O God, ...

Point me straight to:

Resist who is dishonest towards me with good counsel;

Repay who separates from me with gentle devotion;

Reward who deprives me with free giving;

Recompense who cuts me off with joining;

Oppose who slanders me with excellent mention;

Give thanks for good; and,

Shut my eyes to evil!

### Terminate the Session

