



**UNVEILING THE COUNSELLING EXPERIENCES OF
SPIRITUAL HYPNOTHERAPY WITH ISLAMIC APPROACH
AMONG FEMALE CHILD VICTIMS OF INCEST**

By

SOFIYYAH LOW SIEW PING

**Thesis Submitted to the School of Graduate Studies,
Universiti Putra Malaysia, in Fulfillment of the
Requirements for the Degree of Doctor of Philosophy**

July 2022

FPP 2022 69

All materials contained within the thesis, including without limitation text, logos, icons, photographs and all other artworks, is copyright material of Universiti Putra Malaysia unless otherwise stated. Use may be made of any material contained within the thesis for non-commercial purposes from the copyright holder. Commercial use of material may only be made with the express, prior, written permission of Universiti Putra Malaysia.

Copyright © Universiti Putra Malaysia



Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfillment of the requirement for the degree of Doctor of Philosophy

**UNVEILING THE COUNSELLING EXPERIENCES OF
SPIRITUAL HYPNOTHERAPY WITH ISLAMIC APPROACH
AMONG FEMALE CHILD VICTIMS OF INCEST**

By

SOFIYYAH LOW SIEW PING

July 2022

Chairman : Professor Siti Aishah Hassan, PhD
Faculty : Educational Studies

Child abuse is an all-inclusive disorder. Young victims of incest tend to experience greater trauma than the victims of other forms of sexual abuse. In Malaysia, the topic of Child Sexual Abuse (CSA) has received very little research attention. Consequently, very few clinical interventions exist for CSA victims. Likewise, very few studies had explored the experiences of children who had undergone therapy for CSA. Given the general prevalence of religion and spirituality, more research is needed on the potential of spiritual hypnosis as a treatment for CSA victims, particularly in Malaysia. To date, no study has been conducted on spiritual hypnosis therapy for CSA victims, particularly those that incorporate an Islamic approach.

To address the aforementioned gap, this study poses two main research questions (RQ): 1) How to perform an appropriate Spiritual Hypnotherapy with Islamic Approach (SPHIA) procedure for abuse victims? and 2) What do participants experience during the SPHIA procedure, specifically through i) seeing, ii) listening, and iii) feeling? This study incorporates two theoretical perspectives in the model development namely: 1) hypnotherapy, and 2) spirituality in addition to the Islamic healing model. These two theories guided the model design, and the exploration and generation of new data related to the phenomenon as derived from the participants' experiences.

A qualitative phenomenological research design was used to unveil the experiences of six female children, aged between 13 and 18, who were victims of incest via the usage of SPHIA. This study employed the inductive approach. Firstly, data was collected through participant observation and in-depth interview in the Malay language to investigate the participants' experiences while undergoing SPHIA. Each videotaped and recorded interview, which lasted between 45 to 60 minutes, was transcribed verbatim and analysed using the *Nvivo* 12 Plus software. Ethics of confidentiality were

well addressed. The trustworthiness of the study was ensured through the triangulation of the participant observations, in-depth interviews, and documentation analysis.

The outcome answered RQ 1 which aims to explicate the process of developing the SPHIA model via eight sessions namely: i) building rapport, ii) conducting semi-structured interviews and questionnaire, iii) exploring the participants' spirituality, iv) education sessions about hypnotherapy, v) conducting SPHIA using Script 1 and Script 2, and vi) conducting in-depth interviews using Script 1 and Script 2. In-depth examination of the RQs 2 unveiled three themes of experiences through seeing namely people, comforting scenery, and projected objectives of their future. The three themes of experiences through listening are the anchoring, making wishes to Allah, and conversation with religious idol. Lastly, the three themes of experiences through feeling are the conscious feeling of being hypnotized, feeling of being highly charged emotionally, and the feeling of transcendence.

SPHIA is a counselling intervention that enhances the participants' hypnotic, religious and spiritual experiences. Spiritual evolvement in hypnotherapy can restructure and reframe the mental imagery in the unconscious mind and effectively help participants heal during the psychotherapeutic process. SPHIA is considered a potential intervention for this target group (CSA) in KSKCareCentre, and future studies on its effectiveness are recommended.

Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia
sebagai memenuhi keperluan untuk Ijazah Doktor Falsafah

**MENEROKAI PENGALAMAN KAUNSELING HIPNOTERAPI
SPIRITUALITI BERDASARKAN PENDEKATAN ISLAM DI KALANGAN
KANAK-KANAK PEREMPUAN MANGSA SUMBANG MAHRAM**

Oleh

SOFIYYAH LOW SIEW PING

Julai 2022

Pengerusi : Profesor Siti Aishah Hassan, PhD
Fakulti : Pengajian Pendidikan

Penderaan kanak-kanak adalah sejenis gangguan menyeluruh. Mangsa sumbang mahram cenderung mengalami trauma yang lebih teruk berbanding mangsa penderaan seksual lain. Di Malaysia, topik Penderaan Seksual Kanak-Kanak (“CSA”) kurang mendapat perhatian penyelidik. Justeru, intervensi klinikal untuk mangsa CSA sangat rendah. Kajian ke atas pengalaman kanak-kanak yang pernah menjalani terapi untuk CSA juga sangat rendah. Berdasarkan penekanan umum ke atas aspek agama dan kerohanian, lebih banyak kajian diperlukan mengenai potensi hipnosis rohani sebagai rawatan untuk mangsa CSA, khususnya di Malaysia. Sehingga kini, tiada kajian telah dijalankan mengenai terapi hipnosis rohani untuk mangsa CSA, terutamanya yang menerapkan pendekatan Islam.

Bagi menangani jurang yang dinyatakan, kajian ini mengemukakan dua persoalan kajian (“RQ”): 1) Bagaimana cara melaksanakan prosedur Hipnoterapi Kerohanian dengan Pendekatan Islam (“SPHIA”) yang sesuai untuk mangsa penderaan? dan 2) Apakah pengalaman para peserta semasa prosedur SPHIA, khususnya menerusi aspek i) penglihatan, ii) pendengaran, dan iii) perasaan? Kajian ini menggabungkan dua perspektif teori dalam pembangunan model iaitu: 1) hipnoterapi, dan 2) kerohanian sebagai pelengkap kepada model penyembuhan Islam. Kedua-dua teori ini membimbing reka bentuk model, serta penerokaan dan penjaanaan data baharu yang berkaitan dengan fenomena ini seperti yang diperolehi daripada pengalaman peserta.

Reka bentuk penyelidikan fenomenologi kualitatif digunakan bagi mendedahkan pengalaman enam kanak-kanak perempuan, berusia di antara 13 dan 18 tahun, yang merupakan mangsa sumbang mahram menerusi penggunaan SPHIA. Kajian ini menggunakan pendekatan induktif. Pertama sekali, data dikumpul menerusi pemerhatian ke atas peserta dan temubual mendalam menggunakan Bahasa Melayu bagi menyelami pengalaman peserta semasa menjalani SPHIA. Setiap temubual yang

dirakam, yang mana berlangsung di antara 45 hingga 60 minit, ditranskripsi secara verbatim dan dianalisis menggunakan perisian Nvivo 12 Plus. Etika kerahsiaan ditekankan sepanjang masa. Kebolehpercayaan kajian dipastikan melalui triangulasi pemerhatian ke atas peserta, temubual mendalam, dan analisis dokumentasi.

Hasil dapatan menjawab RQ 1 yang bertujuan menjelaskan proses pembangunan model SPHIA menerusi lapan sesi iaitu: i) pembinaan hubungan, ii) temubual separa berstruktur dan borang soal selidik, iii) menyelami kerohanian peserta, iv) sesi pendidikan mengenai hipnoterapi, v) menjalankan SPHIA menggunakan Skrip 1 dan Skrip 2, dan vi) menjalankan temubual mendalam menggunakan Skrip 1 dan Skrip 2. Kajian mendalam ke atas RQ 2 mendedahkan tiga tema pengalaman menerusi aspek penglihatan iaitu orang, pemandangan yang menenangkan, dan unjuran objektif masa hadapan. Tiga tema pengalaman menerusi aspek pendengaran ialah “anchoring”, berdoa kepada Allah, dan bercakap dengan idola agama. Akhir sekali, tiga tema pengalaman menerusi aspek perasaan ialah perasaan sedar ketika dihipnotis, perasaan penuh emosi, dan perasaan merentas badan.

SPHIA ialah intervensi kaunseling yang meningkatkan pengalaman hipnosis, keagamaan dan kerohanian peserta. Perkembangan rohani dalam hipnoterapi boleh menstruktur dan merangka semula imej mental dalam minda bawah sedar serta berkesan dalam membantu penyembuhan peserta semasa proses psikoterapi. SPHIA dianggap sebagai intervensi yang berpotensi untuk kumpulan sasaran (CSA) ini di KSKCareCentre, dan kajian masa hadapan mengenai keberkesannya adalah disyorkan.

ACKNOWLEDGEMENTS

In the name of Allah, the Most Gracious and the Most Merciful. All praises to Allah and His blessings for the completion of this thesis. *Alhamdulillah* for all the opportunities and trials bestowed upon me and for my health and strength, guidance in learning, resilience and wisdom that through Him made everything possible. Greetings to the holy Prophet Muhammad (Peace be upon him) whose way of life has been a continuous guidance for the betterment of my life. My name is Sofiyah. I underwent an 11-year PhD journey which began at the age of 35 in 2012; had a one-year deferment in 2013 and went full-time in 2014, then went back to part time in 2018 and overall took 19 semesters to graduate with a doctorate in 2023 from Universiti Putra Malaysia (UPM). My PhD is titled “Unveiling the Counselling Experiences of Spiritual Hypnotherapy with Islamic Approach among Female Child Victims of Incest”. I defended my PhD thesis on 4 July 2022. July is really my lucky month as it is both my birthday month and the month when I took the comprehensive exam in 2015.

Every PhD journey is different and sometimes a lonely path. Pursuing a PhD has been a lifelong dream of mine. A doctorate is not just a title; it entails years of tremendous effort and contributions to academia and my profession. Time management was tough, especially when I had to balance between my PhD work, official work and family needs, all while feeling mentally and physically exhausted. One of the biggest challenges is momentum; once you stop, extra effort is needed to get started again. I suffered from academic psychological distress in my fourth year of PhD work, mostly resulting from the three rounds of failures in my pilot study which forced me to develop a new model that took almost a year so as to enable me to continue with this study. I struggled emotionally during that time; I had no clear path in my course of work and no guidance for overcoming the challenges. I felt lost and hopeless. I tried seeking help but didn't manage to find the right person as my study was a very new topic at that time. Those were dark times. Fortunately, I managed to overcome the “PhD blues” and soldiered on. From venturing into a new area of research I had zero experience in, to dealing with the challenges of self-learning completely new concepts, I overcame the roadblocks with solid persistence. I started to enjoy my new field of research, and never looked back since.

Undoubtedly, pursuing a PhD comes with its own unique challenges, but I had severely underestimated how difficult it was going to be. Over these past 11 years, I have developed a very specific set of research skills, among which are perseverance and commitment. Perseverance may be more important than intelligence. One has to have the ability to persevere when faced by challenges and come up with viable solutions. “Never give up!” I am very proud of myself for reaching the finish line. Despite being on the verge of depression, I managed to keep a positive outlook and kept my overall well-being intact. My advice to all PhD candidates out there, if you find yourself experiencing symptoms of depression, early detection is key. Any psychological-related issue that is a direct result of your studies should not be ignored; it may be time to seek advice from your healthcare provider and practice self-care intervention. I want you to know that you are not alone. Seeking help is a sign of strength, not weakness and you should never feel ashamed for doing so.

I would like to take this opportunity to express my sincerest appreciation to all those who have supported me in one way or another throughout my PhD journey. Special thanks to Mr. Muhammed Nadzri Bin Murashid, the officer from the Department of Social Welfare under the Ministry of Women, Family and Community Development who approved my application and allowed me to conduct this research on incest victims in children homes in Malaysia. My heartfelt gratitude goes out to my ex-boss Mdm. Ong Chin Lan, ex-Principal Assistant Director of Bukit Aman's Sexual, Women and Child Investigation Division (D11), who provided me with the statistics of Child Sexual Abuse throughout 2013-2017 as my supporting document. My utmost sincere gratitude and appreciation also goes to the Former One Stop Crisis Center (OSCC), ex-Head of Emergency Department, Prof. Dato' Seri Dr. Abu Hassan Asaari Bin Abdullah. OSCC is one of the services provided by the Emergency and Trauma Department of the Ministry of Health to assist rape victims or crisis survivors in hospitals. Thank you for being such a great mentor to me and for giving me continuous support and encouragement over the past year.

My appreciation also goes out to the script content validation team consisting of three hypnosis experts, Dr. Hj. Helminiry Had Bin Hj. Sabtu, Ustaz Zawawi Bin Zakaria, and Professor Dr. Hishamuddin Bin Md. Som from the Malaysian Academy of Hypnosis, and also the two Islamic Jurists, Allahyarham Ustaz Dato' Ismail Bin Kamus who passed away on 8 May 2020 and Mr. Ahmad Tarmizi Bin Mahmud from the Islamic Authorities of Federal Territory, Malaysia. My gratitude to the peer reviewers of my research process, hypnosis scripts, interviews and verbatim transcripts namely Ustaz Rosli Bin Daud from JAKIM, Mr. Ahmad Faqih Bin Ibrahim, Mr. Farid Wajdi, Mr. Richard Afandi, Mr. Saiful Lizan @ Hasnul Hisyam Bin Suparman, Ms. Nor Syazila Binti Abdul Rahim and Mdm. Zarien Nurlieyana Binti Aminuddin. Last but not least, the counsellors of Rumah Kanak-Kanak (RKK), Mdm. Jaya Nisha a/p Gopalkrishnan, who had helped me tremendously during the pilot study, Mdm. Nurul Huda Binti Puwasa who helped me arrange the place and time to meet the participants during data collection. This appreciation also goes out to Mr. Rinatho Bin Nunchi who helped me in conducting the hypnotherapy session in the initial pilot study.

