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Article

The Effectiveness of Psychological Dhikr Therapy in Improving the Quality of Life of Cancer Patients Undergoing Chemotherapy

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Abstract: Introduction: Cancer is a chronic disease with increasing prevalence globally, including Indonesia, and has a significant impact on patients' quality of life, encompassing physical, emotional and spiritual aspects. By 2022 according to GLOBOCAN, there will be 242,988 cancer deaths in Indonesia, with lung cancer (34,339) being the leading cause, followed by liver, breast, cervical and colorectal cancers. Side effects such as fatigue, pain, anxiety and depression add to the patient's burden, especially during chemotherapy. **Objective:** This study aims to analyze the effectiveness of dhikr therapy in improving the quality of life of cancer patients during chemotherapy. **Methods:** The study used a quasi-experimental approach with a one-group pre-post test design. The sample consisted of 37 adult cancer patients undergoing chemotherapy at Sembiring General Hospital, selected by purposive sampling technique. Dhikr intervention was conducted for 4 weeks, with data collected using the WHOQOL-BREF questionnaire to measure quality of life, as well as dhikr activity logs. Data analysis used paired t-test to evaluate changes before and after the intervention. **Results:** This study showed a significant improvement in patients' quality of life after dhikr therapy. The mean change score reached -9.184 with a standard deviation of 4.373, and a p-value of 0.000 ($p < 0.05$), indicating that this difference was statistically significant. **Conclusion:** Dhikr therapy is effective in improving the quality of life of cancer patients, especially in the physical, emotional, and spiritual dimensions.

Keywords: Dhikr therapy; quality of life; cancer; chemotherapy; psychospiritual

1. Introduction

Pendahuluan

Cancer is one of the most significant chronic diseases globally, both in terms of prevalence and impact on patients' quality of life. Cancer patients undergoing chemotherapy often face complex physical, psychological and social challenges, which directly affect their quality of life. [1]. Quality of life (QoL) includes not only aspects of physical health, but also emotional and social well-being, which are often overlooked in clinical care. [2]. Therefore, evaluation of QoL is an important component in the management of cancer patients, especially to understand the subjective morbidity experienced by patients.

Chemotherapy as one of the main methods in cancer treatment has a major impact on patients' QoL. Side effects such as fatigue, nausea, vomiting, and sensory disturbances can interfere with patients' daily activities, social interactions, and emotional well-being [3]. Chemotherapy often brings

up psychological disorders, such as anxiety and depression, which further worsen the patient's emotional state [4,5]. This suggests the need for an intervention approach that not only targets the physical aspects, but also supports the psychological and spiritual dimensions of the patient during therapy.

Psychological therapies and psychospiritual approaches have been shown to be effective in improving the emotional well-being and quality of life of patients with chronic diseases, including cancer [6,7]. One form of psychospiritual therapy that has attracted attention is dhikr, a religious practice in Islam that involves remembering and glorifying God. Dhikr not only provides a relaxing impact, but also assists in emotional regulation and cognitive restructuring of patients, thereby reducing stress levels and anxiety [8,9].

The mechanism of action of dhikr as a psychological therapy involves several aspects. Firstly, dhikr can create a calm mood through regulating the rhythm of breathing and focusing on spirituality [10]. Secondly, dhikr contributes to the formation of positive emotions such as calmness and confidence, which can neutralize negative emotions [8]. Third, the physiological effects of dhikr, such as reduced blood pressure and cortisol levels, support the management of physical and psychological symptoms [11,12].

Studies on the effectiveness of dhikr in the context of cancer patients, especially those undergoing chemotherapy, are limited. Previous research suggests that spiritual approaches can improve patients' ability to cope with their illness, but its implementation in clinical scenarios still needs to be further explored [1,5]. This creates a relevant research gap, which examines the role of dhikr as a psychospiritual therapy in improving the QoL of cancer patients undergoing chemotherapy.

