



Self-Efficacy as a Psychological Mechanism in Sufi Healing: A Qualitative Study in an Islamic Boarding School

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Abstract

Spiritual healing has increasingly been recognized as a meaningful resource in mental health recovery; however, the psychological mechanisms through which spiritual practices facilitate recovery remain insufficiently examined, particularly within Islamic healing traditions. Drawing on Bandura's social cognitive theory, this study investigates self-efficacy as a central psychological mechanism in Sufi healing and explores how structured spiritual practices contribute to strengthening individuals' perceived capacity to cope with psychological distress. Using a qualitative phenomenological design, this study was conducted at an Islamic boarding school in Indonesia that integrates Sufi-based spiritual healing practices. Data were collected through in-depth semi-structured interviews with ten participants, including spiritual leaders, mentors, and individuals undergoing spiritual healing, and analyzed using thematic analysis. Four interrelated themes emerged: restored confidence, spiritual empowerment, psychological strengthening, and renewed sense of agency. Participants described increased emotional stability, enhanced confidence, and greater perceived control over their lives following engagement in spiritual practices such as *dhikr*, prayer, and guided mentorship. The findings suggest that Sufi healing facilitates psychological recovery not solely through spiritual experience but through strengthening self-efficacy beliefs that support adaptive coping and resilience. This study advances the field of spirituality and mental health by empirically positioning self-efficacy as a mediating psychological mechanism linking spiritual practice and psychological recovery within a non-Western Islamic context.

Keywords: Self-efficacy; Sufi healing; Spiritual coping; Psychological recovery; Islamic spirituality; Mental health.

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INTRODUCTION

Over the past several decades, scholarly attention to the role of spirituality in mental health has grown substantially across psychology, health sciences, and behavioral research. Spirituality is no longer viewed solely as a private religious phenomenon; rather, it is increasingly recognized as a significant psychological resource that contributes to mental well-being, resilience, and individuals' capacity to cope with stress and life crises (Koenig, 2012; Pargament, 2011). Empirical studies have consistently demonstrated that engagement in spiritual or religious practices is associated with lower levels of anxiety and depression and higher levels of psychological well-being (George et al., 2002; Smith et al., 2003). Moreover, spirituality has been conceptualized as a source of meaning, hope, and inner strength that enables individuals to navigate psychological suffering and restore emotional balance (Levin, 2010; Park, 2005). Within this broader context, spiritually based healing practices are increasingly acknowledged as relevant and potentially effective approaches for supporting mental health recovery.

One form of spiritually grounded healing with deep roots in Islamic tradition is Sufi healing. This approach is based on spiritual practices such as *dhikr* (remembrance of God), *mujahadah* (spiritual striving), prayer, and spiritual guidance from a religious mentor (*murshid*). In Sufi tradition, these practices are understood as means of purifying the soul, calming the inner self, and strengthening one's relationship with God processes believed to contribute to psychological balance and mental well-being (Haque, 2004; Rothman & Coyle, 2018). Unlike conventional clinical approaches that emphasize medical or secular psychotherapeutic interventions, Sufi healing prioritizes inner transformation through spiritual strengthening, which is believed to directly influence individuals' psychological states. Previous research suggests that Islamic spiritual practices can assist individuals in coping with psychological distress, enhancing resilience, and improving overall well-being (Abu-Raiya & Pargament, 2011).

Despite growing evidence that spirituality and religious practice positively influence mental health, the psychological mechanisms underlying this relationship remain insufficiently understood. One psychological construct that may play a central role in this process is self-efficacy, defined as individuals' beliefs in their capabilities to organize and execute actions required to manage prospective situations (Bandura, 1997). As a core component of social cognitive theory, self-efficacy influences how individuals think, feel, motivate themselves, and behave when facing life challenges (Bandura, 1986, 1997). Individuals with high levels of self-efficacy tend to demonstrate more effective coping strategies, lower levels of anxiety, and greater psychological resilience compared to those with low self-efficacy (Maddux, 2009).

In the context of psychological recovery, self-efficacy functions not merely as an outcome of healing processes but also as an active psychological mechanism that facilitates adaptation and change. Bandura (1995, 1997) argues that self-efficacy shapes cognitive, emotional, and behavioral processes that are critical for psychological adjustment and recovery from stress and psychological disturbance. Spiritual practices including prayer, *dhikr*, and spiritual mentorship may enhance self-efficacy by strengthening individuals' beliefs in their ability to confront difficulties, regulate emotions, and live meaningful lives (Pargament, 2011; Park, 2005). From this perspective, self-efficacy can be conceptualized as a mediating psychological mechanism linking spiritual practice and improved mental health outcomes.

