Honour and Shame in the Canadian Muslim Community: Developing Culturally Sensitive Counselling Interventions
Honneur et honte dans la communauté musulmane au Canada : Élaborer des modes d'intervention et de counseling tenant compte des cultures

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ABSTRACT

This article focuses on the issues of honour and shame within the Canadian Muslim community in the context of females who violate collectively held sexual mores. The discussion reviews the body of related research, including multicultural studies on counselling Muslims and research on the specific areas of honour-related violence, domestic abuse, and intergenerational conflict. Relevant concepts from previous studies are drawn together and expanded into a specific intervention model intended as a counselling tool for helping professionals.

RÉSUMÉ

Cet article traite des questions d'honneur et de honte au sein de la communauté musulmane au Canada relativement aux femmes qui ne se conforment pas au code de conduite sexuelle de la communauté. On y passe en revue les travaux de recherche connexes, y compris les études multiculturelles sur le counseling auprès des Musulmans et les études sur les types de violence liés à l'honneur, à la violence conjugale, et aux conflits intergénérationnels. Les concepts tirés des études précédentes sont traités et approfondis pour créer un modèle d'intervention adapté qui pourra servir d'outil de counseling aux professionnels en relation d'aide.

Canada, a multicultural nation, has a rapidly expanding Muslim population. According to the Pew Research Center (2011), Muslims currently account for 2.8% of the Canadian population, and their global population is expected to increase by 35% by the year 2030. As this populace increases, its need for adequate mental health care likewise increases. Understanding the cultural and religious values, salient features, and particular challenges of this community is a basic requirement for culturally competent mental health counselling. Among recurrent themes within this population, many Muslims adhere to religiously and culturally defined values of honour and shame, particularly in relation to female sexual mores. Although these values are integral to their worldview, those living in Canada may experience distress when culturally specific definitions of these values conflict with the norms and expectations of the dominant society. Effective

intervention tools can be developed to address this issue, taking into account an Islamic framework of values while drawing from the current theoretical models of cognitive behaviour therapy (CBT; Hodge & Nadir, 2008) and narrative therapy (Abudabbeh, 2010). These tools can offer new possibilities for Canadian Muslims experiencing distress due to honour-related issues.

Family honour and shame within the Muslim community may be linked to a variety of situations, including having family members who have physical or mental health disabilities (Abudabbeh, 2005; Bywaters, Ali, Fazil, Wallace, & Singh, 2003; Sohelian & Inman, 2009), have diverse sexual orientations (Kugle, 2010), have substance abuse addictions (Ali-Northcott, 2012), or exhibit any type of condition or behaviour deemed socially unacceptable. However, the most prominent cause of shame—at least in terms of public awareness—involves Muslim females who violate family or cultural sexual mores (Chesler, 2009, 2010; Hedayat-Diba, 1999; United Nations Population Fund, 2005).

This article is structured into four main sections. After a brief discussion of honour and shame in collectivist cultures, the article explores previous studies concerning honour-related violence and distress in the Muslim community, as well as effective approaches in counselling Muslims. The third section presents a four-component intervention model, and the article ends with a concluding summary and suggested next steps in research and application.

<center>DEFINING HONOUR AND SHAME</center>

Concepts of honour and shame are prevalent in collectivist societies in which personal and family reputations are of paramount importance. Honour and shame imply a public dimension, as *maintaining face* or *losing face* (i.e., maintaining or losing reputation and dignity) in front of one's community can be a matter of life or death (United Nations Population Fund, 2005; Welden, 2010). Similarly, personal behaviour is understood to reflect on the reputation of the individual's entire family and extended clan group (Kobeisy, 2004). Although there are cultural variations in defining shameful behaviour, it typically involves violating family boundaries and collectively held understandings of moral conduct (Abudabbeh, 2005; Hedayat-Diba, 1999). Families experiencing a loss of face in front of their cultural communities may feel trapped, without adaptive means to regain their sense of dignity. Male family members may also experience intense social pressure to *cleanse* (actively remove from) their families of the perceived source of shame, even by coercive or violent means (United Nations Population Fund, 2005).

It is difficult to provide any specific quantitative or qualitative descriptions of honour and shame within the Canadian Muslim community. Although there have been investigations into the types of female behaviour considered shameful by Muslim families and communities (Baobaid, 2002, 2012; Baobaid & Hamed, 2010; Chesler, 2009, 2010; Papp, 2010; United Nations Population Fund, 2005; Welden, 2010), there are no empirical studies detailing the prevalence or levels

of distress experienced by Canadian Muslims in relation to their perceptions of honour and shame. However, due to the tragic murders of Aqsa Parvez in 2007 (Welden, 2010) and members of the Shafia family in 2009 (Mojab, 2012), honour-related violence in the Canadian Muslim community has been propelled to the forefront of mainstream public attention. Indicative of the Canadian public's preoccupation with this issue, its English-language media produced more than 3,500 articles on honour-killing between the years 2009 and 2012, following the Shafia murders (Olwan, 2013).

