



Spiritual Therapy: Dzikir and Worship on Patient's Ability to Control Violent Behavior in Mental Hospital

Retno Twistiandayani¹, Dimas Hadi Prayoga¹, Icha Nora Ervina¹

^{1,2} Gresik University, Gresik, Indonesia

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CORRESPONDENCE

E-mail: twistiandayani@unigres.ac.id

A B S T R A C T

Violent behavior is when someone engages in actions that can cause physical harm to themselves, others, or the environment. This research aims to analyze the effect of spiritual therapy prayer, dzikir, on patients' ability to control violent behavior. The research design employed a Pre-Experiment approach with a Pretest-Posttest Control Group Design. The target population included all Muslim patients with a history of violent behavior who were physically healthy and cooperative in the Gelatik Room at Menur Mental Hospital, Surabaya, totaling 27 people. A probability sampling technique, specifically simple random sampling, was used for the sampling method. The independent variable was spiritual therapy prayer and worship, while the dependent variable was the patient's ability to control violent behavior. The instrument used is the Standard Operational Procedure (SOP), and data were analyzed using the Wilcoxon Rank Test statistical test. The results of the Wilcoxon Rank Test in the treatment group ($p = 0.005$, $\alpha < 0.05$) indicate an influence of spiritual therapy dzikir and worship—on the patient's ability to control violent behavior. Post-intervention, the different tests revealed a significant difference in the ability to control violent behavior between the intervention and control groups ($p = 0.005$). The provision of spiritual therapy demonstrated an increase in the average score of patients' ability to control violent behavior. This is attributed to the influence of spiritual beliefs on health and behavior in patient care, fostering increased confidence and a sense of closeness to Allah SWT.

INTRODUCTION

Violent behavior is individual behavior aimed at injuring or harming other individuals who do not want this behavior to occur (Aritonang, 2020). Patients with violent behavior can control their behavior if given several Implementation Strategies (SP). The implementation strategy (SP) carried out by clients with violent behavior is a discussion about how to control violent behavior physically, medicinally, verbally, and spiritually (Sujarwo and Livana, 2019). Therapeutic activities that have been provided at the Menur Mental Hospital for patients with violent behavior include exercise, walking, listening to music, and playing. However, some of these activities still do not reduce the level of violent behavior in patients. The prevalence of patients with violent behavior worldwide is around 24 million people; more than 50% of patients with violent behavior do not receive treatment. World Health Organization (WHO) data in 2019 shows that 300 thousand mental disorder patients in the United States commit violent behavior every year (Laia and Pardede, 2022). Riskesdes data shows in 2018 years that the prevalence rate of mental disorders in East Java is number 12 in Indonesia. According to Rosdiana, Male and Hastutiningtyas (2023), it is stated that the estimated number of severe mental disorders in East Java reaches 0.19% of the total population of East Java, 39,872,395. Based on a literature study, medical record data from Menur Mental

Hospital, East Java Province found nursing problems in inpatients, namely, in 2021 there were 15,263 people, with details of violent behavior 41.11%, hallucinations 32.11%, social isolation 14.2 %, self-care deficit 5.3%, low self-esteem 3.2%, delusions 2.2%, and risk of suicide 1.3% (Medical record data from Menur Mental Hospital (2021)). The impact that can occur if a patient with violent behavior cannot control his violent behavior is that he can injure himself, other people, and the surrounding environment.

Treatment carried out to control violent behavior is by medical and non-medical methods. Non-medical therapy can be carried out by carrying out mind-body therapy, namely providing interventions with various techniques to facilitate thinking capacity that influences physical symptoms and body functions, for example, imagery, yoga, music therapy, prayer, journaling, biofeedback, humor, tai chi, and art therapy (Stanley, 2014). Spiritual treatment is very influential in building a sense of self-acceptance so that clients no longer feel depressed and regret their fate. According to Muhith (2015), the general aim of spiritual therapy is to prevent violent behavior through regular spiritual activities. To prevent violent behavior, ask each patient about their religion and beliefs and discuss their usual worship activities, ask the patient to choose one of the worship activities, and ask the patient to demonstrate the chosen worship activity (Samsualam, 2020). Based on the background description above, researchers are interested in researching "Spiritual Therapy: dzikir and Worship on the Patient's Ability to Control Violent Behavior".