However, empirical research that explicitly examines self-efficacy as a psychological mechanism within spiritual healing practices particularly in the context of Sufi healing remains



limited. Most prior studies have focused broadly on associations between spirituality and psychological well-being without directly investigating the internal psychological processes that account for these effects. Furthermore, empirical research grounded in the lived experiences of individuals engaged in Sufi healing within Islamic boarding school settings is relatively scarce. Consequently, a more nuanced understanding of how such practices shape individuals' psychological functioning is still needed.

Addressing this gap, the present study aims to examine the role of self-efficacy as a psychological mechanism in Sufi healing within an Islamic boarding school context. Specifically, this study seeks to explore how spiritually based healing practices contribute to strengthening individuals' self-efficacy beliefs and how these beliefs facilitate psychological recovery and mental strengthening. Employing a qualitative approach grounded in in-depth interviews, this study offers empirical insight into the psychospiritual processes underlying Sufi healing. By integrating social cognitive theory with spiritual healing practices in an Islamic context, this research contributes to the growing field of spirituality and mental health and advances understanding of the psychological mechanisms through which spiritual practices support mental health recovery.

Literature Review: Self-Efficacy as a Psychological Mechanism in Spiritual Healing

Self-efficacy is one of the most influential psychological constructs in understanding how individuals respond to challenges, cope with adversity, and recover from psychological distress. Bandura (1997) defines self-efficacy as individuals' beliefs in their capabilities to organize and execute courses of action required to manage prospective situations. As a central component of social cognitive theory, self-efficacy plays a pivotal role in shaping cognitive, emotional, motivational, and behavioral processes (Bandura, 1986, 1997). Rather than merely reflecting an individual's psychological condition, self-efficacy functions as an active psychological mechanism that influences how individuals interpret experiences, regulate emotions, and initiate goal-directed action in the face of life stressors.

Bandura (1995, 1997) identifies four primary psychological processes through which self-efficacy operates: cognitive, motivational, affective, and selective processes. At the cognitive level, self-efficacy influences how individuals appraise challenging situations and interpret their experiences. Individuals with high self-efficacy are more likely to adopt adaptive and optimistic cognitive patterns, viewing difficulties as manageable challenges rather than uncontrollable threats. At the motivational level, self-efficacy shapes the degree of effort, persistence, and resilience individuals demonstrate when encountering obstacles. Those with stronger efficacy beliefs tend to sustain greater effort and perseverance in the face of adversity compared to individuals with lower efficacy beliefs (Maddux, 2009).

At the affective level, self-efficacy significantly influences emotional regulation in stressful situations. Bandura (1997) emphasizes that individuals with high self-efficacy are less prone to debilitating anxiety and emotional dysregulation, whereas those with low self-efficacy are more vulnerable to feelings of helplessness and psychological distress. At the selective level, self-efficacy affects the choices individuals make regarding activities and environments. Individuals with strong efficacy beliefs are more likely to engage in challenging tasks and actively shape their life circumstances. In this sense, self-efficacy is closely related to the concept of agency the capacity to act intentionally and exert influence over one's life trajectory (Bandura, 2001).

Within mental health research, self-efficacy has been consistently identified as a key factor contributing to psychological resilience and recovery. Empirical studies indicate that individuals



with higher self-efficacy demonstrate more adaptive coping strategies, lower stress levels, and greater psychological endurance in confronting life stressors (Schwarzer & Hallum, 2008; Benight & Bandura, 2004). Self-efficacy has also been shown to facilitate recovery from anxiety, depression, and trauma-related distress by strengthening individuals' perceived capacity to manage emotional challenges and environmental demands (Benight & Bandura, 2004). Thus, self-efficacy functions not only as an indicator of psychological health but also as a mechanism that actively promotes psychological recovery.