In pursuing this path, I am deeply grateful for the help and support extended by my supervisor Professor Dr. Siti Aishah Binti Hassan, who gave me considerable freedom in determining the direction of my research. In the second year of my PhD, I received a special graduate research allowance as funding. It was under her supervision and encouragement that I had the opportunity to present my work entitled "Sexually Abused Children in Malaysia" at the international *Family Health Conference: Women and Health* on 5-7 May at the Bangi-Putrajaya Hotel. I presented another paper entitled "Islamic Spiritual Hypnotherapy for Sexually Abused Children" at the *International Family Therapy Association (IFTA) World Family Therapy Congress Changing Traditional and Systemic Therapy: Dangers and Opportunities for Families* held at JW Marriot Kuala Lumpur on 11-14 March 2015. I also participated in the *Inaugural Malaysian Conference on Clinical Hypnotherapy* on 22-23 May 2015 to become more acquainted with clinical hypnotherapy in Malaysia. All these had helped me develop my networking and confidence in this field. Among the conferences I cherish the most is the *Muslim Mental Health Conference* which took place in Clare College, Cambridge, UK in September 2019. This event gave me the opportunity to get to know my supervisor better, both as an academic and as a travel companion. I took this

opportunity to present my PhD research on Islamic Spiritual Hypnotherapy (SPHIA model). The exposure to these conferences had improved my confidence and inspired me to do more research. Conferences also entail experiencing different places, meeting different people, and having some fun.

Thank you Mr. Ahmad Faqih Bin Ibrahim for the ideas, suggestions and valuable inputs during our discussion about the development of the SPHIA model at the Ambassador Row Hotel, Kuala Lumpur on 20-23 January 2016. Thank you Professor Dr. Siti Aishah Binti Hassan for arranging the meetings for my research and giving me new hope in developing the SPHIA model, as well as for accompanying me in meeting the Islamic Jurist from Islamic Authorities of Federal Territory to validate the SPHIA scripts on 8 January 2017. I can never thank Professor Dr. Siti Aishah enough for all she has done for me. From the bottom of my heart, “Thank You, Professor Dr. Siti Aishah!”. Finally, many thanks to the committee members Professor Dr. Sidek Mohd Noah and Professor Dr. Abd. Lateef Steven Krauss for their intellectual comments, suggestions, and feedbacks on my research. You have all been an integral part of this journey.

I am also thankful to all the amazing people who had accompanied me throughout this journey, especially Emeritus Professor Dr. Azimi Bin Hamzah who is truly a ‘great’ professor. His office door was always open whenever I needed his advice, and he had helped me overcome what seemed like hopeless impediments. He was always ready to listen and guide me so that I will excel. I will strive to become as kind and helpful as he is in life and “pay forward” to others.

Islamic Hypnotherapy was still a totally new field of research back in 2015, with no existing literatures as reference. I therefore attempted to seek sources from our neighbouring country, Indonesia. *Alhamdulillah*, praised be to Allah SWT, I managed to obtain sponsorship from *Pusat Pengurusan Wakaf Zakat dan Endowmen (WAZAN)* Universiti Putra Malaysia. Thank you Ustaz Zuhaimi Bin Abdul Rahim from WAZAN who approved my application and gave me the opportunity to attend the Erickson Cooperative Hypnotherapy Workshop on 27-29 October 2015 held at Garut, Indonesia, and the *International Conference on Child and Adolescent Mental Health* held at the Syarif Hidayatullah State Islamic University on 5 November 2015 in Jakarta, Indonesia. I learned many new skills from Dr. Asep Haerul Gani, a very kind Indonesian psychologist, who is also an Ericksonian hypnotherapy practitioner. He was always active and helpful in obtaining the resources I needed for my research. My sincere thanks go out to Dr. Asep Haerul Gani and his spouse Mdm. Ai for the amazing food and hospitality. I enjoyed every single moment of my 5-day stay (31 October – 4 November 2015) at your house ‘*Bujangga Manik*’, Tasik Malaya. Thank you! Also, to my fellow Indonesian friends, Mdm. Alia Nur Mutmainah and family, Mdm. Dian Anggrainy, Mr. Teguh Budie, Mr. Nara Setya Wiratama, Mr. Nurhariri and Mr. Fadli Nur Haq who attended the workshop with me, as well as Mr. Asmadi Bin Bakar from Malaysia, thank you for your kind support, concern, encouragement and genuine care during my pregnancy at the time.

My first journal article on Spiritual Hypnotherapy with Islamic Approach (SPHIA) was published in 2018. Special thanks to Dr. Zaida Nor Binti Zainuddin, who guided me in the writing process and publication of my research. Following the publication of the article entitled “Unveiling Experiences through Feeling in Undergoing Spiritual Hypnotherapy with Islamic Approach (SPHIA) for Female Children Victim of Incest” in the International Journal of Academic Research in Business and Social Sciences, researchers in Indonesia began studying Islamic hypnotherapy in 2020. In short, this article had contributed to expanding the research on Islamic Hypnotherapy. My second unpublished manuscript entitled “A Spiritual Hypnotherapy Model for Exploring Experiences of Abusive Situation among Incest Children” has been reviewed and accepted by the International Journal of Education, Psychology and Counselling in 2020.

I would also like to express my sincere gratitude to Professor Dr. Ismi Arif Bin Ismail, Associate Professor Dr. Noor Syamilah Zakaria and Dr. Hj. Norazura Binti Hj. Ahmad for their guidance in my qualitative research. Without their help in developing my methodology, this would all have been a futile attempt. Thank you for the emotional support, positive encouragement and warm spirit you extended to me. This appreciation goes out to Dr. Titi Rahmawati binti Hamedon as well. Special thanks to Dr. Ali Ahmad and Mdm. Hanadibah whose spent endless hours proofreading my research papers and giving me excellent suggestions, which resulted in improved versions of my documents. Thank you so much!

My sincere thanks also goes out to my lovely friends Dato’ Dr. Ghazali Bin Mat Nor, Dr. Jacques Lazar, Dr. Sri Rao Siva, Dr. Ainul Adzellie Bin Hj. Hasnul, Ms. Stella Chye Wong Chang, and Mdm. Nor Shahniza Binti Shahbudin for all the support and continuous encouragement and genuine care throughout this journey. And especially for Mdm. Shahniza, I wish you all the best in your PhD journey too. Many thanks to Mr. Muhammad Radhi Bin Amir, Mdm. Harisa Binti Hawafi, and Ms. Raihatul Hani Binti Raihan who had helped me in grammar checking, and gave me ideas for the slide presentations for the conferences. To all my comrades in my PhD journey, Associate Professor Dr. Mohd Izwan Mahmud, Dr. Tanny Fasugba-Idowu, Dr. Soudbeh Ghoroghi, Dr. Neda Deylami, Dr. Mohd Aliff Abdul Majid, Dr. Santhosh Samanthar, Mdm. Aida Hafifah Mohd Tahir (doctorate soon), I just want to say: “Thank you! Finally, I did it!”

For the administration staff of the Faculty of Educational Studies, UPM especially Mr. Mohd Eri Bin Mohd Noor and Ms. Siti Noor Ain Binti Ibrahim, and the Staff of the Thesis Unit, School of Graduate Studies, Mdm. Maizatul Afzan Binti Tajul Ariffin and Ms. Siti Nurhasni Binti Ramli. Thank you for everything you have done for me. I appreciate your professionalism, dedication, compassion, and commitment to your profession! Thank you for your services!

At the end of my PhD, this thesis was examined by Professor Dr. Ahmad Fauzi Bin Mohd Ayub, Associate Professor Dr. Noor Syamilah Zakaria, and Associate Professor Dr. Adlina Binti Ab. Halim. I would like to thank them for the many suggestions for

improving this manuscript. Thank you to my examiners who advised me to remain 'CEKAL'. All the sacrifice has paid off with the successful completion of this thesis.

I would love to dedicate this research to my parents, my husband and children for their love and support. As a mother, I don't get to spend much time with my children, but I'm lucky that I have a supportive family which is essential in this line of work. To my beloved eldest son Ikmal Haiy Eddin Bin Ismail, I appreciate everything you've done for me and for being such a good boy, always cheering me up. Thank you to my current boss, Mdm. Ernie Masnita Binti A Hamid and my staff Mdm. Siti Nor Aini Binti Ab Mutalib, Ms. Siti Nuratiqah Binti Selamat, Mdm. Latifah Binti Ramzi, Mdm. Azrina Binti Talib and Mr. Khairol Azwan Bin Arba for your understanding, patience and support.

Last but not least, thank you to all the study participants especially those in the pilot studies. Without your active participation and input, this dissertation would not have been successfully completed. Thank you everyone for being a part of my journey. This experience has been extremely valuable for me and I will treasure it for the rest of my life. Most of all, I hope my PhD story is one that can inspire you to overcome your PhD difficulties. Never give up on yourself, and believe that you can push through adversity and get to the finish line. I hope my sharing will inspire some of you to pursue a PhD or give you the energy to push through even when the motivation to continue seems to falter. ☺

This thesis was submitted to the Senate of Universiti Putra Malaysia and has been accepted as fulfilment of the requirement for the degree of Doctor of Philosophy. The members of the Supervisory Committee were as follows:

Siti Aishah Binti Hassan, PhD

Professor
Faculty of Educational Studies
Universiti Putra Malaysia
(Chairman)

Abdul Lateef Abdullah @ Steven Eric Krauss, PhD

Professor
Faculty of Educational Studies
Universiti Putra Malaysia
(Member)

Sidek Bin Mohd Noah, PhD

Professor
Faculty of Educational Studies
Universiti Putra Malaysia
(Member)

ZALILAH MOHD SHARIFF, PhD

Professor and Dean
School of Graduate Studies
Universiti Putra Malaysia

Date: 9 March 2023

Declaration by the Graduate Student

I hereby confirm that:

- this thesis is my original work;
- quotations, illustrations and citations have been duly referenced;
- this thesis has not been submitted previously or concurrently for any other degree at any other institutions;
- intellectual property from the thesis and copyright of thesis are fully-owned by Universiti Putra Malaysia, as according to the Universiti Putra Malaysia (Research) Rules 2012;
- written permission must be obtained from supervisor and the office of Deputy Vice-Chancellor (Research and Innovation) before thesis is published (in the form of written, printed or in electronic form) including books, journals, modules, proceedings, popular writings, seminar papers, manuscripts, posters, reports, lecture notes, learning modules or any other materials as stated in the University Putra Malaysia (Research) Rules 2012;
- there is no plagiarism or data falsification/fabrication in the thesis, and scholarly integrity is upheld as according to the Universiti Putra Malaysia (Graduate Studies) Rules 2003 (Revision 2015-2016) and the Universiti Putra Malaysia (Research) Rules 2012. The thesis has undergone plagiarism detection software.

Signature: _____ Date: 12 January 2023

Name and Matric No.: Sofiyah Low Siew Ping

TABLE OF CONTENTS

	Page
ABSTRACT	i
ABSTRAK	iii
ACKNOWLEDGEMENTS	v
APPROVAL	x
DECLARATION	xii
LIST OF TABLES	xvii
LIST OF FIGURES	xviii
LIST OF ABBREVIATIONS	xix
CHAPTER	
1 INTRODUCTION	1
1.1 Overview	1
1.2 Background of the Study	1
1.3 Statement of the Problem	4
1.4 Objective of the Study	10
1.5 Research Questions	10
1.6 Significance of the Study	10
1.7 Research Scope and Limitations	12
1.8 Definitions of Terms	13
1.8.1 Child	13
1.8.2 Child Sexual Abuse (CSA)	13
1.8.3 CSA in Child Act 2001, Malaysia	13
1.8.4 Incest - Intra Familial Sexual Abuse	14
1.8.5 Hypnosis	14
1.8.6 Hypnotherapy	14
1.8.7 Suggestions	15
1.8.8 Self-Hypnosis	15
1.8.9 Spiritual	16
1.8.10 Spiritual Hypnosis	16
1.8.11 Islamic	16
1.9 Summary	16
2 LITERATURE REVIEW	17
2.1 Overview	17
2.2 Sexual Abuse	17
2.3 Incest - Intra Familiar Sexual Abuse	18
2.4 Child Protection	19
2.5 Psychoanalysis Theory	20
2.5.1 Understanding the Conscious and Subconscious Mind	21
2.5.2 Phases of Consciousness	23
2.5.3 Hypnotisability	25
2.6 Spirituality	29
2.6.1 Islamic Psycho-Spiritual Approach	30

2.6.2	Spirituality in Children	35
2.6.3	Spiritual Hypnotherapy	40
2.6.4	Islamic Hypnotherapy	41
2.7	Summary	44
3	METHODOLOGY	45
3.1	Overview	45
3.2	Research Design	45
3.3	The Phenomenological Approach	46
3.4	Research Procedure	48
3.5	Selection of Participants	50
3.6	Data Collection	52
3.7	Pilot Study	55
3.8	Data Analysis	58
3.8.1	Data Organization	59
3.8.2	Translation of Data	60
3.9	Trustworthiness and Authenticity	60
3.10	Potential Biases	62
3.11	Summary	62
4	FINDINGS	63
4.1	Overview	63
4.2	Profile of the Participants	63
4.3	Research Question 1	66
4.3.1	Procedures of SPHIA Model	66
	i) Building Rapport	67
	ii) Semi-Structured Interview and Questionnaire	67
	iii) Exploring the Spirituality of the Participants	67
	iv) Education Sessions about Hypnotherapy	68
	v) Spiritual Hypnotherapy Session	68
	a) SPHIA with Script One	71
	b) SPHIA with Script Two	73
	vi) In-depth Interview	74
	a) Experiencing SPHIA Script One Session	74
	b) Experiencing SPHIA Script Two Session	74
4.4	Research Question 2	74
4.4.1	What did they experience through seeing?	75
	Theme: People	76
	Theme: The Comforting Scenery	81
	Theme: Projected Objectives of their Future	88
4.4.2	What did they experience through listening?	91
	Theme: Listening to the Anchoring	91
	Theme: Making Wishes to Allah	93
	Theme: Conversation with Religious Idol	96
4.4.3	What did they experience through feeling?	98
	Theme: The Conscious Feeling of Being Hypnotized	100
	Theme: The Feelings of Being Highly Charged Emotionally	106
	Theme: The Feeling of Transcendence	115

