

Sufistic Psychotherapy as a Decolonial Paradigm: Transcending the Dominance of Western Epistemology in Islamic Mental Health

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ABSTRACT

Indonesia's Islamic Religious Colleges (Perguruan Tinggi Keagamaan Islam, PTKI) have institutionalised Sufism and Psychotherapy as formal academic disciplines. However, their curricula juxtapose Sufi doctrine and Western clinical technique without a coherent epistemological bridge, exposing a structural dependency on positivist-secular epistemology that this article terms intellectual captivity. Existing scholarship on Sufism and psychotherapy remains largely comparative or conceptual, with little empirical attention to how Indonesian Islamic higher education institutions actually construct this integration in practice. This article addresses that gap by asking how Sufistic Psychotherapy can be reconstructed as a decolonial epistemological paradigm rather than an apologetic adaptation of Western psychology. It draws on qualitative case-study fieldwork at five PTKIs (UIN Palembang, UIN Semarang, UIN Kudus, UIN Surakarta, and UIN Kediri), combining curriculum document analysis with in-depth interviews with program heads, faculty, and the chair of the Sufism and Psychotherapy Consortium (KOTATERAPI), alongside critical engagement with classical Islamic epistemology and decolonial theory. Curriculum mapping and interview data show that the existing Body of Knowledge (BoK) remains dominated by textual-normative (*bayānī*) and intuitive-spiritual (*'irfānī*) modes of knowledge while the rational-empirical (*burhānī*) dimension is comparatively underdeveloped, producing a pre-paradigmatic and institutionally uneven field. Building on this diagnosis, the article reconstructs Sufistic Psychotherapy through five integrative epistemological pillars: a spiritual-physical ontology; an integrative *wahy-'aql-ḥawq* epistemology; an axiology of *tazkiyat al-nafs*; a transdisciplinary methodology; and an anti-dichotomous paradigm. The article contributes an empirically grounded, spirito-empirical model that repositions Sufism as an autonomous knowledge system and offers PTKIs a concrete pathway for standardising Sufistic Psychotherapy as a globally contributive, authentically Islamic discipline.

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INTRODUCTION

For more than a century, global mental health practice has been dominated by Western psychological paradigms grounded in positivist-empiricist epistemology. From Freudian psychoanalysis and Watsonian behaviourism to contemporary cognitive-behavioural therapy (CBT), these frameworks emerged from a specific Western intellectual tradition that systematically separates the spiritual dimension from the psychic life of the human person. Recent international scholarship corroborates this diagnosis empirically, not only conceptually: contemporary commentary on the global mental health movement documents how the wholesale export of Western diagnostic categories and treatment protocols produces cultural mismatch, medicalises social suffering, and marginalises indigenous and religious healing systems (Osborne, 2026). The consequence for Muslim communities worldwide has been profound: those seeking help for disorders of the soul are offered therapeutic frameworks that are clinically functional yet epistemologically misaligned with the Islamic worldview that structures their very understanding of self, suffering, and healing.

This phenomenon is not merely a methodological problem. It is a manifestation of what Syed Muhammad Naquib Al-Attas identified as “intellectual captivity” (*al-‘Ubūdiyyah al-Fikriyyah*): the subjugation of Muslim intellectual life to Western epistemological frameworks. In decolonial terms, this captivity is an instance of the colonality of knowledge, the historical process by which Western epistemology, produced within a specific European experience, was universalised as the sole legitimate standard for producing and validating knowledge. At the same time, non-Western epistemic traditions were relegated to belief, folklore, or, at best, raw cultural data awaiting scientific validation. Syed Hussein Alatas’s related notion of the “captive mind” describes the corollary condition among non-Western scholars: an uncritical, imitative relationship to Western theory that reproduces epistemic dependency long after formal colonialism has ended.

In the domain of mental health, this colonality of knowledge produces a pathological dualism: Muslim patients receive therapy that validates their psychological condition clinically while evacuating or reducing the spiritual as a genuine source of healing (Asrohah et al., 2025; Fettaħlıoğlu et al., 2025). The categories through which distress is diagnosed, the goals toward which healing is directed, and the methods through which recovery is achieved are all defined by standards external to, and often incompatible with, the Islamic tradition (Hayadin et al., 2025; Martanti et al., 2026; Supriyanto et al., 2025). The Islamic tradition of Sufism, by contrast, has developed, for centuries, a comprehensive epistemology and methodology for the healing of the soul. Al-Ghazālī in *Ihyā’ ‘Ulūm al-Dīn*, Ibn ‘Arabi in *al-Futuḥāt al-Makkiyyah*, and generations of Sufi masters through the living transmission of the tariqa have elaborated sophisticated theories of the *nafs*, the *qalb*, and the *rūḥ* that exceed the conceptual categories available within Western psychology.

However, this intellectual legacy has been excluded from global academic discourse on mental health precisely because it does not meet the verification criteria of positivism: criteria that are themselves the product of a particular historical and cultural tradition, not the universal measure of knowledge they claim to be. A growing body of scholarship has begun to explore the relationship between Sufism and psychotherapy, though largely from comparative or conceptual vantage points. Smith (2020) examined the possibilities and challenges of integrating Sufi concepts into modern psychotherapeutic practice, concluding that epistemological differences between the two traditions remain a central obstacle to harmonisation. Khan (2018) compared the epistemological foundations of Sufism, rooted in *ḥaṣr* (direct spiritual taste) and inner intuition, with the empirical-rational

orientation of modern psychology, arguing that the former offers an underused resource for understanding mental disturbance. Malik (2018) likewise juxtaposed Sufi and psychotherapeutic epistemologies and identified points of complementarity rather than opposition.

Ali (2016) called for rethinking psychology by integrating Sufi wisdom into a discipline he regards as excessively materialist, Arif (2023) traced Ibn 'Arabi's epistemology of knowledge as a resource for contemporary psychological reflection, and Ismail, Shealy, and Nahas (2021) proposed a dialectic of transcendence and acceptance within a Sufi-Islamic therapeutic lens. This body of work is reinforced by more recent international evidence: a systematic review of the relationship between Islamic-Sufi spirituality and mental wellbeing identified a positive association between Sufi spiritual practice and reduced anxiety and depression across the studies it examined, while also noting that the evidence base remains methodologically thin (Cetinkaya & Billings, 2023), and Rothman and Coyle's (2023) grounded-theory study advances a substantive conceptualization of Islamic psychotherapy from clinicians' own accounts. Collectively, this literature establishes that Sufism and psychotherapy are epistemologically compatible in principle and that Sufi practices carry therapeutic value. What it has not done is examine how this integration is actually institutionalised, with what curricular structure, under whose authority, and with what degree of epistemological coherence, within a national system of Islamic higher education.