In relation to spirituality, self-efficacy may be strengthened through engagement in religious and spiritual practices. Spiritual experiences can provide individuals with meaning, hope, and a sense of internal empowerment that reinforces beliefs in their capacity to cope with adversity (Pargament, 2011; Park, 2005). Spiritual coping frameworks suggest that engagement with transcendent beliefs and practices may transform individuals' interpretations of stress and suffering, thereby enhancing psychological functioning. Empirical research indicates that individuals who actively engage in spiritual coping tend to exhibit higher levels of psychological well-being and more adaptive coping patterns (Ai et al., 2005; Koenig, 2012). In this context, spirituality may function as a source of internal empowerment that strengthens self-efficacy beliefs and promotes resilience.

Within Islamic spiritual traditions, particularly Sufism, spiritual practices such as *dhikr*, prayer, *mujahadah*, and spiritual mentorship are intended not only to deepen one's relationship with God but also to purify the soul, calm the mind, and cultivate emotional stability (Haque, 2004; Rothman & Coyle, 2018). These practices emphasize inner transformation and spiritual discipline as pathways toward psychological balance. From a psychological perspective, such practices may influence cognitive appraisals, emotional regulation, and motivational orientation processes that are closely aligned with the dimensions of self-efficacy described in social cognitive theory.

Sufi healing can therefore be conceptualized as a psychospiritual transformation process that potentially enhances self-efficacy. Through repeated engagement in structured spiritual practices and sustained spiritual guidance, individuals may develop renewed beliefs in their capacity to confront adversity, regulate emotional responses, and live more meaningfully. Spiritual mentorship, in particular, may function as a form of verbal persuasion and social support two recognized sources of efficacy beliefs in Bandura's framework (Bandura, 1997). Furthermore, emotional calmness experienced during spiritual practice may contribute to improved affective regulation, thereby reinforcing efficacy beliefs.

Despite these theoretical linkages, empirical research explicitly examining self-efficacy as a mediating psychological mechanism in spiritual healing—particularly within Sufi healing contexts remains limited. Much of the existing literature focuses broadly on correlations between religiosity or spirituality and psychological well-being, without systematically investigating the internal cognitive and emotional processes that account for these associations. Moreover, research grounded in lived experiences of individuals undergoing Sufi healing within Islamic boarding school environments remains scarce.

Given this gap, it is important to empirically explore how Sufi healing practices contribute to changes in self-efficacy and how such changes function as mechanisms facilitating psychological recovery. Conceptualizing self-efficacy as a mediating psychological mechanism provides a theoretically grounded explanation for how spiritual practices may translate into improved mental health outcomes. In this view, Sufi healing does not merely produce spiritual experiences but



initiates internal cognitive and emotional transformations that strengthen individuals' beliefs in their capacity to cope with distress and manage life challenges more adaptively.

By integrating social cognitive theory with Islamic spiritual healing practices, this study advances a psychospiritual framework in which self-efficacy serves as a central explanatory construct. Such an integrative perspective contributes to the broader field of spirituality and mental health by clarifying the psychological mechanisms through which spiritual practices exert therapeutic effects.

Conceptual Framework: Self-Efficacy as a Mediating Psychological Mechanism in Sufi Healing

The conceptual framework of this study is grounded in the integration of Bandura's social cognitive theory and contemporary perspectives in spirituality and mental health. Specifically, this study positions self-efficacy as a central mediating psychological mechanism that explains how Sufi healing practices contribute to psychological recovery. The framework is built upon the assumption that spiritual practices do not merely produce religious experiences; rather, they influence internal cognitive and affective processes that shape individuals' psychological functioning.

Within social cognitive theory, self-efficacy is understood as a foundational determinant of human agency and psychological adaptation (Bandura, 1986, 1997, 2001). Efficacy beliefs influence how individuals interpret stressors, regulate emotional responses, sustain motivation, and initiate behavioral change. Individuals with strong efficacy beliefs are more likely to perceive adversity as manageable, exert sustained effort in overcoming challenges, and recover from psychological distress. Conversely, individuals with low self-efficacy tend to experience heightened anxiety, avoidance behaviors, and diminished coping capacity.

Drawing from this theoretical foundation, the present framework proposes that Sufi healing practices function as structured spiritual interventions that influence the four psychological processes identified by Bandura: cognitive, motivational, affective, and selective processes. Practices such as *dhikr*, prayer, spiritual discipline (*mujahadah*), and ongoing mentorship by a spiritual guide may reshape cognitive appraisals, enhance emotional regulation, and reinforce motivational persistence. Through repeated spiritual engagement, individuals may develop strengthened beliefs in their capacity to manage distress and navigate life challenges.

