



Influence of Dhikr Therapy on Reducing Signs and Symptoms of Hallucinations in Hallucination Patients in Regional Psychiatric Hospital Dr. Arif Zainudin Surakarta

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ABSTRACT

The increasing prevalence of schizophrenic patients is as much as 7% of the Indonesian population and around 70% of schizophrenic patients experience hallucinations. hallucinations are false perceptions, clients with hallucinations often feel a state that can only be felt by them but cannot be felt by other people. in minimizing the impact caused by hallucinations, proper treatment is needed, one of which is dhikr therapy, where dhikr therapy can relieve anxiety, anxiety and calm the heart. This research aim to dhikr therapy for reducing signs and symptoms in halucinations patient. The research design used in this research is a descriptive research design in the form of a case study by providing AHRs observation sheets. The level of hallucinations before the dhikr therapy was carried out, the patient was in the category of signs and symptoms of severe hallucinations. after dhikr therapy the patient experienced mild hallucinations. there are differences in the development of signs and symptoms of hallucinations before and after the application of dhikr therapy. There is a comparison of development between patients who experience signs and symptoms of hallucinations before and after being given dhikr therapy.

Keywords: Dhikr therapy, Signs and Symptoms of Hallucinations, Schizophrenia

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I. INTRODUCTION

Mental health according to WHO (World Health Organization) is a variety of positive characteristics that describe

harmony and psychological balance that reflects the maturity of his personality. Mental disorders are clinically significant syndromes or behaviors that are directly

related to distress and cause impairment in one or more functions of human life (Putri, 2019).

According to WHO, there are nearly 970 million people worldwide with mental disorders. Where a third are domiciled in developing countries. This is reinforced by data and the fact that almost half of the world's population lives in a country where 1 psychiatrist serves 200,000 people (Yosep, 2022).

In Indonesia, the prevalence of schizophrenia or psychotic disorders based on data from the 2018 Riskesdas obtained a quite significant figure, namely 7% of Indonesia's population. The prevalence of mental emotional disorders in residents aged 15 years and over is 9.8% of the total population of Indonesia. The prevalence of depression in the Indonesian population where only 9% of total depression sufferers are undergoing medical treatment (Yosep, 2022).

Then according to data (Medical Record Rsjd Arif Zainudin Surakarta, 2020) the number of people with mental disorders is still quite high, namely with the number of people with mental disorders hospitalized, namely 1999. The number of patients with hallucinations ranks first with a total of 6,296 people, patients with residual schizophrenia total 4,558 people, patients with schizophrenia

paranoid totaled 2,727 people, patients with bipolar disorder totaled 1,965 people and patients with depression totaled 270 people.

Based on the increase in schizophrenic patients, changes in perceptual responses are the first symptoms that appear in schizophrenia and around 70% of schizophrenic patients experience hallucinations (Keliat, 2019). Hallucinations are false perceptual distortions that occur in maladaptive neurobiological responses, sufferers actually experience sensory distortions as real things and respond to them (Pardede, 2020). Clients with hallucinations often feel conditions/conditions that can only be felt by them but cannot be felt by other people (Nurlaili et al., 2019). The impact of hallucinations is loss of social self, in which in this situation sufferers can commit suicide, kill other people, and even destroy the environment.

In minimizing the impact caused by hallucinations, proper handling is needed. With so many occurrences of hallucinations, it is increasingly clear that it is the nurse's role to help patients to control hallucinations (Maulana et al., 2021). There are various kinds of therapy that can be done to reduce signs and symptoms in hallucinatory patients, one of which is psychoreligious therapy using the

dhikr therapy method. Dhikr therapy is a therapy that is usually through a religious approach that is adhered to by the client and tends to touch the spiritual side of humans. Where the benefits of dhikr therapy are that it can eliminate feelings of restlessness and anxiety, protect oneself from demonic anxieties, human threats, and fortify oneself from immoral and sinful acts, and can give light to the heart and eliminate turbidity of the soul (Potter, 2019).

Based on the results of research conducted by Emulyani (2020) entitled "the effect of dhikr therapy on decrease in signs and symptoms of hallucinations in hallucinatory patients" get the results of the analysis that there is a significant effect on reducing signs and symptoms of hallucinations.

The mechanism by which dhikr therapy can control hallucinations is the function of the nervous system to detect, analyze and transmit information. Information collected by the sensory system, integrated into the brain is the forebrain (frontal lobe) in planning, regulation, problem solving, attention, personality, and includes behavior and emotions, the forebrain is called the prefrontal cortex as a cognitive function to determine personality and signals will be forwarded to the hindbrain consisting of

premotor and autonomic pathways to control movement, activity, visceral, and endocrine functions (Ikawati, 2019).

