

G. Hussein Rassool. *Islamic Counselling: An Introduction to Theory and Practice*. Hove, East Sussex: Routledge, 2016.

Dr. G. Hussein Rassool is professor of Islamic Psychology and consultant at Riphah Institute of Clinical and Professional Psychology; director of studies at Al Balagh Academy's Department of Islamic Psychology, Psychotherapy & Counseling; and chair of Al Balagh Institute of Islamic Psychology Research, where he is head of the Department of Psychology and professor of Islamic Psychology. He is also the author of several books on addiction and dual diagnosis and papers on alcohol and drug misuse (Amazon 2016).

Islamic Counselling: An Introduction to Theory and Practice (2016) encompasses current theory, research, and an awareness of practice implications in delivering appropriate and effective counseling interventions for Muslim clients. This book is designed as an introduction for counselors and informs both the Muslim and non-Muslim reader about how the Islamic counselor's diverse roles can be integrated to incorporate spirituality and provide the guidelines for a potentially integrated theoretical framework.¹

Throughout his book, Rassool establishes respect for Islamic beliefs and practices as the greatest factor in treating Muslims. Based on this Islamic framework, he evaluates the most common secular theories, among them psychoanalysis and psychodynamic counseling, client-centered therapy, solution-focused brief therapy, and cognitive behavioral therapy, while also examining marital and addiction counseling approaches. Rassool differentiates between mainstream and Islamic counseling, and accepts those mainstream approaches and techniques that align with Islam or can accommodate the Qur'ān, Sunnah, *ḥadīth*, and Islamic ethics (p. 18).

Given that Islam is both an individual and a communal religion, Rassool outlines the importance of *naṣīḥa*: giving advice (when appropriate), educating the clients in Islam's creed (*'aqīdah*) and jurisprudence (*fiqh*), and working with them to facilitate their psychological and spiritual growth and development (p. 22). He believes that *naṣīḥa* is an Islamic obligation (*fard kifāya*), especially when a sufficient number of people are affected by a particular problem (p. 18).² Even though this obligation can be greatly appreciated by traditional and religious Muslims, Rassool over-emphasizes the directive approach, as such approaches need to be used with caution, especially when working with Muslim clients with varying cultural values and levels of religiosity. Nonetheless, *naṣīḥa*, as Rassool puts it, must be paired with the Islamic counselor's positive characteristics as a person with good psychological health, self-awareness, open-mindedness, empathy, unconditional positive regard, genuineness and congruence, non-judgmentalism, the instillation of hope, tolerance for ambiguity, cultural sensitivity, and competence (p. 20).³

¹ Summarized from the book's back cover.

² Rassool mentions that "[I]f a sufficient number of people perform it, then the obligation is lifted from the community as a whole, and it is obligatory according to the ability of the individual" (p. 18).

³ Here, Rassool embraces the Rogerian approach and includes various *ḥadīths* about the Prophet's (peace be upon him) characteristics and empathetic attitude toward others.

Rassool maintains that the ethical dilemma for Muslim counselors is the “fear of having to condone or support their clients’ requests for help with choices that might conflict with an Islamic worldview, such as issues related to abortion, pregnancy, assisted suicide, homosexuality, pre-marital sex, addiction, and gambling” (p. 88). Even as ethical dilemmas arise, he urges counselors to carefully consider the actions that need to be taken and encourages them to follow the six-step process of aligning with professional counseling ethics (p. 88).

However, the author remains mindful that Western codes of ethics are based on a preference for individualism rather than collectivism, and this insight supports the ethical relativistic view, namely, that ethical principles are culturally bound and context-dependent. Though he agrees that both ethical systems have some overlap, he also recognizes the need to develop an ethical framework for Islamic counseling, one based on spiritual, cultural, and professional perspectives (p. 91).

