



Integrating Self-Compassion into Islamic Counseling: Evidence from a Systematic Literature Review

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Abstract. Self-compassion has been increasingly recognized as a vital factor in promoting mental health, while Islamic counseling emphasizes the integration of spiritual values into the therapeutic process. However, research combining these two paradigms remains limited, and no comprehensive synthesis has systematically examined their conceptual relationship or potential integration within clinical practice. This study aimed to synthesize the existing literature on self-compassion and Islamic counseling to explore their integrative potential in supporting mental health. A Systematic Literature Review (SLR) was conducted in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. A comprehensive literature search within the Scopus database yielded 53 peer-reviewed articles that met the established inclusion criteria. The data were analyzed using thematic and narrative synthesis to identify core themes, conceptual alignments, and research gaps. The findings indicate that self-compassion fosters enhanced emotion regulation, resilience, and adaptive coping, while Islamic counseling promotes psychological well-being through the spiritual principles of *rahmah* (compassion), *mubasabah* (self-reflection), *tawakkul* (trust in God), and *tazkiyat al-nafs* (purification of the soul). Furthermore, the review revealed a robust conceptual alignment between the psychological mechanisms of self-compassion and the core tenets of Islamic counseling. These findings establish a solid conceptual foundation for developing an integrative Islamic counseling model that incorporates self-compassion, ultimately contributing to more holistic, culturally responsive mental health interventions for Muslim populations.

Keywords: Self-compassion, Islamic counseling, mental health, systematic literature review.

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Introduction

Mental health has become one of the most pressing public health challenges worldwide. The World Health Organization (WHO, 2022) estimates that more than 970 million people are living with mental disorders, with depression, anxiety, and stress-related disorders representing the leading causes of reduced quality of life and productivity. Mental health disorders not only impair individual well-being but also impose substantial social and economic burdens on families, communities, and healthcare systems. These challenges have stimulated the development of psychological approaches that focus not only on alleviating psychological symptoms but also on strengthening protective factors that enhance psychological well-being and individual resilience. In religious societies, including Muslim communities, mental health approaches that incorporate spiritual dimensions have become increasingly important because religious values often serve as sources of meaning, hope, and coping strategies when dealing with psychological distress (Al-Dousari & Prior, 2019; Rothman et al., 2024).

One psychological construct that has received considerable attention over the past two decades is self-compassion. Neff (2003) defines self-compassion as the ability to treat oneself with kindness in the face of failure or suffering, while recognizing that such experiences are part of the shared human condition and maintaining emotional balance through mindfulness. A growing body of research has demonstrated that self-compassion is negatively associated with depression, anxiety, stress, and burnout, while showing positive associations with psychological well-being, life satisfaction, emotion regulation, and resilience (Crego et al., 2022; Inwood & Ferrari, 2018; Kotera & Ting, 2019; Zhang & Shen, 2023). Beyond serving as a protective factor against psychological disorders, self-compassion also enables individuals to develop more adaptive coping strategies, allowing them to respond to life challenges in healthier and more constructive ways.

Despite the rapid growth of self-compassion research, the existing literature has been largely dominated by Western psychological perspectives grounded in mindfulness-based approaches, compassion-focused therapy, and positive psychology (Kotera & Ting, 2021; Tran et al., 2022). These approaches have generated substantial empirical evidence supporting the effectiveness of self-compassion in promoting mental health. Nevertheless, relatively little attention has been given to religious and spiritual dimensions, particularly within Muslim populations. Bibliometric analyses indicate that self-compassion research remains concentrated within the traditions of clinical and positive psychology, whereas its integration with religious perspectives and non-Western cultural contexts has received comparatively limited attention (Swami et al., 2021). This limitation is noteworthy because religion and spirituality are increasingly recognized as important components of culturally responsive mental health care. Oxhandler et al. (2021) reported that many mental health service users prefer counseling that incorporates their religious and spiritual beliefs, while Evans & Nelson (2021) found that aligning counseling interventions with clients' spiritual values can strengthen the therapeutic alliance and improve counseling outcomes.

Within this context, Islamic counseling has emerged as an approach that integrates psychological principles with Islamic teachings to assist individuals in addressing psychological problems. Islamic counseling views human beings not only as biological and

psychological entities but also as spiritual beings whose relationship with Allah is central to their well-being. Consequently, the counseling process seeks to foster balance across psychological, spiritual, moral, and social dimensions through principles such as rahmah (compassion), muhasabah (self-reflection), tawakkul (trust in Allah), and tazkiyat al-nafs (purification of the soul). Previous studies have shown that Islamic counseling contributes to improved emotion regulation, inner peace, psychological well-being, and individuals' ability to cope with life stressors (Abdul et al., 2025; Hanin et al., 2015; Zakaria et al., 2016; Zakaria & Akhir, 2016). These findings suggest that Islamic counseling has considerable potential as a culturally and spiritually responsive approach to mental health care for Muslim populations.