4.5	Summary	121
5	DISCUSSIONS	122
5.1	Overview	122
5.2	Research Question 1	122
5.3	Research Question 2	129
5.3.1	What did they experience through seeing?	131
	Theme Seeing in Hypnotic Experiences: Projected Objectives of their Future	131
	Theme Seeing in Spiritual Experiences: People	132
	Theme Seeing in Spiritual Experiences: The Comforting Scenery	135
5.3.2	What did they experience through listening?	138
	Theme Listening in Hypnotic Experiences: Listening to the Anchoring	138
	Theme Listening in Religious Experiences: Making Wishes to Allah	139
	Theme Listening in Religious Experiences: Conversation with Religious Idol	140
5.3.3	What did they experience through feeling?	142
	Theme Feeling in Hypnotic Experiences: The Conscious Feeling of Being Hypnotized	142
	Theme Feeling in Hypnotic Experiences: The Feelings of Being Highly Charged Emotionally	144
	Theme Feeling in Religious Experiences: The Feeling of Transcendence	147
5.4	Summary	150
6	SUMMARY, CONCLUSIONS, IMPLICATIONS AND RECOMMENDATIONS	151
6.1	Overview	151
6.2	Conclusions	151
6.3	Implications	154
6.4	Methodological Contribution	155
6.5	Recommendations for Future Research	155
	REFERENCES	157
	APPENDICES	173
	BIODATA OF STUDENT	226
	LIST OF PUBLICATIONS	227

LIST OF TABLES

Table		Page
2.1	Why Children Respond More to Hypnosis than Adults	26
2.2	Developmental Phases and Hypnotic Interventions	28
4.1	Factors of Child Sexual Abuse	65
4.2	Factors of Disclosure	66
4.3	Process of SPHIA with Script One and Script Two in the Treatment of Incest Victims among Female Children: Commonplace Hypnotherapeutic Steps	69
4.4	Theme 'Seeing' During the Hypnosis Phase of the Study	75
4.5	Theme 'Listening' During the Hypnosis Phase of the Study	91
4.6	Theme 'Feeling' During the Hypnosis Phase of the Study	99
5.1	The Findings of Experiences Through Seeing, Listening and Feeling	130

LIST OF FIGURES

Figure		Page
2.1	Conscious Mind and Subconscious Mind	22
2.2	Phases of Consciousness	24
2.3	Circular Causality of Effects Among the Elements of the Human Being	31
2.4	Seven Spiritual Identities	36
2.5	Theoretical Framework of the SPHIA Model	44
3.1	Flow Chart of Study Implementation	49
5.1	Basic Hypnotherapy Sessions Overview	123
5.2	The Iceberg Model of Islamic Psychotherapy	127

LIST OF ABBREVIATIONS

ASD	Autism Spectrum Disorder
CBT	Cognitive Behavioural Therapy
CSA	Child Sexual Abuse
D11	Sexual, Women and Child Investigation Division
FSSH	Faculty of Sosial Science and Humanities
HKL	Kuala Lumpur Hospital
IMH	Islamic Modern Hypnotherapy
JAIN	<i>Jabatan Agama Islam Negeri</i>
JAKIM	The Malaysian Islamic Development Department
KSK	<i>Pusat Khidmat Keluarga, Sosial and Komuniti</i>
LPPKN	The National Population and Family Development Board
MTMZA	Tunku Mizan Zainal Abidin Mosque's
<i>Nvivo 12 Plus</i>	Qualitative Data Analysis Software
OSCC	One Stop Crisis Centre
PTSD	Post-Traumatic Stress Disorder
RKK	<i>Rumah Kanak-kanak (Children Homes)</i>
RQ	Research Questions
SAW	<i>Sallallahou Alayhe Wasallam</i>
SHCSC	Stanford Hypnotic Clinical Scale for Children
SCAN	Suspected Child Abuse and Neglect
SHAT	Spiritual Hypnosis Assisted Therapy
SHSS	The Stanford Hypnotic Susceptibility Scale
SPHIA	Spiritual Hypnotherapy with Islamic Approach
UPM	Universiti Putra Malaysia

UTM

Universiti Teknologi Malaysia

WHO

World Health Organization



© COPYRIGHT UPM

CHAPTER 1

INTRODUCTION

1.1 Overview

This chapter presents the background of the study, statement of the problem, objective of the study, research questions, significance of the study, and definitions of terms.

1.2 Background of the Study

Child abuse is not merely a phenomenon, but rather an all-inclusive disorder (Battiss, 1989). Apart from physical abuse, it also involves sexual abuse, enthusiastic abuse, and overall neglect which happens regardless of ethnicity, social group, religion and education level (Abas & Ibrahim, 2012; Piasecki, Manson, Biernoff, Hiat, Taylor & Bechtold, 1989). Child Sexual Abuse (CSA) was only recognized after 1970, and the expression "child" is utilized for someone aged under 18 years old (Wahab, Tan, Marimuthu, Razali & Muhamad, 2013). A child is deemed to be sexually abused in the event that he/she has partaken, whether as a participant or a spectator, in any act deemed as a sexual offence. This includes indecent exposure, child prepping, and rape.

When the victim is below the age of 18, charges can be brought against the perpetrator under the Malaysian Law, Sexual Offences Against Children Act 2017 (Laws of Malaysia, 2017). Act 792 adequately ensures that the victims are protected from abuse and provides greater authority to social workers in the Welfare Department as they are incorporated as a child defender under this new law.

Sexual abuse can occur in familial and additional familial settings. When it occurs in an intra-familial setting, it is considered incest. Incest is sexual interactions between immediate family members or close relatives (Battiss, 2004). In legal definition, the term incest applies to vaginal intercourse, between a male and a female who is the former's daughter, stepdaughter, sister or mother. Incest occurs regardless of social status, socio-economic status, ethnicity, or class boundaries. It can happen in urban or rural areas.

Children who are sexually abused have critical emotional, psychological, physical, and behavioural problems (Shaw, Lewis, Loeb, Rosado, & Rodriguez, 2000). Eating disorders, sexual disorders, addictions, dejection, uneasiness, fear, regressive behaviours and bad dreams are basic manifestations of the effects of sexual abuse (Darken, 1992; Kendall-Tackett, Williams, & Finkelhor, 1993). Incest victims have been indicated to experience greater trauma than other victims of sexual abuse cases (Obineli, 2013).

Intra-familial abuse (incest) typically happens over an extended period; children who are victims of incest are caught in a vicious cycle of abuse, which ultimately disempowers them. They thus require interventions that would help ease the trauma and heal them, and eventually enable them to lead a relatively normal life. Most, if not all the young victims create a negative self-image (Courtois, 1997). Incest victims generally recount their experience as painful recollections, flashbacks, and recurring nightmares (Beveridge & Cheung, 2004).

The younger the child when the trauma happened, the more prominent the impact will be (Poon, 2009). As such, it is vital to give them the appropriate therapy to address the host of disorders they are experiencing as a result of such ordeal (Fourie & Guse, 2011). Without clinical mediation, abused children may grow up carrying deep-rooted traumas, exhibited as poor behavioural control, hyper-activeness, sexual-related issues and other mental disorders (Poon, 2007).

Knowledge on child sexual abuse in Malaysia is still at its infancy as compared to other developed nations. In the Malaysian setting, only 13 cases of child sexual abuse had been thoroughly surveyed and studied (i.e., Wahab et al., 2013; Othman & Wan Yahaya, 2012; Chan, Tan, Ang, Kamal Nor & Sharip, 2012; Noh & Talaat, 2012; Weatherley, Siti Hajar, Noralina, John, Preusser & Yong, 2012; Sumari & Chen, 2012; Lukman, 2009; Nor Shafrin & Rohany, 2009; Dunne, Chen, & Choo, 2008; Singh, Yiing & Nurani, 1996; Kassim & Kasim, 1995). In light of the above, more consideration is needed into this subject.

There have been a considerable number of therapeutic techniques proposed in past studies for sexually abused children. Among them are *Family Therapy* (Blumer, Papaj, & Erolin, 2013; Gorham, 1997), *Group Therapy* (Kruczek & Vitanza, 1999; Westbury & Tutty, 1999; Avinger & Jones, 2007; Kessler, White, & Nelson, 2003; Palimere, 2011), *Forgiveness Intervention* (Freedman & Enright, 1996; Schibik, 2008), *Music Therapy* (Strehlow, 2009), *Art Therapy* (Haywood, 2012), *Counselling* (Draucker, 1992; Obineli, 2013), *Cognitive Behavioural Therapy (CBT)* (Misurell, Springer, & Hiller, 2012), *Spiritual Healing* (Sumari & Chen, 2012; Wright, 2003; Lesmana, Suryani, Jensen, & Tiliopoulos, 2009; Lewis, 2004; O'Rourke, 2010; Beveridge & Cheung, 2004), and *Hypnotherapy* (Poon, 2009; Battiss, 2004; Battiss, 1989; Darken, 1992; Spiegel, 1989; Degun-Mather, 2006; Fourie & Guse, 2011; Leask, 2012). Hypnosis has been widely utilized as a therapy approach for survivors of child sexual abuse (Fourie & Guse, 2011) and is significant in the psychotherapeutic therapy for CSA victims. Hypnosis is important in psychotherapeutic therapy as an instrument for alleviating physiological side effects, serving as an adjunctive therapy technique to help lessen the trauma of the CSA victims.

Hypnotherapy has been used on children and adolescents for the past 200 years. It has been actualized as a therapeutic technique even before the theoretical works of Freud (Leask, 2012). However, despite the prominence of this approach among researchers and experts, it has remained greatly underutilised by psychological experts. Kohen and Olness (2011) had investigated the success of hypnosis and hypnotherapy on children in many nations including Germany, Norway, Sweden, France, Britain, Thailand,

Indonesia, Canada, Australia, Italy, Saudi Arabia, and Turkey. The experts in these countries have contributed generous research related to the usage of hypnosis on children and adolescents. Hypnotherapeutic methodologies may be effectively utilized in settling the long-term outcomes of traumatic childhood experiences (Battiss, 1989).

In this current study, the researcher utilized mixed ideas of hypnotherapy and spirituality in addition to the Islamic healing. The focal point of this study is on the usage of Spiritual Hypnotherapy with Islamic Approach (SPHIA) on incest victims aged between 13 and 18 years old. This study can be a useful addition to the corpus in this field for governments, foundations, institutions, researchers, therapists, instructors, psychologists, doctors, psychiatrists, counsellors and psychologists to better understand the benefits of hypnosis therapy in facilitating the healing of sexually-abused children from an Islamic approach. Such children could grow up more cheerful and knowing how to utilize self-therapy to get relief from the horrendous side effects of their abuse.

This study will provide a manual for coordinating SPHIA especially for highly affected children. It also provides data with the goal of enabling experts to feel more capable and have more sensible expectations regarding what they can achieve in their work.

Spiritual hypnotherapy is one of the specific therapy techniques in hypnosis with an additional spiritual component. Spiritual interpretation is recommended during hypnotic trance, and the reframing of manifestations to underline their spiritual significance. Reframing must be as per the victim's conviction framework with the specific end goal to be acknowledged, and for change to happen (Lesmana et al., 2009).

In Western nations, there are various studies about therapy of hypnosis with adult survivors of CSA (e.g., Fourie & Guse, 2011; Degun-Mather, 2006; Battiss, 2004; Darken, 1992; Battiss, 1989; Spiegel, 1989). Battiss (2004) studied the healing experience of adult survivors of childhood sexual abuse working with spiritual concepts in hypnotherapy. Meanwhile, Battiss (1989) integrated spiritual concepts into the hypnotherapeutic therapy approach utilized on adult survivors of childhood sexual abuse.

There are no archived studies on the utilization of hypnotherapy for sexually abused children, teenagers and adults in Malaysia. There are also no Malaysian experts i.e. psychotherapists, researchers, clinical therapists or advocates who had utilized hypnosis as a therapy for CSA victims. In past studies, the component of spirituality had been frequently revealed as one of the key imperative healing components for helping female survivors in their recuperation (Walker, 2007; Valentine & Feinauer, 1993; Bogar & Hulse-Killacky, 2006).

Sumari and Chen (2012) studied the healing experience of Malaysian female survivors of child sexual abuse through spirituality, but not via the Islamic approach. They recommended for future research to find an intervention structure for data and analysis to help female survivors heal from their child sexual abuse experience through

spirituality. One such study was conducted by Lesmana et al. (2009) following the Bali terrorist attack in 2002. The case participants were Hindu Balinese children from Bali, Indonesia.

In general, spiritual hypnosis has not been widely utilized and very little is known about it in Malaysia. None of the studies on hypnosis healing for sexually abused children in Malaysia had focused on the Islamic approach. Consequently, this current study aims to investigate the experience of victims of child sexual abuse, and to propose the usage of spiritual hypnotherapy with the Islamic approach for their healing. The lack of research in this field has limited our ability to understand the benefits of hypnotherapy for sexually abused children in Malaysia. The uninformed include the researchers, counsellors, doctors, psychologists, therapists, and experts in this field of knowledge. The discoveries are critical in giving new learning inputs with respect to the specific components of Islamic spirituality. The findings of this study will tend to the current loopholes in the field of knowledge, especially in the spiritual perspective of hypnotherapy via the Islamic approach.

1.3 Statement of the Problem

Sexual abuse is a critical problem in Malaysia (Cheah & Choo, 2016; Royal Malaysia Police, 2017; Jayapalan, Wong & Aghamohammadi, 2018). Statistics sourced from the Sexual and Child Study Division (D11), Criminal Study Department, Royal Malaysia Police (PDRM) showed that many children in Malaysia have been suspected to be victims of child abuse and neglect; instances of child sexual abuse were the most common form compared to other types of abuses (Appendix M).