Rassool believes that one of the counselor’s most important and challenging tasks is to provide holistic and non-Eurocentric counseling to their Muslim clients (p. 14). He regards mainstream psychology as largely ethnocentric, an approach that neglects the mental health concerns of diverse social groups (p. 14). Cross-cultural competence is highly prized, as Western secular approaches will, as the author believes, fail to adapt to Muslim clients’ worldview. He mentions that an “individual’s perceptions and beliefs regarding health and sickness, especially mental health, are deeply rooted” (p. 14).

For example, on occasion the importance of community and family forces counselors to take phone calls from clients’ parents and listen to advice on what to say or hold a post-session query about the discussion (p. 14). While being anchored in Islam, Rassool takes a professional stance in such situations and advises counselors to reassure and thank the caller while respecting client confidentiality (Welter 2016). This example underscores the many existing bridges between Islam and modern theory and practice. In a similar collaborative spirit, he fills the book with references to various religious and psychological studies, many of which show the importance of spirituality to psychological well-being (Welter 2016).

When discussing the Imam’s role, Rassool notes the term’s linguistic-religious meaning of “to stand in front of” (p. 253). He also delves into its cultural-religious importance, stating that the term is fluid, for Imams are not like the Christian clergy and often have more diffuse, varied, and informal roles, which can include counseling others (pp. 253-55). Imams are “on the front lines” of Islamic mental health, though Rassool characterizes them more as religious authorities than psychotherapists: “During the counselling process, the Imam’s role is to help the client go through the re-examination of the basic tenets of Islam and behaviors compatible with the Qur’ān and Sunnah” (p. 255).

Rassool believes that premarital counseling is a prerequisite to marriage and significantly reduces the rates of divorce. He urges Imams and community leaders to require premarital counseling and education prior to officiating the marriage ceremony. In regard to marital counseling, Rassool encourages counselors to utilize a variety of mainstream approaches and techniques of therapies that are congruent with Islamic beliefs and practices. In addition to counseling, couples may consult with scholars regarding *fiqh* matters, request arbitration via tribunals, or *naṣīḥa* from family, community elders, Imams,

or Muslim counselors. While Rassool understands that a primary cause of conflict in marriages is an abuse of authority that validates certain power relations in the family, he neglects to offer reasonable solutions. Rather than advocating to restore an appropriate balance of power, he encourages the counselor to reinforce “a husband’s or a wife’s role in the marriage, regardless of how dysfunctional the relationship is” (p. 181). This approach, while appropriate for conservative populations, may create mistrust in the therapeutic relationship with modern couples, and serve to uphold dysfunctional power relations.

Rassool generally avoids Islamic history, leaving out the rich history of premodern Muslim health professionals as well as their conceptualizations of mental health and contributions to Islamic spirituality and psychology. The author’s sober and minimalist Islamic beliefs include dismissing Sufism, which he accuses of embracing sorcery and black magic and being condemned in Islam (Welter 2016).

Alternatively, Rassool presents a rich spirituality that highlights the importance of contemplation and emphasizes it as one of his central tenets: the remembrance of God. Though the author may appear to readers as authoritarian and theologically narrow, this simple spirituality offers a powerful vision of mental and emotional well-being (Welter 2016).

Rassool generally favors solution-focused brief therapy, because it mirrors his action-oriented and practical Islamic beliefs (Welter 2016). He also favors cognitive behavioral therapy for its “logical” and “cost-effective” nature, and its emphasis on reasoning and psychoeducation. On the other hand, he rejects secular psychoanalysis and its tendency to look back to earlier stages of one’s psychological development on the grounds that the individual does not need to delve into any forgotten life events or examine personal shadows and the subconscious.

Furthermore, he rejects the person-centered approach due to its non-directive and egalitarian approach, as he believes it will be “counter-productive in working with Muslim clients” who see the counselor as a professional, expert authority figure who is expected to provide structure and direction for clients coping with their problems (p. 129). Once again, Rassool conflates Islam with an authoritarian culture, which risks modern and younger readers viewing his position as restrictive. Though client-centered counseling’s nature presupposes the client’s unconditional acceptance, he adds that it is therefore “unfeasible to have a genuine artificial social relationship as humans are prone to making judgments all the time” (p. 129).

