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Tawakkul Mediates Religious Orientation and Depression among Muslims

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Abstract

Being an important Islamic concept, tawakkul is a fundamental and core value in the Islamic belief system. The present research intended to investigate the mediating role of tawakkul between religious orientation and depression. A purposive sample of N = 350 Muslim adults the age of 25 years and above (M = 31.92, SD = 8.72) was recruited for the study. A cross-sectional survey research design was used. Tawakkul Scale, the Urdu version of the depression subscale of DASS-21, and the Urdu version of the Religious Orientation Scale were used in the present study. Results indicated that tawakkul had a negative relationship with depression and extrinsic social religious orientation. On the other hand, it had a positive relationship with intrinsic religious orientation and extrinsic personal religious orientation. The findings of the path model indicated that tawakkul mediated the relationships of intrinsic and extrinsic personal religious orientations with depression. Limitations, implications of the findings of the present study, and suggestions for future investigations have been reflected upon.

Keywords: tawakkul, intrinsic religious orientation, extrinsic personal religious orientation, extrinsic social religious orientation, depression

Introduction

Tawakkul is one of the core value in the Islamic belief system. There are numerous verses in the Holy Quran in which the word 'tawakkul' has been used. God has ordered Prophet Muhammad (PBUH) and Muslims to put tawakkul in Him; previous Prophets put tawakkul in Him; there are rewards for those who have tawakkul in God; and finally, it is one of the basic requirements of faith. Tawakkul in God-the Exalted is a great virtue that has an important place in the religion of Islam. It is one of the most essential

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obligations of faith, one of the most highly appreciated beliefs in Islam that brings the individual closer to the creator. This is because nothing can be done without the will of God and reliance on Him and seeking His help is highly appreciated (Al-Munajjid, 2017).

In Islamic literature, tawakkul means trusting, relying, depending, and having confidence in God alone. In psychology, tawakkul has been defined as the belief in the sufficiency of God that involves positive efforts to achieve one's goals along with unconditional acceptance of God's will. The highest degree of tawakkul is expressed by the annihilation of one's own will (Gondal, 2021). According to this definition, tawakkul has four components. The first one is the belief in the sufficiency of God. It is defined as a faith that only God is the creator, master, and controller of everything in the universe; He is enough for me and He will take care of all my affairs in this world and the hereafter. Thus, if an individual has belief in the sufficiency of God, only then he/she will be able to put tawakkul in Him.

The second component is unconditional acceptance of God's will. 'Unconditional acceptance of God's will can be easily understood in relation to belief in God. When an individual has the faith that God loves him and is taking care of all his affairs, he will be satisfied with what has been going on in his life. Even in times of difficulties, the individual will not be tensed or get stressed; rather he will be sure that God has planned something good for him even in the face of difficulty. The individual will accept all the circumstances in his life because he thinks that everything that happens, happens with the will of God; and as God is the Most Merciful and loves His servant more than anyone else, then every decision of God is also full of mercy and betterment for an individual. Hence, the individual will unconditionally accept God's will and will also be satisfied with it.

The third component is 'efforts'. Putting efforts into achieving one's goals and moving towards betterment is also an important factor of tawakkul. It is ordered to Muslims that put effort into achieving something along with keeping trust in God. In the Holy Quran, God Almighty says "Man will get only what he will try for" (Surah Najm, 39). So, just sitting idle and saying I have tawakkul in God, is not tawakkul. Efforts must be put to achieve something in this world and the Hereafter. Islam teaches efforts

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in tawakkul. From an Islamic point of view, just keeping trust and relying on God without doing efforts is not tawakkul. It is just a misunderstanding of people that their tasks will be automatically done by putting tawakkul in God and not doing efforts for it. God has created this world with resources. The system of this world works on efforts and resources. Without effort, success can't be achieved. Islam does not promote this misperception. Hence, 'effort' in tawakkul is defined as doing positive tasks to achieve one's goals, solve one's problems, and live a better life. For example, when someone is ill, taking medicine along with being optimistic about God is included in the efforts. Doing a job to earn one's livelihood along with belief in God is also included in efforts. Keeping one's house locked at night along with trusting in protection by God is also included in efforts.

