

FROM ANXIETY TO EMPOWERMENT: THE TRANSFORMATIVE POTENTIAL OF COGNITIVE BEHAVIORAL THERAPY FOR HEALING (CBTH) AMONG PRE-SERVICE TEACHERS IN HIGHER EDUCATION: A NARRATIVE REVIEW

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Abstract: *This structured narrative review examines the transformative potential of Cognitive Behavioral Therapy for Healing (CBTH) in addressing anxiety among pre-service teachers in higher education. The review responds to a specific conceptual gap: traditional Cognitive Behavioral Therapy (CBT) has an established evidence base for anxiety reduction, healing-centered education emphasizes restoration, relational safety, agency, identity, and systemic support, but the use of CBTH for pre-service teachers remains insufficiently differentiated and empirically underexamined. A PRISMA-informed structured narrative review was conducted through database searches in Scopus, Web of Science, PsycINFO, ERIC, PubMed, and Google Scholar, covering publications from 2000 to 2025. From 1,066 records initially identified, 537 duplicates were removed, 529 titles and abstracts were screened, 289 documents were assessed for eligibility, and 50 documents were included in the final synthesis. A deductive-inductive thematic synthesis generated categories related to anxiety conceptualization, CBT-CBTH distinctions, mechanisms of transformation, advantages and limitations, intervention modules, controversies, implications, and future research. The synthesis indicates that CBTH may support anxiety reduction, emotional regulation, resilience, and professional self-efficacy; however, CBT evidence should not be treated as direct evidence for CBTH among pre-service teachers. Major gaps remain, including limited teacher-specific CBTH intervention studies, inconsistent conceptualizations of empowerment and healing, reliance on short-term outcomes, and insufficient cultural adaptation. Future research should prioritize longitudinal, culturally responsive, and mixed-method studies to establish whether CBTH can be sustainably embedded within teacher preparation programs.*

Keywords: *CBTH, pre-service teachers, anxiety, teacher education, empowerment.*

Introduction

Anxiety among pre-service teachers has become an increasingly significant concern within higher education because psychological well-being shapes teaching competence, professional identity, practicum performance, and long-term career sustainability (Wang, 2026; Zhang et al., 2023). Pre-service teachers, defined as students enrolled in formal teacher education programs prior to full certification, must navigate academic coursework, practicum expectations, classroom performance evaluation, mentor feedback, and continuing educational reform. These cumulative stressors may heighten anxiety, weaken instructional confidence, reduce self-efficacy, and increase vulnerability to burnout before full entry into the profession (Agyapong et al., 2022). The key problem is not only the presence of anxiety, but the lack of a clearly differentiated intervention logic for this population. What is already known is that traditional CBT has strong empirical support as a structured treatment for anxiety and related disorders, although recent meta-analytic evidence also shows that effect sizes vary according to diagnosis, comparator condition, and follow-up period (Bhattacharya et al., 2023; Kaczurkin & Foa, 2015).

Healing-centered models, by contrast, are not merely symptom-reduction models. They frame healing as the restoration of agency, identity, relational safety, cultural grounding, and systemic support within the environments where individuals learn and work (Feldman, 2025; Ginwright, 2018; Miller & Flint-Stipp, 2024). Cognitive Behavioral Therapy for Healing (CBTH) represents an emerging adaptation of traditional CBT that retains cognitive restructuring and behavioural change strategies while adding a restorative orientation toward emotional recovery, resilience-building, empowerment, and identity coherence (Arip, 2024). Existing CBTH-related evidence in Malaysia, including the MA-CBTH anxiety module and the MPKCBT-H character development module, suggests feasibility in student and school-based contexts (Suyot & Arip, 2025; Wan Zainal Abidin et al., 2024). However, these findings cannot be generalized directly to pre-service teachers without caution because teacher candidates experience profession-specific stressors such as practicum evaluation, classroom management anxiety, and fragile professional identity formation.

