
REDUCING ANXIETY IN MIDDLE-AGED HYPERTENSIVE PATIENTS THROUGH DHIKR RELAXATION

Khairunnisa Fitri¹, Fuad Nashori²

Professional Psychology Study Program (S2), Faculty of Psychology and Socio-Cultural Sciences, Universitas Islam Indonesia, Yogyakarta, Indonesia
e-mail: 21915060@students.uii.ac.id¹, 953200102@uii.ac.id²

Received :19 April 2024

Accepted : 28 April 2024

Published : 30 April 2024

DOI [10.22373/psikoislamedia.v9i2.23121](https://doi.org/10.22373/psikoislamedia.v9i2.23121)

ABSTRACT

Hypertension is a life-threatening disease often referred to as a silent killer. Dhikr relaxation is one method aimed at providing both physical and psychological tranquility to hypertensive patients. Among the psychological symptoms experienced by hypertensive patients is anxiety. This motivated the researchers to provide an intervention in the form of dhikr relaxation to alleviate the anxiety in middle-aged hypertensive patients. A total of 20 hypertensive patients participated in this study, divided into two groups: an experimental group consisting of 10 individuals and a control group consisting of 10 individuals. It also applied a pretest-posttest control group design, with measurements taken three times (pretest, posttest, and follow-up). The anxiety measurement tool used in this study was the GAD-7 (Generalized Anxiety Disorder-7) developed by Spitzer et al. Then the researchers conducted Mann-Whitney analysis. The results of the study indicated that dhikr relaxation is effective in reducing anxiety in the middle-aged hypertensive patients.

Keywords: Middle-Aged Patients, Hypertension, Anxiety, Dhikr Relaxation

MENURUNKAN KECEMASAN PADA PASIEN HIPERTENSI USIA DEWASA MADYA DENGAN RELAKSASI ZIKIR

Hipertensi merupakan penyakit yang mematikan bahkan disebut *silent killer*. Relaksasi zikir merupakan salah satu cara untuk memberikan ketenangan fisik maupun psikis pada pasien hipertensi. Adapun salah satu gejala psikis yang bisa dirasakan pasien hipertensi ialah kecemasan. Hal inilah yang melatarbelakangi peneliti memberikan intervensi berupa relaksasi zikir untuk menurunkan kecemasan pada pasien hipertensi usia dewasa madya. Sebanyak 20 pasien hipertensi terlibat pada penelitian ini. Subjek dibagi menjadi dua kelompok yaitu kelompok eksperimen berjumlah 10 orang dan kelompok kontrol berjumlah 10 orang. Rancangan penelitian yang digunakan adalah *pretest-posttest control group design* dan diukur sebanyak tiga kali (pretest, posttest, dan follow up). Alat ukur kecemasan yang digunakan pada penelitian ini adalah GAD-7 (*Generalized Anxiety Disorder-7*) yang dikembangkan Spitzer et al. Peneliti melakukan analisis *Mann Withney*. Hasil penelitian menunjukkan bahwa relaksasi zikir mampu menurunkan kecemasan pada pasien hipertensi usia dewasa madya.

Kata Kunci: Dewasa Madya, Hipertensi, Kecemasan, Relaksasi Zikir

Introduction

The prevalence of hypertension in Indonesia ranges from 6 to 15%. A noteworthy observation to highlight is that the majority of its sufferers do not exhibit symptoms or only experience mild symptoms. Consequently, it is often referred to as a silent killer because it is difficult to be detected and managed (Susanto & Wibowo, 2022). Furthermore, a report mentioned that 36.8 % individuals suffering from hypertension received a diagnosis from medical professionals (P2PTM Kemenkes RI, 2018). According to the Institute for Health Metrics and Evaluation (IHME), approximately 23.7% of the total 1.7 million deaths in Indonesia were caused by hypertension, while hyperglycemia contributed 18.4% of the deaths. Other contributing risk factors to the mortality included smoking (12.7%) and obesity (7.7%) (Kemenkes RI, 2019).

A study by the Ministry of Health of the Republic of Indonesia (Kemenkes RI) (2018) revealed a significant increase in the prevalence of hypertension among the adult population aged 18 and above 18 in Indonesia from 2013 to 2018, rising from 25.8% to 34.1%. Its prevalence rates, particularly within the age group of 45-54 years, reached 45.3%, while it escalated to 55.2% within the age group of 55-64 years. It was estimated that the total number of hypertension cases in Indonesia amounted to 63,309,620 individuals, with a mortality rate reaching 427,218 cases. These findings imply that increased age heightens susceptibility to hypertension, leading to a decline in physiological body functions. The age ranges particularly vulnerable to it predominantly occur in in pre-elderly and middle-aged individuals (between 40 and 60 years) (Kemenkes RI, 2016). A study by Riska dan Raharjo (2015) explained that risk factors associated with the onset of hypertension during productive ages (25-54 years) include genetic factors, obesity, smoking habits, and high salt intake. Therefore, it can be inferred that individuals within these age groups have a significantly developing risk of hypertension.