Based on the background of the problems and the results obtained above, the authors are interested in taking nursing action "how is the application of dhikr therapy to a decrease in signs and symptoms of hallucinations in hallucinatory patients".

2. METHODS

The research design used in compiling this scientific work is a descriptive research design in the form of a case study. Descriptive research is a study that examines a group, people, objects, conditions, systems of thought or events that are happening at this time in a systematic, factual, and accurate manner regarding the facts being studied. Research case studies also include assessments with the aim of providing a detailed description of the intensive and detailed background by comparing the two research objects. Systematically, this case study carries out the process of applying journals to hallucinatory patients by applying dhikr techniques to reduce signs and symptoms of hallucinations which include assessment, pre-test, intervention of dhikr therapy and post-test.

3. RESULTS

The case study was carried out with 2 respondents in the Srikandi room of RSJD dr. Arif Zainudin Surakarta with hallucinatory patients. Both respondents

were female with the last education being junior high school. The assessment was carried out by interview and observation methods using the AHRS scale sheet.

Table 1. AHRS observations before the implementation of dhikr therapy in the Srikandi room at Regional Psychiatric Hospital Dr. Arif Zainudin Surakarta

Name	Day/date	AHRS score	Hallucination level
Mrs. D	Friday, 30 June 2023	27	Weight
Mrs. S	Friday, 30 June 2023	32	Weight

Table 2. AHRS observations after the implementation of dhikr therapy in the Srikandi room at Regional Psychiatric Hospital Dr. Arif Zainudin Surakarta

Name	Day/date	AHRS score	Hallucination level
Mrs. D	Thursday, 06 July 2023	8	Light
Mrs. S	Thursday, 06 July 2023	10	Light

Table 3. Development of the AHRS score during the implementation of dhikr therapy in hallucinatory patients in the Srikandi room at Regional Psychiatric Hospital Dr. Arif Zainudin Surakarta

No	Day/date	Score	Hallucinations Mrs. D	Score	Hallucinations Mrs. S
1	Friday, 30/6/2023	27	Weight	32	Weight
2	Saturday, 1/7/2023	23	currently	26	Weight
3	Sunday, 2/7/2023	20	currently	22	currently
4	Monday, 3/7/2023	16	currently	19	currently
5	Tuesday, 4/7/2023	10	light	11	currently
6	Wednesday, 5/7/2023	9	light	10	light
7	Thursday, 6/7/2023	8	light	10	light

Table 4. The final result of the application to the two respondents who were given dhikr therapy in the Srikandi room at Regional Psychiatric Hospital Dr. Arif Zainudin Surakarta

Respondents	Hallucination Score	Description
Mrs. D	8 light	Mild There was a decrease in signs and symptoms of hallucinations seen from the interpretation of the AHRS score of 19 points
Mrs. S	10 light	There was a decrease in signs and symptoms of hallucinations seen from the interpretation of the AHRS score by 22 points

4. DISCUSSIONS

The results of signs and symptoms of hallucinations before implementing dhikr therapy

Based on the results before the application was carried out by the patient on behalf of Mrs. D shows the response to experiencing signs and symptoms of severe hallucinations with a total score of 27, namely the frequency of the sound appearing once a day, the duration of the sound lasting for several minutes, the location of the sound outside the head but close to the ear or head, the sound is softer or weaker than the voice itself in the form of a whisper, 50% patients believe that the sound comes from external causes, occasional or occasional pleasant content, degree of negative content verbal abuse aimed at you but related to self-concept, sounds heard are always distressing, moderate level of sadness sounds, sounds cause serious life disturbance complete so that it requires hospitalization and the patient is still able to maintain daily activities and social relations but self-care is severely disturbed, the patient has no control over the sound when it appears and cannot ignore or stop the sound altogether. From the results of the study, it was found that the patient had experienced mental disorders since 2017 and had been treated

at the RSJ 4 times, a week before being treated at the RSJ the patient stopped taking medication for 1 month, did not want to eat, the patient was brought by his family because he often talked to himself and often heard whispers telling him to not to eat during the day if eating will turn into a mermaid.