THE CONTRIBUTION OF PREVIOUS STUDIES: UNDERSTANDING HONOUR-RELATED DISTRESS AND EFFECTIVE APPROACHES IN COUNSELLING MUSLIMS

Despite widespread public attention, little research has been done to develop concrete intervention methods to alleviate shame-based distress or to address the factors leading to honour-based violence. However, there is a fairly large body of material dealing with the presenting problem, including so-called honour-killing, domestic and intimate partner abuse, and intergenerational conflict in the context of the Muslim community. Similarly, there exists considerable material devoted to effective counselling approaches when working with Muslim clients. Meanwhile, the Canadian Muslim community has added to this discussion, promoting numerous Islamic conferences, public sermons, public education campaigns, and parenting manuals to address the problems of honour-related violence and domestic abuse within Muslim families, along with the difficulties of parenting youth whose behaviour conflicts with an Islamic moral framework. Not all of this material is strictly academic in nature, yet these resources offer additional insight into this complex issue.

Significant Findings from Studies on Honour-Related Violence

Previous studies in the area of so-called honour-killing and honour-related violence can potentially help clarify the factors leading to honour-related distress. Of these studies, some are set in Middle Eastern or South Asian Muslim societies, and others focus on Muslim immigrant and minority communities in occidental host countries. Most literature is qualitative, grounded in case studies, but one scholar has presented a quantitative analysis based on international English-language media sources (Chesler, 2009, 2010). The few Canadian studies include a policy position paper on "culturally driven" honour violence (Papp, 2010, p. 7), a deconstructed case study analysis of the murder of Aqsa Parvez (Welden, 2010), and writings from the Shafia murder trial's expert witness on gendered-based violence (Mojab, 2012).

Findings from these previous studies clarify a number of factors contributing to honour-related distress and violence. So-called honour-killing is rooted in pre-Islamic tribal practices, and its increased prevalence corresponds with lower levels of education, economic and social stress, rigid patriarchal structures and gender inequality, and patterns of early and forced marriage within extended kinship

groups (Mojab, 2012; Papp, 2010; Patel & Gadit, 2008; United Nations Population Fund, 2005). Another factor that may increase honour-related violence is the level of marginalization and perceived hostility between ethnic minorities or immigrant communities and the dominant society, with higher levels of hostility reinforcing identification with coercive cultural norms within minority groups (Rezaie, Faranji, Asadollahi, & Tabrizi, 2012; Wikan, 2008; see also Kobeisy, 2004). Alienation between the Muslim minority and the dominant society may also increase the levels of family distress and intergenerational conflict, possibly resulting in honour-based violence (Welden, 2010).

Distinctive factors of so-called honour-killing have been articulated by a number of authors. Chesler (2009, 2010) has identified behaviours perceived as shameful to include not only premarital or extramarital sexual relationships, but also marrying someone against the family's wishes, seeking a divorce, remarriage, wearing tight and revealing clothing, refusing to cover one's hair or face, dating, or seeking levels of independence in movement, study, or career that are outside of family boundaries. A Turkish-based study included the factors of eloping and being kidnapped or raped (United Nations Population Fund, 2005). Specific features of so-called honour-killing, distinct from general femicide, may also include a perceived violation of collective moral codes, the motivation of restoring honour, the involvement of the victim's own kin group, and a potential increase in the social status of the perpetrator as a result of the crime (Chesler, 2009, 2010; United Nations Population Fund, 2005).

Limitations in these studies include the lack of access to victims or their families, compounded by reluctance to disclose information (United Nations Population Fund, 2005). Some studies have also conveyed possible bias, such as Papp's (2010) policy position paper encouraging the federal government to promote the "rapid Canadianization" and assimilation of South Asians (p. 9). Olwan (2013) has noted the partisan link between Papp's work, her funding from a conservative think tank (the Frontier Centre), and the promotion of Papp's work by Rona Ambrose, Minister of the Status of Women Canada, within the context of anti-immigration public opinion. Chesler (2009, 2010) based her studies on reports of honour-related violence in the English media, which may reflect the bias of the media rather than serve as a reliable basis for a quantitative analysis or for her conclusion that honour-killing is an almost exclusively Muslim phenomenon. Chesler has also promoted the work of Yotam Feldner (2000) who has asserted that honour-killing is accepted as part of Islamic teachings by some Muslim scholars, a claim which contradicts virtually every study in Islamic law (e.g., Abu-Lughod, 2011; Faqir, 2001; Muhammad, Omer, Mushtaq Ahmed, Abdullah, & Shah, 2012; Nanes, 2003).

Significant Finding from Studies on Counselling Muslims

Relevant multicultural studies include both general approaches and resources focused specifically on the Muslim community. Significant issues include counsellor awareness; establishing a culture-infused counselling framework and working

alliance (Collins & Arthur, 2010a, 2010b); attentiveness to immigration experiences and acculturation levels and style (Berry, 1997; Falicov, 2003); and the role of culture in intergenerational conflicts (Canadian Council on Social Development, 2000; Uskul, Lalonde, & Konanur, 2011). Works focused specifically on the Muslim community provide a framework for understanding an Islamic worldview, salient points when working with Muslims, and suggested assessment instruments, models, and techniques.

