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ABSTRACT SNAPSHOT

This article offers a philosophical reading of Sufism by positioning *ma’rifah* as a form of transformative knowledge that integrates epistemic, ethical, and ontological dimensions. Sufi knowledge is often criticised as subjective, unverifiable, or anti-intellectual because of its close association with inner experience. Against this reduction, this article argues that the Sufi tradition contains an epistemic architecture that can be analysed philosophically. It develops a distinctive relationship between rationality, religious experience, moral virtue, and disciplined self-practice. Using a conceptual-hermeneutic method and a comparative reading of selected works by al-Ghazali and Ibn ‘Arabi, this study employs three philosophical lenses: virtue epistemology, philosophy as a way of life, and the epistemology of religious experience. The analysis shows that, in al-Ghazali, *ma’rifah* moves from *‘ilm* towards *dhawq* through *tazkiyah* and disciplined practice. In Ibn ‘Arabi, *ma’rifah* is grounded in the ontology of *tajalli*, in which the imaginal realm mediates knowledge as a domain of meaning. In both thinkers, knowledge does not stand as a neutral proposition, but functions as an orientation of life that forms the knowing subject. This article concludes that Sufism can be read as a philosophy of knowledge that links truth, virtue, and the restoration of the self, without reducing spiritual experience to psychologism or negating the demands of rationality.

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Narrative Hikmah: Al-Ghazali's Sufi Ethics of Wisdom in Dialogue with Narrative Therapy

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Abstract.

This article examines the concept of hikmah in al-Ghazali's Sufi thought as a spiritual-ethical resource for recovering meaning and places it in dialogue with narrative therapy as developed by Michael White and David Epston. Drawing primarily on al-Ghazali's Ihya' 'Ulum al-Din and al-Munqidh min al-Dalal, this study argues that hikmah should not be understood merely as theoretical knowledge, but as a transformative orientation that purifies the heart, reorders desire, and directs the self towards God. Narrative therapy, with its emphasis on externalising problems, re-authoring personal stories, unique outcomes, and alternative narratives, offers a psychological vocabulary for understanding how individuals may move beyond problem-saturated self-understandings. Using a comparative-philosophical method, this article analyses the convergence and difference between al-Ghazali's account of spiritual transformation and narrative therapy's model of narrative reconstruction. The analysis shows that hikmah may enrich narrative therapy by providing a spiritual-ethical horizon for meaning-making, self-purification, and moral responsibility, while narrative therapy may help articulate how wounded self-narratives can be reinterpreted and reconstructed. The article therefore proposes narrative hikmah as a theoretical framework for recovery that integrates Sufi wisdom and narrative reconstruction while preserving the distinct foundations of Islamic spirituality and contemporary psychotherapy. Rather than presenting a validated clinical intervention, this article offers a conceptual contribution to the study of Sufism, meaning-making, and spiritually oriented psychotherapy.

Keywords: hikmah; al-Ghazali; Sufism; narrative therapy; meaning-making.

INTRODUCTION

Contemporary human beings often live amid social complexity, economic pressure, and the rapid circulation of information. These conditions may weaken the inner space through which individuals interpret their lives and sustain a sense of meaning. When meaning begins to fade, questions about the purpose of life no longer appear merely as philosophical reflections, but also as existential and psychological concerns. A person may experience identity crisis, alienation, and a sense of disconnection from the self (Shobirin et al., 2025). Modern psychology may describe this condition as an existential problem, while the classical Islamic tradition may understand it as a disturbance of the heart that veils the light of truth. Although these two traditions use different conceptual languages, both point to a shared human concern: an inner wound that requires recovery, interpretation, and reorientation.

Within Islamic philosophy and Sufism, the concept of *hikmah* occupies an important position. *Hikmah* is not merely theoretical knowledge, but wisdom that guides human beings towards truth and moral-spiritual transformation (Iqbal, 2017).

Al-Ghazali, as one of the most influential figures in Islamic philosophy and Sufism, emphasises that diseases of the heart can only be healed through true knowledge, sincere action, and purification of the soul. In his thought, *hikmah* has a therapeutic dimension because it does not stop at intellectual understanding. It becomes an inner light that guides the soul towards balance, self-discipline, and orientation to God. Through *tazkiyah*, *muhasabah*, and spiritual discipline, human beings are trained to recognise the disorders of the heart and to rebuild life with clearer meaning (Muttaqin, 2022). Thus, *hikmah* concerns not only the question of truth, but also the healing and reordering of the self before God.

In contemporary psychology, narrative therapy, developed by Michael White and David Epston, offers another language for understanding the recovery of meaning. Narrative therapy begins from the view that human beings live within stories. Identity, experience, suffering, and hope are shaped by the narratives people tell about themselves and the world. White and Epston (1990) describe therapeutic work as a process that helps individuals separate themselves from problem-saturated narratives and create space for alternative stories. When a dominant narrative becomes oppressive, individuals may become trapped within a narrow and painful understanding of the self (Kelley, 2008). Through externalisation, re-authoring, and the strengthening of alternative stories, narrative therapy helps individuals reconstruct life narratives in more empowering ways. In this sense, narrative is not merely a record of the past, but a creative space for reorganising meaning and restoring agency (Swasti, 2024).

