



THE EFFECTIVENESS OF IMPLEMENTING DZIKIR THERAPY TO REDUCE ANXIETY LEVELS IN THE ELDERLY

Refina Anggraini*, Kartinah

Department of Nursing Profession, Faculty of Health Sciences, Universitas Muhammadiyah Surakarta, Jl. A. Yani, Mendungan, Pabelan, Sukoharjo, Jawa Tengah 57162, Indonesia

*rvnanggraini10@gmail.com

ABSTRACT

The anxiety experienced by the elderly in Indonesia is very high. The causes of anxiety in the elderly usually include physical changes, degenerative and chronic diseases, loneliness, fear of losing freedom, fear of facing death. Some nursing management to reduce anxiety levels can be treated with pharmacological therapy such as anti-anxiety drugs (Anxiolytics) and non-pharmacological therapy such as spiritual therapy and relaxation therapy. One of the non-pharmacological therapies to relieve anxiety is to carry out dhikr therapy using dhikr readings (remembering Allah). The aim of this research is to determine the effectiveness of implementing dhikr therapy to reduce anxiety levels in the elderly at Wisma Wukiratawu. Method: The research design used by researchers is a case study. Data collection in this research was carried out through interviews and observations. The research subjects were 10 elderly people at the Tresna Werdha Abiyoso Social Home. The research was conducted at the Tresna Werdha Abiyoso Social Home in May 2024. The instrument used was the Hamilton Anxiety Rating Scale (HARS) questionnaire. Results: From the pretest, the respondent's anxiety level was measured before the therapeutic intervention was carried out. Subjects were asked to fill out an anxiety scale that had been created by the researcher. Of the 10 subjects who were respondents in this study, 7 of them had moderate to severe levels of anxiety. In the posttest, the level of anxiety is measured again after the intervention is carried out. The aim of measuring anxiety levels after intervention is to determine the extent of development that has occurred after therapy. After the therapy was implemented, the majority of respondents' anxiety levels were in the mild and no anxiety category. Conclusion: Subject 10 people felt more calm and grew in self-confidence, were more enthusiastic and had more positive thoughts about themselves and others. No longer feel excessive anxiety.

Keywords: dhikr therapy; elderly; level of awareness

First Received	Revised	Accepted
28 March 2024	28 April 2024	30 April 2024
Final Proof Received	Published	
13 July 2024	01 December 2024	
How to cite (in APA style)		
Anggraini, R., & Kartinah, K. (2024). The Effectiveness of Implementing Dzikir Therapy to Reduce Anxiety Levels in the Elderly. Indonesian Journal of Global Health Research, 6(6), 3651-3658. https://doi.org/10.37287/ijghr.v6i6.3803 .		

INTRODUCTION

Aging is a life process that cannot be avoided. Aging or getting old is a phase where the tissue's ability to repair, replace and/or maintain its normal function slowly disappears (Zahraa & Sulistyari, 2023). As the age increases, the more health problems experienced by the elderly, apart from physical illnesses, the elderly also often experience mental problems such as loneliness, anxiety and depression, the increasing number of elderly population in the world means changes in family structure, psychosocial values force the elderly to have to live alone and live in institutions, this will result in elderly people feeling isolated, lonely and anxious (Yuniartika et al., 2023). Anxiety is an unpleasant emotional state, involving subjective fear, bodily discomfort and physical symptoms (Sulistyawati et al., 2019). Often there is a feeling of threat or death. Anxiety disorders are the most common conditions that most often occur in the elderly (Maslahat & Laila, 2022).

The anxiety experienced by the elderly in Indonesia is very high. The prevalence of anxiety at ages 55-65 years is 6.9%, while at ages 65-75 it reaches 9.7% and at ages 75 years and over the figure is 13.4% (Yuriah et al., 2024). This anxiety is usually experienced by people in early and middle adulthood, but currently many anxiety disorders are found in seniors aged 60 years and over (Purwanto et al., 2023). The anxiety that is most commonly found is phobic anxiety or anxiety, around 4-8% (Agustina et al., 2020). According to (Muthoharoh et al., 2022), anxiety levels remain higher among elderly people who live in nursing homes and those who live with their families. Living away from your family definitely makes you feel lonely, because there is no one left to live with you and take care of you. Some of the symptoms of anxiety experienced by the elderly include feelings of restlessness, excessive worry or fear, feelings of discomfort, difficulty sleeping, and fear of death (Sepriani et al., 2024). Symptoms of anxiety that occur in the elderly which affect their daily lives and health, anxiety in the elderly such as anxiety about their illness, anxiety about something bad happening to them making it difficult for them to sleep, loss of interest in something, loss of appetite and rarely interacting with other elderly people due to frequent conversations who are not connected between elderly people (Yuriah et al., 2022). Apart from that, because they are already old, the elderly have sensitive feelings and a desire to receive more attention (Lestari et al., 2023).