Child sexual abuse can result in both short and long-term effects, and may induce psychopathology later in the victims' life. Sexual abuse has numerous impacts including blame and self-fault, flashbacks, bad dreams, rest aggravations, dietary disorders, sleep deprivation, phobias to things related with the abuse (including objects, smells, places, doctor's visit, and so on), poor self-esteem issues, sexual frigidity, chronic pain, unhealthy habits, self-injury, suicidal ideation, substantial protests, dissociative tendencies, Post-Traumatic Stress Disorder (PTSD), nervousness, depression, other psychological sicknesses, penchant to re-exploitation in adulthood, and physical injury to the child.

Ashby and Kaul (2016) reported that Post-Traumatic Stress Disorder (PTSD) after sexual abuse is a widespread occurrence that can affect the adolescent children's physical and emotional well-being including behavioural problems, post-traumatic stress and dissociation symptoms (Hebert, Langevin & Oussaid, 2018) as well as emotional dysregulation. Victims of child sex abuse are more than six times more prone to suicide and eight times more prone to repetitive suicide attempts. The abusers themselves are likewise more prone to commit suicide. A great part of the injury caused to the victims will only surface years after the abuse had happened (Obineli, 2013).

Sexual abuse by a relative is extremely traumatizing and brings more pronounced long term mental trauma, specifically on the narrative of parental incest (Obineli, 2013; Frieze, Newhill & Fusco, 2020). The victims commonly re-live their traumas as memories, flashbacks, recurrent and disturbing dreams, distressing thoughts, hallucinations and illusions (Auringer, 2010; Beveridge & Cheung, 2004; Diclemente & Ricks, 2015).

Without any clinical intervention, sexually-abused children may grow up suffering from long lasting physical and mental trauma-related symptoms (Sawrikar & Katz, 2017). The victims' feeling as they relive the traumatic event and the considerable amount of research validate the importance of studying sexual abuse among children. There are limited healing interventions for CSA children conducted by counsellors in Malaysia, especially in psychotherapy, based on the survey carried out by the researcher with counsellors in children's homes and D11, PDRM who work closely with sexually-abused children. Most of them use art therapy, sand therapy, play therapy, and OH card for expressive therapy and not for healing. In conclusion, healing intervention for CSA children is limited in Malaysia, especially in psychotherapy.

In Malaysia, despite the rising statistics of child sexual abuse cases, not many studies on the matter had been initiated thus causing a general lack of awareness and misperception on the subject. Research in the field of child sexual abuse is inadequate in Malaysia (Wahab et al., 2013). CSA research in Malaysia is still new and the CSA points have not been completely investigated by researchers (Nen, 2010). There are very few studies by Malaysian researchers on the subject (Nor Shafrin & Rohany, 2009; Lukman, 2009; Choo, Dunne, Marret, Fleming & Wong, 2011; Nor Shafrin, 2007; Singh et al., 1996; Kassim & Kassim, 1995; Dunne et al., 2008).

Out of the seven studies conducted by Malaysian researchers, only one study focused on adult survivors and utilized an overview philosophy (i.e. Singh et al., 1996), while another study focused on Chinese views of child abuse (i.e. Dunne et al., 2008). The other five studies all focused on child survivors. The advancement of knowledge on child sexual abuse in Malaysia is still at a very early phase in comparison to other developed nations. In this study, the researcher would like to add to, and expand, the second and third phases of the studies on child sexual abuse. There is another distinct pattern in the studies of child sexual abuse, which is the huge absence of focus on the views of female survivors of child sexual abuse in Malaysia and other developed nations. Out of the seven studies conducted in the Malaysian setting, only one report was on adult survivors utilizing the review approach (i.e. Singh et al., 1996), and even this was not sufficiently comprehensive from the survivors' point of view.

Hypnosis is one of the most successful clinical apparatus in psychotherapy that has been observed to be extremely valuable in treating complex trauma. (Poon, 2009). Children are more easily hypnotized than adults (Huynh, Vandvik, & Diseth, 2008; Rogovik & Goldman, 2007; Saadat & Kain, 2007). Unlike adults, children are not loaded with psychological generalizations, and their limitations of creative ability and dealings with the truth are less rewarding. Hypnotic ability in children is constrained to those below three years of age, accelerates at five to six years of age, and peaks at 7 to

14 years of age (Rogovik & Goldman, 2007). Hypnotherapy as a technique reacts to the general formative needs of children by tending to their ability to dream and be creative. Studies have indicated the success of clinical hypnosis and self-hypnosis as a form of treatment for traumatized children (Rogovik & Goldman, 2007). Hypnotherapy and self-hypnosis have been identified as instruments with which to evaluate and create defensive factors, and upgrade positive modification (Huynh et al., 2008).

Several studies had systematically documented the survivors of child sexual abuse who had undergone hypnotherapy since 1989 (Battiss, 1989; Darken, 1992; Battiss, 2004; Poon, 2007; Bonney, 2016), but none of them were carried out in Malaysia. Based on the literature review, there are only three studies by Malaysian researchers on the topic of healing sexually-abused children i.e. healing through spirituality (Sumari & Chen, 2012), healing by traditional faith (Chan et al., 2012), and healing through narrative therapy (Maarof, Hashim, Yusof, Mydin, 2012). None of the research had focused on hypnosis healing. Therefore, it limited our findings and led to difficulties in data collection about the therapy.

The first records of clinical hypnosis in Malaysia dates back to the 1960s when early researchers used clinical hypnosis in surgical techniques. Six papers were published in the Malaysia Medical Journal entailing those by Mun (1964a), Mun (1964b), Mun (1964c), Mun (1966a), Mun (1966b) and Patrick (1963). Since 2016, hypnosis has been gaining popularity in the medical field in Malaysia. Hypnosis for intervention had been used during labor and pre-surgical procedures in private hospitals as well as psychiatric and psychology faculties in local universities (Beevi, Low & Hassan, 2016; Beevi, Low & Hassan, 2017; Chandrasegaran, 2018; Beevi, Low & Hassan, 2019; Lee, Zubaidah, Fadhilah, Normala & Jensen, 2019; Bhagat & Menon, 2020). However, no Malaysian experts working with CSA victims had utilized hypnosis as a therapy despite its recognition as a successful tool for treating trauma. The lack of research on this subject has confined our ability to gather the needed data on the usage of hypnosis for treating sexually-abused children in Malaysia.

Spiritual hypnosis has not gained much research attention in Malaysia. The current study expands on the existing literature by Lesmana et al. (2009). Spiritual hypnosis is one of the most specialized therapy techniques in hypnosis with the addition of spiritual components i.e. spiritual interpretation proposed during the hypnotic trance, and the reframing of side effects to accentuate their spiritual meaning. Reframing works best along with the victim's conviction framework for it to be acknowledged and for a change to occur (Lesmana et al., 2009). Spiritual imagery assists the patients in dealing with extreme enthusiastic responses triggered by recollections of the abuse. Battiss (1989) stated that spiritual imagery bolsters the patients both physically and emotionally, while providing them spiritual 'support' during the recovery period. By feeling spiritually uplifted, the patients feel less intimidated to stand up against their perpetrators during the hypnosis.

The WHO has acknowledged hypnotherapy as a type of psychotherapy (Ruslan, 2017). According to Brammer (2004), Muslim and mainstream therapists should combine spiritual and religious practices with western methods to create psycho-spiritual

counselling approaches that would encourage clients to make positive changes in their lives. The current researcher discovered that numerous spiritual/religious interventions have been incorporated in a variety of psychotherapy interventions while working on the updated literature evaluation, which covers the year 2015 onwards. Islamically Integrated Psychotherapy is a book written by Al-Karam that was published in 2018. According to Ching (2017), hypnosis is one of the counselling techniques that can improve the patient's spiritual encounters. The development of spirituality in hypnotherapy can re-organise and re-interpret the participants' mental images as they appear in the unconscious mind, in a way that will effectively aid in their healing throughout the psychotherapeutic process. In order to deal with family issues, Mushoffa & Wahidin (2019) examined the ruqyah, hypnosis, and spiritual approaches. All the techniques lead to Islamic strategies based on the Qur'an for resolving family issues. Physicians will consider approaches that are relevant and suitable to patient complaints. But this can also be achieved by combining all three methods at once.

While other religions are practiced in peace and concord, Islam is Malaysia's official religion and is constitutionally assumed to be the faith of all ethnic Malay people, i.e., one of the major ethnic groups in the country. In Malaysia, no studies on the application of Islamic spiritual hypnosis for healing sexually-abused children have ever been done or reported. This study had initially surveyed numerous hypnosis professionals in Malaysia and Indonesia to find about about the typical methods, models, and tactics of Islamic Spiritual Hypnosis; however, neither had yet produced an established model. Given that all of the participants in this study are Muslims and living in children's homes run by the Social Welfare Department of Malaysia, the researcher decided to concentrate on child victims of incest using the SPHIA method. The SPHIA model is a mix of hypnotherapy and spirituality approaches, on top of Islamic healing formulated as a form of therapy. The preceding research questions and objectives serve as the study's guidelines.

The first Muslim scholar to adopt psychotherapy based on the fusion of psychological techniques and justifications was Mohammad Zakariyya al-Razi (854–925). He purposefully provoked the caliph using the psychotherapy technique to heal him. Using observations performed on his patients, he described many mental illnesses in his various books on the subject (Mohamed, 2008).

Abu 'Ali al-Husayn ibn Sina (980–1037), another well-known Muslim philosopher who made contributions to psychotherapy, was renowned for his physiological psychology approach for treating emotional-based illnesses. He created a method which connects variations in heart rate with internal emotions, later recognised as an indication of Jung's word-association test. By checking the patient's pulse and loudly reciting the names of provinces, districts, towns, streets, and people, he managed to treat a critically ill patient (Moahmed, 2008).

The Muslim doctor, psychologist, and scientist Abu Zayd Ahmed ibn Sahl Balkhi (850–934) had distinguished between neuroses and psychoses. He described neurotic diseases and provided specifics on how patients can be treated using logical and spiritual cognitive therapies in light of the disorders he diagnosed.

He categorised emotional problems into four categories: obsession, anger and aggressiveness, sadness and depression, and fear and anxiety. He further highlighted that physical and psychological illnesses may interact to generate psychosomatic disorders (Haque, 2004). According to him, in addition to keeping certain medications and First Aid supplies on hand for unforeseen physical emergencies, a healthy person should also keep positive thoughts and emotions to prevent emotional eruptions.

Al-Balkhi claimed that health results from a balanced mind and body, whereas illness results from an imbalance thereof. He also stated that one's body is treated using opposite and reciprocal methods depending on the imbalance, such as fever-cold surface and chill-heat (Haque, 2004).

Theologian, psychologist, and mystic Abu Hamid Muhammad ibn Muhammad al-Ghazali (1058–1111) divided illnesses into two groups: bodily illnesses and spiritual illnesses. He asserted that the most harmful spiritual sickness is ignorance and departure from God. Selfishness, addiction to money, fame, and social position, ignorance, cowardice, cruelty, desire, doubt, malevolence, falsehood, envy, dishonesty, and greed are a few examples of spiritual disorders. He recommended employing therapy of opposites, such as ignorance and learning or hate and love, to treat these ailments. According to him, being close to God is the state of being normal, whereas being far from God results in abnormality (Sudan, 2017).

Griner and Smith (2006) conducted a meta-analysis of 76 researches and found that culturally-appropriate therapies are more successful than conventional interventions, and that native language interventions are twice as successful. Similar to this, Smith, Domenech Rodriguez, and Bernal's (2011) meta-analysis of 65 researchers found that the efficacy of the treatment grows as the number of cultural adaption components increase. Additionally, adaptations work better when they are directed at a particular ethnic group instead of those from a variety of cultural backgrounds. Hence, the researcher employed therapy techniques that are in line with religious and cultural norms in order for them to be effective when applied on Muslim patients.

Following the publication of the researcher's first journal article on Spiritual Hypnotherapy with Islamic Approach (SPHIA) (Ping, Hassan, Noah, Krauss & Zainudin, 2018), researchers in Indonesia began studying Islamic hypnotherapy in 2020. In their 2020 study, Winarsih, & Rohmadani examined the efficacy of Islamic hypnotherapy in helping parents of children with Autism Spectrum Disorder (ASD) to get over their anxiety, and demonstrated that Islamic hypnotherapy can reduce stress as it induces positive ideas and enables the release of emotions. Meanwhile, Rohmadani & Subarjo (2022) tested the efficacy of Islamic hypnotherapy and anchor techniques in lessening the desire to smoke among adolescents. Their data revealed the effectiveness of Islamic hypnotherapy in reducing the desire to smoke, but proved otherwise for anchor hypnotherapy. The Covid-19 pandemic study by Rohmadani & Khoiryasdien (2022) demonstrated that Islamic hypnotherapy can reduce stress in adolescents. In order to examine Islamic Modern Hypnotherapy (IMH) as a substitute technique for quickening the investigation of corruption cases in Indonesia, Badruzaman (2019) reviewed both the Islamic and scientific perspectives. According to

the findings, prayers that are honest, hopeful, and performed with the correct perspective pose a healing effect on the investigation of corruption, which is less expensive, more effective, and more efficient than the conventional way.

Clinical and observational studies have long shown that sexually-abused children suffer greatly after their abuse (Nen, 2010). Most of the victims go through long-term emotional trauma and stress as grown-ups (Fourie & Guse, 2011). The importance of spirituality has been acknowledged in many resilience research. The trend towards life-span therapy models is a result of a dearth of qualitative and phenomenological works that examine real life accounts to shed light on the reality of the recovered victim (Walker, 2007). Since many of our patients come from diverse ethnic, religious, and spiritual backgrounds (Muslims or Christians) with different religious or spiritual ideologies and perspectives, all psychotherapists, psychiatrists, and counsellors should be more sincere when integrating religious therapy into their counselling and psychotherapy sessions (Sulaiman & Gabadeen, 2013). According to Sulaiman and Gabadeen (2013), Muslim counsellors must be familiar with Islamic healing practices, the value of tawwakal, the healing potential of the blessed Qur'an, and Allah's mediations in order to effectively manage all crises. Examples of this include the KSKCareCenter, Malaysia's government policies (Sulaiman, 2018), and Islamic counselling centres in Yogyakarta, Indonesia.