The dialogue between *hikmah* in Sufism and narrative therapy in contemporary psychology opens an important conceptual intersection. Both approaches understand human beings as meaning-seeking subjects who require interpretation in order to live more fully. *Hikmah* guides the self towards transcendental meaning, while narrative therapy helps individuals reconstruct meaning within personal and social experience. This relation may enrich the study of Islamic philosophy and contemporary psychotherapy. *Hikmah* offers a spiritual-ethical horizon for meaning-making, self-purification, and moral responsibility, while narrative therapy provides a practical vocabulary for articulating how wounded self-narratives may be externalised, reinterpreted, and reconstructed.

However, this relationship should not be understood as a simple equivalence. Al-Ghazali's Sufism is grounded in a theocentric worldview in which healing is inseparable from purification, remembrance of God, and the orientation of the heart towards Divine truth. Narrative therapy, by contrast, emerges from modern psychotherapeutic discourse and emphasises the reconstruction of meaning through language, social relations, and personal agency. Therefore, this article does not seek to reduce Sufism to psychotherapy, nor to Islamise narrative therapy in a superficial

way. Rather, it builds a conceptual dialogue between the two traditions while preserving their distinct foundations.

This interdisciplinary dialogue is relevant because many contemporary individuals seek recovery through both spiritual and psychological paths. The meeting between al-Ghazali's concept of *hikmah* and narrative therapy may offer a more holistic way of understanding recovery, one that attends not only to rational and social dimensions, but also to spiritual and ethical transformation. Academically, this study also shows that Islamic philosophy should not be treated merely as a historical discourse. Al-Ghazali's thought can be brought into conversation with contemporary psychological theory in order to respond to modern crises of meaning.

Previous studies on Islamic psychotherapy and Sufism have discussed spiritual healing, purification of the soul, and the recovery of meaning. Studies on narrative therapy have examined externalisation, re-authoring, unique outcomes, and the reconstruction of personal identity. However, the concept of *hikmah* in al-Ghazali has not been sufficiently examined as a philosophical bridge between Sufi self-purification and narrative reconstruction. This gap is important because *hikmah* may offer not only spiritual insight, but also a framework for understanding how human beings reinterpret suffering, reorder desire, and rebuild the meaning of life.

This article therefore asks: how can al-Ghazali's concept of *hikmah* be read as a spiritual-ethical resource for narrative reconstruction? To answer this question, the article first examines *hikmah* in al-Ghazali's Sufi thought, especially in relation to the healing of the soul. It then analyses the core principles of narrative therapy, particularly externalisation, re-authoring, and alternative stories. Finally, it proposes *narrative hikmah* as a conceptual framework for recovery that brings Sufi wisdom into dialogue with narrative reconstruction. This framework is offered not as a validated clinical intervention, but as a theoretical contribution to the study of Sufism, meaning-making, and spiritually oriented psychotherapy.

METHOD

This study employs a qualitative approach using a philosophical-hermeneutic framework. This approach is chosen because the concepts of *hikmah* in al-Ghazali's Sufi thought and narrative reconstruction in narrative therapy require interpretive analysis rather than empirical measurement. Hermeneutics allows classical Islamic texts and contemporary psychological texts to be read as conceptual resources that can enter into dialogue with present human concerns (Kolenggea et al., 2025). Through this framework, the study seeks to interpret the meanings of key concepts, examine their theoretical functions, and situate them within the broader problem of meaning, suffering, and recovery.

The material objects of this study are the concept of *hikmah* in al-Ghazali's Sufi thought and the concept of narrative reconstruction in narrative therapy. The formal object is the therapeutic-philosophical relation between wisdom, meaning-making, self-purification, and the reconstruction of the self. This distinction is important because the article does not treat *hikmah* merely as a theological or ethical term, nor does it treat narrative therapy merely as a clinical technique. Rather, both are examined as conceptual resources for understanding how human beings recover meaning after experiences of inner fragmentation.

The primary sources of this study consist of al-Ghazali's works, especially *Ihya' 'Ulum al-Din* and *al-Munqidh min al-Dalal*, which contain his reflections on the heart, diseases of the soul, spiritual transformation, and the pursuit of wisdom. From the field of narrative therapy, the primary sources are Michael White and David Epston's *Narrative Means to Therapeutic Ends* and White's *Maps of Narrative Practice*, which provide the foundational concepts of externalisation, re-authoring, unique outcomes, alternative stories, and narrative identity (White & Epston, 1990; White, 2007). Secondary sources include scholarly works on Islamic philosophy, Sufism, spiritual healing, narrative therapy, and narrative psychology.

The analysis is conducted in four stages. First, the article interprets al-Ghazali's concept of *hikmah* in relation to the healing of the soul, especially through the purification of the heart, *tazkiyah*, *muhasabah*, and the reorientation of life towards God. Second, it maps the main concepts of narrative therapy, particularly problem-saturated narratives, externalisation, re-authoring, unique outcomes, and the strengthening of alternative stories. Third, it compares the two traditions by identifying their points of convergence and difference in understanding meaning, selfhood, suffering, and recovery. Fourth, it formulates *narrative hikmah* as a conceptual framework that brings Sufi wisdom into dialogue with narrative reconstruction.

