

THE PSYCHOTHERAPEUTIC EFFECT OF THE PHENOMENON OF PATIENCE IN DISEASES

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Abstract

This article analyzes the psychotherapeutic impact of the phenomenon of patience on human health, particularly in the treatment of mental and psychosomatic disorders. Drawing on psychological research by Schnitker (2007, 2012), Comer and Sekerka (2014), Ryan (n.d.), and Sadeghniat-Haghighi et al. (2023), as well as on religious-psychological and Islamic perspectives, the study examines the role of patience in reducing stress, depression, and anxiety, and explores its cognitive, emotional, and behavioral mechanisms. The article also considers the therapeutic effects of patience in stress and anxiety disorders, depression, psychosomatic conditions, and insomnia, and proposes three evidence-based methods for cultivating patience: cognitive reframing, mindfulness practice, and gratitude training. The findings confirm that patience constitutes an important internal psychotherapeutic resource and should be integrated into preventive and clinical care.

Keywords

patience; psychotherapy; stress; depression; coping strategy; mental health; emotional regulation; psychosomatic disorders; religiosity; mindfulness.

INTRODUCTION

In modern psychology and medicine, the influence of psychological factors on the development and course of diseases is widely studied. Patience is considered an important internal resource that enhances an individual's resilience to stress (Schnitker & Emmons, 2007:171). Research shows that patience contributes to emotional stability and facilitates the recovery process in various illnesses (Comer & Sekerka, 2014:32). In Islamic tradition, patience (sabr) is defined as endurance in the face of grief, hardship, and suffering; the ability to restrain one's nafs (desires) voluntarily; and the capacity to remain content in all circumstances (Botirova, 2024:45). Several verses of the Qur'an call believers to practice patience, and hadiths indicate that no greater blessing has been granted to a person than patience.

In Sufism, patience is interpreted in various ways. According to Sarah Schnitker, Associate Professor of Psychology and Neuroscience at Baylor University, patience is the ability to remain calm in the face of difficulties, waiting, frustration, or suffering (Schnitker, 2012:263). From a psychological perspective, patience is a trait that positively influences psychological well-being and is considered one of the character strengths associated with spirituality and religiosity (Schnitker & Emmons, 2007:172). Just as religiosity fosters patience, patience in turn enhances religiosity. Beyond being merely an emotion, patience is a cognitively grounded construct that, when transformed into behavior and attitude, becomes a character strength supporting both spiritual and personal development.

The aim of this article is to analyze the psychotherapeutic mechanisms through which patience operates, to examine its therapeutic effects across a range of clinical conditions, and to propose evidence-based strategies for its cultivation in therapeutic and preventive contexts.

METHODS

This study employs a narrative literature review and theoretical analysis. The sources examined include empirical psychological studies on patience and well-being (Schnitker, 2012; Schnitker & Emmons, 2007; Comer & Sekerka, 2014), studies on patience and physiological outcomes (Ayduk et al., 2016), research on supportive psychotherapy (Sadeghniiat-Haghighi et al., 2023), Islamic and religious-psychological perspectives on patience (Botirova, 2024; Dastgheib, 2018), research on psychological trauma (Choriyevev et al., 2024), and Uzbek scholarly contributions to psychotherapy (Salimova, 2026). The analysis proceeds thematically, examining the psychological nature of patience, its psychotherapeutic mechanisms, its therapeutic effects across specific clinical conditions, its religious-psychological dimension, and strategies for its cultivation.

RESULTS

1. The psychological nature of patience. Patience is defined as the ability of an individual to endure difficulties, regulate emotions, and pursue long-term goals, encompassing cognitive, emotional, and behavioral components (Schnitker & Emmons, 2007:170). Situations requiring patience can be categorized into three types: involuntary events such as accidents, death, aging, illness, and natural disasters, which cause psychological, physical, social, and economic losses; situations dependent on human will, such as planning, education, work, treatment, and caregiving, where precautionary measures and effort can be effective; and circumstances beyond human control, where individuals still possess the capacity to respond constructively (Botirova, 2024:47).

