

ISSN 2354-8428
e-ISSN 2598-8727

JURNAL KEPERAWATAN

KOMPREHENSIF

COMPREHENSIVE NURSING JOURNAL

Published by :

**Sekolah Tinggi Ilmu Keperawatan
PPNI Jawa Barat**

Vol. 9 No. 2, April 2023



JURNAL KEPERAWATAN KOMPREHENSIF	VOL. 9	NO. 2	Bandung April 2023	ISSN 2354-8428	e-ISSN 2598-8727
------------------------------------	--------	-------	--------------------------	-------------------	---------------------



Research Article

Combination of Deep Breathing and Listening to Al-Qur'an Recitations for Violent Behaviour Risk Among Psychosis Patients

Desmaniarti Z.^{1*} | Sukarni Sukarni² | Anah Sasmita³

^{1,2,3}Department of Nursing
Poltekkes Ministry of
Health Bandung, West Java,
Indonesia

***contact**

desmaniarti@gmail.com

Received : 30/05/2023

Revised : 11/06/2023

Accepted : 11/06/2023

Online : 30/04/2023

Published : 30/04/2023

Abstract

Aims: Deep breathing relaxation therapy and listening to al-Qur'an recitation audio through a supportive group are part of a prevention program that can calm and relax physical and mental tensions. This study aims to analyze the effect of deep breathing relaxation on signs and symptoms of risk of violent behavior in mental disorders patients.

Method: The research design used in this study is an experimental study with a pre-posttest control group design approach. The population for this research is post-hospitalized patients who experience the risk of violent behavior. The total sample is 30 people for the treatment group and 30 for the control group. Data collection using a questionnaire about risk signs of violent behavior consists of 30 items that refer to physical, emotional, cognitive, social, and spiritual aspects. The collected data were processed and analyzed using Wilcoxon and Mann-Whitney tests.

Result: The results showed an increase in the average value of decreased signs and symptoms of violent behavior risk of 28.57 in the treatment group and 24.96 in the control group.

Conclusion: There is the influence of deep breathing relaxation and listening to audio murottal al Qur'an: through a supportive group in reducing risk signs of violent behavior in people with a mental disorder in the working area of the Babakan Sari Health Center, Bandung City, both in the intervention group and the control group.

Keywords:

Al qurán recitation, deep breathing relaxation, violent behavior

INTRODUCTION

The results of the Basic Health Research shows that the prevalence of severe mental disorders in Indonesia has increased significantly from 1.7 per mile in 2013 to 7 per mile in 2018 (1). In West Java, as many as 11,360 residents suffered from severe mental disorders in 2017 and increased to 16,714 sufferers in 2018. This illustrates the increasing number of people with mental disorders in Indonesia, including West Java (2,3). People with mental disorders, hereinafter abbreviated as people with mental disorder, are people who experience disturbed thoughts, feelings

and behaviors which are manifested in the form of a set of symptoms and/or changes in behavior that are significant and can cause suffering and obstacles in carrying out their functions as humans (4).

In general, people with mental disorder are taken to a mental hospital because their family is no longer able to handle it at home due to the violent behavior that can harm themselves, others and the environment. However, after being treated at the hospital and allowed to go home, the client is faced with various stressors at home. Because they lack the ability to control anger, patients are still at risk for violent behavior.

To prevent this, people with mental disorder should be equipped with the ability to control violent behavior, so they can control anger.

Handling people with mental disorder, risk of violent behavior consists of three aspects, namely prevention, anticipation and restraint programs (5). Religious therapy; Listening to the Qur'an murotal and deep breathing relaxation are part of the prevention program. Deep breathing relaxation techniques not only have a calming effect on the body but also calm the mind. Therefore, deep breathing relaxation techniques can help improve the ability to concentrate, depression, self-control and reduce emotions (6). The results of Sumirta's research (2013) say that deep breathing relaxation can reduce the level of anger control in clients with violent behavior with p value = 0.000.