ISLAMIC FRAMEWORKS AND SALIENT POINTS WHEN WORKING WITH MUSLIMS

Numerous works have articulated Islamic beliefs and practices, traditional understandings of mental health and healing, and the impact of religious factors on case conceptualizations and intervention planning (Ahmed & Amer, 2012; Ali, Liu, & Humedian, 2004; Baobaid, 2002, 2012; Baobaid & Hamed, 2010; Danespour, 1998; Dwairy, 1998, 2006; Hamdan, 2007; Haque, 2004; Haque & Kamil, 2010; Hodge & Nadir, 2008; Ibrahim & Dykeman, 2011; Kobeisy, 2004; Padela, Killawi, Forman, Demonner, & Heisler, 2012; Skinner, 2010; Springer, Abbott, & Reisbig, 2009). In addition to the works mentioned above, numerous articles have identified important considerations when working with Muslims (Abu Raiya & Pargament, 2010; Nadir & El-Amin, 2012; Qasqas & Jerry, 2013; Springer et al., 2009; Williams, 2005). These considerations include patriarchal family structures and complementary gender roles; nonnegotiable moral values, particularly in the area of female sexual behaviour (Testa, 2012); the influence of the extended family (Al-Krenawi & Graham, 2005; Danespour, 1998, 2012; Schlosser, Ali, Ackerman, & Dewey, 2009); the experience of prejudice and Islamophobia (Inayat, 2007; Schlosser et al., 2009); reticence to seek mental health counselling or disclose private family matters (Abugideiri, 2012; Adam & Schewe, 2007; Schlosser et al., 2009); diverse affiliations within Muslim populations (Schlosser et al., 2009); and the role of religious leaders and community in promoting psychological well-being (Ali, Milstein, & Marzuk, 2005; Ansary & Salloum, 2012; Baobaid, 2002, 2012; Baobaid & Hamed, 2010). Other works have focused on specific issues within the Muslim community, such as domestic violence and intergenerational conflict (Abudabbeh, 2005; Abugideiri, 2012; Adam & Schewe, 2007; Alkhateeb & Abugideiri, 2007; Al-Krenawi & Graham, 2005; Kobeisy, 2004; Rahiem & Hamid, 2012; Springer et al., 2009; Testa, 2012), or counselling special populations, such as Muslim women, adolescents, and young adults (Abu-Ali & Reisen, 1999; Ahmed, 2012; Cook-Masaud & Wiggins, 2011).

These studies have contributed a number of significant points, both in understanding the presenting problem and in highlighting important considerations when counselling Muslim clients and families. Among these significant points, studies have identified the inherent conflict between the collectivist, hierarchal, and patriarchal structures of many Muslim families and the more individualistic and egalitarian aspects of dominant society, contributing to intergenerational conflict and family violence (Al-Krenawi & Graham, 2005; Rahiem & Hamid,

2012; Springer et al., 2009). Echoing findings related to so-called honour-killing, scholars have noted the correlation between domestic abuse and the combined factors of rigid patriarchal family structure and the cultural belief in male supremacy (Adam & Schewe, 2007). Abugideiri (2012), however, has suggested that patriarchy, as a means of social organization, is not necessarily an oppressive system, provided that it is not misused by men to assert coercive control and dominance over women. Scholars have observed that Muslim clients are frequently confused between cultural and religious practices (Kobeisy, 2004), which can result in Muslim clients attributing a religious base to behaviours that are contrary to Islamic teachings. Alkhateeb and Abudideiri (2007) have noted that accurate Islamic teachings are potentially more flexible and congruous with the positive values of Canadian society than tribal-based cultural values and practices. Similarly, Ahmed (2012) has observed that young Muslim women often prefer to identify with Islamic ideals, which offer them more freedom in comparison to ethnocultural expectations.

In exploring the impact of faith considerations on counselling, researchers have noted the positive therapeutic effect of integrating Muslim clients' understanding of mental health issues and Islamic concepts into the counselling process, whether or not issues of faith are directly related to presenting problems (Baobaid, 2002, 2012; Baobaid & Hamed, 2010; Danespour, 1998, 2012; Haque & Kamil, 2012; Hodge & Nadir, 2008; Schlosser et al., 2009). In addition, scholars have noted the benefits of religion as a protective factor in Muslim youth (Abu Raiya & Pargament, 2010; Ahmed, 2009) and as a source of resiliency in Muslim women subjected to domestic abuse, despite the fact that misinterpreted religious concepts were often exploited to maintain the abuse (Abugideiri, 2012).

SUGGESTED ASSESSMENT INSTRUMENTS, MODELS, AND TECHNIQUES

A number of scholars have developed specific assessment instruments for working with Muslims, such as the Cultural Identity Checklist–Revised (CICL-R) and the Scale to Assess World View, covering areas such as ethnicity, race and culture, gender, sexual orientation, age and life stage, ability level, citizenship, generational length of the family's establishment in the host country, social class, education level, environmental setting, acculturation level, and identification with religion and spirituality (Ibrahim & Dykeman, 2011; Ibrahim & Owen, 1994). Other suggested assessment areas include levels of community support, languages spoken, relationship with home culture, and experience of racism and discrimination (Ibrahim & Dykeman, 2011; Ibrahim & Owen, 1994).

In terms of counselling approaches, the majority of scholars have suggested CBT as the most effective model when working with Muslim clients, as it is present-focused, practical, and can be modified to include Islamic-based cognitive themes (Abudabbeh 2005; Al-Krenawi & Graham, 2005; Amer & Jalal, 2006; Hamdan, 2008; Hodge & Nadir, 2008; Khodayarifar & McClenon, 2011). However, other suggested approaches include emotion-focused therapy for its ability to accommodate the emotional expressiveness associated with Mid-

dle Eastern cultures and its sensitivity to collectivist family structures by avoiding direct confrontations (Amer & Jalal, 2006). Solution-focused therapy (SFT) has also had some successful application with Muslim families through its goal orientation and avoidance of personal disclosure (Chaudhry & Li, 2011). Family systems approaches have proved effective (Danespour, 1998), as have Adlerian approaches (Alizadeh, 2012). In addition, some counsellors have used person-centred models or incorporated elements of this model into other approaches (Al-Thani & Moore, 2012).