This is in line to a study Laka et al. (2018) examining the relationship between hypertension and anxiety levels in the elderly in Posyandu Lansia (Integrated Healthcare Centre for the Elderly). The study involving 36 respondents found that 18 people (50%) experienced moderate levels of anxiety, 13 individuals (36.1%) experienced mild levels of anxiety, and 5 individuals (13.9%) experienced severe levels of anxiety. Its statistical analysis demonstrated a significance value of 0.001, which was smaller than the specified significance level ($\alpha = 0.05$). Thus, there was a significant relationship between hypertension and anxiety levels in the elderly.

Anxiety represents one of the mental disorders with a high prevalence, emerging as a significant global issue. It was reported that 264 million cases of anxiety disorders worldwide, approximately 23% of them, originate from the Southeast Asian region. In Indonesia specifically, its prevalence rate of reached 3.3%. This underlies that this issue is significant enough in the context of mental health in the country (World Health Organization, 2017).

Anxiety constitutes a general disorder characterized by feelings of apprehension, fear, sleep disturbances, and various somatic complaints. Generalized Anxiety Disorder (GAD) is a condition when an individual experiences persistent anxiety on anything, marked by disproportionate and unrealistic worries. Influential factors contributing to anxiety include childhood experiences, gender disparities (females have a higher vulnerability to anxiety than males), health conditions, and individual personality traits. Individuals with high expectations towards themselves or others tend to be more susceptible to anxiety than do those with lower expectations. Then drug use also increases the risk of anxiety, and those who use it can have a greater risk than those who do not use it (Spitzer et al., 2006).

Efforts to reduce the anxiety can be pursued through various approaches, one of which is Islamic psychological intervention. According to Nashori et al. (2019), the Islamic psychological intervention can be classified into two categories: original Islamic psychology intervention and integrative Islamic psychology intervention. The original Islamic one refers to interventions entirely based on the principles of Islamic teachings. Meanwhile, the integrative Islamic one integrates psychological perspectives with Islamic values. Both approaches have proven effective in enhancing individuals' psychological well-being. As a result, these approaches can serve as a significant way to improve individual mental health. Then this study refers to the integrative Islamic psychology intervention as the researchers combines contemporary psychological techniques (relaxation techniques) with Islamic approaches (dhikr).

One of effective Islamic psychology techniques for reducing anxiety levels is dhikr relaxation. This practice, which combines relaxation techniques with the repetitive recitation of dhikr, aims to redirect an individual's focus towards the meaning of the dhikr itself (Patimah et al., 2015). The repetition of dhikr has a positive effect in transforming negative thoughts into positive ones in individuals experiencing anxiety. The practice of dhikr possesses relaxing effects capable of reducing stress levels and bringing inner peace to individuals (Kumala et al., 2017). Each recitation of dhikr has a profound meaning that can prevent the emergence of mental tension (Anggraieni & Subandi, 2014). Engaging in dhikr represents

individuals' consciousness in strengthening their spiritual relationship with the Creator (Ayu & Sudiman, 2023).

Dhikr relaxation entails various aspects, including the biological aspect of breathing techniques, the psychological experience of tranquility, a sense of togetherness in the context of social aspects (if practiced collectively), and the spiritual experience involving complete surrender to God (Allah). Dhikr relaxation therapy is an integral part of the Muslim community's life, combining physical relaxation elements with profound faith by imbuing meaning into the recitations of dhikr (Safitri et al., 2017). A verse in the Quran that reflects the calming effect of dhikr is found in Surah Ar-Ra'd, verse 28; Allah states that the hearts of faithful people find tranquility in the remembrance of Him. This indicates that the practice of dhikr strengthens an individual's spiritual connection with God, thereby bringing peace to the heart and mind. Therefore, dhikr has a potential to reduce anxiety levels, both physically and psychologically.

The virtue of dhikr is emphasized in a hadith narrated by Bukhari, saying that a comparison of those who engage in dhikr and those who do not is like a living person and a dead person. This illustrates the importance of dhikr in strengthening an individual's spiritual life. Without dhikr, one's soul tends to experience emptiness and darkness, even though their body remains physically alive. A phenomenon of suicide in society is often triggered by wounded and restless souls, not solely by physical issues. Therefore, Islam encourages its followers to continuously engage in dhikr as a means of healing for wounded and restless souls, with the aim of attaining inner peace (Widianengsih, 2021).