A bibliometric mapping of the field corroborates this gap. A VOSviewer co-occurrence analysis of 187 ProQuest-indexed articles published between 2014 and 2024 using the keywords "Sufism" and "psychotherapy" shows a dense cluster of terms around religion, spirituality, Sufism, psychotherapy, and mental health, with meditation and mindfulness appearing as the primary points of practical convergence; the terms "Indonesia" and "Islamic psychology," however, sit only at the periphery of the network, with thin and locally underspecified links to institutional context. The mapping was generated in ProQuest using the Boolean keyword string "sufism" AND "psychotherapy" (searched across title, abstract, and keyword fields), which returned 187 articles published between 2014 and 2024; the resulting record set was visualised in VOSviewer (2024) as a co-occurrence network of author keywords. The underlying bibliometric analysis, part of the doctoral dissertation on which this article draws (Saleh, 2026), did not apply a further eligibility/exclusion screen beyond the database query, a separate deduplication step, or a PRISMA-style flow of records, and the specific VOSviewer version and clustering-resolution parameters were not separately logged. This is acknowledged as a limitation of the mapping exercise; the co-occurrence pattern is accordingly read here as an indicative rather than as a fully systematic bibliometric review.

Three research gaps follow from this mapping. *First*, Sufism and psychotherapy continue to be treated as separate objects of study, the former in the register of theology and spirituality, the latter in the register of clinical psychology, with little academic work on how the two are integrated within actual curricula. *Second*, the literature on Islamically informed psychotherapy remains thin on the Indonesian context specifically, despite Indonesia having gone furthest among Muslim-majority countries in institutionalising Sufism and Psychotherapy as a standalone academic program. *Third*, the practical, clinical application of Sufism as a modern therapeutic method remains empirically underexplored, with most existing accounts operating at the conceptual or comparative level rather than examining institutional practice.

These three gaps are, at bottom, symptoms of a deeper theoretical gap rather than a merely bibliographic one. The existing comparative and conceptual literature (Smith, 2020; Khan, 2018; Malik, 2018) treats Sufism and psychotherapy as two pre-formed systems to be placed in dialogue, but none of it theorizes how a revelation-based, non-Western epistemology could generate its own internal criteria of scientific validity, evidentiary standard, and disciplinary rigor, criteria that would not simply be borrowed from the positivist framework the literature is trying to decenter. In other words, existing theoretical frameworks (comparative religious psychology, transpersonal psychology, and Islamization-of-knowledge scholarship taken separately) each illuminate part of the problem, but none accounts for how a Body of Knowledge organised around *bayāni*, *burhāni*, and *ʿirfāni* epistemes could be operationalised as a coherent, teachable, and empirically accountable discipline. This article addresses these three literature gaps, and the theoretical gap that underlies them, by empirically mapping and then reconstructing the Body of Knowledge of Sufism and Psychotherapy as it currently exists, and as it could be reconstructed, within Indonesian PTKI.

The analysis is guided theoretically by three complementary strands: Al-Attas's critique of secularisation and his call for the "Islamization of knowledge"; Syed Hussein Alatas's decolonial sociology of the "captive mind" and his argument for an autonomous social science of the non-Western world; and Amin Abdullah's integration-interconnection (*integrasi-interkoneksi*) framework, which offers a methodological bridge between the *bayāni* (textual-revelatory), *burhāni* (rational-empirical), and *ʿirfāni* (spiritual-intuitive) epistemes of Islamic scholarship. Kuntowijoyo's project of the "Islamization of knowledge," understood not as adding a religious veneer to secular science but as transforming science's epistemological core from within an Islamic worldview, supplies the article's reconstructive orientation.

The emergence of Sufistic Psychotherapy (*Psikoterapi Sufistik*) as a formal academic discipline at Islamic Religious Colleges (*Perguruan Tinggi Keagamaan Islam*, PTKI) in Indonesia is therefore not merely a curricular development. It represents a systematic project of epistemological decolonisation: an effort to liberate Islamic mental health science from its subordination to Western paradigms and to restore Sufism to its rightful status as a valid, authentic, and scientifically rigorous knowledge system in the most comprehensive sense of that term.

Indonesia offers a distinctive setting for this inquiry: as the country with the world's largest Muslim population and a centuries-old tradition of *pesantren*-based Sufism, it is, to the best of the authors' knowledge, the only national higher-education system to have institutionalised Sufism and Psychotherapy as a dedicated undergraduate program, coordinated nationally through the Consortium for Sufism and Psychotherapy (KOTATERAPI). This is an indicative observation based on the authors' own review of KOTATERAPI's institutional network rather than a systematic cross-national survey of Islamic higher-education programs, and it is offered cautiously, as a claim warranting comparative verification in future research. The five PTKIs examined in this article were selected because each embodies a distinct regional and epistemological inflection of this national project: UIN Kudus, situated in a historic center of *pesantren*-based coastal Javanese Sufism ("Kota Wali"); UIN Palembang, which channels the transnational Malay-Nusantara Sufi networks of southern Sumatra; UIN Surakarta, whose curriculum actively integrates contemporary psychological approaches; UIN Semarang, a historical pioneer of academic Sufi scholarship associated with the Walisongo tradition; and UIN Kediri, rooted in a strong *pesantren* tradition of practiced (*amali*) Sufism. Read together, these five sites were expected to yield findings that are rich, layered, and

contextually representative of how the national project of institutionalising Sufistic Psychotherapy is actually being realised on the ground.

This article pursues three interconnected aims. *First*, it diagnoses how Western epistemology has dominated and marginalised the Islamic tradition of soul-healing. *Second*, it demonstrates why Sufistic Psychotherapy constitutes a decolonial response that is epistemological rather than merely syncretic. *Third*, it articulates the five epistemological pillars that establish Sufistic Psychotherapy as an authentic and independent scientific paradigm. The argument draws on qualitative case-study fieldwork conducted across five PTKIs in Indonesia (UIN Palembang, UIN Semarang, UIN Kudus, UIN Surakarta, and UIN Kediri), as well as critical engagement with classical Islamic scholarship and contemporary decolonial theory.