In addition to social cognitive theory, this framework incorporates insights from spiritual coping theory (Pargament, 2011) and meaning-making theory (Park, 2005). Spiritual coping theory emphasizes that religious and spiritual practices provide individuals with resources for interpreting suffering, restoring hope, and maintaining psychological coherence during adversity. Meaning-making processes allow individuals to reconstruct their understanding of distress in ways that reduce helplessness and foster adaptive engagement. When integrated with social cognitive theory, these perspectives suggest that spiritual practices may enhance self-efficacy by transforming both cognitive appraisals and emotional responses to stress.

In the context of Sufi healing, spiritual mentorship and structured religious rituals may serve as sources of efficacy information consistent with Bandura's four sources of self-efficacy: mastery experiences, verbal persuasion, vicarious experience, and physiological/emotional regulation (Bandura, 1997). For instance:

- a. Mastery experiences may emerge as individuals successfully complete spiritual practices and regain functional abilities.
- b. Verbal persuasion may occur through spiritual guidance and affirmations from religious mentors.



- c. Vicarious experiences may be observed when individuals witness the recovery of others within the spiritual community.
- d. Physiological and affective regulation may be strengthened through repetitive spiritual rituals that induce calmness and emotional stabilization.

Thus, Sufi healing is conceptualized not simply as a religious practice but as a psychospiritual process that systematically reinforces efficacy beliefs through multiple psychological pathways. Based on this integrative theoretical positioning, the present study advances a Psychospiritual Self-Efficacy Model of Sufi Healing, in which:

1. Sufi healing practices function as structured spiritual interventions.
2. These practices influence cognitive reappraisal, emotional stabilization, motivational persistence, and social engagement.
3. These psychological changes strengthen self-efficacy beliefs.
4. Strengthened self-efficacy facilitates psychological recovery, resilience, and renewed agency.

In this model, self-efficacy serves as the central explanatory mechanism linking spiritual practice and mental health outcomes. Rather than conceptualizing spirituality and mental health as directly correlated constructs, this framework clarifies the mediating psychological process through which spiritual engagement translates into improved psychological functioning.

This positioning offers two important theoretical contributions. First, it extends social cognitive theory into the domain of Islamic spiritual healing, demonstrating its applicability within non-Western religious contexts. Second, it advances the field of spirituality and mental health by empirically grounding the relationship between spiritual practice and psychological recovery in a well-established psychological mechanism.

By articulating self-efficacy as a mediating construct, this framework moves beyond descriptive accounts of spiritual benefit and provides a theoretically coherent explanation for how Sufi healing exerts therapeutic effects. The model thus serves as the foundation for the empirical analysis presented in this study.

METHODS

Research Design

This study employed a qualitative phenomenological design to explore participants' lived experiences of Sufi healing, particularly in relation to changes in self-efficacy as a psychological mechanism in the recovery process. A phenomenological approach was chosen because the primary objective of this study was to examine how individuals interpret and make meaning of their spiritual healing experiences and how these experiences shape their beliefs in their own psychological capacities (Creswell & Poth, 2018). This approach allows for an in-depth exploration of subjective experiences and facilitates identification of internal psychological transformations emerging through spiritual practice.

Research Setting

The study was conducted at Pondok Pesantren Al-Qodir, an Islamic boarding school located in Sleman, Yogyakarta, Indonesia. The institution is known for integrating Islamic education with spiritually oriented healing practices rooted in Sufi tradition. In addition to functioning as a religious educational institution, the pesantren serves as a spiritually structured environment where individuals experiencing psychological distress, emotional disturbances, or existential crises receive spiritual guidance and support.



Sufi healing practices at this institution include structured engagement in *dhikr* (remembrance of God), prayer, Qur'anic recitation, *mujahadah* (spiritual discipline), and ongoing mentorship provided by the spiritual leaders (Kyai and Nyai) and designated spiritual mentors. These practices are embedded in daily communal life, creating a consistent spiritual environment that supports psychological stabilization and internal transformation.