Therefore, the specific unknown addressed by this review is how CBTH can be conceptually distinguished from traditional CBT and broader healing-centered education, and how it may be tailored to the anxiety experiences of pre-service teachers in higher education. Specifically, this review examines prevalence patterns, contributing stressors, theoretical foundations, intervention mechanisms, reported outcomes, limitations, and research gaps. By separating what is known about CBT, what is known about healing-centered models, and what remains unknown about CBTH for pre-service teachers, the review provides a more critical foundation for educator preparation programs, institutional mental health strategies, and future teacher development research.

Method

This article adopted a structured narrative review design, specifically a PRISMA-informed narrative synthesis rather than a systematic review or meta-analysis. A narrative review was selected because the literature on CBTH for pre-service teachers is conceptually emerging, methodologically heterogeneous, and not yet sufficient for pooled effect-size estimation (Snyder, 2019). PRISMA 2020 elements were used only to improve transparency in reporting

the identification, screening, eligibility, and inclusion stages, not to claim full systematic-review status (Page et al., 2021). Electronic database searches were conducted using Scopus, Web of Science, PsycINFO, ERIC, PubMed, and Google Scholar to ensure broad interdisciplinary coverage across psychology, education, counselling, and mental health research. Backward citation tracking was conducted by reviewing the reference lists of key articles, while forward citation searches were performed to identify more recent studies citing foundational works.

The search strategy combined key concepts related to intervention, population, and outcome. Boolean operators were applied using the following keywords: “Cognitive Behavioral Therapy” OR “CBT” OR “Cognitive Behavioral Therapy for Healing” OR “CBTH”; “anxiety” OR “stress” OR “psychological distress”; “pre-service teachers” OR “teacher trainees” OR “student teachers”; and “higher education” OR “teacher preparation programs.” Searches were limited to studies published in English between 2000 and 2025 to include foundational CBT literature while capturing recent CBTH and healing-centered education publications available at the revision stage. Peer-reviewed empirical studies were prioritized; however, theoretical papers, conceptual papers, and high-quality dissertations were included when they contributed directly to the conceptualization of CBTH, anxiety, psychological healing, or teacher education.

Studies were included if they examined CBT or CBTH interventions addressing anxiety-related outcomes, focused on pre-service teachers or closely related educational populations, and demonstrated sufficient methodological clarity. Screening was conducted in four stages. First, 1,066 documents were identified through database searching and citation tracking. Second, 537 duplicates were removed, leaving 529 records for title and abstract screening. Third, 240 records were excluded because they were not focused on CBT/CBTH, anxiety or stress, teacher education, higher education populations, or scholarly evidence, leaving 289 documents for eligibility assessment. Fourth, 239 full-text documents were excluded because they were non-scholarly, focused only on in-service teachers without transferable implications, lacked methodological clarity, did not address anxiety-related outcomes, or discussed CBT without relevance to healing-centered adaptation. The final synthesis included 50 documents, corresponding with the PRISMA-based flow diagram in Figure 1.

Thematic synthesis was generated through a deductive-inductive process. Initial deductive categories were derived from the review objectives: CBT evidence, healing-centered models, CBTH intervention evidence, pre-service teacher anxiety, empowerment, and implementation issues. During full-text reading, inductive codes were added for recurring concepts such as practicum anxiety, professional identity development, systemic stressors, cultural adaptation, short-term measurement, and conceptual ambiguity. Similar codes were then clustered into the final synthesis categories used in the Discussion: anxiety conceptualization, theoretical foundations, transformation mechanisms, advantages and limitations, intervention modules, controversies, practice and policy implications, and integrative conclusions. This procedure follows guidance for transparent narrative synthesis and thematic analysis while acknowledging the interpretive nature of a narrative review (Braun & Clarke, 2022; Snyder, 2019).

Discussion

Synthesis Analysis

To avoid conflating evidence, this discussion applies three analytic boundaries. First, CBT evidence is treated as evidence for anxiety reduction through cognitive and behavioural change. Second, healing-centered literature is treated as a broader educational and relational lens emphasizing restoration, agency, identity, culture, and systems. Third, CBTH is treated as an emerging hybrid adaptation that requires its own teacher-specific validation. Consequently, claims about CBTH among pre-service teachers are presented as provisional unless supported by direct teacher education evidence.