Al-Qur'an therapy is effective in reducing the risk of violent behavior it can be done in several ways such as reading and listening to murotal al-Qur'an (7). Reading Al-Qur'an can be used as a spiritual healing technique, because it contains verses that are efficacious and can heal the human soul. This is based on the word of Allah in the Qur'an Surah Al Isra' which means "And we sent down the Al-Qur'an as an antidote and a mercy for those who believe. On the other hand listening to murotal Al Qur'an is an effective distraction that can reduce stress hormones, activate natural endorphins, increase feelings of relaxation and distract from fear, anxiety and tension to create calm and emotional control (8). Listening to murotal Qur'an audio and deep breathing relaxation in this study were carried out in groups consisting of 3-5 people with mental disorders with a history of violent behavior (through supportive therapy).

Supportive therapy is psychotherapy aimed at patients both individually and in groups. Supportive therapy is carried out in groups with the initial goal of providing support and completing the experiences of each member (9). Group psychotherapy is a

group of individuals who join for a therapeutic purpose, which is assisted by a leader, interaction within the group is used as a tool to clarify, motivate or change behavior (10).

Supportive therapy in this study aims to provide support for people with mental disorder so they are able to identify problems and improve their ability to control angry emotions. Therapy is carried out with openness, empathy, developing a positive attitude and supporting the abilities of people with mental disorder and providing positive reinforcement by prioritizing equality and the stages of therapeutic communication. For this reason, the therapist is required to have the ability to convey material in a language that is easily understood by all group members.

The results of Surtiningrum's research on supportive therapy for social isolation clients at the Semarang mental hospital on 31 social isolation clients showed a significant increase in cognitive, affective and psychomotor abilities (9). While the results of Saputri's research (2015) said that therapy listening to murotal Al-Quran in 55 patients at risk of violent behavior at Amin Gondohutomo mental hospital, Central Java, it was found that there was a change in the ability to control the emotions of patients at risk of violent behavior significantly after listening to murotal Al-Qur'an. P = 0.001. (11)

Based on the description above, the researcher feels the need to conduct research on the provision of therapy for listening to murotal Al-Qur'an audio and breathing relaxation using a supportive therapeutic approach to people with mental disorder at risk of violent behavior.

METHODS

The research design is a quasi-experiment with a pre-post test control group design approach. The aim of the study was to analyze the effect of deep breathing relaxation and murotal audio of the Qur'an through supportive therapy on signs and

symptoms of risk of violent behavior in people with mental disorders.

The sampling technique used is purposive sampling with inclusion criteria for people with mental disorders after being hospitalized, have a history of violent behavior, aged 18-45 years, are Muslim, have a good orientation towards people, place and time, can work together, read and write and received antipsychotic treatment.

The number of samples is 30 people for each group, namely the treatment group and the control group. Data is collected using a questionnaire about risk signs of violent behavior made by researchers refers to Clay (2019), consists of 30 statement items covering physical, emotional, cognitive, social and spiritual aspects, with validity coefficients ranging from 0.397 – 0.7. 53 and the reliability coefficient is 0.717.

The data collection technique starts from identifying respondents according to the criteria, then explains the purpose and benefits of the research, and completes informed consent, followed by pre-test. The therapeutic therapy program was carried out in 4 sessions. Each session lasts about 30-45 minutes, in a groups of 2-3 people with mental disorders in the working area of the Babakan Sari Health Center, Bandung City. Therapy was carried out for 12 days with a distance of 3 days per session.

In the treatment group, the subjects performed deep breathing relaxation with deep breath relaxation audio guides and listened to the audio murotal Al-Quran that ended with supportive group therapy by means of discussion and sharing in small groups about the things that they felt during the exercise led by the researcher. After all of the subjects did the therapy process, a post-test was carried out.

The control group was asked to do deep breathing relaxation with a leaflet guide, which was carried out for 12 days independently.