Participants

A total of ten participants were recruited using purposive sampling, a strategy appropriate for selecting individuals with direct and relevant experience related to the research focus (Patton, 2015). The sampling strategy aimed to capture multiple perspectives within the Sufi healing process, thereby enhancing the depth and comprehensiveness of the findings. Participants included:

- a. Two primary spiritual leaders (Kyai and Nyai) who serve as principal spiritual mentors and oversee healing practices.
- b. One senior student with extensive experience in spiritual training and mentoring roles within the pesantren.
- c. Four students who directly underwent Sufi healing as part of their psychological recovery process.
- d. Three religious instructors (ustadz) who were actively involved in providing spiritual guidance and mentoring to students undergoing healing.

This diverse participant composition enabled triangulation of perspectives, including both recipients of spiritual healing and those facilitating the process.

Data Collection

Data were collected through semi-structured, in-depth interviews conducted in person at the pesantren. The semi-structured format allowed flexibility in exploring participants' experiences while ensuring that core themes relevant to self-efficacy and psychological transformation were systematically addressed (Kvale & Brinkmann, 2009). The interview protocol explored three primary domains:

1. Participants' psychological condition prior to engaging in Sufi healing practices.
2. Their lived experiences during participation in spiritual healing activities.
3. Perceived changes in self-belief, emotional regulation, coping capacity, and sense of agency following engagement in the practices.

Interviews ranged from approximately 30 to 60 minutes in duration. All interviews were conducted with participants' informed consent and were audio-recorded to ensure accuracy. Recordings were transcribed verbatim for analysis.

In addition to interviews, field notes were compiled to document contextual observations, including daily spiritual activities, interactions between participants and spiritual mentors, and environmental aspects of the pesantren relevant to the healing process. These observational data provided contextual depth and supported triangulation.

Data Analysis

Data were analyzed using thematic analysis following the procedures outlined by Braun and Clarke (2006). Thematic analysis was selected due to its suitability for identifying patterns of meaning across qualitative datasets while allowing theoretical interpretation grounded in social cognitive theory. The analytic process involved six stages:

1. Familiarization with the data through repeated reading of interview transcripts.



2. Generation of initial codes, particularly those reflecting changes in self-belief, emotional regulation, coping capacity, and agency.
3. Searching for patterns among codes to identify broader conceptual categories.
4. Reviewing and refining themes to ensure internal coherence and distinction between themes.
5. Defining and naming themes, resulting in four overarching themes related to enhanced self-efficacy.
6. Theoretical interpretation, in which identified themes were analyzed using Bandura's (1997) framework of self-efficacy to clarify the psychological mechanisms underlying participants' reported changes.

The analytic process was iterative, moving back and forth between data and theory to ensure interpretive rigor.

Trustworthiness and Credibility

To enhance trustworthiness, several strategies were employed in line with qualitative research standards (Lincoln & Guba, 1985). First, prolonged engagement within the research setting enabled contextual familiarity and deeper understanding of the spiritual environment. Second, source triangulation was implemented by incorporating perspectives from multiple participant roles (students, spiritual leaders, and mentors). Third, the analytic process was conducted systematically and iteratively to ensure that emergent themes accurately reflected participants' lived experiences. These procedures strengthened the credibility, dependability, and confirmability of the findings.

RESULTS AND DISCUSSION

Findings

Thematic analysis of interviews with ten participants including spiritual leaders, religious mentors, a senior student, and individuals undergoing Sufi healing generated four interrelated themes that reflect enhanced self-efficacy as a psychological mechanism within the spiritual healing process. These themes were: (1) restored confidence, (2) spiritual empowerment, (3) psychological strengthening, and (4) renewed sense of agency. Collectively, these themes illustrate how Sufi healing practices contributed to changes in participants' efficacy beliefs and psychological functioning.

Theme 1: Restored Confidence

The first theme reflects a marked shift from feelings of helplessness and diminished self-belief toward renewed confidence in personal capability. Prior to engaging in Sufi healing practices, participants frequently described psychological states characterized by self-doubt, emotional instability, and perceived inability to manage distress. One participant noted:

“At first, I felt unable to deal with my problems anxious, restless, almost hopeless. I did not believe I could recover.”

Such narratives indicate low perceived self-efficacy at the outset of the healing process. Participants described perceiving life challenges as overwhelming and beyond their personal control, consistent with Bandura's conceptualization of diminished efficacy beliefs.

Following sustained participation in structured spiritual activities including *dhikr*, collective prayer, and spiritual mentorship participants reported significant improvements in confidence. As one participant expressed:

“After joining the activities in the pesantren, I felt calmer and more certain. I became mentally stronger.”



