

A Comparative Study of Riḍawī Conduct with a Cognitive-Behavioral Approach to Depressive Disorder

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Abstract

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Depression, as one of the most common psychological disorders, represents a major challenge in the field of global mental health. It is projected to become the leading cause of disability worldwide by 2030. On one hand, psychological approaches such as Cognitive-Behavioral Therapy (CBT), by focusing on the role of negative thoughts and cognitive distortions, have provided effective strategies for treating this disorder. Conversely, religious teachings and the conduct of the Infallible Imams, particularly the Riḍawī conduct, also contain profound cognitive and behavioral strategies for preventing and treating depression. This research aims to conduct a comparative study between the cognitive-behavioral approach and the Riḍawī conduct regarding the treatment of depression, examining the commonalities and contrasts between these two intellectual frameworks. The present study employs a comparative-analytical method with a qualitative approach, conducted through content analysis of religious and psychological texts using library resources and thematic inference. The findings indicate that key concepts of the cognitive-behavioral approach, such as identifying and restructuring negative thoughts, behavioral activation, and the role of the therapist, show significant alignment with the teachings of Riḍawī conduct in areas like self-knowledge, patience, trust in God, contemplation, and remembrance. This correspondence demonstrates the high capacity of Riḍawī conduct for presenting integrative models in the prevention and treatment of depression based on cognitive and spiritual foundations.

Keywords: Depression, Cognitive-Behavioral Approach, Riḍawī Conduct, Psychology, Integrative Therapy, Mental Health.



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1. Introduction

Depression is one of the most prevalent and debilitating psychological disorders globally, and it is predicted to become the leading cause of the disease burden worldwide by 2030. Alongside this challenge, modern psychotherapeutic approaches, particularly “Cognitive Behavioral Therapy” (CBT), focused on restructuring negative thoughts and cognitive distortions, are recognized as effective methods for treating depression. On the other hand, religious teachings and the conduct of the Infallible Imams (A.S.), especially the conduct of Imam Reza (A.S.), contain profound cognitive and behavioral strategies for confronting psychological crises, including depression. This research, aiming to discover the commonalities and the possibility of integrating these two intellectual frameworks, conducts a comparative study between the “Cognitive-Behavioral Approach” and the “Razavi Conduct” in the context of treating and preventing depression.

2. Research Objectives

The primary objective of this research is to systematically explain the points of commonality and difference between the Cognitive-Behavioral approach and the Razavi conduct regarding the causes, treatment strategies, and prevention of depression, which includes the following:

- A comparative study of key CBT concepts (such as negative automatic thoughts, the cognitive triad, and cognitive restructuring) with fundamental concepts in the Razavi conduct (such as self-knowledge, trust in God, patience, and contemplation).
- Extracting an integrated model for preventing and treating depression based on cognitive and spiritual foundations, and analyzing the causes of depression from the perspective of religious teachings compared to the cognitive model.

3. Methodology

This research is of a “comparative-analytical” type and has been conducted with a “qualitative” approach. The main method used was “content analysis of religious and psychological texts.” Data related to the Razavi conduct were collected through “library research” in authoritative narrative sources and categorized using the “thematic inference” method. Psychological data were also collected based on authoritative psychotherapy texts and DSM-5 diagnostic criteria. The analysis process was based on the “systematic comparison” of key components in the two domains

(causes, treatment goals, strategies, and the therapist's role), and the validity and reliability of the analyses were ensured through "continuous reference to primary texts" and "logical correspondence between concepts«.

4. Findings

-Conceptual Commonalities: Findings indicate that key CBT concepts such as "identifying and restructuring negative thoughts," "behavioral activation," and the "therapist's role" show significant alignment with the teachings of the Razavi conduct in areas such as "self-knowledge," "patience," "trust in God," "contemplation," and "remembrance of God.

-Causes of Depression: In both frameworks, the causes of depression are rooted in distorted cognition. CBT refers to "negative automatic thoughts" and the "cognitive triad," while the Razavi conduct emphasizes factors such as "distance from God," "following base desires," "envy," "attachment to the material world," and "pessimism.

-Therapeutic Strategies: The comparison of therapeutic strategies shows that CBT techniques have meaningful equivalents in the Razavi conduct; for example:

- Cognitive restructuring in CBT is equivalent to "contemplation and reasoning," and behavioral activation is equivalent to "righteous deeds and planning for this world and the hereafter." Furthermore, coping with negative thoughts is equivalent to "remembrance of God and supplication," and self-monitoring is equivalent to "self-knowledge.

-Role of the Therapist/Religious Guide: In both methods, the role of guidance, modeling, and education for changing attitudes and behaviors lies with the therapist or the Imam.

-Prevention: Both approaches emphasize the early identification of distorted thoughts and strengthening coping skills (in CBT) and strengthening faith, avoiding sin, and shunning envy (in the Razavi conduct).

5. Conclusion

The comparative examination conducted in this research clearly demonstrates that many of the fundamental strategies in contemporary cognitive-behavioral models for treating depression—such as examining and restructuring cognitions, distinguishing rational from irrational beliefs, and coping with negative automatic thoughts—have a rich and profound precedent in Islamic texts, particularly in the

Razavi conduct. While cognitive-behavioral psychology primarily focuses on treating the disorder of depression, the conduct of Imam Reza (A.S.), with a comprehensive perspective, in addition to providing corrective strategies, emphasizes primary prevention of depression by strengthening intellectual and spiritual foundations. In the Islamic paradigm, mental health is a direct function of correct cognition of God, oneself, and the surrounding world. Numerous hadiths and narratives consider the root of many psychological abnormalities to lie in “lack of reasoning” and “erroneous thinking,” and seek salvation in “the correct perception of realities.” In the intellectual framework of Imam Reza (A.S.), factors such as distorted cognitions, extreme tendencies, attachment to the material world, non-acceptance of realities, and internal and external stressors are identified as the most significant obstacles to mental health, and rationality is emphasized as the central axis for salvation from this abyss. He considered distance from rationality and plunging into the abyss of superstitions and misconceptions as the primary cause of the decline of humanity. This research, citing authoritative Razavi narratives, shows that the effect of correcting cognition on behavioral activation and motivation creation is pivotal. In depressive disorder, an individual’s cognition regarding the three domains of self, God, and the world becomes distorted. The Razavi conduct, by providing a correct semantic framework, helps the individual to exit the vicious cycle of negative thoughts by correcting these cognitive distortions. This approach is directly aligned with the core of cognitive-behavioral psychology, namely identifying and correcting cognitive errors (such as all-or-nothing thinking, overgeneralization, catastrophizing, etc.). Hadiths that prohibit people from misunderstanding, suspicion, and erroneous interpretations of events are, in fact, indirectly teaching skills to cope with these very cognitive errors.

Consequently, it can be claimed that the Razavi conduct not only contains propositions aligned with cognitive-behavioral psychology but, by providing robust philosophical and spiritual foundations, deepens it within a comprehensive worldview framework. This article, by comparing these two domains, demonstrates that the teachings of the Infallible Imams (A.S.) can be seriously considered by specialists as a rich and indigenous source for enriching theory-building and designing clinical interventions in the realm of mental health, offering an effective model for “lifestyle reform” towards preventing and treating psychological suffering.

Suggestions

-Designing and validating integrated treatment protocols (CBT + Razavi conduct) for Iranian and Islamic society (Utilizing the findings in the fields of counseling, psychotherapy, and life skills training with an interdisciplinary approach).

-Conducting further empirical and qualitative research to examine the practical effectiveness of strategies extracted from the Razavi conduct in reducing depressive symptoms.

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