The causes of anxiety in the elderly usually include physical changes, degenerative and chronic diseases, loneliness, fear of losing freedom, fear of facing death. Some nursing management to reduce anxiety levels can be treated with pharmacological therapy such as anti-anxiety drugs (Anxiolytics) and non-pharmacological therapy such as spiritual therapy and relaxation therapy. One of the non-pharmacological therapies to relieve anxiety is to carry out dhikr therapy using dhikr readings (remembering Allah) by repeating certain readings. The similarity between relaxation and dhikr lies in the effort to concentrate the mind, the effort to free oneself from everything that disturbs the mind. The Indonesian National Encyclopedia explains that Dhikr is an inner attitude that can be expressed through saying Tahlil (La Ilaha illa Allah, meaning There is no God but Allah SWT), Tasbih (Subhana Allah, meaning Glory be to Allah SWT), Tahmid (Alhamdulillah, meaning All Praise be to Allah SWT. .), and Takbir (Allahu Akbar, meaning Allah is Greatest) (Suhanda et al., 2022). This research is supported by research by (Bahtiar et al., 2020) regarding the effectiveness of meditation therapy in reducing stress in elderly people with hypertension in Punjot Village, Panjang District, Bireuen Regency. The results of bivariate analysis using the paired sample t-test showed that the value $p (0.000) > \alpha (0.05)$, h_a was accepted and h_0 was rejected, meaning that there is effectiveness of dhikr meditation in reducing stress in elderly people with hypertension in Punjot Village, Panjang District, Bireuen Regency .

Research conducted by (Setiowati et al., 2022) is related Effectiveness of Murotal Al-Qur'an Spiritual Therapy and dhikr therapy in reducing anxiety levels in Hemodialysis patients. The research results showed that anxiety scores were obtained before and after being given murottal Al-Qur'an therapy and Dhikr therapy with each p-value = <0.000 . Murottal Al-Qur'an listening therapy and Dhikr therapy are statistically both able to reduce anxiety levels in hemodialysis patients. There is no significant difference between murottal Al-Qur'an therapy and Dzikir therapy. However, clinically dhikr therapy is more effective than murottal Al-Qur'an therapy. Based on the phenomenon that has been described, researchers are interested in conducting a study regarding the effectiveness of dhikr therapy to overcome anxiety in elderly people in homesteads. The aim of this research is to determine the effectiveness of implementing dhikr therapy to reduce anxiety levels in the elderly at Wisma Wukiratawu.

METHOD

The research design used by researchers is a case study. Case study research is considered effective for testing the effectiveness of an intervention or therapy. Case studies are an alternative research design, having the same position as experimental research. The basics for assessing the level of effectiveness of therapy were used in this study by asking subjects during the therapy process, at the final evaluation and during the follow-up period. Data collection in this research was carried out through interviews and observations. The research subjects were the elderly or elderly in nursing homes Social Tresna Werdha Abiyoso. Research conducted in Tresna Werdha Abiyoso Social Home in May 2024. Research instruments used in this research are observation sheets and anxiety scale questionnaires. To measure the pretest and posttest intervention anxiety scale, researchers used the GAI (Geriatric Anxiety Inventory) questionnaire. Researchers analyzed research data using descriptive analysis methods.

RESULTS

Anxiety Measurement

The instrument used was the Hamilton Anxiety Rating Scale (HARS) questionnaire. HARS is a measurement of anxiety that is based on the appearance of symptoms in individuals who experience anxiety. This instrument has been tested for validity and reliability by (Anwar et al., 2023). The validity test results for each question item are >0.05 and the reliability value is $0.793 > 0.6$, so this questionnaire can be declared valid and reliable. The interpretation of this questionnaire is that there is no anxiety if the score is <6 , mild anxiety is a score of 6-14, moderate anxiety is a score of 15-27, severe anxiety is a score of 28-36, and very severe anxiety/panic if the score is >36 .

Table 2.