Religious mentors corroborated these observations, describing noticeable behavioral changes among students:

“After undergoing healing, they begin to speak again, interact with others, and become more confident. They are no longer afraid.”

These findings suggest that Sufi healing practices contributed to a restructuring of participants’ cognitive appraisals of their own capabilities. Restored confidence appears to reflect strengthened efficacy beliefs, particularly in relation to emotional regulation and social engagement.

Theme 2: Spiritual Empowerment

The second theme highlights spiritual empowerment as a key pathway through which self-efficacy was strengthened. Participants consistently described spiritual practices not merely as religious rituals but as transformative experiences that enhanced inner strength and psychological clarity. One participant stated:

“Spiritual activities truly affected me. I felt calmer, my thoughts became clearer, and my heart felt stronger.”

Spiritual mentorship emerged as particularly influential. Participants described the guidance of the Kyai as a source of reassurance and interpretive support that reinforced their belief in their capacity to recover:

“The guidance from the Kyai was the most meaningful part. It helped me understand the purpose of the practices and strengthened my confidence.”

Mentors also observed that structured spiritual engagement helped students regain psychological orientation:

“Through dhikr, prayer, and recitation, they gradually become aware again. They no longer feel distant or lost.”

From an analytical perspective, spiritual empowerment appears to function as a source of efficacy information consistent with verbal persuasion and affective regulation in Bandura’s framework. Spiritual reassurance, meaning-making, and emotional calmness contributed to strengthened internal beliefs about personal capability. Spiritual experience thus operated not only as religious engagement but as a psychological process reinforcing self-efficacy.

Theme 3: Psychological Strengthening

The third theme reflects enhanced psychological resilience and improved emotional regulation. Participants described increased ability to manage anxiety, control emotional reactions, and cope with stress. One participant explained:

“There is a sense of calm when I am here and follow the healing activities. I can control my emotions better, even if not perfectly.”

Mentors identified emotional stability and independent functioning as key indicators of recovery:

“A student is considered recovering when they can perform prayers independently and interact normally with others.”

These accounts suggest that participants developed greater confidence in their capacity to regulate emotional responses and maintain daily functioning. Emotional stabilization appears to reinforce self-efficacy beliefs, as individuals experienced themselves as capable of managing distress rather than being overwhelmed by it.



From a theoretical standpoint, this theme aligns with the affective and motivational dimensions of self-efficacy. As participants perceived greater control over emotional states, their belief in their broader coping abilities strengthened, facilitating adaptive engagement with daily life.

Theme 4: Renewed Sense of Agency

The fourth theme captures a renewed sense of personal agency and forward orientation. Participants reported feeling more capable of making decisions, planning for the future, and reintegrating into social life. One participant reflected:

“After going through Sufi healing, I feel more confident and more independent.”

Another expressed optimism regarding future reintegration:

“One day I will leave this place with stronger mental stability and return home as a better person.”

Mentors emphasized that successful recovery was marked by readiness to re-enter community life:

“When they are able to return to society, speak again, and function normally that shows improvement.”

These narratives indicate a shift from passivity and psychological withdrawal toward active self-directed engagement. Renewed agency reflects strengthened selective and behavioral processes within self-efficacy theory, where individuals perceive themselves as capable actors shaping their own life trajectory.

Thematic Synthesis: Self-Efficacy as a Psychological Mechanism in Sufi Healing

Across all four themes, participants’ experiences converge on a central pattern: Sufi healing practices contributed to strengthened beliefs in personal capability. Restored confidence reflects cognitive restructuring of self-perception; spiritual empowerment reflects internal reinforcement through meaning and reassurance; psychological strengthening reflects improved emotional regulation; and renewed agency reflects enhanced intentional action.

Taken together, these findings suggest that self-efficacy operates as a mediating psychological mechanism linking spiritual practice and psychological recovery. Rather than functioning solely as a spiritual experience, Sufi healing appears to initiate internal cognitive and emotional transformations that reinforce individuals’ perceived capacity to cope, regulate, and act adaptively.

The empirical data therefore support the proposed psychospiritual self-efficacy model, in which structured spiritual practices strengthen efficacy beliefs, which in turn facilitate psychological stabilization and renewed agency.