Conceptually, there are clear parallels between the principles of self-compassion and the core values underlying Islamic counseling. The self-kindness component closely aligns with the Islamic concept of rahmah, common humanity reflects the Islamic understanding that all human beings are creations of Allah and are inherently imperfect, while mindfulness shares similarities with the self-awareness cultivated through muhasabah and the strengthening of one's spiritual relationship with Allah. These conceptual similarities suggest that both self-compassion and Islamic counseling emphasize self-acceptance, emotion regulation, personal growth, and psychological well-being. Nevertheless, studies explicitly integrating these two approaches remain scarce. Most self-compassion research focuses on contemporary psychological interventions without incorporating Islamic spiritual dimensions, whereas research on Islamic counseling has largely emphasized faith (aqidah), worship (ibadah), and spiritual development without integrating contemporary psychological constructs such as self-compassion (Hanin et al., 2015; Kotera & Ting, 2021; Zakaria et al., 2016). Consequently, no systematic conceptual framework or empirically informed intervention model has yet been developed to integrate self-compassion into Islamic counseling practice for promoting mental health.

Based on the existing literature, at least three major research gaps can be identified. First, self-compassion research continues to be dominated by Western psychological perspectives, with limited attention to religious and spiritual dimensions. Second, studies on Islamic counseling have generally not incorporated contemporary psychological constructs such as self-compassion into the therapeutic process. Third, there is currently no systematic synthesis examining the conceptual relationship between self-compassion and Islamic counseling as a foundation for developing an integrated counseling model. These gaps highlight the need for a comprehensive review that systematically connects these two fields, thereby enriching both theoretical understanding and counseling practice that is responsive to the psychological, cultural, and spiritual needs of Muslim communities.

In response to these gaps, this study aims to systematically synthesize the literature on self-compassion and Islamic counseling, explore the conceptual compatibility between the two approaches, and identify the potential for integrating self-compassion into Islamic counseling as a therapeutic approach to support mental health. Using a Systematic Literature Review (SLR), this study seeks to provide a conceptual foundation for developing an Islamic counseling model that integrates the principles of self-compassion as a more psychologically, culturally, and spiritually responsive approach for Muslim

communities. Furthermore, the findings are expected to serve as a foundation for future empirical research on the development and evaluation of integrated Islamic counseling interventions.

Method

This study employed a Systematic Literature Review (SLR) following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines (Page et al., 2021). This approach was selected because it enables the systematic identification, selection, appraisal, and synthesis of the literature, thereby providing comprehensive scientific evidence regarding the potential integration of self-compassion into Islamic counseling to support mental health. In addition to enhancing the transparency of the review process, the SLR methodology minimizes selection bias and improves the reproducibility of research findings through well-documented and systematic procedures (Mark Petticrew & Helen Roberts, 2006; Moher et al., 2009). As this study relied exclusively on published scholarly articles as secondary data sources, no primary data were collected.

The literature search was conducted using the Scopus database, which was selected because it provides extensive coverage of high-quality international publications in psychology, counseling, mental health, and spirituality. The search strategy employed combinations of keywords connected with Boolean operators (AND and OR) to align with the study objectives. The primary search terms included "self-compassion," "mental health," "psychological well-being," "Islamic counseling," "Islamic psychotherapy," and "religion and spirituality in counseling." These keywords were combined iteratively to identify studies relevant to the focus of this review. Articles were selected according to predefined inclusion and exclusion criteria established prior to the literature search. The inclusion criteria are presented in Table 1:

Table 1. Inclusion Criteria

Aspect	Criteria
Publication period	2016-2026
Database	Scopus
Language	English
Research design	Quantitative, qualitative, and mixed-methods
Accessibility	Full-text articles available
Research topic	Self-compassion, Islamic counseling, Islamic psychotherapy, and mental health.

Studies were excluded if they were conference proceedings, book chapters, editorials, letters to the editor, theses, dissertations, or publications unrelated to the objectives of this review. Articles without accessible full texts were also excluded.