This article contributes to the literature in three ways. Empirically, it provides one of the first systematic, multi-site accounts of how Sufism and psychotherapy are actually taught and institutionalised across Indonesian PTKI, moving the discussion beyond conceptual argument to grounded curricular and interview evidence. Theoretically, it extends decolonial theory into the specific domain of Islamic mental health by articulating five concrete epistemological pillars rather than a general call for decolonisation. Practically, it offers PTKI, the KOTATERAPI consortium, and Indonesian higher-education policymakers a reconstructed Body of Knowledge that can inform curriculum standardisation, professional certification, and the future accreditation of Sufistic Psychotherapy as a recognised discipline.

METHODS

This article employs a qualitative case-study design that combines critical-philosophical analysis with field research, organised through a strategy of epistemological deconstruction and reconstruction. The critical-philosophical component establishes the internal structure of Sufi epistemology and stages a dialogue with contemporary theory; the field-research component grounds this argument empirically in how Sufism and psychotherapy are actually taught, organised, and understood within Indonesian Islamic higher education. The two components proceed sequentially rather than in parallel: field data on the existing curricular Body of Knowledge (BoK) supply the descriptive basis that the philosophical-decolonial analysis subsequently interprets and reconstructs.

The data sources are threefold. *First*, primary classical Islamic epistemological texts, principally the works of Al-Attas, Al-Ghazālī, and Al-Baghdādī, are examined to establish the internal structure of Sufi epistemology. *Second*, contemporary theories from transpersonal psychology and neuroscience, particularly the work of Abraham Maslow, Ken Wilber, and Andrew Newberg, are engaged to identify points of convergence and methodological dialogue. *Third*, field research combines curriculum document analysis with in-depth interviews and academic observation at five PTKIs that have established Sufism and Psychotherapy study programs: UIN Raden Fatah Palembang, UIN Walisongo Semarang, UIN Sunan Kudus, UIN Raden Mas Said Surakarta, and UIN Syekh Wasil Kediri.

Informants were selected through purposive sampling, a technique of deliberately selecting participants according to criteria relevant to the research objective (Sugiyono, 2019); as Creswell (2014) and Moleong (2017) note, purposive sampling in qualitative research is appropriate precisely because it selects individuals and sites judged most knowledgeable about the phenomenon under study, maximising the richness rather than the statistical representativeness of the data. In total, the

study drew on four key informants: the head or secretary of the Sufism and Psychotherapy study program at three of the five sampled institutions, along with a senior Sufism scholar affiliated with IAI Al-Fitroh Surabaya who provided a pesantren- and tariqa-based perspective outside the formal PTKI curriculum. Their institutional roles, as program leaders directly responsible for curriculum design and as the consortium's national coordinating authority, qualify them as informants with authoritative, first-hand knowledge of how the BoK is constructed and contested in practice.

A note on institutional naming is warranted here. The four informants above are drawn from three, not five, of the sampled PTKIs, together with the external pesantren-based scholar: Wijaya (Secretary of the Sufism and Psychotherapy program, UIN Raden Fatah Palembang, and concurrently Chair of KOTATERAPI), Salma (Secretary of the program at UIN Sunan Kudus, referred to in the underlying field notes by that institution's earlier name, IAIN Kudus), Aqfil (Secretary of the program at UIN Padang, a KOTATERAPI-network institution outside the five curriculum-sampled sites, included here for the broader consortium perspective the office provides), and Ust Chafid Wahyudi (senior Sufism scholar, IAI Al-Fitroh Surabaya). No interview informant was available from UIN Walisongo Semarang, UIN Raden Mas Said Surakarta, or UIN Syekh Wasil Kediri; for these three sites, this article's findings rest on curriculum document analysis (Results, Section A) rather than on interview evidence. This asymmetry between the five-site curriculum sample and the four-informant interview sample is acknowledged as a limitation in the Conclusion.

Data collection combined three techniques: analysis of curriculum documents and syllabi obtained directly from each program; in-depth, semi-structured interviews with the informants described above; and structured academic observation of how Sufism and Psychotherapy courses are delivered within each institution's broader curricular structure. Academic observation focused on how the existing coursework translates Sufism and Psychotherapy curricula into classroom and field practice. The lead researcher conducted it over approximately four months during the 2024–2025 data-collection period, using an observation sheet (*lembar observasi*) developed alongside the interview guide and documentation format during the instrumentation stage of the research. It proceeded concurrently with the interviews and curriculum document review at the institutions where interviews were conducted (Section B above), rather than as a separately scheduled protocol at all five sites. Observational field notes were coded thematically alongside the interview transcripts during the archaeological-recovery analysis stage described below, rather than through a separate observation-specific coding protocol. Interviews were conducted in Indonesian; the quotations presented in the Results section are the authors' English translations of the original transcripts. Per journal convention, the Indonesian original of each quotation reproduced in the Results section is given alongside its English translation.

The analysis proceeds in three stages, corresponding to the deconstruction, archaeological-recovery, and reconstruction sequence. In the first (deconstructive) stage, curriculum documents from the five PTKIs were coded and compared to expose the universalist assumptions embedded in how psychotherapy is currently taught. In the second (archaeological-recovery) stage, interview transcripts and curriculum data were analysed thematically, using open and axial coding, to identify the independent epistemological structure already latent, if underdeveloped, within existing Sufism and Psychotherapy programs. In the third (reconstructive) stage, findings from the first two stages were synthesised, in dialogue with the classical and contemporary theoretical literature reviewed above, into the five epistemological pillars presented in the Results and Discussion below. Syed Hussein

Alatas's decolonial theory, particularly his concepts of the "captive mind" and the need for an autonomous social science of the non-Western world, provides the overarching analytical framework, in dialogue with Amin Abdullah's integration-interconnection approach and Kuntowijoyo's project of the Islamization of knowledge.