METHOD

This type of quantitative research uses a Pre-Experimental research design with a Pretest-Posttest Control Group Design approach. In this design, both groups are first given an initial test (pretest) with the same test. The intervention group was assigned special treatment, namely spiritual therapy, carried out for two weeks, which was carried out three times a week with the help of a duty nurse in the Gelatik room, while the control group was not given spiritual therapy. After being given treatment, both groups were tested with the same test as the final test (posttest); the results of the two tests were compared, as were the results of the initial and final tests in each group (Ahmad *et al.*, 2023). The target population for this research was all patients with violent behavior who were Muslim, physically healthy, and cooperative in the Gelatik Room at the Menur Mental Hospital, Surabaya, totaling 27 people. The sampling technique used in this research is probability sampling, namely simple random sampling. The instruments in this research were the Standard Operational Procedure (SOP) for spiritual therapy and the Menur Mental Hospital assessment observation sheet modified by the researcher. The independent variable in this research is spiritual group activity therapy. The dependent variable in this study is the patient's ability to control violent behavior. This research was conducted at Menur Mental Hospital, Surabaya, from 22 May 2023 to 03 June 2023, with ethical approval from the Research Ethics Committee (KEP) of Menur Mental Hospital Number: 070/1773/102.8/2023. The data, which was in ordinal form, was processed and analyzed using the

Wilcoxon Test statistical test to determine the difference in the dependent variable before and after treatment with a significance level of $p \leq 0.05$. It was carried out using the Mann-Whitney Test to investigate the difference between the two treatment and control groups; if the significance level is $p \leq 0.05$, then there is a difference between the intervention group and the control group in the ability to control violent behavior.

RESULT

The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Intervention Group

Table 1 The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Intervention Group at Menur Mental Hospital Surabaya Starting 22 May - 03 June 2023

Characteristics	Pre-test Intervensi		Post-test Intervensi	
	f	%	f	%
Low	2	25.0	0	00,0
Medium	6	75.0	2	25.0
High	0	00,0	6	75.0
Totally	8	100.0	8	100.0
Mean	1,7500		2,7500	
Standard Deviation	0,46291		0,46291	
Wilcoxon Test	P = 0.05			

The research results showed that before being given spiritual group activity therapy in the intervention group, there were some respondents with medium criteria, namely six respondents (75.0%) and a small number with low criteria (25%). After being given spiritual therapy, dzikir, and worship in the treatment group, it was found that the ability of respondents to control the violent behavior of some respondents with high criteria was six respondents (75.0%). The research results show that the average (mean) value before being given spiritual therapy was 1.7500 with a standard deviation value of 0.46291, while the average (mean) value after being given spiritual therapy was 2.7500 with a standard deviation value of 0.46291. The results of the Wilcoxon test data analysis in the intervention group obtained a value of $p = 0.005$, meaning $p < 0.05$, so H1 was accepted, meaning spiritual therapy influences the patient's ability to control violent behavior in mental hospitals.

The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Control Group

Table 2 The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Control Group at Menur Mental Hospital, Surabaya from 22 May - 03 June 2023

Characteristics	Pre-test Kontrol		Post-test Kontrol	
	f	%	f	%
Low	5	62.5	5	62.5
Medium	2	25.0	2	25.0
High	1	12.5	1	12.5
Totally	8	100.0	8	100.0
Mean	1,5000	1,5000	1,5000	1,5000
Standard Deviation	0,75593	0,75593	0,75593	0,75593
Wilcoxon Test	p = 1.000			

The results of the research in the control group show that the average value (mean) before being given spiritual therapy was 1.5000 with a standard deviation value of 0.46291, while the average value (mean) after being given intervention from the hospital (pharmacology) was 1.500 with the normal deviation value is 0.75593. The results of the Wilcoxon test data analysis in the intervention group obtained a value of $p = 1.000$, meaning $p \geq 0.05$, so H_1 was rejected, which means there was no effect of spiritual therapy on the patient's ability to control violent behavior in the mental hospital in the control group.

Differences in Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Intervention and Control Group

Table 3 Differences in Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Intervention and Control Group at Menur Mental Hospital, Surabaya, Starting 22 May - 03 June 2023

Characteristics	Pre		Post	
	Intervention	Control	Intervention	Control
Mean	9,63	7,38	11.63	5,38
Mann Whitney	23.00		7.000	
Wilcoxon	59.00		43.00	
Uji Mann Whitney	0,289		0,005	

The results of the research showed that the significance value of the difference between the intervention group and the control group before being given the intervention was not significantly different ($p = 0.289$), meaning that there was no difference in the ability to control violent behavior between the intervention group and the control group, so it could be said that the two groups were homogeneous. Then, after being given the intervention, the results of the different tests showed a difference in the ability to control violent behavior between the intervention group and the control group ($p = 0.005$). The mean rank score in the intervention group was 11.53, higher than the mean rank score in the control group, namely 5.38, meaning that the intervention provided significantly increased the ability to control violent behavior.