Rassool clearly values judgment, reason, and direction over intuition, emotion, and exploration, and therefore vastly restricts his therapeutic approach. He does not mention family systems theory or postmodern approaches, even when they can provide much needed perspectives and interventions for Muslim families.

The author’s constant reference to the Qur’ān and Sunnah shows his perception of Islam’s advice-friendly nature. He often quotes Qur’ānic verses or prophetic sayings that judge wise counsel as a religious duty but does not develop its long wisdom tradition, perhaps because he rejects certain aspects of Islamic spirituality. His disciplined perspective gives readers a good basis for understanding the religion’s essentials, but represents only one kind of Islam. This may limit his approach, for he avoids the more

local or specialized manifestations of religious practice, including Sufism and Islamic philosophy, while at the same time arguing for flexibility, noting that “rigid religious beliefs based on sin and guilt may deepen mental illness such as depression, and delusions and hallucinations may be accentuated by religious belief” (p. 28). To resolve this, he prescribes religious coping as “a means for dealing with stress through prayer, collective support and religious faith” (p. 29). Instead of condemning certain religious practices or counseling philosophies, Rassool simply guides the reader towards what, in his opinion, represents a better path (Welter 2016).

Rassool writes with wisdom as he confronts the difficult conversation of Islam’s relation to modernity and shows how it can work within the West. Even as others write of the need for a reformation within Islam, Rassool regards this as simplistic due to the religion’s inherent flexibility. The author uses Islamic concepts to bridge traditional Islam with modern psychological treatment, such as identifying “belief in God” as essential for a Muslim’s mental health and *fitrah* as “the pristine nature within humans that leads them to acknowledge the truth of God’s existence and to follow His guidance” that ultimately leads to one’s submission to God (p. 36). Therefore, Rassool builds the case that authentic Islamic spirituality, based on one’s submission to God, forms the cornerstone of good mental health and that any approach lacking this essence offers a false path to the Muslim client.

Rassool brings up important terms such as *nafs* (the self, soul, ego, and psyche) (p. 41); *qalb* (the heart), which leads to a discussion of Islamic understandings of the healthy heart, the sick heart, and the dead heart; *al-taṣṣawuf* (the purification of the heart); *shahwāt*, (worldly desires) (p. 44); *shirk* (the worship of anything other than God); and *jinn* (supernatural beings). The author validates the magical explanation for psychological health with the existence of *jinn*, the evil eye, black magic, possession, and sorcery as spiritual realities for the Muslim client. However, he carefully notes that Muslims often mistakenly attribute psychological issues to *jinn* because “there are fewer stigmas associated with Jinn possession” (p. 58). Having these conversations with the client can reflect the acceptance of the counselor’s use of spirituality, religion, psychology, and cultural knowledge.

Perhaps the most disconcerting element of *Islamic Counselling* is Rassool’s failure to address specific key groups, such as converts, adolescents, refugees, and women, as well as to mention specific issues such as domestic violence. Instead, he seems to focus more on the rising divorce rates rather than the issues that cause divorce. He remains neutral and stays non-judgmental, perhaps to include a vision for a common ground with Muslims, modern psychology, and the quest for healing. Even though Rassool’s authoritarian, traditionalist, and Salafist leanings are evident, his approach is largely applicable in many parts of the Muslim world. Indeed, as Islam evolves in its position with modernity and Muslims continue to formulate a discourse between it and counseling approaches, Islamic counseling will evolve and continuously need to be redefined.

Review by Anika Munshi

Anika Munshi is a Licensed Professional Counselor in Dallas, TX. She helps Muslims deconstruct the many layers that form their modern identity by harnessing the knowledge she has gained at The Islamic Seminary of America. Anika helps Muslims resolve complex traumas by cultivating a level of thinking that embraces ambiguity and integrates faith within a modern context. Rather than using religion to divide and conquer, Anika believes healing involves engaging in a creative synthesis of ideas, uncovering hard truths, and reconnecting with the heart of the religion.

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