A limited number of works have suggested specific intervention tools and models. Hamdan (2008) and Hodge and Nadir (2008) have compiled lists of positive cognitive concepts based on Islamic themes and scriptural sources to replace negative thoughts and to help clients differentiate between maladaptive religious views and adaptive theological beliefs. A Stockholm study has developed a three-step intervention model for immigrant female youth seeking professional help for family honour protection issues (Alizadeh, Hylander, Kocturk, & Tornkvist, 2010). In this intervention model, counsellors created a safe environment for client disclosure, performed risk and safety assessments, and implemented a scaled series of worry-reduction interventions. Researchers in this study concluded that young women wanted more control over their personal and sexual decision-making, yet generally wanted to remain integrated with their families (Alizadeh et al., 2010). This finding underlines the importance of offering counselling approaches that explore family reconciliation and reunification, beyond removing female youth from conflicted family contexts.

These suggested conceptual frameworks, assessment instruments, approaches, and techniques have provided valuable information for the field of counselling Muslims. A present limitation in this area is the relative scarcity of research studies exploring specific measures, such as the levels of distress within the Muslim community, or documenting outcome measures when implementing the suggested models and intervention tools. Also, the suggested interventions have addressed individual clients, individual cognitive patterns (Hamdan, 2008, Hodge & Nadir, 2008), or conflicted youth (Alizadeh et al., 2010), yet have not provided a framework for the family to address honour-related issues as an interactive and interdependent unit.

Potential Contributions from Muslim Community Resources

The Muslim community has begun to produce its own resources to address honour-related violence and the associated problems of domestic violence and intergenerational conflict. The London Family Honour Project (LFHP), based in London, Ontario, is a comprehensive program, providing Muslim families with culturally sensitive, nonviolent alternatives for addressing family conflict (Baobaid, 2002, 2012; Baobaid & Hamed, 2010). Components of this program include research, community outreach, public education campaigns, engagement of community leaders, links with mainstream helping professionals, and culturally sensitive counselling services for potential victims and perpetrators.

The Islamic Social Services Association (ISSA), a Winnipeg-based organization, has produced a number of publications, public education initiatives, and coun-sellor-training programs to address the issues of domestic violence and intergen-erational conflict (ISSA, 2009). Hartford Seminary has produced guidelines for imams and Muslim community leaders in addressing domestic violence as part of their chaplaincy training program (Hartford Seminary, 2014). In addition, the Canadian Muslim community has devoted numerous conferences, publica-tions (including parenting manuals), and public sermons devoted to these issues (Bashir, 2013; Beshir & Beshir, 1998; Fazaga, 2013; Muslim Students' Associa-tion, 1976; Sound Vision, 2014a, 2014b). These collective efforts have gener-ated helpful concepts and programs that can be incorporated into professional counselling approaches.

<div align="center">TOWARD AN INTERVENTION MODEL</div>

Previous studies and Muslim community resources have provided ample mate-rial to be integrated and expanded into a specific intervention model for addressing issues of honour and shame. This model would comprise four component areas:

1. *Component 1* includes counsellor awareness and prerequisite knowledge of Islamic concepts and salient features of the Muslim community.
2. *Component 2* includes culturally sensitive assessment overviews and instru-ments.
3. *Component 3* includes specific counselling methods and tools.
4. *Component 4* includes the reintegration of Muslim families into their com-munities.

Component Area 1: Counsellor Awareness and Prerequisite Knowledge

Component 1 is the broadest category, covering potential counsellor bias, gen-eral understanding of Islam and the Muslim community, specific knowledge of Islamic teachings related to issues of honour and shame, the specific understand-ing of Islamic themes related to mental health and healing, and salient features of Muslim families. As in any multicultural approach, counsellors should be aware of potential bias concerning their clients or their clients' cultural worldviews. This is particularly important in the present context of Canadian society, which contains many negative stereotypes concerning Muslims and Arabs (Abu-Ras & Abu-Bader, 2008; Qasqas & Jerry, 2014). It is also important for counsellors to be well-versed in Islamic concepts, whether or not the client identifies strongly with a religious worldview, as significant features from this worldview may be impact-ing the client through family and community relationships or racial stereotyping. Numerous sources have outlined fundamental Islamic practices and beliefs (Doi, 1997; Hodge & Nadir, 2008; Ibrahim & Dykeman, 2011; Saanei, 2007; Springer et al., 2009), as well as diverse religious affiliations, doctrinal and interpretative orientations, and sectarian divisions (Schlosser et al., 2009).

SPECIFIC RELIGIOUS INJUNCTIONS PERTAINING TO ISSUES OF HONOUR AND SHAME

There is often confusion within the Muslim community between cultural practices and Islamic teachings concerning honour-related violence, domestic abuse, and coercive parenting practices. A more thorough discussion of these issues is warranted.