A family, social, and community service center combining three (3) integrated services to aid people in resolving issues was established at Masjid Tuanku Mizan Zainal Abidin (MTMZA) by the Malaysian Islamic Development Department (JAKIM). It was officiated on 20 September 2018 by the Deputy Minister in the Prime Minister's Department (Religious Affairs), YB Hajjah Fuziah binti Salleh. The integrated services are Syarie Counseling, Islamic Psychospiritual Therapy, and Syarie Ilaj (Islamic Treatment), all offered under one roof for the general public. Rahmatan Lil' Alamin is the basic idea underlying the KSKCareCentre which is also accessible to non-Muslims. By implementing a theological strategy based on the Quran and Hadith, the KSKCareCentre also aims to support the Government in its efforts to address social issues faced by the Muslim community. The KSKCareCentre serves as a resource center that provides information, counselling, family guidance, and Islamic rehabilitation and treatment services for various social ills. The dakwah programme implemented by JAKIM and JAIN is supplemented by this long-term programme. Prof. Madya Dr. Siti Norlina Muhamad, a lecturer at the Islamic Civilization Academy's Faculty of Social Science and Humanities (FSSH) is in favour of JAKIM's plan to implement the KSKCareCentre programme across all states. She is also one of the facilitators as the MTMZA KSKCareCentre in Putrajaya. On 18 December 2019, Dr. Siti requested that JAKIM establish a branch at Universiti Teknologi Malaysia (UTM), to which JAKIM has agreed (Sulaiman, 2018).

Family issues can be resolved not only via the psychological approach, but also through the spiritual approach using ruqyah and hypnotherapy, as per the practice of one of the Islamic counselling facilities in Yogyakarta (Mushoffa & Wahidin, 2019). The end result will be a spiritual strategy involving prayer, dhikr, and istighfar. The Islamic counselling center in Yogyakarta employs three techniques—ruqyah, hypnotherapy, and spiritual methods—to address family issues. Physicians will

consider approaches that are relevant and suitable for the patient's issue. However, it is also possible to combine all three methods at once. The procedure takes a significant amount of time of at least two hours. Furthermore, it does not exclude either one of the approaches. The spiritual approach is the most significant nonetheless. The heart has particular abnormalities and the liver is where the ailment originates; thus, the liver needs to be treated using a spiritual technique (Mushoffa & Wahidin, 2019).

1.4 Objectives of the Study

1. To explore an appropriate Spiritual Hypnotherapy with Islamic Approach (SPHIA) procedure for participants who had experienced abusive situations.
2. To investigate the participants' experiences during Spiritual Hypnotherapy with Islamic Approach (SPHIA) procedure.

1.5 Research Questions

The research questions for this study are based on the interest of exploring the participants' experiences. This study aims to answer the following questions:

- RQ 1: How to perform an appropriate Spiritual Hypnotherapy with Islamic Approach (SPHIA) procedure for participants who had experienced abusive situations?
- RQ 2: What did the participants experience during the Spiritual Hypnotherapy with Islamic Approach (SPHIA) procedure?
- i. What did they experience through seeing?
 - ii. What did they experience through listening?, and
 - iii. What did they experience through feeling?

1.6 Significance of the Study

This study is crucial for giving both hypothetical and viable suggestions for the management of child sexual abuse disorder, as there has been no known research on Spiritual Hypnotherapy in Malaysia up until now. With these concerns in mind, this study can offer major contributions in enriching the existing database in the area of child hypnotherapy. From the hypothetical perspective, this study seeks to understand the experiences of young victims of incest through SPHIA. As stated by Corbin and Strauss (2014); Merriam (1998), individual personal experiences are rich sources for research.

The findings of this study will contribute new data specific to the experience of victims of incest undergoing the SPHIA. Moreover, the findings will provide essential points of view pertinent to Islamic spirituality as experienced by the child victims of incest. Hopefully, the findings will help fill the current gap in the corpus regarding the experience of incest victims undergoing the SPHIA.

Along these lines, the findings of this study should go far in enhancing the consciousness and understanding among experts in giving assistance to this group of survivors. The second objective of this study is to add to the instructions and preparations of techniques for helping these survivors. Shortcomings in giving quality therapies among professionals had been identified in lieu of the quality and quantity of knowledge received from more advanced researchers.

The existential hypothesis, children activist hypothesis, and imaginative model therapy were referred extensively as the theoretical background of this study. All the recognized models have their own specific qualities in depicting the healing of child sexual abuse survivors. The existential hypothesis and children activist hypothesis can help explain the internal and external therapy techniques that help children to recover from their sexual abuse experience. The inventive model therapy displays the techniques that the survivors are subjected to in recovering from their sexual abuse experience. Every hypothesis effectively introduces certain essential parts of healing; however, each specified hypothesis cannot remain isolated in depicting the elements and techniques for recovering from child sexual abuse.

The findings of this study can contribute additional data about surviving child sexual abuse from the survivors' viewpoints. The data can be utilized by other scholars as a basis for improving the present hypotheses or for developing new therapy researches. This study can serve as a reference for future researchers studying child sexual abuse in both academic and medical fields due to the extensive preparation and references on the subject.

Children who have experienced sexual abuse are affected physically, emotionally, and mentally throughout their adolescence and into adulthood. When compared to other forms of child abuse, researchers concluded that sexual abuse victims experience the trauma differently. It is critical to understand that sexually-abused children would feel horrified, bewildered, and helpless (Othman & Wan Yahaya, 2012). From a practical standpoint, this study may be valuable in helping government or private institutions, researchers, therapists, and instructors in addressing the fundamental issues that are being treated by specialists like those in the KSKCareCentre. The KSKCareCenter was established as a referral facility where individuals could receive guidance and counselling through Islamic therapy and treatment. Additionally, JAKIM has created 12 modules that serve as a guide for facilitators and counsellors in order to address societal issues faced by Muslims using methods based on the Quran and Hadith. The centre is home to about 18 counsellors and facilitators who are available to aid and support the community (Sulaiman, 2018). By adopting SPHIA, this study will provide an alternative to counselling for children who have experienced sexual abuse.

The study of human behaviour and the current field of psychology include counselling and psychotherapy (Sudan, 2017). Good counselling skills are the foundation of all psychotherapies, and hypnotherapy is one of the many "talking treatments" that they rely on (Jiggins, 2017). The incorporation of therapeutic hypnosis into counselling sessions is rather easy (Gunnison, 1990; Zahourek, 2002; Daitch, 2007; Yapko, 2018). Islamic counselling entails a technique for incorporating morals and spirituality into therapy and treatment as well as for overcoming challenges via religious teachings, which will help to balance a person's physical and spiritual requirements (Sudan, 2017).

The SPHIA model is an illustration of psychotherapy with a foundation in counselling, which includes developing rapport with the patient, facilitating communication, paying attention and listening with respect, as well as integrating, interpreting, and summarising complex information presented, such as diagnoses and medical, emotional, and family histories. These abilities are crucial core skills needed for the efficient application of hypnotherapy. Jiggins (2017) endorsed using hypnosis as an efficient solution for trained counsellors.

The Qur'an and Prophet Muhammad's hadiths are the key sources for the SPHIA model, which place a strong focus on the salvation, fulfilment, and well-being of the person. Muslim thinkers like Al-Razi, Ibn Sina, Al-Balkhi, and Al-Ghazali had conducted extensive research on human psychology. The foundations and guiding principles of Islamic counselling were established by these scholars. It is critical to note that spirituality involves unique coping mechanisms (Sudan, 2017).

This knowledge could be useful for professionals in creating or enhancing SPHIA-based therapeutic strategies for sexually-abused children. These young victims may lead happier lives in the future and able to use self-hypnosis to start their own self-healing without suffering any negative side effects. This study offers recommendations on important designs and suggests areas for improvement or additional research. This study can serve as a manual for Malaysian psychotherapists, therapists, and counsellors in employing SPHIA for treating children who had experienced severe post-sexual abuse trauma. It can give specialists more information so that they feel more confident in their abilities and guarantee more realistic achievements in the treatment of their patients.

1.7 Research Scope and Limitations

This study focuses on the phenomenological analysis of incest victims in small samples. The study's objective is to look into the counselling process and results of spiritual hypnotherapy based on an Islamic approach. The effectiveness of the intervention is not examined in the study. Within the theoretical framework of psychoanalysis, the experiences under investigation include hearing, seeing, and feeling.

Muslim children who were incest victims and placed in all Malaysian children's homes run by the Social Welfare Department are the subjects of this study. These children must be Muslims and have a basic understanding of Islam. There are no jinn or "pukau" elements involved in the hypnotherapy employed in the study, which is based on traditional psychoanalytic hypnotherapy. The Malaysian Religious Authority has approved this course of conventional hypnotherapy (see Appendix K).

As the target demographic is so distinctive, the sample size is limited. This study also has limitations related to the participants' capacity for self-expression, such as a lack of creativity and words to adequately describe their experiences.

1.8 Definitions of Terms

1.8.1 Child

The Child Act which was passed in 2001 (Act 611) consolidates three major statutes governing children and young persons namely: the Juvenile Court Act 1947, the Child Protection Act, and the Children and Girls Protection Act 1973. The Child Act defines a child as all persons aged below 18 years old. The definition is also in line with Article 1 of the Convention on The Right of Child 1991 that defines a child as a person who is under the age of 18 (Laws of Malaysia, 2018).

1.8.2 Child Sexual Abuse (CSA)

There is still no consensus on the definite definition of child sexual abuse. The difficulties in defining this concept result from different orientations, perspectives, objectives, and goals (Nen, 2010). Child sexual abuse is a form of abuse in which a child is abused for the sexual gratification of an adult or older adolescent. Child sexual abuse also occurs when an adult indulges in indecent exposure (of the genitals, female nipples, etc.) to a child with the intent to gratify their own sexual desires, or to intimidate or groom the child, ask or pressurize a child to engage in sexual activities, display pornography to a child, or use a child to produce child pornography (Obineli, 2013).

1.8.3 CSA in Child Act 2001, Malaysia

The Malaysian law on children is governed by the Child Act 2001 involving victims under the age of 16 and below, whereby charges of statutory rape can be brought against the perpetrator under Section 376. The sexual abuse of children is uniformly a criminal offense, unlike physical abuse which is generally dealt with only in the juvenile court. Under this Act, children who are sexually forced or voluntarily involved, whether as participants or observers, in any sexual activity for the purpose of any pornographic material, photo, recording, film, videotape or performance, or sexual

exploitation by any party for their sexual enjoyment are subject to this Act (Laws of Malaysia, 2018).

1.8.4 Incest - Intra Familial Sexual Abuse

Incest refers to legally prohibited sexual intercourse between close (biological) relatives. It is defined as inappropriate sexual behaviour within the family or surrogate family participants, or "...any overtly sexual contact between people who are either closely related." (Forward & Buck, 1981). Nen (2010) opines that "children are more likely to be molested by someone they know, namely family participants, relatives and or close friends because these are those who have the most opportunity and access them". The majority of child abusers are their parents (i.e. fathers, mothers, and child minders). According to the Laws of Malaysia, 2006; Act 574 of the Penal Code, incest refers to sexual intercourse that is done without the victim's consent, or where he or she does know that the person with whom he or she had sexual intercourse was a person whose relationship to him or her was such that he or she was not permitted under the law, religion, custom or usage applicable to him or her to marry that person.

1.8.5 Hypnosis

The term hypnosis is not quite the same as the term hypnotherapy, as hypnosis itself is not a therapy but rather an instrument. Hypnotherapy, conversely, is a term that depicts the clinical utilization of specific suggestions, keeping in mind the end goal to accomplish a specific therapeutic objective. Hypnosis is an ability or a psychological state. It can be characterized as a condition of increased focus in which a patient who is ready and persuaded may experience changes in sensations and observations and might be more receptive to recommendations from the therapist who is informed about the patient's own specific wishes (Huynh et al., 2008).

When practicing hypnosis, the subject or individual is guided by the hypnotherapist to react to suggestions in order to achieve certain changes in qualitative experience, stabilizations in observation, sensation, feeling, thought, or conduct. Hypnosis means a communication between one individual i.e. the "hypnotist" and another individual i.e. the "subject" or "subjects". In this arrangement, the hypnotist endeavours to extract the subject's observations, sentiments, considerations and conduct by asking them to focus on thoughts and pictures that may result in the planned impacts (Heap, 2005).

1.8.6 Hypnotherapy

Hypnotherapy is the most recent instrument for changing beliefs and/or behaviours due to its ability to produce the most immediate results. Hypnotherapy is a combination of hypnosis and therapy, thus differentiating it from hypnosis. A traditional hypnotherapist will spend about half of the hypnosis time talking to the participant while the participant is in Beta mode (normal awakening consciousness), while in the

remainder of the time, the participant will be in hypnosis (Alpha or lower). Jones (2007) stated that “hypnotherapy works by combining hypnosis with precise, outcome-oriented therapy and targeting the subconscious mind”.

Leask (2012) defined hypnotherapy “as a treatment technique with goals and techniques that are used when the patient is in a state of hypnosis, by a psychological professional, in order to assist the patient in resolving a problem”. Meanwhile, Colman (2015) defined hypnotherapy as “a form of psychotherapy based on hypnosis, using techniques such as helping the patients to perceive or interpret things differently (reframing), training the patients to experience specific reactions such as calmness around spiders or disgust around cigarette smoke (anchoring), and using language patterns”. The two terms of hypnosis and hypnotherapy are often used interchangeably. In this study, the term hypnosis is based on the definition of Battiss (2004) i.e. a trance state, while hypnotherapy is defined as psychotherapeutic processes and techniques implemented on patients who are in a hypnotic trance.