The study selection process followed the four stages of the PRISMA 2020 framework: identification, screening, eligibility, and inclusion (Page et al., 2021). The initial database search yielded 204 articles from Scopus. After removing duplicate records and studies that did not meet the preliminary screening criteria, 157 articles remained for title and abstract screening. Subsequently, 59 articles underwent full-text assessment, of which 40 satisfied all inclusion criteria. To minimize the risk of overlooking relevant studies, a manual search of the reference lists of the included articles was conducted, resulting in the identification of

13 additional eligible studies. Consequently, a total of 53 articles were included in the final synthesis. The complete study selection process is illustrated in Figure 1 using the PRISMA flow diagram.

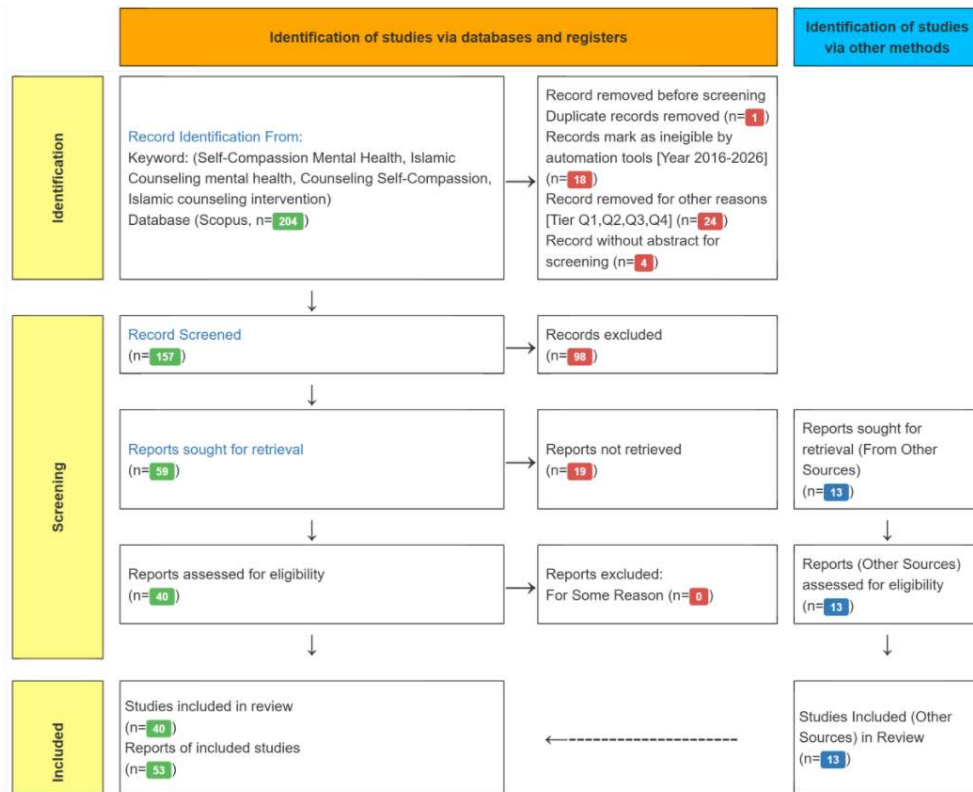


Figure 1. PRISMA flow diagram of the literature search and study selection process.

Data were extracted using a structured data extraction form that included information on the author(s), publication year, country of study, research design, participant characteristics, theoretical framework, measurement instruments, and key findings related to self-compassion, Islamic counseling, and mental health. All extracted data were subsequently cross-checked to ensure consistency and accuracy.

The included studies were analyzed using thematic analysis combined with narrative synthesis. Thematic analysis was employed to identify major themes concerning the conceptualization of self-compassion, the principles of Islamic counseling, and the potential integration of these two approaches within the context of mental health. Narrative synthesis was then used to compare, interpret, and integrate findings across the included studies, enabling the identification of recurring patterns, differences, and research gaps relevant to the objectives of this review. The analytical process involved initial coding, theme development, and the preparation of the final synthesis using a manually constructed analytical matrix to enhance transparency and facilitate the reproducibility of the review. Because this study was based entirely on secondary data obtained from published scholarly literature, ethical approval and informed consent were not required, consistent with standard practice for systematic literature reviews (Mark Petticrew & Helen Roberts, 2006).

Results

Based on the literature selection process following the PRISMA 2020 guidelines, a total of 53 articles met the inclusion criteria and were included in this review. The findings were synthesized to address the three research questions: (1) How is self-compassion conceptualized in the mental health and counseling literature, (2) What is the conceptual relationship between self-compassion and the principles of Islamic counselling, and (3) What is the potential for integrating self-compassion as a therapeutic construct into Islamic counseling to support mental health. Accordingly, the results are presented in four sections: characteristics of the included studies, the conceptualization of self-compassion, the conceptual relationship between self-compassion and Islamic counseling, and the potential integration of self-compassion into Islamic counseling.