Results of measuring respondents' anxiety levels

Subject	1	2	3	4	5	6	7	8	9	10
Pretest	29	28	18	30	26	30	15	19	24	18
Posttest	15	17	12	18	13	12	10	13	15	14

The pretest is the respondent's anxiety level measured before the therapeutic intervention is carried out. Subjects were asked to fill out an anxiety scale that had been created by the researcher. Of the 10 subjects who were respondents in this study, 7 of them had moderate to severe levels of anxiety. The posttest is the level of anxiety measured again after the intervention is carried out. The aim of measuring anxiety levels after intervention is to determine the extent of development that has occurred after therapy. After the therapy was implemented, the majority of respondents' anxiety levels were in the mild and no anxiety category.

Implementation of Therapy

The therapy used in this research is spiritual therapy using the dhikr method. Dhikr therapy is carried out with the aim of eliminating sadness, anxiety and depression, and can bring calm, happiness and spaciousness to life. Because dhikr contains psychotherapy which contains spiritual or spiritual power that can generate a strong sense of self-confidence and optimism in the person doing the dhikr. The implementation of the dhikr therapy intervention on participants was carried out in 5 stages starting from preparation to evaluation of the implementation of the therapy. The first session began with a screening process to determine whether the respondent was willing to take part in the research and met the research inclusion criteria. In the second session, respondents were given an informed consent sheet to prove their agreement to take part in the research until completion and continued by measuring initial anxiety using the HARS (Hamilton Anxiety Rating Scale) instrument before

implementing the intervention program (implementation of therapy). In the third session, researchers conducted socialization and introduction of the dhikr therapy program to respondents using a dhikr repetition approach. Socialization is carried out with the aim of ensuring that respondents understand the aims and objectives of the therapy that will be implemented. The fourth session is the implementation of dhikr therapy, therapy is carried out for 4 days divided into 2 periods. The first intervention begins after midday prayers and the second after Asr prayers. The research will be carried out on 27-31 May 2024. Dhikr therapy will be attended by 10 elderly people at the Wukiratawu guesthouse. Dhikr therapy is carried out for a duration of 2 hours per day, namely 1 hour after midday prayer and 1 hour after Asr prayer for 4 days. In the fifth session, researchers conducted a post-test on respondents to see changes in their anxiety levels after participating in therapy. At this stage, researchers also asked respondents to tell about positive experiences while carrying out art therapy.

DISCUSSION

This research was carried out on 27-31 May 2024 at the Wukiratawu guest house. Dhikr therapy will be attended by 10 elderly people and will be carried out for 2 hours per day, namely 1 hour after midday prayer and 1 hour after Asr prayer for 4 days. The measurement of anxiety levels in this study used the HARS (Hamilton Anxiety Rating Scale) instrument. Respondents' anxiety levels were measured twice during the study, namely before and after the intervention. Apart from taking measurements using instruments, researchers also conducted short interviews with respondents regarding their experiences of anxiety and their experiences after the intervention.

Based on the pretest results of the 10 subjects studied in this study, 7 of them had moderate to severe levels of anxiety. These results are reinforced by the results of short interviews with respondents that several symptoms of anxiety experienced by the elderly include feelings of anxiety, excessive worry or fear, feelings of discomfort, difficulty sleeping, and fear of death (Yuriah & Kartini, 2022). This anxiety is caused by several factors, both internal and external, such as loneliness, lack of attention, socio-economic conditions, suffering from certain illnesses, fear of death, and fear of certain events. In line with a study conducted by (Anggun et al., 2021) that the symptoms that most often occur in elderly people who suffer from anxiety are difficulty sleeping/resting (73%), nervousness/restlessness (70%), frequent shaking, disappointment, and worry (68 %), often worry when there are small problems (63%), anxious when doing activities (59%), often alone and easily anxious/fearful (57%), and feel uncomfortable (56.5%). Research conducted by (Anwar et al., 2024) also states the same thing that there are several signs and symptoms of anxiety including: Feeling anxious, worried, uncomfortable and feeling afraid of one's own thoughts so that they are irritable, Feeling nervous and restless, Feeling afraid when alone and feeling worried when in a crowd, disturbed sleep patterns, frequent nightmares, impaired attention and memory, feeling physical discomfort, such as ringing in the ears, excessive heartbeat, disturbances in the digestive system and feeling dizzy (Juniarni, 2022) (Hafil & Ningrum, 2023).