1. Conceptualizing Anxiety Among Pre-Service Teachers in Higher Education

The literature consistently identifies anxiety as a pervasive and multifaceted challenge among pre-service teachers in higher education. It is shaped by cognitive distortions, practicum demands, professional identity development, academic pressures, classroom management concerns, and evaluative feedback (Gutierrez Mendieta, 2024; Zhang et al., 2023). However, the evidence is uneven: many studies describe anxiety during practicum or identity formation, but fewer evaluate targeted interventions for teacher candidates. Therefore, anxiety in this review is treated as profession-specific situational distress that may overlap with, but is not identical to, clinical anxiety disorders.

Within this context, CBTH emerges as a framework that extends beyond symptom reduction to address cognitive restructuring, emotional regulation, and healing-oriented reflection (Arip, 2024). However, the available CBTH evidence remains concentrated in student and school-based modules rather than teacher education. The MA-CBTH study supports anxiety reduction among high school students, but it does not establish effectiveness for pre-service teachers or practicum-specific anxiety (Wan Zainal Abidin et al., 2024). This distinction is important because the transfer from general student anxiety to teacher candidate anxiety remains an assumption rather than a confirmed empirical finding.

However, the literature reveals conceptual inconsistencies. Some scholars emphasize anxiety as a deficit that should be reduced to improve teaching performance, whereas others suggest that manageable anxiety may stimulate reflection and professional growth (Kobra, 2024). CBTH offers a mediating perspective by reframing maladaptive anxiety into adaptive awareness through cognitive restructuring and healing-oriented reflection. Yet empirical studies often fail to distinguish clinical anxiety disorders from profession-specific situational anxiety, creating methodological ambiguity (Aldrup et al., 2020). This gap limits clarity regarding whether CBTH protocols should be designed as therapeutic interventions, preventive psychoeducational modules, or professional identity-development tools for pre-service teachers.

2. Theoretical Foundations of CBTH

Traditional CBT is grounded in the principle that maladaptive cognitions influence emotional and behavioural outcomes, and its efficacy for anxiety-related disorders has been supported across several empirical reviews (Bhattacharya et al., 2023; Kaczurkin & Foa, 2015). CBTH extends this cognitive-behavioural base by explicitly incorporating a healing dimension that emphasizes restoration of self-belief, identity coherence, emotional resilience, and empowerment within professional formation (Arip, 2024). The distinction is critical: evidence for traditional CBT's clinical efficacy should not be cited as direct proof of CBTH's

effectiveness in teacher education. Instead, CBT provides the theoretical base, while CBTH requires contextual validation within the realities of practicum, supervision, institutional assessment, and teacher identity development.

The literature widely agrees that cognitive distortions such as catastrophizing classroom failure, personalization of mentor feedback, and perfectionistic thinking contribute significantly to pre-service teacher anxiety (Gutierrez, 2024). CBTH interventions target these distortions through cognitive restructuring, behavioral experiments, and guided reflective practices.

Despite strong empirical support for traditional CBT in anxiety treatment, recent meta-analytic evidence indicates that placebo-controlled CBT effects for anxiety-related disorders can be smaller than earlier meta-analyses suggested and may vary substantially across diagnoses and study designs (Bhattacharya et al., 2023). This challenges overly broad claims that CBT evidence automatically guarantees CBTH outcomes. In teacher education, the concern is stronger because many stressors are systemic rather than purely cognitive, including workload intensity, practicum evaluation pressure, mentor relationships, and institutional expectations. A CBTH programme would therefore need to combine individual coping skills with institutional supports rather than implying that anxiety is only an individual deficit (Miller & Flint-Stipp, 2024).

A notable gap remains because few studies explicitly examine CBTH as a distinct adaptation tailored to teacher education contexts. Most intervention evidence is borrowed from general student anxiety models rather than constructed around pedagogical identity development, practicum performance, and classroom authority formation. Longitudinal evidence assessing whether CBTH produces sustained healing, improves professional self-efficacy, or reduces early-career attrition remains limited. Therefore, this review treats CBTH as promising but not yet established for pre-service teachers.