As an internal resource, patience increases stress tolerance, reduces impulsive reactions, and enhances conscious decision-making (Comer & Sekerka, 2014:33). Linguo-cognitive studies interpret patience as a complex and multidimensional concept (Iskandarova, 2023:12). A study published in 2018 in Health, Spirituality and Medical Ethics involving 440 university students found that patient individuals demonstrated higher levels of empathy, altruism, and self-discipline, and were less prone to negative emotions, particularly those associated with neuroticism (Dastgheib, 2018:5). Furthermore, research by Comer and Sekerka (2014:35) showed that patient individuals are less driven by immediate gratification, tend to think carefully before making decisions, and are less likely to experience anxiety.

2. *Psychotherapeutic mechanisms of patience.* Three principal psychotherapeutic mechanisms have been identified through which patience exerts its beneficial effects. First, emotional regulation: patience helps individuals manage negative emotions, thereby reducing anxiety and depressive symptoms (Schnitker, 2012:265). Second, cognitive reframing: a patient individual tends to reinterpret problems from a different perspective, which provides psychological relief and modifies maladaptive thought patterns. Third, catharsis and internal balance: in psychotherapy, patience contributes to overcoming inner conflicts and achieving emotional stability; processes such as catharsis and insight play an important role in this dimension (Salimova, 2026:14).

3. *Therapeutic effects of patience in specific conditions.* In stress and anxiety disorders, patience enhances stress resistance and expands adaptive capacities of the organism, resulting in decreased cortisol levels and stabilization of the autonomic nervous system (Ryan, n.d.; Salimova, 2026:16). Psychotherapy and social support are essential in treating psychological trauma associated with these conditions (Choriyevev et al., 2024:3). According to Ryan, anger and irritability can increase cortisol and adrenaline levels, which are associated with danger responses: "Feelings of impatience can make your body feel as though it is being chased by a tiger and facing imminent danger. We should not overburden our systems in this way" (Ryan, n.d., cited in Comer & Sekerka, 2014:36).

In depression, patience helps preserve hope and reduces negative thinking patterns, leading to a decrease in depressive symptoms (Schnitker & Emmons, 2007:176). In psychosomatic disorders – including cardiovascular and gastrointestinal diseases – patience contributes to reduction of stress factors, stabilization of the autonomic nervous system, and acceleration of recovery processes. Patience can alleviate negative mental health symptoms and related physical manifestations such as headaches, acne, diarrhea, and stomach ulcers

(Dastgheib, 2018:7). Studies conducted in the 1980s linked impatience to higher levels of irritability and increased risk of cardiovascular issues; impatient individuals also tend to report more physical complaints and poorer sleep quality.

A study published in 2016 in the Proceedings of the National Academy of Sciences found that higher levels of impatience are associated with shorter telomeres, which are protective components of DNA (Ayduk et al., 2016:14232). Since telomeres shorten with age, impatience may accelerate the aging process. In insomnia and neurotic conditions, supportive psychotherapy – including cognitive-behavioral therapy (CBT) – has been shown to significantly reduce anxiety and insomnia (Sadeghniaat-Haghighi et al., 2023:142). Patience serves as an internal reinforcing factor in this therapeutic process.

4. Patience in interpersonal relationships and academic achievement. In interpersonal relationships, patience manifests as a form of kindness. Research shows that patient individuals are more cooperative, empathetic, fair, and forgiving (Comer & Sekerka, 2014:37). Comer and Sekerka (2014:38) wrote: “Patience involves willingly accepting personal discomfort to alleviate the suffering of others.” Similarly, Schnitker and Emmons (2007:174) noted: “Patience allows individuals to tolerate others’ shortcomings, thereby fostering generosity, compassion, empathy, and forgiveness.” In her 2012 study, Schnitker also examined whether patience helps students accomplish tasks. Over the course of a semester, five surveys revealed that patient individuals exert more effort to achieve their goals compared to others; those with interpersonal patience were particularly successful in reaching their objectives (Schnitker, 2012:268).