Characteristics of the Included Studies

Following the PRISMA 2020 literature selection process, 53 articles satisfied all inclusion criteria and were included in the final analysis. These studies demonstrated considerable diversity in terms of research design, geographical context, participant characteristics, and research focus related to self-compassion, mental health, spirituality, and Islamic counseling. This diversity provided a robust foundation for synthesizing the conceptual evidence regarding the potential integration of self-compassion into Islamic counseling.

Table 2. Characteristics of Included Studies

Characteristics	Frequency
Study Design	
Quantitative	21
Qualitative	14
Conceptual and Review	18
Geographical Context	
Asia	23
Europe	12
North America	10
Multinational	8
Study Population	
University Student	19
Healthcare Professionals	14
Muslim Community	11
Clinical Clients	9

As shown in Table 2, quantitative studies constituted the largest proportion of the included literature ($n = 21$), followed by conceptual and review articles ($n = 18$) and qualitative studies ($n = 14$). Regarding geographical distribution, most studies were conducted in Asia, particularly in Malaysia, Indonesia, Iran, and Pakistan ($n = 23$), followed by Europe ($n = 12$), North America ($n = 10$), and multinational studies ($n = 8$). In terms of study populations, university students represented the most frequently investigated group ($n = 19$), followed by healthcare professionals ($n = 14$), Muslim communities ($n = 11$), and clinical clients ($n = 9$).

Overall, these findings indicate that research on self-compassion has expanded across diverse cultural settings, populations, and methodological approaches. Nevertheless, studies specifically examining the integration of self-compassion into Islamic counseling remain relatively limited compared with the broader body of self-compassion research within

general psychology. This observation highlights an important gap in the existing literature and underscores the need for further research on integrating contemporary psychological constructs with Islamic counseling practices.

Conceptualization of Self-Compassion in Mental Health and Counseling

The synthesis of the 53 included studies indicates that self-compassion is consistently conceptualized as a psychological resource that contributes to the promotion of mental health. Most studies describe self-compassion as an adaptive psychological mechanism that enables individuals to manage negative emotional experiences by enhancing emotion regulation, self-acceptance, and the ability to cope with psychological distress. Individuals with higher levels of self-compassion consistently report lower levels of depression, anxiety, stress, and psychological distress, together with higher levels of psychological well-being, resilience, and quality of life (Clarke et al., 2025; Kim & Ko, 2018; Kotera & Ting, 2019; Lau et al., 2020). In addition, several studies have shown that self-compassion functions as both a mediator and a moderator, strengthening the relationships between mindfulness, emotion regulation, and psychological well-being (Ajilchi et al., 2025; Tran et al., 2022).

The thematic analysis identified four major themes that characterize the conceptualization of self-compassion in the literature: (1) a psychological resource, (2) an emotion regulation mechanism, (3) a protective factor against psychological disorders, and (4) a therapeutic mechanism that supports mental health interventions. A summary of these findings is presented in Table 3.

Table 3. Major Conceptualizations of Self-Compassion in the Mental Health and Counseling Literature

Topic	Key Findings	References
Psychological resource	Enhances psychological well-being and quality of life	Kim & Ko (2018); Kotera & Ting (2019)
Emotion regulation	Reduces psychological distress through adaptive emotion regulation	Inwood & Ferrari (2018); Ajilchi et al. (2025)
Protective factor	Reduces depression, anxiety, stress, and psychological distress	Lau et al. (2020); Clarke & Hartley (2025)
Therapeutic mechanism	Promotes resilience, adaptive coping, and psychological well-being	Walton et al. (2025); Wang et al. (2025)

Analysis of these four themes reveals a conceptual shift in the self-compassion literature. Earlier studies primarily viewed self-compassion as an individual psychological trait associated with psychological well-being. More recent research, however, increasingly conceptualizes self-compassion as a psychological mechanism that can be intentionally cultivated through interventions to improve mental health outcomes. This shift is reflected in the growing number of studies examining the role of self-compassion in emotion regulation, reducing self-criticism, enhancing resilience, and fostering adaptive coping strategies.

The synthesis further demonstrates that self-compassion serves not only as a protective factor against depression, anxiety, and stress but also as an explicit target of various psychological interventions, including Mindful Self-Compassion, Compassion-Based Interventions, positive psychology interventions, and digital self-compassion

programs (Bian et al., 2025; Schaab et al., 2024; Walton et al., 2025). These findings suggest that self-compassion has evolved from being regarded solely as a psychological construct to being recognized as a therapeutic mechanism with substantial potential for integration into diverse counseling approaches.