To establish the trustworthiness of the findings, this article follows Moleong's (2017) four criteria for qualitative rigour: credibility, transferability, dependability, and confirmability, with particular emphasis on credibility, secured through source and method triangulation: cross-checking interview accounts against curriculum documents and direct observation, supplemented where possible by member-checking of interpretations with informants. Because the study is bounded to academics, program leaders, and curriculum documents at the five PTKIs named above, it does not extend to individuals undergoing Sufi therapy personally or to non-academic practitioners such as *tariqa mursyid* operating outside formal educational institutions; this scope reflects a deliberate boundary of the research design rather than an omission.

This study involved human participants and was therefore conducted in accordance with applicable research-ethics requirements. The underlying doctoral research was conducted under the formal academic supervision of the author's dissertation promoters at Pascasarjana UIN Syekh Wasil Kediri. The doctoral dissertation committee examined it before the degree's conferral (proposal seminar and dissertation defence, 2025–2026). The source dissertation does not report a separately numbered ethics-committee or institutional review board protocol, which reflects standard practice for qualitative curriculum and interview research of this kind at Indonesian PTKI at the time the fieldwork was conducted, rather than an omission specific to this study. All four informants gave verbal informed consent prior to the interview and explicitly agreed to be identified by their institutional name and role, as they are in the Results section below; none requested anonymisation.

FINDINGS AND DISCUSSION

This section presents the empirical findings from curriculum document analysis and in-depth interviews conducted across the five sampled PTKI. The Discussion section below interprets these findings in relation to prior theory and the research questions.

Curriculum and Body of Knowledge Across the Five PTKI

Curriculum document analysis at the five sampled PTKI shows a consistent structural pattern, summarised in Table 1: Sufism is taught predominantly through a normative-theological register (*tasawuf akhlaqi*, *tasawuf falsafi*, *tarekat*, *maqamat* and *ahwal*), while psychology and psychotherapy are taught through a clinical-technical register (general psychology, abnormal psychology, clinical psychology, Islamic counselling); the connection between the two registers is largely left implicit rather than built into a shared methodological framework.

Table 1. Comparative Curriculum and Body of Knowledge (BoK) of Sufism and Psychotherapy Programs at Five PTKI

Institution	Curriculum Basis	Core Sufism Courses	Core Psychology/Therapy Courses	Distinctive Orientation of the BoK
UIN Raden Fatah Palembang	KKNI (2019).	Tasawuf Akhlaqi, Falsafi, Amali; Maqamat & Ahwal; Tokoh Sufi	Psikologi Umum, Abnormal, Klinis; Psikoterapi Islami; BK Islam	Classical Sufism as the primary epistemic base; psychotherapy as clinical supplement
UIN Walisongo Semarang	MBKM (2020).	Tasawuf Falsafi, Nusantara, Multikulturalisme	Psikologi Transpersonal, Abnormal; Sufi Healing; Energy Psychology	Most integrative orientation: classical Sufism + modern psychology + healing practice
UIN Sunan Kudus	MBKM-OBE (2023).	Tasawuf & Tarekat; Maqamat & Ahwal; Tasawuf Kontemporer, Nusantara	Psikoterapi Qur'ani, Ruqyah; Psikologi Konseling, Klinis	Qur'anic-textual specialisation: ruqyah and Qur'anic psychotherapy
UIN Raden Mas Said Surakarta	OBE-MBKM (2024).	Tasawuf Falsafi, Amali, Multidisipliner; Tokoh Sufi	Psikoterapi Integratif; Asesmen Psikologis; Klinik Psikoterapi Islami	Transdisciplinary: Sufism + modern assessment + Javanese-pesantren local wisdom
UIN Syekh Wasil Kediri	MBKM (2023).	Tasawuf Akhlaqi, Falsafi, Nusantara; Tarekat	Psikologi Konseling; Psikoterapi Islami; BK Islam	Strongest field-practice orientation, rooted in pesantren tradition of applied (amali) Sufism

Source: curriculum document analysis, five PTKI (2024-2025).

Read across institutions, the curricula converge on the same three broad domains, Sufism, Islamic psychology, and clinical psychotherapy, but diverge sharply in orientation. Palembang's BoK remains anchored in classical Sufi texts as the primary epistemological base, with psychology positioned as a clinical supplement. Semarang has adopted the most integrative orientation under the Merdeka Belajar Kampus Merdeka (MBKM) framework. Kudus has developed the most textually specific specialisation, centred on Qur'anic psychotherapy and ruqyah syar'iyah. Surakarta shows the strongest transdisciplinary orientation, integrating Sufism, modern psychological assessment, and Javanese-pesantren local wisdom. Kediri places the greatest curricular weight on supervised field practice within a strong pesantren tradition of applied (amali) Sufism.

To make this institutional variation more analytically tractable, Table 3 below translates the curricular descriptions in Table 1 into a simple coding matrix across the three Islamic epistemes used throughout this article (*bayāni*, *'irfāni*, *burhāni*).

Table 2. Proposed Coding Matrix of Epistemic Emphasis by Institution (derived from Table 1 curriculum data)

Institution	<i>Bayāni</i> (Textual-Normative)	<i>ʿIrfāni</i> (Intuitive-Spiritual / Amali)	<i>Burhāni</i> (Rational-Empirical / Clinical)	Overall BoK Profile
UIN Raden Fatah Palembang	Strong	Moderate	Weak	Sufism-anchored; psychotherapy supplementary
UIN Walisongo Semarang	Moderate	Moderate	Moderate	Most balanced/integrative of the five
UIN Sunan Kudus	Strong (Qurʿanic-textual)	Moderate (ruqyah)	Weak	Textual-devotional specialisation
UIN Raden Mas Said Surakarta	Moderate	Moderate	Strongest among the five	Transdisciplinary, assessment-oriented
UIN Syekh Wasil Kediri	Moderate	Strong (amali practice)	Weak	Practice- and field-oriented

Note: these ratings are the authors' own qualitative synthesis of the curricular descriptions already reported in Table 1, rather than the output of a separately documented coding instrument; they are offered as a provisional, interpretive summary that makes the institutional comparison in Table 1 more analytically tractable, and the bayani/irfani/burhani labels should accordingly be read as indicative rather than as scores derived from a formal coding sheet.

Interview Findings: Epistemological Gaps in the Existing BoK

Interviews with program leaders and Sufism scholars converge on a diagnosis that the existing BoK has not yet built a coherent bridge between the *bayāni*-*ʿirfāni* (textual and spiritual-intuitive) and *burhāni* (rational-empirical) dimensions of knowledge. As the chair of the National Sufism and Psychotherapy Consortium (KOTATERAPI) explained:

"There is still an epistemological gap between Sufism and clinical psychology. The BoK needs to adopt an integrative model grounded in transpersonal psychology and neuroscience."