Discussion

The present study examined self-efficacy as a psychological mechanism underlying Sufi healing within an Islamic boarding school context. The findings indicate that engagement in structured spiritual practices contributed to strengthened efficacy beliefs, which in turn facilitated psychological stabilization, emotional regulation, and renewed agency. By situating these findings within Bandura’s social cognitive theory and Pargament’s spiritual coping framework, this study offers a theoretically integrated explanation of how spiritual healing may translate into psychological recovery.

Self-Efficacy as a Central Mechanism of Psychospiritual Transformation

The findings strongly align with Bandura’s (1986, 1997) assertion that self-efficacy serves as a foundational determinant of psychological functioning. Participants initially described



psychological states marked by helplessness, diminished confidence, and emotional instability conditions consistent with low perceived self-efficacy. As Bandura suggests, individuals who doubt their capabilities are more likely to interpret stressors as overwhelming threats, thereby exacerbating anxiety and psychological withdrawal.

However, sustained participation in Sufi healing practices was associated with restored confidence and enhanced coping capacity. This shift reflects a restructuring of cognitive appraisals, in which participants began to reinterpret their experiences as manageable rather than uncontrollable. In Bandura's framework, such cognitive transformation is central to efficacy development. The findings suggest that Sufi healing practices may function as structured contexts in which efficacy beliefs are gradually rebuilt through repeated spiritual engagement.

Furthermore, the emergence of psychological strengthening and emotional stabilization corresponds with the affective dimension of self-efficacy. Bandura (1997) emphasizes that efficacy beliefs influence emotional regulation by reducing vulnerability to anxiety and stress reactivity. Participants' reports of increased calmness and improved emotional control indicate that spiritual practices may have enhanced affective regulation, thereby reinforcing efficacy beliefs in a reciprocal process.

Importantly, the theme of renewed agency reflects the selective and behavioral dimensions of self-efficacy. Agency, defined as the capacity to act intentionally and shape one's life course (Bandura, 2001), was evident in participants' expressions of independence, future orientation, and readiness for social reintegration. These findings suggest that strengthened efficacy beliefs were not merely internal cognitive shifts but were translated into observable behavioral readiness and adaptive functioning.

Spiritual Practices as Sources of Efficacy Information

A key contribution of this study lies in identifying how Sufi healing practices may function as sources of efficacy information consistent with Bandura's four sources of self-efficacy: mastery experiences, verbal persuasion, vicarious learning, and affective regulation (Bandura, 1997).

First, mastery experiences were reflected in participants' gradual restoration of functional abilities, such as independently performing prayers or re-engaging socially. These successful experiences likely reinforced beliefs in personal capability. Second, verbal persuasion was evident through spiritual mentorship provided by the Kyai and religious instructors, whose guidance and reassurance appeared to strengthen participants' confidence in recovery. Third, vicarious experiences may have occurred within the communal pesantren environment, where observing others' progress reinforced beliefs that recovery was attainable. Finally, affective regulation emerged as participants described emotional calmness induced by repetitive spiritual rituals such as *dhikr*, which may have reduced physiological arousal associated with distress.

By mapping spiritual practices onto established sources of efficacy development, this study provides a theoretically coherent explanation of how religious rituals may operate as psychologically meaningful interventions rather than solely devotional acts.

Integration with Spiritual Coping and Meaning-Making

The findings also resonate with Pargament's (2011) theory of spiritual coping, which conceptualizes spirituality as a dynamic system through which individuals interpret and respond to adversity. Participants' accounts of spiritual empowerment and renewed meaning reflect processes of meaning reconstruction consistent with Park's (2005) meaning-making framework. Through



spiritual engagement, participants appeared to reinterpret suffering within a transcendent framework, thereby reducing feelings of helplessness and enhancing perceived capability.

This integration suggests that spiritual coping may strengthen self-efficacy by transforming cognitive appraisals of adversity. When distress is reinterpreted as spiritually meaningful or manageable with divine support, individuals may experience increased confidence in their ability to endure and overcome challenges. Thus, spiritual coping and self-efficacy may function synergistically: spiritual meaning-making provides cognitive coherence, while strengthened efficacy beliefs facilitate adaptive behavioral engagement.

Theoretical Novelty and Contribution

This study advances the field of spirituality and mental health in several important ways. First, it extends Bandura's self-efficacy theory into the domain of Islamic spiritual healing, demonstrating its applicability within a non-Western religious context. While self-efficacy has been widely studied in clinical, educational, and health domains, empirical applications within Sufi-based healing remain scarce. By situating Sufi healing within social cognitive theory, this research broadens the theoretical reach of efficacy constructs.