Some studies reveal the influence of dhikr relaxation on reducing the level of anxiety. For example, a study by Perwitaningrum et al. (2016) on the influence of dhikr relaxation therapy on reducing anxiety levels in dyspepsia patients demonstrated a decrease in the anxiety levels before and after the application of dhikr relaxation therapy, which was associated with the commitment, motivation, and active participation of its subjects. These factors played a role in reducing the anxiety, supported by a series of interconnected stages in the therapy process. Consequently, the subjects were able to experience the benefits of relaxation during the therapy process. Next, a study by Patimah et al. (2015) on the influence of dhikr relaxation on the anxiety levels of chronic kidney disease (CKD) patients undergoing hemodialysis demonstrated that dhikr relaxation had a positive impact on reducing the anxiety levels of the patients. Also, a study by Fitrina et al. (2022) on the influence of dhikr relaxation on the anxiety levels of hemodialysis patients pointed out that there was an influence of dhikr relaxation on the anxiety levels of the patients. In addition, a study by Nugroho et al. (2023) reported that the use of Quran-based therapy

and dhikr had been effective in providing calmness, happiness, and security to individuals, thus reducing the anxiety levels caused by the Covid-19 pandemic.

Based on previous studies, relaxation through dhikr has been shown to have the potential to reduce anxiety levels. However, there has been no study specifically exploring the impact of dhikr relaxation on anxiety levels in middle-aged hypertensive patients. Therefore, this current study is to examine the effect of dhikr relaxation on reducing the anxiety levels in middle-aged hypertensive patients. The hypothesis posited in this study is that dhikr relaxation will result in a significant decrease in anxiety levels among them. This study holds important benefits in enhancing our understanding of the potential of this intervention in managing anxiety, particularly in the hypertensive population. In addition, the findings of this study can serve as a foundation for further studies in this field, providing guidance for researchers interested in further exploring the relationship between dhikr relaxation and anxiety reduction.

Methods

Research Design

This study implemented a quasi-experimental design. A quasi-experiment is an experimental design that inherently employs two groups throughout their entire structure, which are commonly applied in conducting experimental studies involving human subjects. The experimental design employed in this study was a pretest-posttest control group design, involving two types of groups: the experimental group and the control group. This study was conducted to identify the differences between the experimental group and the control group, both treated with the intervention (dhikr relaxation), in terms of experiencing a decrease in the measured variable, the anxiety. Next, the researchers administered a follow-up after the post-test to monitor the subjects' progress gradually from before the intervention, after the intervention, and after discontinuation of the intervention. The follow-up was conducted two weeks after the completion of the experiment (Safitri et al., 2017).

Table 1. *Research design*

Group	Pre-test	Treatment	Post-test	Follow-up
EG	O1	X	O2	O3
CG	O1	-X	O2	O3

Research Subjects

Researchers applied a purposive sampling technique in determining the sample. It is a sampling method that identifies subjects based on predetermined criteria (Saifuddin, 2019). The subject criteria of this study included being a Muslim, having a history of hypertension known for at least 3 months, having an average blood pressure of 150/90 MmHg, and having anxiety scores in moderate, severe and very severe categories measured with the GAD-7 (Generalize Anxiety Disorder-7) scale.

This study involved 20 individuals who were hypertensive patients at Puskesmas (Public Health Centre) Kratonan, Surakarta, consisting of 5 men and 15 women. They were divided into two groups, namely the experimental group and the control group, each consisting of 10 people. The experimental group were treated with dhikr relaxation, while the control group received no treatment. They were also grouped by using a purposive sampling method, meaning that the sample selection was conducted deliberately based on the predetermined criteria.

Data Collection Methods

The anxiety was measured by the Generalized Anxiety Disorder-7 (GAD-7) scale, developed by Spitzer et al. (2006). Budikayanti et al. (2019) adapted and translated the GAD-7 scale to test its validity and reliability. Their results pointed out that the validity and internal reliability of the Indonesian version of the GAD-7 scale were satisfactory, with item-total correlation coefficients ranging from 0.648 to 0.800 ($p < 0.01$) and a Cronbach's alpha coefficient of 0.867. Furthermore, the researchers conducted observations and interviews during the study. In the observation process, the researchers involved an observation team to observe the subjects. Then the interviews were conducted by the researchers to support the research data, covering pretest, posttest, and follow-up stages.

