

The Application of Dhikr Spiritual Therapy to Reduce Signs of Risk of Violent Behavior in the Mawar Room at dr. Radjiman Wediodiningrat Hospital

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Abstract:

The risk of violent behavior is a condition when an individual will endanger the safety of himself, others, family, community, because of his aggressive behavior. Spiritual dhikr therapy is a therapy that can help reduce signs and symptoms of the risk of violent behavior because when patients listen to reading the Al-Qur'an it can reduce stress hormones, increase feelings of relaxation and divert attention from fear, anxiety and tension. This study aims to apply how to apply spiritual dhikr killing treatment therapy in patients at risk of violent behavior. The method employed is through a case study research design using 5 nursing processes. The patients accept the implementation of nursing strategies to control violent behavior using physical, drug, verbal and spiritual means. Interventions for clients with a risk of violent behavior are adjusted to violent behavior implementation strategies (SP) and then receive additional non-pharmacological therapy in the form of spiritual dhikr therapy at each meeting. Spiritual dhikr therapy is carried out for 10 consecutive days, each meeting consisting of 5 sessions with reading tahlil, tasbeeh, tahmid, takbir, istighfar. Each session reads the dhikr sentence 33 times within 5 minutes. Before giving dhikr, spiritual therapy there were 9 signs of violent behavior, whereas after giving therapy for 10 days there was a decrease to 2 signs of violent behavior. Spiritual dhikr therapy can reduce signs and symptoms of violent behavior because dhikr can purify the heart and soul, be grateful for what Allah has given, make the body healthy, and prevent oneself from the dangers of lust. Nursing strategies (controlling violent behavior physically, drugs, verbally and spiritually and spiritual dhikr intervention can effectively reduce signs of violent behavior. This can reduce stress hormones, increase feelings of relaxation and distraction of fear, anxiety.

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INTRODUCTION

Violent behavior is one of the symptoms of mental disorders, which can trigger physical danger to the patient or others, accompanied by uncontrolled emotional outbursts (Siregar et al., 2020). Violent behavior is characterized by the appearance of several symptoms such as the patient often speaking rudely in a high-pitched voice, bulging eyes with a very sharp gaze, flushed face, muscles appearing tense, likes to argue, forcing one's will and even carrying out physical violence such as injuring oneself and others. others (Malfasari et al., 2020).

An estimated 450 million individuals worldwide experience mental and behavioral illnesses, with one in four experiencing such a disorder at some point in their lifetime (Kayiteshonga et al., 2022). People with mental disorders in Indonesia are recorded to be increasing. This increase was

revealed by the increase in the prevalence of households experiencing people with mental disorders (OGDJ) in Indonesia. In data obtained from Riskesdas (2018), there are data on 50 million patients with schizophrenia, an estimated 45% of whom suffer from violent behavior. Meanwhile, in 2018, the prevalence of schizophrenia reached 15% of the Indonesian population; around 220 million people were diagnosed with schizophrenia and/or 1.8 per 1000, and 60% of the population consisted of patients with violent behavior (Riskesdas, 2018).

The risk of violent behavior is a condition when an individual will endanger the safety of themselves, others, family, and the community because of their aggressive behavior. Aggressiveness is destructive behavior that significantly impacts individuals, families, and communities. Violent behavior can arise due to disruption of brain structure and function (Fanning et al., 2019).

Treatment that can be done to overcome symptoms of violent behavior is by providing nursing care through violent behavior management, which aims to help patients control feelings of anger and encourage patients to be able to express their anger to others without using violence (Lestari, 2022). One of the implementation strategies taught is spiritual remembrance therapy. Spiritual therapy is a therapy that is carried out by getting closer to the beliefs one adheres to. The purpose of Dhikr is to purify the heart and soul, be grateful for what Allah has given, make the body healthy, and prevent oneself from the dangers of lust (Indrianingsih, 2023).

STUDY DESIGN

Research design

The research design takes the form of a sturdy caser. A strong caser is a leader who is directly and focused on events in an intensive and detailed manner (Urifatin, 2022). The goal of a sturdy caser is to organize a very straight plane into a structure or a number of more spherical things (Nurrdin and Hartati, 2019). Based on this matter, the writer used Caser Sturdy (Sturdy mattress) to understand the proper implementation of spiritual care for dhikr in Mrs. The risk of violent behavior in the rose room of RSJ Dr. Radjiman Werdiadinigrat Lawang.

Setting and samples

This research was carried out in the rose room of RSJ Dr. Radjiman Werdiadinigrat Lawang. This research was carried out from Saturday, March 12, 2024, to Saturday, March 23, 2024. The research was carried out by building mutual trust relationships, conducting assessments, making diagnoses, preparing interviews, implementing, and evaluating. Determining clients as research subjects was based on inclusion and exclusion criteria. Inclusion Criteria: 1.) Clients with problems of risk of violent behavior in the IPCUr space. 2) Clients are willing to become responders. Exclusion criteria: 1). Clients who cannot speak, hear, or see. 2) Clients suffer from physical disturbances that disrupt daily activities.