The fourth component is the annihilation of one's own will. This factor corresponds to the highest degree of tawakkul. There are three degrees of tawakkul. This third and the highest degree of tawakkul, as explained by the scholars, is similar to the example of a dead person, whose corps is in another person's hands, and the dead person has no movement in itself and it only moves in the direction in which the person moves him. Similarly, the mutawakkil, who is at this third level, annihilates his own will and wishes and has completely given his life in the hands of God. This individual does not want anything for himself, does not seek help from anyone including God, and does not pray to God because he thinks that what God has given him and what God has planned for him is the best, whatsoever it is (Naraqi, 1431 AH; as cited in Maktabdar, 2014). Hence, 'annihilation of one's own will is defined as completely nullifying personal desires, wishes, needs, and wants; and leaving oneself completely in God's hands. Just as a dead body has no personal movement or desires, the annihilation of one's own will is also similar to that.

In clinical psychology, depression is a common indicator of poor mental health. Religiousness and putting trust in God could be effective ways to ameliorate depression. Results of an empirical study found that strong faith (tawakkul) and high trust in God were linked with a lower degree of depression, and greater personal contentment (Rosmarin et al., 2009). Another research found that religion has a strong positive relationship with mental health and well-being and a negative relationship with anxiety and



depression (Ismail & Desmukh, 2012). Wills et al. (2003) found that religious beliefs significantly reduced the negative impact of life stressors and also prevented drug abuse. Another research depicted that being pure in one's religious beliefs is linked with lower levels of depression (Smith et al., 2003; as cited in Stulp et al., 2019). A systematic review study found that religious and spiritual involvement is inversely proportional to suicidal ideation, suicidal attempts, and completed suicide (Koenig et al., 2012). Therefore, having a strong reliance and belief in God, a mutawakkil may compete depression, and if the negative symptoms of depression are already present, inducing tawakkul as a therapeutic intervention may result in their significant reduction. In other words, tawakkul and depression are likely to be negatively related to each other. The next section describes religious orientation and explains it in relation to the focal variables of the present study.

Religion has a very important role in human life. Allport (1967) as cited in Titov (2013) defined religious orientation as the perception about religion is either an end to itself or a means to an end. In simpler words, religious orientation is the view of an individual about religion as either to be devoted purely to religion or use religion to gain personal/social benefits. According to Allport and Ross (1967) theory of religious orientation, there are two main religious orientations: intrinsic and extrinsic. People with intrinsic religious orientation have a pure commitment to their religion and they live their lives in accordance with the principles of religion. Moreover, they regularly practice their religious rituals and have high levels of religiosity. Whitley and Kite (2010) proposed that people with intrinsic religious orientation are sincere with their religion and completely believe in their religion and its teachings with a pure heart. They try their best to live their lives as suggested and taught by their religion. On the other hand, people with extrinsic religious orientation are not sincere with the religion and use religion to seek non-religious, personal, and social goals. These individuals usually live their lives in accordance with the social norms and demands irrespective of what their religion demands from them (Allport & Ross, 1967). Moreover, extrinsically oriented individuals can manipulate and mold their religious beliefs as and when required socially, personally, or politically. They perceive religion as a source to obtain social status, participate in a social group, and seek support (Hunsberger & Jackson,

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<u>2005</u>). These people tend to be more rigid and prejudiced as compared to intrinsically orientated people (Allport & Ross, <u>1967</u>). Based on this theory of Allport and Ross (<u>1967</u>), a psychometrically sound instrument Religious Orientation Scale was developed (Allport & Ross, <u>1967</u>) to measure intrinsic and extrinsic religious orientations.