1.8.7 Suggestions

Suggestions as in hypnotherapy, usually (but not always), follow the induction of a hypnotic state and are seen as “verbal communications ... to induce a ‘successful’ response and serve as the key messages in therapy. Suggestions do not have the power to control the subject and can only be effective once the patient has an understanding of what psychological purpose his or her limitations have served” (Leask, 2012). If a suggestion is unreasonable or displeasing to the patient, he or she has the option to reject the suggestion, ignore it entirely, or pull him or herself out of the hypnotic state. The option is with the patient to accept or reject a suggestion.

1.8.8 Self-Hypnosis

Self-hypnosis is a type, process or result of hypnosis which is self-induced using self-suggestion. The difference between self-hypnosis and a therapist-induced hypnosis is that “the patient’s critical faculty is bypassed. This means that, on condition that the suggestion is reasonable to the patient, he or she will accept the therapist’s suggestions, despite the fact that under ordinary circumstances, the individual might believe it to be impossible” (Leask, 2012).

Hypnosis subjects may learn the hypnotic techniques on their own, and this is termed as “self-hypnosis” (Heap, 2005). Most children can be taught self-hypnosis (Rogovik & Goldman, 2007). Self-hypnosis has great potential in children as they take delight in recognizing their own control over problems (Olness, 2008). The choice of techniques for teaching self-hypnosis varies depending on the child’s age and developmental phase.

1.8.9 Spiritual

The Latin word *spirare* meaning ‘to breathe’ evolved to become “spirituality” and was initially used in the Christian church to describe a person's relationship with God (Giesenberg, 2000). Spirituality denotes “an inner consciousness and conviction about the world as described above, spirituality as an expression of beliefs and values – an inner belief technique, which involves one’s search for meaning and purpose in life” (Moore, Talwar, & Bosacki, 2012).

Spirituality refers to “matters concerning God, and the human needs to find higher meaning and the participant’s relationship with the metaphysical, such as soul, spirit, after-life, and angels. Religion will refer to organised and institutionalised beliefs and techniques of faith which serve as a means of spiritual expression”, and this includes the faiths of Christianity, Islam, Buddhism, Judaism, Taoism, and Hinduism (Battiss, 2004).

1.8.10 Spiritual Hypnosis

Spiritual hypnosis is the technique in hypnosis with the addition of spiritual components. The purpose is to receive a higher guidance in the true path, achieve deep energy healing, and clear all that is not needed on all levels of being. It leads to solving the mystery of life, connecting to the desires and intentions of the soul that break through blocks and barriers, and finding the purpose in life. Post-Traumatic Stress Disorder (PTSD) could be effectively treated using spiritual-hypnosis. Due to its ease of use and cheaper cost, spiritual-hypnosis as the off-shoot of hypnosis has the potential to be successful in many communities, as it takes into consideration the individual’s spiritual beliefs (Lesmana et al., 2009). At present, transpersonal and spiritual hypnosis are still not widely used (Zahi, 2009).

1.8.11 Islamic

In this study, Islamic refers to the teaching and belief of the Islam faith, based on the teaching of the Qur’an and the Sunnah. The theory of Islamic Psycho-spirituality is widely used in this study. Psycho-spirituality is a contemporary term that can be defined as a kind of psychological intervention which aims to manage and heal emotional and cognitive distress by utilising the teachings of the Qur’an and the Sunnah (Keshavarzi & Haque, 2013).

1.9 Summary

This chapter covered the background of the study, statement of the problem, objective of the study, research questions, significance of the study, and the definitions of terms included in this study.

REFERENCES

- Abas, A. B. (2012). Child abuse in Malaysia: Legal measures for the prevention of the crime and protection of the victim. *International Journal of Social Sciences and Humanity Studies*, 4(2), 1-10.
- Abd Manaf, A. R., & Mokhtar, N. (2016). Isu-isu sokongan sosial dalam kalangan kanak-kanak mangsa penderaan seksual di institusi pemeliharaan dan perlindungan. *Journal of Techno-Social*, 8(2).
- Abu-Raiya, H. (2012). Towards a systematic Qura'nic theory of personality. *Mental Health, Religion & Culture*, 15(3), 217-233.
- Alaggia, R., & Millington, G. (2008). Male child sexual abuse: A phenomenology of betrayal. *Clinical Social Work Journal*, 36(3), 265-275.
- Al-Karam, C. Y. (Ed.). (2018). *Islamically integrated psychotherapy: Uniting faith and professional practice* (Vol. 3). Templeton Foundation Press.
- Amjad, N. (1992). Psyche in Islamic gnostic and philosophical traditions, in Zafar Afaq Ansari (Ed.), *Qur'anic concepts of human psyche* (pp. 39-56).
- Arrigo, B. (1998). *A hermeneutic-phenomenological investigation of the process of changing limiting beliefs about the self in reprogramming* [Doctoral dissertation]. Duquesne University.
- As, A., Hilgard, E. R., & Weitzenhoffer, A. M. (1963). An attempt at experimental modification of hypnotizability through repeated individualized hypnotic experience. *Scandinavian Journal of Psychology*, 4(1), 81-89.
- Ashby, B. D., & Kaul, P. (2016). Post-traumatic stress disorder after sexual abuse in adolescent girls. *Journal of Pediatric and Adolescent Gynecology*, 29(6), 531-536.
- Auringer, M. L. (2010). *Clinical efficacy of a brief hypnotic intervention for hyperarousal symptoms in sexual trauma* [Doctoral dissertation]. Baylor University.
- Avinger, K. A., & Jones, R. A. (2007). Group treatment of sexually abused adolescent girls: A review of outcome studies. *The American Journal of Family Therapy*, 35(4), 315-326.
- Badruzaman, D. (2019). Islamic Modern Hypnotherapy (IMH) sebagai metode alternative dalam mempercepat investigasi kasus korupsi di Indonesia. *Kodifikasia: Jurnal Penelitian Islam*, 13(2), 265-282.
- Barrett, D. (2001). The power of hypnosis. *Psychology Today*, 59-65.
- Battiss, B. (1989). Integrating spiritual concepts in hypnotherapy with adult survivors of childhood sexual abuse (pp. 1-15). Johannesburg University.

- Battiss, B. (2004). *Hypnotherapy and childhood sexual abuse: The experiences of adult survivors* [Doctoral dissertation]. Rand Afrikaans University.
- Becker, H., & Geer, B. (1957). Participant observation and interviewing: A comparison. *Human Organization, 16*(3), 28-32.
- Beevi, Z., Low, W. Y., & Hassan, J. (2016). Impact of hypnosis intervention in alleviating psychological and physical symptoms during pregnancy. *American Journal of Clinical Hypnosis, 58*(4), 368-382.
- Beevi, Z., Low, W. Y., & Hassan, J. (2017). The effectiveness of hypnosis intervention for labor: An experimental study. *American Journal of Clinical Hypnosis, 60*(2), 172-191.
- Beevi, Z., Low, W. Y., & Hassan, J. (2019). The effectiveness of hypnosis intervention in alleviating postpartum psychological symptoms. *American Journal of Clinical Hypnosis, 61*(4), 409-425.
- Beshai, J. A. (1974). Does imagination exist? A phenomenology of hypnosis. *American Journal of Clinical Hypnosis, 16*(4), 219-224.
- Beveridge, K., & Cheung, M. (2004). A spiritual framework in incest survivors treatment. *Journal of Child Sexual Abuse, 13*(2), 105-120.
- Bhagat, V., & Menon, S. (2020). The efficacy of using hypnosis to reduce anxiety and pain in obstetrics and gynecology patients. *Research Journal of Pharmacy and Technology, 13*(1), 347-352.
- Blumer, M. L., Papaj, A. K., & Erolin, K. S. (2013). Feminist family therapy for treating female survivors of childhood sexual abuse. *Journal of Feminist Family Therapy, 25*(2), 65-79.
- Bogar, C. B., & Hulse-Killacky, D. (2006). Resiliency determinants and resiliency processes among female adult survivors of childhood sexual abuse. *Journal of Counseling & Development, 84*(3), 318-327.
- Bonney, P. (2016). Hypnosis as an adjunctive treatment for intrapsychic restructuring and healing in an adult child sexual abuse survivor. *Australian Journal of Clinical & Experimental Hypnosis, 41*(2), 182-192.
- Brammer, R. (2004). *Diversity in counseling*. Belmont, CA: Thompson Learning Inc.
- Cathie, K. (2020). Spiritual hypnosis. *Mala Hypnotherapy*. Retrieved from <http://malahypnotherapy.com/about/>
- Chan, L. F., Tan, S. M. K., Ang, J. K., Kamal Nor, N., & Sharip, S. (2012). A case of sexual abuse by a traditional faith healer: Are there potential preventions? *Journal of Child Sexual Abuse, 21*(6), 613-620.

- Chandrasegaran, A. (2018). Case study: Clinical management of claustrophobia and cold sensitivity towards operating room environment with preoperative hypnosis. *Journal of Clinical Neuroscience and Psychopathology*, 20(4), 294-298. Retrieved from <http://dx.doi.org/10.5350/Sleep.Hypn.2018.20.0165>
- Cheah, I. G. S., & Choo, W. Y. (2016). A review of research on child abuse in Malaysia. *Med J Malaysia*, 71(1), 87-99.
- Ching, W. C. (2017). An understanding of the counseling process that involves spiritual experiences. *MOJPC: Malaysia Online Journal of Psychology & Counselling*, 2(1), 34-45. Retrieved from <https://ijps.um.edu.my/index.php/MOJC/article/view/5558>
- Choo, W. Y., Dunne, M. P., Marret, M. J., Fleming, M., & Wong, Y. L. (2011). Victimization experiences of adolescents in Malaysia. *Journal of Adolescent Health*, 49(6), 627-634.
- Colman, A. M. (2015). *A dictionary of psychology*. Oxford University Press.
- Corbin, J., & Strauss, A. (2014). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Sage publications.
- Courtois, C. A. (1997). Healing the incest wound: A treatment update with attention to recovered memory issues. *American Journal of Psychotherapy*, 51(4), 464-496.
- Cowles, R. S. (1998). The magic of hypnosis: is it child's play? *The Journal of psychology*, 132(4), 357-366.
- Creswell, J. W. (2007). Five qualitative approaches to inquiry. *Qualitative inquiry and research design: Choosing among five approaches* (2nd ed., pp. 53-80). Sage publications.
- Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage publications.
- Curtin, M., & Fossey, E. (2007). Appraising the trustworthiness of qualitative studies: Guidelines for occupational therapists. *Australian Occupational Therapy Journal*, 54(2), 88-94.
- Dahl, M. G. (2016). *Basic hypnosis*. Hypnosis Alliance Network. Retrieved from www.hypnosisalliance.com
- Daitch, C. (2007). *Affect regulation toolbox: Practical and effective hypnotic interventions for the over-reactive client*. WW Norton & Company.
- Dananier, N., & Wijaya, Y. (2021). Tinjauan hukum Islam terhadap akad hypnotherapy. *Nizham Journal of Islamic Studies*, 9(02), 70-79.
- Darken, R. (1992). Hypnosis in the treatment of survivors of sexual Abuse. *Australian Journal of Clinical and Experimental Hypnosis*, 20(2), 105-109.

- Davis, L. W., & Husband, R. W. (1931). A study of hypnotic susceptibility in relation to personality traits. *The Journal of Abnormal and Social Psychology*, 26(2), 175.
- Davis, S. (2009). Get the most out of positive thinking: How to create effective affirmations. *Journal of Experiential Trance*, 1(1), 11-24.
- Degun-Mather, M. (2006). *Hypnosis, dissociation and survivors of child abuse: Understanding and treatment*. John Wiley & Sons.
- Denzin, N. K., & Lincoln, Y. S. (2011). *The Sage handbook of qualitative research* (4th ed.). Sage publications.
- DiClemente, R. J., & Ricks, J. M. (2015). Sibling incest. *Handbook of adolescent behavioral problems* (pp. 595-608). Springer, Boston, MA.
- D'Oyen, F. M. (2000). *The miracle of life: A guide on Islamic family life and sexual health education for young people*. Islamic Foundation.
- Draucker, C. B. (1992). *Counselling survivors of childhood sexual abuse: Counselling in practice series*. Sage publications.
- Dunkley, J. (2013). *Parenting adolescents: A phenomenological approach* [Doctoral dissertation]. Free State University.
- Dunne, M. P., Chen, J. Q., & Choo, W. Y. (2008). The evolving evidence base for child protection in Chinese societies. *Asia Pacific Journal of Public Health*, 20(4), 267-276.
- Ebtekar, F. (2012). *Reasons, and emotional and physical health complications related to induced abortion of Kurdish women in Sanandaj, Iran* [Doctoral dissertation]. Universiti Putra Malaysia.
- Erel, O., & Erel, K. V. (2017). Hypnosis. *Meandros Medical and Dental Journal*, 18(2), 76.
- Etzrodt, C. M. (2013). Ethical considerations of therapeutic hypnosis and children. *American Journal of Clinical Hypnosis*, 55(4), 370-377.
- Forward, S., & Buck, C. (1981). Betrayal of Innocence: Incest and its devastation. *Children Australia*, 6(4), 26-27.
- Fourie, G., & Guse, T. (2011). An integrated hypnotherapeutic model for the treatment of childhood sexual trauma: A case study. *American Journal of Clinical Hypnosis*, 53(3), 193-205.
- Fraser, D. (2007). State education, spirituality, and culture: Teachers' personal and professional stories of negotiating the nexus. *International Journal of Children's Spirituality*, 12(3), 289-305.