So-called honour-killing. Starting with contextual factors that contribute to honour-related violence, forced marriage is prohibited under *shariah* (shariah refers to the entire body of Islamic law). Similarly, shariah permits divorce and remarriage. Hence, some of the behaviours considered shameful according to tribally based values are legal rights granted to women under shariah. Also, despite the extreme importance of modesty, chastity, and sexual fidelity within an Islamic moral framework, distressed parents, estranged husbands, and other individuals are actually quite limited by shariah in terms of their recourse to punitive action. Shariah punishments for fornication and adultery are severe (and apply equally to males and females), but require such an extensive burden of proof that virtually only two conditions exist in which punishment can be given. These two conditions are repeated self-confession (of a sane adult, under no duress) or public displays of indecency such that four reliable witnesses can testify that the sexual penetration was complete (Muhammad et al., 2012). Some jurists do not consider pregnancy sufficient grounds to prove that sexual intercourse has taken place, as insemination is possible without complete sexual union (Muhammad et al., 2012). Also, anyone acting under duress, as in the case of rape, is not punishable under Islamic law (Doi, 1997). Finally, punishments for any violation of Islamic law are applicable only under Islamic governments and can only be carried out by authorized agents of the state; hence, scholars have concluded that the proper application of shariah is a protective factor for Muslim women (Faqir, 2001), prohibiting the pre-Islamic tribal practice of honour-killing and, by implication, prohibiting any type of honour-related violence in the context of Canadian society.

The fact that Chesler (2009, 2010) and Feldner (2000) have challenged the unanimous consensus that honour-killing is prohibited in Islam deserves additional discussion, particularly as the views of these authors have been sensationalized and disseminated throughout the Canadian media following the Shafia murders (Jacobs, 2009a, 2009b, 2009c). Feldner (2000) has argued that Muslim scholars connected to the Jordanian Islamic Action Front have objected to reforms of the Jordanian penal code (a code that has been invoked by perpetrators of honour-killing to avoid punishment). Although Feldner is correct in noting the opposition of this group to penal reforms, he has failed to provide essential details about the two relevant articles within this code. Article 98 provides some legal protection for a husband who kills his wife and/or her lover if caught in the act of adultery. According to W. Shearzad, who holds an LLD from Harvard in the study of Islamic and Afghani constitutional law, this defense may be consistent with a

minority interpretation within shariah, in contrast to the majority consensus that would prohibit this defense (personal communication, December 3, 2012). This minority position is also similar to the *crime of passion* defense in Western law, yet has been invoked under the Jordanian penal code only once as a legal defense (Nanes, 2003). The more problematic article, Article 340, excuses a perpetrator for any action taken in response to finding a female "with another in an unlawful bed" (Nanes, 2003, p. 117). This article has been interpreted symbolically to refer to any type of improper conduct—real or imagined—and has been invoked as a defense in every other case of honour-killing falling under the Jordanian penal code. Article 340 directly contradicts shariah law, by evading the burden of proof, and has no basis in Islamic teaching; in fact it was taken, almost word-for-word, from the French Penal Code of 1810 (Fournier, McDougall, & Dekker, 2010; Nanes, 2003). Feldner's failure to include this information makes his findings misleading at best and has been misused as a general condemnation of the Muslim community at large.

Domestic violence and coercive parenting practices. Although Islam supports a patriarchal family structure, marriage is described as a relationship of mutual rights and companionship. Numerous texts caution a husband to treat his wife with respect and gratitude and to provide for her comfort and well-being. In certain exceptional circumstances, a man is given permission to strike his wife (Ibrahim & Abdalla, 2010). However, the religious texts are clear that this permission is limited to a symbolic gesture, with specific prohibitions against causing bruising or other forms of bodily harm. This permission, articulated in the seventh century, was understood as a limiting factor. Although this permission remains in Islamic scriptures and law books, Muslims are required to follow the laws of the land, including all legal injunctions in non-Muslim countries that do not explicitly prevent them from practicing their religion. In this circumstance, Muslims in Canada are not allowed to strike their wives and are instructed by religious leaders to follow the example of the Prophet, who never raised his hand against a woman or child (Abugideiri, 2012; Hartford Seminary, 2014; Ibrahim & Abdalla, 2010; ISSA, 2009). A number of scholarly works have provided a detailed critique of the Quranic verse 4:34, which has been corrupted and taken out of context to justify wife battery (Ibrahim & Abdalla, 2010). Similar arguments can be made in the case of coercive parenting techniques. Although Muslim parents are given permission to use corporal punishment, they are under the same obligation to protect their children from bodily harm. Muslims living in Canada are expected to comply with the social and legal norms that either prohibit or strongly discourage corporal punishment. Religious leaders and educators have instructed Muslim parents to follow the Prophetic example and develop noncoercive parenting techniques (Beshir & Beshir, 1998; Muslim Student Society, 1976; Sound Vision, 2014b).

ISLAMIC CONCEPTS OF MENTAL HEALTH AND HEALING

Helping professionals need to have a thorough grounding in Islamic concepts of mental health. Islamic concepts that are particularly relevant for counselling