The comparison is not conducted in order to establish an absolute similarity between al-Ghazali's Sufism and narrative therapy. The two traditions emerge from different intellectual foundations. Al-Ghazali's Sufism is rooted in a theocentric and spiritual-ethical worldview, while narrative therapy emerges from contemporary psychotherapeutic discourse and social-constructionist assumptions. Therefore, this study does not reduce Sufism to psychotherapy, nor does it treat narrative therapy as identical with Islamic spiritual practice. Instead, it examines how both traditions may illuminate the relationship between meaning, selfhood, suffering, and recovery from their respective horizons.

Since this article is conceptual in nature, it does not involve clinical participants, therapeutic trials, or empirical measurement. The proposed concept of *narrative hikmah* should therefore be understood as a theoretical contribution rather than a

validated clinical intervention. Its purpose is to offer a philosophical bridge between al-Ghazali's Sufi ethics of wisdom and narrative therapy's account of narrative reconstruction, while leaving its practical applicability open for future research in counselling, psychotherapy, Islamic spiritual care, and community-based pastoral contexts.

RESULTS AND DISCUSSION

3.1. Hikmah and Recovery in al-Ghazali

Al-Ghazali places *hikmah* at the core of the human journey towards truth. For him, *hikmah* is not merely an accumulation of knowledge obtained through logic or argumentation, but a light granted by Allah to the heart of a servant, enabling one to see truth more clearly. Knowledge that remains only rational is not sufficient to lead human beings to true happiness, because true wisdom requires the purification of the soul, the discipline of desire, and the unveiling of inner meaning (al-Ghazali, 2005). Therefore, *hikmah* in al-Ghazali's view is transformative. It works not only at the intellectual level, but also at the existential, ethical, and spiritual levels. In *al-Munqidh min al-Dalal*, al-Ghazali's own intellectual and spiritual crisis also shows that the search for truth is not merely theoretical. It involves existential transformation, purification of the self, and a movement from uncertainty towards a more intimate awareness of God (Al-Ghazali, 2000).

In his major work *Ihya' 'Ulum al-Din*, al-Ghazali explains that human beings possess diseases of the heart that can blind them from truth. These diseases are not identical with physical disorders, but refer to moral and spiritual corruptions that damage consciousness and distort one's relation to God, the self, and others. *Riya'*, *'ujub*, *hasad*, and excessive love of the world are examples of inner poisons that disturb the purity of the heart. When the heart is filled with such diseases, the light of *hikmah* finds it difficult to enter. The process of healing, therefore, cannot be carried out merely through external commands or prohibitions, but through spiritual exercises that cultivate awareness, sincerity, humility, and inner purity (al-Ghazali, 2005).

Within this framework, *hikmah* becomes a kind of therapy of the soul that guides human beings from darkness towards light. It does not stop at the mastery of knowledge, but must produce self-transformation. Therefore, *hikmah* is closely related to *tazkiyat al-nafs*, the purification of the soul that enables human beings to face reality with greater clarity and balance (Dodego, 2021). In this process of purification, *hikmah* works as a light that unravels confusion, rearranges the priorities of life, and returns human beings to a more noble purpose. Recovery, in this sense, is not merely the removal of distress, but the restoration of the soul's proper orientation.

For al-Ghazali, knowledge that does not heal the soul can instead become spiritually dangerous. A person who knows much but does not practise his knowledge is often compared to a patient who knows the medicine but refuses to take it (Kurniati, 2018). This comparison illustrates that knowledge must be internalised and enacted in order to become wisdom. *Hikmah* is therefore not knowledge that merely settles in the head, but knowledge that heals the soul and directs action (Bahaf, 2024). This is what distinguishes mere information from true wisdom. Information may be accumulated, repeated, and displayed, but *hikmah* requires purification, humility, ethical discipline, and transformation. In this way, *hikmah* has a dual function: it illuminates the intellect while also healing the heart.

The process of recovery through *hikmah* does not occur instantly, but through gradual spiritual formation. In later Sufi pedagogical formulations, this process is often described through *takhalli*, *tahalli*, and *tajalli*: emptying oneself of blameworthy qualities, adorning oneself with praiseworthy qualities, and receiving the unveiling of Divine light within the heart. Although these terms should not be treated simplistically as a rigid formula in al-Ghazali's own writings, they resonate with his broader concern with purification of the heart and transformation of moral character (al-Ghazali, 2005). These stages can be understood as a form of spiritual therapy that restores human beings from inner wounds towards closeness with God. Here, *hikmah* functions as a roadmap that not only shows direction, but also guides the steps towards recovery.

Hikmah also concerns a person's ability to read meaning behind events (Hidayat, 2013). Al-Ghazali often emphasises the importance of *tafakkur*, namely contemplating creation and the events of life as signs that point towards truth. Through *tafakkur*, human beings learn to see life not merely as a burden, but as a space for knowing Allah. This perspective builds a healthier life narrative, because suffering is no longer seen only as punishment, misfortune, or meaningless pain, but as a trial that may refine the soul and deepen awareness (Ismail, 2022). Within this framework, *hikmah* becomes a lens for reinterpreting life experience. It allows the self to transform the meaning of suffering without denying the reality of pain.

The dimension of recovery in *hikmah* is clearly visible when al-Ghazali discusses the concept of *qalb*. For al-Ghazali, the heart is the centre of human consciousness and moral orientation. If the heart is healthy, then behaviour can move towards goodness; if the heart is damaged, then life becomes disordered. Therefore, the recovery of life cannot be achieved without the recovery of the heart. *Hikmah* is present as a light that illuminates the *qalb*, erodes darkness, and returns human beings to inner balance (Ain, 2025). In other words, *hikmah* works as a therapy that touches the core of the human self. It does not merely offer consolation, but reshapes the source from which perception, intention, and action emerge.