Meanwhile Mrs. S before implementation showed signs and symptoms of severe hallucinations with a total score of 32. Namely the frequency of sound appearing once a day, duration of sound appearing for at least one hour, location of sound originating in or near the ear and outside the head far from the ear, sound source louder than own voice, 50% patient belief that the voice comes from external causes, the number of negative voice content the majority of the voice content is unpleasant or negative, the degree of negative content is a threat directed at you for example threatening yourself to hurt yourself or your family, the level of sadness of the sound between no bothersome and distressing alike, the intensity of the sound anguish is so distressing or disturbing and the patient may feel worse, the sound disturbance causes such severe disruption to life that regular hospitalization is required. The patient is able to maintain some daily

activities, the ability to control the patient believes he can have some control over the sound but only occasionally and most of the sound is uncontrollable. The results of the study found that patient data had experienced mental disorders since 2018 and had been admitted to the Surakarta Hospital 7 times, the patient often talked to himself, often heard whispers telling him to beat his mother and the patient entered the Surakarta Hospital because he hit his mother and stopped taking medication for 2 months.

Based on the results of the study, the two patients both experienced severe hallucinations, the background of the recurrence in the two patients was non-adherence in taking medication. This is in line with research conducted by Puspitasari with "factors that influence the relapse of people with mental disorders showing that as many as 85% of clients experience drug withdrawal (Puspitasari, 2019). Strengthened by research conducted by Yosep and Sutini, (2020) regarding the predisposing factors of patients with hallucinatory mental disorders, it showed that most respondents stated that they had been treated before, often or had experienced physical violence and bullying as well as hallucinatory patient disobedience in taking medication.

The results of signs and symptoms of hallucinations after the application of dhikr therapy

Based on the results after the application, the results were obtained: patient Ny. D shows the total score of 8 patients who are at the stage of signs and symptoms of mild hallucinations. From the results of the study which led to a decrease in signs and symptoms of hallucinations in Ny. D because the frequency of the sound appears only once a week, the duration of the sound appears only briefly, the location of the sound is only from outside the head, the patient shows a cooperative attitude, always focuses on following the dhikr therapy given, the patient is calmer and not anxious and the patient has repeatedly entered In a mental hospital, this makes the patient understand better how to control his hallucinations and the patient regularly takes medication.

Meanwhile Mrs. S shows the total score of 10 patients who are at the stage of signs and symptoms of mild hallucinations. From the results of the study which led to a decrease in signs and symptoms of hallucinations in Ny. S because the sound frequency rarely appears, the duration of the sound is only a few seconds, the sound only comes from the head, the patient has repeatedly been admitted to a mental hospital so that it is easier for the patient to

control his hallucinations, the patient says that by doing dhikr therapy the patient becomes calmer, peace of mind and the patient regularly takes medication while in the hospital.

After dhikr therapy, respondents in this study experienced a decrease in signs and symptoms of hallucinations, namely they did not often hear whispers, they were more able to control their hallucinations. Same with the journal from Emulyani (2020) said that after dhikr therapy the average signs and symptoms of hallucinations were significantly reduced, initially experiencing hallucinations 17 times after dhikr therapy only 5 times.

According to research by Gasril et al (2020) said that dhikr is a ritual verbal worship that is not bound by time, place and circumstances and the importance of dhikr and prayer in expelling hallucinations. This is also in line with Yosep (2019) who said that one of the recommended therapies in an effort to overcome hallucinations is psychoreligious therapy: dhikr. This dhikr therapy combines a religious or religious aspect approach that aims to improve coping mechanisms or overcome problems. This is in line with Emulyani's research (2020), namely the journal used in this study said that dhikr therapy affects the control of patient hallucinations where patients after

carrying out dhikr therapy are able to master and even eliminate hallucinations when these hallucinations come. So that the patient feels calm and does not feel anxious anymore.

The development of signs and symptoms of hallucinations before and after giving dhikr therapy

Based on the score table interpretation of the AHRS observation sheet on the development of the patient Ny. D on the first day before the dhikr therapy showed signs and symptoms of severe hallucinations with a score of 27, where the patient still heard whispers telling him not to eat if he ate he would turn into a mermaid. Patient Patient Mrs. S on the first day before the dhikr therapy was carried out showed signs and symptoms of severe hallucinations with a score of 32 where the patient still heard whispers to order to hit people, on the second day Mrs. D shows the score of 23 patients in the moderate hallucination stage where the patient is cooperative in following the dhikr therapy, the second day Mrs. S shows a total score of 26 being in the stage of signs and symptoms of severe hallucinations where the patient is less cooperative and less focused in doing dhikr therapy, the third day Mrs. D shows a total score of 20 being at the stage of signs and symptoms of