3. Mechanisms of Transformation: From Anxiety Reduction to Empowerment Through CBTH

Across the literature, it is more accurate to state that CBT has established mechanisms for anxiety reduction, whereas CBTH is hypothesized to extend these mechanisms into healing, empowerment, and professional identity development. Core mechanisms that may be adapted for pre-service teachers include:

- Cognitive restructuring of maladaptive beliefs
- Behavioral exposure to feared teaching situations
- Emotional regulation skill development
- Reflective reframing of professional setbacks

These mechanisms are consistent with CBTH module-based interventions that incorporate structured activities such as journaling, psychoeducation, emotional regulation, and cognitive restructuring tasks (Arip, 2024; Wan Zainal Abidin et al., 2024). However, current evidence supports feasibility and anxiety reduction among general student populations more strongly than it supports professional identity outcomes among pre-service teachers. Claims about empowerment should therefore be framed cautiously as a potential outcome requiring further validation, rather than as a demonstrated outcome across teacher education settings.

Nonetheless, a conceptual divergence persists in how empowerment is measured. Many quantitative studies equate empowerment with lower anxiety scores or improved self-efficacy,

while qualitative perspectives suggest that empowerment involves deeper identity affirmation, self-trust, and perceived agency within institutional constraints (Dempsey, 2023). This discrepancy reveals a methodological gap: future CBTH research should combine validated anxiety measures with qualitative accounts of practicum experience, identity formation, and perceived professional agency. Without this mixed-method approach, CBTH risks being evaluated only as symptom management rather than as a healing-centered professional development framework.

4. Advantages and Limitations of CBTH in Higher Education Contexts

The literature identifies several advantages of implementing CBTH within teacher preparation programs:

- Structured, time-limited format adaptable to academic schedules
- Skill-based techniques promoting autonomy and metacognition
- Strong evidence base in anxiety reduction
- Alignment with reflective pedagogical frameworks

Group-based CBTH interventions are promising because they may offer peer normalization, shared reflection, stigma reduction, and structured skill practice (Arip, 2024). Nevertheless, their effectiveness in higher education depends on facilitator competence, ethical referral pathways, institutional support, and sensitivity to students who may require clinical mental health care beyond a psychoeducational module.

However, limitations warrant attention. CBTH's cognitive emphasis may insufficiently address relational, emotional, cultural, or systemic dimensions of teaching practice if implemented as a stand-alone module. Implementation barriers such as limited trained facilitators, crowded teacher education curricula, weak referral systems, and resource constraints may also limit scalability. These limitations mean that CBTH should be positioned as complementary to, not a replacement for, mentoring, practicum supervision reform, workload review, and institutional well-being policies.

Cultural responsiveness also remains underdeveloped in CBTH adaptations. Healing-centered education emphasizes culture, identity, relational safety, and systemic context; therefore, CBTH modules should not simply import Western clinical procedures without adaptation (Ginwright, 2018; Miller & Flint-Stipp, 2024). Malaysian CBTH-related modules provide encouraging local evidence of contextual suitability in school settings, but their transferability to higher education and teacher preparation remains to be tested (Suyot & Arip, 2025; Wan Zainal Abidin et al., 2024).

Finally, institutional integration remains inconsistent. While module-based studies show promise, sustainable adoption requires policy-level commitment, trained facilitators, ethical screening, referral procedures, and curriculum embedding. Without structural support, CBTH risks remaining a supplementary stress-management activity rather than a transformative component of teacher preparation.

5. CBTH-Based Intervention Modules in Educational Contexts

CBTH has increasingly been operationalized through structured intervention modules within educational settings. For instance, the MA-CBTH module has been empirically tested among secondary school students, demonstrating significant reductions in anxiety levels between treatment and control groups. The intervention utilized structured cognitive-behavioral

techniques, including psychoeducation, emotional regulation, and cognitive restructuring, delivered over multiple sessions (Wan Zainal Abidin et al., 2024).