The audio murotal of the Qur'an used in this study is the audio murotal of Al Fatihah

which was recorded by Ustadz Hanan Attaki. Based on the results of the expert, it was stated that the murotal audio of the Qur'an, Al Fatihah has special features in its delivery, especially in the aspects of breath, compatibility of style and appreciation, pitch, the tone in the melody of the chant is delivered in a very reasonable speed. While the deep breath relaxation audio was made by researchers and has received expert approval.

Univariate data analysis using the mean, standard deviation and minimum – maximum values was conducted before and after treatment. To determine whether deep breathing relaxation therapy and listening to audio murotal Al Qur'an through a supportive group for people with mental disorders is good or not, a cut-off is performed using the mean value. So that if the score is equal to and above mean then it is declared good (low risk of violent behavior) and vice versa if the score under value mean its is concluded not good (high risk of violent behavior).

Whereas bivariate analysis was carried out to test the difference in the mean (average) variable of the ability to overcome violent behavior before and after giving the intervention in the control and treatment groups. Based on test results, normality using Shapiro Wilk showed that the pre-test significance level for the control group was $0.88 > 0.05$ means that the data is normally distributed. As for the post-test results the p value is $0.000 < 0.05$ indicates the data is not normally distributed, while for the intervention group the pre-test results are p-value $0.602 > 0.05$ meaning the data is normally distributed and the post-test results are p-value $0.000 < 0.05$ indicates the data is not normally distributed. Because the results of the normality test indicated that not all data normally distributed. The analysis was performed using non-parametric statistics namely; the Wilcoxon test to determine the mean difference within each group and the Mann Whitney test to determine the mean difference in the two groups.

RESULTS

The results of the study of deep breathing relaxation and audio murotal Al-Qurán in reducing signs of risk of violent behavior in people with mental disorders in the Babakan Sari Health Center work area, Bandung City, can be seen in the following table:

Tabel 1. Average Score Signs of Risk Symptoms of Violent Behavior on people with mental disorders Before and After the Intervention in the Intervention Group (n = 30)

Variable	Intervention	Mean	SD	Minimum-maximum	P value
Signs and symptoms of risk of violent behavior (Treatment Ex)	Before	112.37	7,559	93-120	0.00
	After	83.80	15,365	42-111	

Based on table 1, it can be seen that there was a decrease in the symptom score for the risk of violent behavior by 28.57 in the intervention group.

Tabel 2. Average Score Signs of Risk Symptoms of Violent Behavior on people with mental disorders Before and After the Intervention in the Control Group (n = 30)

Variable	Intervention	Mean	SD	Minimum-maximum	P value
Signs and symptoms of risk of violent behavior	Before	108.90	7.55	74-119	0.241
	After	83,93	15.97	52.00-149.00	

Based on table 2, it can be seen that there was a decrease in the symptom score for the risk of violent behavior by 24.97 in the control group.

Tabel 3. Difference Average Score Signs of Risk Symptoms of Violent Behavior on people with mental disorders Before and After the Intervention in the Control Group (n = 110)

Group	Mean	SD	P value
Intervention	108.90	9,312	0.039
Control	112.37	7,559	

Based on table 3, it can be seen that between the intervention group and the control group, there was a significant decrease in signs and symptoms of the risk of violent behavior.

DISCUSSION

Based on table 1, it can be seen that there was a decrease in the risk of symptom score for violent behavior by 28.57 in the intervention group with a p value of 0.00.