Al-Ghazali's view also gives an illustration that *hikmah* has a narrative character, because it helps human beings rebuild their life stories with a more meaningful orientation. A person who suffers inwardly because of envy or resentment, for instance, lives within an inner story that they are always losing to others. In such a narrative, the success of others is interpreted as a threat, and one's own life is read through lack, comparison, and dissatisfaction. *Hikmah* enters by guiding that person to dismantle the destructive story and replace it with a new narrative: that the advantages of others are not necessarily a threat, but may become a trial through which one learns gratitude, humility, and self-discipline (Sodiq, 2018). From this perspective, *hikmah* not only heals the heart, but also builds an alternative narrative that brings tranquillity.

Hikmah also contains a clear practical dimension. For al-Ghazali, wisdom does not stop at reflection, but must be realised in consistent action. A person of *hikmah* is one who learns when to be patient, when to be grateful, when to restrain anger, and when to act justly. Every action is born from a balance guided by inner light (Bahaf, 2024). In this way, *hikmah* takes root in everyday life, makes human life more stable, and at the same time heals wounds that arise from the inability to control desire, anger, envy, and fear. The recovery produced by *hikmah* is therefore not passive calmness, but an active ethical formation of the self.

Al-Ghazali's overall view shows that *hikmah* may be understood as a comprehensive process of spiritual recovery. It combines purification of the soul, reinterpretation of life experience, and formation of ethical behaviour. *Hikmah* does not merely provide spiritual calm, but changes the way human beings interpret themselves, their suffering, and their relationship with God (Kurniati, 2018). For this reason, *hikmah* can be viewed as an approach to recovery that goes beyond ordinary psychological counselling, because it anchors the meaning of healing in the depth of the human relationship with God. This is where the strength of al-Ghazali's Sufism lies: it offers an answer to the crisis of meaning experienced by human beings, both in the past and in the present, by connecting recovery with truth, purification, ethical action, and Divine orientation.

3.2. Narrative Therapy

Narrative therapy emerged from the concerns of psychological practitioners regarding therapeutic models that place too much emphasis on pathology (Swasti, 2024). Michael White and David Epston developed this approach with the conviction that human beings fundamentally live within stories. A person's identity, pain, hope, and even happiness are woven into the narratives they tell about themselves, others, and the world (White & Epston, 1990; Freedman & Combs, 1996). Within this framework, psychological problems are not understood merely as illnesses attached

to the individual. They may also appear as dominant stories that bind, narrow, and oppress the self.

White and Epston argue that problems are often strengthened by the way a person narrates their experiences. Someone who once failed in a particular field, for example, may repeatedly tell the story of that failure until their entire identity is reduced to the label of “a failed person.” In such a condition, the old story becomes a shackle that closes off the possibility for new meaning to grow. Narrative therapy is present to open a space for alternative stories that are healthier, more complex, and more empowering. In White and Epston’s language, therapeutic work helps individuals loosen the grip of problem-saturated narratives and rediscover stories that have been neglected, silenced, or overshadowed by suffering (White & Epston, 1990; Morgan, 2000).

One of the key concepts in narrative therapy is externalisation. Problems are no longer attached to the individual as the essence of the self, but are separated into something that can be observed, questioned, named, and resisted. In this way, a person no longer says, “I am weak,” but “this weakness is trying to control me” (Ammar, 2023). This shift in language may appear simple, yet it produces an important therapeutic movement. The individual begins to see the self not as the problem, but as a subject capable of confronting the problem. Externalisation enables the individual to gain critical distance from suffering and to recover a sense of agency before the problem (White & Epston, 1990; Morgan, 2000).

After the problem is externalised, the next process is to build a new and healthier story, which in narrative therapy is usually called re-authoring. The individual is invited to find small experiences that are often overlooked, yet actually contain values of courage, perseverance, patience, or compassion. These fragments of experience are then woven into an alternative story that is stronger than the oppressive dominant story (Fuadillah, 2019). Narrative therapy also pays attention to what White and Epston call unique outcomes, namely moments in which a person’s life does not fully submit to the dominant problem-story (White & Epston, 1990). These unique outcomes become important because they show that the self is never completely identical with suffering. In this way, a person’s identity is no longer trapped within a narrow narrative, but opened to new possibilities.

White and Epston also emphasise the importance of thickening stories, namely enriching alternative narratives with detail, social support, and personal meaning. A new story will not endure if it is too thin and fragile, because the old dominant narrative may easily return and dominate the person’s sense of self. Therefore, the individual is invited to find concrete evidence in life that supports the new story, to connect it with values that matter, and to share that story with others who can

acknowledge it (White & Epston, 1990; White, 2007). Thus, the alternative narrative becomes increasingly firm and functions as a source of psychological strength.

Narrative therapy rejects the view that the therapist is the sole authority who holds the key to healing. On the contrary, the therapist acts as a conversational partner who accompanies the process of rearranging the story. The individual is the one who has authority over their own life, because only they truly know the story they are living. The therapeutic relationship is therefore dialogical and relatively egalitarian, departing from the belief that every person has the capacity to rewrite the story of their life (Freedman & Combs, 1996; Swasti, 2024). This approach restores the dignity of the individual, which has often been reduced by medical diagnosis, social stigma, or a single problem-based identity.