Research Procedures

In general, the intervention procedure included two main stages: the research preparation stage and the implementation stage. The research preparation stage involved performing initial assessment, collecting data related to the anxiety issues experienced by the subjects through interviews and searching various references or literature studies. Subsequently, the researchers formulated the research design of this study and developed a dhikr relaxation module. This study was conducted based on a modified module from a previous one (Safitri et al., 2017). The researchers had obtained permission from the owner of the module to modify its contents. The purpose of modifying the module was to differentiate it from previous

studies and to adjust it to the researchers' needs. Furthermore, the researchers conducted an ethical review of the study, as required before conducting it. All the research methods and procedures were approved by The Research Ethics Committee of the Faculty of Psychology and Socio-Cultural Sciences, Universitas Islam Indonesia, No. 2239/DEK/70/DURT/XI/2023. The ethics committee reviewed the research protocol, including issues of confidentiality, sampling, and participant consent. The researchers also obtained permission to translate and validate the scale. All participants were provided written consent before being involved in the study.

The researchers applied GAD-7 developed by Spitzer et al. (2006), adapted and translated into Indonesian by Budikayanti et al. (2019). The researchers then sought permissions from relevant parties involved in this study. Then the researchers identified and selected subjects suitable for it. They were determined by using a purposive sampling technique, selecting samples based on specific criteria required for them. After establishing several criteria, the researchers identified them according to these criteria by screening the results from the pretest. They were divided into two groups: the control group and the experimental group. The grouping was based on their willingness to participate in and attend the study as well as their readiness to engage in the dhikr relaxation treatment. Meanwhile, those who did not participate in the dhikr relaxation were assigned to the control group. The researchers also ensured to obtain consent from participants by providing informed consent forms (Safitri et al., 2017). The next stage was implementation, which included pretest, treatment, posttest, and follow-up.

The treatment provided to the experimental group consisted of dhikr relaxation therapy, which includes a technique of breath control while reciting the phrases "*laa ilaha illallah*" and "*hasbunallah wa nikmal wakil*." The number of repetitions of the dhikr recitation during the experimental process was 33 times. Then the researchers assigned the participants to engage in dhikr independently by reciting the phrases "*la ilaha illallah*" and "*hasbunallah wa nikmal wakil*" as much as possible. This is consistent with the view of Abah Gaos, the leader of Pesantren Sirnarasa, who believes that there are no limitations in dhikr. The minimum of 33 times was suggested because the Quran commands dhikr abundantly at all times. He refers to a hadith: "Whoever frequently remembers Allah (dhikr), will be free from being hypocrite (Ahmad, 2022)." To control the implementation of dhikr, a worksheet was provided as each subject must fill in it every day. The researchers controlled them via the WhatsApp group to remind and ask them to record how many dhikrs they had read in one day on the sheet. Meanwhile, the control group also still received material related to the relaxation, dhikr and anxiety. However, the treatment was be given after

the experimental group had finished the intervention process. The researchers offered participants in the control group to be given treatment. If they were willing, it would be given independently.

The treatment in this study utilized some methods. For example, the first was practice or exercise of dhikr relaxation, consisting of breathing relaxation and dhikr. The dhikr phrases used were "*La ilaha illallah*" and "*Hasbunallah wa nikmal wakil*". The second was dialogue, lectures, and question-and-answer sessions following psychoeducation about anxiety, relaxation, and dhikr. Then the third was discussions, sharing therapy experiences and evaluating the implementation of the dhikr relaxation. The researchers were assisted by co-facilitators in conducting this study. The co-facilitators were selected based the following criteria. They were master students of clinical psychology, adhered to the Islamic faith, and possessed a good understanding of the research topic, particularly in Islamic therapy, specifically dhikr relaxation.

Data Analysis Techniques

This study used JAMOV 2.3.28 to determine the differences in anxiety levels before and after treatment. The analysis to test the hypothesis in this research referred to the Man Mann-Whitney test. The Mann-Whitney U test, also known as Mann–Whitney–Wilcoxon (MWW), is an alternative test tool to the t-test. This method is included in the category of non-parametric tests which aim to compare the medians of two populations that come from the same distribution. Apart from that, this test is also useful for determining the similarity or difference between two population medians (Syamsuar, 2020).

Results

This study involved a total of 20 subjects, consisting of two groups: the experimental group with 10 subjects, and the control group with 10 subjects. The data description encompassed the anxiety level scores of each subject before the intervention (pretest), after the intervention (posttest), and at the follow-up. Below is a brief summary table of the overall data of this study.