This study has important academic and practical contributions. From an academic perspective, this study provides new empirical evidence regarding the effect of dhikr on the QoL of cancer patients. From a practical perspective, the results of this study can serve as a basis for the development of spiritual-based interventions in the care of cancer patients. As such, this study is expected to provide a more comprehensive understanding of how psychospiritual approaches such as dhikr can be integrated into cancer management.

2. Methods

This study used a quasi-experimental approach with a one-group pre-posttest design. The purpose of the study was to analyze the effectiveness of dhikr therapy in improving the quality of life of cancer patients undergoing chemotherapy. The research population leads to elderly people aged 42-67 years who undergo chemotherapy at Sembiring General Hospital. The sampling technique used was purposive sampling. The number of respondents in this study were 37 people.

The research instruments included a dhikr activity log to record the consistency and duration of dhikr practice. The dhikr intervention was carried out for 4 weeks and a WHOQOL-BREF questionnaire containing 26 to assess quality of life, with the choice of very bad = 1, bad = 2, ordinary = 3, good = 4, very good = 5. Data were collected before and after the intervention through pretest and posttest, then analyzed using SPSS with paired t-test to compare changes before and after the intervention was given to the control group. Descriptive analysis was also conducted to describe the demographic characteristics of the patients.

3. Results and Discussion

3.1. Results

3.1.1. Description of Respondent Characteristics

This study involved 37 cancer patients undergoing chemotherapy at RSU Sembiring Deli Tua, Deli Serdang Regency in 2023. The characteristics of respondents based on demographic data are as follows:

Based on Table 1, the majority of respondents in this study were male, which included 56.8%. Based on age, the majority of respondents were in the range of 52-67 years, which amounted to 75.6%. The duration of chemotherapy undergone by respondents varied, with the majority of 45.9% of respondents undergoing chemotherapy for three months and the minority for six months (2.7%). In terms of education level, the majority of respondents had a high school educational background with a proportion of 37.8% and a minority of 27.0% had the last education level at the elementary level.

Table 1. Characteristics of Respondents at Sembiring Deli Tua Hospital, Deli Serdang Regency in 2023.

No	Variable	Frequency (N)	Presentase (%)
1.	Gender		
	Male	21	56.8
	Female	16	43.2
	Total	37	100.0
2.	Age (Years)		
	42-51	9	24.3
	52-67	28	75.6
	Total	37	100.0
3.	Length of Chemotherapy		
	3 Months	17	45.9
	4 Months	15	40.5
	5 Months	4	10.8
	6 Months	1	2.7
	Total	37	100.0
4.	Education		
	Senior High School	14	37.8
	Junior High School	13	35.1
	Elementary School	10	27.0
	Total	37	100.0

3.1.2. Univariat Analysis

Quality of Life Before and After Dhikr Therapy

Based on Table 2, the distribution of quality of life scores before being given dhikr therapy shows significant variations. Most respondents had scores in the 80-90 range with the highest frequency at a score of 80 (18.9%). The average quality of life before the intervention was in the moderate category. After being given dhikr therapy, there was an increase in the distribution of quality of life scores. Respondents with a score of 95 (13.5%) and other high scores (97-99) showed a significant increase compared to the score before the intervention.

Table 2. Distribution Based on Quality of Life Category Before and After Given Dhikr Therapy at Sembiring Deli Tua Hospital, Deli Serdang Regency, 2023.

Pre-Test Quality of Life	F	%	Pre-Test Quality of Life	F	%
70	1	2.7	100	1	2.7
80	7	18.9	88	2	5.4
82	5	13.5	89	4	10.8
83	2	5.4	90	6	16.2
85	5	13.5	92	2	5.4
86	3	8.1	93	2	5.4
87	5	13.5	94	2	5.4

89	5	13.5	95	5	13.5
90	2	5.4	96	3	8.1
92	2	5.4	97	4	10.8
Total	37	100.0	Total	37	100.0

3.1.3. Normality Test

Based on Table 3, the normality test using Shapiro-Wilk showed normal data distribution in both variables, with a p-value of 0.017 for pre-test quality of life and 0.016 for post-test ($p < 0.05$).

Table 3. Normality Test.