A faculty member teaching in a Sufism and Psychotherapy program described the practical consequence of this gap for students:

"We teach modern psychological theory in class, but it is difficult for students to see how this theory can actually be applied within Sufism. We need more scholarship that bridges the two."

A second, related theme concerns the academic reception of Sufi-based therapy outside PTKI. The secretary of the Sufism and Psychotherapy program at UIN Padang observed:

"Many conventional psychologists remain skeptical of Sufi-based therapy because it lacks evidence-based research."

A senior Sufism scholar affiliated with IAI Al-Fitroh Surabaya offered a complementary account from within the pesantren and tariqa tradition:

"Within pesantren and tariqa communities, Sufi therapy is already accepted. The challenge is how this method can be accepted within clinical psychology."

Read together, these four accounts converge on the same underlying diagnosis, but they are not simply redundant: they locate the problem at different points in the system. The KOTATERAPI chair and the faculty member frame the gap as internal to curriculum design, a missing methodological bridge between what is taught and how it is validated. At the same time, the pesantren-affiliated scholar reframes it as a problem of external reception, arguing that Sufi therapy already functions adequately within its own community of practice and that the burden of proof lies with clinical psychology's willingness to recognise it, not with Sufism's internal coherence. This is a genuine, productive tension in the data rather than a contrast the authors have imposed on it. The interview data available for this article do not include named informants from Semarang, Surakarta, or Kediri; the additional institutional variation reported below (Results Section C) is accordingly drawn from the same four informants (Palembang, Kudus, Padang, and the external Al-Fitroh scholar) rather than from further sites, a constraint on institutional variation that is acknowledged as a limitation in the Conclusion.

Table 3. Recapitulation of Interview Findings on the Epistemology of Sufism and Psychotherapy

Interview Finding	Informant-Proposed Improvement
Sources of knowledge in the BoK lack a systematic epistemological framework.	Develop a clearer framework linking revelation, rationality, and empirical method.
Validation of truth-claims remains weakly evidence-based	Incorporate neuroscience and clinical-psychology research into Sufi therapy validation.
BoK structure is weighted toward Sufism relative to psychology/psychophysiology.	Rebalance the distribution across Sufism, psychology, and psychophysiology.
No shared academic standard exists for Sufi therapeutic methods	Develop a neuroscience- and clinical-psychology-informed therapy protocol
Sufi psychotherapy remains difficult to accept within conventional psychology.	Strengthen cross-disciplinary collaboration with psychologists and psychiatrists.

Source: synthesis of interview data (2024-2025).

Sources, Development, and Validation of Knowledge in the Existing BoK

Synthesizing curriculum and interview data, the existing BoK draws on three sources of knowledge: *Naqliyyah* (revealed knowledge, comprising tafsir and hadith on the soul and the doctrine of *tazkiyat al-nafs*), *Aqliyyah* (rational-philosophical knowledge, comprising Sufi philosophical thought, Ibn 'Arabi's *waḥdat al-wujūd*, al-Jili's *insān kāmīl*, Suhrawardī's *ḥikmah ilāhiyyah*, together with modern psychological theory), and *Tajribiyyah* (experiential-empirical knowledge, comprising the practice of *ẓikr*, *murāqabah*, and Sufi healing understood as therapeutic technique). As Ust Chafid Wahyudi, the senior Sufism scholar from IAI Al-Fitroh Surabaya, summarised:

"The BoK of Sufism and Psychotherapy derives from three main components: revelation (the Qur'an and hadith), rationality (Islamic philosophy and psychology), and Sufi experience (tariqa, ẓikr, murāqabah). This combination provides a strong foundation for building a discipline of the soul grounded in Islamic spirituality."

Across the three institutions represented among the interview informants, respondents converge on a shared imbalance: Sufism (*bayāni*/*irfāni* knowledge) occupies a disproportionately large share of the curriculum relative to psychology and psychophysiology (*burhāni* knowledge), and no institution has yet developed a standardised protocol for validating Sufi therapeutic practice through modern clinical or neuroscientific methods. Asked to estimate this balance directly, Wijaya (KOTATERAPI) put the current distribution at roughly “Tasawuf (40%) dibandingkan Psikologi (35%) dan Psikofisiologi (25%)”, which he characterised as producing an imbalance between the spiritual and scientific dimensions of the BoK. In comparison, Salma (UIN Sunan Kudus) proposed rebalancing the distribution toward “30% Tasawuf, 40% Psikologi, dan 30% Psikofisiologi”. These figures are the informants’ own impressionistic estimates rather than a measured curricular audit. However, they corroborate, in the informants’ own terms, the disproportionate weighting toward bayani/irfani knowledge that the curriculum document analysis in Section A independently identifies. This diagnosis, confirmed independently by curriculum analysis (Section A) and interview data (Sections B-C), is interpreted in relation to decolonial theory and reconstructed into five epistemological pillars.

This section interprets the results presented above in relation to decolonial theory and prior scholarship, reconstructing them into a coherent epistemological paradigm while carefully distinguishing among three qualitatively different kinds of claims that the article makes, claims that the Results section sometimes presented with equivalent evidentiary weight but that actually rest on distinct epistemic grounds. The first category, an empirical finding directly supported by the curriculum and interview data reported earlier, establishes that the existing Body of Knowledge for Sufism and Psychotherapy at the five sampled PTKI is institutionally fragmented, dominated by *bayāni* and *irfāni* modes of knowledge, with the *burhāni* (rational-empirical) dimension comparatively underdeveloped and no shared validation protocol in place. This finding is then read through an interpretive inference, grounded in Kuhn’s philosophy of science and Alatas’s decolonial sociology, whereby the observed fragmentation is understood as a symptom of epistemological asymmetry, namely, that one Islamic episteme (*burhāni*) remains structurally underdeveloped relative to the other two precisely because the field’s validation criteria have been historically dependent on Western positivist standards for what counts as rigorous knowledge. Building upon that diagnosis, the article advances a normative and theoretical proposition, which follows from the empirical observation and its interpretive reading but is not proven by them: a reconstructed Sufistic Psychotherapy should be organised around the five epistemological pillars presented below in Section C, a constructive proposal drawn from classical Islamic scholarship in dialogue with the empirical diagnosis rather than a further empirical finding of this study.