In the modern context, narrative therapy is highly relevant because contemporary life is filled with various competing stories. Media, popular culture, family expectations, and social environments often present dominant narratives that force people to see themselves in certain ways. Narrative therapy gives individuals space to criticise such dominant narratives and to find a more authentic personal story (Wahyudin, 2022). In this way, recovery takes place not only in the psychological realm, but also in the social realm, because the stories that shape the self are often produced through social relations, cultural expectations, and structures of recognition.

Narrative therapy also emphasises that human beings are never singular in their stories. There are always alternative stories waiting to be given a place. A person who experiences depression, for instance, may also have shown deep concern for others, maintained responsibility in difficult circumstances, or endured painful situations with courage (Jørgensen et al., 2024; Swasti, 2024). Alternative stories like these need to be brought to the surface so that the person is no longer trapped in a single narrative of suffering. This process gives hope and expands the possibilities of life.

This narrative approach also opens the possibility of viewing problems as part of a life journey that can be given new meaning. Rather than seeing trauma or suffering only as a permanent wound, narrative therapy helps individuals explore whether painful experiences can be narrated in ways that preserve dignity, agency, and hope. This does not romanticise suffering or treat trauma lightly. Rather, it means that the individual is helped to move out of a narrative that reduces the self towards a broader and more empowering narrative. Recovery, in this sense, is not merely the disappearance of pain, but the reconstruction of meaning in the presence of pain.

The overall thought of White and Epston shows that narrative therapy is an approach that places meaning at the centre of recovery. It does not merely seek to extinguish psychological symptoms, but helps individuals rewrite life stories that are

more aligned with the hopes, values, relationships, and identities they consider meaningful (White & Epston, 1990; White, 2007). By emphasising the power of story, this therapy is in line with the human need to live meaningfully. At this point, a space opens to see how *hikmah* in al-Ghazali's tradition can enter into dialogue with narrative therapy, since both place meaning, self-understanding, and transformation at the centre of recovery.

3.3. Dialogue between Islamic Philosophy and Narrative Psychology

The dialogue between *hikmah* in Sufism and narrative therapy opens a unique reflective space. On the one hand, al-Ghazali emphasises that the human soul requires the process of *tazkiyah*, namely the purification of the heart so that it may return to its pure *fitrah* (Mutholingah, 2021). On the other hand, Michael White emphasises the importance of retelling human experience in a more restorative way, so that the individual is not trapped in a single narrative that wounds (White, 2007). These two approaches seem to walk different paths, yet both seek to provide space for human beings to rediscover the meaning of their lives.

If Sufism speaks in the spiritual language of the human connection with God, narrative therapy speaks in the psychological language of the human connection with one's life story. Yet both share an important similarity: both reject a mechanistic understanding of the human being. Al-Ghazali does not view the human being merely as a rational creature, but as a complex spiritual entity whose heart, desire, knowledge, and action must be purified and reordered. Likewise, narrative therapy rejects the pathological view that sees human beings merely as objects of diagnosis, and instead restores the individual as a subject with a story that deserves to be retold.

At this point, a meeting point can be found. The process of soul purification in Sufism is not merely the removal of sin, but also the rearrangement of one's view of the self, the world, and God. In the discourse of *tazkiyat al-nafs*, purification is often described through the movement of removing blameworthy qualities, cultivating praiseworthy qualities, and opening the soul to a more intimate awareness of God (Mutholingah, 2021). Meanwhile, narrative therapy emphasises the reconstruction of the life story so that the individual is not forever confined by stories that weaken them (White & Epston, 1990). Both approaches recognise the importance of inner transformation through a changed way of seeing the self and the world. In Sufism, this transformation is directed towards spiritual purification and closeness to God; in narrative therapy, it is directed towards the recovery of agency, meaning, and a more empowering self-description.

Hikmah then serves as a bridge. Within al-Ghazali's framework, *hikmah* is not merely the accumulation of knowledge, but a light that guides human beings in making the right decisions in life (Nasution, 2022). Within the framework of narrative therapy, *hikmah* can be understood as a person's capacity to reread their life story with

awareness and wisdom. In other words, *hikmah* becomes a meeting point between the spiritual dimension of Sufism and the psychological dimension of narrative therapy. It does not erase the differences between the two, but allows both to illuminate the relationship between meaning, suffering, and self-recovery.

Furthermore, both approaches also emphasise the importance of relationality in self-recovery. Sufism is often practised under the guidance of a *murshid* or spiritual teacher (Lubis & Naldo, 2024), while narrative therapy emphasises the importance of conversation with a therapist, witnesses, or a wider community that can support the emergence of alternative stories (White & Epston, 1990; Freedman & Combs, 1996). In both, human beings are restored not only through an isolated individual process, but also through meaningful relations with others. Here, the recovery of life meaning is intersubjective, because the self is shaped, wounded, and restored within relations.

This dialogue, however, should not be understood as conceptual equivalence. Al-Ghazali's Sufism is rooted in a theocentric and spiritual-ethical worldview, while narrative therapy emerges from contemporary psychotherapeutic discourse and is strongly influenced by social constructionist assumptions. Therefore, the purpose of comparison is not to claim that Sufism and narrative therapy are identical. Rather, the purpose is to explore how both traditions can illuminate the relation between meaning, selfhood, suffering, and recovery from different but dialogical horizons.