moderate hallucinations where the patient is also very cooperative and happy to participate in dhikr therapy activities, the third day Mrs. S shows a score of 22 patients who are in the stage of signs and symptoms of moderate hallucinations where the patient begins to cooperate and focus in participating in dhikr therapy, on the fourth day Mrs. D shows that the total score of 16 patients is in the moderate hallucinations stage where the patient is always cooperative in participating in dhikr therapy and the sounds that make the patient anxious and uneasy have begun to decrease, on the fourth day Mrs. S shows that the total score of 19 patients is in the moderate hallucination stage where the patient has started to focus and cooperate in participating in dhikr therapy, on the fifth day Mrs. D shows the score of the number of 10 patients who are in the stage of mild hallucinations where on the fifth day the patient is very memorized in doing dhikr therapy and the patient is very cooperative, the fifth day Mrs. S shows that the total score of 11 patients is in the moderate hallucinations stage where the patient is getting used to reciting dhikr therapy and is more focused and the patient is very cooperative, on the sixth day Mrs. D shows a score of 9 patients who are in the stage of mild hallucinations where the patient can control his hallucinations

and the disturbing sounds are greatly reduced, the sixth day Mrs. S shows a score of 10 patients who are at the stage of signs and symptoms of mild hallucinations where the patient is very cooperative and can control his hallucinations, on the seventh day Mrs. D shows a score of 8 patients who are in the stage of mild hallucinations where the patient causes a decrease in signs and symptoms of hallucinations the same as previously cooperative patients, the patient has memorized the dhikr therapy and the patient can control his hallucinations the patient can sleep soundly when doing dhikr, the seventh day of Mrs. S shows that the total score of 10 patients is at the sign and symptom stage of mild hallucinations where the patient is very cooperative, the patient is more focused on doing dhikr therapy, the patient feels calm and the patient is able to control his hallucinations by using dhikr therapy.

This is in line with research conducted by Tuti et al (2022) in their research which said that dhikr therapy can improve the ability to control hallucinations and patients are more cooperative. Based on research conducted by Dermawan (2019) said that religious therapy is effective in increasing the ability to control auditory hallucinations. By dhikr one's heart will be more peaceful, dhikr

religious therapy activities can reduce psychiatric symptoms. Religious is able to prevent and protect against mental illness, reduce suffering, improve the adaptation process to control voices that do not exist, such as auditory hallucinations.

This is also in line with Akbar's research (2021) which says dhikr therapy can help control hallucinations apart from using general therapy for controlling auditory hallucinations and drug therapy that has been given. The patient said that his heart was calmer after reading the dhikr readings and the patient slept better after reading the dhikr readings.

The final comparison between respondents.

Based on the final results of the patient study Mrs. D showed signs and symptoms of mild hallucinations, while patient Mrs. S also showed signs and symptoms of mild hallucinations. Both patients experienced a decrease in the signs and symptoms of hallucinations, which became mild. Dhikr therapy alone can make the patient calmer, not anxious, the patient sleeps soundly after reciting the dhikr, and the patient is better able to control his hallucinations using dhikr therapy. This is in accordance with research. Emulyani (2020) said that patients who experience signs and

symptoms of hallucinations after being given dhikr therapy have a significant effect on reducing the signs and symptoms of hallucinations and patients feel calm and no longer feel anxious. With dhikr therapy, patients are also more familiar with good ways of dhikr and even patients can get closer to Allah SWT as the creator.

Based on all the descriptions above, it can be concluded that dhikr can cleanse the mind psychologically, create inner peace and serenity so that the patient avoids stress, anxiety, fear and anxiety and the patient understands better how to control hallucinations with dhikr. This could be one way to reduce signs and symptoms of hallucinations in patients who experience hallucinations. This opinion is reinforced by research conducted by Dermawan (2019) which states that religious therapy is effective in increasing the ability to control hallucinations.

5. CONCLUSION

The hallucinations of the two respondents before the application of dhikr therapy were carried out, namely they both experienced signs and symptoms of severe hallucinations. The hallucinations of the two patients after the application of dhikr therapy were carried out, namely experiencing signs and symptoms of mild hallucinations. During the seven days of

application, the two respondents experienced good progress and the signs and symptoms of the patient's hallucinations continued to decrease. Comparison between the 2 respondents, namely the patient Ny. D there was a decrease in signs and symptoms of hallucinations seen from the interpretation of the AHRS score of 19 points and in patient Ny. S There was a decrease in signs and symptoms of hallucinations seen from the interpretation of the AHRS score by 22 points.

AUTHOR CONTRIBUTIONS

Substantial contributions to conception, data collection, and analysis: Miki lestari, Norman Wijaya Gati and Luluk Purnomo. Writing and manuscript revisions: Miki lestari.

CONFLICT OF INTEREST

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

DATA AVAILABILITY STATEMENT

The data are not publicly available due to privacy or ethical restrictions.

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