include religious perceptions of mental illness and healing, the understanding of suffering, the need for personal responsibility, and specific spiritual remedies for illness. For many Muslims, mental distress is related to a disconnection in an individual's relationships—with God, with family, or with the community. Healing efforts often involve reconnecting these relationships through reciprocal visits and hospitality (especially between blood relations) and through the process of *tawba,* which is translated as repentance but literally means to turn back toward something (in this case to turn back toward God). Suffering is considered an inevitable part of life and can have a beneficial purpose. It can be a warning for Muslims to reorient their lives and correct their relationships, it can be a means of spiritual purification or divine test, or it can simply be the inscrutable Will of God (Abu-Ras, Gheith, & Cournos, 2008; Al-Krenawi & Graham, 1999). In all cases, suffering can bring the quality of mercy, as those who are patient in suffering are promised spiritual rewards both in this life and in the life hereafter. Believers are taught to take personal responsibility for their behaviour, including their response to circumstances beyond their control; a well-known Quranic verse proclaims, "Verily God does not change (a people's) condition unless they change their inner selves" (Quran 13:11; Asad, 1980, p. 360). Muslims also may attribute physical and mental ailments to supernatural and psychic forces, including harassment by demonic powers, the use of sorcery, or the effect of the *evil eye* (which is the negative psychic energy transmitted by a jealous person) (Ali & Aboul-Fotouh, 2012; Utz, 2012). Spiritual remedies include reading Quranic scriptures (in Arabic), often augmented by supplications (*dua*), ritual prayer, and religious invocations (*zikr),* along with fasting and works of charity (Ali & Aboul-Fotouh, 2012; Padela et al., 2012; Utz, 2012). These practices are generally recommended, yet specific Quranic verses may be used, like a spiritual prescription, for spiritual and physical ailments. Muslim clients may ask religious leaders to perform *ruqyah* (reading special Quranic verses for protection and healing) (Utz, 2012).

SALIENT FEATURES OF MUSLIM CLIENTS AND FAMILIES

Muslim clients and families may have a number of distinctive features in terms of family structure, parenting, and social etiquette. In general, Muslims have a collectivist family structure (Al-Krenawi & Graham, 2005), particularly if the family has retained its roots in traditional culture. Family relationships are interdependent, and phases in the family lifestyle may be different than those of the dominant society. For example, young adults may reach adulthood by assuming more responsibility within the family collective, rather than through asserting personal and financial independence, and adult children (particularly females) may not leave home until marriage (Gerson, 1995; Helms, 2013). The extended family is very important and may exert influence on the family unit, whether the extended family is in close physical proximity or not (Al-Krenawi & Graham, 2005; Schlosser et al., 2009). Family dynamics are often focused on maintaining harmony and stability rather than attaining progress or achievements (Baobaid,

2002; Danespour, 1998). The goal of preserving family harmony, or even the semblance of family harmony, may mean that difficult family patterns and interactions may be left unaddressed (Baobaid, 2002; Danespour, 1998; Hodge & Nadir, 2008). In this context, it is often easier for clients to admit somatic symptoms than to discuss problematic relationships.

Families have a patriarchal structure, complementary gender roles, and hierarchies conferring respect and authority on elders. These factors impact the style of decision-making and communication between family members (Danespour, 2012; Hodge & Nadir, 2008). Within this system, junior family members (which may include wives and children) are expected to defer to the decisions of those in higher authority, and extended discussions to explore feelings and options may be interpreted as disrespectful (Abudabbeh, 2005). Muslim parents also have a strong sense of purpose in family life, focused on raising children who are good Muslims, which includes following Islamic codes in dress, behaviour, and religious practices. Muslim parents typically have conservative and nonnegotiable moral values, particularly regarding their daughters. Dating is prohibited, and marriages are often arranged by parents and represent the joining of families (Danespour, 2012; Kobeisy, 2004).

Parents also may expect their children to attain success in the areas of education, finances, and career (Bashir, 2013; Danespour, 1998; Fazaga, 2013; Muslim Students' Association, 1976). Muslim parents assume that it is their duty to transfer their moral values to their children, and may be distressed and confused when their children respond to the different socializing forces of the dominant society (Beshir & Beshir, 1998; Canadian Council on Social Development, 2000; Muslim Students' Association, 1976). Muslim parents are often concerned about how to limit the influence of the outside world (Smith, 2010) and may experience intense guilt for bringing their children into Western society. Some parents may even consider moving back to their countries of origin when their daughters reach adolescence (Danespour, 2012). Fathers, as the heads of families, have the responsibility of protecting family boundaries and restraining family members from inappropriate behaviour (Baobaid, 2002, 2012; Baobaid & Hamed, 2010, Springer et al., 2009), and corporal punishment may be considered justifiable as a means to instill discipline and appropriate behaviour (Abudabbeh, 2005). The differing understanding of parental responsibility and the father's protective role may create distress for parents when confronted with conflicting societal norms, and may lead to cycles of violence in an effort to re-establish family values and boundaries. Baobaid and Hamed (2010) have described the psychological shock of Muslim men who find themselves cast in the role of abusers in Canadian society rather than the role of family protectors.

Counsellors should be aware of significant issues concerning Islamic etiquette and dress. Although there are many cultural and doctrinal variations in the interpretation and extent of gender segregation, all Muslim cultures practice some level of separation between adult males and females (adulthood being demarcated by puberty) (Ibrahim & Dykeman, 2011; Springer et al., 2009). Dress codes and

requirements of modest behaviour apply to both males and females; however, there is typically more pressure on females to conform to cultural expectations (Dwyer, 2000). Unrelated adult males and females are restricted from having physical contact (hence, handshaking can be problematic), nor can they be alone together. Discussing intimate family matters is also discouraged, as is criticizing others behind their backs (Abudabbeh, 2005; Adam & Schewe, 2007; Chaudhry & Li, 2011).

