

CASE REPORT**Religious Cognitive Behavioural Therapy In Specific Phobia:
A Case Report**

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Abstract

This is a case report on the effectiveness of Religious Cognitive Behavioural Therapy sessions on a patient with Specific Phobia. The World Health Organization (WHO) has included the spiritual aspect in its definition of health, with increasing attention being given to the role of religious beliefs and practices. We explore the role of RCBT which serves as an effective method of managing anxiety issues.

Keywords: Specific Phobia, Anxiety, Religious Cognitive Behavioural Therapy, RCBT

Introduction

Religion and spirituality have significant effects on an individual's mental health [1]. Numerous psychologists and psychotherapists have as of late studied the relationship between religion or spirituality and mental health; or used religious interventions in psychotherapies.

We present a case of a patient with a specific phobia who shows poor response toward SSRI and Benzodiazepines. He was later enrolled in RCBT sessions and showed significant improvement.

Case Summary

The case is a 58 year old malay gentleman, who works as a Project Manager. He presented with a 10 year history of fear, anxiety and panic attacks which manifests as

palpitations, difficulty in breathing, sweating and nausea, whenever he is in a car as a driver or passenger. These symptoms worsened over the past 6 months due to multiple psychosocial stressors that he experienced recently, and has affected his performance at work and his relationship with his close family. Mental state revealed a slightly anxious male with no other abnormal perception or thought content. Physical examination did not reveal any significant abnormalities. He was diagnosed as Specific Phobia, and initially treated with Escitalopram and Alprazolam. He showed little improvement with the medications. Subsequently, he agreed for Religious Cognitive Behavioural Therapy (RCBT) and underwent 7 sessions with the therapist.

The client was taught to use selected verses from the Quran to replace his negative and inaccurate thoughts with positive principles

found in the scripture. He was also taught to meditate on these passages, which helps to remember and apply these positive thoughts. The sessions also addressed some of his distorted religious beliefs, such as a distorted view of a punishing God. After completing the sessions, he was able to drive albeit short distances and progressed well.

Discussion

RCBT is essentially a novel form of cognitive theory based on religious or spiritual methodologies. According to cognitive theories, what we think (cognition), what we feel (emotion and affect) and how we act (behavior) interact with each other. The essential point of cognitive therapy is to identify irrational or maladaptive thoughts, assumptions and beliefs which are related to debilitating negative emotions to identify what is dysfunctional or just not helpful about them. Therefore, the patients must part with unreasonable and distorted thoughts and replace them with more realistic and self-helping alternatives.

The basic elements of self-control and change are consistent with the Islamic belief system, modifying the statements to reflect Muslim beliefs and practices speaks straight to the spiritual beliefs and practices of Muslims [2].

The behavioral arm of RCBT is similar to CBT in motivating clients to build positive behavioural patterns to combat mental illness such as depression. For example, most world religions encourage forgiveness, gratitude, generosity and altruism, each of which is addressed in RCBT. Behavioral practices in RCBT include praying for self and others as regular social engagement with members of their religious community. These daily practices have the potential to

impact psychological skill agility and spiritual growth where spiritual growth represents an understanding of one's self that empowers the person to overcome depression [3].

In a study done in the United States, it was found that nearly 90% of hospitalized patients with medical problems used religion to cope [1]. The study also reported that over 45% reported that religion was the most important factor that kept them motivated to get better. Koenig also expanded his studies and found that greater religiosity predicts faster resolution of depressive symptoms in medical patient by over 50-70% [4].

Religiously integrated CBT essentially adheres to the same principles and style of conventional CBT. RCBT uses the client's own religious tradition as a major foundation to identify and replace unhelpful thoughts and behaviours [3].

RCBT has shown to have profound impact on somatic symptoms, anxiety, depression and overall mental health [5].

RCBT had the most positive impact on somatic symptoms, anxiety/insomnia, social dysfunction, depression, and mental health.

When a client discusses symptoms and reactions, therapist will frame this material within a religiously integrated CBT model

Major Aspects of RCBT include

- Renewing of mind
- Scripture memorization
- Contemplative prayer
- Challenging thoughts using religious resources
- Involvement in religious community

The goal of RCBT is to explicitly inculcate the patient's religious traditions as a basis to identify and replace depressive or anxious thoughts. It emphasizes that religious beliefs and practices can be used as resources for symptomatic relief and facilitate positive emotions. RCBT is an effective therapeutic modality for a large portion muslim clients, as modern Islamic sects and more secular Muslims fit exceptionally well with the humanistic underpinnings of CBT.

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