- Fraser, J. (2012). Using hypnosis to help build healthy self-esteem in clients. *Australian Journal of Clinical Hypnotherapy and Hypnosis*, 34(2), 19-27.
- Freedman, S. R., & Enright, R. D. (1996). Forgiveness as an intervention goal with incest survivors. *Journal of Consulting and Clinical Psychology*, 64(5), 983.
- Frew, J., & Spiegler, M. D. (Eds.). (2013). *Contemporary psychotherapies for a diverse world* (1st rev. ed.). Routledge/Taylor & Francis Group.
- Frieze, I.H., Newhill, C.E., Fusco, R. (2020). Examining the service provider: Challenges (and successes) in assisting victims of violence and the need for self-care. *Dynamics of family and intimate partner violence* (pp. 353-385). Springer.
- Gardner, G. G. (1977). Hypnosis with infants and preschool children. *American Journal of Clinical Hypnosis*, 19(3), 158-162.
- Ghani, R. M. A., Rosman, A., & Muhamad, N. A. (2019). The Suspected Child Abuse and Neglect (SCAN) programme in Malaysia: From inception to present. *Global Journal of Health Science*, 11(7), 148-148.
- Gibson, S. (2015). *How the conscious and subconscious minds work*. The London Hypnotherapy Clinic. Retrieved from <http://www.londonhypnotherapy.org/hypnosis-hypnotherapy-how-the-conscious-and-subconscious-minds-work.php>
- Giesenberg, A. (2000). Spiritual development and young children. *European Early Childhood Education Research Journal*, 8(2), 23-37.
- Gooding, C. T. (1969). A phenomenological approach to hypnosis. *American Journal of Clinical Hypnosis*, 11(3), 148-154.
- Gorham, E. L. (1997). Sixteen-step strategic family therapy for the treatment of child sexual abuse: A treatment adaptation and case example. *Psychotherapy in Private Practice*, 16(1), 21-37.
- Griner, D., & Smith, T. B. (2006). Culturally adapted mental health intervention: A meta-analytic review. *Psychotherapy: Theory, research, practice, training*, 43(4), 531.
- Groenewald, T. (2004). A phenomenological research design illustrated. *International Journal of Qualitative Methods*, 3(1), 42-55.
- Guion, L. A., Diehl, D. C., & McDonald, D. (2001). *Conducting an in-depth interview* (pp. 1-3). McCarty Hall, FL: University of Florida Cooperative Extension Service, Institute of Food and Agricultural Sciences, EDIS.
- Gunnison, H. (1990). Hypnocounseling: Ericksonian hypnosis for counselors. *Journal of Counseling & Development*, 68(4), 450-453.

- Haeri, F. (1989). *The journey of the self: An Islamic view to understanding the self and its unified nature*. Element books.
- Hammond, D. C. (Ed.). (1990). *Handbook of hypnotic suggestions and metaphors*. WW Norton & Company.
- Haque, A. (2004). Psychology from Islamic perspective: Contributions of early Muslim scholars and challenges to contemporary Muslim psychologists. *Journal of religion and health*, 43(4), 357-377.
- Haque, A., & Keshavarzi, H. (2014). Integrating indigenous healing methods in therapy: Muslim beliefs and practices. *International Journal of Culture and Mental Health*, 7(3), 297–314.
- Hassan, S. A. (2015). Islamic transcendental wellbeing model for Malaysian muslim women: Implication on counselling. *Asian Social Science*, 11(21), 331–341.
- Haywood, S. L. (2012). Liminality, art therapy and childhood sexual abuse. *International Journal of Art Therapy*, 17(2), 80–86.
- Heap, M. (2005). Defining hypnosis: The UK experience. *American Journal of Clinical Hypnosis*, 48(2–3), 117–122.
- Hebert, M., Langevin, R., & Oussaid, E. (2018). Cumulative childhood trauma, emotion regulation, dissociation, and behavior problems in school-aged sexual abuse victims. *Journal of Affective Disorders*, 225, 306-312.
- Hedayat, K. (2006). When the spirit leaves: Childhood death, grieving, and bereavement in Islam. *Journal of Palliative Medicine*, 9(6), 1282–1291.
- Hlywa, E., & Dolan, L. (2011). Spirituality, hypnosis and psychotherapy: A new perspective. *Australian Journal of Clinical & Experimental Hypnosis*, 39(1), 111-127.
- Huynh, M. E., Vandvik, I. H., & Diseth, T. H. (2008). Hypnotherapy in child psychiatry: The state of the art. *Cinical Child Psychology and Psychiatry*, 13(3), 377–393.
- Ivens, M. (1998). *Understanding the spiritual exercises: Text and commentary: A handbook for retreat directors*. Gracewing Publishing.
- Jalil, S. J. (2020). *Perkembangan hubungan perkahwinan pasangan kekal berkahwin dalam kitaran perkembangan keluarga* [Doctoral dissertation]. Universiti Kebangsaan Malaysia.
- Jayapalan, A., Wong, L. P., & Aghamohammadi, N. (2018). A qualitative study to explore understanding and perception of sexual abuse among undergraduate students of different ethnicities. *Women's Studies International Forum*, 69, 26-32.

- Jiggins, K. C. (2017). *Hypnosis and the counselling profession*. VISTAS Online. Retrieved from <https://www.scribd.com/document/614624593/12-Hypnosis-and-the-Counseling-Profession-Article-author-Kate-C-Jiggins>
- Jones, S. G. (2007). *Basic hypnotherapy for professionals*. Retrieved from <https://ebook-data.com/get-ebook/file.php?id=5y-jHHC3DtwC&t=basic-hypnotherapy-for-professionals&a=steve-g-jones-med&p=lulucom&h=169&d=&i=1604020415&c=&w=www.bibleandbookcenter.com>
- Kassim, K., & Kasim, M. S. (1995). Child sexual abuse: Psychological aspects of 101 cases seen in an urban Malaysian setting. *Child Abuse & Neglect, 19*(7), 793–799.
- Kaya, Y., Arslan, A., Avci, S., Edizer, B., & Tamer, A. (2015). Synchronized action of breathing and diaphragm by hypnosis assisted abdominal weightlifting exercises and ego strengthening for the treatment of stuttering “Kaya Method”. *Procedia-Social and Behavioral Sciences, 193*, 153-164.
- Kendall-Tackett, K. A., Williams, L. M., & Finkelhor, D. (1993). Impact of sexual abuse on children: A review and synthesis of recent empirical studies. *Psychological Bulletin, 113*(1), 164.
- Keshavarzi, H., & Haque, A. (2013). Outlining a psychotherapy model for enhancing Muslim mental health within an Islamic context. *International Journal for the Psychology of Religion, 23*(3), 230-249.
- Kessler, M. R. H., White, M. B., & Nelson, B. S. (2003). Group treatments for women sexually abused as children: A review of the literature and recommendations for future outcome research. *Child Abuse & Neglect, 27*(9), 1045–1061.
- Kihlstrom, J. F., & Hoyt, I. P. (1990). Repression, dissociation, and hypnosis. In Jerome L. Singer (Eds.), *Repression and Dissociation: Implications for Personality Theory, Psychopathology, and Health* (pp. 181-208). The University of Chicago Press.
- Kirmani, M. H., & Kirmani, S. (2009). Recognition of seven spiritual identities and its implications on children. *International Journal of Children's Spirituality, 14*(4), 369–383.
- Kohen, D. P., & Kaiser, P. (2014). Clinical hypnosis with children and adolescents—What? Why? How?: Origins, applications, and efficacy. *Children, 1*(2), 74-98.
- Kohen, D. P., & Olness, K. (2011). *Hypnosis and hypnotherapy with children*. Routledge.
- Kraft, D. (2011). The place of hypnosis in psychiatry, part 4: Its application to the treatment of agoraphobia and social phobia. *Australian Journal of Clinical & Experimental Hypnosis, 39*(1), 91-110.

- Kruczek, T., & Vitanza, S. (1999). Treatment effects with an adolescent abuse survivor's group. *Child Abuse & Neglect*, 23(5), 477–485.
- Langgulung, H. (1995). Paradigm shift: The landmark of 21st century education. *International Islamic University Malaysia Symposium, Selangor, Malaysia*.
- Laws of Malaysia, 2006. Penal Code (Act 574). Retrieved from https://ccid.rmp.gov.my/Laws/Act_574_Panel_Code_Malaysia.pdf
- Laws of Malaysia, 2017. Sexual offences against children Act 2017 (Act 792). Retrieved from <https://lom.agc.gov.my/act-detail.php?language=BI&type=original&act=792>
- Laws of Malaysia, 2018. Child Act 2001 (Act 611). Retrieved from <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/65516/117928/F-1090734281/MYS65516.pdf>
- Leask, J. K. (2012). *Hypnotherapy for children and adolescents: The perspective of South African psychologists* [Master's thesis]. Witwatersrand University.
- Lee, J. K., Zubaidah, J. O., Fadhilah, I. S. I., Normala, I., & Jensen, M. P. (2019). Prerecorded hypnotic peri-surgical intervention to alleviate risk of chronic postsurgical pain in total knee replacement: A randomized controlled pilot study. *International Journal of Clinical and Experimental Hypnosis*, 67(2), 217–245.
- Lesmana, C. B. J., Suryani, L. K., Jensen, G. D., & Tiliopoulos, N. (2009). A spiritual-hypnosis assisted treatment of children with PTSD after the 2002 Bali terrorist attack. *The American Journal of Clinical Hypnosis*, 52(1), 23–34.
- Lesmana, C. B. J., Suryani, L. K., Tiliopoulos, N., & Jensen, G. D. (2010). Spiritual-Hypnosis Assisted Therapy: A new culturally-sensitive approach to the treatment and prevention of mental disorders. *Journal of Spirituality in Mental Health*, 12(3), 195–208.
- Lewis, T. (2004). Sexual abuse, spiritual formation, and psychoanalysis. *Studies in gender and sexuality*, 5(1), 57–80.
- Lipsett, L. J. (2003). Hypnosis with children and adolescents: Some developmental considerations. *Australian Journal of Clinical and Experimental Hypnosis*, 31(2), 162–184.
- Lukman, Z. (2009). Childhood abuse among children involved in prostitution in Malaysia. *The Social Sciences*, 4(6), 567–572.
- Maarof, M., Hashim, R. S., Yusof, N. M., & Mydin, R. M. (2012). Young women speak out: Healing the selves through narrative therapy. *GEMA Online Journal of Language Studies*, 12(2), 393–405.
- Mccaslin, M. L., & Scott, K. W. (2003). The five-question method for framing a qualitative research study. *The Qualitative Report*, 8(3), 447–461.

- McClain, B. C., & Suresh, S. (Eds.). (2011). *Handbook of pediatric chronic pain: Current science and integrative practice*. Springer.
- McCracken, G. (1988). *The long interview: Qualitative research methods*. Sage publications.
- McHugh, M. L. (2012). Inter-rater reliability: The kappa statistic. *Biochemia Medica*, 22(3), 276-282.
- Merriam, S. B. (1998). *Qualitative research and case study applications in education. Revised and expanded from " case study research in education*. Jossey-Bass Publishers.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis*. Sage: Thousand Oaks.
- Milling, L. S., & Costantino, C. A. (2000). Clinical hypnosis with children: First steps toward empirical support. *The International Journal of Clinical and Experimental Hypnosis*, 48(2), 113–137.
- Misurell, J. R., Springer, C., & Hiller, A. (2012). Game-based cognitive-behavioral therapy (GB-CBT) group program for children who have experienced sexual abuse : A three month follow up investigation. *Journal of Child Sexual Abuse*, 21(6), 646–664.
- Mohamed, W. M. Y. (2008). Arab and Muslim contributions to modern neuroscience. *IBRO History of Neuroscience*, 169(3), 255.
- Moore, K., Talwar, V., & Bosacki, S. (2012). Canadian children's perceptions of spirituality: Diverse voices. *International Journal of Children's Spirituality*, 17(3), 217–234.
- Morrow, S. L. (2007). Qualitative research in counseling psychology: Conceptual foundations. *The Counseling Psychologist*, 35(2), 209-235.
- Morse, J. M. (1994). Emerging from the data: The cognitive processes of analysis in qualitative inquiry?. In J.M. Morse (Eds.), *Critical issues in qualitative research methods*. SAGE Publications Ltd.
- Moustakas, C. (1994). *Phenomenological research methods*. Sage publications.
- Mun, C. T. (1964a). Hypnosis in general medical practice in Singapore. *American Journal of Clinical Hypnosis*, 6(4), 340-344.
- Mun, C. T. (1964b). Some uses of hypnosis in gynecology. *The Medical Journal of Malaya*, 18(4), 223-225.
- Mun, C. T. (1964c). The treatment of asthma by hypnotherapy. *The Medical Journal of Malaya*, 18(4), 232-234.

- Mun, C. T. (1966a). Psychosomatic medicine and hypnosis. *American Journal of Clinical Hypnosis*, 8(3), 173-177.
- Mun, C. T. (1966b). The use of hypnosis as an adjunct in surgery. *American Journal of Clinical Hypnosis*, 8(3), 178-180.
- Mushoffa, W., & Wahidin, D. (2019). Methods of ruqyah, hypnotherapy, and spiritual: Strategy in handling family problems. *Konseling Religi Jurnal Bimbingan Konseling Islam*, 10(1), 140-155.
- Nasrijal, N. M. H., Yusof, M. I. M., Jody, J. M., & Razali, H. Y. (2017). Protection for sexually abused children: Issues on law and policy in Malaysia. *Journal of Governance and Development*, 13(1), 43-59.
- Nen, S. (2010). *Experiences of Malaysian professionals working with sexually abused children : An exploratory study* [Doctoral dissertation]. Victoria University.
- Nen, S., & Astbury, J. (2011). Organisational barriers in working with child sexual abuse (CSA) cases: The Malaysian professional' experiences. *Journal of E-Bangi*, 6(2), 255-272.
- Neuman, W. L. (1991). *Social research methods. Qualitative and quantitative approaches*. Allyn & Bacon: Boston.
- Noh, C. H. C., & Talaat, W. I. A. W. (2012). Verbal abuse on children: Does it amount to child abuse under the Malaysian law?. *Asian Social Science*, 8(6), 224.
- Nongard, R. (2009). Hypnotic scripts suggestive therapy. *Journal of Experiential Trance*, 1(1), 100-107.
- Nor Shafrin, A. (2007). Mengenal pasti indikator tingkah laku mangsa penderaan seksual. *Jurnal Pendidik Dan Pendidikan*, 22, 107-125.
- Nor Shafrin, A., & Rohany, N. (2009). Cognitive distortion and coping style used by sexual abuse child in Malaysia. *International Counseling and Social Work Symposium, Penang, Malaysia*.
- Obineli, A. (2013). Counselling strategies for dealing with sexual abuse among primary school children in Anambra State. *African Research Review*, 7(3), 86-95.
- Olness, K. (2008). Helping children and adults with hypnosis and biofeedback. *Cleveland Clinic Journal of Medicine*. 75(2), 39-43.
- Olness, K., & Gardner, G. G. (1978). Some guidelines for uses of hypnotherapy in pediatrics. *Pediatrics*, 62(2), 228-233.
- O'Rourke, C. G. (2010). Sacred objects, healing prayer: The use of transitional phenomena in a client's recovery from incest. *Smith College Studies in Social Work*, 80(2-3), 304-322.