Other salient features of Muslim clients include attitudes toward counselling and their experiences of Islamophobia. Many Muslims are hesitant to seek counselling, either because of community stigma or from an understanding that seeking counselling indicates a deficiency in faith or family relationships (Dwairy, 1998, 2006; Kobeisy, 2004; Schlosser et al., 2009; Sohelian & Inman, 2009). To reveal family secrets, seek counselling, or admit to family problems, including the existence of domestic violence, may also be considered shameful (Abugeideiri, 2012; Adam & Schewe, 2007; Schlosser et al., 2009). Muslims may be apprehensive about the effect of counselling on their own sense of autonomy or self-efficacy (Kobeisy, 2004). Repeated experiences of discrimination and exposure to Islamophobia may make Muslims clients hesitant to trust non-Muslim helping professionals, whom they may identify as part of the hostile dominant society (Abu-Ras & Abu-Bader, 2008; Inayat, 2007). This distrust will be intensified in the context of mandated counselling, or by the entry of child protection agencies into the family. Conversely, Muslims may prefer a non-Muslim counsellor for fear of stigma and breach of confidentiality in front of their own community.

Component Area 2: Assessment

As issues of honour and shame are highly volatile, the first assessment should be to explore risk of harm. ISSA has a zero-tolerance policy for violence or threats of violence, which helps challenge cultural tendencies to view maintaining family secrets as the main priority (ISSA, 2009). ISSA and other Muslim organizations also try to provide Islamic-oriented safe space in Muslim shelters and Muslim foster families. Linking with Muslim organizations can help defuse the experience of cultural alienation and the tendency to interpret this situation as an intrusion from outside social organizations hostile to Islam, factors that would increase the client's marginalization and the risk of honour-related violence. Once risk assessments are completed, some counsellors may prefer informal assessment procedures, exploring significant areas such as levels of acculturation, religious identification, and community support in unstructured interviews. Other counsellors may prefer to implement culturally specific instruments, such as the Cultural Identity Checklist–Revised and the Scale to Assess World View (Ibrahim & Dykeman, 2011; Ibrahim & Owen, 1994). Other tools, such as the genogram (Stanion, Papadopoulos, & Bor, 1997), can clarify family dynamics and the role of the extended family. Danespour (1998) suggested mapping at least three generations. Ecomaps can be used to explore the family's ecosystem (Bronfenbrenner, 1986; Robbins, Mayorga, & Szapocznik, 2003) to identity the various environmental

influences impacting the family. It may be a useful exercise to construct different sets of ecomaps, comparing the environmental influences currently impacting the family with other types of social organization, either from the parents' previous social setting or as theoretical illustrations of the socializing forces that parents assumed or desired for reinforcing parental value systems (Helms, 2013). As there are no studies indicating the superiority of any particular assessment approach, these tools are described as possible resources for counsellors.

Component Area 3: Intervention Methods and Tools

psychoeducation

Counsellors should be able to provide Muslim families with educational counselling to clarify the distinctions between culture and religion, with the goal of correcting cultural practices that are illegal in Canada and in actual violation of Islamic law (Alkhateeb & Abugideiri, 2007; Baobaid, 2002; Baobaid & Hamed, 2010). Although counsellors are trained to not impose value judgements on the cultural practices of their clients, honour-related violence, domestic abuse, and coercive parenting practices are increasingly being acknowledged by Muslim scholars and leaders as non-Islamic and harmful to the community. If counsellors do not feel they have the competency to offer this education, they can access educational publications produced by Islamic organizations (Hartford Seminary, 2014; ISSA, 2009; Sound Vision, 2014a, 2014b), or provide links to appropriate religious leaders. Educational counselling can also help parents to understand the challenges of their environmental context and to develop appropriate parenting strategies to support the growth of Islamic character in their children. These parenting skills and strategies can help parents successfully communicate their value system to their children without resorting to coercive behaviour, thereby reducing intergenerational conflict and the risk factors leading to domestic and honour-related violence.

specific cbt and narrative intervention techniques

There is some overlap between tools for cognitive restructuring, associated with CBT, and the process of deconstructing and reinterpreting constraining interpretations and client stories, associated with narrative therapy. Thus the categorization of CBT and narrative tools is somewhat arbitrary.

CBT tools, reframing unhelpful cognitions with concepts from Islamic scripture. A scriptural verse that can be used to challenge thoughts leading to coercive behaviours is Quran 2:256, "There shall be no coercion in matters of faith" (Asad, 1980, p. 57). Examples from Islamic history reinforce this concept, as in the case of the Prophet's Uncle Abu Talib, who never accepted the call of Islam but remained a beloved figure in the Prophet's life. Verse 49:13, "Verily, the noblest (most honoured) of you in the sight of God is the one who is most deeply conscious of Him" (Asad, 1980, p. 794), can be used to challenge tribal conceptions of honour, particularly as honour in front of God requires adherence to Islamic

law. Honour in front of God is also contrasted against less authentic concepts of honour based on social approval. The idea that honour and dishonour come only from God is reinforced by Verse 3:26: "(God) Thou (honours) whom Thou willest, and (dishonours) whom Thou willest. In Thy hand is all good. Verily, Thou hast the power to will anything" (Asad, 1980, p. 70). Verse 13:11 encourages Muslim clients to take personal responsibility, addressing their experience of public shame with inner spiritual effort: "Verily God does not change (a people's) condition unless they change their inner selves" (Asad, 1980, p. 360). Verse 2:153 encourages Muslim clients to practice patience as an alternative to violent or coercive actions; "Seek aid in steadfast patience and prayer: for behold, God is with those who are patient in adversity" (Asad, 1980, p. 32).