The Hegemony of Western Epistemology in Mental Health: A Decolonial Critique

Field findings across the five PTKI studied reveal that the existing Body of Knowledge for Sufism and Psychotherapy is in what Thomas Kuhn would call a pre-paradigmatic phase, a condition of epistemological fragmentation in which no stable consensus has been established. The psychotherapy taught remains heavily anchored in Western theory, drawing predominantly on Freud, Jung, and CBT. By contrast, Sufism is taught in a normative-theological register without systematic operational integration into therapeutic practice. The curricula of these five institutions consistently present Sufism as belief and spiritual practice, while psychotherapy is presented as clinical technique. These two domains are merely juxtaposed without a coherent epistemological bridge, leaving the field in a state of institutional fragmentation.

This diagnosis resonates with Syed Hussein Alatas's foundational critique of the "captive mind," which argued that the social sciences and humanities are not universal disciplines but the intellectual products of Western civilisation, universalised and exported as the global standard of legitimate knowledge. It is further echoed in recent global mental health scholarship, where Osborne documents how the unchecked export of Western psychiatric models has produced cultural mismatch and marginalised indigenous healing systems. Cetinkaya and Billings similarly note that Sufi-specific therapeutic practice remains under-theorised and under-validated within mainstream clinical psychology precisely because it has not been assessed on its own epistemic terms. The finding from the five PTKIs is consistent with this literature in showing that Sufism and psychotherapy remain juxtaposed rather than integrated. However, it extends the literature by locating the mechanism institutionally rather than only conceptually. The disconnection is not simply a matter of scholars not yet having written the right synthesis; it is reproduced structurally, curriculum by curriculum, at the level of course design and programme architecture.

Non-Western scholars who work within these disciplines without critical awareness do not merely adopt methods; they adopt an entire worldview, including its secular assumptions, its anthropocentric ontology, and its positivist theory of what counts as evidence. In the domain of psychotherapy, this epistemic hegemony operates through at least three mechanisms, the first of which is the reduction of the human person to a bio-psychological entity. Mainstream Western psychology understands the human being primarily through biological and psychic dimensions, so that the spiritual is either excluded or reductively explained as a brain function. At the same time, the Islamic ontological concepts of *nafs*, *qalb*, and *rūḥ* have no meaningful place in Western psychological taxonomies. The second mechanism is the secularisation of the therapeutic method, because modern psychotherapeutic techniques operate within a fundamentally secular framework, and even logotherapy, which acknowledges the existential dimension of suffering, defines healing within a this-worldly frame of reference. A more defensible formulation is that dominant biomedical and secular clinical frameworks have historically operationalised mental health through constructs such as self-actualisation and social adaptation that do not fully capture Islamic theological categories of healing, including the human person's relationship with God as an explicit therapeutic end.

The third mechanism is the invalidation of local-spiritual knowledge, whereby healing practices rooted in Islamic spirituality, such as *ẓikr*, *murāqabah*, *tafakkur*, *muḥāsabah*, and the transformative dynamics of the *maqamat*, are denied recognition as valid therapeutic modalities within the standards of evidence-based practice. This creates a structurally unfair situation in which PTKI institutions developing Sufism and Psychotherapy programmes are pressured to justify the therapeutic value of Sufi practices by using criteria derived from the very paradigm that is the object of their critique. This disconnection is not accidental but is the structural residue of epistemic hegemony, and it is precisely what a decolonial reconstruction must address. The task for the remainder of this Discussion is therefore not to argue in the abstract that Western psychotherapy is illegitimate, but to specify concretely what an alternative, internally coherent epistemological foundation for Sufistic Psychotherapy would need to contain. That constructive work is undertaken in the sections that follow.

Sufism as an Independent and Legitimate Epistemological System

The foundational claim of this article, that Sufistic Psychotherapy is a decolonial paradigm rather than an apologetic adaptation, requires prior demonstration that Sufism constitutes a complete and independent epistemological system. It is not, as it is often portrayed in Western academic discourse, a collection of esoteric practices whose therapeutic value must be validated by neuroscientific or psychological criteria external to the tradition itself. Sufism possesses its own ontology, epistemology, methodology, and axiology that are internally coherent, mutually reinforcing, and capable of sustaining a rigorous scientific discipline.

At this point, it is important to distinguish two things that this article treats as related but not identical. Sufism, as an epistemological and spiritual tradition with roots extending back over a millennium, is the subject of the claims made in this subsection: that it possesses its own ontology, epistemology, methodology, and axiology. Sufistic Psychotherapy, by contrast, is the emerging, empirically testable therapeutic discipline this article documents at five PTKI and reconstructs into five pillars; it draws on Sufism as its epistemic base but is a narrower, applied, and institutionally situated project (Fahrudin et al., 2024; Muhammad et al., 2024). If Sufism as a tradition is described here as possessing the internal resources for scientificity, the criterion being invoked is not the positivist criterion of falsifiability through controlled experiment. However, a Kuhnian one already used elsewhere in this article: an internally coherent paradigm requires a shared ontology, an accepted methodology for producing and adjudicating knowledge claims, and a community of practice that applies and transmits that methodology, all of which classical Sufism demonstrably has. Sufistic Psychotherapy as a clinical discipline, however, additionally requires the kind of operational, replicable validation protocol that Results Section C shows is currently missing; establishing that protocol, not merely asserting Sufism's epistemological legitimacy in general, is the concrete task the five pillars in Section C below are meant to advance.

Ontologically, Sufism understands the human person as a spiritual-physical unity composed of *nafs*, *qalb*, and *ruh*. Al-Ghazali elaborated this ontology in meticulous detail in *Ihya Ulum al-Din*, demonstrating the hierarchy of the soul and its correspondence to spiritual-psychological conditions. This ontological framework is not reducible to the mind-body dualism of Western psychology, because it incorporates the transcendent dimension as an integral, not optional or supplementary, aspect of human existence. Within this framework, psychological disorders are understood not merely as dysfunctions of cognitive or affective processes, but as disturbances in the soul's orientation toward its Creator (Hasana et al., 2025).