	Shapiro Wilk			Conclusion
	Statistics	Df	Sig.	
Pre-test quality of life	0.926	37	0.017	Normal
Post-test quality of life	0.925	37	0.016	Normal

3.1.4. Bivariate Test

Based on Table 4, the results of bivariate analysis using paired t-test showed a significant difference in the quality of life of patients before and after being given dhikr therapy. The average difference in quality of life scores reached -9.184, with a standard deviation of 4.373, indicating a consistent change between the sample groups.

Table 4. The Effect of Dhikr Therapy on Improving Quality of Life in Cancer Patients Undergoing Chemotherapy at Sembiring Deli Tua Hospital, Deli Serdang Regency, 2023.

	Paired Sample T-Test				
	Mean	S.D	OR (Odd Ratio)	Df	P-Value
Quality of Life Results					
Pre-Test Quality of Life	-9.18421	4.37348	(-10.62174) – (-7.74668)	37	0.000
Post-Test					

The p-value obtained was 0.000 ($p < 0.05$), confirming that this difference was statistically significant. These findings suggest that dhikr therapy has a significant positive effect on improving the quality of life of cancer patients undergoing chemotherapy. These results reinforce the role of dhikr therapy as a complementary intervention in supporting patients' recovery process

3.2. Discussion

In this study, it was found that the average score of quality of life increased significantly after being given dhikr therapy with a score of 95 (13.5%) and other high scores (97-99) showed a significant increase compared to the score before the intervention. This is consistent with the findings of Sulistyawati and Setiyarini's research which shows that dhikr is effective in reducing anxiety and improving emotional well-being in cancer patients [8].

There is an effect of dhikr therapy intervention on the quality of life of patients with a p-value obtained of 0.000 ($p < 0.05$), confirming that this difference is statistically significant. These findings indicate that dhikr therapy has a significant positive effect on improving the quality of life of cancer patients undergoing chemotherapy. This is in accordance with the research of Ahmed et al, the quality of life of cancer patients is often affected by the negative impact of chemotherapy, which involves physical symptoms such as fatigue, nausea, vomiting, to psychological impacts such as anxiety and depression [2,13]. Patients undergoing chemotherapy face great challenges in

maintaining quality of life, as the side effects of this therapy often affect their ability to carry out normal daily activities.

Dhikr, as a psychospiritual approach, has a unique mechanism that combines physiological relaxation and spiritual focus. This approach helps individuals to achieve peace of mind and increase gratitude, thereby creating emotional balance. Subhi and Habibi highlighted that the practice of dhikr, which is part of Sufism's values, connects individuals with deep spirituality, creating a sense of peace and self-acceptance. This study also reflects the results of Lavdaniti who stated that relaxation techniques, including spiritual meditation practices, are effective in reducing psychological symptoms such as anxiety and depression in cancer patients [9,14].

The spiritual dimension is often an important source of support in dealing with chronic illnesses such as cancer. Research has found that spiritual well-being has a positive association with reduced levels of depression and improved quality of life in patients with chronic illnesses [5]. In this context, this study is in line with those studies, showing that dhikr helps cancer patients develop a sense of gratitude and meaning in life, which is crucial in dealing with the emotional challenges caused by their illness [7]. Other studies also support these findings, emphasizing the importance of spirituality in helping patients overcome their fear of death and increase their life expectancy [1].

This study makes a significant contribution to the management of cancer patients, particularly in the context of Muslim culture. Dhikr, as a widely recognized Islamic practice in Muslim societies, offers a culturally relevant approach to improving patients' quality of life. This is in line with the findings that confirmed that spiritual values-based approaches are more accepted by the Muslim population as it is in line with their beliefs [9]. Other studies have also found that Muslim patients expect spiritual elements to be part of their medical care, so interventions such as dhikr are not only accepted but also expected [15].

The results of this study indicate the potential of dhikr therapy to be integrated into rehabilitation programs for cancer patients. As proposed by Rajaei et al. (2016), psychospiritual therapies such as dhikr can help reduce the emotional distress of cancer patients, complementing standard medical care. This study also reinforces the findings of other studies showing that spiritual meaning-based therapies can significantly improve the quality of life of cancer patients, especially in the emotional and social aspect [16].