Which means that deep breathing relaxation and listening to murotal al-qurán audio through supportive group therapy are effective in reducing signs of risk of violent behaviors. As well as in the control group there is a decrease in the score of symptoms of risk of violent behavior by 24.96 with a p value of 0.24. This is in line with the research conducted by Yuhanda Dea et al. (2016) that shows deep breathing relaxation therapy and laughter are effective in controlling violent behavior in

violent behavior patients at Mental Hospital. Dr. Amino Gondohutomo Semarang with p value 0,000 (12). As Handoyo said, deep breathing relaxation techniques not only have a calming effect physically but also calm the mind. Therefore some deep breathing relaxation techniques can also help improve the ability to concentrate, self-control, reduce emotions and depression (6). This is also proved by the results of research conducted by Sutinah et al (2019) that proved deep breathing relaxation techniques affect the ability to control anger in schizophrenic clients with a p value of 0,000 (13).

In addition to deep breathing relaxation, spiritual therapy by listening to the holy verses of the Qur'an also effectively affects the ability to control the emotions of patients at risk of violent behavior with a p value of 0.000, as revealed by Saputri Laela Dwi et al (2015). Al-Qur'an murotal listening therapy is one way for someone to do dhikr to the Almighty (11). Dhikr is a form of individual effort to remember God the creator who controls everything including the ability to control emotions with God's help to gain peace, as mentioned in the Qur'an letter Ar Rad verse 28 which means "only by remembering Allah the heart becomes calm". All the letters contained in the Qur'an when listened to can calm the human heart, but of all the existing letters there is one letter which is the book's origin, namely the letter Al Fatihah as the main letter of the Qur'an and is the first letter in the Qur'an (an). In addition, Kaheel also said that reading Surah Al Fatihah repeatedly up to seven times will have an effect on healing. This is based on the fact that the human body consists of cells, cells consist of atoms that have seven levels regularly, while the letter al-Fatihah also consists of seven verses that are very perfect between words and letters which contain the number of letters of the word Allah (Alif, Lam and Alif. ha) totals 49 (7 x 7) so it is called as-sab'ul matsani (seven verses that are repeated), therefore if this surah al fatihah is read or listened to

seven times, there will be harmony in the human body system. make listening to murotal al-qurán recitation: Al Fatihah surah can cure disease, calm one's heart so that it can control angry feelings (14).is one of psychotherapy in optimizing the client's (people with mental disorder) ability to control the risk of violent behavior, where through the supportive group the client can share experiences in overcoming problems related to violent behavior, besides that through the supportive group the client can be motivated to do positive things to control the emotion of anger, as stated by Wituk et al, 2000 (in Chien et al, 2006) that supportive groups are intended to reduce family burden and increase social support (15). This is supported by the results of research by Avianti et al (2020) that there is the effect of supportive group therapy assertive to ability Schizophrenia patient resolve violent behavior in RSJ West Java Province (16). The results of Mutiara's research (2017) showed that supportive therapy could help the subject (Schizophrenic couple) improve their ability to manage emotions (17), while the results of the study (Falentina and Yulianti, 2012) showed that there was a significant correlation between assertiveness and expression of angry emotions in adolescents. This study was also supported by Khamida's research (2013) which showed that giving assertive supportive group therapy had an effect on the emotional behavior of schizophrenia patients with a p value of 0.045 (18). Whereas according to Saraswati's research (2019) the experimental group showed a significant increase in optimism scores compared to the control group that did not receive supportive group therapy (19). Relaxing deep breaths and listening to audio murotal Al-Qurán which is carried out in combination through this supportive group can increase feelings of relaxation and calm so that it is easier for ODGJ to be able to control their emotions, namely the risk of violent behavior. The implementation of supportive group

therapy can also be a means for people with mental disorder to share experiences and catharsis with each other on the problems they face related to violent behavior. There was no difference in effectiveness between the intervention group and the control group. Possibly due to the fact that in the control group, the subjects were given guidance on deep breathing relaxation which could be used at any time, besides that when they were hospitalized, the subject had been taught and guided to do deep breathing relaxation to overcome violent behavioral risks.

CONCLUSION

There is an effect of deep breathing relaxation and listening to audio murotal al qur'an: Al Fatihah through a supportive group in the treatment group for people with mental disorder the risk of violent behavior in the work area of the Babakan Sari Public Health Center, Bandung City.