Second, the study contributes to the literature by empirically positioning self-efficacy as a mediating psychological mechanism linking spiritual practice and psychological recovery. Much prior research has established correlations between spirituality and well-being, yet fewer studies have clarified the internal psychological processes underlying this relationship. By identifying efficacy beliefs as a central explanatory mechanism, this research moves beyond descriptive associations and provides a process-oriented account of spiritual healing.

Third, this study introduces a psychospiritual self-efficacy model in which structured spiritual practices influence cognitive appraisal, emotional stabilization, and motivational persistence, thereby strengthening agency and facilitating recovery. This integrative model bridges social cognitive theory and spiritual coping frameworks, offering a theoretically grounded explanation for the therapeutic effects of spiritual rituals.

Implications for Mental Health Practice

The findings have implications for culturally and spiritually sensitive mental health interventions. In contexts where spirituality is central to identity and coping, structured spiritual practices may function as psychologically meaningful mechanisms that strengthen internal coping capacities. Rather than viewing spiritual healing as separate from psychological processes, practitioners may consider how religious practices contribute to efficacy development and resilience.

In religious communities, collaboration between mental health professionals and spiritual leaders may enhance therapeutic outcomes by integrating psychological insight with culturally congruent spiritual frameworks.

Limitations and Future Directions

Despite its contributions, this study has limitations. The research was conducted within a single pesantren setting, which may limit transferability to other cultural or religious contexts. Additionally, the qualitative design emphasizes depth over generalizability. Future research may employ quantitative or mixed-method approaches to examine self-efficacy as a mediating variable between spiritual practice and psychological outcomes across broader populations.

Further investigation into longitudinal efficacy development within spiritual communities may also clarify the durability of psychospiritual transformation.



CONCLUSION

The conclusion serves to distill the essence of the study by highlighting its main findings without simply restating statistical results. Authors should succinctly reflect on how the study contributes to the understanding of the intersections between language, technology, and social media, especially in relation to the research questions. This section should also articulate the practical and theoretical implications of the study, showing how the results can inform educational practice, platform design, policy development, or future academic inquiry. Importantly, the conclusion should point toward future research directions that emerge logically from the study's outcomes and limitations. It must be written in a reflective and conclusive tone, avoiding the introduction of new data, arguments, or references.

This study examined self-efficacy as a psychological mechanism underlying Sufi healing within an Islamic boarding school context. The findings demonstrate that structured spiritual practices such as *dhikr*, prayer, spiritual discipline, and mentorship contributed to strengthened efficacy beliefs, which in turn facilitated emotional regulation, psychological stabilization, and renewed agency. Rather than functioning solely as religious rituals, Sufi healing practices operated as psychospiritual processes that reshaped cognitive appraisals, reinforced confidence, and restored individuals' sense of personal control.

The central contribution of this study lies in empirically positioning self-efficacy as a mediating psychological mechanism linking spiritual practice and psychological recovery. While prior research has documented associations between spirituality and mental health, fewer studies have clarified the internal psychological processes through which spiritual engagement exerts therapeutic effects. By integrating Bandura's social cognitive theory with spiritual coping perspectives, this research advances a theoretically grounded explanation for how Islamic spiritual healing practices contribute to mental health recovery.

Moreover, this study extends the application of self-efficacy theory into a non-Western religious context, demonstrating its relevance within Sufi-based healing traditions. In doing so, it broadens the cross-cultural applicability of social cognitive theory and contributes to the development of an integrative psychospiritual model of healing. The proposed framework underscores that spiritual practices may enhance mental health not merely through devotional experience, but through strengthening core psychological capacities—particularly efficacy beliefs and agency.

These findings highlight the importance of recognizing spiritual practices as psychologically meaningful mechanisms within culturally embedded healing systems. Future research may further test and refine this psychospiritual self-efficacy model across diverse religious and cultural settings, including through quantitative or mixed-method approaches that examine mediation pathways more explicitly.

In conclusion, this study contributes to the growing field of spirituality and mental health by offering a process-based account of Sufi healing and identifying self-efficacy as a central explanatory construct. By clarifying the mechanism through which spiritual practices facilitate recovery, this research provides both theoretical advancement and practical insight for culturally responsive mental health interventions.



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