As stated above, people with intrinsic religious orientation have a pure commitment to their religion, and tawakkul is one of the positive virtues that is taught by religion. People with intrinsic religious orientation have a more positive connection with God and have strong belief in the positive aspects of religion. This positive involvement in religion is usually accompanied by following all the principles of religion in a positive way. Since tawakkul is also a positive virtue, the requirement of faith, and a way of connecting with God, therefore, it is expected to positively correlate with intrinsic religious orientation. Moreover, tawakkul is strongly related to religion. Its core belief in the sufficiency of God is a manifestation of religion. Therefore, intrinsic religious orientation is likely to predict tawakkul positively. Moreover, a study conducted in Iran depicted that intrinsic religious orientation was a significant positive predictor of happiness (Moltafet et al., 2010) and tawakkul also led to satisfaction over God's will. As both constructs lead to positive outcomes, therefore, it is very likely that both will have a positive relationship with each other. On the other hand, people with extrinsic religious orientation just use religion to achieve certain gains and are not sincere with religious beliefs. These individuals have a shallow connection with God. Their shallow bond with God may preclude them from developing tawakkul in God's sufficiency. Tawakkul only spawns in the heart of a person who has a pure belief in the sufficiency of God; hence, it is expected that extrinsic religious orientation would be a negative predictor of tawakkul.

Findings of a recent study suggested that intrinsic religious orientation may yield positive outcomes like satisfaction whereas extrinsic orientation may lead to certain negative outcomes like suicidal ideation (Lew et al., 2018). Regarding religious orientation and indicators of mental health, findings of a study depicted that intrinsic religious orientation has negative effects on depression and anxiety, which in turn, improved mental health whereas, extrinsic religious orientation increased depression (Amrai et al.,



2011). Another study found that people with extrinsic religious orientation had higher levels of depression and uncontrollable stress as compared to those who had intrinsic religious orientation (Darvyri et al., 2014). A study involving a systematic review and meta-analysis of previous studies found that anxiety and depression had negative correlations with internal religious orientation and positive correlations with external religious orientation (Forouhari et al., 2019). In the light of the above discussion, it can be argued that intrinsic religious orientation leads to tawakkul, which in turn may lower depression. For example, people with intrinsic religious orientation are likely to have a stronger connection with God which will lead them to put trust in Him and this trust will serve as a buffer against depression. Alternatively, people with extrinsic religious orientation are less positively connected to God and this will lead to a lack of trust in Him; this will likely to lead an increase in depression. Hence, tawakkul may mediate the relationship between religious orientations and depression.

Figure 1

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Conceptual Framework of the Present Study

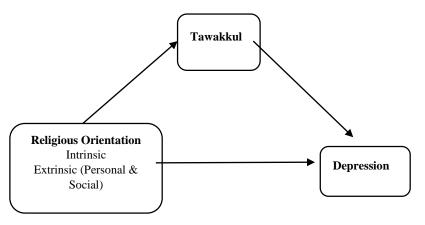


Figure 1 describes the conceptual framework of the present study. It is expected that intrinsic religious orientation would positively predict tawakkul and negatively predict depression. Extrinsic religious orientation is expected to positively predict depression and negatively predict tawakkul. Tawakkul is likely to mediate between religious orientation and depression.

Hypotheses

- 1. Intrinsic religious orientation will have a positive correlation with tawakkul and a negative correlation with depression.
- 2. Extrinsic religious orientation will have a positive correlation with depression and a negative correlation with tawakkul
- 3. Tawakkul will have a negative relationship with depression
- 4. Tawakkul will mediate between religious orientation and depression.

Method

Sample

Sample comprised 350 Muslim adults; with age 25 and above (M = 31.92, S.D = 8.72). The purposive sampling technique was used to collect data. All the participants were Muslims. Men and women both were included in the study. All the participants were literate with a minimum education of matriculation level.

Instruments

Tawakkul Scale

Gondal et al. (2021) developed a scale in Urdu to assess tawakkul. It comprises 24 items, each measured on a 7-point Likert-type response format ranging from 1 (strongly disagree) to 7 (strongly agree). It measured four dimensions of tawakkul that included (i) belief in the sufficiency of Allah; (ii) unconditional acceptance of God's will and satisfaction; (iii) effort-putting; and (iv) absolute annihilation of one's own will. No item was reversed scored. The composite score range was 24-168, where a high score represented a high level of tawakkul. Gondal et al. (2021) reported a degree of reliability for the Tawakkul Scale (Cronbach's alpha = .95). In the present study, the reliability of the scale was also quite high (Cronbach's alpha = .95).