DISCUSSION

The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Intervention Group

One of the causes of violent behavior is age and gender. The results of the research show that respondents based on the age of patients with violent behavior at the Menur Mental Hospital in the intervention group, most of the respondents were aged 25-50 years, namely seven people (87.5%). At this productive age, individuals have demands for self-actualization, whether from oneself, family, or the environment. This is due to the individual's ability to be involved in family life, society, and work and to guide their children. Individuals adjust independently to social life, and most people in early adulthood can decide problems rationally, so they are stable and emotionally mature (Twistiandayani and Pranata, 2016). Spiritual beliefs can influence health levels and patient behavior. Meeting spiritual needs develops a sense of gratitude, patience, and sincerity in a person (Triyani, Dwidiyanti and Suerni, 2019). Providing spiritual therapy with dzikir (Subhanallah 33×, Alhamdulillah 33×, Allahuakbar 33×), listening to 3 letters (Al-Ikhlās, Al-Falaq, An-Naas), Worship can reduce stress hormones and cause natural endorphins to be active so that feelings of relaxation increase and attention from fear, anxiety and tension can be diverted, as well as improving the body's chemical system thereby lowering blood pressure and slowing breathing, heart rate and wave activity. Brain. This deeper or slower breathing rate is perfect for causing calm, emotional control, deeper thinking, and better metabolism (Fitriani, 2017). Increasing the patient's ability to control violent behavior in the intervention group, eight respondents obtained the highest score, namely four scores by two respondents due to the therapeutic influence of spiritual group activities for two weeks, which was carried out three times in 1 week. This is in line with research by Indrianingsih, Hasanah and Utami (2023) that spiritual remembrance therapy can help reduce signs and symptoms of the risk of violent behavior with an average percentage before implementation of 57.1%. The average after implementation was 21.3%.

The Effect of Providing Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Control Group

The control group only took medication from the hospital. The drugs consumed by respondents in the control group were anti-psychotic drugs, atypical anti-psychotic drugs, anti-anxiety drugs, and anti-seizure drugs. The effect of the drug is to reduce or eliminate hallucinations and delusions, provide a calming effect, and relax the muscles so that the body relaxes and overcomes seizures. However, the violent behavior of respondents in the control group was not trained, so the criteria for violent behavior remained the same. Psychopharmacological drugs are divided into several types based on their use in treating mental disorders, including antianxiety (drugs to treat anxiety), antipsychotics (drugs to treat psychosis/schizophrenia), antidepressants (drugs to treat depression), mood stabilizers (to treat mood disorders/bipolar/mania) and so on (Brunton, Lazo and Parker, 2006). This shows that pharmacology helps reduce violent behavior, but from the research results, there was no effect before and after the intervention in the control group. Based on the results of the interviews, it was found that most respondents were obedient to taking medication. However, the time to take medication and its implementation was

sometimes late. Treatment factors are one of the things that can influence a patient's ability to control violent behavior, based on research results showing that all patients were treated 1-5 times. The recurrence rate is positively related to the number of hospital admissions, duration, and disease course. Patients who relapse usually have the characteristics of being hyperactive before being discharged from the hospital, do not want to take medication, and have few social skills (Twistiandayani and Pranata, 2016).

Differences in Spiritual Therapy: Dzikir and Worship on the Ability to Control Violent Behavior in the Implementation and Control Group

When carrying out spiritual therapy, the average score for the patient's ability to control violent behavior will be higher because spiritual beliefs can influence the level of health and behavior in patient care so that patients will become more confident and feel closer to Allah SWT. So, there is a therapeutic effect of spiritual group activities on the patient's ability to control violent behavior. The results of this research are in line with Wahyu's research that there is an effect of increasing the ability to control auditory hallucinations after being given spiritual therapy: dzikir (Samsualam, 2020). If spiritual treatment is carried out continuously and if the patient often follows a religious therapy schedule, it will have a more substantial influence in helping the patient control violent behavior and calm his heart. This will make patients more confident and feel closer to Allah SWT. Based on the research results, it was found that there were differences in spiritual therapy in the treatment and control groups. This happened because the treatment group experienced an increase in their ability to control their violent behavior, while in the control group, it remained the same. If spiritual therapy is carried out continuously and if the patient often follows a religious therapy schedule, it will have a more substantial influence in helping the patient control violent behavior and calm his heart. This will make patients more confident and feel closer to Allah SWT. In line with Dwidiyanti (2018), The Effect of Islamic Spiritual Mindfulness on the Medication Adherence of Patients with Psychiatric and Mental Health Disorder using quasi-experimental pre-test and post-test methods, the results showed that the Islamic spiritual mindfulness intervention given to 11 respondents had increased in compliance with taking medication. A case study on a schizophrenic patient who underwent a mindfulness intervention with a spiritual approach using the calming technique method showed that the patient was able to feel calm and the patient was able to control anger. This indicates that providing spiritual therapy improves the patient's ability to control their violent behavior compared to just giving medication/pharmacology.

CONCLUSION

The patient's ability to control violent behavior before being given spiritual group activity therapy in the intervention group was found by most respondents at medium criteria; after being given spiritual therapy, dzikir, and worship, most respondents were found at high criteria, so there was an influence of spiritual

treatment on the ability to control violent behavior. The patient's ability to control violent behavior before and after spiritual therapy in the control group showed the same results at low criteria. This research also indicates that there are differences between the treatment group and the control group after the intervention in controlling their violent behavior abilities. Providing spiritual therapy shows that the average score of patients' ability to control violent behavior increases because spiritual beliefs can influence the level of health and behavior in patient care so that patients will become more confident and feel closer to Allah SWT.

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