Building upon these findings, the following section examines the conceptual relationship between self-compassion and the core principles of Islamic counseling as a foundation for developing a counseling model that is more responsive to the psychological and spiritual needs of Muslim populations.

Conceptual Relationship between Self-Compassion and Islamic Counseling

The synthesis revealed that self-compassion and Islamic counseling share a strong conceptual relationship, despite having developed from different scholarly traditions. Within the psychological literature, self-compassion is conceptualized as a construct comprising three core components, namely self-kindness, common humanity, and mindfulness, which operate through mechanisms of emotion regulation, self-acceptance, and adaptive coping to promote mental health (Ajilchi et al., 2025; Inwood & Ferrari, 2018; Wang et al., 2025). In contrast, the Islamic counseling literature emphasizes that psychological change is achieved through strengthening *aqidah* (faith), religious practices (*ibadah*), *muhasabah* (self-reflection), *rahmah* (compassion), *tawakkul* (trust in Allah), and *tazkiyat al-nafs* (purification of the soul) as means of fostering psychological and spiritual balance (Hanin et al., 2015; Zakaria, 2017; Zakaria et al., 2016). Although these approaches employ different terminology, they share a common objective: helping individuals respond adaptively to suffering, develop self-acceptance, and construct a more meaningful perspective on life.

The findings further indicate that the compatibility between these two approaches lies not in the similarity of their terminology but in the shared psychological functions performed by their respective concepts. The self-kindness component closely corresponds to the concept of *rahmah*, which encourages individuals to treat themselves with compassion while maintaining moral responsibility. Mindfulness aligns with the practice of *muhasabah*, which promotes balanced self-awareness and self-reflection. Likewise, common humanity shares conceptual similarities with the Islamic understanding of human *fitrah* and the belief that life trials are a universal aspect of the human experience. Furthermore, the emotion regulation mechanism embedded in self-compassion corresponds to *tazkiyat al-nafs*, whereas adaptive coping parallels the Islamic values of *sabr* (patience) and *tawakkul* (trust in Allah) when responding to life's adversities (Hanin et al., 2015; Maktar et al., 2025; Zakaria, 2017).

Table 4. Conceptual Themes Linking Self-Compassion and Islamic Counseling

Self-Compassion Component	Islamic Counseling Principle	Conceptual Relationship	References
Self-kindness	Rahmah	Encourages individuals to treat themselves with compassion when facing failure and suffering without neglecting moral responsibility	Maktar et al. (2025); Hamjah et al. (2015)
Common humanity	Human <i>fitrah</i> , <i>ukhuwah</i> (brotherhood), and life	Views suffering as a universal human experience, thereby reducing	Maktar et al. (2025); Zakaria & Mat

Self-Compassion Component	Islamic Counseling Principle	Conceptual Relationship	References
	trials	feelings of isolation and promoting self-acceptance.	Akhir (2017)
Mindfulness	Muhasabah	Promotes balanced self-awareness and reflection on one's thoughts, emotions, and behaviors.	Zakaria & Mat Akhir (2017); Maktar et al. (2025)
Emotion regulation	<i>Tazkiyat al-nafs</i>	Facilitates emotional regulation and psychological growth through spiritual purification and strengthening one's relationship with Allah.	Zakaria & Mat Akhir (2016); Hamjah et al. (2015)
Adaptive coping	<i>Sabr</i> and <i>tawakkul</i>	Helps individuals cope with psychological distress through personal effort, patience, and reliance upon Allah.	Hamjah et al. (2015); Abdul et al., (2025)
Therapeutic relationship	Integration of spiritual values into counseling	Aligning counseling interventions with clients' religious beliefs strengthens the therapeutic alliance and enhances counseling effectiveness.	Oxhandler et al. (2021); Evans & Nelson (2021); Matise et al. (2017)

As presented in Table 4, the literature synthesis indicates that the relationship between self-compassion and Islamic counseling is complementary rather than identical. Each core component of self-compassion has a corresponding psychological function within the principles of Islamic counseling, although both originate from different epistemological foundations. The psychological literature explains therapeutic change through the mechanisms of self-kindness, common humanity, and mindfulness, whereas the Islamic counseling literature describes comparable processes through rahmah, muhasabah, tazkiyat al-nafs, sabr, and tawakkul. These similarities suggest that both approaches emphasize the development of self-awareness, emotion regulation, acceptance of life experiences, and meaning-making as essential components of psychological recovery.