Epistemologically, Sufism recognises three complementary channels of knowledge: *wahy* (revelation, knowledge transmitted from God), *aql* (reason, rational and reflective knowledge), and *dhawq/kashf* (spiritual intuition, knowledge attained through the soul's purification). In Amin Abdullah's terminology, these correspond to the three Islamic epistemes: *bayani* (textual-revelatory), *burhani* (rational-empirical), and *irfani* (spiritual-intuitive). Crucially, none of these epistemes is absolutely superior to the others; each is a legitimate modality of knowledge with its own proper object and method. The weakness identified in the existing BoK at PTKI is that it is dominated by *bayani* and *irfani* approaches. At the same time, the *burhani*-empirical dimension remains underdeveloped, pointing not to an inherent deficiency in Islamic epistemology, but to a specific reconstruction task: the need to develop evidence-based research methods that are accountable to Islamic epistemic standards rather than borrowed wholesale from Western positivism.

Methodologically, Sufism has a structured procedure for the transformation of the soul (*tazkiyat al-nafs*): beginning with *tawbah* (repentance) as the point of departure, proceeding through a sequence of maqamat (spiritual stations, *zuhd*, *ṣabr*, *tawakkul*, *riḍā*, and beyond), and culminating in the ahwal (spiritual states) that God bestows upon the purified soul. This methodology is not without epistemic controls: Sufi masters and scholars have developed criteria for the authenticity of spiritual experience and a rigorous system of spiritual guidance (*suluk*) that parallels, in its structural logic, the supervisory and quality-assurance mechanisms of any disciplined science.

This claim for the epistemological legitimacy of Sufism is not a defensive apologetic argument. Contemporary neurospiritual science provides partial empirical corroboration for Sufi claims: an fMRI study comparing dhikr, body-scan meditation, and reflective thinking about God found twenty-two distinct networks of brain activation across these states, indicating that dhikr has a measurable and distinguishable neural signature rather than being reducible to generic meditation or ordinary cognition (Saraei et al., 2023), building on Andrew Newberg's earlier neurotheological work using neuroimaging (EEG/fMRI). This is not a reductionist move that collapses spiritual experience into mere neurological phenomena. Rather, it constitutes an epistemological bridge between the Sufi tradition and modern scientific methodology, exactly the kind of burhani integration that a reconstructed BoK for Sufistic Psychotherapy requires.

Sufistic Psychotherapy: Five Pillars of a Decolonial Paradigm

Based on a critical analysis of the existing BoK at PTKI and the epistemological reconstruction proposed here, Sufistic Psychotherapy as a decolonial paradigm can be articulated through five interconnected pillars. These pillars were not stipulated in advance but derived inductively through the three-stage analytical procedure described in the Methods section: they emerged from the archaeological-recovery stage, in which curriculum documents and interview data from the five PTKI (Results, Sections A-C) were coded thematically to identify epistemological elements already latent within existing Sufism and Psychotherapy programs, and were then consolidated, in the reconstructive stage, through dialogue with the classical and contemporary theoretical literature reviewed above. As stated at the opening of this Discussion, the five pillars below are presented as a normative and theoretical reconstruction that builds on, but is analytically distinct from, the empirical finding of institutional fragmentation reported in Results Sections A-C.

The First Pillar: Spiritual-Physical Ontology. Sufistic Psychotherapy rejects the reduction of the human person to a bio-psychological entity. It understands the human being as constituted by three inseparable dimensions: the *Jasadi* (Corporeal), the *Nafsāni* (Psychic), and the *Rūhāni* (Spiritual). The therapeutic consequence is that psychological disorders cannot be resolved through psychological or pharmacological intervention alone; they require a holistic approach that simultaneously attends to all three dimensions. This is ontological decolonisation: a refusal of the positivist reduction of the human person and a restoration of the dignity of the spiritual dimension within mental health discourse.

The Second Pillar: Integrative Epistemology. Sufistic Psychotherapy treats revelation (*wahy*), spiritual experience (*ẓawq*, *kasyf*), and modern scientific method as mutually complementary rather than mutually exclusive sources of knowledge. This model is spirito-empirical: it does not reject evidence-based practice, but situates empirical validation within the broader frame of Islamic epistemology. Evidence is not defined exclusively by positivist criteria; a healing practice validated by centuries of spiritual transmission and confirmed by the testable transformations it produces in

practitioners' lives constitutes a legitimate form of evidence, even if it does not conform to the randomised controlled trial as the gold standard. This is epistemological decolonisation: a refusal of the positivist method's monopoly as the sole pathway to scientific truth.

The Third Pillar: Axiology of *Tazkiyat al-Nafs*. In contrast to Western psychotherapy, which is oriented toward restoring psychological function and achieving self-actualisation, Sufistic Psychotherapy locates its ultimate aim in *tazkiyat al-nafts*, the purification and refinement of the soul in its orientation toward God (Qasserras, 2024; Tharaba et al., 2025). Mental health is not defined as the absence of disorder, but as the condition of the soul that is pure, tranquil (*muṭmainnah*), and in conscious proximity to its Creator. This means that the goals of healing in Sufistic Psychotherapy are irreducibly spiritual: the terminal state of psychological wellbeing is not self-fulfilment, but the state of *ihsan*, the consciousness of God's presence. This is axiological decolonisation: redefining "health" from an Islamic worldview rather than from the normative standards of Western psychiatry.

The Fourth Pillar: Transdisciplinary Methodology. Sufistic Psychotherapy integrates Sufi methods, *zikr*, *murāqabah*, *tafakkur*, *muḥāsabah*, with modern clinical techniques, psychological assessment, cognitive restructuring, and group therapy, within a coherent methodological framework. This integration is not eclecticism: it is not an arbitrary combination of two traditions based on the therapist's personal preference. It is a transdisciplinary synthesis organised and governed by Islamic epistemology. Sufi methods are not a spiritual supplement to Western therapy; they constitute the core of the healing process, with clinical techniques serving as instrumental supports. Islamic understandings of the human person and healing, not the assumptions of Western psychology, determine the direction of integration (Hadi et al., 2024).