Table 2. Description of Anxiety Score Data among Experimental Group and Control Group

Group	Name	Pretest	Category	Posttest	Category	Follow-up	Category
Experimental Group	EW	14	Severe	10	Moderate	7	Moderate
	SR	9	Moderate	8	Moderate	6	Moderate

Group	Name	Pretest	Category	Posttest	Category	Follow-up	Category
	AR	10	Moderate	9	Moderate	6	Moderate
	IY	12	Severe	9	Moderate	6	Moderate
	BD	10	Moderate	6	Moderate	7	Moderate
	DP	10	Moderate	9	Moderate	5	Mild
	MM	11	Severe	7	Moderate	5	Mild
	FR	8	Moderate	6	Moderate	8	Moderate
	FD	9	Moderate	7	Moderate	6	Moderate
	DS	11	Severe	7	Moderate	6	Moderate
Control Group	SM	9	Moderate	8	Moderate	7	Moderate
	AL	13	Severe	12	Severe	9	Moderate
	PN	12	Severe	10	Moderate	10	Moderate
	NR	10	Moderate	10	Moderate	9	Moderate
	SR	8	Moderate	11	Severe	10	Severe
	KP	12	Severe	9	Moderate	9	Moderate
	TWB	11	Severe	11	Severe	7	Moderate
	TWS	10	Moderate	9	Moderate	8	Moderate
	DPS	7	Moderate	7	Moderate	10	Severe
	NL	8	Moderate	9	Moderate	10	Moderate

Table 2 illustrates the anxiety scores at the pretest, posttest, and follow-up in both the experimental and control groups. It could be seen that there was a decrease in the anxiety scores in the experimental group after the intervention, specifically at the posttest stage. Overall, all subjects in the experimental group experienced reduced anxiety scores. One subject, MM, experienced a notably significant decrease in the scores. MM's pretest score fell into the severe category, while the posttest score was categorized as moderate, and it fell into the mild category during the follow-up. Conversely, in the control group who did not receive the intervention, they did not experience changes in the pretest scores. Additionally, there was even an increase in anxiety scores for one subject, SR, transitioning from moderate to severe.

According to the follow-up results, SR reported still experiencing frequent anxiety symptoms and finding it challenging to manage them effectively.

Based on the results of the anxiety scale scores, it was found that subjects in the experimental group who received the intervention experienced significant changes in the scores compared to the control group. This could also be observed in the graph of anxiety scale scores in the experimental group below.

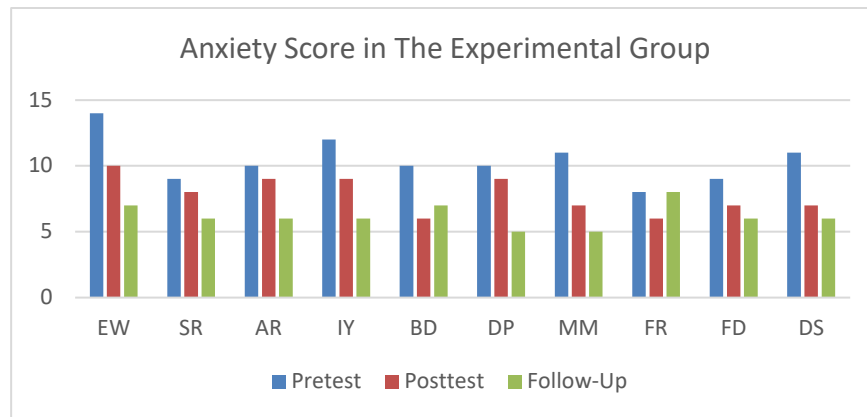


Figure 1. Graphic of Anxiety Score in The Experimental Group

Figure 1 illustrated the decrease in anxiety scores in the experimental group through a series of measurements taken before, after, and during the follow-up stages. These measurements were conducted at three different time: before the intervention (pretest), after the intervention (posttest) with a five-day interval, and during the follow-up two weeks after the posttest.

Results of Hypothesis Tests

Based on the output of the Mann-Whitney test, a p-value of 0.02 was obtained, meaning that the hypothesis can be accepted. This indicates a significant difference between the experimental group receiving dhikr relaxation treatment and the control group not receiving this treatment. Therefore, it can be concluded that the intervention effectively is able to reduce anxiety levels in middle-aged hypertensive patients.

Discussion

This study aims to investigate the effect of dhikr relaxation on anxiety levels in the middle-aged hypertensive patients. Based on its findings, there is a difference in anxiety levels in the experimental group after participating in the dhikr relaxation. This difference can be seen from the pretest and follow-

up results; several subjects who practiced the intervention reported a reduction or even absence of previously experienced anxiety symptoms, such as excessive worrying, negative thoughts, difficulty controlling emotions, and fear of bad events. These symptoms were no longer experienced when they practiced it.

The results of this study are in line with a study by Patimah et al. (2015), Perwitaningrum et al. (2016), and Fitriana et al. (2022) that the dhikr relaxation could effectively reduce the anxiety. Therefore, a theory stating that the relaxation can reduce the anxiety is proven in chronic kidney disease patients (Patimah et al., 2015), sufferers of dyspepsia (Perwitaningrum et al., 2016), hemodialysis patients (Fitriana et al., 2022), and the middle-aged hypertensive patients (this current study). The results of this current study indicated that subjects practicing the intervention were able to alleviate anxiety issues. Additionally, the blood pressure of them tended to remain stable and did not easily spike, thereby reducing the frequent hypertension symptoms. In the dhikr therapy, regularly reciting the names of Allah can induce a sense of calmness in the body (Kumala et al., 2017). This repetition should be done with an attitude of accepting all stimuli, either externally or internally. Islam encourages its followers to consistently remember Allah to heal the wounded heart and soul. Through the remembrance, the heart can revive and is not deemed dead by Sufis who appreciate the greatness of Allah (Widianengsih, 2022).