Another important finding emerging from this synthesis is the growing recognition of the importance of integrating religion and spirituality into counseling practice. Previous studies indicate that adapting counseling interventions to clients' religious values can enhance the therapeutic alliance, increase client engagement, and improve counseling outcomes, particularly among individuals with strong religious commitments (Evans & Nelson, 2021; Oxhandler et al., 2021). Within the context of Islamic counseling, practices such as muhasabah, ibadah, and strengthening aqidah are viewed not merely as spiritual activities but also as mechanisms that facilitate emotion regulation, meaning-making, and psychological resilience (Hanin et al., 2015; Zakaria, 2017). Consequently, the integration of self-compassion and Islamic counseling has a solid conceptual foundation for developing a counseling approach that is responsive to both the psychological and spiritual dimensions of mental health.

Despite these promising findings, the synthesis also identified a significant gap in the existing literature. Most studies on self-compassion focus on the development and evaluation of interventions grounded in mindfulness, positive psychology, and emotion regulation, whereas research on Islamic counseling remains predominantly conceptual, qualitative, or case-based (Maktar et al., 2025; Sumari & Baharudin, 2016; Zakaria et al., 2016). No study was identified that systematically develops and empirically evaluates an

intervention model integrating the mechanisms of self-compassion with the principles of Islamic counseling. This gap suggests that the relationship between these two fields remains largely conceptual and highlights the need to develop integrated therapeutic models that can be empirically tested across diverse populations and cultural contexts. These findings provide the foundation for the following section, which discusses self-compassion as a therapeutic construct within Islamic counseling for promoting mental health.

Self-Compassion as a Therapeutic Construct in Islamic Counseling for Mental Health

The thematic analysis of the 53 included studies indicates that self-compassion possesses characteristics that support its role as a therapeutic construct within Islamic counseling for promoting mental health. Most studies conceptualize self-compassion as a psychological mechanism that contributes to improved mental health through enhanced emotion regulation, reduced self-criticism, greater self-acceptance, increased resilience, and the development of adaptive coping strategies (Inwood & Ferrari, 2018; Kim & Ko, 2018; Kotera & Ting, 2021). Of the studies reviewed, 37 out of 53 articles (69.8%) reported significant associations between self-compassion and various indicators of mental health, while 32 articles (60.4%) identified self-compassion as either a mediator or a moderator explaining the relationship between psychological distress and psychological well-being. These findings suggest that self-compassion functions not only as an individual characteristic but also as a psychological mechanism that facilitates therapeutic change.

The literature synthesis further demonstrates that self-compassion is a construct that can be cultivated through a variety of psychological interventions. Programs such as Mindful Self-Compassion (MSC), Compassion-Focused Therapy (CFT), positive psychology interventions, group-based training, guided imagery, and digital self-compassion applications have consistently been shown to enhance self-compassion while simultaneously improving psychological well-being, emotion regulation, and resilience (Mak et al., 2018; Schaab et al., 2024; Walton et al., 2025; Wang et al., 2025). The effectiveness of these interventions has been demonstrated across diverse populations, including university students, healthcare professionals, employees, teachers, and individuals experiencing psychological distress (Lau et al., 2020; Vicente-arruebarrena & Riesco-matías, 2022). These findings indicate that self-compassion exhibits the characteristics of a therapeutic construct that can be intentionally developed through counseling and other psychological interventions.

Further analysis revealed that many therapeutic mechanisms underlying self-compassion are conceptually consistent with practices that have long been employed in Islamic counseling. The literature indicates that practices such as muhasabah (self-reflection), du'a (supplication), dhikr (remembrance of Allah), ibadah (acts of worship), strengthening aqidah (faith), rahmah (compassion), tawakkul (trust in Allah), and tazkiyat al-nafs (purification of the soul) are intended to help individuals regulate emotions, construct meaning in life, strengthen psychological resilience, and deepen their spiritual relationship with Allah (Hanin et al., 2015; Zakaria, 2017; Zakaria & Akhir, 2016). These

shared functions suggest that the therapeutic mechanisms of self-compassion are conceptually compatible with the principles of Islamic counseling, despite their different theoretical frameworks and terminology.

The synthesis also identified a growing emphasis on integrating religion and spirituality into counseling practice. Several studies have shown that counseling interventions that incorporate clients' religious values contribute to stronger therapeutic alliances, greater client engagement, and improved counseling outcomes, particularly among individuals with strong religious orientations (Evans & Nelson, 2021; Matisse et al., 2017; Maximo, 2019; Oxhandler et al., 2021). These findings further support the relevance of developing counseling approaches that integrate both psychological and spiritual dimensions.