DECONSTRUCTING CONTEXTS AND MEANINGS, DISCOVERING NEW NARRATIVES AND NEW OPTIONS

Stepping back from punishment toward the path of individual moral growth. The development of the first Muslim community, in seventh-century Arabia, was gradual (Eaton, 1985). During its first 13 years (the Meccan period), believers were simply encouraged to develop their own piety and moral behaviour, without any community punishment for social vices (Eaton, 1985). The underlying principle is that the growth of moral character is a gradual process, and punishment for religiously defined immoral behaviour can only be implemented in a fully functioning Islamic society, such as in the later Medinan period (Eaton, 1985), in which case its citizens have presumably had the chance to be educated and socialized in a consistent moral framework. Applying these principles to current Canadian society, parents should consider themselves in the Meccan rather than the Medinan context of Islam. Hence, it is unrealistic for Muslim parents to expect their children to conform completely to Islamic moral norms, particularly if they have not taken significant proactive measures to educate and socialize them in alternative environments. These environments need to include positive support for the development of identity and life competency skills, and they are settings in which children are encouraged to actualize their potential rather than simply be marginalized from the dominant society. The majority of Muslim parents may not have provided the necessary supportive environment or may not have recognized the need for this proactive strategy until they have become alarmed at their children's behaviour. Hence, taking collective family responsibility for the distressing behaviour of some of its members is a more appropriate response than blame, excessive guilt, or resorting to honour-related violence. A collective family *tawba* begins with repentance and moves on to restore positive connections to God and within the family, in the gradual development of faith and moral character.

Moving from rigid patriarchal structures to the Prophetic model of leadership. Although Islam is based on a patriarchal family system, examples from the life of the Prophet demonstrate a servant-based style of leadership (Helms, 2013). Even within his immediate family, the Prophet used the process of consultation (*shura*)

to hear the views of others before making important decisions (Sound Vision, 2014a). He never used coercion or humiliation, but respectfully appealed to the reason of his family members and left room for disagreement and differing opinions. He also led by example, not imposing tasks or expectations on others that he was not willing to undertake himself. The Prophetic model of leadership may be a realistic intervention for traditional families in that it does not confront a patriarchal family structure, yet it reduces the negative impact of unequal gender relations and cultural belief in male dominance (both of which are increased risk factors for family violence). This model also can provide a workable compromise between traditional hierarchical family structures and the more equalitarian expectations of children socialized in the dominant culture, hence reducing intergenerational conflict (Alkhateeb & Abugideiri, 2007; Helms, 2013). Applying this model to the issue of forced and/or arranged marriage, Shahina Siqqique, the director of the ISSA, has promoted a flexible alternative, suggesting that families cooperate together in "assisted marriage," an arrangement that would honour the parents' input while giving more voice to the adult children (personal communication, November 19, 2011).

New definitions of honour and success. Drawing on scriptural and historical resources, Muslim clients can construct new definitions of honour and success, based on pleasing God, while resisting social pressure to act against the limits of shariah or to use coercive methods to attain one's goals. With the Islamic concepts *qadr* and *qasmat* (destiny), Muslims can be encouraged to face their difficulties with patience and prayer, accepting what has been decreed by God's Will, while hoping and trusting in His Mercy. In this way, Muslims may find a balance between accepting the present reality of difficult behaviours, while retaining the possibility of hope for the future. This paradigm does not require Muslim parents to discard their deeply cherished moral values, yet avoids coercive actions and leaves open a door of hope for families experiencing conflict.

Component Area 4: Finding a New Face in the Muslim Community

After Muslim clients, as individuals or as a family, deconstruct their story of shame and move toward a new story of hope and possibility, it is time to reintegrate them into their communities. Community programs such as the London Family Honour Project (LFHP) (Baobaid, 2002, 2012; Baobaid & Hamed, 2010) provide a possible framework. Resources from ISSA (2009), Hartford Seminary (2014), and Sound Vision (2014a, 2014b) can also be utilized to facilitate an environment of acceptance and responsibility. If there are no local support groups, helping professionals can try to coordinate with Muslim groups or leaders in other locations to establish appropriate networks. Effective implementation of this component needs engagement from stakeholders within the Muslim community (Baobaid 2002, 2012), allowing local groups to provide a new collective public witness for previously shamed families, as they regain their face in front of their community and journey toward a new understanding of honour and dignity.

<div style="text-align:center">CONCLUSION</div>

Honour and shame are emotional and volatile issues in the Canadian Muslim community. Although scholars have access to a large body of literature providing insight into the related areas of honour-related violence and counselling Muslims, little work has been done to provide counsellors with specific therapeutic tools to counsel Muslim families in distress. The suggested four-component intervention model seeks to bring together this wide body of information and to present it in a practical form that can be used by helping professionals in the field. While respecting an Islamic worldview, counsellors can use this intervention model to challenge and replace coercive cultural practices that increase the risk of honour-related violence with religious concepts that facilitate respectful family relations. The client's religious enthusiasm, which previously may have been used to justify abusive behaviours, can be rechanneled in support of a religious worldview that promotes harmony, healing, and resilience.

The next steps in this area would be to test the efficacy of this approach in counselling practice. Empirical research in related areas, such as defining the intensity and characteristics of honour-related distress in the Muslim community, would also help clarify the fundamental factors involved in this issue. Further work may also include adjusting the specific cognitive and narrative concepts to address other areas in which Muslims experience shame, with the aim of authoring many new stories of hope and possibility within the Canadian Muslim community.

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