This dialogue also shows how Islamic philosophy and modern psychology can enrich one another. Al-Ghazali, with his metaphysical and spiritual framework, provides a transcendental foundation concerning the purpose of human life. Meanwhile, White and Epston, with their narrative approach, show that the stories human beings build about themselves can be rearranged to open space for hope, dignity, and agency (White & Epston, 1990; White, 2007). The meeting of the two presents a more complete perspective, one that does not only respond to psychological wounds, but also guides the soul towards spiritual illumination.

In this way, *hikmah* as recovery is no longer an abstract concept, but a praxis that can be lived. It is present in prayer, in self-reflection, in compassionate conversation, and in the rewriting of a more meaningful life story. *Hikmah* becomes a shared language that enables Sufism and narrative therapy to speak to each other without erasing their differences. It offers a bridge between spiritual purification and narrative reconstruction, between the healing of the heart and the re-authoring of the self.

3.4. Narrative Hikmah as a Model of Recovery

Hikmah in the Islamic tradition has often been understood as the light of wisdom that guides human beings out of the confusion of life. It is not merely a theory

of knowledge, but a path of inner recovery. In a reflective sense, wisdom enables human beings to read life events as signs, lessons, and opportunities for moral-spiritual growth (El-Rasheed, 2024). When placed in dialogue with narrative therapy, *hikmah* can be understood as a process of reinterpreting life stories in ways that allow human beings to find meaning from wounds, suffering, and moral struggle.

In this article, *narrative hikmah* refers to a conceptual model of recovery that integrates Sufi wisdom, self-purification, and narrative reconstruction. It consists of three movements. First, the individual recognises the dominant wound-narrative that shapes their suffering. Second, the individual reinterprets that experience through *hikmah*, *tafakkur*, *muhasabah*, and spiritual reflection. Third, the individual re-authors the self within a spiritual-ethical orientation towards God. Through these movements, recovery is not understood merely as symptom reduction, but as the reconstruction of meaning, character, and spiritual direction.

The first movement is the recognition of the dominant wound-narrative. Narrative therapy emphasises that suffering is often formed or intensified by oppressive dominant narratives, whether they come from society, family, culture, or from an inner voice full of criticism (White & Epston, 1990). A person may experience pain not only because of what happened, but also because of the meaning attached to what happened. Failure, rejection, trauma, or loss may become a totalising story that defines the whole self. At this stage, narrative therapy helps individuals identify and externalise the stories that wound them, while *hikmah* invites them to recognise the moral and spiritual disorders that may shape their interpretation of life.

The second movement is reinterpretation through *hikmah*. *Hikmah* offers the power to balance the wound-narrative with wisdom born from a heart that relies on God. In Sufi ethics, reflection is not merely an intellectual act, but a discipline of the heart. Through *tafakkur*, *muhasabah*, and spiritual awareness, the individual learns to reread suffering within the horizon of Divine wisdom, moral responsibility, and spiritual growth. Thus, the process of recovery is no longer merely psychological, but also spiritual. Narrative therapy helps individuals identify and reconstruct the stories that wound them, while *hikmah* gives that reconstruction a deeper spiritual orientation.

The third movement is spiritual re-authoring. Al-Ghazali emphasises that the journey of the soul towards Allah is a process coloured by trials, purification, and the reordering of the heart. If in narrative therapy a person is invited to rewrite their story, in Sufism a person is invited to reread every event within the horizon of Divine wisdom, moral responsibility, and spiritual growth. These two approaches complement one another: one provides the narrative framework, while the other provides the transcendental orientation. However, this complementarity should be understood carefully. Narrative therapy does not become Sufism, and Sufism does not

become a mere psychotherapeutic technique. The two meet in their concern for meaning, transformation, and the possibility of a renewed self.

Narrative hikmah helps human beings understand that wounds do not always have to be erased, but can be reinterpreted until they give birth to lessons. A narrative that was initially filled with suffering can become a source of energy to rise again when it is read through wisdom, patience, and spiritual awareness. This perspective is in line with the ideas of patience and *ridha* taught in Sufi ethics, where suffering is not necessarily the end, but may become a door towards new awareness (Azis, 2024). This does not mean that pain is romanticised or that injustice is justified. Rather, it means that suffering can be interpreted without allowing it to become the final definition of the self.

In practice, *narrative hikmah* can be realised through the process of reflecting on experience and then rewriting it from the perspective of wisdom. This activity resonates with *dhikr* and *tafakkur* in the Sufi tradition, which function to reorder memory, attention, and the heart (Shara, 2020). In this way, narrative therapy does not stand alone, but finds resonance within the tradition of Islamic *hikmah*. Conversely, Islamic *hikmah* becomes more communicable in contemporary psychological language when it is articulated through the process of narrative reconstruction.

The uniqueness of this approach lies in its ability to combine narrative rationality with spiritual depth. Modern psychology often emphasises personal meaning-making (Mukharom & Arroisi, 2021), while Sufism directs the individual towards a wider horizon of meaning, namely connectedness with Allah (Alfiah et al., 2024). Through this integration, recovery does not only organise the inner self, but also cultivates a more complete awareness of existence. The self is not merely helped to “feel better”, but is invited to understand life, suffering, and action within a broader spiritual-ethical horizon.