Despite strong empirical support for the effectiveness of self-compassion and its conceptual compatibility with the principles of Islamic counseling, the synthesis indicates that research integrating these two approaches remains limited. Only 21 of the 53 studies (39.6%) provided empirical evidence regarding the effectiveness of interventions grounded in Islamic values for improving mental health, and very few studies explicitly developed counseling models that integrate self-compassion with the principles of Islamic counseling within a single therapeutic framework. Most self-compassion research continues to be situated within contemporary psychological paradigms emphasizing mindfulness, positive psychology, and clinical interventions, whereas Islamic counseling research primarily focuses on models grounded in *aqidah*, *ibadah*, and spiritual development (Swami et al., 2021; Zakaria et al., 2016).

Overall, the findings demonstrate that self-compassion possesses the characteristics of an effective psychological mechanism, can be cultivated through a range of therapeutic interventions, and exhibits strong conceptual compatibility with the core principles of Islamic counseling. However, empirical evidence supporting the integration of these two approaches remains limited. This highlights the need to develop and empirically evaluate Islamic counseling models that explicitly incorporate self-compassion as a therapeutic construct for promoting mental health.

Discussion

This discussion is organized around the three research questions that guided the literature synthesis: (1) How is self-compassion conceptualized in the mental health and counseling literature (2) What is the conceptual relationship between self-compassion and the principles of Islamic counselling, and (3) What is the potential for integrating self-compassion as a therapeutic construct into Islamic counseling to support mental health. The discussion focuses on interpreting the synthesized findings, relating them to existing theories and previous research, and highlighting the conceptual contributions of this review.

The findings indicate that self-compassion has evolved from being viewed merely as an individual characteristic to being recognized as a psychological mechanism that facilitates therapeutic change. This finding supports Neff (2003) theory of self-compassion, which proposes that self-kindness, common humanity, and mindfulness are the three core components that enable individuals to respond to suffering in a more adaptive manner.

However, the present review extends this theoretical perspective by demonstrating that self-compassion not only explains individual psychological well-being but also functions as a mechanism that can be deliberately cultivated through various interventions to promote mental health.

This interpretation is supported by the growing body of research developing self-compassion-based interventions, including Mindful Self-Compassion (MSC), Compassion-Focused Therapy (CFT), positive psychology interventions, and digital approaches (Mak et al., 2018; Schaab et al., 2024; Walton et al., 2025; Wang et al., 2025). These developments reflect a shift in research emphasis from simply examining the association between self-compassion and mental health toward designing therapeutic strategies that can be implemented in counseling practice. Consequently, self-compassion can be understood as an adaptive psychological mechanism that enables individuals to reduce self-criticism, improve emotion regulation, and strengthen resilience when confronted with life challenges (Inwood & Ferrari, 2018; Neff, 2023).

The second research question addressed the conceptual relationship between self-compassion and Islamic counseling. The synthesis demonstrates that these two approaches share similar psychological functions despite being grounded in different epistemological traditions. The psychological literature explains psychological change through the mechanisms of self-kindness, common humanity, and mindfulness (Neff, 2003), whereas the Islamic counseling literature describes comparable processes through the concepts of rahmah (compassion), muhasabah (self-reflection), tawakkul (trust in Allah), and tazkiyat al-nafs (purification of the soul) (Hanin et al., 2015; Zakaria, 2017; Zakaria et al., 2016). These similarities indicate that both approaches emphasize emotion regulation, self-reflection, acceptance of life experiences, and meaning-making as essential elements of psychological recovery.

These findings offer a new perspective on the development of Islamic counseling. To date, the integration of psychology and Islam has primarily been pursued through adapting psychological theories within an Islamic value framework or by incorporating spiritual practices into the counseling process. The present review suggests that integration may also be achieved through functional equivalence, that is, the shared psychological functions between contemporary psychological constructs and the principles of Islamic counseling. From this perspective, integrating self-compassion is not intended to replace Islamic concepts but rather to enrich the understanding of the psychological mechanisms that contribute to the effectiveness of Islamic counseling practice.

This interpretation is consistent with the growing body of literature emphasizing the importance of incorporating religion and spirituality into professional counseling practice. Oxhandler et al. (2021) reported that many clients prefer their religious beliefs and spiritual values to be considered during counseling. Likewise, Evans and Nelson (2021) found that counseling interventions aligned with clients' religious values contribute to stronger therapeutic alliances, greater client engagement, and improved counseling outcomes. Therefore, the findings of this review support the development of counseling practices that are not only evidence-based but also responsive to clients' cultural and spiritual contexts.