During the practice of dhikr relaxation, the participants were directed to appreciate the blessings they received and to acknowledge the abundance of grace and guidance from God by fostering hope, strengthening faith, forgiving, and accepting that all events have solutions. They were encouraged to perceive the positive aspects of their past, present, and future. This process also supported in reducing their anxiety as they realized challenges that they faced were part of life's journey. Furthermore, the success of this intervention was also influenced by the determination and commitment of them to engage in all the process. The relaxation technique integrating dhikr recitations was shown to trigger effective relaxation responses, which in turn could reduce their anxiety levels. A study by Patimah et al., (2015) demonstrated that relaxation interventions including dhikr significantly reduced anxiety in patients with chronic kidney disease (CKD) undergoing hemodialysis procedures. Emphasizing the use of the dhikr relaxation intervention to alleviate anxiety in patients is highly relevant in the context of the nursing role.

Before implementing the intervention, all the subjects experienced worry regarding their diseases. Furthermore, the most feared aspect was when the illness became chronic and affected their daily activities. These thoughts were conveyed by some subjects during sharing sessions. Ironically, these

worries often exacerbated their condition and prompted them to constantly consume medication. On the other hand, they also had responsibilities to manage, which further intensified their worries until they eventually reached high levels of anxiety or excessive worry. However, after receiving dhikr relaxation material and practicing it, they reported they were able to reduce several anxiety symptoms such as worry. This is in line with a study by Perwitaningrum et al., (2016) that dhikr assisted individuals in experiencing a shift in their perception, from fear to the belief that all conflicts could be managed effectively with the help of Allah.

The decrease in anxiety levels also had an impact on the physical condition of the subjects, as they experienced a decrease in blood pressure before the implementation of the dhikr relaxation (pre-test) and after its implementation (post-test). Based on the information obtained, one factor influencing this outcome was that they were able to interpret everything, including their conditions, life experiences, and current issues, in positive ways. This is in line with a study by Rizal et al. (2019) on the depiction of anxiety levels among hypertensive patients with and without complications at Banjarbaru Regional General Hospital; it was found that patients who had previously experienced illness tended to feel calmer because they had a better understanding of how to manage their health conditions.

Generalized Anxiety Disorder (GAD) is a psychological condition characterized by excessive feelings of anxiety in facing various situations or activities. Individuals experiencing GAD often feel anxious, restless, and tense without clear reasons, even in situations that should not cause excessive worry. These symptoms may arise before performing a specific task or activity and can disrupt their daily quality of life. According to American Psychiatric Association (2013), GAD can be a serious mental health issue as it can affect an individual's performance and social relationships if left untreated. Therefore, a proper identification and management of GAD are suggested to assist them in coping with excessive anxiety and enhancing their quality of life. GAD can be regarded as a condition that encompasses various aspects of life. According to United Kingdom Mental Health Foundation (2019), those suffering from GAD often experience symptoms such as excessive anxiety, exaggerated fear, and constant tension. They also tend to have difficult concentration, disrupted sleep patterns, tense muscles, and heightened emotional reactivity.

After engaging in the dhikr intervention, the subjects became aware that the anxiety and distress they experienced stemmed from a spiritual distance from God. They realized the importance of improving their relationship with God to experience inner peace and to reduce anxiety. Awareness of past mistakes and distance from God led them to believe that they could overcome life's challenges by believing that

God would provide any assistance. This increased their confidence and transformed them into better individuals in the future. This is also explained by Nashori (2015) that complaining to others becomes irrelevant when they face suffering. Each individual must realize that every event, including adverse conditions, is part of Allah SWT's creation. If Allah does not want it, harm will not befall us. The presence of suffering in individuals' life is a way for Allah to measure the progress of their quality of life.

Based on results of the dhikr intervention, it is evident that all subjects experienced positive changes within themselves. They reported that it consistently provided significant benefits, particularly in reducing their anxiety levels. Moreover, this therapy was able to transform the subjects' negative beliefs into positive ones. This phenomenon aligns with the teachings of the Quran in Surah Ar-Ra'd verse 28 as Allah asserts that those who believe and focus their hearts on the remembrance of Allah will experience inner peace. Thus, this therapy not only affected their physical aspect but also had a positive impact on their spiritual and psychological dimensions.