Depression, Anxiety, and Stress Scale-21 Urdu Version (DASS-21 UV)

The study used the depression subscale of Aslam's (2018) Urdu adaptation of the Depression, Anxiety and Stress Scale-21 (Lovibond & Lovibond, 1995). The depression subscale has 7 items and each item is measured on a 4-point Likert-type response format ranging from 0 (did not apply to me at all) to 3 (applied to me very much or most of the time); with no reverse-scored items. Composite scores on subscales were multiplied by 2 to calculate the final score. Data subscale depression was used in this study. The reliability of the scale was quite satisfactory in this study (Cronbach's alpha = .84) and was comparable to what Aslam and Kamal (2015) reported (Cronbach's alpha = .86).

Urdu Version of Religious Orientation Scale

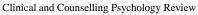
Urdu version of ROS (Khan et al., 2016) was used to determine the religious orientation of the participants. It consists of 14 items with a 5-point Likert-type rating scale with 1 (*strongly disagree*) to 5 (*strongly agree*). It has 3 subscales: intrinsic orientation; extrinsic social; and extrinsic personal. Items 1, 3, 4, 5, 7, 10, 12, and 14 correspond to intrinsic orientation; items 2, 11, and 13 correspond to extrinsic social; and items 6, 8, and 9 correspond to extrinsic personal dimension. There is no reverse-coded item on the scale. Scoring for each dimension is obtained by adding the responses of individual items in each subscale. A high score on each domain indicates a high degree of that orientation. In the present study, Cronbach's alpha coefficients were .45, .66, and .77 for the internal orientation dimension, extrinsic social religious orientation dimension, and extrinsic personal dimensions, respectively, which are comparable to reliability coefficients of .57, .58, and .83, reported by Khan et al. (2016).

Research Design and Procedure

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A cross-sectional survey research design was used in the present study. After the finalization of the scales, permission was taken from the authors for using the scales. For data collection, participants were approached directly and after their consent for participation, they were briefed about the objectives and nature of the study. They were ensured that the confidentiality of their provided information will be maintained and it will only be used for research purposes. Then, a test booklet including all the



scales and demographic sheets was given to participants and they were asked to fill every portion of the questionnaire correctly, sincerely, and honestly. There was no time limit to complete the questionnaire. Data was collected from a sample of 350 participants. Then, data was entered in IBM-SPSS and different statistical analyses were run on it to test the proposed hypotheses. After analysis, results were compiled and discussed.

Results

Table 1

Demographic variables	f	(%)		
Gender				
Male	102	29.1		
Female	248	70.9		
Family system				
Nuclear	250	71.4		
Joint	100	28.6		
Residence				
Urban	281	80.3		
Rural	69	19.7		
Marital Status				
Single/Unmarried	226	64.6		
Married	124	35.4		
Education				
Matriculation or below	3	0.9		
Intermediate	7	2.0		
Bachelor	40	11.4		
Masters	300	85.7		
Profession				
Govt./Private Job	184	52.6		
Private business	8	2.3		
Agriculturists	1	0.3		

Demographic Characteristics of the Participants (N = 350)



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Demographic variables	f	(%)
Unemployed/housewife/retired	157	44.9
Age	31.92 years (M)	8.72 years (SD)

Note. f = frequency; %=percentage; M = mean; S.D = standard deviation.

Table 1 shows the distribution of various demographic characteristics such as gender, family system, residential background, marital status, educational qualification, and profession of the participants of the present study in terms of frequency and percentage. It also reports the mean and standard deviation of the age of the participants in years.

Table 2 shows the psychometric properties and correlation matrix of scales used in the present study. The alpha reliability coefficients of all the scales were > .60 except for intrinsic religious orientation which was .45. The values of skewness and kurtosis of all scales are within the acceptable range, which provides evidence for the univariate normality of the focal measures of the present study. Tawakkul has a significant positive relationship between intrinsic religious orientation and extrinsic personal religious orientation. Tawakkul relates negatively with depression and extrinsic social religious orientation and has a significant positive relationship with extrinsic social religious orientation and has a significant negative relationship with extrinsic personal religious orientation.