Measurement and Data Collection

The instrument used in this research is an evaluation of the signs and symptoms of violent behavior towards clients. Client data collection was obtained from primary data, which was obtained directly from the client through interviews with Mrs. A as a respondent. Secondary data is obtained from client medical record data. The first research carried out was to provide an explanation to the patient regarding the meaning, direction, benefits, and intervention procedures for administering spiritual dhikr in various ways to reduce signs of symptoms of violent behavior. The researcher requests approval from the client to comply with the research by reading and

signing the information sheet, as well as proof of availability and guaranteeing the confidentiality of the data obtained.

Data Analysis

In this scientific work, the writer uses a descriptive analysis methodology. This scientific work uses a systematic nursing process by collecting data through observation, interviews, and secondary data from medical records. The results are documented and presented, and then, previous research and theories appropriate to the topics studied in this research are discussed.

PATIENT INFORMATION

From the results of the research that was carried out, the client's identity data was obtained, namely Mrs. When the investigation was carried out, the client stated that he was taken to RSJ Radjiman Werdiadinigrat Lawang, accompanied by his former nurse, who had forgotten to take no medication. When in a room, clients are more silent and do not want to interact with other friends. Clients often keep to themselves. Kliern is an urgent care patient hospitalized 6 times at RSJ Radjiman Werdiadinigrat Lawang. Kliern said the fight was brutal and noticed blue streaks above the eyes and legs. The client does not resist when carrying out violent behavior by his servant. Still, the client vents his emotions by destroying the environment around him by slamming chairs and plates toward the bottom. Verifying the data from the client's medical record based on information from the family, the patient's client was in urgent care 3 days before being admitted to the hospital, unable to sleep, screaming, talking and laughing to himself, crying, throwing chairs and plates. When 2 days before entering the hospital, the client bought items that were not needed but were not used and were dressed excessively.

THERAPEUTIC INTERVENTION

The risk of violent behavior is the risk of violent behavior prevention (I.14544). The final planning is based on implementation strategies (SP) 1 to 4, namely how to control violent behavior with physical exercise (take deep breaths and hit the mattress pillow), medicine (6 correct), verbal (expressing, asking, and refusing correctly), spiritual (worship and pray). Then further planning involves organized group activities (TAK) with perception stimuli. The treatment planning with the spiritual practice of dhikr is given for 10 consecutive days in 5 sessions each day, namely by reading the following readings 33 times, namely tahlil reading, tasbih reading, tahmid reading, takbir reading, istighfar reading. Each session was 33 times and lasted 5 minutes each session.

RESULT

The results obtained before the implementation of treatment with the risk of violent behavior are signs of violent behavior towards clients, namely threatening, speaking harshly, hurting oneself or others, destroying the environment, glaring, sharp looks, clenched hands, clenched jaw, stiff body posture. Meanwhile, after being given treatment implementation using implementation strategies and administering dhikr spiritual therapy for 10 consecutive days, the result was that the client was able to apply the exercises in controlling the work behavior that had been taught regularly and the signs of behavioral symptoms decreased after dhikr spiritual therapy was carried out with signs of symptoms. What appears decreases to 2, namely clenched hands and sharp gaze.

DISCUSSION

According to research by Amalia (2023), apart from medical therapy that can be carried out to overcome aggressive behavior which has the risk of harming oneself, other people and the environment, general therapy can be carried out in the form of nursing care for patients with risk of violent behavior in Berne implementation strategy turk. Treatment strategies (SP) 1-4 are related to the risk of violent behavior in order to reduce signs of violent behavior symptoms, as well as the practice of dhikr which is one of the non-pharmacological therapies that can influence the patient's ability to control deviant behavior. The spiritual therapy of dhikr using the method of praying and praying can be given to both mild and severe mental disorders, with the presence of relief from spiritual sadness, the soul improves the person's soul and makes them feel at ease, at peace, thereby bringing a positive influence on patients at risk of violent behavior (Triyani et al, 2019).

Dhikr spiritual therapy is reading Al-Quran readings such as tahlil, tasbih, tahmid, takbir, istighfar, which can reduce stress hormones and make you feel relaxed and prevent feelings of anxiety and fear (Muhaimin et al., 2023). Dhikr spiritual therapy is a religious approach adopted by clients that tends to touch the client's spiritual side (Waluyo et al., 2022). Dhikr, by remembering Allah, can calm the heart and focus the mind so that when the client reads prayer and dhikr, he will surrender all the problems he is experiencing to Allah so that the burden of stress he is experiencing can lighten his mind (Nurhidayah et al., 2022).

Researchers assume that the application of dhikr spiritual therapy is effective in reducing signs of violent behavior experienced by clients, which initially contained 9 signs of symptoms with the result of threatening, speaking harshly, injuring themselves or others, destroying the environment, glaring, sharp gazes, clenched hands, clenched jaws, Stiff body posture and after being given this therapy decreased to 2 symptoms with the result of clenched hands and sharp gaze. This can be effective because after being given spiritual dhikr therapy, the client said he was calmer and felt better than before. At first, feelings of irritation and feelings of wanting to be angry sometimes appeared, but after giving this therapy the client was able to get rid of the feelings of irritation and feelings of wanting to be angry.

CONCLUSION

This scientific work shows that providing dzikir spiritual therapy can reduce signs of risk of violent behavior because when patients listen to the reading of the Koran, it can reduce stress hormones, increase feelings of relaxation, and divert attention from fear and anxiety. Apart from that, the application of dhikr spiritual therapy can improve individual coping and increase self-confidence in socializing and compliance with taking medication as recommended by doctors.

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