Similarly, module-based applications of CBTH, such as the Character Development Module (MPKCBT-H), have demonstrated strong content validity and contextual suitability within Malaysian educational settings, highlighting its adaptability and cultural relevance (Suyot & Arip, 2025). These findings reinforce the potential of CBTH not only as a therapeutic framework but also as a structured pedagogical and intervention tool within teacher education and student development contexts.

6. Controversies and Divergent Perspectives

A central controversy concerns the locus of responsibility. Does CBTH risk placing the burden of adaptation solely on pre-service teachers while systemic stressors remain unchanged? Critics argue that focusing on individual healing may obscure institutional accountability. Conversely, advocates contend that empowering teachers through CBTH enhances resilience within imperfect systems (Arip, 2024).

Another debate concerns preventive versus remedial implementation: should CBTH be integrated universally into teacher education programs as a proactive resilience-building tool, or reserved for individuals with clinically significant anxiety? Existing student-based CBTH evidence supports the feasibility of preventive modules, but direct comparative studies among pre-service teachers remain limited (Suyot & Arip, 2025; Wan Zainal Abidin et al., 2024). Therefore, preventive integration should be accompanied by clear screening and referral mechanisms so that students with severe anxiety receive appropriate clinical support.

These controversies reflect broader tensions between structural reform and individual skill-building. The strongest interpretation is not that CBTH alone can solve teacher anxiety, but that CBTH may complement institutional reform by strengthening cognitive coping, reflective capacity, and professional agency while educator preparation programs address workload, supervision quality, and assessment pressures.

7. Implications for Practice, Policy, and Future Research

The synthesis indicates that CBTH holds transformative potential when contextually adapted to teacher education. Practically, embedding CBTH-informed modules within coursework could normalize mental health discourse and strengthen cognitive resilience during professional formation.

Policy implications include integrating well-being frameworks into accreditation standards and institutional teacher preparation guidelines. Faculty development initiatives are also essential to ensure fidelity and sustainability. However, policy adoption should avoid treating CBTH as a low-cost substitute for institutional responsibility. Future research should prioritize:

- Longitudinal studies examining early-career outcomes
- Comparative analyses between CBTH and alternative approaches (e.g., mindfulness-based interventions)
- Culturally responsive CBTH adaptations
- Mixed-method designs exploring subjective healing alongside quantitative symptom reduction

A particularly critical gap lies in understanding how CBTH contributes to professional identity consolidation over time.

8. Integrative Conclusion: CBTH as a Transformative Framework

The literature supports CBTH as a promising, evidence-informed, and adaptable framework, but the strength of evidence varies across its components. Evidence for traditional CBT is stronger than evidence for CBTH among pre-service teachers, while healing-centered education provides a valuable but broader conceptual lens (Bhattacharya et al., 2023; Ginwright, 2018). Therefore, CBTH should be described as a potential pathway from anxiety toward empowerment, contingent on contextual sensitivity, institutional support, cultural adaptation, and direct teacher education research.

When implemented as a proactive, identity-centered intervention, CBTH extends beyond anxiety management to foster resilience, reflective competence, and professional self-efficacy. Nevertheless, unresolved methodological and conceptual gaps underscore the need for continued empirical inquiry. Ultimately, moving “from anxiety to empowerment” requires reframing CBTH not simply as a therapeutic intervention, but as a proposed developmental and healing-centered component embedded within teacher preparation. At present, this claim should be interpreted as a theoretically grounded proposition rather than a fully established empirical conclusion for pre-service teachers.