Table 2

Descriptive Statistics, Alpha Reliability Coefficient, and Univariate Normality of Scales in Study and their correlation matrix (N = 350)

Scales	М	SD	α	Sk ^a	Ku ^b	Twkl	Depres	Int Ro	ES RO	EP RO
Twkl	142.56	23.16	.95	-1.95	5.74		24**	.45***	12*	.40***
Depress	12.70	4.19	.83	.84	06			08	.10*	22**
Int RO	27.91	3.72	.45	68	1.20				.33***	.48***
ES RO	7.24	2.44	.66	04	47					08
EP RO	12.32	2.37	.77	-1.03	1.27					

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Note. Twkl. = Tawakkul; Depres = depression; Int. RO = Intrinsic religious orientation; ES RO = Extrinsic social religious orientation; EP RO = Extrinsic personal religious orientation

*p < .05 **p < .01 ***p < .001; a Standard error = .13; b standard error = .26

Meditational Model

The proposed path model of the present study was tested in IBM-SPSS Amos version 24. The path coefficients were computed through the maximum likelihood method along with bias-corrected 95% bootstrap confidence intervals generated from 2000 bootstrapped samples. The chi-square to df ratio was 1.48. Other indices of model fit also demonstrated an excellent fit between the data and the model. The values of CFI, GFI, and IFI are all above .90 and hence meet the most stringent criteria of fit indices (GFI = .995; AGFI = .975; CFI = .995; NFI = .985). The value of RMSEA is .037 with a non-significant p_{close} value ($p_{close} = .52$). All these indices suggest that the data fitted well with the proposed model. The path diagram of the model is schematically presented in Figure 2

Figure 2

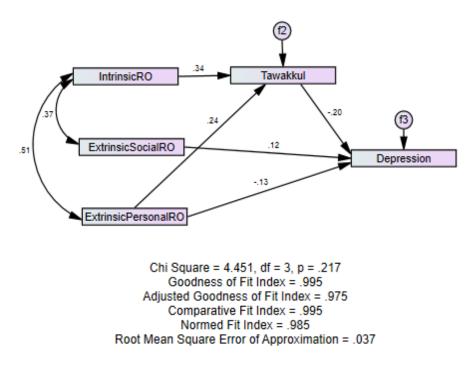
Meditational Model of Religious Orientation and Depression



Table 3 depicts unstandardized and standardized coefficients for various direct and indirect effects which were computed through Amos. Intrinsic religious orientation has a significant positive direct effect on tawakkul. The direct effect of extrinsic social religious orientation on depression was significant and positive. The direct effect of extrinsic personal religious orientation on tawakkul was significantly positive. Tawakkul has a significant negative direct effect on depression. Extrinsic personal religious orientation and intrinsic religious orientation depicted negative and significant indirect effects on depression through tawakkul. Thus, tawakkul mediated the relationships between extrinsic personal religious orientation and depression; and intrinsic religious orientation and depression.

Table 3

Path Coefficients for Direct and Indirect Effects of Different Religious Orientations and Tawakkul on depression (N = 350)





Path	В	95% CI			
		LL	UL	- β	р
Intrinsic → Tawakkul	2.06	.04	.15	.34	.001
Extrinsic Personal RO→ Tawakkul	2.36	.11	.23	.24	.001
Extrinsic Social RO→ Depression	.21	.13	.35	.12	.002
Extrinsic Personal RO→ Depression	28	33	11	13	.002
Tawakkul \rightarrow Depression	03	34	17	20	.001
Intrinsic RO \rightarrow Tawakkul \rightarrow Depression	07	19	03	07	.007
Extrinsic Personal RO \rightarrow Tawakkul \rightarrow Depression	08	18	04	05	.007