- Osborne, J. W. (1990). Some basic existential-phenomenological research methodology for counselors. *Canadian Journal of Counselling, 24*(2), 79–91.
- Othman, A., & Wan Yahaya, W. A. J. (2012). A preliminary investigation: Children's awareness of child sexual abuse in Malaysia. *International Journal of Social Science and Humanity, 2*(3), 242–247.
- Paley, V. (2016). *Healing the mind, body and spirit with imagery hypnosis and mindful meditation at a Cancer Support Center* [Master's thesis]. California State University.
- Palimere, D. (2011). *Psychosexual group therapy for adult female survivors of sexual abuse: A case study* [Unpublished doctoral dissertation]. Widener University.
- Palmer, S. (Ed.). (2000). *Introduction to counselling and psychotherapy: The essential guide*. Sage.
- Parastoo, A. (2015). *The process of recovery from co-dependency among wives of drug addicts in Nar-Anon Self Help Groups in Iran* [Doctoral Dissertation]. Universiti Putra Malaysia.
- Patrick, E. (1963). Hypnosis in clinical medicine. *Medical Journal of Malaya, 18*, 25–29.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods*. SAGE Publications, inc.
- Peebles-Kleiger, M. J. (2001). Contemporary psychoanalysis and hypnosis. *International Journal of Clinical and Experimental Hypnosis, 49*(2), 146-165.
- Perfect, M. M., McClung, A. A., & Bressette, K. A. (2013). Applying hypnosis to treat problems in school-age children: Reviewing science and debunking myths. *Communique, 41*(8), 1-28.
- Piasecki, J. M., Manson, S. M., Biernoff, M. P., Hiat, A. B., Taylor, S. S., & Bechtold, D. W. (1989). Abuse and neglect of American Indian children: Findings from a survey of federal providers. *American Indian and Alaska Native Mental Health Research, 3*(2), 43–62.
- Ping, S. L. S., Hassan, S. A., Noah, S. M., Krauss, L. S., & Zainudin, Z. N. (2018). Unveiling the experiences through feeling in undergoing Spiritual Hypnotherapy with Islamic Approach (SPHIA) for female children victim of incest. *International Journal of Academic Research in Business and Social Sciences, 8*(6), 507-519.
- Polkinghorne, D. E. (1989). Phenomenological research methods. *Existential-phenomenological perspectives in psychology* (pp. 41-60). Springer, Boston, MA.

- Polkinghorne, D. E. (2005). Language and meaning: Data collection in qualitative research. *Journal of Counseling Psychology, 52*(2), 137.
- Poon, M. W. L. (2007). The value of using hypnosis in helping an adult survivor of childhood sexual abuse. *Contemporary Hypnosis, 24*(1), 30–37.
- Poon, M. W. L. (2009). Hypnosis for complex trauma survivors: Four case studies. *American Journal of Clinical Hypnosis, 51*(3), 263-27.
- Razak, M. A. A. (2011). Human nature: An Islamic perspective. *Journal of Islam in Asia, 8*, 251-274.
- Ritchie, J., & Lewis, J. (2003). *Qualitative research practice. A guide for social science students and researchers*. London • Thousand Oaks • New Delhi: SAGE Publications.
- Rogovik, A. L., & Goldman, R. D. (2007). Hypnosis for treatment of pain in children. *Canadian Family Physician, 53*(5), 823-825.
- Rohmadani, Z. V., & Khoiryasdien, A. D. (2022). Efektivitas Islamic hypnotherapy untuk menurunkan stres pada remaja akhir. *JIP Jurnal Intervensi Psikologi, 14*(1), 45–54.
- Rohmadani, Z. V., & Subarjo, R. Y. S. (2022). Islamic hypnotherapy and anchor hypnotherapy to reduce smoking intention in adolescents: A pilot study. *Al-Balagh: Jurnal Dakwah dan Komunikasi, 7*(1), 31-58.
- Rothman, A. E. D. (2019). *Building an Islamic psychology and psychotherapy: A grounded theory study* [Doctoral dissertation]. Kingston University.
- Royal Malaysia Police, (2017). *Statistics of child sexual abuse in Malaysia years 2013-2017*. Prepared by Bukit Aman's Sexual, Women and Child Investigation Division (D11).
- Ruslan, F. (2017). *Hypnotherapy dalam perspektif Islam*. Ruslan Fariadi. Retrieved from <https://ruslanfariadiam.blogspot.com/2017/12/hypnotherapy-dalam-perspektif-islam.html>
- Russell, D. E. H. (1986). *The secret trauma: Incest in the lives of girls and women*. Basic Books, Inc.
- Saadat, H., & Kain, Z. N. (2007). Hypnosis as a therapeutic tool in pediatrics. *Pediatrics, 120*(1), 179–181.
- Sawrikar, P., & Katz, I. (2017). Barriers to disclosing child sexual abuse (CSA) in ethnic minority communities: A review of the literature and implications for practice in Australia. *Children and Youth Services Review, 83*, 302-315.
- Schibik, J. M. (2008). Forgiveness therapy in psychological trauma and chemical abuse treatment. *Journal of Chemical Dependency Treatment, 8*(2), 227–253.

- Schwandt, T. A. (2014). *The Sage dictionary of qualitative inquiry*. Sage publications.
- Seghatoleslam, T., Habil, H., Hatim, A., & Rashid, R. (2015). Achieving a spiritual therapy standard for drug dependency in Malaysia, from an Islamic perspective: Brief review article. *Iran Journal Public Health*, 44(1), 22–27.
- Shaw, J. A., Lewis, J. E., Loeb, A., Rosado, J., & Rodriguez, R. A. (2000). Child on child sexual abuse: Psychological perspectives. *Child Abuse & Neglect*, 24(12), 1591–1600.
- Singh, A. A., Garnett, A., & Williams, D. (2013). Resilience strategies of African American women survivors of child sexual abuse: A qualitative inquiry. *The Counseling Psychologist*, 41(8), 1093-1124.
- Singh, H. A., Yiing, W. W., & Nurani, N. K. (1996). Prevalence of childhood sexual abuse among paramedical students. *Child Abuse & Neglect*, 20(6), 487–492.
- Smith, J. A. (2008). *Qualitative psychology: A practical guide to research methods. Interpretative phenomenological analysis theory method and analysis*. Sage Publications, Inc.
- Smith, T., Domenech Rodríguez, M.M., & Bernal, G. (2011). Culture. *Journal of Clinical Psychology*, 67(2), 166–175.
- Spiegel, D. (1989). Hypnosis in the treatment of victims of sexual abuse. *Psychiatric Clinics of North America*, 12(2), 295–305.
- Spiegel, H. (2007). The neural trance : A new look at hypnosis. *International Journal of Clinical and Experimental Hypnosis*, 55(4), 387–410.
- Stevens-Guille, M. E., & Boersma, F. J. (1992). Fairy tales as a trance experience: Possible therapeutic uses. *American Journal of Clinical Hypnosis*, 34(4), 245-254.
- Strehlow, G. (2009). The use of music therapy in treating sexually abused children. *Nordic Journal of Music Therapy*, 18(2), 167–183.
- Sudan, S. A. (2017). Principles of Islamic counseling and psychotherapy. *Asian Journal of Management Sciences & Education*, 6(3), 129-138.
- Sulaiman, A. A., & Gabadeen, W. O. (2013). Healing in Islam: A psychological perspective: Religious psychotherapy. *IFE Psychologia: An International Journal*, 21(3), 47-53.
- Sulaiman, N. A. (2018, September 20). JAKIM sets up family, social and community service centre to help people deal with problems. *New Straits Times*. <https://api.nst.com.my/news/nation/2018/09/413349/jakim-sets-family-social-and-community-service-centre-help-people-deal>

- Sumari, M., & Chen, N. L. P. (2012). Malaysia women survivors perspective on healing from childhood sexual abuse through spirituality. *Procedia-Social and Behavioral Sciences*, 65, 455–461.
- Sundararajan, L. (1993). The hypnotic use of language—a Heideggerian interpretation. *The Humanistic Psychologist*, 21(2), 189-199.
- Tamminen, K. (1994). Religious experiences in childhood and adolescence: A viewpoint of religious development between the ages of 7 and 20. *The International Journal for the Psychology of Religion*, 4(2), 61-85.
- Tariq, S. A. (2012). *Self hypnosis*. Syed Abdullah Tariq. Retrieved from <https://syedabdullahtariq.blogspot.com/2012/04/self-hypnosis.html>
- Teng, J. Y. F. (2008). *Understanding the learning experience among family members of cancer survivors from a heuristic approach* [Doctoral Dissertation]. Universiti Putra Malaysia.
- Valente, S. M. (2003). Hypnosis: A useful strategy for symptom relief. *Journal of the American Psychiatric Nurses Association*, 9(5), 163-166.
- Valentine, L., & Feinauer, L. L. (1993). Resilience factors associated with female survivors of childhood sexual abuse. *American Journal of Family Therapy*, 21(3), 216–224.
- Van Manen, M. (2016). *Researching lived experience: Human science for an action sensitive pedagogy*. Routledge.
- Visentini, G. (2020). Lines of approach for a theory of care/cure in psychoanalysis. *L'Évolution Psychiatrique*, 85(1), 15-32.
- Wahab, S., Tan, S. M. K., Marimuthu, S., Razali, R., & Muhamad, N. A. (2013). Young female survivors of sexual abuse in Malaysia and depression: What factors are associated with better outcome? *Asia-Pacific Psychiatry: Official Journal of the Pacific Rim College of Psychiatrists*, 5, 95–102.
- Walker, M. E. (2007). *Because it is my heart: A qualitative case study of the influence of spirituality and creativity in the recovery of a mother and daughter from childhood incest trauma* [Doctoral Dissertation, Corpus Christi University]. ProQuest Dissertation and Theses database.
- Walker, W. L. (2016). Guidelines for the use of hypnosis: When to use hypnosis and when not to use. *Australian Journal of Clinical & Experimental Hypnosis*, 41(1), 41-53.
- Weatherley, R., Siti Hajar, A. B., Noralina, O., John, M., Preusser, N., & Yong, M. (2012). Evaluation of a school-based sexual abuse prevention curriculum in Malaysia. *Children and Youth Services Review*, 34(1), 119–125.
- Westbury, E., & Tutty, L. M. (1999). The efficacy of group treatment for survivors of childhood abuse. *Child Abuse & Neglect*, 23(1), 31–44.

- Wester, W. C., & Sugarman, L. I. (2007). *Therapeutic hypnosis with children and adolescents*. Crown House Publishing.
- Willig, C. (2001). *Introducing qualitative research in psychology. Adventures in theory and method*. Buckingham . Philadelphia: Open University Press.
- Winarsih, T., & Rohmadani, Z. V. (2020). Islamic hypnotherapy to reduce parent's anxiety towards the future of children with Autistic Spectrum Disorders. *Al-Balagh: Jurnal Dakwah dan Komunikasi*, 5(1), 1-26.
- Winsor, R. M. (1993). Hypnosis - A neglected tool for client empowerment. *Social Work*, 38(5), 603-608.
- Woodard, F. J. (2002). *A phenomenological inquiry of the psychologist during the hypnotic experience*. Alliant International University, Fresno.
- Woodard, F. J. (2003). Phenomenological contributions to understanding hypnosis: review of the literature. *Psychological Reports*, 93(3), 829-847.
- Woodard, F. J. (2004). A phenomenological and perceptual research methodology for understanding hypnotic experiencing. *Psychological Reports*, 95(3), 887-904.
- Woodard, F. J. (2005a). Perceptually oriented hypnosis: Cross-cultural perspectives. *Psychological Reports*, 97(1), 141-157.
- Woodard, F. J. (2005b). A preliminary phenomenological study of being hypnotized and hypnotizing. *Psychological Reports*, 97(2), 423-466.
- Wright, V. L. (2003). A phenomenological exploration of spirituality among African American women recovering from substance abuse. *Archives of Psychiatric Nursing*, 17(4), 173-185.
- Yaacob, N. R. N. (2013). Cognitive therapy approach from Islamic psycho-spiritual conception. *Procedia-Social and Behavioral Sciences*, 97, 182-187.
- Yapko, M. D. (2018). *Trancework: An introduction to the practice of clinical hypnosis*. Routledge.
- Yaran, C. (2004). *Muslim religious experiences*. Alister Hardy Religious Experience Research Centre.
- Yusufi, A. (2017). Hypnosis in Islamic perspective (An analysis of Bin Baz's fatwa). *Ijtima'iyya: Journal of Muslim Society Research*, 2(2), 153-170.
- Zahi, A. (2009). Spiritual-transpersonal hypnosis. *Contemporary Hypnosis*, 26(4), 263-268.
- Zahourek, R. P. (2002). Utilizing ericksonian hypnosis in psychiatric-mental health nursing practice. *Perspectives in Psychiatric Care*, 38(1), 15-22.

Zakaria, A. H. (1996). *Report on the study on incest in Peninsular Malaysia*. Unpublished manuscript. Malaysian Crime Prevention Foundation, Royal Malaysia Police.