The dhikr therapy was carried out for 4 days divided into 2 periods. The first intervention begins after midday prayers and the second after Asr prayers. Dhikr therapy will be attended by 10 elderly people at the Wukiratawu guesthouse. Dhikr therapy is carried out for a duration of 2 hours per day, namely 1 hour after midday prayer and 1 hour after Asr prayer for 4 days. The implementation of the dhikr therapy intervention on participants was carried out in 5 stages starting from preparation to evaluation of the implementation of the therapy. The core implementation of therapy begins with reading the takbir, then respondents are encouraged to relax their bodies according to the recommendations that have been explained.

Dhikr therapy is a type of spiritual therapy in psychotherapy which has the benefit of providing a sense of calm and reducing anxiety (Ruhil Fithry, 2022). As in research written by Harrington et al (Widyastuti et al., 2019) expressed in the book Brain and Religion: Undigested Issue, it is said that in the human brain there is a God Spot so that humans will feel calmer if they carry out prayer and dhikr activities. In old age, humans are very vulnerable to a decline in psychological well-being, such as continuing to experience anxiety which causes elderly people to be pessimistic about living their lives (Ilham et al., 2023). In this way, dhikr therapy can become one interventions that can be carried out. Supported by research by (Widyastuti et al., 2019), namely the provision of dhikr therapy to elderly people in nursing homes which achieved very significant results in that elderly people who took part in dhikr therapy activities had lower levels of anxiety than the group of elderly who did not take part in dhikr therapy. Similar research was also carried out by (Sulistyawati et al., 2019) stated that the emotional control of elderly people who took dhikr training for 30 days became better than before. Dhikr can make the elderly feel optimistic and increase confidence in the safety of their lives which have been regulated by Allah SWT, this makes the elderly feel calm in their daily activities (Anwar et al., 2023). Religious behavior and implementing worship activities in daily life can reduce feelings of fear and anxiety and even fear of death in the elderly (Lestari et al., 2023). From all the explanations above, it can be said that dhikr therapy is a type of psychotherapy that is very useful in improving the psychological well-being of the elderly by reducing levels of stress, anxiety and pessimistic behavior.

The remembrance therapy program as an effort to create a solution for elderly people who experience anxiety problems at the Wukiratawu guest house, can be considered to be running well, however not all of the elderly's independent activities have been implemented due to the elderly's physical condition. Based on the posttest results, after the therapy was implemented, the majority of respondents' anxiety levels were in the mild and no anxiety category. Dhikr therapy is a non-pharmacological treatment that can be beneficial for elderly people with anxiety because it has no side effects (Attalah Rahma Insyra et al., 2023). When someone makes dhikr, it enters and activates the characteristics and asthma of Allah who have infinite power in the body (Hafil & Ningrum, 2023). With this, you feel comfortable and peaceful and return to balance. A balanced state in the body can restore and normalize the function of the body's organs as before. With this mechanism, dhikr can make the soul feel comfortable and peaceful, thereby preventing insomnia in the elderly (Yuriah, 2024). The results achieved were that the elderly responded very well and were willing to carry out this dhikr therapy activity if they experienced anxiety disorders, but he said that for this initial stage the elderly needed assistance to understand the steps of dhikr therapy activities (Rusiana et al., 2023) (Septiawan & Idris, 2021).

Apart from evaluating with a posttest, researchers also conducted short interviews with respondents after therapy. The results of the interviews after the intervention showed that subjects began to feel more open to saying things they wanted to say to other people. Subjects feel more calm and grow in self-confidence, are more enthusiastic and have more positive thoughts about themselves and others. No longer feel excessive anxiety. Subjects also have the confidence to socialize. Even though he is still careful, he no longer feels as anxious as before the intervention (Pangestika et al., 2020). The results of this research are supported by research conducted by (Pangestika et al., 2020) on patients with auditory hallucinations in the UPIP room at RSJD Dr. Amino Gondohutomo Semarang showed an increase in the ability to control hallucinations after providing psychoreligious therapy: dhikr as a non-pharmacological therapeutic effort in patients with auditory hallucinations. The ability to control auditory hallucinations in both clients was obtained as a result of 6 (good) after providing psychoreligious dhikr therapy.

CONCLUSION

The results of this study show changes in anxiety levels before and after the intervention. This was proven by a change in the total anxiety score, the posttest results were also strengthened by the results of the interview after the intervention, the subjects began to feel more open to saying the things they wanted to say to other people. Subjects feel more calm and grow in self-confidence, are more enthusiastic and have more positive thoughts about themselves and others. No longer feel excessive anxiety.

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