Note. RO=religious orientation

Discussion

The present study aimed to explore the link of tawakkul in the relationship between religious orientation and depression. Results depicted that tawakkul was negatively related to depression (see Table 2). It can be easily justified through the fact that tawakkul involves a strong belief in God along with satisfaction over God's will. The negative emotional states emerge from negative thoughts, emotions, beliefs, and cognitions. But in tawakkul, an individual has the belief that everything that happened in the past was good for him/her; and everything that will happen in the future would also be good for him/her because everything is done by God and He is the most merciful. Hence, there is no space left for negative thoughts; therefore, depression may not emerge. A saying of the Prophet of Islam (PBUH) can also be quoted in this regard. The Holy Prophet^{agg}advised his Ummah to recite, "God is sufficient for us, and He is an excellent guardian, and we repose our trust in Him" for seeking help in distressful conditions. This

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saying is a manifestation that tawakkul has a negative effect on negative emotional states, particularly depression. Results of an empirical study found that strong faith (tawakkul) and high trust in God were negatively linked with anxiety and depression, and might lead to greater personal contentment (Rosmarin et al., 2009).

Correlation analysis depicted that tawakkul was positively related to intrinsic religious orientation and extrinsic personal religious orientation; while it was very weakly related to extrinsic social religious orientation (see Table 2). Path analysis was also carried out with religious orientation as a predictor and depression as an outcome. Magnitudes and directions of direct and indirect effects in this model have been shown in Table 3. Model fit indices of this model, depicted in Table 3 and Figure 2, testified that the proposed measurement model fit well with the data since values of CFI, GFI, NFI, and AGFI were greater than .90 with a non-significant chi-square value; while the value RMSEA was .037. It was postulated that intrinsic religious orientation will have a direct positive effect on tawakkul; and a direct negative effect on depression. This hypothesis was partially supported. It was also postulated that extrinsic religious orientation will have a direct negative effect on tawakkul; and a direct positive effect on depression. This hypothesis was partially supported. The direct effects of this model depicted that intrinsic religious orientation and extrinsic personal religious orientation had a significant positive effect on tawakkul and tawakkul negatively predicted depression. These findings are in line with previous findings of different studies. Whitley and Kite (2010) proposed that people with intrinsic religious orientation are more committed to their religion and completely believe in the teachings of their religion with a pure heart. They try their best to live their lives as suggested and taught by their religion. However, people with extrinsic religious orientation are not sincere with the religion and use religion to seek non-religious goals. These individuals usually live their lives in accordance with the social norms and demands irrespective of what their religion demands from them. Moreover, they can manipulate and mold their religious beliefs as and when required socially, personally, or politically. They perceive religion as a source to obtain social status (Hunsberger & Jackson, 2005). Tawakkul, as mentioned earlier, is strongly related to religion and its component 'belief in the sufficiency of God is actually a manifestation of religion, hence, tawakkul

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is strongly related to intrinsic religious orientation but weakly with extrinsic social religious orientation. Regarding extrinsic personal religious orientation, tawakkul is significantly and positively related to it. In extrinsic personal religious orientation, religion is being used for achieving some positive personal gains. As depicted by the items of extrinsic personal religious orientation, religion is used to get rid of tensions and to get protection; to seek relief in times of difficulties and grief, and to seek happiness and peacefulness. All these functions are positive and Islamic Shari'ah allows its followers to achieve these goals through religion. Only one verse is enough to provide for its justification. In the Holy Quran, God stated, "Be aware! Remembrance of Allah brings peace to heart" (Surah Ra'ad, 28). Similarly, the basic function of tawakkul is also reducing the anxiety and tension related to any matter. Hence, extrinsic personal religious orientation and tawakkul are positively related to each other.