5. Religious and psychological dimensions. In religious teachings, patience is considered a key virtue that strengthens mental health. Studies confirm its positive effects on stress, depression, and phobias (Botirova, 2024:51; Dastgheib, 2018:9). In Islamic understanding, being patient is considered one of the fundamental virtues of believers, and in Sufism, patience is interpreted as a multidimensional station on the path of spiritual development. In this context, patience functions as a coping strategy, enabling individuals to accept and adapt to difficulties, and is simultaneously a spiritual practice and a psychological resource (Botirova, 2024:53).

6. Evidence-based methods for developing patience. Psychologists propose three main methods for developing patience (Schnitker, 2012:270; Comer & Sekerka, 2014:40). First, cognitive reframing of the situation: impatience is not merely an automatic emotional response but involves conscious thoughts and beliefs. Since patience is linked to self-control, consciously regulating emotions helps strengthen self-discipline. Second, practicing mindfulness: psychologist

Christine Carter recommends mindfulness practices, such as deep breathing and awareness of emotional reactions, to cultivate patience. Third, practicing gratitude: studies show that individuals who feel gratitude are better at delaying gratification; being thankful reduces the urge for immediate satisfaction and helps cope with frustration and difficulties (Schnitker & Emmons, 2007:178).

DISCUSSION

The findings reviewed in this article converge on a consistent picture: patience is not merely a passive endurance of hardship but an active, cognitively grounded capacity with measurable physiological, psychological, and interpersonal benefits. The evidence linking impatience to elevated cortisol and adrenaline levels (Ryan, n.d.), shortened telomeres (Ayduk et al., 2016:14232), increased cardiovascular risk, and poorer sleep quality demonstrates that the health consequences of impatience are not confined to subjective psychological experience but extend into biological aging and physical morbidity.

The integration of Islamic and Sufi perspectives on patience with contemporary psychological research represents an important theoretical contribution. Both traditions identify patience as a multidimensional construct that encompasses emotional regulation, cognitive reframing, and behavioral persistence – precisely the three mechanisms identified in modern psychotherapy as central to effective coping (Salimova, 2026:18; Botirova, 2024:53). This convergence suggests that religious traditions of patience cultivation may constitute an underexplored but potentially powerful resource for culturally adapted psychotherapeutic intervention, particularly in Muslim-majority contexts such as Uzbekistan (Choriyev et al., 2024:5; Dastgheib, 2018:10).

The three evidence-based methods for developing patience – cognitive reframing, mindfulness, and gratitude training – are already established components of cognitive-behavioral and acceptance-based therapies (Sadeghniaat-Haghighi et al., 2023:145; Schnitker, 2012:270). Their explicit framing as tools for cultivating patience could enhance their communicability and cultural acceptability in populations for whom patience is a deeply held moral and religious value.

CONCLUSION

The phenomenon of patience is an important psychotherapeutic resource that contributes to reduction of stress and anxiety, enhancement of emotional stability, prevention of psychosomatic disorders, and improvement of treatment effectiveness (Schnitker & Emmons, 2007; Comer & Sekerka, 2014; Sadeghniaat-Haghighi et al., 2023). Therefore, developing patience should be considered an essential component of psychotherapy and preventive care.

In conclusion, patience can be defined as a psychological phenomenon involving the voluntary endurance of difficulties, threats, and losses, along with the ability to wait for outcomes. It is an analytical process experienced through emotional, cognitive, and behavioral dimensions. Throughout life, patience provides strength, helps individuals find balance and harmony, and acts as a guiding psychological force that supports success and ultimately leads to well-being. The integration of patience-based strategies into both clinical psychotherapy and health promotion represents a promising direction for future research and practice (Botirova, 2024; Salimova, 2026).

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