The third research question examined the potential for integrating self-compassion as a therapeutic construct within Islamic counseling. The synthesis indicates that self-compassion possesses characteristics that support this role through mechanisms such as emotion regulation, reduced self-criticism, enhanced self-acceptance, resilience, and adaptive coping. At the same time, Islamic counseling facilitates psychological change through the principles of rahmah, muhasabah, tawakkul, tazkiyat al-nafs, and strengthening one's relationship with Allah (Hanin et al., 2015; Zakaria, 2017). Consistent with these findings, Maktar et al. (2025) argue that self-compassion, from an Islamic perspective, constitutes an integral component of psychological and spiritual well-being grounded in the values of ihsan, compassion, and awareness of the individual's relationship with Allah.

These findings suggest that integrating self-compassion into Islamic counseling should not be based on similarities in terminology but rather on the shared psychological functions and therapeutic objectives of the two approaches. Within this framework, self-compassion may be positioned as a psychological mechanism that strengthens Islamic counseling practice without altering its theological foundations. Accordingly, this review provides a conceptual foundation for developing an Islamic counseling model that integrates self-compassion strategies with Islamic spiritual values to promote mental health.

Novelty of the Research

The novelty of this study lies in its systematic synthesis of the self-compassion and Islamic counseling literature, two fields that have largely been examined independently. Unlike previous studies, this review demonstrates that self-compassion is conceptually compatible with the core principles of Islamic counseling through shared psychological mechanisms, including emotion regulation, self-acceptance, rahmah (compassion), muhasabah (self-reflection), tawakkul (trust in Allah), and tazkiyat al-nafs (purification of the soul). Based on the synthesis of 53 studies, this review proposes self-compassion as a therapeutic construct with the potential to be integrated into Islamic counseling to promote mental health. These findings provide a conceptual foundation for the future development and empirical evaluation of self-compassion-based Islamic counseling models.

Implications and Contributions

From a theoretical perspective, this study extends the self-compassion literature by demonstrating its conceptual compatibility with the principles of Islamic counseling. The findings provide a conceptual foundation for developing an Islamic counseling model grounded in self-compassion that integrates contemporary psychological mechanisms with Islamic spiritual values to promote mental health.

From a practical perspective, the findings suggest that the principles of self-compassion can be integrated into Islamic counseling practice to assist counselors in promoting emotion regulation, self-acceptance, and psychological resilience among Muslim clients while remaining consistent with their religious values. Accordingly, strengthening counselors' competencies in ethically integrating psychological and spiritual dimensions is

essential for enhancing the effectiveness of counseling services (Matise et al., 2017; Maximo, 2019).

Research Limitations

Despite providing a comprehensive conceptual synthesis, this study has several limitations. First, the review included only English-language articles indexed in the Scopus database. Consequently, relevant studies published in other databases or in languages other than English may have been excluded. Second, most of the included studies focused on either self-compassion or Islamic counseling independently, resulting in limited empirical evidence regarding integrated intervention models. Third, the heterogeneity of research designs, participant characteristics, and cultural contexts across the included studies means that the findings are primarily conceptual rather than quantitative in nature.

Conclusion

This study demonstrates that self-compassion has strong conceptual potential to be integrated as a therapeutic construct within Islamic counseling to support mental health. Based on the synthesis of 53 studies, the review identified substantial convergence in the psychological functions of self-compassion and the core principles of Islamic counseling. This conceptual alignment provides opportunities for developing counseling approaches that integrate psychological and spiritual dimensions in a more comprehensive manner.

The primary contribution of this study is the provision of a conceptual foundation for developing self-compassion-based Islamic counseling models. Nevertheless, empirical evidence regarding the effectiveness of such integrative models remains limited. Future research should therefore focus on developing and empirically evaluating intervention models that integrate self-compassion with the principles of Islamic counseling across diverse populations and cultural contexts. Such research would provide stronger empirical evidence to support the implementation of these integrated approaches in counseling practice.

Author Contributions

The first author was responsible for the conceptualization of the study, research design, literature search and study selection, data analysis, interpretation of the findings, and preparation of the original manuscript draft. The second author supervised the research process, contributed to the interpretation of the findings, critically reviewed the manuscript, and approved the final version of the manuscript. All authors have read and approved the final version of the manuscript.

Declaration of Conflicting Interests

The authors declare that there are no financial, professional, or personal conflicts of interest that could have influenced the conduct of the study, the analysis and interpretation of the data, the preparation of the manuscript, or the publication of this article.

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