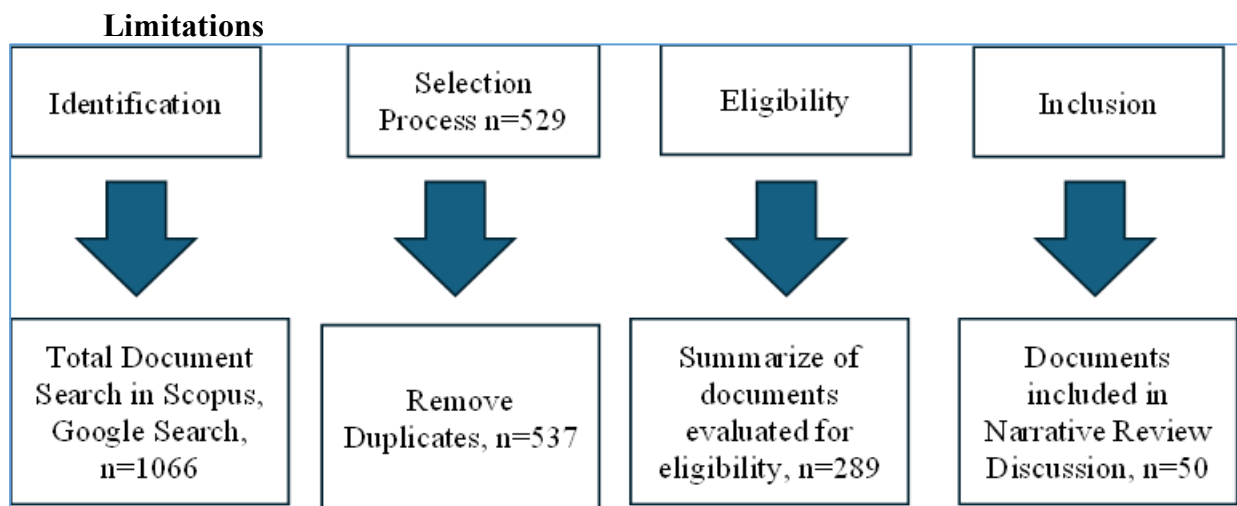


Figure 1: PRISMA-based Flow Diagram of Document Selection Process for Narrative Review

While this narrative review provides a synthesized and critical examination of the transformative potential of Cognitive Behavioral Therapy for Healing (CBTH) among pre-service teachers in higher education, several limitations must be acknowledged. Recognizing these weaknesses strengthens the transparency and credibility of the review and provides direction for future scholarly work.

1. Methodological Limitations of the Narrative Review Design

First, the inherent nature of this structured narrative review presents methodological constraints. Unlike systematic reviews or meta-analyses, narrative reviews do not always adhere to rigid protocols for study selection, quality appraisal, and statistical aggregation. Although PRISMA

2020 elements were used to make the document selection process transparent, this review remains interpretive rather than statistically pooled (Page et al., 2021; Snyder, 2019). Consequently, findings are shaped by thematic interpretation rather than quantitative effect-size comparison.

Additionally, narrative synthesis allows for conceptual integration across diverse methodologies; however, it also increases the risk of selective emphasis. The absence of formal quality scoring for included studies may limit the precision with which strong and weak evidence are differentiated. Future reviews could strengthen methodological rigor by incorporating hybrid approaches, such as systematic search procedures combined with transparent critical appraisal tools.

2. Evidence Limitations in the Literature Base

A significant limitation arises from the evidence base itself. Much of the literature on cognitive behavioral interventions focuses broadly on student populations rather than specifically on pre-service teachers. As a result, conclusions about CBTH's transformative impact often rely on extrapolation from general higher education or clinical anxiety studies. This raises concerns about contextual specificity.

Moreover, many studies employ short-term intervention designs with limited follow-up periods. While reductions in anxiety symptoms are frequently documented, longitudinal data examining sustained empowerment, professional identity consolidation, or early-career teacher retention remain scarce. Without extended tracking, claims regarding transformative healing must be interpreted cautiously.

The literature also demonstrates variability in how key constructs such as “empowerment,” “healing,” and “self-efficacy” are operationalized. Some studies rely solely on quantitative anxiety scales, while others use qualitative self-reports without standardized measures. This inconsistency complicates cross-study comparison and weakens cumulative knowledge building.

Another limitation concerns cultural representation. A substantial proportion of studies originate from Western, English-speaking contexts. Consequently, the applicability of CBTH across diverse cultural, institutional, and socio-economic settings remains underexplored. The absence of culturally adapted models limits the generalizability of conclusions drawn in this review.