This study has several limitations; one of them was the constraint on effective interaction between the researchers and the subjects due to online monitoring, resulting in being passive in the WhatsApp group. Continuous communication during the research period was significant for the researchers to monitor the conditions and progress of their assigned tasks. There were also delays in the arrival of some subjects during the therapy implementation, leading to a few minutes' delay in conveying information to all subjects to maintain parity.

Conclusion

Based on the data analysis and discussion above, it can be concluded that dhikr relaxation is effective in reducing anxiety levels in the middle-aged hypertensive patients. Quantitatively, there was a significant decrease in anxiety scores among them who underwent the dhikr relaxation. This indicates that the material and practice of dhikr relaxation have a positive impact in alleviating anxiety symptoms such as restlessness, excessive negative thoughts, difficulty in feeling calm, heightened irritability, and worrying about potential negative outcomes.

Suggestion

Based on results of the implementation and evaluation, several aspects need to be considered to ensure smooth and optimal studies in the future. The future researchers are expected to be more proactive

in monitoring work progress and in reminding subjects to complete their assigned tasks on time, thus enabling discussions in following meetings to align better with the experiences gained. The future researchers are also advised to allocate appropriate subject numbers to ensure more effective studies. Collaboration with institutions should also be carefully considered, following the time allocation provided, so that delays in subject arrival do not disrupt the research process and lead to its inefficiency.

References

- Ahmad, F. (2022). Metode Dakwah Suluak dan Tawajuh dalam Tarekat Naqsabandiyah. *Komunida: Media Komunikasi Dan Dakwah*, 12, 138–155. <https://doi.org/10.35905/komunida.v7i2>
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.)*. <https://www.apa.org/pi/about/publications/caregivers/practice-settings/assessment/tools/geriatric-anxiety#>
- Anggraieni, N., & Subandi. (2014). Effect Of Dzikir Relaxation Therapy to Reduce Stress on Essential Hypertension Patient. *Jurnal Intervensi Psikologi*, 6(1), 81–102. <https://doi.org/https://doi.org/10.20885/intervensipsikologi.vol6.iss1.art6>
- Ayu, D. W., & Sudiman, A. (2023). Implementasi Relaksasi Dzikir terhadap Tingkat Kecemasan pada Lansia Dengan Hopertensi Di Desa Sukasari Kaler Tahun 2021. *Jurnal Kesehatan*, 9(1), 57–64. <https://jurnal.akperypib.ac.id/index.php/medisina/article/view/45>
- Budikayanti, A., Larasari, A., Malik, K., Syeban, Z., Indrawati, L. A., & Octaviana, F. (2019). Screening of Generalized Anxiety Disorder in Patients with Epilepsy: Using a Valid and Reliable Indonesian Version of Generalized Anxiety Disorder-7 (GAD-7). *Neurology Research International*, Article ID 5902610. <https://doi.org/10.1155/2019/5902610>
- Fitrina, Y., Putri, A., & Hartuti, S. (2022). Pengaruh Relaksasi Dzikir terhadap Tingkat Kecemasan Pasien Haemodialisa. *Jurnal Kesehatan Mercusuar*, 5(1), 107–114. <https://doi.org/https://doi.org/10.36984/jkm.v5i1.285>
- Kemendes. (2019). *Hipertensi Penyakit Paling Banyak Diidap Masyarakat*. <https://www.kemkes.go.id/article/view/19051700002/hipertensi-penyakit-paling-banyak-diidap-masyarakat.html>
- Kemendes RI. (2016). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 25 Tahun 2016 Tentang Rencana Aksi Nasional Kesehatan Lanjut Usia Tahun 2016-2019*. Kemendes RI. http://hukor.kemkes.go.id/uploads/produk_hukum/PMK_No._25_ttg_Rencana_Aksi_Nasional_Kesehatan_Lanjut_Usia_Tahun_2016-2019_.pdf
- Kemendes RI. (2018). *Riset Kesehatan Dasar. Badan Peneliti dan Pengembangan kementerian Kesehatan RI*. https://kesmas.kemkes.go.id/assets/upload/dir_519d41d8cd98f00/files/Hasil-risikesdas-2018_1274.pdf
- Kumala, O. D., Kusprayogi, Y., & Nashori, F. (2017). Efektivitas Pelatihan Dzikir dalam Meningkatkan Ketenangan Jiwa pada Lansia Penderita Hipertensi. *Psychathic: Jurnal Ilmiah Psikologi*, 4(1), 55–66. <https://doi.org/10.15575/psy.v4i1.1260>
- Laka, O. K., Widodo, D., & Rahayu, W. (2018). Hubungan Hipertensi dengan Tingkat Kecemasan Pada Lansia Di Posyandu Lansia Desa Banjarejo Kecamatan Ngantang Malang. *Nursing News*, 3(1), 22–32. <https://doi.org/https://doi.org/10.33366/nn.v3i1.749>