The present study hypothesized that tawakkul would mediate between religious orientation and depression. This hypothesis is also supported. The indirect paths of this model depicted that tawakkul mediated two paths. Firstly, tawakkul mediated the relationship between intrinsic religious orientation and depression. The direction of this path was negative. It means that having intrinsic religious orientation will lead to high tawakkul, and high tawakkul will lead to a very low degree of depression. As discussed earlier, people with intrinsic religious orientation are sincere with their religion and have positive perceptions of religion; and tawakkul is also a positive manifestation of religion; hence, intrinsic religious orientation was a positive predictor of tawakkul. Further, having high tawakkul lowers depression levels. This is because tawakkul involves complete trust in God that everything is better for oneself and this trust eliminates depression. Secondly, tawakkul mediated the relationship between extrinsic personal religious orientation and depression. The direction of this path was also negative. As discussed earlier, extrinsic personal religious orientation functions to get rid of negative emotions and to achieve peace; hence, it positively predicted tawakkul. Further, tawakkul reduced depression levels because the peace of mind created as a result of tawakkul tends to reduce negative emotional states.

Conclusion

Department of Clinical Psychology Volume 3 Issue 2, Fall 2021 Tawakkul is an important concept in Islamic literature. Tawakkul helps reduce depression. Our findings indicated that individuals who are sincere with their religion i.e., who have intrinsic religious orientation may have a high degree of tawakkul, which in turn may protect them from developing symptoms of mental health issues. Alternatively, individuals who use religion to gain certain social benefits may have a low degree of tawakkul, which may increase their susceptibility to symptoms of depression. Hence, in the present age with a high prevalence of these mental issues, particularly depression, there is a dire need to create awareness in society about the importance of tawakkul. Tawakkul is also beneficial in the field of clinical and counseling psychotherapy as it may help alleviate clinical disorders and other daily routine life problems.

Limitations

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Like every empirical research, the present research has its share of limitations, which are highlighted below:

- 1. The study has limited generalizability as the data were collected from some cities of the Punjab province only (Sargodha, Khushab, Lahore, etc), so to enhance the external validity, further research should be conducted on a large and diverse sample.
- 2. The present study used cross-sectional research. Although several potentially important associations were identified, causality cannot be inferred without follow-up experimental research or longitudinal research exploring proposed causal mechanisms over time. It might be checked through longitudinal research whether the participants' tawakkul remains the same over time or there might be some fluctuations in its levels.
- 3. All the scales used in the present study were self-reported measures, therefore mono-method bias and social desirability can be a potential threat to internal validity.

Recommendations and Suggestions

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Several recommendations are given to future researchers as highlighted below:

- 1. It is recommended to practically introduce tawakkul in clinical and counseling therapies. Patients should be addressed about the importance of tawakkul in solving their problems. The findings of the present research can be very insightful for psychologists, psychiatrists, counselors, and psychotherapists. They can develop programs, seminars, and workshops for fostering tawakkul in their clients which help them deal more effectively with the adversities and setbacks of life; particularly depression. Psychologists and Islamic scholars should play an active role in developing tawakkul in the general population. The importance and benefits of tawakkul should be repeatedly promoted so that the common masses get to know them and adopt tawakkul as a cardinal feature of their lifestyle.
- 2. Tawakkul can also be explored in relation to certain focal constructs that are pivotal in explaining the development of mental health issues. From the perspective of cognitive psychology, hopelessness and helplessness are the key variables that explain the development of depression. Tawakkul is expected to show a negative relationship with these variables. People with tawakkul are always hopeful that Allah will do better for them; hence, no space is left for hopelessness. Similarly, people with tawakkul do positive efforts along with keeping hope to bring positivity in their lives; hence, there is no chance of learned helplessness. These relationships may also be explored.

Practical Implications of the Present Study

Some practical implications of the present study are discussed here:

1. In the field of clinical psychology, tawakkul should be incorporated into clinical therapy as it reduces depression. Clinicians should strengthen the belief system of patients by encouraging them to put in positive efforts. Tawakkul should be put in one's every matter of life because it leads to a reduction of the anxiety caused by different factors. Thus, the inclusion of tawakkul in therapies may prove very beneficial in the treatment of different mental health issues.





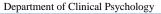
2. Tawakkul finds another implication in cognitive-behavioral therapies such as CBT and REBT. These therapies work on patients' cognitions, emotions, and beliefs to cure the problems. Clinicians can incorporate tawakkul in these therapies by strengthening their beliefs in God. This positive belief can help change the negative beliefs; ultimately changing the patient's thoughts and behaviors.

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