From a practical perspective, this study provides a great opportunity for hospitals and cancer clinics to integrate dhikr therapy into the rehabilitation program for cancer patients. Apart from being a simple and economical intervention method, dhikr can be trained to patients through special sessions by trained health workers. This can improve patients' ability to manage the negative impact of chemotherapy independently. Training programs for health workers can also be developed to make them more competent in providing dhikr therapy. For non-Muslim patients, this therapy can be customized with other relevant spiritual approaches, thus creating an inclusive rehabilitation protocol.

While this study shows promising results, there are some limitations that need to be noted. Firstly, the 4-week duration of the intervention may not have captured the long-term impact of dhikr therapy on patients' quality of life. Longitudinal studies are needed to evaluate the effects of this therapy over a longer period of time [17]. Secondly, this study did not explore the influence of demographic factors such as age, gender, and education level on dhikr therapy response. Research suggests that these factors may influence patients' experience of treatment and their quality of life [18]. Therefore, future research is recommended to explore the relationship between demographic variables and the effectiveness of dhikr therapy.

Third, this study was conducted on a culturally and religiously homogeneous population, so generalization of the results to a wider population should be done with caution. Multicultural studies that include non-Muslim populations are needed to understand whether the effects of dhikr can translate to other spiritual practices [19]. In addition, this study can be extended by comparing the effectiveness of dhikr with other psychological interventions, such as mindfulness-based cognitive

therapy (MBCT) or cognitive-behavioral therapy (CBT), which have also been shown to be effective in improving the quality of life of cancer patients [20,21].

3.3. *Philosophy Studies*

3.3.1. Ontology

The Reality and Nature of Quality of Life This study departs from the ontological understanding that the quality of life of cancer patients not only includes the physical dimension, but also involves emotional and spiritual aspects. The essence of quality of life according to this study is the holistic experience of patients in facing the challenges of the disease, including their interaction with spiritual values such as dhikr. This perspective emphasizes that humans are not just biological entities, but also psychospiritual beings who seek meaning in their life experiences, including in suffering.

3.3.2. Epistemology

Source of Knowledge and Psychospiritual Approach This study used a quasi-experimental approach as a source of scientific knowledge to evaluate the effectiveness of dhikr. Epistemologically, this study combines empirical methods (measuring quality of life with the WHOQOL-BREF) with spiritual understanding (the meaning of dhikr in Islam). This integration reflects the view that truth can be found through a multidimensional approach, combining modern science with traditional and religious values.

3.3.3. Axiology

Value and Practical Contribution This research focuses on the utilitarian value of dhikr as a therapy that provides tangible benefits to cancer patients. The main value promoted is the improvement of patient well-being through a culturally relevant psychospiritual approach. From an axiological perspective, this study shows that spiritual practices such as dhikr have both intrinsic and instrumental value, helping patients achieve inner peace while improving their quality of life.

3.3.4. Implications of Islamic Philosophy

Dhikr as a Practice of Spiritual Awareness In Islamic philosophy, dhikr is considered a means of getting closer to God and achieving spiritual happiness. This research reflects Sufistic values, where dhikr is not only a ritual activity but also a therapeutic tool that creates harmony between the physical, mental and spiritual aspects of humans. This study shows that the Sufistic approach can be scientifically applied to face contemporary challenges, such as the quality of life of cancer patients.

4. Conclusions

This study shows that dhikr therapy significantly improves the quality of life of cancer patients undergoing chemotherapy, including physical, emotional and spiritual dimensions. As a psychospiritual intervention, dhikr effectively reduces anxiety, increases gratitude, and provides emotional calmness, is culturally relevant for Muslim patients, and has the potential to be integrated into cancer rehabilitation programs. For wider implementation, training of health workers, further studies of longer duration, exploration of demographic factors, comparison with other therapies, and development of multicultural protocols are needed. Patient and family education is also important to increase acceptance of this therapy.

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