Narrative hikmah also enriches the way human beings interpret suffering. Rather than seeing suffering merely as misfortune, it can be understood as an important chapter in a story that is moving towards transformation. This is similar to the structure of a story in which conflict does not exist only to destroy the character, but may also shape, test, and mature them. With this awareness, individuals can experience wounds with greater calm, not because suffering disappears, but because it is no longer read as meaningless.

In Sufism, the story of life is viewed as a journey towards *ma'rifah* (Novianto & Saumantri, 2024). Therefore, bitter and sweet experiences are placed within the context of knowing the self and God. Narrative therapy contributes by providing a dialogical space to articulate such experiences, while Islamic *hikmah* instils a spiritual orientation so that the narrative does not lose direction. The combination of the two

allows human beings to speak about suffering honestly while also seeking a higher meaning beyond suffering itself.

The result of this encounter is the possibility of stronger inner resilience. Individuals who are able to rewrite their life stories with the light of *hikmah* are no longer trapped only in the position of victim. They may become active subjects, reflective interpreters, and servants who surrender to God without losing responsibility for their own transformation. This is a form of recovery that elevates human dignity without detaching it from the roots of spirituality.

Ultimately, *narrative hikmah* places human beings within a broader spiritual narrative. Every wound and joy may become part of the soul's journey towards meaning, purification, and closeness to God. Thus, recovery is not only psychological recovery, but also spiritual, ethical, and existential. *Hikmah* provides orientation, narrative therapy provides method, and the two together form a conceptual path of recovery that remains open for further theoretical development and practical examination.

CONCLUSION

This study shows that narrative therapy and Sufism have a profound point of encounter in the effort to understand human suffering and recovery. Narrative therapy helps individuals unravel oppressive life stories, while al-Ghazali's Sufism provides a transcendental orientation that guides the soul to interpret suffering within the wider journey towards Allah. The meeting of the two forms a reflective space for a more comprehensive understanding of recovery, one that does not only concern psychological reconstruction, but also spiritual orientation and ethical transformation.

The strength of narrative therapy lies in its ability to dismantle dominant narratives that often confine the individual. Through externalisation, re-authoring, unique outcomes, and the strengthening of alternative stories, narrative therapy allows individuals to regain agency over their life narratives. In this context, Sufism expands the horizon by offering the perspectives of *sabr*, *ridha*, *ikhlas*, *tafakkur*, and *muhasabah*. By placing the two in dialogue, individuals do not only learn to rewrite their life stories, but are also invited to discover deeper meaning behind wounds, failure, and suffering.

Al-Ghazali's Sufism emphasises the subtle inner dimension through the purification of the heart and the journey towards *ma'rifah*. This provides a spiritual and metaphysical framework that may enrich narrative therapy. Suffering is no longer seen merely as disgrace or futility, but as an experience that may become a momentum for self-understanding, ethical repair, and purification of the soul. Thus, wounds are not simply erased, but reinterpreted as doors towards transformation.

Narrative hikmah then becomes a conceptual bridge that connects modern psychology with the spiritual treasury of Islam. *Hikmah* is not merely knowledge, but life wisdom that revives personal narratives with Divine orientation. Through *hikmah*, individuals can understand that every life story possesses value that may shape the maturity of the soul. Narrative therapy provides the language of story reconstruction, while Sufism provides the spiritual horizon through which reconstruction is oriented towards meaning, responsibility, and closeness to God.

The result of this encounter is a more complete understanding of recovery, one that does not only touch the emotional aspect, but also strengthens spiritual and ethical awareness. Recovery does not stop at the removal of pain, but gives birth to a new awareness of the meaning of existence. However, since this article is conceptual in nature, *narrative hikmah* should not be treated as a validated clinical intervention. Further research is needed to examine its applicability in counselling, psychotherapy, Islamic spiritual care, and pastoral or community-based settings.

Therefore, the contribution of this article lies in its attempt to formulate a philosophical bridge between al-Ghazali's Sufi wisdom and narrative therapy. This bridge does not erase the differences between the two traditions. Rather, it opens a dialogical space in which Islamic spirituality and contemporary psychotherapy may illuminate one another. The path towards wholeness of the self, in this perspective, is not merely psychological, but also spiritual, ethical, and existential, in harmony with the transcendental calling of human beings.

REFERENCES

- Ain, S. T. (2025). *Peran qalb perspektif Al-Ghazali terhadap perkembangan emosional anak* [Skripsi, Universitas Islam Negeri Syarif Hidayatullah Jakarta, Fakultas Ushuluddin]. UIN Syarif Hidayatullah Jakarta Repository.
- Al-Ghazali. (2000). *Deliverance from error: Al-Munqidh min al-Dalal* (R. J. McCarthy, Trans.). Fons Vitae.
- Al-Ghazali, A. H. (2005). *Ihya' 'Ulum al-Din*. Dar al-Kutub al-'Ilmiyyah.
- Alfiah, N., Noor, A. M., Farhan, A., & Furqon, A. (2024). Tasawuf dan pengembangan diri: Upaya optimalisasi karakter dan potensi manusia secara holistik. *JOUSIP: Journal of Sufism and Psychotherapy*, 4(2), 165–182.
- Ammar, M. A. N. (2023). Terapi naratif dalam mengatasi trauma dan mendorong kesejahteraan mental: Pendekatan konstruktivis sosial. *JECTH: Journal Economy, Technology, Social and Humanities*, 1(1).
- Azis, L. (2024). *Konsep sabar dan relevansinya dalam kehidupan kontemporer perspektif Ibnu Qayyim Al-Jauziyyah* [Bachelor's thesis, UIN Syarif Hidayatullah Jakarta]. UIN Syarif Hidayatullah Jakarta Repository.