- Nashori, F. (2015). Hubungan Antara Kualitas dan Intesitas Dzikir dengan Kelapangadaan Mahasiswa. *Millah: Journal of Religious Studies*, 5(1), 121–135. <https://doi.org/https://doi.org/10.20885/millah.vol5.iss1.art9>
- Nashori, F., Diana, R., & Hidayat, B. (2019). The Trends in Islamic Psychology in Indonesia. In Ralph W. Hood Jr & Sariya Cheruvallil-Contractor (eds.), *Research in The Social Scientific Study of Religion* (Vol. 30). Koninklijke Brill NV, Leiden. https://doi.org/https://doi.org/10.1163/9789004416987_010
- Nugroho, S., Leybina, A. V., Muliadi, R., Listyani, N., & Lubis, L. T. (2023). Al-Quran and Dhikr: Are They Effective to Overcome Anxiety Caused by Covid-19 as A Pandemic Condition? *Jurnal Psikologi Islam*, 9(1). <https://doi.org/https://doi.org/10.19109/psikis.v9i1.16634>
- P2PTM Kemenkes RI. (2018). *Hipertensi, The Silent Killer*. Retrieved from Kementerian Kesehatan Republik Indonesia. <https://p2ptm.kemkes.go.id/infographic-p2ptm/hipertensi-penyakit-jantung-dan-pembuluh-darah/hipertensi-the-silent-killer>
- Patimah, I., Suryani, S. & Nuraeni, A. (2015). Pengaruh Relaksasi Dzikir terhadap Tingkat Kecemasan Pasien Gagal Ginjal Kronis yang Menjalani Hemodialisa. *Padjadjaran Nursing Journal*, 3(1), 18–24. <https://doi.org/https://doi.org/10.24198/jkp.v3i1.95>
- Perwitaningrum, C. Y., Prabandari, Y. S., & Sulistyarini, I. (2016). Pengaruh Terapi Relaksasi Zikir terhadap Penurunan Tingkat Kecemasan pada Penderita Dispepsia: Effect of Dhikr Relaxation Therapy to Reduce Anxiety Levels in Dyspepsia Patients. *Jurnal Intervensi Psikologi*, 8(2), 147–164. <https://doi.org/https://doi.org/10.20885/intervensipsikologi.vol8.iss2.art1>
- Riska, A., & Raharjo, B. (2015). Faktor Risiko Yang Berhubungan Dengan Kejadian Hipertensi Usia Produktif (25-54 Tahun). *Unnes Journal of Public Health*, 4(4), 146–158. <https://doi.org/10.15294/ujph.v4i4.9690>
- Safitri, S., Nashori, F., & Sulistyarini, I. (2017). Efektivitas relaksasi zikir untuk menurunkan tingkat stres pada Penderita Diabetes Melitus Tipe II. *Jurnal Intervensi Psikologi*, 9(1), 1–15. <https://doi.org/https://doi.org/10.20885/intervensipsikologi.vol9.iss1.art1>
- Saifuddin, A. (2019). *Penelitian Eksperimen Dalam Psikologi*. Prenadamedia Group.
- Spitzer, R. L., Kroenke, K., Williams, J. B. W., & Löwe, B. (2006). A Brief Measure for Assessing Generalized Anxiety Disorder The GAD-7. *Reprinted Arch Intern Med*, 166, 1092–1097. <http://archinte.jamanetwork.com/>
- Susanto, S. E., & Wibowo, T. H. (2022). Effectiveness of Giving Deep Relaxation to Reduce Pain in Hypertension Patients in Edelweis Room Down, Kardinah Tegal Hospital. *Jurnal Inovasi Penelitian*, 3(4), 5841-5845. <https://doi.org/https://doi.org/10.47492/jip.v3i6.1961>
- Syamsuar, G. (2020). *Modul Workshop Statistika (EKM235): Analisis Data Non-Parametrik*. STIE Indonesia Jakarta.
- United Kingdom Mental Health Foundation. (2019). *Anxiety*. www.mentalhealth.org.uk/a-to-z/a/anxiety
- Widianengsih, R. (2022). Hadits tentang Dzikir Perspektif Tasawuf. *Jurnal Penelitian Ilmu Ushuluddin*, 2(1), 166–179. <https://doi.org/10.15575/jpiu.13583>
- World Health Organization. (2017). *Depression and Other Common Mental Disorders Global Health Estimates*. <https://apps.who.int/iris/bitstream/handle/10665/254610/WHO-MSD-MER-2017.2-eng.pdf>.