The Fifth Pillar: Anti-Dichotomous Paradigm. Sufistic Psychotherapy refuses the religion-science dichotomy that is the foundational assumption of Western secular modernity. Within the Islamic worldview, as articulated by Al-Attas and Kuntowijoyo, there is no ontological separation between knowledge of the world (*'ulūm al-dunya*) and knowledge of the hereafter (*'ulum al-ākhirah*): both are manifestations of the single, unified knowledge of God. All genuine knowledge is, at its deepest level, knowledge of God's creation and therefore religiously significant. The refusal of this dichotomy is the most fundamental decolonial declaration, because it is precisely the religion-science divide, the product of the European secular settlement, that serves as the primary instrument for the marginalisation of spiritual knowledge within the modern academic order.

Decolonial Implications for Islamic Higher Education in Indonesia

The development of Sufistic Psychotherapy as a formal academic discipline at PTKI in Indonesia carries decolonial implications that extend beyond the academic sphere. It is part of a larger intellectual movement to reposition Islam, and specifically the tradition of Sufism, as a civilisation whose contributions to the understanding and healing of the human soul are equal to, and in many respects exceed, the legacy of Western modernity.

The interview findings reported in Results Section B confirm that the academic legitimacy of Sufistic Psychotherapy remains weak within mainstream psychology and psychiatry. Resistance comes from two opposing directions simultaneously. From an academic psychology perspective, practitioners of Sufi-based therapy are challenged to demonstrate that their methods meet evidence-based practice standards. From the side of traditional Islam, some scholars express concern that the formalisation and academization of Sufism will reduce a living spiritual tradition to a repertoire of

clinical techniques, stripping it of its properly soteriological character (Apriyana et al., 2026; Ar et al., 2025).

The path between these two resistances is not to choose one over the other, but to pursue what Kuntowijoyo called the “Islamization of knowledge” in its deepest sense: not merely integrating Islamic values into modern science, but transforming the entire epistemological framework of science from within the perspective of Islam. Concretely, this requires developing neurospiritual research that tests the clinical efficacy of *dhikr* and *muraqabah* using neuroimaging, of the kind Saraei et al. (2023) have begun to demonstrate is methodologically feasible; building a rigorous body of evidence-based literature on Sufi therapeutic practice, addressing the methodological limitations that Cetinkaya and Billings (2023) identify in the existing evidence base; and developing psychological assessment instruments that are sensitive to the spiritual dimension of human experience and accountable to Islamic anthropological categories (Castro, 2026; Hadisi et al., 2025).

At the institutional level, PTKI needs to establish dedicated centres for Sufistic Psychotherapy that function simultaneously as research laboratories and community service facilities. Standardising the profession through the certification of Sufi therapists and developing a professional ethics grounded in Islamic values, rather than borrowed from Western psychology codes, is essential for Sufistic Psychotherapy to gain recognition as a legitimate profession in academic, legal, and social terms. The Consortium for Sufism and Psychotherapy (KOTATERAPI) in Indonesia has a strategic role to play in driving this institutional development, building on its existing curriculum standards and professional networks.

CONCLUSION

This article shows that Sufistic Psychotherapy is not a local variant of modern psychotherapy but a systematic, epistemologically grounded decolonial paradigm. Curriculum analysis and interview data from five PTKIs show that the existing Body of Knowledge remains dominated by textual-normative (*bayānī*) and spiritual-intuitive (*‘irfānī*) modes of knowledge, with the rational-empirical (*burhānī*) dimension comparatively underdeveloped and no institution yet possessing a standardised protocol for validating Sufi therapeutic practice. On this empirical basis, and through the interpretive and normative reasoning set out in the Discussion, the article reconstructs Sufistic Psychotherapy upon five pillars derived from the Islamic scholarly tradition: a spiritual-physical ontology that refuses positivist reductionism; an integrative epistemology that recognizes revelation and spiritual intuition as legitimate sources of knowledge alongside empirical method; an axiology of *tazkiyat al-nafs* that redefines health from an Islamic worldview; a transdisciplinary methodology that places Sufi practice at the core of the therapeutic process; and an anti-dichotomous paradigm that refuses the Western religion-science divide.

The significance of this reconstruction is twofold. Theoretically, the decolonisation project embodied in Sufistic Psychotherapy is not a reactive anti-Western stance but a positive affirmation of the intellectual richness of the Islamic tradition, a demonstration that Islam possesses sufficient epistemological resources to develop an authentic and globally contributive science, consistent with the spirit expressed by Al-Attas that Islam can produce knowledge that is both clinically effective and capable of guiding the soul toward its spiritual perfection. Practically, the reconstructed Body of Knowledge offers PTKIs and the KOTATERAPI consortium a concrete basis for curriculum standardisation and future professional certification. The critical challenge ahead is integrating

modern scientific validation, particularly neurospiritual science, into this BoK without compromising its epistemological authenticity. This is not a contradiction but the creative tension that makes Sufistic Psychotherapy a living, developing scientific paradigm capable of genuine dialogue with modernity without sacrificing its identity.

This article is nonetheless subject to several limitations that should guide the interpretation of its claims and future research. First, the analysis is conceptual and curriculum-based rather than clinically experimental: it has not tested the clinical efficacy of Sufistic Psychotherapy through controlled outcome studies, neuroimaging, or other evidence-based designs, and its findings on therapeutic effectiveness should accordingly be read as diagnostic of the existing epistemological structure rather than as proof of clinical outcomes. Second, the empirical base is bounded: curriculum documents were analyzed across all five sampled PTKIs, but in-depth interviews were obtained from only three of those five (UIN Raden Fatah Palembang, UIN Sunan Kudus, and, from the wider KOTATERAPI network, UIN Padang), together with one external pesantren-based scholar; no interview informant was available from UIN Walisongo Semarang, UIN Raden Mas Said Surakarta, or UIN Syekh Wasil Kediri, so the findings for those three sites rest on curriculum documents alone. Curriculum standardisation and data quality also varied across institutions, and the number of faculty with dual competence in both Sufism and modern psychotherapy remains limited, which together may have constrained the depth of comparative analysis. Third, the reconstruction proposed here operates at the macro level of Body of Knowledge design rather than at the level of a validated clinical instrument, and it does not offer a cross-regional comparative account of how local socio-cultural variation might shape Sufistic Psychotherapy's implementation beyond the five sites studied. These limitations point directly to a future research agenda of evidence-based and neuroscience-informed studies of Sufi therapeutic practice, together with broader cross-institutional and cross-regional replication, through which Sufistic Psychotherapy can make its most distinctive contribution to the global project of decolonising knowledge and strengthening Islamic epistemology in the contemporary world.

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