- Bahaf, M. A. (2024). *Percikan hikmah*. Penerbit A-Empat.
- Dodego, S. H. A. (2021). *Tasawuf Al-Ghazali perspektif pendidikan Islam*. Guepedia.
- El-Rasheed, H. B. (2024). *Menapak bentala hikmah*. Brilllyelrasheed.
- Fuadillah, M. F. (2019). *Konseling Islam dengan terapi naratif dalam mengatasi konsep diri negatif seorang siswi SMP Islam Tanwirul Afkar Sidoarjo* [Skripsi, Universitas Islam Negeri Sunan Ampel Surabaya]. UIN Sunan Ampel Surabaya Digital Library.
- Freedman, J., & Combs, G. (1996). *Narrative therapy: The social construction of preferred realities*. W. W. Norton & Company.
- Hidayat, K. (2013). *Ungkapan hikmah: Membuka mata, menangkap makna*. Noura Books.
- Iqbal, I. (2017). Filsafat sebagai hikmah: Konteks berfilsafat di dunia Islam. *Refleksi: Jurnal Filsafat dan Pemikiran Islam*, 17(1), 23–42.
- Ismail, M. (2022). *Menalar makna berpikir dalam Al-Qur'an: Pendekatan semantik terhadap konsep kunci Al-Qur'an*. Unida Gontor Press.
- Jørgensen, C. B., Behrmann, J. T., Blaabjerg, J., Pettersen, K. A., & Jensen de López, K. M. (2024). Narrative therapy with children: A qualitative interview study with Danish therapists about the application of narrative practices. *Counselling and Psychotherapy Research*, 24(1), 295–307.
- Kolenggea, A., Miro, N., Srekyana, N., Laoli, N. F. G., & Sipahutar, M. A. (2025). Peran hermeneutik alegoris dalam filsafat dan teologi. *Jurnal Penelitian Ilmiah Multidisipliner*, 1(04), 816–823.
- Kurniati, Z. (2018). *Dzikir sebagai terapi penyembuhan gangguan jiwa dalam perspektif Imam Al-Ghazali* [Skripsi, Universitas Islam Negeri Raden Intan Lampung]. UIN Raden Intan Lampung Repository.
- Lubis, N., & Naldo, J. (2024). Implementasi diri sebagai hamba dalam aktivitas suluk Tarekat Naqsyabandiyah. *Jurnal EDUCATIO: Jurnal Pendidikan Indonesia*, 10(2), 92–103.
- Morgan, A. (2000). *What is narrative therapy? An easy-to-read introduction*. Dulwich Centre Publications.
- Mukharom, R. A., & Arroisi, J. (2021). Makna hidup perspektif Victor Frankl: Kajian dimensi spiritual dalam logoterapi. *TAJDID: Jurnal Ilmu Ushuluddin*, 20(1), 91–115.
- Mutholingah, S. (2021). Metode penyucian jiwa (*tazkiyah al-nafs*) dan implikasinya bagi pendidikan agama Islam. *Ta'limuna: Jurnal Pendidikan Islam*, 10(1), 69–83.

- Muttaqin, A. (2022). *Tasawuf psikologi Al-Ghazālī: Tazkiyat al-nafs sebagai upaya menuju kesehatan mental*. Penerbit A-Empat.
- Nasution, H. M. Y. (2022). *Manusia menurut Al-Ghazali*. Merdeka Kreasi Group.
- Novianto, F. A., & Saumantri, T. (2024). Nilai-nilai filsafat dan tasawuf dalam menjawab tantangan masyarakat kontemporer. *Sanjiwani: Jurnal Filsafat*, 15(1), 1–12. <https://doi.org/10.25078/sjf.v15i1.3066>
- Roberts, A. R., & Greene, G. J. (2008). *Buku pintar pekerja sosial (Jilid 1)*. PT BPK Gunung Mulia.
- Shara, L. (2020). *Zikir sebagai sarana peningkatan kecerdasan spiritual perspektif tasawuf* [Bachelor's thesis, IAIN Bengkulu]. IAIN Bengkulu Repository.
- Shobirin, M., Rosyadi, R. N., & Sari, E. F. (2025). Tantangan dan problematika masyarakat *modern*. Cahya Ghani Recovery.
- Sodiq, A. (2018). *Prophetic character building: Tema pokok pendidikan akhlak menurut Al-Ghazali*. Prenada Media.
- Swasti, I. K. (2024). Narrative therapy to treat a college student's depression: A case report. *INSAN: Jurnal Psikologi dan Kesehatan Mental*, 9(1).
- Wahyudin, Y. M. (2022). Mengkritik diri sendiri: Sebuah auto-etnografi dari pengalaman penelitian. Dalam *The Indonesian Conference on Disability Studies and Inclusive Education* (Vol. 2, hlm. 127–148).
- White, M. (2007). *Maps of narrative practice*. W. W. Norton & Company.
- White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. W. W. Norton.
- Winarso, W. (2024). *Model konseling ekspresif Islam untuk kesehatan mental holistik*. PT Literasi Nusantara Abadi Grup.