3. Synthesis Challenges and Conceptual Ambiguities

The process of synthesizing interdisciplinary literature spanning psychology, teacher education, and higher education studies introduced conceptual challenges. CBTH is not yet consistently defined across scholarship, and in some cases, the “healing” dimension is implied rather than explicitly theorized. This lack of definitional clarity may lead to conceptual blending between traditional CBT and empowerment-oriented adaptations.

Furthermore, the distinction between clinical anxiety disorders and situational teaching-related anxiety is inconsistently maintained across studies. This ambiguity complicates interpretation of intervention outcomes, as CBTH protocols may require significant modification depending on anxiety severity and diagnostic status.

The review also confronted tension between individual-level and systemic-level analyses. While CBTH emphasizes cognitive restructuring and personal agency, structural contributors to anxiety such as institutional workload demands or evaluation pressures are not always addressed in intervention research. Integrating these perspectives into a coherent synthesis required interpretive judgment, which may introduce subjectivity.

4. Potential Authorial and Interpretive Bias

Given the authors' engagement with the transformative potential of CBTH, there is a possibility of confirmation bias in interpreting the literature. Narrative reviews are particularly vulnerable to emphasizing supportive findings while underrepresenting null or contradictory results. Although efforts were made to present divergent perspectives and controversies, complete neutrality cannot be guaranteed.

Additionally, the framing of CBTH as a healing-centered model may reflect a theoretical orientation that privileges empowerment-based narratives. While this lens offers valuable insight, alternative frameworks such as systemic reform models or psychodynamic approaches may receive comparatively less attention. To mitigate such bias, consultation with external reviewers or trusted colleagues during manuscript development is recommended. Independent critique can help identify overlooked counterarguments, methodological blind spots, or overgeneralized conclusions.

5. Directions for Improvement and Future Research

Future scholarship can address these limitations in several ways:

- a) Conduct longitudinal, multi-site studies tracking pre-service teachers into early career phases to assess sustained outcomes of CBTH interventions.
- b) Standardize operational definitions of empowerment and healing to improve cross-study comparability.
- c) Incorporate mixed-method designs combining validated quantitative measures with in-depth qualitative exploration of identity transformation.
- d) Expand cultural and contextual diversity in study populations to enhance generalizability.
- e) Compare CBTH with alternative or complementary interventions, such as mindfulness-based or systemic support models.
- f) Examine integrated frameworks that combine cognitive-behavioral skill-building with institutional reform efforts.

By addressing these areas, future research can strengthen the empirical foundation and theoretical clarity surrounding CBTH's role in pre-service teacher development. In sum, while this narrative review highlights promising evidence for CBTH as a transformative framework, the conclusions must be interpreted within the constraints of methodological design, evidence variability, and interpretive subjectivity. Acknowledging these limitations does not diminish the contribution of the review; rather, it situates its findings within an evolving scholarly conversation and underscores the need for continued, rigorous inquiry.

Conclusion

This structured narrative review examined the theoretical foundations, mechanisms, applications, and research gaps surrounding Cognitive Behavioral Therapy for Healing (CBTH) as a response to anxiety among pre-service teachers in higher education. The synthesis clarifies three layers of evidence. First, traditional CBT has a stronger established evidence base for

anxiety reduction. Second, healing-centered education contributes a broader lens of restoration, identity, relational safety, agency, culture, and systemic support. Third, CBTH represents an emerging adaptation that may integrate these elements, but its specific application to pre-service teachers remains under-tested. The review therefore concludes that CBTH is a promising framework for supporting resilience, emotional regulation, professional self-efficacy, and identity development, but claims about its transformative effect must remain cautious until direct teacher education studies are conducted. Future research should prioritize longitudinal and multi-site designs, standardized measures of healing and empowerment, mixed-method exploration of practicum experience, culturally responsive module development, and integration with institutional reforms. Such work would strengthen empirical rigor and determine whether CBTH can move from a promising conceptual framework toward a sustainable component of teacher preparation.

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