REFERENCES

1. Basic Health Research (Riskesdas). (2018). Indonesian Ministry of Health Research and Development Agency in 2018. http://www.depkes.go.id/resources/download/infoterkini/materi_rakorpop_resources/download/infoterkini/materi_rakorpop_2018.
2. Keliat, BA et.all. *Mental Nursing Care*. Jakarta: EGC. 2019
3. Ministry of Health. 2016, The Role of Families in Supporting Community Mental Health. <http://www.depkes.go.id>
4. Law no 18 concerning Mental Health, 2014. <https://www.ipkindonesia.or.id/media/2017/12/uu-no-18-th-2014-ttg-kesehatan-jiwa.pdf>
5. Videbeck, Sheila, *Psychiatric Mental Health Nursing*. Seven Edition. Philadelphia : Wolters Kluwer; 2017.
6. Handoyo, *A Practical Application Guide by Breath 2*. Jakarta: Elex Media Komputindo. 2005.
7. Zainudin R, Rahmiyanti Hashari, The Effectiveness of Murotal Therapy on Independence Controls auditory hallucinations. *Muhammadiyah Nursing Journal Special Edition*. 2019.
8. Hershorn, Michael. *Alleviate Your Anger, Tips for Adolescent Emotional Control*. Jakarta: PT Bhuana Popular Science. 2003
9. Wijayaningsih, Kartika. *Complete Guide to Mental Nursing Clinical Practice*. Jakarta : Trans Media Info. 2015.
10. Townsend, Mary C. *Essentials of Psychiatric Mental Health nursing, Concepts of Care In Evidence-Based Practice*. Ninth Edition. FA Davis. 2017
11. Saputri Laela Dewi. The Effect of Spiritual Therapy Listening to the Verses of the Holy Qur'an Against Ability to Control Patient's Emotions Risk of Violent Behavior at Dr. Amino Psychiatric Hospital. Gondo Hutomo, Central Java Province. 2015
12. Yuhanda Dea, Dwi Heppy Rochmawati, Eko Purnomo. Effectiveness of Breath Relaxation Therapy Deep and laughing in controlling Violent Behavior In Violent Behavior Patients at RSJD Dr Amino Gondo Hutomo Semarang. *Health journal Ocean Science*. 2016.
13. Sutinah, Safitri Rika, Saswati Nofrida,. Deep Breathing Relaxation Techniques Affect The Ability to Control Anger in Schizophrenic Patients. *Journal Of Healthcare Technology and Medicine* 2019 Vol 5 no. 1. e-ISSN: 2615-109x.
14. Al Kaheel Abdul Daim. 2012. Recitation of the Qur'an for Healing. Islamic Boarding School Library, Yogyakarta
15. Chien et al 2006
16. Nani Avianti, Desmanianti Z. Gurid PE Mulyo, The Effect of giving Anthocyanin and Assertive Supportive Therapy on the ability to overcome violence behaviors of Schizophrenia patients. *Sapporo Medical Journal Volume 54, Issue 07, July, 2020*.
17. Mutiara, The application of supportive therapy to improve the management of

- individual negative emotions the lentina Ola F and Yulianti A. Assertiveness on the expression of angry emotions. Faculty of Psychology UIN Sultan Syarif Kasim Riau. *Journal of Psychology*. June 2012; Volumes 8 Number 1. Page: 9-14.
18. Khamida, Assertive Supportive Group Therapy Lowers Violent Behavior Value of Patients Schizophrenia Based on the King Interaction Model. *Scientific Journal of Health*. 2013; Vol 6 No 2.
19. Saraswati, Dias Salma., Pranbandari, Suryo Yayi., Sulistyarini, Indahria Rr. The Effect of Therapy Supportive Group to Increase Optimism in Patients with Chronic Renal Failure Undergoing Hemodialysis. *Journal of Interventional Psychology*. 2019; Vol 11 No 1.